



## Is the doctor in?

*Patients are embracing telehealth.  
Are you?*

### TABLE OF CONTENTS:

Change coming to the College	2	Guidelines for severe asthma on the way	6	Connect, volunteer, contribute	10
Coming to the Annual Meeting?	3	Call for proposals	6	Practice transformation	11
The Advocacy Council's been working for you!	4	Boards are over... now what?	7	Resources for your entire practice	12
Be an Advocate for your specialty!	4	Is the doctor in?	8	And the winner is... golden!	13
		Getting started in telehealth	9	Honoring our award winners	14
				Meet your candidates for election	15



# Change is coming to the College

**"If I have seen further,  
it is by standing on the  
shoulders of giants."**

– Isaac Newton



Bryan L. Martin, DO, FAAAAI  
President, American College of  
Allergy, Asthma and Immunology

While the College president changes annually, there are a number of leaders who work behind the scenes, often for a number of years. Several well-known icons of the College team will be stepping down this year and one will serve through the end of 2017. They will be sorely missed. While there are talented members prepared to step into the void they leave, it is important to honor these giants who have allowed us to see farther and who have prepared the College for the future.

Bobby Lanier, MD, FAAAAI, will step down as Executive Medical Director (EMD) on Jan. 1, after serving in the position for eight years. He was named Distinguished Fellow in 1995, was president from 2001-2002, honored with the Distinguished Service award in 2004 and will be awarded the Gold Headed Cane this November. Dr. Lanier is truly one of the giants of the College. He has an original mind and is responsible for many now beloved College programs. He was the first EMD for the College, and as such, defined the role. He led the campaign to add "asthma" to the College name in 1989, established the Tithe-a-Talk program, the Gold Headed Cane Award and eNews in 2000, was a founder of Vision 2020, and originated the DASH campaign. After a national search, past president Michael Blaiss, MD, FAAAAI, has been selected to become the next EMD.

Donald Aaronson, MD, JD, MPH, came to the job of Director of Governmental Affairs of the Advocacy Council from the Joint Council of Allergy, Asthma and Immunology (JCAAI). He was College president from 1988-1989, named a Distinguished Fellow in 1990, honored with the Distinguished Service award in 2006 and the Gold Headed Cane award in 2008. Dr. Aaronson has dedicated his life to advocacy efforts. He was a major part of the JCAAI since the very beginning; becoming a member of the JCAAI board in 1977, JCAAI president in 1982, JCAAI executive vice president in 1982 and JCAAI executive director from 2001 to 2015, when the JCAAI became the Advocacy Council. When the Advocacy Council was formed, Dr. Aaronson's incredible experience allowed it to become effective immediately.

Gary Gross, MD, FAAAAI, also came to the Advocacy Council from the JCAAI. He was named Distinguished Fellow in 2003, served on the JCAAI board from 1998-2015 and was executive vice president from 2003 until 2015. He is our resident expert on coding issues. His knowledge base regarding this critical piece of everyone's practice is irreplaceable.

Gailen Marshall Jr., MD, PhD, FAAAAI, will serve as the editor-in-chief of the *Annals of Allergy, Asthma and Immunology* through the end of 2017. He will be the first editor to serve an unprecedented three terms for a total of 12 years. He was honored with the Distinguished Service award in 2007 and named Distinguished Fellow in 2009.

Vince Lombardi said: "Individual commitment to a group effort – that is what makes a team work, a company work, a society work, a civilization work." I agree with his sentiment, and would add "That's what makes the College work." When you see these individuals at the Annual Scientific Meeting and elsewhere, please join me in thanking them for their commitment and efforts to make the College the best possible organization, and for their efforts to support the practicing allergist.

Connect with us at [acaai.org](http://acaai.org) or through:



College Advantage is published by the  
American College of Allergy,  
Asthma and Immunology (ACAAI)  
85 W. Algonquin Road, Suite 550  
Arlington Heights, IL, 60005  
Phone: 847.427.1200; Fax 847.427.9656  
[info@acaai.org](mailto:info@acaai.org)

#### Board of Regents

President: Bryan L. Martin, DO, FAAAAI  
President-Elect: Stephen A. Tilles, MD, FAAAAI  
Vice President: Bradley E. Chipps, MD, FAAAAI  
Treasurer: Luz S. Fonacier, MD, FAAAAI  
Immediate Past President: James L. Sublett, MD, FAAAAI  
Past Immediate Past President: Michael B. Foggs, MD, FAAAAI  
Regents: Curtis L. Hedberg, MD, FAAAAI; Jayesh G. Kanuga, MD, FAAAAI; Rohit K. Katial, MD, FAAAAI; Michael E. Manning, MD, FAAAAI; Santiago E. Martinez, MD, FAAAAI; Christopher C. Randolph, MD, FAAAAI; William S. Silvers, MD, FAAAAI; James M. Tracy, DO, FAAAAI; and Cherie Y. Zachary, MD, FAAAAI.

