



Florida Medical Advisory Committee for Health Care Transition
January 8, 2011, at Tampa Airport Marriott, 10 AM – 3 PM (EST)
Meeting Minutes

Attendees:

David Wood, MD, MPH, UF-Jacksonville, JaxHATS, Committee Chair
John Reiss, PhD, Institute for Child Health Policy at UF, Gainesville
Phyllis J. Sloyer, RN, PhD, Children's Medical Services (CMS)
Linda Edwards, MD, UF-Jacksonville/JaxHATS
Danny Plasencia, MD, St. Joseph's Children's Hospital, Tampa
Lynn Ringenberg, MD
John McCormick, MD, USF Med Peds
Diane Straub, MD, MPH, USF Adolescent Medicine
Bruce Schnapf, DO, USF Department of Pediatrics
Henry Rodriguez, MD, USF Diabetes Center
Jim Burns, MD, Sacred Heart Hospital, Pensacola
Rex Northup, MD, Sacred Heart Hospital, Pensacola
Paul Baroco, MD, Sacred Heart Hospital, Pensacola
Veenod Chulani, MD Arnold Palmer Hospital, Orlando
Lisa Cosgrove, Florida Pediatric Society (FPS)
Allison Finley, FPS/Florida Medical Association (FMA)
Janet Hess, MPH, CHES, USF, FloridaHATS Project Director
Dawn Smith, USF, FloridaHATS Administrative Assistant

Teleconference:

Susan Redmon, RN, MPH, CMS
Loretta Jordan, MD, MPH, Sickle Cell Services, Memorial Regional Hospital, Ft. Lauderdale
Maria Ferris, MD, UNC, Chapel Hill

Call to Order

Dr. Wood called the meeting to order at 10:15 AM (EST).

Discussion

Dr. Wood and Ms. Hess reviewed agenda items and a FloridaHATS PowerPoint presentation, including Florida's Strategic Plan for Health Care Transition and program activities to-date. Dr. Wood asked attendees for their feedback on how the MAC can support the state Strategic Plan. Listed below are items identified by the group:

1. Develop new data sources for health care transition (e.g., state level survey that includes young adults); existing state and national data from the *National Survey for Children with Special Health Care Needs* is limited to youth ages 12-17.
2. Develop resolution for partnership between FPS, FMA, and Florida Chapters of American College of Physicians (ACP) and American Academy of Family Physicians (AAFP).

Action: Dr. Cosgrove and Ms. Finley will present resolution to FMA in July 2011.

3. Focus on medical education and training.
 - a. Review and recommend existing medical educational/training materials:
 - Identify clinical care guidelines (e.g., NIH currently establishing primary care guidelines for Sickle Cell Disease)
Action: Dr. Jordan will forward NIH Sickle Cell guidelines to the group.
 - Include a “For Providers” section in web site; organize/post guidelines on site.
Action: Form a committee to review guidelines, how to post on web site.
 - b. Develop materials for medical students, residents, other students.
 - Target Undergraduate Medical Education (UME), Graduate Medical Education (GME), students in Doctor of Nursing Practice (DNP) programs, students in Physician Assistant (PA) programs
 - Adapt HCT curricula for each of the above groups
 - For UME, target 3rd year clerkship
 - For GME, target internal medicine, pediatrics and family medicine
 - Promote adoption and dissemination of materials throughout state
 - FMA has a committee comprised of Deans of Florida medical residency programs; send via these Deans to all Florida medical education institutions
 - c. Explore development of HCT MOC (Maintenance of Certification) to be used for Pediatrics, Internal Medicine, and Med-Peds.
 - Find out whether Carl Cooley/National Health Care Transition Center is developing an MOC activity
Action: Dr. Sloyer will ask Dr. Cooley about HCT MOC.
 - Contact Quality Improvement Network (QINN) about supporting an HCT MOC activity.
Action: Lisa Cosgrove will check with the AAP QINN about this.
 - d. Add health care transition content to certification/recertification Board exams.
 - Internal Medicine, Family Medicine, Pediatrics, Med Peds, ARNPs, DNPs, PAs
 - Board exam content drives medical education curricula and resident training.
 - e. Other educational strategies:
 - Identify “HCT champions” around the state.
 - Encourage champions to conduct Grand Rounds; present at seminars, conferences
 - Post HCT PP presentation or recording on AAP and/or FMA web site.
Action: Ms. Hess will follow up with Lisa Cosgrove on potential material.
Action: Ms. Hess, Dr. Wood will post materials used to date for Grand Rounds.
4. Focus on systems of care.
 - a. Evaluate pilot community-based coalitions/systems of care:
 - Identify challenges/lessons learned across the 3 pilot sites
 - Identify state- level and/or systemic issues that require policy change
Action: Ms. Hess will assess pilot coalitions during spring 2011.
 - b. Incorporate HCT into chronic disease management
 - c. Facilitate self-advocacy among emerging adults (e.g., look to Developmental Disabilities and mental health fields, consumer-driven care)
 - Utilize appropriate technology in communicating with youth/young adults
 - Develop self-management skills, improve health literacy, and encourage self-determination
 - Work with public school systems

- d. Include Federally Qualified Health Centers (FQHCs) in systems development
 - FQHCs are required to serve Medicaid, uninsured, undocumented citizens
 - They provide primary care, mental health and OB/GYN
 - Trend is that groups of FQHCs are forming networks that provide their own health plans (e.g., competing with private plans, etc.)

