

Withdrawal/Redaction Sheet

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
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001. fax	To Katie Button from Children's National Medical Center re: attendance (partial) (1 page)	09/23/99	P6/b(6)
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COLLECTION:

Clinton Presidential Records
First Lady's Office
Ruby Shamir (Subject Files)
OA/Box Number: 20365

FOLDER TITLE:

Children's Health/Children's Hospital [1]

2012-0565-S

ry1238

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

Freedom of Information Act - [5 U.S.C. 552(b)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or
financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President
and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of
personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed
of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C.
2201(3).

RR. Document will be reviewed upon request.

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of
an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial
information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of
personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement
purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of
financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information
concerning wells [(b)(9) of the FOIA]

Withdrawal/Redaction Marker

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CHILDREN'S NATIONAL MEDICAL CENTER
Children's Hospital Foundation
111 Michigan Avenue, NW
Washington, DC 20010

TO: ~~Katie Button~~
~~White House.~~

RS attended

FAX: (202) 456-6244

TEL: (202) 456-6266

Number of Pages: 1

Date: September 23, 1999

John Wm. Thomas, Vice President for Development
Phone: (202) 884-4530
FAX: (202) 884-5988
Executive Assistant: Lee Putsch
Phone: (202) 884-4214

This is to confirm that the following people will be attending the meeting with Ms. Verveer today at 4:00 p.m., September 23. Please note that Dr. Holbrook was unable to attend and Dr. Batshaw will be taking his place.

Mark Batshaw, SS [P6/(b)(6)] birth date: [P6/(b)(6)]
Jacqueline Bowns, SS [P6/(b)(6)] birth date: [P6/(b)(6)]
John Wm. Thomas, SS [P6/(b)(6)] birth date: [P6/(b)(6)]

[001]

We would like to bring the following agenda items to this meeting:

- Graduate medical education
- Pediatric research
- CHIPS eligibility and outreach
- Philanthropic agenda:
 - First Ladies Gala
 - Gates Foundation
 - Gifts to the Future Conference



Children's
National Medical Center.

John Wm. Thomas

*Vice President for Development
Chief Operating Officer
Children's Hospital Foundation*

111 Michigan Avenue, N.W.
Washington, D.C. 20010-2970
(202) 884-4530 • Fax: (202) 884-5988
E-Mail: jwthomas@cnmc.org



Children's
National Medical Center.

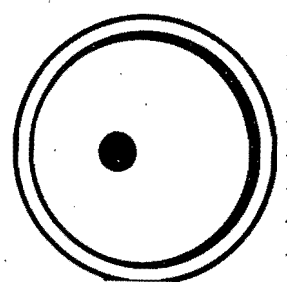
Jacqueline D. Bowens

*Vice President
Government and Public Affairs*

111 Michigan Avenue, N.W.
Washington, D.C. 20010-2970
(202) 884-4933 • Fax: (202) 884-5988
E-Mail: jbowens@cnmc.org

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Children's
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111 Michigan Avenue, N.W.
Washington, D.C. 20010-2970
(202) 884-5000