Speaker, House of Delegates: Maeve E. O'Connor, MD, FAAAAI;  
Fellow-in-Training Representatives: Tammy Peng, MD, and  
Sarah Spriet, DO  
Executive Medical Director: Bobby Q. Lanier, MD, FAAAAI  
Editor-in-Chief, *Annals of Allergy, Asthma & Immunology*:  
Gailen D. Marshall, MD, PhD, FAAAAI  
Alliance President: Lelia Sublett  
Executive Director: Richard J. Slawny

## ANNUAL MEETING ADVANTAGE

# If you're coming to the Annual Meeting...

If you decided to join us at the Annual Scientific Meeting this year in San Francisco, we're looking forward to seeing you! What do you need to know once you get on site and to make sure you absolutely don't miss a thing at the meeting?

- **Download the Annual Meeting app.** Leave your heavy program book behind you and access the schedule from anywhere. Find your way around the exhibit hall with GPS-style directions, search for specific speakers and exhibitors, access handouts, find colleagues attending the meeting and email them right from the app and get tips on what to do and where to eat in San Francisco. Download it by searching for "ACAAI" in your app store.
- **Don't miss the keynote!** You'll want to hear what Abraham Verghese, MD, MACP, has to say on how to preserve personal well-being and career satisfaction while adapting to change.
- **Catch a debate.** Be it the classic Great Raft Debate or one of our new pro/con debates, take a seat and take a side.
- **Check out the new electronic posters.** Authors will be speaking about their posters throughout the conference. Search posters from anyplace with an internet connection.
- **Visit us at the College Resource Center.** Stop by Resource Center located near the Exhibit Hall, where you can take the College Learning Connection for a spin, get help with the mobile app, find out what the Advocacy Council has been doing for you and hand in your scratch-off card for a prize!
- **Follow the meeting as it happens.** Tag your meeting tweets with #ACAAI16 so you can join the conversation with fellow attendees at the Annual Meeting. And, follow us on Facebook, Twitter, Pinterest and YouTube for breaking Annual Meeting news as it happens.



## If you're staying home this year...

If you can't join us in San Francisco, there's still a lot you can do from the comfort of your home! How can you join the Annual Meeting excitement without ever stepping on a plane?

- **Join the Virtual Meeting.** There's still time to join us in the digital world. Sign up for the Virtual Meeting at [education.acaa.org/VirtualMeeting](http://education.acaa.org/VirtualMeeting) – only \$249 for College members and \$349 for nonmembers. Catch the live broadcast of Saturday's and Sunday's general sessions, submit questions for discussion and chat with other attendees from all over the world. Plus, earn credit.
- **Follow along on social.** Just because you're not there doesn't mean you can't catch the best pearls and tidbits from #ACAAI16!
- **Purchase the Meeting On Demand.** Once the Annual Meeting is over, visit [education.acaa.org/OnDemand](http://education.acaa.org/OnDemand) – that's where you'll have access to the entire meeting, plus different topic packages to suit your needs. Access the sessions from a desktop, tablet or mobile device – anytime, anywhere – and earn credit.





## ADVOCACY ADVANTAGE

By J. Allen Meadows, MD, FACAAL, chair of the Advocacy Council



# We've been working for you!

The Advocacy Council of ACAAI continues to remind USP that allergy extract used in the allergist's office is safe for patients; so we had a second profitable teleconference with USP in June. On Sept. 20, I attended the Compounding Expert Committee meeting in Rockville, Maryland. While we are optimistic we will eventually reach a solution we can all live with, we are not assured of a

favorable resolution to the USP/compounding fight.

USP has reviewed and taken into consideration the large number of comments received regarding their proposed rule. USP received 8,700 comments, 1,700 relating to allergen extracts. Generally, revisions to Chapters take two years to process and become effective. USP leaders want to have this process complete and a final Chapter 797 issued no later than 2020.

Several times a month, the Advocacy Council becomes aware of new compounding regulations in states throughout the nation. We review and analyze each one for possible effects on allergy/immunology and the way we practice.

Recently, we became aware of the Ohio Board of Pharmacy's (OBP) proposed Ruling that would prevent allergists from reconstituting Xolair, Nucala and other drugs in their offices - and significantly impact their ability to treat asthma patients. We contacted the OBP and asked them to include an exception in their proposed rule that would allow allergists to continue to use these effective and sometimes life-saving drugs. The OBP has amended their proposed ruling and exempts both sterile and nonsterile reconstitution from the OBP's definition of compounding. It also exempts the requirement for licensure as a terminal distributor of dangerous drugs for solo practice prescribers and single shareholder LLCs that are solely engaged in reconstitution.