Action: Dr. Sloyer/Ms. Hess will extend invitation to Andrew Behrman, President of FL Association of Community Health Centers to join the MAC.
 - e. Identify policy changes regarding co-management reimbursement, patient caps, etc.
 - f. Engage Internists:
 - Clinical care is less of an issue than case management; providers and consumers need tools to assist them in adult medical home.
 - Promote Patient Centered Medical Home Model adapted for HCT to IM.
 - g. Each region in Florida needs an HCT center of excellence as a resource and to provide consultation for community medical homes (e.g., JaxHATS or telemedicine). Planning for these centers is outlined in the 2011 legislation.
 - h. Educate/engage hospitals, managed care plans, health insurance companies

Action: Dr. Sloyer will provide contact for Florida Association of Health Plans.
5. Organize Web site so that it's useful for both providers and consumers
- a. Add "For Providers" section
 - b. Refine and adopt validated/standardized transition assessment or checklist
 - Consider whether parent is present when completing questionnaire
 - Consider AAP's Bright Futures guidelines
 - o Tie identified needs to local resources
 - Develop transition program that allows practices to use a check list and based on the responses to the checklist provides educational materials and local resources specific for the needs of the individual checklist results
 - Review USF Medical Home electronic templates, HIV checklists
 - CMS is currently converting its transition assessment module to electronic format

Action: Dr. Wood and Ms. Hess will explore how the MAC can work with CMS to modify its transition assessment in a new electronic system.
 - c. Collect stories from consumers and providers to use in advocacy efforts.

Action: MAC members should solicit stories and forward them to Ms. Hess.
6. Secure support for 2011 legislation.
- a. For the short-term, need to support as private citizens rather than through CMS (DOH/Governor's office will be reviewing the bill in the near future)
 - b. Identify House sponsor (Representatives can only sponsor 6 bills) and secure support from other legislators; Senator Wise from Jacksonville will be the Senate sponsor.

Action: Dr. Wood will contact Rep. Mike Weinstein;
Dr. Edwards will contact Rep. Renuart;
Dr. Cosgrove will contact Rep. Tobia;
Dr. Northup will ask Sen. Gaetz for his support.
 - c. Secure support from FPS, FMA, Florida Hospital Association, advocacy groups (Down Syndrome, etc)

Action: Dr. Cosgrove will ask the FPS and FMA to support the bill; Drs. Northup and Plasencia will approach the Florida Association of Children's Hospitals.
 - d. Dr. Sloyer suggested we strengthen the bill by borrowing language from the Florida Autism Task Force Report (e.g., identify similar content areas).

Action: Dr. Wood and Ms. Hess will revise bill language.

- e. Ms. Redmon suggested that the MAC collaborate with FDCC in Tallahassee on Disability Awareness Day; consumers can visit legislators.

The group further identified 3 priority issues for the MAC in the short-term: medical education, 2011 legislation, and reorganizing the web site. Two subcommittees were formed:

1. *Medical Education & Training*: John Reiss, Paul Baroco, Jim Burns, Lynn Ringenberg, Diane Straub, Bruce Schnapf, Vinny Chulani
2. *Legislation & Advocacy*: David Wood, Linda Edwards, Lisa Cosgrove, Allison Finley, Rex Northup, Danny Plasencia, and Janet Hess

Action: Ms. Hess will restructure the web site and add an MAC section that includes pages for each subcommittee. Subcommittee members can send materials to Ms. Hess for posting. FloridaHATS staff will assist subcommittees in scheduling and documenting teleconferences.

Dr. Cosgrove suggested that the MAC meet again in conjunction with the spring FMA meeting on Saturday, May 21, at the Don Cesar in St. Petersburg. Ms. Hess will work with Ms. Finley in arranging the conference room, and FloridaHATS will assist with MAC member travel expenses.

Action: MAC members should reserve May 21 for the meeting; Ms. Hess will send out more information as May approaches.

Dr. Wood adjourned the meeting at 2:40 PM (EST). Ms. Hess will forward meeting minutes and post on www.FloridaHATS.org.