



SEPTEMBER/OCTOBER 2018 OK PEDIATRICIAN



Hello, Friends!

I hope you'll forgive my longer letter this time. I have more announcements than usual. Our most recent OKAAP board call was a busy one. Along with our usual business, we agreed to add FOUR new committees. These are based on members who have approached the board to champion specific interests and include committees on:

1) *Trauma Informed Care* chaired by Laura Shamblin, MD, pediatrician in Oklahoma City, 2) *Pediatric Emergency Medicine* chaired by Ben Rossavik, DO pediatric resident in Tulsa at OSU, 3) *Immunization Education*, and 4) *Global Health Outreach*-these last two will be chaired by Stanley Grogg, DO, pediatrician in Tulsa. See Dr. Grogg's newsletter article on global health outreach in this edition of the newsletter. We will provide additional information on the committees and activities in upcoming newsletter editions and on our website.

I'm pleased to announce that Dwight Sublett, MD, pediatrician in Stillwater and current OKAAP vice president, and Marny Dunlap, MD, pediatrician at OUHSC Department of Pediatrics in OKC and OKAAP secretary/treasurer-elect, accepted the OKAAP and OUHSC positions respectively on the new *SB 1517 Trauma Informed Care Task Force* that we were successful in helping to get passed in the last legislative session. This Task Force will last for three years and will study and make recommendations to the OK Legislature on best practices with respect to children and youth who have experienced trauma. It will include 17 unpaid representatives appointed by their respective agencies from OKAAP, OUHSC, OSDH, OSDMHSAS, DHS, OSDE-SoonerStart, OSDE-not from SoonerStart, OJA, Council on Law Enforcement and Training, OK Commission on Children and Youth, Indian Health Services, OHCA-SoonerCare, Office of the Attorney General, OSU Center for Integrative Research on Childhood Adversity, OSMA, OK Institute for Child Advocacy, and the OSU Institute for Building Early Relationships. Dr. Shamblin will also serve as an alternate for the OKAAP representative.

MARK YOUR CALENDAR - 2018

- ◆ Pediatric Roadshow: September 25
- ◆ Tobacco Stops with Me -10th Anniversary Event: Oct. 10
- ◆ OK Institute for Childhood Advocacy Fall Forum: Oct. 25
- ◆ NCE: November 2-6

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As I've mentioned previously, we have been making attempts to identify lobbying resources. Dwight and I, along with Don Wilber, MD-pediatrician in OKC and former OKAAP president, now chair of our legislative committee will be meeting later in August with two lobbyists who work with OAFP. In preliminary discussions, they may be able to provide lobbying services at a more feasible rate than we were able to negotiate previously. We'll update you after the meeting.

Dwight and I have been meeting with the OK Patient's Coalition headed up by the OK Osteopathic Association. The coalition is working on various topics related to protecting patient safety, including recent medical marijuana legislation among others.

Lastly, with mixed emotions, I want to announce that I must say goodbye as OKAAP president before my 3-year term expires in June 2019. I've accepted a position as the Chief of the Division of Developmental and Behavioral Pediatrics at the University of Alabama in Birmingham. While I'm excited about this new chapter in my life, it also means that I will be leaving Oklahoma in December necessitating that I resign as OKAAP president six months early. *Continued on page 2...*



LETTER FROM THE PRESIDENT CONTINUED FROM PAGE 1

Per OKAAP bylaws, the sitting vice president automatically moves in to the president position if the current president vacates the role. Fortunately, Dwight has graciously agreed to step in as president six months early upon my departure. Also, per the bylaws, the immediate past president serves as the Nominating Committee Chair. Therefore as immediate past president, Eve Switzer has nominated Paul Darden, current secretary/treasurer, to move up to the vice presidency position. At our spring meeting, Marny Dunlap was nominated and elected as the incoming secretary/treasurer. Eve nominated her to begin in that role six months early as well. A call for voting on these changes will be emailed to our membership so please vote to help us have a smooth succession process.