## Be an advocate for your specialty!

Many of the breakthroughs in our discussions with USP have come because of College members who have relationships with influential people. Our phone meetings with USP were the direct result of a member, Dane McBride, MD, FACAAL, who has a personal relationship with a member of Congress. Many of

our metro D.C. allergists report having conversations with USP officials with whom they have personal relationships. We are facing a rapidly changing health care landscape, and we all need to be active advocates for our specialty; everyone needs to do their part.





## Who do I need to get to know? With whom could it be potentially helpful to cultivate a relationship?

Obviously your senator or congressman are good people to know, but once they are elected, it is harder to develop a personal relationship. However, almost all congressmen and senators previously held or ran for other elected offices. The time to develop the relationship is before you need help, and before they are a “big shot.”

State house members are also people who not only could help us with state legislation, but also are a pool from which we select national officials. Your local elected officials – such as city councilman and county commissioners – are important people to know! I have known and



supported my current U.S. representative from the time she served on the city council. I have known Congressman Robert Adlerholt, who was instrumental in the letter sent ([goo.gl/kRHL2H](http://goo.gl/kRHL2H)) from the Appropriations Committee to the FDA, for years – as you can tell by the photos.



## So, where do you start?

- **First, know your patients.** Most elected officials or their families are patients somewhere. Take the time in the exam room to ask their opinion on issues that affect us. Engage in conversation that lets them know you are interested and involved. Oftentimes elected officials call us before we call them about a specific issue, but they must first know that you are interested and engaged. Attend local town hall meetings held by your Congressman and ask

thoughtful questions, follow up with emails to their staff ([goo.gl/FuHHQ8](http://goo.gl/FuHHQ8)). Get involved in the political process by attending a fundraiser and contributing to the candidate – better yet, organize a fundraiser for a candidate yourself or with other allergists.

- **Join, and be involved in, your state medical association.**

State medical associations often organize and coordinate meetings with elected officials (Capitol Hill days), allowing you to partner with doctors from other specialties. Our legislative victories in Maryland (thanks to Kathleen May, MD, FACAAl) and Ohio (thanks to Jeff Leipzig, MD, FACAAl) ([college.acaai.org/advocacy/changes-ohio-law-affect-you](http://college.acaai.org/advocacy/changes-ohio-law-affect-you)) would not have been accomplished without the help of an engaged allergist who was active in their state medical association. Conversely, we had difficulties in one state that had no active state allergy association, and none of the allergists were members of their state medical association.

- **Plan to attend the annual Allergy Strike Force meeting in Washington.**

We partner with the Allergy & Asthma Network to reach Congress every year in the spring – add your voice to ours. We will train you in what you need to do, where you need to go and give you talking points that tell you what to say. Most often we have “seasoned” partners to help the “rookies.” A Congressman will be much more impacted by a constituent who delivers a sincere, but unpolished message, than an eloquent lobbyist who gives a perfect speech.

- **Defend Allergy SHots (DASH).** The Advocacy Council has been reporting on the many things DASH has allowed us to accomplish with the compounding issue and carrier policy changes around the country. How can you be a super hero? Nothing quite compares to a feeling of accomplishment or knowing when we’ve done something that makes a difference. So I am encouraging you to become an advocate for allergy. Your generous contributions to DASH ([college.acaai.org/SupportDASH](http://college.acaai.org/SupportDASH)) allow us to continue the fight to defend allergy shots. Our fight is not over – the practice of allergy and treatment for our allergy patients is still at risk!



## PRACTICE MANAGEMENT ADVANTAGE

By Bradley Chipps, MD, FAAAAI

# New guidelines for severe asthma on the way



**The College is always working to bring our members the tools they need to help improve patient outcomes.**

A new tool you can look forward to, coming this winter, is the Asthma Yardstick, being developed by a team of experts in allergy, asthma and pulmonology:

Jonathan Corren, MD, FAAAAI; Elliot Israel, MD; Rohit Katial, MD, FAAAAI; David Lang, MD, FAAAAI; Rey Panettieri, MD; and Stephen Peters, MD, PhD; and myself as chair.

What do you do when patients do not respond to steps three, four and five in the Global Initiative for Asthma (GINA) 2016 Guidelines? The Asthma Yardstick aims to extend these recommendations for patients who fail treatment for their diagnosed severity level. Each additional intervention will be critically analyzed based upon available evidence for additional therapy to help achieve appropriate asthma control. The evidence-based review will focus on therapies that are available in the

United States but are not necessarily FDA-approved. Specific patient profiles will be emphasized to give insight as to the direct application of the adjunctive therapies that are being analyzed. The clinical scenarios requiring adjustment of therapy will include, but are not limited to, inadequate control of the impairment domain, frequent poor asthma control days and prevention of exacerbations. The adjunctive therapies recommended will also be aimed at decreasing the side effect burden of guideline-based therapy, especially as it relates to recommendations for increasingly higher doses of inhaled and oral corticosteroid. The currently available biologics will be discussed and insight will be provided regarding the appropriate patient selection.

The outcomes will help clinicians better treat

patients with asthma, particularly those who do not always respond to recommended therapies.

