



Family Medicine

October 2009

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New York Family Practice

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Winter Weekend - January 28 - 31, 2010

High Peaks Resort, Lake Placid, NY

Winter Weekend is the most encompassing and comprehensive education program sponsored by the Academy. More than 30 lectures focus on Family Medicine, Sports Medicine, and Policy. In addition to the lectures, the conference offers four SAM workshops, two practice improvements, research forum, and hands-on procedure workshops. More than 40 exhibitors are expected to participate.

[Click here to Register](#)

A Call to Action to Increase Breastfeeding in New York State

Dear Colleagues:

I call on all healthcare providers to join the New York State Department of Health (Department) and the New York Statewide Breastfeeding Coalition, Greater New York Hospital Association, Healthcare Association of New York State, New York State WIC Association, American Academy of Pediatrics, American Academy of Family Physicians, American College of Obstetricians and Gynecologists, Medical Society of the State of New York, Association of Perinatal Networks of New York, Inc. and other stakeholders to promote and support breastfeeding by enhancing awareness, reducing barriers, and improving knowledge and skills to increase initiation, duration and exclusivity of breastfeeding.

The benefits of breastfeeding are well established. Breastfeeding promotes overall health, growth and development and helps prevent infections during infancy, as well as asthma, obesity, diabetes and other chronic diseases in childhood and later in life. Breastfeeding also benefits the mother, reducing postpartum bleeding and reducing the risk of breast and ovarian cancers, and yields economic benefits to the family and society.

Breastfeeding (exclusive breastfeeding during the first six months of life and continued breastfeeding during the second six months) is the recommended feeding method for optimal infant growth and development. In New York State, most new mothers (70 to 80 percent) initiate breastfeeding. With optimal hospital policies, practices and support, most women can exclusively breastfeed throughout their hospital stay and with family, community and health care professional support, many women can exclusively breastfeed for the first six months postpartum. Current rates of exclusive breastfeeding in New York are approximately half of the Healthy People 2010 goals: 26 percent vs. 40 percent, respectively, at three months and 8 percent vs. 17 percent, respectively, at six months.

The Department is collaborating with the Regional Perinatal Centers and affiliated hospitals to improve their exclusive breastfeeding rates. To facilitate these improvements, information about infant feeding practices and breastfeeding rates at individual hospitals will be posted to the Department's website and included in the Maternity Information Leaflets.

I call on all New York State healthcare providers to:

- Increase their knowledge and skills to encourage and support

breastfeeding among new mothers by participating in a continuing education program such as that developed and provided through the New York City Department of Health and Mental Hygiene.

- Work with hospitals with which you are affiliated to ensure that their policies and practices are consistent with New York State's Perinatal Network regulations and that best practices associated with breastfeeding are implemented.

- Discuss with prenatal patients and new mothers the benefits of breastfeeding, emphasizing exclusive breastfeeding for the first six months of life, to give their babies the best start and protect their infants from infectious diseases, including influenza.

- Provide or refer women considering or actively breastfeeding to structured breastfeeding education and counseling programs as recommended by the United States Preventive Services Task Force. Income-eligible women can be referred to New York State's Special Supplemental Nutrition Program for Women, Infants and Children (WIC). All local WIC programs have certified lactation counselors and breastfeeding peer counselors to provide breastfeeding education and lactation support. The WIC Program now provides a more comprehensive and valuable food package to lactating women and their infants six months of age and older.

- Limit the provision of infant formula and promotional materials produced by formula companies.

- Inform pregnant women, new mothers, and their families of women's right to express milk at work and that employers must provide reasonable unpaid break time or permit an employee to use paid break time or meal time each day to express milk for her nursing child for up to three years, in accordance with Section 206-c of New York State Labor Law.

I look forward to collaborating with you to ensure that your clinical offices', hospitals', and worksites' practices and environments optimally support new mothers in successfully breastfeeding their infants. If you have any questions or would like more information, please contact the Department at: promotebreastfeeding@health.state.ny.us.

I appreciate your work in improving the health of New York's babies and their mothers.

Sincerely,

Richard F. Daines, M.D.
Commissioner of Health

Scientific Assembly Research Forum

A Call for Papers is issued for presentation at the 2010 Research Forum to be held on Saturday, January 30, 2010 in Lake Placid, NY in conjunction with the Annual Winter Weekend and Scientific Assembly of the New York State Academy of Family Physicians. Active physicians, residents and students are invited to submit abstracts for presentation. Membership in the NYSAFP is not a prerequisite for submission.

