



- SFTP Highmark Reports
- SFTP AmeriHealth Reports
- Motivational Interviewing CE
- HEDIS Reminder
- CHE Education Seasonal Sickness
- Flu Corner
- Surgery Corner: Pediatric Snoring

ANNOUNCEMENTS/HIGHLIGHTS

- Meeting Reminders
 - Q-Connect Meeting
 - Lunchtime Lecture

ADDITIONAL RESOURCES

- Preparing for the Respiratory Virus Season
- Immunization Coalition -At a Glance
- Primary Care Updates





CURRENT BOARD MEMBERS:

Jay Ludwicki- Chair - The Pediatric and Adolescent Center Magdy Attia - Vice Chair- Nemours Children's ER Hal Byck- Nemours Children's Primary Care Anthony Gannon- Nemours Children's Endocrine Jonathan Miller- Nemours Children's PC Ashish Gupta- Nemours Children's Neonatology Nancy Gideon/Erin Fletcher- Beacon Pediatrics Pamela Huffman-DeVaughn- PAMCOP Charizza Sales- Kent Pediatrics Vibha Sanwal - Primary Care, Rainbow Pediatrics Karla Nicholas Swatski- Bryn Mawr Pediatrics

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KidWell Resources:

📊 New Highmark Commercial Reports Now Available

New Highmark Commercial quality reports are now posted on the SFTP portal.

• Highmark folder: Original payer files

• Downloads folder: KidWell-formatted quality data

These reports include payer claims through 9/30/25 and internal data through 10/28/25, with a focus on the Well 3–21y measure.

Please note:

- The report is **not yet fully aligned** with 2025 contract measures.
- **BMI data** is currently missing we're working with Highmark to include it in future reports.
- Combo 10 and Depression Screening are included but not part of 2025 expected measures.
 - Combo 7 (same as Combo 10 minus flu vaccine) replaces Combo 10 for 2025.

Measures expected in 2025 contract	Measures present in current quality report
Adolescent Immunization Combo 2	Immunizations for Adolescents: Combination 2
All-Cause Readmissions	All-Cause Readmissions: All Products (all ages)
Child and Adolescent Well-Care Visits	Child and Adolescent W ell-Care Visits
Childhood Immunization Status; Combination 7	Childhood Immunization Status: Combination 7
Lead Screening in Children	Lead Screening in Children
WCC: BMI	
wcc counseling for Nutrition	Weight Assessment & Counseling Children/Adolescents: Nutrition
	Counseling
WCG COURSELING TO PRIVSICAL ACTIVITY	Weight Assessment & Counseling Children/Adolescents: Physical
	Act. Counseling
Well-Child Visits in the First 30-Months of Life (0-15 Months)	Well-Child Visits in the First 15 Months. Six or more visits
Well-Child Visits in the First 30-Months of Life (15-30 Months)	Well-Child Visits Age 15 Months - 30 Months. Two or more visits
	Childhood Immunization Status: Combination 10
	Screening for Depression



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KidWell Resources:

New AmeriHealth Reports Available on SFTP

The latest AmeriHealth quality reports are now posted on the SFTP portal.

Reporting includes:

- Gaps in care with payer claims through 9/30/25
- Internal data through 10/28/25

Please reach out to <u>@mark.wanner@nemours.org</u> if you need any assistance accessing or reviewing your reports





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KidWell Resources:

***** Education & Training

Now Available: Motivational Interviewing in the Immunization Space

The Motivational Interviewing in the Immunization Space course is now live on the Nemours Children's Health CE platform.

Presented by **Dr. Kate Smith, MD, MPH** from the **Immunization Coalition of Delaware**, this 1.0-credit session helps providers strengthen communication skills around vaccine hesitancy and refusal.

Participants will learn to:

- Differentiate between vaccine-hesitant and anti-vaccine families.
- Apply motivational interviewing techniques to support open, effective vaccine conversations.