We are very excited about this project and hope it will expand the application of the currently available national and international guidelines for the care of patients with significant asthma. The Asthma Yardstick has been submitted for publication in the *Annals of Allergy, Asthma and Immunology*.



## Submit your proposal now for the 2017 Annual Scientific Meeting

The 2017 meeting theme is "Precision Medicine in Allergy Practice. A Rich History. A Strong Future." The College is accepting session/presentation proposals that echo the meeting theme, stimulate discussion and challenge mindsets.

Find out more at [college.acaaai.org/17proposals](http://college.acaaai.org/17proposals). **Deadline for submission is Jan. 20, 2017.**



## COMMUNITY ADVANTAGE

By Sarah Spriet, DO, Senior FIT Representative

# Boards are over...now what?

**Congratulations to you, the recent allergy-immunology Fellow-in-Training graduates! It has likely been a challenging summer for many, leaving the safety net of your training program, moving (down the street or across the country), starting new jobs AND trying to maximize study time for the initial certifying exam. With that hurdle behind us, what's next?**

For starters, a celebration and a recovery phase seem in order. Hopefully by now you have had a chance to catch your breath and reconnect with the friends and family who have continued to love and support you no matter how many hours you've spent working over the course of your training.

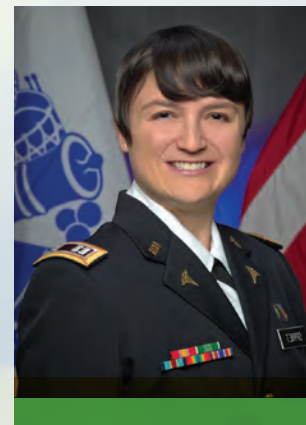
The path after fellowship is not as clearly defined as that for a pre-med student or someone finishing medical school. We now have the opportunity to set an individual course and define ourselves in terms of our practice and our goals. This is where I have found reflection and meeting with mentors to be particularly helpful. The following paragraphs include a few themes from my own musings. They are not prescriptive – just an offering for your consideration.

**Strive to be a master of your trade.** Whether your focus is primarily clinical or research, or a combination thereof, continue to give your best effort every day. This requires a real commitment to lifelong learning. One of my favorite Attendings from residency once told me, "You will learn the most in your first two to three years out of training." Her words are already ringing true, but one of my goals is to continue to push myself to learn more each day well beyond the new staff physician phase.

**Take time for personal wellness and enrichment.** Consider returning to former hobbies, read a non-textbook, sign up for a class or try a new activity that pushes your comfort zone. We have all evolved through the years of school and training – take time to find joy in activities outside of medicine. I think we can all agree that we are the best versions of ourselves when our basic needs are met and we have avenues for stress relief and personal growth.

**Don't ever stop professional development.** Identify mentors who can help assist you in developing your 5- and 10-year plans. Then you can work on obtaining the skillset(s) and experience necessary to advance toward your long-term objectives. Remember that your regional and professional organizations are available as resources and advocates for you – consider getting involved and staying engaged.

I'd like to close with one of my favorite quotes by Oliver Wendell Holmes who said, "The great thing in the world is not so much where we stand, as in what direction we are moving." Congratulations and good luck to each of you. It has been an honor and a privilege to serve as your National FIT Representative these past two years. I hope to see all of you at the College's Annual Scientific Meeting in San Francisco!







## PRACTICE MANAGEMENT ADVANTAGE

## Is the doctor in?

**It's late night and your patient is up, pacing their kitchen floor. They've suddenly broken out in a new rash, and they don't know what to do. But your office, and urgent care, are both closed - and it's certainly not worth a trip to the ER.**

Unfortunately, allergic reactions don't wait around forever, and by the time they schedule an appointment and see you, the rash is nowhere to be seen. Frustrating, but often times, a common occurrence. Is there anything that can be done to help bridge this gap in care? Instead of taking time off from work or school, what if they could just schedule a video call with you in the morning? Telehealth can make this possible.

So, what exactly is telehealth? Let's hear from three College members who are practicing telehealth.

"Telehealth is the use of a wide variety of technologies to manage a patient's health by exchanging medical information over a distance. These technologies include the use of computer-based audio and video conferencing along with digital examination instruments in health care encounters where the provider and patient are separated geographically," said Chitra Dinakar, MD, FACA. Most telehealth services now include a video call so you can see your patient and do an examination. Some even involve using a remote exam room and nursing staff in conjunction with a video visit from an allergist. As technology rapidly advances telehealth should follow along.

