

AAN News & Notes

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SUPPORTING EXCELLENCE IN THE PRACTICE OF NEUROLOGY

It's time to renew your dues with the Alabama Academy of Neurology

The Alabama Academy of Neurology was organized in 1995 to:

- Support the highest standards of excellence in the practice of neurology,
- Improve patient access to quality neurological care,
- Advance the profession of neurology by supporting principals, policies and practices that seek to improve patient care, and
- Support education and advocacy for our profession, our patients and their families.

In order for us to fulfill these purposes, we need your membership!

We hope that you will join your colleagues across the state and support the Alabama Academy of Neurology. Our partnership with the Medical Association of the State of Alabama allows us to offer quality CME programs, membership recruitment, communications, board management and legislative support to our members.

Dues statements for 2019 were mailed in February to the address we have on record. You may also use the form on page 5, or download a statement from our website at *www.alneurology.com/join-aan.* To arrange group billing for your practice, contact Charlotte Morris at *cmorris@alamedical.org* or call (334) 954-2531.

CBD oil study shows significant improvement in patients with treatment-resistant epilepsy

UAB's Office of Public Relations

Findings from the landmark study at the University of Alabama at Birmingham on cannabidiol, or CBD oil, provide the published evidence of significant improvements in seizure frequency and other measures of efficacy in patients with treatment-resistant epilepsy. Published in the journal *Epilepsy and Behavior*, the results indicate use of CBD oil reduced adverse events and seizure severity, in addition to a reduction in overall seizure frequency.

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Accommodations:

AAN has a block of rooms served at the Hyatt Regency Birmingham – The Wynfrey Hotel for Friday, Aug. 23. Rates begin at \$117 and will be honored up to two days before and two days after the conference date based on availability. The deadline for reservations is Aug. 2, 2019. Reserve a room by calling (800) 233-1234 and mentioning the Alabama Academy of Neurology conference.

Help us spread the word about AAN's Conference

Vendor participation is vital to the success our conferences. Please ask vendors who visit your office to contact Meghan Martin at (334) 954-2513 or *mmartin@alamedical.org*.

American Academy of Neurology joins others in concern for increased out-of-pocket costs for patients

The American Academy of Neurology joined other medical groups in February in sending a letter to congress regarding surprise medical bills.

The letter reads as follows:

Patients, physicians, and policymakers are deeply concerned about the impact that unanticipated medical bills are having on patient out-of-pocket costs and the patient-physician relationship. Health insurance plans are increasingly relying on narrow and often inadequate networks of contracted physicians, hospitals, pharmacies, and other providers as one mechanism for controlling costs. As a result, even those patients who are diligent about seeking care from innetwork physicians and hospitals may find themselves with unanticipated out-ofnetwork bills from providers who are not in their insurance plan's network, simply because they had no way of knowing and researching in advance all the individuals who are ultimately involved in their care. Physicians and other providers are limited in their ability to help patients avoid these unanticipated costs because they, too, may not know in advance who will be involved in an episode of care, let alone other providers' contract status with all the insurance plans in their communities.

As Congress develops potential legislation to provide relief to patients from health care costs that their insurance will not cover, we urge your consideration of the following policies.

Insurer accountability

Since overly narrow provider networks contribute significantly to this problem, strong oversight and enforcement of network adequacy is needed from both federal and state governments. Robust network adequacy standards include, but are not limited to, an adequate ratio of emergency physicians, hospital-based physicians, and on-call specialists and subspecialists to patients, as well as geographic and driving distance standards and maximum wait times. Provider directories must be accurate and updated regularly to be useful to patients seeking care from in-network providers. In addition, insurers should be held to complying with the prudent layperson

standard in existing law for determining coverage for emergency care, so that insured patients are not liable for unexpected costs simply because they were unable to accurately self-diagnose ahead of time whether their symptoms were, in fact, due to an emergency medical condition.