The educational objectives of the Research Forum are to promote interest in Family Medicine research, to provide an opportunity for recognition of research efforts, and to communicate both research findings and assessment of research efforts to interested colleagues.

We accept submissions that have been or will be presented elsewhere, and encourage original research as well as literature analysis and qualitative analysis. We encourage the dissemination of your original work and ideas. The Winter Weekend Research Forum is a supportive environment for oral and poster presentations.

We anticipate accepting 4 papers to be presented orally. Investigators will have 10 minutes to present their work followed by a 5-minute question period. Use of PowerPoint software is strongly encouraged. Investigators who submitted abstracts not accepted for oral presentation may be invited to participate in poster sessions to be held on Friday January 29th and Saturday January 30th. Conference tuition will be waived for accepted presenters (both poster and oral).

Completed applications should include a structured abstract of up to 350 words describing original research. Your abstract should reflect your research question, the background that led to your work, the design of your project, what you learned, and how your findings relate to practice and future research. The deadline for abstract submission is December 21, 2009. The attached application may be copied and distributed. Only electronic submissions will be accepted.

Please feel free to contact Dr. Back at backe@ellishospital.org with any questions.

Click [HERE](#) to apply.

AAFP Live! in Buffalo, NY

You can get free CME anywhere. But where can you get free CME offering the latest science presented by the leading experts on the topics relevant to you?

**AAFP Live!
Buffalo, New York
Hyatt Regency Buffalo
Saturday, March 27, 2010
7:45 a.m.-12 p.m.**

This half-day course on Diabetes and Cardiovascular Disease will give you the knowledge and skills to:

- **Confidently diagnose diabetes and cardiovascular conditions.**
- **Apply prevention/treatment guidelines.**
- **Effectively communicate the critical elements of preventive care, such as lifestyle, nutrition and exercise.**

Registration is free, but space is limited. Click [here](#) for more information or to register now.



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News from the NYS Diabetes Campaign

The Academy congratulates *Dr. Michael Lettrick*, the first Academy physician to receive NCQA Diabetes Physician Recognition through the Campaign.

The Academy and its clinical partners, HANYS, CHANYS, and NYACP, continue to recruit and assist primary healthcare providers to improve health outcomes for their patients with diabetes. **Click [here](#) to see the official press release announcing the Diabetes Clinical Improvement Network**

Led by the Institute of Family Health, represented by Dr. Neil Calman, its CEO and President, and by the NYS Health Foundation (NYSHealth), the Campaign is focusing on three

areas:

- Improving clinical care and outcomes for patients with diabetes at primary care practices
- Mobilizing communities to prevent and identify diabetes and support diabetes self-management; and
- Promoting policies that sustain comprehensive and effective care for patients with diabetes through a Diabetes Policy Center

Click [here](#) for information on how the Campaign is working with health plans.

Levels of Engagement in the Campaign

The Campaign partners have developed four levels of engagement so that providers can participate at the level for which they are ready. Resources and support are provided to physician practices by Campaign clinical hubs with the goal of increasing participants' levels of engagement. Recognition programs currently supported are: the National Committee for Quality Assurance, (NCQA) Diabetes Physician Recognition Program, Bridges To Excellence, (BTE) Diabetes Care Link program, and the American College of Physicians, Closing the Gap.

Level 1 - participate in website/listserv/webinars/ educational events

Level 2 - ABC assessment/monitor 10 patient records/complete ACP or AFP modules/begin practice improvements

Level 3 - review records for all patients with diabetes/improve practice and outcomes/request technical assistance/report outcomes/apply for PQRI/participate in community events or speakers' bureau/submit NCQA or BTE application to Hub

Level 4 - obtain recognition

One Physician's Story

Here's how Campaign participation worked for one family physician in practice by himself. After he contacted the Academy's Project Coordinator in April to say he was interested in applying for NCQA recognition for diabetes, he sampled data for a few of his patients to see whether he met the required clinical measures. He learned that he did not have documentation for eye and foot examinations in many of his patient's charts. Between April and September, he and his office staff followed up on referrals to ophthalmologists and changed office practices so that monofilament tests were

routinely done on all patients with diabetes and documented in their charts. When he re-sampled his data for his eligible patients he found that he easily met NCQA DPRP criteria for recognition.

Although the work to complete the practice improvements, the chart abstractions, and the application for recognition were very time consuming, the results proved the value of the effort. The physician was surprised to find how many of his patients had no sensation in their feet, and also learned that self-reporting by patients that they had dilated eye exams was often wrong. His application process was a success story for the Campaign.