There are a lot of reasons why you might consider getting involved in telehealth. One of the biggest benefits is the ability to interface directly with your patient, instantly, during

their moment of need. "When I was seeing patients in my private practice, they would come to me three weeks after an allergic reaction, and I would hope they had pictures that captured the condition. Getting an accurate history is challenging. Wouldn't it be great if you could pop up on the other side of a screen, exam them and treat them right away?" said Tania Elliott, MD, College member and medical director of a prominent telehealth company. "What if you could even help out a patient using an epinephrine auto-injector, and actually walk them through their action plan, step by step?" There are a lot of possibilities when you consider how many treatments in allergy, asthma and immunology care revolve around seeing patients quickly, creating at-home action plans and frequent follow-up. Telehealth can bring you to the patient, on their own time, which can help increase their satisfaction with their care.

It's also great for expanding the reach of your practice. The unfortunate reality is that many patients who most need your care live in rural areas and might not have access to an allergist. This is another time when telehealth can really come into play. You can see these patients by coming to them - or they can travel to an exam room nearby - and examining them via video call. With digital spirometry equipment and more, patients are getting a comprehensive exam. "You're not sacrificing anything by doing telemedicine, the patients



are universally satisfied with the care they receive,” said Jay Portnoy, MD, FAAAAI, author, along with Dr. Dinakar, of a recent *Annals of Allergy, Asthma and Immunology* study on patient satisfaction from telehealth exams (Sept. 2016, Volume 117, Issue 3, Pages 241–245). The study demonstrated patients were just as satisfied with telehealth exams as they were with regular exams. Other benefits of telehealth? “You’re able to see a large number of patients. It’s more efficient. I can get more done because I can actually input information into my EHR while I talk to the patient. You can have fewer exam rooms, or avoid travelling from office to office,” said Dr. Portnoy.

“This is the wave of the future and it is important for allergists to think of this not as competition, but as a way to augment and revive our specialty,” said Dr. Elliott. “Allergy/immunology has unique ways we can implement this technology, and it’s going to bridge the issues of access to care and allow allergists to expand their scope of care. We know that home-based interventions work, and telehealth can bring you into the home.”

So how can you get started? You might already have a lot of what you need, like web access, a web cam, and a secure portal tied into your EHR. You can be an independent contractor for a large company, where you use their software. Or, you can purchase software and start seeing patients that way. There are a number of new startup companies offering telehealth software that sell directly to providers who are looking to get started. However, you do need to learn the rules of billing for these visits, and depending on how you chose to see patients (like within a hospital), you may need special credentials. You’ll need to check the laws in your state before you begin.

Patients are already embracing this technology, so now is the time to dive in. Between expanding the scope of care of your practice to reaching out to patients in their time of need, there are lots of ways telehealth could make real sense for you. “Of all the medical specialties, allergy is the most prime and ripe for telemedicine video visits,” said Dr. Elliott.



## Getting started

By Jay Portnoy, MD, FAAAAI

**1 Decide what type of telehealth services you want to provide.** This can range from email communication all the way to video conferencing augmented with digital examination equipment including stethoscopes and high-resolution

cameras. The former generally is not a billable service, though telephone follow-up appointments can be billed under some circumstances. The latter can be billed if your state has a coverage parity law permitting telemedicine to be covered.

**2 Consider video chatting without an exam.** Video conferencing at home without an exam is usually not a billable service. There are concierge services that charge patients a flat fee for access to a provider. By not going through health plans, billing and coding is not a problem. You might consider offering this type of service.

**3 Or, stick with billable services.** Patients will need to go somewhere they can be examined remotely. Ideally a telefacilitator will run the equipment. This can be a nurse or respiratory therapist, though technically anyone can do it. You could talk with hospitals or clinics that have telehealth facilities to discuss whether you could

provide services using their equipment. That is the easiest way to get set up.

**4 Have all your moving parts in place.** To see patients, you will need a way to send prescriptions electronically and, if your patient is at a remote location, print educational materials they can take home. There also should be someone at the distant location who can perform spirometry and other procedures needed. Allergy skin tests are problematic because the provider really should be on-site for safety purposes. The same goes for allergy shots. You might need to use a blood test for allergy testing. Other procedures will require the patient to travel to your location.

**5 Choose your schedule.** You will want to decide whether to offer a full day of telemedicine services or whether to intersperse patients seen in person with telehealth patients. An advantage of the latter is that your volume of telehealth patients is driven by demand.

**6 Look into credentials.** If you provide telehealth services from a hospital facility, you will need to obtain separate telemedicine privileges. Most hospitals that have telehealth facilities will have this process defined.

## COMMUNITY ADVANTAGE

By Lelia Sublett, Alliance President



## Connect, volunteer, contribute

**It seems like yesterday that I started my year as President of the Alliance. As I reflect on my personal journey to this position, I realize it resulted from three of my life's passions: connecting, volunteerism, and fundraising for a great cause.**

I started by participating in planned field trips and soon realized that the Alliance was a great way to connect with new friends from all over the U.S.

and around the world. As I made these connections, my days at the ACAAI Annual Scientific Meetings were soon filled with opportunities for both participation and volunteerism. I have always been a believer in giving back, and when I was approached to help in the hospitality suite, I could not have been more delighted. I was able to make even more connections and wonderful friends, and looked forward to catching up each year on family life, children, grandchildren and the latest travel adventures.