Limits on patient responsibility

Patients should only be responsible for

in-network cost-sharing rates when experiencing unanticipated medical bills.

Transparency

All patients who choose in advance to obtain scheduled care from outof-network physicians, hospitals or other providers should be informed prior to receiving care about their anticipated outof-pocket costs. When scheduling services for patients, providers should

be transparent about their own anticipated charges, and insurers should be transparent about the amount of those charges they will cover.

Universality

In general, any federal legislation to address unanticipated out-of-network bills should also apply to ERISA plans.

Setting benchmark payments

In general, caps on payment for physicians treating out-of-network patients should be avoided. If pursued, guidelines or limits on what out-ofnetwork providers are paid should reflect actual charge data for the same service in the same geographic area from a statistically significant and wholly independent database. They should not be based on a percentage of Medicare rates, which have become increasingly inadequate in covering overhead costs, nor should they be based on in-network rates, which would eliminate the need for insurers to negotiate contracts in good faith. Any prohibition, whether state or federal, on billing from out-of-network providers not chosen by the patient should be paired with a corresponding payment process that is keyed to the market value of physician services.

Alternative dispute resolution

Legislation should also provide for a mediation or sequential alternative dispute resolution (ADR) process for those circumstances where the minimum payment standard is insufficient due to factors such as the complexity of the patient's medical condition, the special expertise required, comorbidities, and other extraordinary factors. ADR must



apply to states and ERISA plans. Arbiters should not be required to consult innetwork or Medicare rates when making final determinations regarding appropriate reimbursements.

Keep patients out of the middle

So that patients are not burdened with payment rate negotiations between insurers and providers, physicians should be provided with direct payment/ assignment of benefits from the insurer.

The problem of unanticipated out-ofnetwork bills is complex, and requires a balanced approach to resolve. In addition to providing strong patient protections, we believe the principles set forth above would improve transparency, promote access to appropriate medical care, and avoid creating disincentives for insurers and health care providers to negotiate network participation contracts in good faith.

We appreciate your consideration of these policies and look forward to working with you on these matters.

This letter was sent to the Committee on Ways and Means, House Energy & Commerce, Education & Labor Committees, and Senate Finance and HELP Committees.

Thank you for your membership with AAN

The following have paid membership dues for 2019! If you haven't renewed yet, use the form on page 5 or renew online at www.tinyurl.com/AAN2019Membership.

Active Member

- Anjaneyulu Alapati, MD, Huntsville Hospital Neurological Associates
- Rosa Bell, MD, Neurological Care Center of Montgomery
- Kasha Elizabeth Benton, MD, Gardendale Olga Bogdanova, MD, Neurological Specialists, P.C., Gadsden
- Richard Diethelm, MD, Neurology East, PC, Birmingham
- Thomas Emig, MD, Alabama Neurology and Sleep, Tuscaloosa
- Walid Freij, MD, Neurology Consultants of Central Alabama, Selma

Richard Friedman, MD, Coastal Neurological Institute, Mobile

- James Geyer, MD, Alabama Neurology and Sleep Medicine, Tuscaloosa
- Timothy P. Hecker, MD, Coastal Neurological Institute, Mobile

CBD oil study continued

The published results focus on 132 patients, 72 children and 60 adults, with intractable epilepsy who did not respond to traditional therapies. The study was launched in 2015 following an act by the Alabama legislature – commonly called Carly's Law – that authorized the UAB Epilepsy Center and Children's of Alabama to conduct studies of cannabidiol, a component of cannabis.

The study analyzed data from the 132 patients at baseline and at visits at 12, 24 and 48 weeks. Seizure frequency decreased from a mean of 144 seizures every two weeks at baseline to 52 seizures over two weeks at 12 weeks into the study. The reduction remained stable through the 48-week study period.