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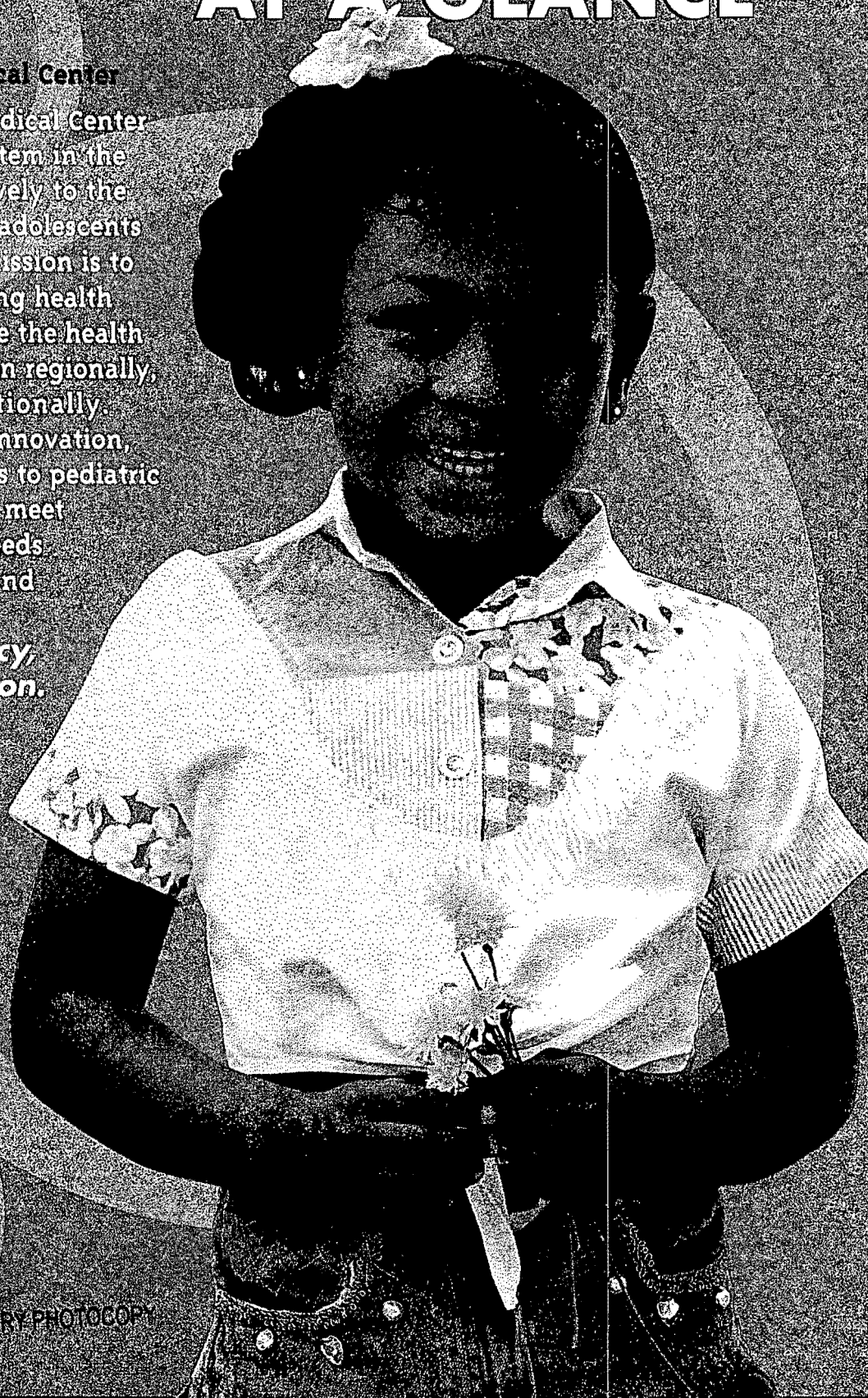
A member of the Children's Miracle Network

Children's does not discriminate on any grounds
including race, religion, sex, physical handicap,
national origin or sexual orientation.

Children's AT A GLANCE

Children's National Medical Center

Children's National Medical Center is the only health system in the region dedicated exclusively to the care of infants, children, adolescents and young adults. Our mission is to be preeminent in providing health care services that enhance the health and well-being of children regionally, nationally and internationally. Through leadership and innovation, CNMC will create solutions to pediatric health care problems. To meet the unique health care needs of children, adolescents and their families, CNMC will excel in **Care, Advocacy, Research and Education.** Our system is made up of several entities, and service lines within those entities:



CLINTON LIBRARY PHOTOCOPY

Children's Hospital

The cornerstone of our system, Children's Hospital, ranks among the top five pediatric hospitals in America.* Children's Hospital has 279 beds, 40 of which are dedicated to our neonatal nursery, and utilizes state-of-the-art technologies in the care of our patients. Children's staff of nationally and internationally recognized pediatric health care professionals brings its sophisticated care to thousands of families throughout the region, and to children from many foreign nations. The hospital serves as the regional referral center for pediatric emergency trauma care, as well as cancer, burn, neonatology and critical care. Children's is a leader in the development of innovative new treatments for childhood illness and injury.

* According to survey results listed in the July 20, 1998 issue of *U.S. News & World Report*.

Children's Outpatient Centers

Children's renowned specialists practice not only at Children's Hospital, but also at six Children's Outpatient Centers throughout the metropolitan area. These centers make it more convenient for families to take advantage of the clinical expertise offered by Children's.

Frederick

1564 Opossumtown Pike
Frederick, MD 21702
301-682-6661

Laurel

13922 Baltimore Avenue, Unit 4A
Laurel, MD 20707
301-369-4100/1-800-787-0006

Rockville

Shady Grove Medical Village
14804 Physicians Lane
Suites 122, 141, 173
Rockville, MD 20850
301-424-1755/1-800-787-0243

Upper Marlboro

9440 Pennsylvania Avenue
Upper Marlboro, MD 20772
301-868-5777/1-800-475-9932

Children's also has mini-regional outpatient centers that provide a limited scope of specialty care services outside metropolitan Washington, DC. These sites are located in Annapolis, Clinton, Easton, Hollywood, Prince Frederick, Salisbury, Silver Spring, MD; Manassas, VA; and Dover and Lewes, DE. Fluoroscopy and Ultrasound are available in Bethesda, MD. For radiology appointments, call 202-884-4700. For more information, call 202-884-BEAR or 1-888-884-BEAR.

