For epileptic seizures, seizure frequency is the primary indicator and measure on which to base treatment. Many patients are asked to maintain seizure diaries for this purpose, but evidence has shown that the self-reported data is unreliable. Due to the high-cost of video EEG monitoring in an inpatient epilepsy monitoring unit (EMU) and the unreliability of patient paper seizure diaries, there is a need for a less costly, objective, diagnostic tool to track patient seizure count and frequency. Therefore, Category III codes have been created for a diagnostic event monitoring tool that is to be worn by the patient in order to capture seizure event data.

The epilepsy event monitoring system is currently an investigational device that includes an adhesive patch connected to a sensor that will continuously detect and record ECG and 3-axis accelerometer motion data which communicates to a base station hub and then notifies a caregiver. The system is being specifically developed to address the unmet need of objective, non-invasive, discrete seizure monitoring, reporting and notification.

Category III codes were accepted at the May 2014 CPT Editorial Panel meeting for the 2016 CPT production cycle. However, due to the Category III code early release policy, these codes are effective on January 1, 2015, following the six-month implementation period which began July 1, 2014.

**I0381T** External heart rate and 3-axis accelerometer data recording up to 14 days to assess changes in heart rate and to monitor motion analysis for the purposes of diagnosing nocturnal epilepsy seizure events; includes report, scanning analysis with report, review and interpretation by a physician or other qualified health care professional.

**I0382T** review and interpretation only

(Do not report 0385T, 0386T in conjunction with 0381T, 0382T, 0383T, 0384T)

**I0383T** External heart rate and 3-axis accelerometer data recording from 15 to 30 days to assess changes in heart rate to monitor motion analysis for the purposes of diagnosing nocturnal epilepsy seizure events; includes report, scanning analysis with report, review and interpretation by a physician or other qualified health care professional.

**I0384T** review and interpretation only

(Do not report 0383T, 0384T in conjunction with 0381T, 0382T, 0385T, 03786T)

**I0385T** External heart rate and 3-axis accelerometer data recording more than 30 days to assess changes in heart rate to monitor motion analysis for the purposes of diagnosing nocturnal epilepsy seizure events; includes report, scanning analysis with report, review and interpretation by a physician or other qualified health care professional.

**I0386T** review and interpretation only

(Do not report 0385T, 0386T in conjunction with 0381T, 0382T, 0383T, 0384T)
Cleveland Clinic’s Project CARE 4 Epilepsy has now presented several free monthly educational Webinars that address epilepsy in children. The next Webinar in the monthly series from “Project CARE” will be held at noon EDT on October 2nd. Jane Timmons-Mitchell PhD will present "Teens with Epilepsy".

PROJECT CARE is designed to improve care coordination, increase social support, provide education and increase engagement for teens with epilepsy and their families. Learn more about the Cleveland Clinic Epilepsy Center online here.

The Cleveland Clinic Epilepsy Center is also proud to announce teen and parent Facebook groups. These groups can be joined by invite only. Teens can enroll in E-BEATS (Epilepsy Buddies Encouraging Advocating Telling our Stories) by contacting Jane Timmons-Mitchell, PhD. Parents can enroll in CEOS (Coping with Epilepsy Online Support) by emailing Laura Neece-Baltaro, MBA.

New Hampshire
Lessons Learned From Youth: Improving Medication Adherence and Independence

The New Hampshire Department of Health and Human Services recently convened a youth focus group regarding their experiences in health care as well as their ability to manage their own care. To ensure that youth felt comfortable sharing medication adherence and risk-taking behaviors, parents were not a part of this discussion. Following are key lessons learned:

- All youth reported relying heavily on their parents for medication adherence. One youth stated he never forgot, because his mother “was always nagging him”.

- Most of the youth utilized technology for reminders, even though they all carried cell phones. Youth reported that they did not want their peers to notice any alarms.

- One youth shared that she often forgot her afternoon medication (four out of five days during the week). She agreed to try a program that would send a text reminder (Texting4Control). Two weeks later she hadn’t forgotten her medication at all. Six months later, she continues to use this system.

The potential for improvement in self-management is promising and New Hampshire continues to share resources for youth to explore.