A few years ago I was honored to join the Alliance Board, never expecting I would ever be asked to serve as president. I have been proud of our continued efforts in fundraising for the Foundation, culminating in a new and record-breaking project last year – the live Alliance auction held during the Annual Fundraising Event that resulted in over \$20,000 raised for the Foundation. I am proud to have had a small part in making a difference.

At this year's Annual Meeting, we have a weekend of non-stop activities.

The fun starts in the Alliance Hospitality Suite (Friday – Monday mornings) catching up with and meeting new friends while enjoying yummy treats. Throughout the meeting the

Alliance is planning daily children's activities at the hospitality suite and will provide suggestions to keep your children entertained during your visit to San Francisco.

On Friday, a speaker from a San Francisco-based non-profit organization, 18 Reasons, will give a talk and cooking demonstration. The organization offers free Cooking Matters classes in low-income communities around the Bay Area. We are excited about the field trip planned later on to the American Bookbinders Museum, the only museum of its kind in the country.

A presentation on the history of San Francisco and can't-miss sites will be given by a local historian on Saturday. There will also be a tour to China Town with lunch at a dim sum restaurant and shopping at your leisure. On Saturday evening, one of our favorite annual events, the International Reception, will again welcome our international members and guests to the meeting.

On Sunday, mentalist Buzz Lawrence will go beyond card and coin tricks to amuse and mystify by providing an entertaining close-up performance. Our business luncheon will be held at the historical Sir Francis Drake Hotel. And don't forget in the evening we will be auctioning off spectacular, one-of-a-kind opportunities to benefit the Foundation.

I invite you to become involved with the Alliance – connect, volunteer and contribute. I look forward to seeing you in the City by the Bay.





# Practice transformation: Innovations in asthma management



**The evolving health care system requires continuous innovation and process improvement on the part of allergy practices. We look at one innovator in asthma care management, AmeriHealth Caritas, and find out what they are doing differently to improve quality and patient outcomes.**

AmeriHealth Caritas is a Medicaid managed care organization and a 2016 winner of the EPA's National Environmental Leadership Award in Asthma Management. AmeriHealth Caritas implemented a comprehensive asthma management program for Medicaid patients in southeastern Pennsylvania, including Philadelphia. From 2013 through 2015, their patients realized improvements in asthma controller medication adherence rates, acute hospitalizations and hospital readmissions. Savings in these areas more than offset increases in pharmacy expenditures.

## What techniques do they employ to achieve success?

- Care managers categorize patients into risk strata and high-need population groups. Interventions are tailored based on risk profile and social determinants of health.
  - Low-risk members receive asthma-focused education.
  - High-risk members receive individual care management and interventions.

- Trained Community Health Workers (CHWs) provide face-to-face care coordination, in-home environment assessments, and asthma-related education for high-risk patients and their families. CHWs, who are often hired from local communities to bridge cultural and health literacy barriers, have non-clinical backgrounds and serve as intermediaries between a patient and their physician. For example, when environmental asthma triggers are identified, the CHW may suggest installing an air conditioner or new windows, removing carpet, or conducting mold remediation. They can even provide patients with an "asthma home kit" (hypoallergenic mattresses and pillowcase covers, storage bins, trash bags, cockroach bait stations and cleaning supplies) where appropriate.
- Asthma medication and supplies (inhalers, spacers, masks) are distributed during office visits, in addition to hands-on education.
- Patient educational material, which can be translated into multiple

languages, is written at a sixth-grade reading level and is geared toward patients with limited English proficiency.

## What can allergy practices learn from these methods?

- Focusing on high-risk patients can yield big results. Large practices can consider a nurse care manager and/or CHW to help manage these patients. Smaller practices can use existing staff to target high-risk patients.
- Breaking down cultural and social barriers can positively impact patient behaviors and other factors contributing to patient health.
- Making patient education accessible to a diverse population can improve understanding and adherence to guidelines.

What innovations are you trying in your practice? We want to hear about them and share them with members. Contact [jenniferpfeifer@acaai.org](mailto:jenniferpfeifer@acaai.org) to tell your story.



PRACTICE MANAGEMENT ADVANTAGE

# Resources for your entire practice

**When you're looking to grow and optimize the efficiency of your practice, the first place that you turn to might not be the College website - but it should be!**

We have a treasure trove of helpful resources just waiting for you and your practice manager to explore. Visit [college.aaaai.org/practice-management/practice-resources](http://college.aaaai.org/practice-management/practice-resources) for access to all our practice resources, covering everything from ICD-10 coding to marketing and patient outreach. What should you check out in each section?

