



KIDney NOTES

PRESIDENT'S CORNER



Dear Colleagues,

We are looking forward to seeing many of you at the ASN in Philadelphia. We welcome all of you to attend our business meeting and the open committee meetings (details on page 2 of this issue). We are fortunate that once again the ASN is hosting 21 residents who are interested in Pediatric Nephrology. This is a great opportunity to meet these aspiring nephrologists and demonstrate why they should join our ranks. If residents from your program are attending, please be sure to spend some time with them, introduce them to colleagues, and help them find their way around a large meeting with a myriad of presentations. You are welcome to attend the reception held for them on Wednesday, November 9, starting at 6:30 p.m., Liberty Ballroom of the Philadelphia Marriott Downtown, and feel free to bring packets of information about your training programs to pass out to interested residents. Also be sure to invite them to attend the pFeNa event discussed on page 2 of this newsletter.

The Council is embarking on a strategic planning process for the organization and we welcome your input. The Society and its activities have grown tremendously in recent years and Council felt it was a good time to review our mission and goals and prioritize our initiatives. Please discuss this with any of us at the meeting or email us with thoughts, concerns and suggestions. We will be conducting a limited number of member interviews as part of the process. If you are interested in being interviewed please let us know. We think this is very exciting and hope it will help the organization serve all our members in the future.

See you in Philadelphia!

Sandra

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NOW ON-LINE ASPN POSITION PAPER

The ASPN Position Paper on linking reimbursement to quality of care is now accessible via the homepage at <http://www.aspneph.com/> In order to reach the paper via the link you must have access to the Journal of the American Society of Nephrology Online.

NIH ELECTRONIC GRANT SUBMISSIONS TIMETABLE AND INFORMATION

Information regarding the NIH timetable for implementing the electronic grant submissions process can be found at <http://era.nih.gov/ElectronicReceipt/> Once implemented, paper applications will no longer be accepted. Everyone should familiarize themselves with this process well in advance.

ASN RENAL WEEK 2005, NOVEMBER 8-13
 PENNSYLVANIA CONVENTION CENTER; PHILADELPHIA, PENNSYLVANIA
ASPN FUNCTIONS
SCHEDULE-AT-A-GLANCE

MEETING	DAY	DATE	TIME START	TIME END	MEETING LOCATION
Workforce Committee	Thursday	11/10/05	12:00PM	1:00PM	Philadelphia Marriott Downtown; Room 309
Training & Certification Committee/Fellowship Training Program Directors	Thursday	11/10/05	7:00PM	8:00PM	Philadelphia Marriott Downtown; Room 309
pFeNa Social Function	Thursday	11/10/05	9:00PM		Monk's Café http://monkscafe.com
Research Committee	Friday	11/11/05	6:45AM	7:45AM	Philadelphia Marriott Downtown; Room 301
Member Business Meeting Luncheon	Friday	11/11/05	12:00PM	1:00PM	Loews Hotel Philadelphia (1200 Market Street), Congress Room
Public Policy Committee	Saturday	11/12/05	6:45AM	7:45AM	Philadelphia Marriott Downtown; Room 301
Clinical Affairs Committee	Saturday	11/12/05	12:00PM	1:00PM	Philadelphia Marriott Downtown; Room 301

THE AMERICAN SOCIETY OF PEDIATRIC NEPHROLOGY ANNOUNCES THE FORMATION OF THE PEDIATRIC FELLOWS IN NEPHROLOGY ASSOCIATION (pFeNa)

This organization, created by pediatric nephrology fellows, seeks to serve as an educational and networking resource for those in training in pediatric nephrology, as well as a recruitment resource to encourage residents and medical students with an interest in a career in pediatric nephrology. Membership is open to all current pediatric nephrology fellows and those committed to a pediatric nephrology fellowship training program.