For additional information, please contact Elizabeth Collins or Sylvia Pelletier.
FOR CLINICIANS

Transitioning Adolescents to Adult Care Resources

According to the 2011 clinical report titled, Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home, authored by the AAP, AAFP and ACP, many adult health-care providers feel unprepared to care for younger patients with complex chronic conditions. This report stated that there are relatively few doctors in the U.S. trained in both pediatric and adult medicine. Therefore, the report called for better support of the transition to adult care. Following are additional resources that address transitional care:

- AAP Council on Children with Disabilities (Transitions Web site)
- The Challenges After Surviving a Childhood Disease: For Millions of Teens and Young Adults, Finding a Doctor to Treat Them as They Grow Up Is Hard
- Center for Health Care Transition Improvement

National Center for Medical Home Implementation: Tools and Resources for Grantees

The National Center for Medical Home Implementation (NCMHI) is your one-stop-shop for medical home implementation tools, resources, and educational opportunities. Check out the state pages for specific activities going on in your state which could assist your grant with coordinating care and connecting with community resources. Don’t forget to register for our listserv and visit our Facebook page to receive the most up to date medical home updates.

FOR PARENTS & CAREGIVERS

What is a Child Neurologist?

Supporting a Child With a Chronic Illness?

Medical Home
"Explore New Horizons" in San Diego, CA at the 2014 National Conference & Exhibition, October 11-14

The AAP National Conference & Exhibition (NCE AAP Experience) invites you to explore new horizons October 11–14 in San Diego. No matter your role in medicine, you belong at the world's largest pediatric conference.

The Section on Internal Medicine & Pediatrics (Med-Peds—SOMP) will host continuing medical education programs on Transitioning Adolescents to Adult Care.

H2090 Section on Med-Peds Program
When: Sunday, 10/12/2014, 1:00 pm - 6:00 pm
Where: Marriott Marquis, San Diego Ballroom C
Description: How Pediatricians Transition Adolescents to Adult Care: Lessons Learned in Quality Improvement and How to Get Paid

Learn to implement the AAP/AAFP/ACP algorithm to improve health care transition for adolescents. Quality improvement strategies and resources will be discussed, with a review of billing strategies to support transition payment. Included is an interactive session to develop and implement these tools in your practice.

Program Schedule:
1:00 PM Updated “Six Core Elements” for implementing the clinical report and algorithm developed by the AAP/AAFP/ACP to improve health care transition
2:00 PM Quality improvement strategies and resources used by pediatric and adult medicine practices in the DC Transition Learning Collaborative
2:45 PM Interactive Discussion: Billing Strategies for Transition Payment
3:30 PM Interactive Session: Developing Your Practice’s Transition Policy
5:00 PM Posters and Reception
**F1092 - Basics of Seizure Medicines: What General Pediatricians Need to Know Selected Short Subject.** New medicines for treating seizures are being introduced to market nearly once per year. As a result, there is a whole new set of side effects to know. There is an increasing realization of long-term side effects of older medicines, as well. Examples include bone health, reproductive health (including teratogenesis) and electrolyte abnormalities, among others. Come listen to our experts discuss what general pediatricians need to know about seizure medicines.

Faculty: Raman Sankar, MD, PhD
Saturday, October 11, 2014, 2:00 – 2:45 pm

**X2045- Shake, Rattle and Roll.**
Audience Response Case Discussion. What was that? A seizure, breath-holding spell, myoclonus, shuddering attack, migraine, tic, faint, or something else? Come learn how to sort out and identify the spells that will present in your practice, and learn what is neurological, cardiac, or even benign.

Faculty: Sucheta Joshi, MD, FAAP and Sankar Raman, MD
Sunday, October 12, 8:30 am-10 am and 2pm -3:30 pm

**F3119- One Seizure, Two Seizures: What Do I Do Now?**
Selected Short Subject. When a child presents with a first or second seizure both temperature and anxiety can be high. Do you know how to evaluate and manage the child with a first or second febrile seizure or seizure without fever? Come review the most current approach for handling a child with new-onset seizures, and review AAP guidelines.