I have so enjoyed the privilege of being a member and leader in OKAAP during my time in Oklahoma. As a newcomer to the state fourteen years ago, OKAAP provided me with a very important professional home. Through the years since, OKAAP has meant I have an amazing networking resource full of colleagues who share my passion for improving kids' and families' lives. I am grateful for the mentoring so unselfishly provided from my leadership predecessors and successors-thanks for all you do and for saving my hide on multiple occasions...Many fellow OKAAP members have become cherished friends who I will miss dearly. I forever remain in awe of the dedication to child and family well-being and the passion OKAAP members and board members bring to making our state a better place for them.

And as usual, thanks especially to my friend, Amy Prentice, OKAAP executive director. This time, though, thanks to you not just for the great newsletter you create for us, but really for... BEING OKAAP! Without you, we wouldn't be able to do even an eighth of all this important stuff we get done together.

Cheers My Friends,

Laura

MYTH

vs

FACT

[Download the Immunizations Fact Sheet for your office >](#)

Provided by the Oklahoma Alliance for Healthy Families



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AMERICAN ACADEMY OF PEDIATRICS

MEDICAID REPORT

Notes on SoonerCare Reimbursement & the Proposed Work Requirement - By Dr. Dwight Sublett

As a member of the OCHA Medical Advisory Committee (MAC) and Chair of the Chapter Medicaid Committee, I would like to provide some updates on a few key issues regarding SoonerCare. The MAC last met on July 19th, and the main topic of discussion was the work requirement for Medicaid recipients in certain categories to continue to receive health care coverage. This work requirement applies to adults ages 19-50, whose income is 41% of the federal poverty level or less. For a family of three, this adds up to \$779 per month or less. The individuals involved are required to work 20 hours weekly or they can provide community service. If the individual's income, through their work, exceeds this level of 41% FPL, then they will also be disqualified for healthcare coverage. There are numerous ways that adult Medicaid recipients can be exempted from this requirement of which I will not enumerate here. Because of these exemptions, however, of the 184,000 adult Medicaid recipients in the state in this age category, only 6,000 individuals actually qualify for the program at this point! It is my opinion that this is a very unfair, immoral mandate from the legislature that singles out a very select group of the poorest Oklahomans. Also, of great significance, this program will directly affect the health and well-being of the children of these families. Because of these concerns, with the help of the National AAP office, a letter was drafted expressing our discontent as pediatricians with this entire mandate and was recently submitted to OHCA prior to the September 3rd comment period deadline. [Click here to read the letter.](#)

OHCA is accepting public comments on this proposed waiver. You can read the comments and lend your own at <https://okhca.org/xPolicyChange.aspx?id=22257&blogid=68505>

There is good news regarding provider reimbursement in that the rate will go up 2% from 84% to 86% of Medicare for this coming year. There will continue to be a push over the coming months to try to restore payment back to the intended level of 100% of Medicare, which was in the contract that was completed in 2010 and was in place for a couple of years prior to the downturn in the state's economy. As you know, the provider rate has been steadily decreasing down to the 84% level, up until this year. I encourage you to talk to your legislators in your district and urge them to continue to increase these provider rates in order that we can continue to maintain and recruit well trained primary care physicians and specialists to all areas of our state.

Dwight Sublett, MD, FAAP

OKAAP Vice President

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GLOBAL HEALTH OUTREACH

Many healthcare professionals are completing global health outreach trips. Studies have indicated the people who volunteer tend to live longer. To quote Yasemin Saplakoglu, Staff Writer for Live Science, "People who volunteer for selfless reasons, such as helping others, live longer than those who don't lend a helping hand."^{1,2}



Malaria

This new series will highlight global health outreach in addition to global travel. Included will be resources for those desiring to attend global health trips. Other topics will include immunizations for international travel and traveling with children.