Fairfax

3022 Williams Drive
Suites 100 and 200
Fairfax, VA 22031
703-573-9383/1-800-787-0467
*Expanded Neurology Services
in Northern VA*

3289 Woodburn Road
Suite 370
Annandale, VA 22003
703-573-9512

Spring Valley

4900 Massachusetts Avenue, N.W.
Suite 320
Washington, DC 20016
202-745-8860

Children's National Health Network

Children's National Health Network is an affiliation of more than 450 physicians that include community-based primary care pediatricians in Maryland, Virginia and the District of Columbia and specialists at Children's National Medical Center. The network offers all the care a family needs, from critical emergencies to primary care health concerns of children. It includes Children's Hospital, our six outpatient centers, suburban ambulatory surgical locations, home care services, two community-based health centers and a hearing and speech center in Washington, DC. In addition, the network provides comprehensive care from hospitalization to outpatient care in more than 40 subspecialties. As Children's Network aligns with insurance companies and employers throughout the area, it will offer you the finest pediatric care available.

Children's Pediatricians and Associates

Children's Pediatricians and Associates (CP&A) is a new entity of our health system, developed to purchase and manage pediatric practices. With CP&A, we assume the headaches of running a practice, so the pediatricians can do what they do best — take care of kids. In 1998, CP&A acquired its first two physician practices: Drs. Smith and Guarinello, Prince George's County pediatric practice and Drs. Feroli, Mella, Pedreira & Wollschlaeger, in Montgomery County.

Children's community-based health centers located in the District:

Children's Health Center*
111 Michigan Avenue, NW
Washington, D.C. 20010

Adolescent Health Center
111 Michigan Avenue, NW
Washington, DC 20010

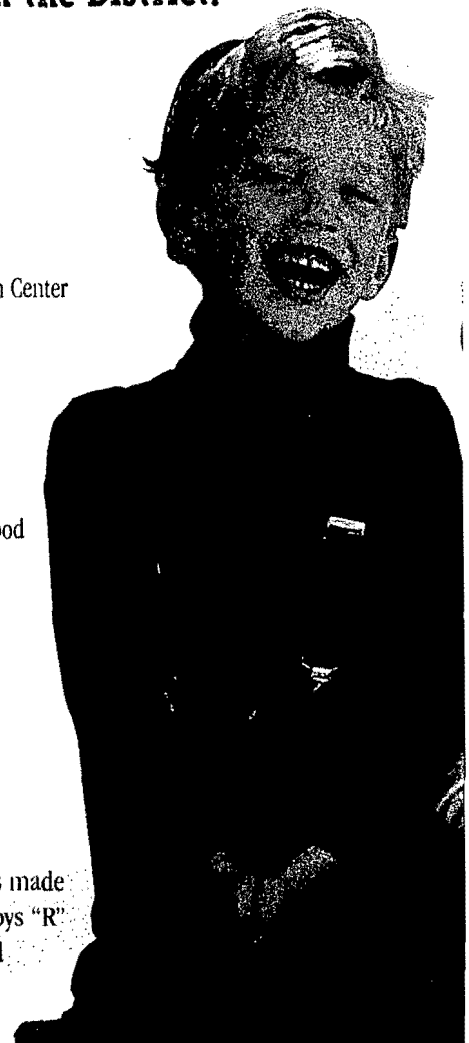
Comprehensive Pediatric Health Center
2220 11th Street, N.W.
Washington, DC 20001

Adams Morgan Health Center
2200 Champlain Street, N.W.
Washington, DC 20009

Scottish Rite Center for Childhood
Language Disorders
1630 Columbia Road, N.W.
Washington, DC 20009

All facilities can be located
through our Bear Line at
202-884-BEAR

* Children's Health Center is made possible by a grant from Toys "R" Us/Children's Benefit Fund.



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Children's Home Health Care

Children's Home Health Care is the area's preeminent home care program dedicated to children. Services such as infusion therapy and care for infants, children and adolescents with feeding disorders can be provided. We also care for infants, children and adolescents needing intermittent visits from nurses, physical therapists, occupational therapists and/or speech and language pathologists.

Children's Research Institute

Children's Research Institute (CRI) comprises six research centers: virology, immunology and infectious disease research; cancer and transplantation biology research; mechanisms of disease research; applied physiology research; neuroscience research; and health services and clinical research. Because CRI is located within the hospital, ground-breaking discoveries can be incorporated into patient care more quickly.

