



Network of Ethnic Physician Organizations  
 California Medical Association Foundation  
*Optimal Wellness and Equality in Healthcare  
 for All Communities*

APRIL 2011 E-NEWSLETTER  
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 health of California!  
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**Network of Ethnic Physician Organizations**  
*A Project of the California Medical Association Foundation*

**REGISTER TODAY!!!**

**ETHNIC PHYSICIAN  
 LEADERSHIP SUMMIT**

*"The Challenge of Health Care Reform"*

**Saturday & Sunday,  
 September 17th-18th**

**Hilton San Jose Hotel  
 300 Almaden Boulevard  
 San Jose, CA**



**Registration Fees:**

**\$50 for Physicians & Members of a Community-Based Organization**

**\$25 for Medical Students | \$150 for Other Attendees**

*\* Limited scholarships are available for medical students for travel & hotel \**

Visit [www.ethnicphysicians.org](http://www.ethnicphysicians.org) to register and to view 2010 summit highlights and presentations.

*To be added to our NEPO Summit Updates Email list, or for more information on how to become a Supporter or to have an Exhibit Table at the Summit, please contact Anna Gutiérrez, NEPO Project Assistant at [agutierrez@thecmafoundation.org](mailto:agutierrez@thecmafoundation.org) or (916) 779-6627.*

## San Gabriel Women's Health: On Using a EHR System From Teresa Ibañez, Office Manager



We are entering our third year of implementing an EHR system. The first year was very challenging but I can now say that although we are not 100% paperless, we are quite close.

Our office workflow has improved in many ways since implementation. One of the greatest changes is that we no longer have to spend countless amount of time looking for patient charts! EHR system allowed us to free up space in our office. We actually canceled a storage unit we rented to keep all of the paper files and saved money spent on putting all older files onto scanned disks.

The system's feature's allows us to input all information needed. If we receive a call from any authorized entity requiring medical information about a patient, we have all the information at our fingertips including billing. The practitioners are able to finish all of their charting before the day is over since the system templates allows for easy charting. This also allows the billing department to send out the medical claims even faster.

Looking at EHR as a whole in our office we feel that it has made great improvements in workflow, response and all around quality of care for our patients. It has facilitated communication through documentation amongst our two offices. Our reimbursement has increased slightly mainly because most of our patients are Medi-cal and HMO, but nonetheless we can bill higher codes due to more detailed documentation by the practitioners since they are now guided by these templates set up in the program.



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Contact HITEC-LA now for free and discounted services.

Eligibility requirements apply.

To enroll in your free, no-obligation membership with HITEC-LA or learn more:

Call (888) 524-4832 | Email: [hitec-la@lacare.org](mailto:hitec-la@lacare.org) | Visit: [www.hitecla.org](http://www.hitecla.org)

*HITEC-LA is a federally-designated Regional Extension Center funded by the Office of the National Coordinator, Department of Health and Human Services, Award Number: 90RC0052/01.*

Please contact Phoua Moua at (916)779-6636 or via e-mail at [pmoua@thecmafoundation.org](mailto:pmoua@thecmafoundation.org) if you have any questions.

## ATTENTION ETHNIC PHYSICIAN ORGANIZATION LEADERS

NEPO is currently working with all three California Regional Extension Centers (REC), CALHIPSO, HITEC-LA and COREC to provide outreach information to NEPO physicians. Please help us get the information to you and your EPO faster by inviting us to your next general meeting. NEPO will introduce you and your EPO to the REC representative in your area to help you navigate EHR implementation process to get to Meaningful Use.

Please contact Anna Gutierrez at [agutierrez@thecmafoundation.org](mailto:agutierrez@thecmafoundation.org) to set-up a meeting.

## NEPO CALENDAR OF MEETINGS & EVENTS

### REGIONAL MEETINGS ON HEALTH INFORMATION TECHNOLOGY (HIT)

#### SAN DIEGO HIT INFORMATIONAL MEETING

The Council of Community Clinics  
7535 Metropolitan Drive  
San Diego, CA 92108  
Wednesday, May 18th, 2011  
5:30 p.m.—9:00p.m.  
Dinner will be provided.

#### SOUTH BAY HIT INFORMATION MEETING

Santa Clara County Medical Association  
700 Empey Way  
San Jose, CA 95128  
5:30 p.m.—9:00 p.m.  
Dinner will be provided,

*Meetings are Free, Registration is mandatory.*

For more information or to register, please contact Anna Gutierrez at 916.779.6627 or [agutierrez@thecmafoundation.org](mailto:agutierrez@thecmafoundation.org)

To submit articles or announcements, please contact: [agutierrez@thecmafoundation.org](mailto:agutierrez@thecmafoundation.org)

The CMA Foundation reserves the right to edit all contributions for clarity and length, as well as the right not to publish submitted articles, for any reason.