Several faith-based agencies provide global health outreach trips from the USA. One resource is the Christian Medical and Dental Association (CMDA), with a 15,000 membership. CMDA conducts overseas medical evangelism projects through its mission arm. The New England Institute of Jewish Studies, in coordination with the Schlesinger Institute and Shaare Tzedek Medical Center provides a four-week summer program based in Jerusalem.⁴ UC Davis Global Health lists numerous other agencies for global health.⁴ The American Muslim Association highlights an "International Medical Missions; One Eye-Opening Experience."⁵

Many medical global outreach programs are non-faith based as some developing countries do not approve Visas if "religious" is checked for the reason of travel. In Vietnam, global health teams may be scrutinized and closed if there is a concern of ministering to anyone, including making simple conversation, praying for general blessing, praying for specific needs (e.g. healing) and sharing testimony.⁶ A personal example was our non-profit humanitarian organization, Power of a Nickel (www.powerofanickel.org) which had documented government approval for a global health outreach program but the local officials thought we might be evangelizing in a tribal area outside of Ho Chi Minh City and a police team of nine arrived at our site and did not allow any further patients to attend.

The American Academy of Pediatrics (AAP) "works with the U.S. government, other partners, and through the International Pediatric Association to ensure that global health is funded, and children everywhere have access to the care they need to survive and live healthy lives. In 2013, 5.9 million children globally died from easily preventable or treatable causes."⁷ The AAP section on International Child Health is also involved with underserved children of the world.⁸



Author: Stanley E. Grogg, DO, stanley.grogg@okstate.edu) is a fellow of both a Fellow of the American College of Osteopathic Pediatricians and the American Academy of Pediatrics. He is Professor Emeritus in Pediatrics at the Oklahoma State University-Center for Health Sciences. He was certified in Pediatrics in 1978 by the American Osteopathic Board of Pediatrics and received a Certificate in Travel Medicine by the International Society of Travel Medicine in 2003. In 2015, Dr. Grogg received a Special Achievement Award from the AAP after nomination by the OK Chapter for global medical outreach.

Conflict of Interest: Dr. Grogg is Chair of a non-profit organization, Power of a Nickel (www.powerofanickel.org) which led medical global health outreach teams to Uganda, Vietnam, India, Belize, Ukraine, Mexico and Greece in the last 12 months.

If interested in participating or hearing more about Power of a Nickel, a FUNRaiser will take place at the Mike Fretz Event Center in Tulsa on Sept. 6 at 6:30 pm. Tickets and donations can be purchased and given at www.powerofanickel.org. Fun, food, silent auction of international products from countries visited and a live auction will be part of the function.

References:

1. Volunteers live longer: <https://www.livescience.com/15978-volunteers-live-longer.html>. (accessed 8/14/2018)
2. Volunteers live longer and have happier lives: <https://www.alternet.org/books/two-studies-show-volunteers-live-longer-and-happier-lives>. (accessed 8/14/2018)
3. Christian Medical and Dental Association: <https://www.charitynavigator.org/index.cfm?bay=search.summary&orgid=3505>. (accessed 8/14/2018)
4. Jewish Global Health Outreach: http://globalhealth.ucdavis.edu/student_resources/International%20Opportunities/Outside_Opportunities.html (accessed 8/14/2018)
5. American Muslim Association: <http://www.amhp.us/international-medical-missions-one-eye-opening-experience/>. (accessed 8/14/2018)
6. Vietnam and religious reference: <https://world-outreach.com/vietnam-short-term-mission-exposure>. (accessed 8/14/2018)
7. AAP Global Health: <https://www.aap.org/en-us/advocacy-and-policy/federal-advocacy/Pages/GlobalChildHealth.aspx> (accessed 8/14/2018).
8. AAP Section on International Health: <https://www.aap.org/en-us/about-the-aap/Sections/Section-on-International-Child-Health/Pages/SOICH.aspx>. (accessed 8/14/2018).



NEW CHAPTER CHAMPION!

