

# American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

## Tennessee Chapter

### The Inside Story

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### TNAAP Project Highlight

#### Moving Forward: A Letter from Eddie Hamilton, M.D.

It has been an honor to serve as your chapter president for the past two years. While we have certainly accomplished a great deal, there is so much more to do. I leave the chapter office in the hands of a very capable and energetic president-elect, Dr. Allen Coffman from Signal Mountain, TN. Dr. Coffman and I have worked very well together. While our own practices are distinctly different, our goals are very much the same. We view the chapter as an advocacy body for both our patients and our physician members. Dr. Coffman and the TNAAP team are well positioned to propel our chapter forward. I hope that you will welcome Dr. Coffman and give him the same support that you have afforded me.

My role now changes as I take the helm as chair of our Legislative Committee. It is my belief that we cannot lead if we are not willing to take a position and defend it. Tennessee has been a leader in the area of health care reform since the implementation of TennCare. That program was not greeted warmly, but under the direction of our past governor, Phil Bredesen, and our current TennCare Director, Darin Gordon, we were able to continue to provide a safety net for Tennessee's children during the worst economic period in our country since the Great Depression, relatively unscathed.

Now we are faced with the continuing implementation of the Patient Protection and Affordable Care Act (ACA) during what will prove to be a critical national election year. The American Academy of Pediatrics has been instrumental in crafting some of the language and provisions of the ACA and as result all of our patients can be covered by their parents' insurance until age 26, and all of our patients now have well care using Bright Futures guidelines as the standard of care. We can and should be proud of our accomplishments.

While our attention is diverted to the national stage, the states are actually the central arena for health reform and the stakes are very high. State discussions and action deserve our concentrated attention and now is the time for creative coalition building. Each state will have the opportunity to work collaboratively with the federal government, businesses, insurance companies, providers and a host of other stakeholders in crafting the final product that ensures that all of our children have access to affordable and quality health care using the medical home model.

I hope that you will join me in this effort to keep Tennessee on the leading edge of health care reform. The future generations of pediatricians are counting on us.

Thank you for allowing me to serve as your president for a little while.

Eddie

#### Our Mission

The Tennessee Chapter of the American Academy of Pediatrics is a statewide professional membership and child advocacy organization comprised of pediatricians and pediatric sub-specialists in Tennessee dedicated to the health, safety, and well-being of infants, children, adolescents and young adults. For 50 years, TNAAP has been a respected advocate for children, providing an effective forum to address pediatric health care issues in Tennessee.

#### Board of Directors

*President:* R. Allen Coffman, Jr., M.D.

*Vice President:* Michelle Fiscus, M.D.

*Secretary-Treasurer:* Scott Brice, M.D.

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#### *Local Pediatric Society Representatives:*

Keith B. Owen, M.D.

William H. Woods, Jr., M.D.

*Membership Chair:* Jon Boroughs, M.D.

*Nominating Chair:* Pending

*Chair, Council of Past Presidents:* Eddie Hamilton, M.D.

## Foundation Highlight

2011 was a solid success for the Foundation and we're looking forward to furthering our mission in 2012. Many of our followers and supporters made end of year donations in support of our Fitness Fund for the HEALED program. Thank you! For those who might have missed the "Success in 2011!" blast, here's a quick look at a few of our success stories:

- We launched [HEALED](#), a project to impact childhood obesity in Tennessee by providing a training curriculum for primary care providers and staff that will lead to a change in provider behavior and subsequent changes in patient behavior.
- We finalized data collection and intervention for [Project PACT](#) (Parents Actively Controlling Tobacco) and look forward to publishing results in the summer of 2012.
- Despite funding cuts in TennCare, we continued the [Early Periodic Screening, Diagnosis and Treatment \(EPSDT\) and Coding Education](#) program, providing awareness and education regarding age-specific recommendations, appropriate coding and documentation, and helping practices maximize compensation for services provided.

As we prepare for our January board meeting, we are taking our successes and challenges into consideration for planning the top priority issues for grants and programs. We're also planning to build upon the knowledge and experience of our leadership by expanding our board of directors. Specifically, we're seeking persons interested in fundraising, marketing, and community outreach. We invite anyone interested in serving the Foundation to [send an inquiry](#) to our Development Director.