Children's Hospital Foundation

The Foundation is the fundraising entity of our system. Each year, individuals and corporations give millions of dollars to Children's Hospital through the foundation. These dollars go to help keep our technology on the cutting edge, and help us provide medical care to those children whose families don't have the resources to pay. To find out how you, your family and friends, or your company can make a difference, please call the Foundation office at 202-884-4522.

Facts on the fulfillment of our mission:

CARE

- ❑ Total licensed hospital beds: 279
(239 pediatric; 40 neonatal nursery)
- ❑ Individual children cared for in the hospital: 77,260
- ❑ Annual admissions to the hospital: 9,796
- ❑ Average length of stay: 6.5 days
- ❑ Emergency Room visits: 48,601
- ❑ Emergency Transport Service: 2,507
(infants and children)
- ❑ Visits to the outpatient centers: 69,563
- ❑ Surgical cases performed: 7,312
- ❑ Diagnostic imaging procedures performed: 65,000
- ❑ Laboratory tests performed: 665,624
- ❑ Patients have come to Children's from: all 50 states, the District of Columbia and many foreign countries: (46 percent Maryland; 42 percent District of Columbia; 11 percent Virginia; 1 percent other states and foreign countries)
- ❑ Full-time Equivalent Staff: 2,859
(Nurses: 541; Hospital-based attending Physicians: 230; Physicians in Training: 149; Administrative and other Professional staff: 1,939)
- ❑ Children's physicians provide clinical consulting services at more than 15 area hospitals.
- ❑ Volunteers: 800 individuals donated 53,500 hours of service.

ADVOCACY

- ❑ In FY 1998 Children's provided \$28.6 million in charity care.
- ❑ Children's is the largest non-governmental provider of primary care in the District of Columbia.
- ❑ Visits to Children's Community Pediatric Health Centers: 16,089
- ❑ Patients referred for services to the **Freddie Mac Foundation Child and Adolescent Protection Center**: 5,500.
- ❑ The hospital's National SAFE KIDS Campaign is the first and only national organization dedicated solely to the prevention of unintentional childhood injury - the number one killer of children ages 14 and under. More than 250 State and Local SAFE KIDS Coalitions in all 50 states, the District of Columbia and Puerto Rico comprise the Campaign. 202-662-0600.
- ❑ Children's AIDS prevention and treatment programs include **Project CHAMP**, which provides practical and emotional support for HIV-affected children and their families and HIV-related education for community-based caregivers of children and youth. The **Burgess Clinic** educates and cares for teens who are at risk or have HIV. Project CHAMP: 202-884-5450; Burgess Clinic: 202-884-5389.
- ❑ **The Great Kids program**, developed by CNMC, presents work-site seminars that provide working parents with practical approaches to the stress of parenting. 202-884-3851.
- ❑ **Adolescent Employment Readiness Center** offers individual assistance for teens with chronic illnesses or physical disabilities to help them prepare for employment and plan for their future. 202-884-3203.



- ❑ **Office of Ethics** provides consultation and support for parents and staff about moral dilemmas in the treatment of children. The Institutional Ethics Forum (IEF) is multidisciplinary and includes members of the community. 202-884-3201 and 202-884-3066.

RESEARCH

- ❑ There were 161 funded research projects in CRI during FY 1998.
- ❑ The CRI grant/contract portfolio for FY 1998 was \$16.2 million; more than 50 percent of which comes from federal agencies.
- ❑ Children's renowned researchers are making medical advances in several fields, including gene therapy of pediatric diseases; new approaches to stem cell transplantation; the biology of tumor cells; and the molecular function of the HIV virus.
- ❑ Children's researchers publish articles and papers in professional journals including such prestigious publications as *Blood*, *Cancer Research*, *Nature*, *Pediatrics in Review*, *Annals of Emergency Medicine*, *Journal of Pediatrics*, *Journal of Pediatric Surgery*, *Journal of Adolescent Health*, *American Journal of Cardiology*, *Journal of Infectious Diseases*, and *Journal of Pediatric Hematology/Oncology*.

EDUCATION

- ❑ Children's serves as the Department of Pediatrics for the George Washington University School of Medicine (GWU).
- ❑ In FY 1998, 88 training, education and other projects received \$10.9 million in grants.
- ❑ Clinical training is provided to approximately 80 pediatric residents and 80 fellows each year.
- ❑ Each year, about 160 third-year medical school students from GWU and 100 fourth-year students from GWU and other medical schools receive pediatric training at Children's Hospital.
- ❑ Children's residency and fellowship training programs in pediatrics and its subspecialties attract a national and international group of top candidates. These programs are among the most respected in the country.
- ❑ Several schools of nursing from colleges and universities throughout the region are affiliated with Children's in graduate and undergraduate education programs.
- ❑ Education is provided to allied health students in pediatric respiratory therapy, laboratory medicine, radiology, pathology, physical therapy, occupational therapy, and dental hygiene.
- ❑ The **Freddie Mac Foundation Child and Adolescent Protection Center** conducts educational seminars on the prevention and treatment of child abuse and neglect for professionals and nonprofessionals.
- ❑ Children's serves as a national resource for emergency medical service and trains paramedics, emergency medical technicians and others in pediatric life-saving techniques.
- ❑ The **In Safe Hands program** provides training for child care providers, day care agencies and parents who want to learn the basics of child safety, disease and injury prevention. 202-884-3851.
- ❑ The **Safe Sitter program** is a nationally recognized medically accurate instructional program designed for 11- to 13-year-olds.