Access the course here



Online - Motivational Interviewing in the Immunization Space | Nemours Children's Health CE

Dr. Kate Smith from the Immunization Coalition of Delaware speaks to the KidWell Network about motivational interviewing in the immunization space given the current climate of vaccine refusal and hesitancy.

in nemours.org





Motivational Interviewing in the Immunization Space

Kate Smith, MD, MPH
Program Manager,
Immunization Coalition of Delaware





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KidWell Resources:

HEDIS Reminder: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (Ages 3–17)

A friendly reminder about this important yearly documentation requirement that supports high-quality, measurable care for your patients.

What counts (all 3, same measurement year)

1. BMI Percentile (Dx code required)

- Bill a pediatric BMI-for-age diagnosis (Z68.51–Z68.56):
 - Z68.51: <5th %ile (underweight)
 - Z68.52: 5th-<85th %ile (normal)
 - Z68.53: 85th-<95th %ile (overweight)
 - Z68.54: ≥95th-<120% of 95th %ile (obesity class 1)
 - Z68.55: ≥120%-<140% of 95th %ile (obesity class 2)
 - Z68.56: ≥140% of 95th %ile (obesity class 3)

1. Nutritional Counseling (Dx code + specifics)

- Add Z71.3 and document specifics (not just "healthy diet discussed"):
 - e.g., plate method, sugary drinks reduction, fiber goals, referral to dietitian/Healthy Living program, handout given.

1. Exercise Counseling (Dx code + plan)

- Add Z71.82 (or Z02.5 if during school physical) and document:
 - Baseline activity, tailored recommendations, safety guidance, goal/plan (e.g., "60 min MVPA daily; start with 20 min after school M/W/F").

Pro tip: Complete during the annual well-child visit for ages 3–17 so all three elements are captured together.

Fast charting snippet (paste + customize)

- BMI-for-age: %ile = ___ (per CDC growth chart, ht/wt verified).
- Nutrition counsel (Z71.3): Reviewed ___; family goals: ___; materials/referral: ___.
- Activity counsel (Z71.82): Current ___; plan ___; goal start date ___; follow-up at ___.

Common pitfalls (and fixes)

- Missing Dx codes: Add Z68.5x and Z71.3 and Z71.82 (or Z02.5 for school physicals).
- Vague notes: Include specific actions (targets, referrals, handouts).
- Separated services, lost credit: If done on different dates, ensure each element is clearly documented within the same measurement year.

Documentation questions?

Valerie Bica – <u>valerie.bica@nemours.org</u> Viji Anchan – <u>viji.anchan@nemours.org</u>



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Resource: CHE Education

SEASONAL SICKNESS EDUCATION BRING CHE TO YOUR PRACTICE!

The Community Health Education (CHE) Team is here to support your patients and families with engaging, interactive programs that make a difference.

Fight now is the perfect time to request a CHE program — especially their Seasonal Sickness education session for parents and children.

This 30-minute program helps families:

- Understand the difference between cold, flu, and COVID-19 symptoms
- Learn who needs seasonal vaccines and why
- Know when to call the doctor
- Get practical tips to stay safe during cold and flu season

Why it matters:

Having the CHE team facilitate this session in your practice enhances patient care, improves vaccine confidence, and gives families the tools they need to manage seasonal illness.

To request a session for your practice, please Click link below redcap.nemoursresearch.org/redcap/surveys/?s=NF4DNXMLFTYDLKKX

CHE will also join our upcoming Q-Connect, Nov 5, 2025 —stay tuned!







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KidWell Resources Updates:

Vax Vibes Central: Get Ready to Rumble (with the Flu!)

Hello KidWell Community! As you gear up for a new week, here's your quick influenza roundup and ready-to-use resources for teams and families.

Local Surveillance

- **Delaware:** Influenza Overview Data 2025–2026 Season (My Healthy Community)
- Pennsylvania: Respiratory Virus Dashboard (PA DOH)
 - Note: RSV is included. Data was not updated this past week.