Although meeting informally for the past two years at national meetings, pFeNa seeks to formalize its relationship with ASPN. **A social function will be held on Thursday evening, November 10, 2005 at the ASN Renal Week 2005 in Philadelphia.** The function will be open to current pediatric nephrology fellows and residents committed to a pediatric nephrology fellowship position, as well as residents and medical students with a career interest in pediatric nephrology. The function will be held at Monk's Café, <http://www.monkscafe.com>, at 9:00PM.

For further information, contact pFeNa officers: Brad Dixon (bradley.dixon@cchmc.org), Rene Vandevorde (rene.vandevorde@cchmc.org) or Mai Nguyen (mai.nguyen@cchmc.org)

NEWS AND ANNOUNCEMENTS

NIH LOAN REPAYMENT APPLICATION CYCLE

Starting Thursday, September 1, 2005, the National Institutes of Health (NIH) will begin accepting applications for its five Loan Repayment Programs (LRPs). The five LRPs offered by the NIH include the Clinical Research LRP, Clinical Research LRP for Individuals from Disadvantaged Backgrounds, Contraception and Infertility Research LRP, Health Disparities LRP, and Pediatric Research LRP.

Through these programs, the NIH offers to repay up to \$35,000 annually of the qualified educational debt of health professionals pursuing careers in biomedical and behavioral research. The programs also provide coverage for Federal and state tax liabilities.

To qualify, applicants must possess a doctoral-level degree, devote 50% or more of their time (20 hours per week based on a 40-hour work week) to research funded by a domestic non-profit organization or government entity (Federal, state, or local), and have educational loan debt equal to or exceeding 20% of their institutional base salary. Applicants must also be U.S. citizens, permanent residents, or U.S. nationals to be eligible.

All applications for 2006 awards must be submitted online by 8:00 p.m. EST, **December 1, 2005**. For an online application, program information, or other assistance, visit the LRP Web site at www.lrp.nih.gov, telephone the Helpline at 866-849-4047, or send email inquiries to lrp@nih.gov.

2005-06 FELLOW DIRECTORY

The updated fellow directory is now available online at <http://www.aspneph.com/member.html>. It is password-protected. The "user name" and the "password" are the same as for entry into other members-only portions of the ASPN web site.

TRAINING PROGRAM INFORMATION UPDATE

The Training and Certification Committee would like to utilize the American Academy of Pediatrics online directory of Nephrology Training Programs as a portal for ASPN members to contact/explore fellowship training programs. For this to be effective, significant participation is needed. To add or update your program:

Go to: <http://www.aap.org/training/nephrology/>

Proceed to the Administration Page by entering your User ID (e-mail address) and Password (nephrology001)

(If you have difficulty logging on, please contact Laura Laskosz at llaskosz@aap.org or 800/433-9016, ext. 4928)

Select your program to edit.

Details on the new portal will follow soon.

PEDIATRIC NEPHROLOGY DATABASE OF CLINICAL TRIALS AND MULTI-CENTER STUDIES IS NOW ON-LINE

A major thrust of the new NIH Roadmap is to support translational studies and better understand the clinical relevance of different treatment options. This mission is likely to be accomplished only through broad participation in multicenter collaborative studies. Accordingly, the ASPN would like to post a list of currently active clinical trials and multicenter studies relevant to the care of children with renal disease. The goal is to advise membership of the availability of these trials/studies and stimulate enrollment of our patients. This database is now available on line for ASPN members to "advertise" their clinical trials/multi-center studies on the ASPN website. The survey site URL is <http://www.aspneph.com/multicenter.html>. You will need to log in. The "user name" and the "password" are the same as for entry into the members-only portions of the ASPN web site but will need to be entered separately here. Complete the form with your entries. The "Brief Description" and the "Criteria for Enrollment" areas of the database are not capable of handling a large amount of information, so entries must be telegraphic.

Should you have any questions, please contact the ASPN office at: aspn@northwestern.edu or <mailto:aspn@northwestern.edu>. While we plan to monitor the content of this database, ASPN is not responsible for inaccuracies or for changes that are incorrectly applied. Use of the information contained in this electronic database for commercial or solicitation purposes is expressly prohibited. Please also visit the other resources available on the ASPN Research website (<http://www.aspneph.com/research.html>)

MUSIC, MUSIC, MUSIC!