Students learn the basics of child care, feeding and diapering, and developmental issues for different age groups. 202-884-3851.

Physician Expertise:

Many of Children's Hospital physicians were recognized as the best pediatric specialists in their field by their peers and listed among *The Best Doctors in America: 1999 Edition*® (Copyright 1998 by Woodward/White, Inc. of Aiken, S.C.).

Our neurosurgery team is performing cutting-edge procedures on patients to identify and remove deep-seated brain tumors. Children's Department of Neurology was the first on the East Coast to test an innovative gene therapy for recurrent brain tumors.

Our surgeons employ innovative technologies such as laparoscopic and laser procedures on patients that can shorten hospital stays, reduce stress and trauma associated with surgery and eliminate noticeable scars.

Heart surgery has been performed at Children's since 1964. Operative results indicate that CNMC is one of the leading programs in the country with survival rates nearly 95 percent. CNMC is the only center in the region performing heart transplants in children. Also, Children's cardiologists provide comprehensive care to children and adults with congenital heart disease including consultations in fetal echocardiography, rhythm abnormalities, preventive cardiology, obesity and hypertension, cardiomyopathy and heart transplantation.

Our specialists have performed 175 kidney transplants. The Department of Nephrology offers all forms of artificial kidney dialysis and kidney transplantation; the largest facility offering end stage renal care for children in the metropolitan Washington area. Laparoscopic kidney donation for living related kidney transplantation was introduced at Children's in 1998. This new and innovative procedure significantly reduces the time needed for postoperative recovery of the donors of the kidney.

More than 130 Hematopoietic Stem Cell (bone marrow) transplants, including the area's first successful transplant using umbilical cord blood from the patient's newborn sibling, have been done at Children's since 1988 when our transplant program started. We are currently developing the use of unrelated cord blood, bone marrow and peripheral blood, as well as marrow from mismatched relatives to expand the donor pool for children with malignant and non-malignant disorders who would benefit from a marrow transplant. In addition, we have begun the region's only bone marrow transplants for children with serious complications related to sickle cell disease; several patients have been successfully treated over the last two years. Other non-malignant diseases treated at Children's include inherited immune deficiencies, inherited storage diseases, and severe autoimmune diseases such as systemic lupus erythematosus (lupus).

Our critical care specialists provide care in our Pediatric Intensive Care Unit 24-hours per day for over 1,000 admissions per year. Objective quality measures demonstrate that our Pediatric ICU is among the best in the country. Our physicians have special expertise in pediatric diseases concerning respiratory illnesses, pediatric ECMO, pain and

(Continued on the next page)

sedation, head injury, and cardiology. They are widely published. Our critical care specialists are widely known for their development of a patient severity classification system that is now in use around the world, head injury research, innovative methods of respiratory support, health policy issues, and uses of alternative medicine.

The Department of Anesthesiology offers 24-hour consultation, acute pain management modalities including patient controlled analgesia (PCA) and continuous epidural analgesia. The Department also receives referrals for chronic pain management.

A Children's neonatologist established the nation's 7th Extracorporeal Membrane Oxygenation (ECMO) program at Children's for heart-lung support for infants. The program has aided more than 600 patients.

Children's physicians serve as clinical consultants to the National Institutes of Health for pediatric patients.

Clinical specialties offered by CNMC

- Adolescent and Young Adult Medicine
- Allergy
- Ambulatory Surgery
- Anesthesiology
- Behavioral Sciences
 - Child Development
 - Child Protection
 - Psychiatry
 - Psychology
- Cardiology
- Cardiovascular Surgery
- Dentistry and Adult and Pediatric Orthodontics
- Dermatology
- Developmental Pediatrics
- Diagnostic Imaging and Radiology
- Eating Disorders
- Emergency Trauma Services
- Endocrinology and Metabolism
- Gastroenterology and Nutrition
- General Pediatrics
- Genetics
- Hearing and Speech
 - Audiology
 - Speech Pathology
- Hematology and Oncology
- Infectious Disease
- Intensive Care
 - Critical Care
 - Neonatology
- Laboratory Medicine
- Nephrology
- Neurology
 - Evoked Response
- Neurosurgery
- Occupational Therapy
- Ophthalmology
- Orthopaedic Surgery/Sports Medicine
- Otolaryngology
- Physical Medicine and Rehabilitation
- Physical Therapy
- Pulmonary Medicine
- Rheumatology
- Special Immunology
- Spina Bifida
- Surgery
 - Plastic and Reconstructive Surgery
- Urology

* While all specialties are offered at Children's Hospital, not all services are offered at all outpatient centers. For more information, contact the specific center.