OKAAP is pleased to welcome Dr. Grogg as the Chapter Champion and Committee Chair of two newly formed committees on Global Health Initiatives and Immunization Education. Global health outreach has been a passion of Dr. Grogg and his wife, Barbara, for many years and they are the founders of the non-profit Power of a Nickel. Dr. Grogg also serves on the Advisory Committee of Immunization Practices (ACIP). His notes on 16-year old immunizations visits [can be found here](#).

To learn more about the initiatives that Chapter members and leaders are working on, visit www.okaap.org/chapter-committees.



AAP EHDI PATIENT CHECKLIST FOR PEDIATRIC MEDICAL HOME PROVIDERS

By the Oklahoma Newborn Hearing Screening Program



Any degree of hearing loss can negatively impact a child's speech, language, social and emotional development, and academic success. Unfortunately, babies cannot tell us if they can hear. Therefore, infant hearing screening was developed to provide a quick, harmless and effective way to determine if a baby can hear sounds needed for speech and language. The earlier children are diagnosed with hearing loss and begin early intervention services, the more likely they are to reach their full potential. Pediatric Medical Home providers can be vital in assisting families through the Early Hearing Detection and Intervention (EHDI) process by following national guidelines.

According to the American Academy of Pediatrics (AAP), "hearing loss is the most common congenital condition in the United States (US). Each year, an estimated three in 1,000 infants are born in the US with moderate, severe, or profound hearing loss resulting in delayed development in language, learning, and speech. Children who are deaf or hard of hearing face a potential developmental emergency and should be identified as quickly as possible so that appropriate intervention services can be started."

To address these issues, the AAP has developed several tools and resources that Primary Care Clinicians can use to guide the primary areas of focus for promising practices and processes within EHDI. One of those tools is the Early Hearing Detection and Intervention (EHDI) Patient Checklist for Pediatric Medical Home Providers. This one page document is a child specific checklist to track and monitor an infant's:

- Hospital-based Inpatient Screening Results
- Outpatient Screening Results
- Pediatric Audiology Evaluation
- Enrollment in Early Intervention (IDEA, Part C)
- Medical Evaluations to determine etiology and identify related conditions
- Ongoing Pediatric Audiology Services

Oklahoma EHDI encourages Medical Home providers to utilize this checklist with individual patients to ensure timely follow-up through the EHDI process. For a copy of the checklist, visit https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/PEHDIC/Documents/Checklist_2010.pdf.

To learn more about the Oklahoma Newborn Hearing Screening Program or gather resources for families please send an email to NewBornScreen@health.ok.gov

OKLAHOMA'S RESIDENT IN THE SPOTLIGHT

Hina Rehman is currently a third year pediatric resident at the University of Oklahoma Health Sciences Center in Oklahoma City. Hina is a native Texan who grew up in the sweet city of Sugar Land, located right outside of Houston. Growing up surrounded by a family of physicians and engineers, she was always fascinated by science and knew she wanted to pursue a career in medicine.



She attended the University of Houston where she graduated with a Bachelor of Science in Biomedical Engineering. Through her experience in engineering, Hina gained valuable problem-solving and critical thinking skills which are an asset to her career as a physician. After college, Hina worked as an academic consultant and spent her extra time volunteering at the local literacy council as an ESL tutor. She enjoyed working with a diverse population made up of all age groups, but especially loved interacting with the kids she taught.

She earned her medical degree at the University of Texas Medical School at Houston, now McGovern Medical School. During medical school, she was actively involved in her school's Pediatric Student Association and participated in a summer pediatric preceptorship to gain further exposure to the field. Additionally, she had the opportunity to travel to Riobamba, Ecuador as part of a study abroad program, where she was able to build her Spanish-speaking skills, work alongside physicians, and promote health advocacy through community outreach events. It was a culmination of these experiences that helped solidify her desire to become a pediatrician. She loved the breadth and diversity of disease processes pediatrics offered, as well as being able to interact with patients and their families.