**California Medical Association**  
*Physicians dedicated to the health of Californians*

If you haven't looked at the CMA May [education calendar](#), now is the perfect time! Check out their new website, including their updated registration process!

#### STRATEGIES TO COLLABORATE AND SUCCEED IN HEALTH REFORM

*Seminar | May 7, 2011 | 10:00am - 02:00pm*

*Conference | May 11, 2011 | 06:00pm - 09:00pm*

*Conference | May 14, 2011 | 08:30am - 02:00pm*

The conference will provide information on the various business models that can help physicians pool their talents to effectively compete in the new health care marketplace.

#### EHR OVERVIEW

*Webinar | May 25, 2011 | 12:15pm - 01:15pm*

*Webinar | May 25, 2011 | 06:15pm - 07:15pm*

CMA's David Ford will give an introduction to electronic health records (EHR). The presentation will cover the basics of EHRs, the federal incentive programs, and meaningful use.

Please visit [CMA events](#) to view all upcoming webinars. If you have any questions, please contact the CMA Member Help Center at 800.786.4262.

## Nominate an Outstanding Colleague for the CMA Foundation Leadership Awards



The CMA Foundation is accepting nominations for the 2011 Leadership Awards, which celebrate the efforts of individuals or organizations that make a difference in the health of Californians. The Robert D. Sparks, M.D., Leadership Award, the Ethnic Physician Leadership Award, and the Adarsh S. Mahal, M.D., Access to Health Care and Disparities Award recognize the compassion and

commitment of California's health care professionals. The deadline to submit nominations is June 23.

Nomination information and packets for each award are available at the [CMA Foundation website](#) at [www.thecmafoundation.org](http://www.thecmafoundation.org).

Contact: Carol Lee, 916/779-6622 or [clee@thecmafoundation.org](mailto:clee@thecmafoundation.org).



## CalHIPSO: EHR Incentive Programs Update

*Dorian Seamster, Director of Quality Improvement, CalHIPSO*



The Center for Medicare and Medicaid Services (CMS) has announced that the system for providers to attest to Meaningful Use for Medicare EHR incentive payments will be up and running on April 18th. CalHIPSO is reviewing the CMS materials to assist providers to prepare for completing the attestation and will be participating in a webinar organized for RECs on the Medicare attestation process for MU.

Medi-Cal has delayed the start of its registration system for EHR incentive payments to summer of 2011 (most recently scheduled for April 1, 2011): this is due to challenges for the state with verifying managed care visits, among other things. This is a setback for providers who were anticipating earning the Medi-Cal incentive in May 2011 for Adoption/Implementation/Upgrade of their EHR system. However, while the delay may affect the timing of payments, it will not affect the total amount of payments to providers. Registration is now open for the Medicare EHR incentive program.

The Office of the National Coordinator (ONC) has indicated that a process for Milestone 3/ Meaningful Use verification will be available in May in Salesforce. CalHIPSO staff is tracking this closely and CalHIPSO's Local Extension Centers (LECs) have indicated their interest in seeing the system. LECs are reporting that the two biggest barriers right now for practices working to achieve MU are: not having the certified version of their EHR system upgraded yet; and the reporting systems within the EHR set up to produce the information needed to verify Meaningful Use.

Meeting the Meaningful Use requirement on Privacy and Security has been raised as a particular source of concern by LECs. To address this CalHIPSO will provide a webinar for LECs, Service Partners and Eligible Providers on what is required to meet the objective and provide links on our website to resources. Please stay tuned for more details.



Helping California Clinicians  
Successfully Transition to Electronic  
Health Record Systems



The California Health Information Partnership and Services Organization (CalHIPSO) is an independent, non-profit, vendor neutral organization founded by clinical providers, for clinical providers. CalHIPSO provides technical assistance, guidance and information on best practices to support and accelerate providers' efforts to become meaningful users of certified EHR technology.

Ph: 510-285-5723 Toll-free: 888-589-4897 [info@calhipso.org](mailto:info@calhipso.org)

Visit us online at [www.calhipso.org](http://www.calhipso.org) and click on "Join Now"



## No Shots, No School: Are your Adolescent Patients Vaccinated?

Alvin Nelson El Amin, M.D., M.P.H. Medical Director,  
Los Angeles County Department of Public Health, Immunization Program



Under a new law that takes effect July 1, 2011, to start the 2011-2012 school year, all students entering into the 7<sup>th</sup> - 12<sup>th</sup> grades will need to provide proof that they received a pertussis booster (Tdap) shot on or after their 7<sup>th</sup> birthday. For the next and future school years, only students entering into 7<sup>th</sup> grade will need proof of a Tdap booster dose to start school.