In addition to Children's Hospital, Children's surgeons perform procedures at the following suburban locations:

Fairfax Hospital Shady Grove Adventist Hospital
Holy Cross Hospital Surgery Center of Chevy Chase
Montgomery Surgery Center

Service Highlights:

Center for Prenatal Evaluation offers a complete range of services to detect and manage birth defects and genetic conditions before and after birth. Services include genetic counseling, carrier screening, level II ultrasound, fetal echocardiography, fetal pathology and newborn consultations. For more information or referrals call 202-884-4166.

Children's After Hours Medical Advice Line, introduced in 1996, is an after-hours medical advice program for pediatricians. It is staffed by specially trained pediatric registered nurses who use standardized pediatric protocols to provide at-home medical advice or direct patients to the appropriate care setting. For more information contact the Children's After Hours Administration Office at 202-884-4637.

Children's Cardiovascular Care Center performs over 7,000 evaluations on individuals with known or suspected heart disease, over 250 diagnostic and interventional cardiac catheterizations, and nearly 250 corrective surgical procedures each year. 202-884-2020.

Children's Childhood and Adolescent Diabetes Center is a comprehensive education and treatment program recognized by the American Diabetes (ADA) Association and administered by a team of specialists. For information, call 202-884-2121.

CNMC serves as the District of Columbia's **Cystic Fibrosis Center** for adult and pediatric patients. For information, call 202-884-2128. For appointments, call 202-884-2610.

Donald Delaney Eating Disorders Program offers multidisciplinary evaluation and treatment for anorexia nervosa, bulimia, and related disorders in adolescents and preadolescents. The full spectrum of services includes outpatient, day treatment, and inpatient care. 202-884-2164.

Magnetic resonance imaging (MRI) and computerized tomography (CT) scanning technologies are housed in a new imaging suite located in the hospital and are designed to accommodate children's special needs. 202-884-2526.

Children's Pediatric Transport Services provide 24-hour emergency transport service, both on the ground and in the air. A specially equipped ambulance staffed by specially trained pediatric experts and neonatologists move infants and children from their community hospital to Children's. In a joint effort with the Washington Hospital Center, MedSTAR helicopters serve Children's neonatal and pediatric needs in outlying areas.

Contracted Managed Care Plans

Managed care plan members comprise the largest group of privately insured patients cared for by Children's National Medical Center. Our staff work closely with managed care partners to be responsive to their varied and changing requirements, and to make sure that we understand how each system works so we can make the process easier for our patients and their families. CNMC participates with the managed care plans listed below:

Commercial

- Aetna U.S. Healthcare (All Plans)
- Alliance PPO
- America's Health Plan/UP & UP
- Blue Cross/Blue Shield of the National Capital Area
- Blue Cross/Blue Shield of Maryland
- Capital Care & Capital Care Advantage (BCBS NCA)
- Capp Care*
- CareFirst HMO (BCBS of MD)
- Children's Hospital Employee Plan*
- Cigna Health Care (All Plans)
- Community Care Network (CCN)
- FCE Benefit Administrators, Inc.*
- First Health/Affordable
- Freestate Health Plan (BCBS of MD)
- George Washington University Health Plan (All Plans)
- Innovation Health
- Kaiser Permanente
- M.D.IPA/MD IPA Preferred
- NYLCare (All Plans)
- One Health Plan
- Optimum Choice/Optimum Choice Preferred
- Private Healthcare Systems (PHCS)
- Prudential Healthcare (All Plans)
- United Healthcare Mid-Atlantic
- USA Managed Care Organization*

* Contract with Children's National Health Network

TRICARE (Champus)

MARYLAND MEDICAID

Chesapeake Family First (UHCMA)
Freestate Health Plan (BCBS of MD)
Priority Partners
Prudential Healthcare Community Plan

DC MEDICAID

Capital Community Health Plan
George Washington University Health Plan
Health Services for Children with Special Needs (HSCSN)
Health Right, Inc.
Prudential Healthcare Community Plan

When choosing your health insurance, make sure your plan allows you to use Children's primary care pediatricians, specialists and Children's Hospital.