Network Snapshot

KidWell Community Flu Report Out: (COMING SOON!)

Communication Support

• Opt-In Verbiage (AAP): Talking with vaccine-hesitant parents and promoting confidence AAP Guidance

Education for Families (On-Site)

- Community Health Education Team can come to your practice to deliver seasonal sickness education.
 - Request a session
- Join them at Q-Connect: Nov 5, 1–2 p.m. (Virtual) overview of seasonal education offerings.

Practice Resource

Children's Hospital Association: <u>Vaccinate **With Confidence**</u> — New!! (Share with front-desk, MAs, care coordinators, and clinicians.)

Shout-Outs: Celebrate Your Staff

- Caught a non-clinical team member discussing vaccination with a family? We want to feature them!
- Send stories to Nicole.Schwegler@nemours.org for next week's update. CME Corner

Staff Scripting Card: Front Desk, MA, and Provider Prompts

 Use consistent messaging across your team to boost flu vaccination confidence and completion during visits!

Example Script:

Front Desk:

"Hi [Child's Name], has your child gotten their flu shot yet? We can do it today while you're here."

Niew the attachments in this email to print a full "Flu Scripting Card" for your team—ready to post at the front desk or keep on clipboards for quick reference.

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KidWell Surgical Corner

October 2025

CUTTING FDCFE

KEEPING PRACTICES SHARP WITH THE LATEST IN SURGERY

Pediatric Snoring & Sleep-Disordered Breathing (SDB)

Why It Matters in Primary Care Snoring in children is common—affecting roughly 10–12%—but when it's persistent or loud, it may be a red flag for sleepdisordered breathing (SDB).

SDB exists on a spectrum, from primary snoring to obstructive sleep apnea (OSA), where recurrent airway obstruction during sleep leads to fragmented rest, abnormal gas exchange, and potential neurocognitive, behavioral, and cardiovascular consequences.

Emerging evidence shows that even habitual primary snoring can be linked to learning and attention challenges—so early detection matters.



Questions or referrals?

<u>Email: surgerydepartment@nemours.org</u>

Volume 20

KidWell Surgical Corner

October 2025

^{2Z} Pediatric Snoring & Sleep-Disordered Breathing (SDB)

Common Risk Factors

- · Adenotonsillar hypertrophy (most common cause)
- Obesity
- Craniofacial anomalies (midface hypoplasia, micrognathia)
- Neuromuscular disorders
- Chronic nasal obstruction (allergic rhinitis, septal deviation, congestion)

Key Clinical Features

Nocturnal: Loud habitual snoring, witnessed apneas, restless sleep, mouth breathing, gasping/choking, or nocturnal enuresis

Daytime: Morning headaches, behavioral issues, hyperactivity/inattention (often mistaken for ADHD), daytime sleepiness (less common in children), poor growth, or school performance concerns

√ Evaluation in Primary Care

- Obtain a detailed sleep history (frequency/severity of snoring, apneas)
- · Examine for adenotonsillar hypertrophy, nasal obstruction, or craniofacial anomalies
- Use caregiver reports and, when possible, validated screening tools such as the Pediatric Sleep
 Questionnaire

When to Refer

ENT Referral:

- Suspected OSA with adenotonsillar hypertrophy
- Persistent snoring + enlarged tonsils/adenoids
- Chronic nasal obstruction unresponsive to medical therapy

Sleep Study (Polysomnography):

- Unclear diagnosis or mismatch between symptoms and exam
- Age <2 years or comorbidities (obesity, Down syndrome, craniofacial/neuromuscular disorders, sickle cell disease)
- Persistent OSA symptoms post-adenotonsillectomy
- Severe symptoms (frequent apneas, growth failure, cardiopulmonary disease)

Key Takeaways

- Not all snoring is benign persistent or symptomatic snoring warrants evaluation.
- **Adenotonsillectomy** remains first-line for most healthy children with OSA and adenotonsillar hypertrophy.
- Early identification and referral can prevent long-term cognitive, behavioral, and metabolic complications.
- Collaboration between primary care, ENT, and sleep medicine is essential, especially in complex or high-risk cases.