- **Billing and coding** - Check out our ICD-10 toolkit for up-to-date allergy coding information. Access expert answers to common allergy coding questions, view webinars on ICD-10, and try your hand at real-life coding scenarios to help you practice your skills.
- **Financial management** - You'll find our great webinar and articles chock full of tips on best practices in office collections, plus valuable info on financial benchmarking and a host of useful sample financial documents.
- **Human resources** - Watch our popular webinar on HR basics, and access information on interviewing, coaching, employee recognition and other useful sample documents for managing your staff.
- **MACRA, MIPS and APMs** - Your one-stop shop for the latest information on MACRA, how MIPS is likely to impact your practice, what you can do now to prepare and information about the Asthma Alternative Payment Model that we are currently developing.
- **Marketing and patient outreach** - Download press release templates that you can distribute to your local media to promote your practice, as well as print and web ads, checklists, FAQ and fact sheets for patients that you can print in-house and more. Come here for information about the Nationwide Asthma Screening Program, and get a registration form so you can participate. Don't miss the penicillin toolkit for raising awareness about the realities of penicillin allergy.
- **PQRS, VBM and Meaningful Use** - Get allergy-specific information to help you navigate the complicated world of Medicare quality reporting with our PQRS and Meaningful Use toolkits.
- **Patient-centered care** - Find tips to improve patient satisfaction, patient access to care and how to implement shared decision-making in your practice.
- **Risk & compliance management** - Resources are available to help you create a culture of safety, reduce risk and keep your practice in compliance with federal and state regulations.
- **Business operations** - Here's where you can go to check out sample consent forms and front desk phone scripts as well as learn about operational efficiencies you can implement in your practice.
- **Clinical operations** - This section houses a wide variety of tools and resources for you on allergies, asthma, immunomodulatory drugs, rhinitis and sinusitis, vaccines, new patient intake and more.



## COMMUNITY ADVANTAGE

*Biography provided by Sandy Lanier*

# And the winner is...golden!

**The Gold Headed Cane Award is annually given to a College Fellow who has demonstrated the highest standards of scientific excellence and integrity. This year, College Fellows selected Bob Lanier, MD, FACAAl, who will be presented with the award at the Annual Scientific Meeting on Nov. 12.**

My husband and I met at the University of Texas Medical Branch in Galveston where I was a nursing student. We were drafted into the military and wound up at Wilford Hall USAF Medical Center. He completed an immunology fellowship at UTMB, and helped establish the Air Force ACGME fellowship program at Wilford Hall. We set up a practice together in Fort Worth in 1975.

Bob joined the College in 1979 and enjoyed it from the beginning, serving two terms on the Board of Regents. He was intensely involved, working on multiple committees including the Executive Committee and Immunotherapy and Diagnostics Committee. He was the driving force behind adding the word 'asthma' to the name of the College. He thought it would help stake out that area.

I remember him giving the Bela Schick Lecture on 'Leadership Lessons Learned from Star Trek' in 1996. He was also made a Distinguished Fellow of the College in 1995 and received the Distinguished Service Award in 2005. Always the teacher, Bob had a nationally syndicated radio and television segment called the "Sixty Second Housecall" which aired daily for more than 20 years in 400 cities across the country. He wrote, directed, edited and appeared in more than 5,000 public service announcements, bringing complicated concepts of medicine to the public. He was given the American Medical Associations' prestigious Foundation Award for Health Education in 1992 for that effort.

He has a flare for leadership and became president of the College in 2001 after having served as vice president and president-elect. He was also County Medical Society president, president of the Texas Medical Foundation and he was an ACAAI AMA delegate for 13 years. He was even a candidate here in Texas for the 12th Congressional district in 1989.

His love of teaching manifested in resident teaching awards and rotations including mentorships for foreign medical students from

China and Mongolia in our home after he helped the College join the World Allergy Organization. There, he served on the WAO board and developed the WAO Emerging Societies Program and helped establish the State of the World Allergy Report. He holds a guest professorship at Peking University Health Science Center in Beijing.

For the past eight years he has worked for the College as its executive medical director. Somehow having not enough daylight hours, he spends endless nighttime hours emailing and on the phone, and now works two full days a week on College business while seeing patients 40 hours a week and more. He has more energy and creativity than anyone can keep up with. One thing you can say about being around Bob - there is never a dull moment.





# Honoring our award winners

Bryan Martin, DO, FAAAAI, ACAAI president, takes a few moments to reflect on the contributions of this year's winners.



Dr. Chitra Dinakar



Dr. Paul Dowling



Dr. Phillip Lieberman



Dr. Michael Nelson



Dr. Rudolf Valenta



Mrs. Jacqueline Bellanti

## Distinguished Fellow Award

### Chitra Dinakar, MD, FAAAAI

"Dr. Dinakar is incredibly active in the College and has been instrumental in the quality of College educational endeavors. She supports the practicing allergist as a Director of the ABAI, and the College representative on the Council of Pediatrics Subspecialties. She is a wonderful mentor and tireless worker for the allergy community."