"This is a highly significant reduction in the number of seizures that the majority of patients experienced, nearly a twothirds reduction across the entire study population," said Martina Bebin, MD, professor in the Department of Neurology in the School of Medicine and principal investigator of the pediatric arm of the study. "Some patients experienced an even greater reduction of seizure frequency."

The research team also scored patients on an adverse events profile, or AEP score. For all participants, AEP decreased from 40.8 at the beginning of CBD therapy to

- Brian Hogan, MD, Alabama Neurology and Sleep Medicine, Tuscaloosa
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Resident

Juliana Coleman, UAB Department of Neurology, Birmingham

Adebimpe Oyowe, MD, PhD, UAB Department of Neurology, Birmingham

Student

Benjamin Echols, UAB School of Medicine, Birmingham

🔷 New Member

33.2 at the 12-week visit. The investigators also employed the Chalfont Seizure Severity Scale to assess overall severity of seizures. Scores decreased from 80.7 at baseline to 39.2 at 12 weeks. Scores for both measures remained stable at the 48week mark.

"An improvement of 10 points or more on the CSS Scale is clinically significant," said Jerzy Szaflarski, MD, PhD, director of the UAB Epilepsy Center and principal investigator of the adult arm of the study. "We saw improvements between baseline and 12-week visits in the 30- to 40-point range for each group, as much as a 50 to 60 percent improvement, indicating results that are not only statistically significant, but also highly clinically significant for the group as a whole."

The investigators also noted parallel decreases in both seizure severity and seizure frequency, indicating that, for many patients, use of CBD oil led to both fewer and less intense seizures.

The investigators point out that the oil used in the studies was a pharmaceuticalgrade CBD oil produced by Greenwich Biosciences, known as Epidiolex[®]. The purified oil contains only trace amounts of THC, the psychotropic component of cannabis. Previous observational and randomized controlled studies have confirmed the safety and tolerability of Epidiolex[®], so the UAB team focused on analysis of the AEP data, which showed a significant decrease in the overall side effects reported by patients.

"Perhaps more importantly, the AEP scores remained stable throughout the study period despite further increases in CBD dosing and decreases in other antiseizure medications," Szaflarski said. "Of note is that only two participants in the pediatric and two in the adult portions of the study withdrew because of adverse events alone."

"The results of this open-label safety study indicate significant improvements in seizure severity, adverse effects and seizure frequency at 12 weeks, with response maintained over the 48-week duration of therapy," Bebin said. "The results are particularly interesting since, rather than enrolling patients with a specific diagnosis, we enrolled patients of all ages with various treatment-resistant epilepsies, indicating that CBD oil may be effective across the spectrum of epileptic conditions."

On June 25, the U.S. Food and Drug Administration approved Epidiolex®





American Academy of Neurology 2019 Annual Meeting • May 4-10

Make plans to join your colleagues at the Pennsylvania Convention Center in Philadelphia, May 4 -10. Registration and hotel information are available at www.aan.com/view/AM19. Discounted room rates are available through April 2, or until the AAN room block is filled.



Medical Association of the State of Alabama Annual Meeting to feature sessions on burnout and maximizing your practice's profitability

The Medical Association of the State of Alabama invites you to attend their 2019 Annual Meeting and Business Session, April 12-13, at the Hyatt Regency Birmingham - The Wynfrey Hotel.

Friday afternoon's sessions focus on the importance of physician health. Sandra L. Frazier, MD, medical director for the Alabama Physician Health Program, will address how APHP's confidential services are a first-line resource for physicians with potentially impairing conditions or illnesses. By keeping our physicians well, we keep patients safe.

Also on Friday afternoon, hear from Mark Jaban, MD, Jerome Cochran, MD, lecturer, who will present: *Burnout Proof LIVE! Workshop*. Lower your stress levels, enhance your relationships, prevent burnout, and improve your work-life balance. Concluding Friday afternoon's sessions is Improving Your Medical Practice's Profitability by D. Maddox Casey, CPA, of Warren Averett, LLC. Casey will discuss proven strategies to increase practice revenue while wisely cutting expenses.