The new law protects adolescents and their families at a time of increased risk for pertussis disease. In 2010, there were more cases of pertussis reported in California than in any other year since 1947 and we continue to experience a statewide pertussis epidemic. Vaccinating adolescents is an important part of a statewide strategy for preventing cases, ending the epidemic, and protecting communities that have been disproportionately impacted by pertussis. Provisional data suggest that in 2010, 66% of pertussis cases, 80% of pertussis-related hospitalizations, and all pertussis deaths in Los Angeles County were in Hispanic/Latino individuals.

Tdap vaccination boosts immunity from the primary DTP/DTaP series, which wanes during late childhood. While adolescents typically have milder pertussis symptoms than younger children, they can have a cough for as long as 10 weeks, be hospitalized for pneumonia, miss weeks of school, and spread the disease to infants, who are at greatest risk for complications.

Vaccinate adolescent patients now to prevent disease, help them meet the school requirement, and prevent your office from being overwhelmed with vaccination visits during a back-to-school rush.

The Advisory Committee on Immunization Practices (ACIP) recommends:

- A Tdap vaccine booster dose for persons aged 11-18 years, preferably at 11-12 years of age, if the recommended DTP/DTaP vaccination series has been completed.
- A Tdap vaccine dose for children 7 through 10 years of age who did not complete the recommended DTP/DTaP vaccination series before their 7<sup>th</sup> birthday.
- No minimum interval between Tdap and prior Td doses.

To meet the school requirement, students must have received a Tdap dose on or after their 7<sup>th</sup> birthday. DTaP vaccines received before the 7<sup>th</sup> birthday, Td vaccines, and DT vaccines do not meet the school requirement.

### Start vaccinating now!

Stock up on adolescent vaccines, after you confirm storage capacity.

Use provider prompts, the California Immunization Registry (CAIR), and reminder/recall systems to reduce missed opportunities to vaccinate and recall unvaccinated patients.

Document carefully. The record must specifically read "Tdap". *Please do not document the combination option "Td/Tdap".*

If a parent/guardian is considering a non-medical exemption to the school requirement, educate him or her about the risks of pertussis.

Use the Tdap vaccination health care provider visit as a chance to provide all vaccines that are due and discuss adolescent health issues including diet, physical activity, and sexual health.

For additional guidance and resources, please visit [www.publichealth.lacounty.gov/ip/school/pertussisforschool.htm](http://www.publichealth.lacounty.gov/ip/school/pertussisforschool.htm) or [www.shotsforschool.org](http://www.shotsforschool.org).



## ADDITIONAL ROUNDTABLE DISCUSSIONS IN LOS ANGELES ON CERVICAL CANCER PREVENTION IN LATINA COMMUNITIES

In March 2011, the Cervical Cancer/HPV Project conducted two follow-up meetings to the December 9<sup>th</sup> Roundtable Discussion on Cervical Cancer Prevention in Los Angeles. The first meeting was a roundtable discussion which brought together over twenty health care professionals and representatives from Latino ethnic media to discuss current cervical cancer prevention efforts and messaging strategies to reach out to the Latino community to improve PAP screening and HPV vaccination rates. Some of the key challenges that were identified during the meeting included: Identification of women who haven't been screened ever or who haven't had a Pap test in the last 5 years; The challenge of reaching new residents with cervical cancer prevention messages; The role of alternative or traditional medicine in the Latino culture; Embarrassment/fear/fatalism and misinformation. Messaging ideas focused on increasing the awareness that the Pap test does not just identify cancer but can identify pre-cancerous changes to the cervix before it becomes cancer. An additional messaging idea was to focus on the family as a whole, not just women. Messaging would focus on husbands by encouraging them to support their wives' decision to get screened for cervical cancer. Additional messaging would focus on the entire family by encouraging them to protect their children by getting them vaccinated against HPV and other vaccine-preventable diseases.

The second meeting was a reconvening of the attendees from the December 9<sup>th</sup> meeting (representatives from public health and community-based organizations throughout Los Angeles County as well as ethnic media representatives). We provided a recap of the events and media stories that were published in January to acknowledge Cervical Health Awareness Month and also provided the group with a summary of the health care professionals' roundtable discussion. We then opened the discussion to identify specific story ideas for the Latino ethnic media in the room and possible solutions to the barriers and challenges that had been identified during all of the roundtable discussions. Some of the key ideas and solutions that were discussed during the meeting included: Using the LA County Office of Women's Health 1-800 hotline as the main resource provided to the public for information about screening and treatment; Conducting various community meetings where a physician champion can lead a discussion about cervical cancer prevention with Latina women; Getting the topic of cervical cancer prevention incorporated into a popular telenovela; Identifying a celebrity spokesperson; and working with the Office of Women's Health to create a list of resources for identifying cervical cancer survivors to interview for media stories. Notes from both of these roundtable discussions are currently up on the Cervical Cancer/HPV Project website: <http://www.thecmafoundation.org/projects/HPV/BackgroundInfo.aspx>



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