## Coding Update

The 2012 CPT Coding Updates were effective January 1, 2012. A list of changes of most interest to pediatricians can be found on our [website](#).

One of the changes for 2012 is the revision to CPT code 96110. The descriptor for code 96110 has changed from developmental "testing" to developmental "screening" and includes a revision to clarify that the service is reported per interpretation and report of each standardized instrument form.

**▲96110** Developmental screening, with interpretation and report, per standardized instrument form.

**▲96111** Developmental testing (includes assessment of motor, language, social, adaptive, and/or cognitive functioning by standardized developmental instruments) with interpretation and report.

The Centers for Medicare and Medicaid Services (CMS) modified the active status of code 96110 and did not include relative value units (RVUs) in the 2012 Medicare RBRVS Physician Fee Schedule based on the change in the description of the code from "testing" to "screening". Medicare does not routinely pay for screening services.

After an open comment period, at the request of Medicaid and other stakeholders, CMS issued an informational bulletin on December 29<sup>th</sup>, 2011, stating they will publish RVUs for 96110 and the payment rate will be based on 0.28 total Relative Value Units. Please [click here](#) to read the bulletin in its entirety.

Providers should continue to report 96110 for developmental/behavioral screening and monitor payer activity to ensure proper payment for 96110.

For more information contact Janet Smith, TNAAP Coding Educator, at 615-672-1355 or [janet.smith@tnaap.org](mailto:janet.smith@tnaap.org).

## Upcoming TNAAP Learning Opportunities

### START Lunch & Learn Program

TNAAP START Program (Open to Public) at *UT Knoxville School of Nursing - January 18, 2012. 12:00 Noon - 3:00pm*. For more information or to register, please contact TNAAP Coordinator, Training Programs: [email](mailto:email) Deborah O. Usry or call 615-376-4829.

### ICD-9 and CPT Changes Review Workshop

TNAAP will be conducting free Regional Workshops reviewing ICD-9 and CPT changes for 2012 beginning in January. The first session will be held in *Memphis on January 20, 2012*. Click [here](#) to register or for more information, please [email](mailto:email) Janet Smith or call 615-672-1355.

### TNAAP Staff

*Executive Director:* Ruth E. Allen

*Development Director:* Shannon K. Hornsby

*Financial Manager:* Melissa S. Koffman

*Coding Educator:* Janet Smith, RHIT, CPC

*Coordinator, Training Programs:* Deborah O. Usry

*Event Coordinator:* Laurel S. Davis

## Noteworthy News

### Changes to the Reportable Diseases and Events Matrix

The annual review and update of the Tennessee reportable disease list has been completed. The reportable disease [website](#), now including extensive information about each of the reportable diseases and events, has also been updated. Important changes and reminders for reportable diseases and events in 2012 include the following:

- Powassan virus infection, an emerging tickborne disease, was added to the list
- CD4+ T-cell and HIV-1 Viral Load results are to be reported within 7 days by laboratories performing these tests
- Dialysis Events and Catherer Associated Urinary Tract Infections were added to NHSN reporting
- Deletions to the list include Gonorrhea-PID and Chlamydia trachomatic-PID
- To facilitate electronic laboratory reporting (ELR) a column was added to thematrix listing the pathogen name
- Outbreaks of any type are reportable

### Vaccine Safety Network Survey Reminder

We would like to ask you to complete a brief survey regarding the potential development of a free service for providers to have questions regarding vaccine safety answered by trained individuals and experts quickly and efficiently. Your individual responses will be kept confidential and the survey results will only be reported in aggregate form. If you have any questions please contact Elizabeth Williams MD at 615-322-88344 or [elizabeth.williams@vanderbilt.edu](mailto:elizabeth.williams@vanderbilt.edu).

You may open the survey in your web browser by clicking the link below: [Vaccine Safety Advice Network Provider Feasibility Survey](#)

If the link above does not work, try copying the link below into your web browser: <https://redcap.vanderbilt.edu/surveys/?s=7gyjx4>

## Donate to the [Tennessee Pediatric Society Foundation](#)

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