Changes to the NCQA Diabetes Physician Recognition Program for 2009

The NCQA DPRP has been updated for 2009 in collaboration with the American Diabetes Association.

- The 2009 applications are web-based, using a secure, password-protected tool, although the 2006 workbook will still be accepted through next January.
- The name has been changed – the DPRP or Diabetes PHYSICIAN Recognition Program has been changed to the DRP or Diabetes Recognition Program to allow nurse practitioners to participate.
- The start date for patient identification and data abstraction must now be no more than 180 calendar days prior to the data collection tool submission date.
- A new HbA1c <8% measure has been included. In 2008 suggested that aggressive HbA1c management could cause patient safety issues in certain patients. Changes were made to the HEDIS Comprehensive Diabetes Care measures adding a new indicator for HbA1c <8% and adjusting the HbA1c<7% to apply new exclusions. While guidelines continue to recommend a general HbA1c goal of <7% for most adults with diabetes, they should be individualized and less stringent glycemic goals are considered appropriate for certain patients. NCQA's expert panels also emphasized that significantly lowering the HbA1c (even if not reaching the target HbA1c) provides a benefit for patients and this benefit could be recognized by adding an HbA1c<8% measure. Scoring has been adjusted to accommodate the new measure while maintaining the same total point allocation for the measures related to level of HbA1c control.

- Clinicians who have earned DRP Recognition from NCQA may opt to have NCQA submit their clinical quality data to Medicare for use in the Physician Quality Reporting Initiative (PQRI). Data for 30 eligible patients must be submitted for this option, rather than just for 25 as required for the NCQA DRP application.

See the [NCQA](#) website for more information on the new applications and scoring changes.

Useful Diabetes Links

[NYSHealth website](#)

[NCQA DRP](#)

[Bridges to Excellence Diabetes Care Link](#)

[ACP Closing the Gap: Diabetes Care](#)

Contact the Academy to participate or get more information:
janet@nysafp.org

Quality of Diabetes Care Dinner and Educational Program

The Buffalo District of the New York Chapter American College of Physicians and the P2 Collaborative of WNY, Inc.



Cordially invite you to attend the following dinner meeting and educational program:

QUALITY OF DIABETES CARE: CHALLENGES AND OPPORTUNITIES

Tuesday, October 13, 2009

6:00 p.m. – Registration • 6:30 pm – Dinner and Educational Program

Salvatore's Italian Gardens Restaurant
6461 Transit Road - Depew, New York

Speaker:

Daniel T. Stein, MD

Associate Professor of Medicine, Department of Medicine
Division of Endocrinology, Diabetes & Metabolism
Albert Einstein College of Medicine

Advance registration to attend this program is required. Please provide the information below and return as soon as possible. If you must cancel, please call the NY ACP Chapter office at 518-427-0366 or 1-800-446-9746. We look forward to seeing you on October 13, 2009.

Physician Name:

Office Address:

City:

Zip:

Office Phone:

Fax:

Email:

ACP ID#

Specialty:

TO **REGISTER**...FAX REGISTRATION FORM TO: (518) 427-1991
OR CALL 518-427-0366 or 800-446-9746, OR REGISTER ONLINE at
(<http://nysafp.informz.net/z/cjUucD9taT00NjUyODEmcD0xJnU9MCZsaT0xNzlxOTcz/index.html>)

NYACP's Buffalo District and the P2 Collaborative of WNY, Inc. would like to acknowledge and thank Merck & Co., Inc. for their support in making this dinner and educational program possible.

2009 Primary Care Update



October 31–November 2, 2009

2009 Primary Care Update
Hyatt Regency • Albuquerque, New Mexico

Pre-Conference Workshop

SAM Study Group on Diabetes
October 30th

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What's going on?

November 21, 2009: NYSAFP Board of Directors, Otesaga Hotel, Cooperstown

January 28-31, 2010: NYSAFP Winter Weekend & Scientific Assembly, High Peaks Resort, Lake Placid [REGISTER HERE](#)

March 6-7, 2010: NYSAFP Winter cluster, Crowne Plaza, Albany

March 8, 2010: NYSAFP Lobby Day, State Capitol, Albany

June 19-20, 2010: NYSAFP Congress of Delegates, Desmond Hotel, Albany

September 27-29, 2010: AAFP Congress of Delegates, Denver

September 29-October 3, 2010: AAFP Scientific Assembly, Denver

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