Frequently called telephone numbers:

General Information	202-884-3000
Hospital Administration	202-884-5408
Hospital Switchboard	202-884-5000
Children's Hospital Foundation	202-884-4522
Children's Referral and Information Line	
Local	202-884-BEAR
Toll Free	1-888-884-BEAR
Managed Care Department	202-884-4622
Patient Representative Office	202-884-5056
Physician Relations	202-884-4650
Physician to Physician Access Line	202-884-4880
Public Relations	202-884-4500
Registration & Admissions	202-884-5005
Children's Home Health Care	202-884-4663
Volunteer Services	202-884-2062
Children's On-Line Web Site	WWW.CNMC.ORG
Children's National Health Network	202-884-6000



111 Michigan Ave., N.W.
Washington, DC 20010-2970
202-884-5000

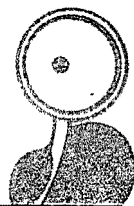
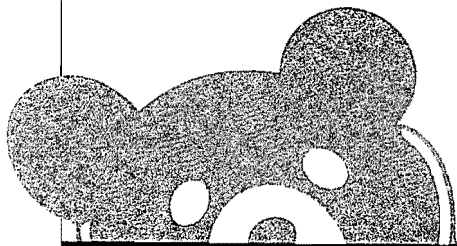
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Children's MEDICAL CURRENTS

A Children's National Medical Center Quarterly Publication for Physicians

Summer 1999

Children's National Health Network (CNHN) Seminar Helps Pediatricians Understand New Coding Guidelines

Proper Coding Improves Quality and Efficiency, says Physician Group

In a managed care-dominated market, pediatricians are increasingly compelled to carefully keep track of information and provide accurate, up-to-date coding to payers if they want to survive and flourish. To assist them, the Children's National Health Network (CNHN) has begun an educational effort aimed at helping community doctors increase service quality and pediatric practice efficiency as well as maximize the amounts they receive from payers.

In May, CNHN, which numbers about 250 pediatricians representing close to 100 area practices in the Maryland, D.C. and Virginia area, sponsored a "Coding

Workshop for Pediatric Practices" in Bethesda, MD. The workshop was aimed at helping community

doctors sort through the changes made this year by the AMA, which authors the coding system under contract with HCFA. "We had an unbelievable response, with approximately 120 attendees," said Janet Lutz, director, Physician Relations, CNMC. "Of these, approximately 20 were community pediatricians, with the remainder comprised of office managers or billing and reimbursement

managers from area pediatric practices."

The workshop, which received high marks in post evaluations,

***One of the most
significant changes in
coding was the
implementation in
January of two new
Current Procedural
Terminology (CPT)
codes that require
pediatricians to bill
separately for the
work and expense of
administering a vaccine.***

was co-sponsored by Pasteur Merieux Connaught (PMC). Speakers included Mark Weissman, M.D., CNHN medical director; Charles J.A. Schulte, M.D., CNHN board member, D.C. AAP chapter chair and coding advisor to the AMA; and Susie Taylor of Strategic Healthcare Services, Inc. Schulte gave a detailed coding and documentation overview.

One of the most significant changes in coding was the implementation in January of two new Current Procedural Terminology (CPT) codes that require pediatricians to bill separately for the work and expense of administering a vaccine. Vaccine product codes have also been expanded to be more specific. Under the new guidelines, if a child comes in for a preventive visit and receives a vaccination, for example, the pediatrician should report the appropriate E/M service code for preventive

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Children's Bear Essentials

TOOLS FOR RAISING HEALTHY KIDS

Inside

Handling
Peer
Pressure

Community
Classes

When a Child
Needs a Kidney
Transplant

The School-Age
Child with Epilepsy



NEW! Formerly
Children's Story &
Bear Essentials

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Children's NEWS

A Newsletter for Children's Employees

Children's Expands Primary Care System in D.C.

New Clinics Open on Martin Luther King, Jr., Avenue, and Good Hope Road

When two new Children's primary care centers opened their doors in Southeast Washington this summer, they brought pediatric health care to some of the most under-served communities in the metropolitan area.

The addition of the centers—one on Martin Luther King, Jr., Avenue, and the other on Good Hope Road—marks the expansion of a system that began thirty-two years ago when Children's established clinics in economically disadvantaged areas of Northwest Washington. The new centers, serving Anacostia, Hillcrest and adjacent communities in southern Maryland, are building on that legacy while working to define the particular needs of their children and families.

The growth of Children's primary care system coincides with the recent restructuring that identified Community Pediatric Health as one of seven Centers of Excellence (see article, page 7). Until now, primary care consisted of outpatient services at the hospital (the Child Health and Adolescent Health centers now operate in the hospital's newly renovated east wing) and the two centers in Northwest. With two new centers in Southeast and a third on the way, Children's has solidified its market position in primary care.