Encourage families to mention snoring during well visits — it could be the key to improving sleep, behavior, and learning outcomes.



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KidWell Annoucements:



Q-Connect

Date & Time

Wednesday, November 5th 1:00 PM - 2:00 PM

KidWell LLS (Lunchtime Lecture Series)

Date & Time

Tuesday, November 18th 12:00 PM – 1:00 PM

24

25



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KidWell Meeting Details

NEW NAME, NEW TIME Q—CONNECT

We're continuing the momentum! As a reminder, **QCMC meetings are now Q-Connect** — your space for collaboration, learning, and connection across the KidWell Network.

Q-Connect Purpose:

A dedicated space to collaborate, share updates, and innovate together. Each session focuses on reviewing network quality performance, strengthening workflows, exchanging best practices, and driving improvements in patient care—all while building stronger connections across our community.

Virtual Meeting Time:

(**) Meetings alternate between 12–1 PM and 1–2 PM each month.

Upcoming Schedule:

- Nov 5, 2025 1-2 PM
- Dec 3, 2025 12-1 PM



Looking Ahead:

Keep an eye out for your **new 2026 Q-Connect calendar invites**—coming soon! We can't wait to continue advancing quality, connection, and collaboration into the new year.



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KidWell Meeting Details



Q-CONNECT

Join us on Tuesday, Nov 5, 2025 - 1-2 PM



Featuring the Community Health Education (CHE) Team

Join us at our next **Q-Connect Meeting** where the **Community Health Education** (CHE) Team will be our featured speakers!









They'll share how their interactive, family-focused programs—like the **Seasonal Sickness Education Session**—can help practices strengthen preventive care, improve vaccine confidence, and empower families to manage common illnesses.

Don't miss this session to learn how partnering with CHE can make a lasting impact in your practice and community!



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KidWell Meeting Details

SPOTLIGHT



Kidwell LLS (Lunch Time Lecture Series)

<u>Join us on Tuesday, November 18, 2025, 12 PM- 1 PM </u>

Join us for this month's **KidWell LLS**, where we spotlight one of the most pressing topics in pediatric care—**Bariatric Surgery in Children**.

Featured Guest Speaker: Kirk Reichard, MD, MBA, FACS, FAAP

Surgical Director, Metabolic and Bariatric Surgery

Dr. Reichard will share his expertise and insights on how bariatric surgery is evolving to address **severe childhood obesity** and improve long-term outcomes for pediatric patients.

🥊 What You'll Learn:

- Defining severe obesity in childhood
- Indications & contraindications for metabolic and bariatric surgery (MBS) in children
- Long-term benefits and potential complications
- Open Q&A with Dr. Reichard

Don't miss this opportunity to **engage, learn, and connect** with peers in the KidWell community.

* Grab your lunch and join us for an impactful session that could shape your approach to pediatric care!





<u>Monthly newsletter</u>

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Additional Resources:

Preparing for the Respiratory Virus Season

As we enter the fall and winter months, it's important to stay informed about prevention strategies for **RSV**, **flu**, **and COVID-19**. The **American Lung Association** is hosting a webinar to help healthcare professionals and community members prepare for the 2025–2026 respiratory virus season.

The session will cover vaccination recommendations, prevention strategies, and key updates for adults with chronic lung disease.

• Date: Thursday, October 30, 2025

Time: 1:00 PM - 2:00 PM

Click the link below for more information and to register:

<u>Preparing for the Respiratory Virus Season | American Lung Association</u>



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Additional Resources: Immunization Coalition of Delaware –At a Glance

- 🗂 Week in Review October 20, 2025
- Respiratory Virus Season 2025–2026 CDC Summary:

Acute respiratory illness activity remains low nationwide and in Delaware. (No updates since September 26.)