RSN Invites Young Patients Throughout America to Renal Teen Prom. For the seventh consecutive year, the Renal Support Network will be hosting a special prom for teenagers and young adults, ages 14 to 21, with kidney disease. As in previous years, the **Renal Teen Prom--to be held January 15, 2006 in the Los Angeles area**--will be co-hosted by student and alumni volunteers from Notre Dame High School in Sherman Oaks, Calif. This will be a night for young people with kidney disease to have what no young person should miss: the chance to enjoy being young! Anyone knowing of a teenager or young adult with kidney disease, whether on dialysis or with a transplant, who would enjoy this unique experience should have them contact the RSN for an invitation, at 1311 N. Maryland Ave., Glendale, CA 91207; 818.543.0896; fax 818.244.9540; info@RSNhope.org; www.RSNhope.org.

WASHINGTON UPDATE

Domenic Ruscio and Jennifer Shevchek, ASPN Washington Representatives

PHYSICIAN PAYMENT SYSTEM STILL UNDER REVIEW

ASPN continues to push lawmakers for a permanent fix to Medicare physician payment system. But what was already a nettlesome problem is further complicated by tight limits on new federal spending.

Nevertheless, Rep. Nancy L. Johnson (R-CT), Chairman of the Health Subcommittee on Ways and Means, convened a hearing September 29 to discuss her proposal to tie physician payments to quality measures (H.R. 3617; Medicare Value-Based Purchasing for Physicians' Services Act of 2005). Under her plan, in 2007 and 2008, physicians reporting quality measures would receive an annual update equal to the Medicare Economic Index (MEI). Those who elect not to report on quality measures would be held to payments equaling MEI *minus* one percentage point. Beginning in 2009, higher reimbursement would be contingent on meeting quality targets developed by specialty societies and adopted by the Centers for Medicare and Medicaid Services (CMS).

As drafted, CMS estimates that Rep. Johnson's proposal would cost \$183 billion over 10 years, not an easy pill to swallow in this budget climate. That's prompted Johnson and others to urge CMS to remove drugs from the Sustainable Growth Rate formula used to calculate physician payments. Taking drug expenditures out of the equation, they argue, would reduce the price tag to \$73 billion. CMS Administrator Dr. Mark McClellan contends that the agency does not have the legal authority to remove drugs from the formula, but will make a final decision in November.

As Congress continues to review its options, CMS in the meantime is developing a voluntary Medicare physician quality reporting pilot project. The national pilot project, rumored to launch early next year, would use data generated from physician reporting associated with quality measures. CMS officials express hope that Congress will soon legislate on pay-for-performance legislation, and grant the agency authority to move from a pilot project to a pay-for-performance reimbursement system for all Medicare physicians.

While the outlook for a permanent fix to the

physician payment system remains cloudy, ASPN is encouraging all of its members to contact their elected officials and urge them to block the 4.3 percent payment cut, scheduled to take effect on January 1, 2006.

ASPN COMMENTS ON PROPOSED FY2006 MEDICARE PHYSICIAN FEE SCHEDULE

In response to the August 8 Centers for Medicare and Medicaid Services (CMS) 2006 Medicare Fee Schedule proposed rule, ASPN sent a comment letter to the agency, which highlighted the following:

Medicine Telehealth Services: ASPN recommended that CMS revise its definition of an interactive telecommunications system to include two-way audio and one-way video telecommunication equipment. Although two-way video may add value to a telehealth consultation by allowing the patient and presenting provider to see the body language and non-verbal communication presented by the consulting physician, ASPN believes that including one-way video is sufficient to expand access to beneficial telehealth services.