Hina is thankful to have such a large and loving family that has supported her in all her endeavors. She enjoys spending time with her family and friends, as well as traveling whenever she has the opportunity. She loves to entertain and continues to find joy in baking and cooking. She will find any excuse to experiment in the kitchen and discover new recipes. After residency, Hina hopes to further her passion for acute care and pursue a fellowship in Pediatric Emergency Medicine.



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PEDIATRIC MANAGEMENT
INSTITUTE
ROADSHOW
2018



WHO SHOULD ATTEND?

Office Managers, Administrators and Supervisors who want to learn practical steps they can take to improve a Pediatric practice.

ROADSHOW OVERVIEW

This seminar is designed to provide participants with a better understanding of the nuances of operating a Pediatric medical practice. Through lecture, case studies and discussion, attendees will expand their knowledge to equip them with running a successful Pediatric practice.

SCHEDULE

Registration	8:30AM
Introduction/ Welcome	9:00AM
Customer Service In Pediatrics (KIDS)	9:15AM
Break- Snacks, Soda, & Coffee Provided	10:15AM
Essential Financial Reports to Run Each Month	10:30AM
Outsourced Billing An Option to Consider?	11:30AM
Complimentary Luncheon	12:15PM
Maximizing Provider Schedules	1:00PM
HIPAA Update - What You Should Be Doing Today	2:00PM
Break- Snacks, Soda, & Coffee Provided	3:00PM
Theft-Proofing Your Office	3:15PM
Most Common Issues To Fix In A Pediatric Practice	4:00PM
Group Discussion On How To Implement Ideas In Your Practice	4:30PM
Roadshow Adjourns	5:00PM

Special Offer

When you register, you will receive a free copy of the *Pediatric Budgeting eBook*. Over 65 pages to guide you in creating a practice budget. \$95 value!

Paul Vanchiere, MBA

REGISTER TODAY!

Seating limited in all venues to ensure optimal learning

WHO IS PMI?

Pediatric Management Institute (PMI) is a physician practice management consulting firm owned by Paul Vanchiere, MBA - a seasoned Pediatric practice manager with over 20 years of healthcare management experience. PMI is committed to helping Pediatric practices solidify their financial and operational concerns so they can focus on providing care to children.

PMI offers a variety of services including practice management seminars, online learning and consulting services (practice assessments, financial reviews, practice valuations, business intelligence solutions, and customer service training). Because PMI's consultants have worked "in the trenches" of varying size Pediatric practices, PMI knows how important it is to provide timely, accurate and practical business advice for your practice.

PMI GUARANTEE

As with all PMI events, if you feel you did not get your money's worth, let us know and we'll refund the fee!

REGISTRATION FEE \$195

Fee covers lunch, snacks, beverages, and copies of all presentation materials.

Tulsa, OK - Tuesday September 25, 2018 DoubleTree- Warren

Visit www.PediatricSupport.com for registration and venue details.

WHAT PEOPLE HAVE SAID ABOUT PAST PMI EVENTS...

"Hands down, the PMI offers the best topics and knowledgeable speakers to help you revitalize your Pediatric practice."

"PMI - Where independent Pediatricians go to share experiences and learn new strategies to make their practices more successful."

"One stop for relevant, timely practice action items that you need to implement in order to succeed moving forward... Period."

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BE PREPARED TO VOTE KIDS!

The national midterm elections are Tuesday, November 6, 2018. All 435 seats in the U.S. House of Representatives and 35 of the 100 seats in the U.S. Senate will be contested. While children can't vote, pediatricians and those who care for children can. From clinics to state capitals to Congress, the AAP has one message for elected leaders: put children first. Voting with children in mind is a small act that can make a big difference.

Download the AAP VoteKids Toolkit below to access sample social media messages, op-ed guidelines and graphics you can use on Facebook and Twitter.

The full suite of resources can be found at aap.org/votekids.

Download the AAP
#VoteKids Toolkit



SAVE THE DATE FOR THESE UPCOMING EVENTS



TOBACCO STOPS WITH ME.