Respiratory Virus Season 2025–2026 (Nationwide & Delaware Summary)

ED Visits

COVID-19: Low

• Influenza: Very Low

RSV: Very Low

Community Levels (Wastewater)

COVID-19: Very HighInfluenza: Very Low

• RSV: Limited



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Additional Resources:

Immunization Coalition of Delaware –At a Glance

Delaware Dashboards (MyHealthyCommunity)

Flu

• New Cases (Wk 41): 10

• Total Cases: 19

Hospitalizations: 0

• Vaccine Doses Administered: 96,567

• % Vaccinated: 9.6%

• Wastewater Levels: Very Low

COVID-19

New Cases (Wk 41): 56

• Total Cases: 170

• Hospitalizations: Avg Daily: 2.9

• Vaccine Doses Administered: 30,259

% Vaccinated: n/a

• Wastewater Levels: Low

M Cases by County

Flu

• New Castle: 6

• Kent: 1

• Sussex: 12

COVID-19

New Castle: 18

• Kent: 18

• Sussex: 18

Measles 2025 (as of Oct 15)

Nationwide Totals:

- 1,596 confirmed cases across 42 jurisdictions
- 44 outbreaks (3+ related cases)
- 1,380 outbreak-associated cases
- 23 cases among international visitors
- 3 deaths

By Age Group:

- Under 5 yrs: 430 cases (27%) → 95 hospitalized (22%)
- 5-19 yrs: 626 cases (39%) → 43 hospitalized (7%)
- 20+ yrs: 527 cases (33%) → 59 hospitalized (11%)
- Unknown: 13 cases (1%) → 0 hospitalized

•

^{*}sharing helpful updates from our partners and trusted sources



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Additional Resources:

Immunization Coalition of Delaware –At a Glance

In the News

- Governors form bipartisan Public Health Alliance
- Cambodia confirms 16th H5N1 case in 2025
- Christen Linke Young sworn in as new Secretary of Health & Social Services
- USDA reports new H5N1 detections in wild waterfowl
- Global Polio Eradication Initiative reports five new cases
- Los Angeles County confirms second locally acquired clade 1 mpox case
- Southern Hemisphere data: flu vaccine effectiveness ≈ 50%

E Resources & Expert Insights

- <u>VaccineInformation.org</u> launches new travel vaccine hub
- ACIP recommendations from September meeting now official: MMRV & 2025–2026 COVID-19 vaccine
- CMS billing codes may differ for same-visit COVID-19 & Medicare Part B vaccines
- Common Health Coalition publishes Shared Clinical Decision-Making Guide for Respiratory Vaccines

Ask the Experts:

Measles and MMR Vaccination
2025–2026 Season Influenza and RSV Immunization



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X Tools & Resources

• AAP Pediatric Coding Newsletter (see attachments).





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Nominate a Stellar Colleague!

Do you know a coworker who consistently goes above and beyond? We want to celebrate their dedication in our Kudos Corner!

Shape the Newsletter!

We're always looking for ways to improve the departmental newsletter. Do you have ideas for future content, suggestions for topics, or feedback on the format? We value your input!

Share your thoughts and suggestions with Asya Richardson directly at asya.richardson@nemours.org.

We value your feedback and participation! **Contact Us:**

Dr. Maria Petrini: Maria.Petrini@nemours.org - 302-559-7716

David Cruz: David.Cruz@nemours.org - 302-304-1351

Asya Richardson: Asya.Richardson@nemours.org - 302-393-1886 **Nicole Schwegler:** Nicole.Schwegler@nemours.org - 302-573-0202

See you next month! The KidWell Network Team





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KidWell Resources Updates:

Check out our newly upgraded website

<u>KidWellnetwork.org</u>

Direct Access to KidWell Clinical Pathways
https://kidwellnetwork.org/clinical-pathways.html

VISIT OUR WEBSITE

