ASPN ANNUAL MEETING
May 1-3, 2004
Moscone West Convention Center, San Francisco, CA

► REGISTER ON-LINE for the 2004 ASPN Annual Meeting BEFORE APRIL 1, 2004. For additional meeting information and to register, visit the PAS web site at: www.pas-meeting.org.

► ASPN Headquarters Hotel—Hilton San Francisco

► ASPN Membership Reception will be Saturday, May 1, 2004 from 8:00 - 10:00 p.m. at the Carnelian Room. There will be shuttle service leaving from the Hilton at 7:30 p.m. and will run continually until 10:00 p.m. Plan to attend to welcome the ASPN residents and the Research Trainee Awards will also be presented!

► ASPN Membership Breakfast Business and Awards Meeting will be Monday, May 3, 2004 from 7:00 a.m. to 9:15 a.m. at the Hilton San Francisco. Please plan to attend this meeting. The ASPN Founder’s Award will be presented and a Washington Update will be provided by Dom Ruscio, ASPN Washington Representative.

► NOTE: NEW SESSION ADDED - A new session has been added to the 2004 meeting schedule on Sunday, May 2 at 6:15 p.m. in the Moscone Convention Center. The session is entitled: DIALYSIS G CODES 101: UNDERSTANDING MEDICARE’S NEW REIMBURSEMENT METHODOLOGY FOR ESRD. See page 2 under “Washington Update” for information on “G” coding. More information will be sent to the membership by broadcast e-mail.

Compilation of Pediatric Nephrology Databases and Multi-center Studies

The ASPN Council would like to compile a list of current active databases and multi-center studies of pediatric kidney diseases. The goal is to publish and periodically update this list in order to make the ASPN membership aware of these efforts, to stimulate enrollment of patients into them, and to enhance interaction between the ASPN membership and coordinators of the databases and multi-center studies.

ASPN members interested in “advertising” their database/multi-center studies through ASPN publications and the website are asked to submit information within the next two months to the ASPN Secretary/Treasurer, c/o Kristie Matteson, kmatteso@iupui.edu. Please include the disease being studied, whether the project represents a database or a multi-center study, its web address, and the coordinator’s telephone and fax numbers and e-mail address. We hope to publish the first list in 4-6 months. — Submitted by the ASPN Research Committee
As the first warming trends of early spring strike the balmy shores of Lake Erie, I trust you have all had a productive winter. Council and I want to take this opportunity to draw your attention to the important Public Policy Section of this edition of the newsletter, and thank Dom and Public Policy Committee for their tremendous work over the past few months. Indeed, we have set into motion a public policy forum for the entire Council of American Kidney Societies that will guide efforts through 2004.

By now you should be making your plans to attend our Annual Meeting, to be held again in conjunction with the Pediatric Academic Societies Meeting in San Francisco, May 1-4, 2004. Our headquarters hotel for the meeting (where our business meeting will be held) is the Hilton San Francisco. Our Symposia and Workshops, as well as original Science Abstract and Platform sessions will be held, along with other PAS activities, at the Moscone West Convention Center. We have put together an exciting program which includes 4 ASPN Symposia on the Epidemiology and Pathophysiology of Chronic Kidney Disease, an Update on UTI/Reflux, the Role of Obesity and Type 2 Diabetes on Kidney Disease, and an Update on Pediatric Hypertension; 2 Joint Symposia with other PAS-affiliate Societies on Complications following Solid Organ Transplantation and Implications of the Food and Drug Modernization Act on Pediatric Therapies; 3 Workshops on: Clinical trials in Pediatric Nephrology, Pediatric Dialysis in 2004, and Transitioning Older Pediatric Nephrology to Internists; and 2 Poster Sessions and 2 Platform Sessions of original Science in addition to a Robust Social and Awards Program. Please be sure to note that you are a member of the ASPN on your registration materials, and that you register for a room at the ASPN Headquarters hotel as noted above. I am sure that you will want to join your ASPN colleagues as we present this year’s Founder’s Award, our Society’s highest honor, to Dr. Billy S. Arant, Jr. for his outstanding achievements in the field of pediatric nephrology as well as his service to the ASPN and the pediatric nephrology community.

We look forward to the largest and most successful meeting ever!! My very best for a wonderful Spring, and I personally look forward to seeing you in San Francisco in 10 weeks.

— Ellis D. Avner, M.D., ASPN President

WASHINGTON UPDATE

President’s FY2005 Budget Limits Medical Research Growth

The president's budget requests $28.8 billion for NIH, an increase of only 2.7 percent over current funding. According to the budget document this amount will support 40,000 research project grants, including an estimated 10,400 new and competing awards, an increase of 258 over this year’s level. To help pay for these awards, biomedical inflation increases for continuation grants will be held to 1.3 percent, rather than the actual biomedical inflation rate of 3.3 percent.

In outlining the top NIH research priorities, the budget document states that the funds requested, “will allow NIH to address imperative requirements in biodefense; implement the NIH Roadmap for Medical Research; pursue an obesity research initiative; and manage a research initiative on developing nuclear and radiological threat countermeasures. Additional support will be provided to continue progress in promising arenas of science related to specific diseases such as cancer, HIV/AIDS, diabetes, Parkinson’s disease, and Alzheimer's disease; while also pursuing whole new avenues of post-genomics research.”