Pediatric ESRD Facilities: ASPN supported CMS' proposal to permit pediatric ESRD facilities to file exception requests at any time. This proposal will allow nephrologists and the institutions where they work to focus more on the care delivered, rather than administrative burden associated with meeting specific deadlines. In addition, ASPN asked CMS to work with the pediatric nephrology community to develop indicators to assess outcomes of the new proposed case-mix adjustment system for dialysis facilities. This would help CMS establish transparent guidelines that would direct the care of the pediatric patient in all dialysis facilities, including adult.

Sustainable Growth Rate: ASPN commented that the Sustainable Growth Rate (SGR) formula is flawed and should be replaced. Many pediatric nephrologists, particularly those who spend additional time and resources providing specialized treatment to children on dialysis in remote areas, cannot maintain this level of access under the current reimbursement system.

The Final Rule will likely be published in November.

WASHINGTON UPDATE—Continued

WEBSITE LAUNCHED TO HELP EDUCATE ESRD COMMUNITY ABOUT MEDICARE DRUG COVERAGE

In an effort to help kidney patients and health care professionals involved in their care understand the new Medicare prescription drug benefit (Part D), the Kidney Medicare Drugs Awareness and Education Initiative, a group of kidney-related organizations and companies, has launched www.kidneydrugcoverage.org. Visitors are encouraged to download and distribute any information contained on the website in an effort to help kidney patients make appropriate drug coverage decisions.

There are five phases to this initiative: Awareness, Education, Action, How to Utilize Medicare Part D Once Enrolled, and How to Deal with the "Donut Hole". The next Kidney Drug Coverage teleconference will take place on **Tuesday, November 15**. The topic of discussion is "*Medicare – How It's Changing to Help More People: Exceptions and Coverage Determinations.*" Details regarding the call in number and pass code can be accessed at <http://www.kidneydrugcoverage.org/proTeleconference.htm>

ASPEN JOINS KIDNEY CARE PARTNERS

ASPEN recently joined Kidney Care Partners (KCP), an alliance of patient advocates, physician, dialysis professionals and suppliers. The main legislative focus for KCP is the Kidney Care Quality and Improvement Act (S. 635/H.R. 1298). The bill among other things establishes an annual update framework for the Medicare ESRD composite rate, requires a General Accountability Office study and report on the impact of the Medicare G codes, and improves reimbursement for the home dialysis by raising its reimbursement to the 4 level G code. The House bill was introduced by Representatives Dave Camp (R-Michigan-4) and Jim McDermott (D-Washington-7); the Senate version was introduced by Senators Rick Santorum (R-Pennsylvania) and Kent Conrad (D-North Dakota).

ASPEN, in conjunction with KCP, is working on gathering cosponsors for both bills.

The ASPEN wishes to continue to acknowledge the generosity of the following corporate and session sponsors for the 2005 annual meeting. Their unrestricted educational grants have significantly benefited the Society and its efforts.

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MARKETPLACE

Marketplace will no longer list individual available career opportunities in KN. If you would like to view the listing of jobs, you may visit the Marketplace webpage on the ASPN website by clicking on the following link: <http://www.aspneph.com/market.html>

MEETING ANNOUNCEMENTS

4th International Conference on Pediatric Continuous Renal Replacement Therapy (PCRRT) Feb. 23 – 25, 2006, Zurich, Switzerland

This conference brings together in one forum caregivers of children who require extracorporeal therapies including CRRT and plasmapheresis. The course will discuss basics, use of PCRRT in sepsis, acute renal failure, multiorgan dysfunction syndrome and non-ARF indications. Research in drug clearance, nutrition, liver support and outcome will be presented. There will be a call for abstracts that will be published in Pediatric Nephrology.

Sponsors for the program are University of Zurich, University of Alabama School of Medicine, DeVos Children's Hospital, Grand Rapids, Michigan; and PCRRT Foundation. Physician and Nursing credit will be available.