Saturday morning, hear from our Ellann McCrory, MD, Leadership Lecturer James R. Andrews, MD. Dr. Andrews is a founding member of Andrews Sports Medicine and Orthopaedic Center in Birmingham, and co-founder of the American Sports Medicine Institute. He will present Physician Leadership: Compassion, Communication and Character

The room rate is \$129 per night. Reserve a room by calling (800) 233-1234 and mention room block code MAS9 to receive the discounted rate. **The room block expires on March 18.**

More information is available at *http://alamedical.org/AnnualSession*

CBD oil study continued

for seizures associated with two rare and severe forms of epilepsy, Lennox-Gastaut syndrome and Dravet syndrome, marking the first FDA approval of a purified drug derived from cannabis. While this approval paves the way for patients with these rare conditions to receive CBD in the near future, it also provides all patients with epilepsy an additional efficacious and well-tolerated treatment option.

The study was supported in part by the state of Alabama, the UAB Epilepsy Center and Greenwich Biosciences.

Co-authors include Gary Cutter, Ph.D., and Yuliang Liu, Department of Biostatistics, UAB School of Public Health; Jennifer DeWolfe, DO, Tyler Gaston, MD, David Standaert, MD, PhD, Ashley Thomas, MD, Lawrence Ver Hoef, MD, UAB Department of Neurology, School of Medicine; and Leon Dure, MD, Pongkiat Kankirawatana, MD, and Rani Singh, UAB Department of Pediatrics and Children's of Alabama.

> AAN NEWS & NOTES Alabama Academy of

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Articles should be sent to Charlotte H. Morris, at cmorris@alamedical.org two weeks in advance of printing.

AAN News & Notes is published quarterly. The articles are meant to provoke thought and comment and do not necessarily reflect the views and opinions of the members, Board of Directors or staff of the Alabama Academy of Neurology. Comments and letters to the editor are welcome.





ONE STATEMENT PER MEMBER, PLEASE. Download additional forms at <u>www.alneurology.com</u>.

DUES CATEGORY:

Active Member - \$130) 🛛 Retired - \$25
Resident/Fellow – Free	e 🛛 🛛 Medical Student - Free

Contact Information for Member

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 Make checks payable to Alabama Academy of Neurology (AAN) Pay your 2019 dues online at <u>www.tinyurl.com/AAN2019Membership</u> or Mail payment along with this statement to: AAN PO Box 1900 Montgomery, AL 36102-1900 Save the date for AAN's 2019 Conference Aug. 24, 2019 Hyatt Regency – The Wynfey Hotel Birmingham 						
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THANK YOU FOR YOUR MEMBERSHIP!

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ALABAMA ACADEMY OF NEUROLOGY 2019 ANNUAL CONFERENCE

AUGUST 24, 2019

HYATT REGENCY BIRMINGHAM - THE WYNFREY HOTEL

REGISTRATION FORM

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Dietary Needs	□ First time attendee? (check if yes)		
FEES			

□ Member \$150□ Non-Member \$280□ Retired \$50□ Nonphysician Clinician \$100□ Scientific Liaison \$300□ Resident/Fellow - Free□ Student - Free

REGISTRATION

Register online at *www.tinyurl.com/AAN2019Conference* or send completed form to: AAN 2018 Conference | Attn. Meghan Martin | PO Box 1900 | Montgomery, AL 36102-1900

ACCOMMODATIONS

Make hotel reservations at the Hyatt Regency Birmingham - The Wynfrey Hotel by calling (800) 233-1234 and mentioning the Alabama Academy of Neurology 2019 Conference. Rates begin at \$117 per night. **The room block will expire on Aug. 2**.

DETAILS

More conference information is online at *www.alneurology.com*. If you have special needs and/or need assistance, please contact Meghan Martin, at (334) 954-2500 or *MMartin@alamedical.org*.

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