Faculty: Courtney J. Wusthoff, MD
Monday, October 13, 2014, 3:00 pm – 3:45 pm
Tuesday, October 14, 2014, 4:00 pm – 4:45 pm
Network, Learn, & Lead by Joining the Council on Quality Improvement & Patient Safety

The Council on Quality Improvement and Patient Safety (COQIPS) was established in 2001 in response to the increasing national emphasis on quality in health care and the American Academy of Pediatrics own identification of quality improvement as a top priority. The COQIPS offers a more integrated voice for quality and enables the Academy to best support its members in providing the highest quality clinical care for children. The group is comprised of pediatricians with expertise in practice, technology, and evidence-based medicine as well as liaisons from the Agency for Healthcare Research and Quality and the National Association for Children’s Hospitals and Related Institutions. Additional information and resources on quality improvement can be found here.

The commitment to quality care is implicit in the Academy’s mission of promoting the health and well-being of all children. Over the past decade, numerous reports have highlighted the growing concern from the public, government, and purchasers about the growing gap in health care quality - the difference between current health outcomes and those thought to be achievable using best practice models and clinical practice guidelines. The Academy has enhanced its range of programs, resources, and tools, as well as its relationship with external agencies and organizations to decrease the quality gap and provide optimal health care quality to all children.

COQIPS is seeking members who are actively involved in or have interest in quality improvement and/or patient safety. Council memberships will be free to AAP members through June 2015.

To join, click here!

If you have any questions, please contact either Cathleen Guch at cguch@aap.org or Dr Laura Ferguson at LFerguson@tamhsc.edu.
Project ECHO in NM: Successful Launch

The AAP partnered with the University of New Mexico Project ECHO (Extension for Community Healthcare Outcomes) model of health care delivery and education to expand existing capacity to provide best practice care for children and youth with epilepsy (CYE) in rural and underserved areas of New Mexico as well as to monitor outcomes to ensure quality of care. Project ECHO creates partnerships between primary care providers (PCPs) in rural and underserved areas and specialty care providers at academic medical centers that allow for the sharing of new knowledge in real time.

The CYE NM launched in June 2014, and since then has held 14 clinics! Between outreach, grand rounds, and clinics, the CYE NM ECHO has engaged nearly 300 healthcare professionals. In addition to the weekly didactics based on the CYE curriculum (link to curriculum), 12 unique patient cases have been discussed among the community of learners. Initial feedback from surveys has been positive.

Interested participants can join the weekly sessions every Tuesday at 1:00 pm CT. For call-in information, click here. View past didactic sessions here.

The AAP Section on Neurology

The SONu is collaborating with the Coordinating Center on Epilepsy to develop its first visiting professorship program designed specifically to build awareness of pediatric epilepsy among residency programs. This program will offer two institutions, that don’t currently have access to epilepsy care, the opportunity to host an expert in pediatric epilepsy for two days of grand rounds, lectures, and seminars. The application will be posted in late-September.

The SONu will also be conducting a variety of educational sessions at the 2014 NCE (see page 5). For additional Section news, visit www.aap.org/sections/neurology to learn more or contact Lynn Colegrove with questions.
Introducing Coordinator’s Corner | Chat with Doris!

We now offer a weekly e-mail that enhances communication between the Coordinating Center on Epilepsy and the grantees! The e-mails are brief, and full of important information, resources, and tips.

Are the e-mails helpful?

YES  NO

Not receiving them and would like to?

YES. Sign me up!

September’s Calendar of Events

Sept 2: Project ECHO® - Child/Youth Epilepsy (CYE) TeleECHO™ Clinic
Use and Abuse of the EEG | 12pm MT, 1pm CST, 2pm EST

Sept 11-13: MetaECHO Conference | Albuquerque, New Mexico

Sept 18: MCHB CYE Project Grantee Monthly Conference Call | 10am MT, 11am CST, 12pm EST

Sept 23-24: MCHB CYE Grantee Meeting | Washington, DC

Sept 23: Project ECHO® Child/Youth Epilepsy (CYE) TeleECHO™ Clinic
When To Get Neuroimaging | 12pm MT, 1pm CST, 2pm EST

Sept 30: Project ECHO® - Child/Youth Epilepsy (CYE) TeleECHO™ Clinic
First Aid and Prevention of Complications | 12pm MT, 1pm CST, 2pm EST
FIND OUT HOW WE CAN PROVIDE TECHNICAL ASSISTANCE & RESOURCES TO YOUR TEAM!

Email us!

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