Medicare Carriers lack Appropriate Knowledge about New Dialysis G codes

On January 1, 2004, the new dialysis ‘G’ codes went in to effect, which base dialysis reimbursement on the number of physician/patient face-to-face visits performed each month. The usual monthly capitation payment (MCP) codes 90918 (ages 0-2), 90919 (ages 2-11), 90920 (ages 11-19) and 90921 (age >20) will be replaced by G codes, with three ‘G’ codes for each age category based on the number of face-to-face visits with the patient that month.
For the pediatric ‘G’ codes, the approximate national median Medicare allowable payment amounts are as follows:

**Age less than two:**
- Four or more visits in a month (code G0308) $810.00
- Two to three visits in a month (code G0309) $674.00
- One visit monthly (code G0310) $539.00

**Ages two to eleven:**
- Four or more visits in a month (code G0311) $551.00
- Two to three visits in a month (code G0312) $459.00
- One visit monthly (code G0313) $367.00

**Ages twelve to nineteen:**
- Four or more visits in a month (code G0314) $483.00
- Two to three visits in a month (code G0315) $403.00
- One visit monthly (code G0316) $322.00

**Note:** The home dialysis patient ‘G’ code will be set at the rate of 2 to 3 visits for only 1 face-to-face encounter to uphold the principle of keeping home patients at home.

To date, CMS has only issued a general program memorandum to Medicare contractors, informing them to recognize and pay ‘G’ codes and not the old CPT codes. However, no question and answer documentation of instruction has yet been sent to carriers explaining the methodology of the ‘G’ codes. In response to inquiries from ASPN’s Washington Representatives Dom Ruscio and Jennifer Shevchek as to whether the agency would provide a detailed documentation of instruction to carriers, CMS stated that it was going to issue another instruction soon, but did not give a specific date.

Some pediatric nephrologists have indicated that their commercial payers have advised them that they will not recognize the new ‘G’ codes and thus will reject claims for Medicare secondary billing. Similarly, services billed to commercial insurers as the primary payer may be rejected by Medicare carriers as the secondary payer, because the original claim may reflect the previous MCP code, and not the new ‘G’ code.

The ASPN recommends that members keep track of their patient visits as a precautionary measure against carriers not recognizing the new ‘G’ codes. The ASPN will continue to keep you abreast of any new developments regarding this important issue. In the meantime, to view the current CMS program memorandum sent to Medicare contractors regarding the ‘G’ codes, visit [http://www.cms.gov/manuals/pm_trans/R34OTN.pdf](http://www.cms.gov/manuals/pm_trans/R34OTN.pdf)

**ASPN and CMS: Opening New Lines of Communication**

In an effort to work with CMS in the development of future ESRD policy initiatives, members of the ASPN Council will participate in a bi-monthly conference call with Dr. Barry Straube, a nephrologist and Chief Medical Officer for CMS’s region 9, and Brady Augustine, Director for ESRD policy at CMS. The goal of these conference calls is to further educate CMS about the unique nature of pediatric ESRD care, and play an active role in the development of ESRD payment models. Periodic updates will be posted in this publication.

**Organ Bill Passes Senate, Awaits House Action**

On November 25, 2003, the U.S. Senate unanimously passed S.573, the Organ Donation and Recovery Improvement Act. This bill, among other things, will offer a comprehensive approach to increasing organ donation, while improving the overall process of organ donation and recovery. Specifically, the bill would improve coordination and evaluation of existing federal organ donation and transplantation research activities. It would establish demonstration projects to discover new opportunities to increase organ donation. The bill would also enhance the coordination of public awareness and the education of health professionals. The bill now awaits House consideration.

—Domenic Ruscio and Jennifer Shevchek, ASPN Washington Representatives
JOB POSITIONS AVAILABLE

The Children’s Hospital at The Cleveland Clinic
Position: Section Head of Pediatric Nephrology

The Children’s Hospital at The Cleveland Clinic is recruiting a Pediatric Nephrologist for the position of Section Head of Pediatric Nephrology. While providing leadership for the pediatric nephrology program, this individual will also develop and promote a vision that addresses the needs of patients and their families. The incumbent will ensure the highest quality of clinical care is delivered while promoting the teaching and research mission of The Children’s Hospital.

Physicians must be board certified in pediatric nephrology with an interest in clinical or basic investigation. The ideal candidate must have a strong commitment to programmatic excellence in clinical services, research, and teaching in order to successfully lead and further develop a nephrology program which includes an active renal transplant service. The clinical practice is very active, with 1500 outpatient visits/yr, an average of 12 patients on hemodialysis, and 5-7 transplants annually. The Children’s Hospital has just opened a newly developed 8-station Pediatric Dialysis Center, which is currently the only pediatric dialysis unit in Cleveland.

Interested candidates should contact Dr. Michael Levine, Physician in Chief and Chairman of Pediatrics, The Children’s Hospital at The Cleveland Clinic at 216-444-5517 or levinem@ccf.org. The Cleveland Clinic Foundation is an equal opportunity, affirmative action employer. Smoke/drug free environment.

MEETING ANNOUNCEMENTS

The 3rd International Conference on Pediatric Continuous Renal Replacement Therapy
June 24-26, 2004
Cornado Springs Disney Hotel, Orlando FL
This will be a 2 day symposium for nursing, pharmacists and physicians involved in CRRT with educational credits available. This year will include sessions on bone marrow transplant care, plasmapheresis, and workshops on nutrition, nursing and drug dosing. Travel grants of 500 each will be available for Nephrology fellows, ICU fellows and Nurses.
More information can be found at our web site www.pcerrt.com or by contacting Carol Malone at cmalone@acninc.net or Tim Bunchman at: 616-391-3788, email: Timothy.Bunchman@spectrum-health.org.

AN IMPORTANT MESSAGE FROM THE ASPN OFFICE:

Starting in April 2004, the KIDNEY NOTES NEWSLETTER will NO LONGER be sent to the ASPN membership through the US Postal Service. The newsletter will ONLY be available through a broadcast e-mail message that will be sent to the membership and on the ASPN web site (www.aspneph.com). It is important that WE HAVE YOUR CORRECT E-MAIL ADDRESS!