For preliminary information go to www.pcrst.com and click on 2006 program or contact timothy.bunchman@spectrum-health.org or cmalone@pclnet.net

A Rationalized Approach to Incontinence Issues in Children: From Primary to Tertiary Care

For more information or to register, please visit: <http://www.cme.hsc.usf.edu/iccs/>

***Early Discounted Registration Ends January 17, 2006.

March 2-5, 2006; Sheraton Sand Key Resort; Clearwater, Florida

Course Description

This course is designed to present clinicians with the most current diagnostic and therapeutic approaches relating to urinary and fecal incontinence in children. The International Children's Continence Society (ICCS) is an international organization dedicated to investigating, understanding and promoting the most advanced treatment in children with urinary incontinence. The panel of international experts assembled for this course will present and interactively discuss the evidence based data relating to the diagnosis and treatment of incontinence disorders in children.

Target Audience

Pediatricians, developmental pediatricians, pediatric urologists, pediatric nephrologists, primary care physicians, pediatric nurse practitioners, pediatric nurses, physical and occupational therapists, family practitioners and pediatric specialists who are involved with children affected by incontinence disorders

Objectives

Upon the completion of this program, attendees should be able to:

Demonstrate appropriate diagnostic approaches to identifying and diagnosing urinary and fecal incontinence in children.

Evaluate comorbidity factors associated with this incontinence, including urinary tract infections, voiding disorders and developmental / behavioral / psychological issues.

Employ the necessary tools required for initiating and maintaining a voiding disorder clinic

Cite the various pharmacologic, physiologic and behavioral treatment options available to managing this incontinence in a pediatric population

Jointly Sponsored By:



Meeting Announcements—continued

PEDIATRIC NEPHROLOGY SEMINAR XXXIII

Wyndham Miami Beach Resort, Miami Beach, Florida

March 10-14, 2006

Registration cost is \$540 for Physicians in Practice and \$190 for Physicians in Training, Nurses, and Allied Health Professionals. We have various types of **Grants** (Tuition and/or Travel) for Medical Students, Pediatric Residents, Fellows in Pediatric Nephrology, and Young Faculty (for the 2005 Seminar, 75 granted). The Grant Application deadline is December 1, 2005. The special hotel price is \$219 and is applicable three days before, during, and three days after the Seminar.

As many of you know, the Seminar **Guest Faculty (about 30)** is composed mostly of ASPN/ASN Members who donate their time and pay for their own expenses, as do all other Faculty (including about 20 **Local Faculty**). From the Seminars beginning (1974), our emphasis has been on timely subjects presented by the best available people who can connect the subject to its scientific base and clinical situations, do so in a clear manner, and include suggestions for relevant research. The Seminar is geared for Pediatric and Internal Medicine Nephrologists, Pediatricians, Internists, General Practitioners, Renal Pathologists, Neonatologists, Geneticists, Nutritionists, Nurses and other health-related Professionals.

Seminar **Registrants** are a dynamic international mix of those well-established in the field and beginners (in 2005, from 29 different countries and 28 different US States). Previous participants have described the Seminars as “Almost a comprehensive review of Pediatric Nephrology”; “The best place to meet distinguished faculty from around the world in an informal, friendly, and scientific atmosphere”; “The relationships started at the Seminar will change your life and your work forever and for the better”.

For **information** about the Seminar, contact José Strauss, M.D., Founder and Program Chairman, Division of Pediatric Nephrology, University of Miami Miller School of Medicine, P.O. Box 565874, Miami, FL 33256-5874, telephone and FAX# 305-667-3031, e-mail stainter@bellsouth.net and jstrauss@med.miami.edu; website (for Registration and Grant Application Forms/Brochure) www.pediatricnephrology.med.miami.edu/seminar.

For **hotel accommodations** contact the Wyndham Miami Beach Resort, 4833 Collins Avenue, Miami Beach, FL 33140, telephone 305-532-3600 or 1-800-WYNDHAM, FAX 305-538-2807, website www.wyndhammiamibeachresort.com (We have a list of alternative hotels which will be sent to you if requested).

KIDney NOTES

BI-MONTHLY MEMBERSHIP NEWSLETTER OF THE AMERICAN SOCIETY OF PEDIATRIC NEPHROLOGY

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