### Paul Dowling Jr., MD, FAAAAI

"Dr. Dowling has contributed to the education of Fellows-in-Training by producing the College on Line Allergy (COLA) series. He develops the curriculum, invites the best speakers and ensures this incredible program continues to be a jewel in the College's educational activities. This program supplies enduring materials for FITs and practicing allergists alike."

## Distinguished Service Award

### Phillip Lieberman, MD, FAAAAI

"Dr. Lieberman defines both "distinguished" and "service." He is an outstanding clinician, and has been recognized with the prestigious Gold Headed Cane award. His level of service to the profession is exemplified by his many leadership positions in a variety of allergy based institutions, his nearly continuous committee work and his more than 310 publications. As impressive as these accomplishments are, they do not begin to recognize Dr. Lieberman for his humble, quiet way of helping anyone who asks him a question or raises a concern."

### Michael Nelson, MD, PhD, FAAAAI

"Dr. Michael Nelson has worked tirelessly for the College and allergy community. An active duty Army Colonel who has been deployed to Iraq, he is a calm sage and mentor who can

turn conflict into consensus. His efforts in such vital areas such as the Food and Drug Administration Allergenic Products Advisory Committee, the American Board of Allergy and Immunology, and the Residency Review Committee of the Accreditation Council for Graduate Medical Education affect every member of the College."

## International Distinguished Fellow Award

### Rudolf Valenta, MD, FAAAAI

"Dr. Valenta has a history of distinguished work within the allergy community. He is a highly cited author with over 550 publications and more than 70 patents/patent applications. He is known for his innovative work on recombinant allergen-based tests and therapeutic allergy vaccines based on recombinant allergens and genetically engineered hypoallergens. Dr. Valenta is an outstanding teacher and has received a number of national and international awards."

## Women in Allergy Award

### Mrs. Jacqueline Bellanti

"Jacqueline Bellanti is an incredible College supporter. She has always been an active educator, advocate and leader within the profession. She was the 26th president of the Auxiliary of the then ACAI (2001-02), and recipient of the 2013 ACAAI Distinguished Service Award. Her lifelong efforts have directly and indirectly impacted nearly every aspect of the College."

*Attendees are invited to the Awards Ceremony held during the Annual Scientific Meeting on Saturday, Nov. 12. The College will recognize the above awardees, the Gold Headed Cane awardee and new Fellows.*



# Meet your candidates for election!

During the 2016 Annual Business Meeting, College Fellows will elect a president-elect, vice president, and treasurer for one-year terms. They also will elect three regents for three-year terms. The nominees proposed by the Nominating Committee embody the philosophy of their predecessors whose combined efforts have made the College the success it is today.



"With Vision 2020, ACAAI has embarked on a more comprehensive strategy that will allow a greater involvement of membership in College activities. A call for submissions for the 2017 Annual Scientific Meeting opened in September, as one example. I am very excited about the future of the College. We are a more

inclusive organization providing for precision medicine in allergy and clinical immunology, which will lead to better patient outcomes."

– Bradley Chipps, MD, FAAAAI, president-elect



"What I hope to offer the College is the benefit of my experience in living simultaneously in the worlds of basic science and clinical practice, and the ability to translate these distinct universes to each other. I view the primary mission of the ACAAI to be "diffusion of knowledge among the people." As such, I hope to accomplish

this work on the Board through many mechanisms – most importantly by continuing to produce an outstanding Annual Meeting."

– Larry Borish, MD, FAAAAI, regent



"Some people feel that allergy as a specialty will evaporate with the movement of therapies OTC and allergy as a field will become non-existent – but I am confident we have a future, and it is built on what we do best. We have personal relationships with our patients and provide excellent care. We have

adapted, and will continue to evolve, of course having to maneuver with the changing "field" of medicine. We are positioned well to continue to provide the best care for our patients."

– Todd Mahr, MD, FAAAAI, vice president



"The College is the practicing allergist's best friend for promoting and advocating for our profession. I'm excited to join a Board that tirelessly pursues the College's mission and hope to promote our skills to the primary care community to ensure that we continue to thrive."

– Mitchell Lester, MD, FAAAAI, regent



"I am fully committed to advancing the initiatives of Vision 2020 in response to these fast-changing times. I would like to work to get international, women and minority members more involved in the College for it is only through concerted effort that our specialty will survive and thrive."

– Luz Fonacier, MD, FAAAAI, treasurer



"As a Fellow of the College, I consider it my duty and honor to work hard to maintain and strengthen the capability of the College on its great mission. To continue being a reference in the highest standards in education, research and advocacy for the benefit of members and patients, and to increase the visibility and the already high reputation of ACAAI internationally."

– Noel Rodriguez, MD, FAAAAI, regent

View full bios at [college.acaaai.org/1617candidates](http://college.acaaai.org/1617candidates)

# Thank you to the 2016 ACAAI Corporate Council Members

## BENEFACTOR MEMBERSHIP



## PATRON MEMBERSHIP