What were the factors that led Children's to strengthen its primary care system? "First of all, you have to remember that we've always had an outpatient center at the hospital providing primary care services to families in our backyard," says Jackie Bowens,



Adams Morgan Center staff: Front (L to R), Reyna Campos, Estela Cruz, Rosella Castro, M.D., director, Ana Prensa and Angelica Fuentes; middle row (L to R), Aracelis Martinez, Sandra Marquez, Cathy McCall and Libia McDonough; back row (L to R), Ana Ramos, Dave Thomas, M.D., and Carla Sguigna, M.D., attending.

vice president, Government and Public Affairs. "What's happened in the last few years is that there's been a greater emphasis on preventive health."

In addition, since the early 1990s, Children's has been identifying parts of the city with a high ratio of pediatric consumers to physicians and working on how to reach those communities, says Bowens. "I think the other factors are the changes in managed care and Medicaid funding through HMOs," she says. "More patients are insured, they have more choices in terms of providers, and this opens up opportunities in these areas for Children's." In fact, the new centers will be in a position to channel patients who need specialty care to Children's Hospital.

For several years, Bowens has been working closely with President Zechman, Legislative Affairs Director Johnnie Hemphill and advocates on the Hill in an effort to gain congressional support for the clinics. A \$5 million congressional grant brought the deal to fruition. Hemphill credits the enlightened leadership and assistance of several legislators including Representatives James Moran (VA), Steny Hoyer (MD), John Porter (ILL) and Senator Trent Lott (MS).

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PEDIATRIC *Ethicscope*

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Office of Ethics

Thomas Silber, M.D., M.A.S.S.
Editor-in-Chief

Mary Keegan
Managing Editor

Publication Committee

Andrew Bonwit, M.D.
Claudette Coderre, R.N.
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Does knowing the truth indeed set us free? Can we be economical with the truth and still keep faith with patients and families? Dr. John Lantos, a CNMC alumnus and now section chief of general pediatrics at the University of Chicago, spoke at the annual Arnold Einhorn lecture, drawing us into his reflections on a "cyber-ethics" discussion. We are pleased to make this abridged version of his lecture available to our readers. For a different perspective on truth-telling, see AAP recommendations on page 8.

* Should We Always Tell Children the Truth?

Truth-telling, in American medicine, is a peculiar cultural artifact. It plays a central role in our conception of the proper relationship between patients and doctors. Any deviation from a standard of total honesty is seen as a doctor's way of preserving paternalistic power over patients. Truth-telling is thus necessary for patient empowerment, and patient empowerment is seen as a good thing. We want to demystify illness and imagine that truth is the first step towards clarity. We believe that there are truths out there, that we can discover them, and that when we do, the knowledge will empower us and set us free. This approach to truth-telling is as American as apple pie. We imagine and fear a fundamentally deceptive and exploitative relationship between the empowered and the disempowered. In response, we conceive a set of rules which will level the playing field.

Inside This Issue:

Should We Always Tell Children the Truth?



Office of Ethics

111 Michigan Avenue, N.W.
Washington, D.C. 20010-2970
(202) 884-3201

Bioethics on the internet

Some bioethics cases have been coming across the internet, and it's interesting to see how people from all over the world have different approaches. Carl Elliot is a bioethicist who has spent a lot of time in other countries. He writes about how hard it is to explain to foreigners the peculiar twists and turns of American bioethics, the focus on individualism, autonomy, privacy, the suspicion of authority. He concludes that our ethics is so embedded in our culture that, to understand American bioethics, you have to understand baseball.¹

The following case, which appeared on the internet, raises a conflict about truth-telling and the peculiarities of our modern American approach.

A 9-year-old girl with AIDS is an inpatient with chronic lung disease but does not require supplemental oxygen. She has AIDS nephropathy; kidney function is less than 20% of normal and continuing to decline. It is likely that she will require dialysis, if she does not die sooner from other complications of AIDS. She is receiving total parenteral nutrition through a central line.

The patient is aware that she has a chronic illness, but not that she has AIDS. But she wonders about it. When she asked her mother whether she had AIDS, her mother responded "No."

The mother also has AIDS (the patient's AIDS was perinatally transmitted). She is quite ill and likely to die before the patient. In a recent discussion with doctors, she told them she would like to tell her daughter that she (the patient) has AIDS. However, the patient's grandmother is adamant that the child not be told. The grandmother feels that "it is enough for the girl to know that she has kidney disease, why should you tell her that she is going to die [from AIDS]?"

The attending physician strongly believes that the patient should be told of her diagnosis and that continued concealment will be particularly harmful

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