10th Anniversary Event

— October 10th | 10 a.m. —

Oklahoma History Center, OKC



Dr. Dean Atkinson



Dr. Laura Chong



Dr. Richard Hatch



Dr. Bret Haymore



Dr. Greg Metz



Dr. Patricia Overhulser



Dr. Shahan Stutes



Karen Gregory,
DNP



Stefanie Rollins,
APRN, CNP



Elisa Thompson,
APRN, CNP



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NEWS AND OPPORTUNITIES

Chapter Committees - Opportunities to Be More Involved

Interested in joining or chairing a Chapter committee or becoming a Chapter Champion? The Chapter Board meets regularly via phone conference where committee members provide updates and reports on committee activities. So anyone can participate no matter where they are located. Below is a list of current Chapter committees and the OKAAP members who serve as a chair or champion for these initiatives. Contact the Chapter today to request more info or to present a new committee idea.

- ⇒ **Childhood Obesity** -Ashley Weedn, MD, MPH, FAAP; Ed Legako, MD, FAAP
- ⇒ **Legislative**- Don Wilber, MD, FAAP
- ⇒ **Medicaid** -Dwight Sublett, MD, FAAP & Kanwal Obhrai, MD, FAAP
- ⇒ **Asthma** -Nighat Mehdi, MD, FAAP
- ⇒ **Senior Pediatricians**- Tawfik Ramadan, MD, MPH, FAAP
- ⇒ **Disaster Preparedness** - Curtis Knoles, MD, FAAP
- ⇒ **Reach Out & Read** -Marny Dunlap, MD, FAAP
- ⇒ **Oral Health** -Edward Legako, MD, FAAP
- ⇒ **Cease Tobacco**- Curtis Knoles, MD, FAAP
- ⇒ **Behavioral Health** - Laura McGuinn, MD, FAAP
- ⇒ **Pediatric Research in Office Settings (PROS)** - Paul Darden, MD, FAAP
- ⇒ **Early Hearing Detection & Intervention (EHDI)** - Curtis Knoles, MD, FAAP
- ⇒ **Trauma Informed Care** - Laura Shamblin, MD
- ⇒ **Global Health Outreach** - Stanley Grogg, DO
- ⇒ **Immunization Education** - Stanley Grogg, DO
- ⇒ **Pediatric Emergency Medicine** - Ben Rossavik, DO
- ⇒ **Resident Relations Representatives**- Elizabeth Pflug, MD; Neal Sharma, MD; Ben Rossavik, DO
- ⇒ **Early Career Physicians (ECP) Representative** - Hokehe Effiong, MD, FAAP
- ⇒ **Community Access to Child Health (CATCH) Facilitator** - Raja Nandyal, MD, FAAP
- ⇒ **Early Childhood Champion** - Edd Rhoades, MD, FAAP
- ⇒ **Chapter Breastfeeding Coordinator (CBC)** - Malinda Webb, MD, FAAP
- ⇒ **Firearm Safety & Violence Prevention Champion** - Elaine Kennedy, MD, FAAP

Grant Opportunities

Immunization Quality Improvement Project

The AAP Chapter Quality Network (CQN) is seeking applications for the CQN Immunization Quality Improvement project to improve immunization rates for young children. Chapters are encouraged to share the [announcement](#) and [Request for Proposals](#) to learn more. A one-page abstract is due **September 4** and the application deadline is **September 26**. Questions? Contact [Suzanne Emmer](#), Director, Division of Chapter Quality Improvement Initiatives.

Federal Grant - Healthy Tomorrows Program

[Apply](#) by **October 1** for the Healthy Tomorrows Partnership for Children Program's (HTPCP) federal grant, which is administered through the Health Resources and Services Administration (HRSA). Grants will be awarded up to \$50,000 per year, up to five years. The program supports community-based child health projects that increase access to health services for mothers, infants, children, and adolescents. For additional information, view the [announcement](#) and direct questions to [Madhavi Reddy](#), HRSA Program Director.

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