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Special Delivery  
The SMFM ENewsletter

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## President's Forum

Dear Members,

Congress will be coming back from its August recess on September 9, poised to tackle the annual appropriations process before the end of the fiscal year on September 30. While we are keeping a close eye on several appropriations items, I encourage you to write to your Members of Congress on several [key advocacy issues](#). To make it easy, we have background information available below and two template letters available in the [SMFM Advocacy Action Center](#).



**Katie Schubert, MPP**

### Maternal Mortality Legislation

SMFM is asking Members of Congress to co-sponsor the MOMMA's Act and the Maternal CARE Act. Both pieces of legislation build on the work done last year to prevent maternal mortality.

- The MoMMA's Act, introduced by Rep. Robin Kelly in the House and Senator Dick Durbin in the Senate, would extend Medicaid and Children's Health Insurance Program (CHIP) coverage to one year postpartum for women who have pregnancy-related Medicaid or CHIP coverage; authorize funding to establish or support Regional Centers of Excellence for implicit bias and cultural competency education; continue to standardize maternal mortality and morbidity data collection across states; and authorize funding for the Alliance for Innovation on Maternal Health (AIM), which is working to standardize care in hospital and community settings to prevent maternal mortality.
- The Maternal CARE Act, introduced by Rep. Alma Adams in the House and Senator Kamala Harris in the Senate, would authorize grant funding to health professional schools and training programs to support implicit bias training with priority given for training in obstetrics and gynecology. It would also authorize funding for a

demonstration project to assist up to 10 states to implement pregnancy medical home programs to incentivize integrated health care services. Finally, it would direct the National Academy of Medicine to study and make recommendations for incorporating bias recognition in clinical skills testing for U.S. medical schools.

These two key pieces of legislation would help to reduce maternal mortality rates in the U.S., particularly for minority and low-income women, and drastically improve health care for this population.

### **Title X Family Planning**

SMFM is asking the Senate to reverse a newly imposed regulation that would significantly impact the ability of the Title X Family Planning Program to provide adequate, appropriate reproductive health services to women.

Every year, more than four million individuals rely on Title X-funded programs for their reproductive health care. However, recent newly imposed regulations would restrict women from knowing all of their treatment options and from receiving the best care possible. This new regulation threatens the integrity of the Title X Family Planning Program, significantly affecting the quality of health care for millions of Americans and could have devastating consequences.

### **PRGLAC Meets to Begin Implementation Recommendations**

On August 22 and 23, the U.S. Task Force Specific to Pregnant Women and Lactating Women (PRGLAC) met to discuss the implementation of its September 2018 report to Health and Human Services Secretary, Alex Azar. SMFM has been a longtime supporter of PRGLAC, having worked to ensure its creation in the 21st Century Cures Act and leading the [Coalition to Advance Maternal Therapeutics](#).

SMFM provided [public comments](#) during the meeting and supported the appointment of several members to the PRGLAC working groups. You can see the meeting proceeding and find materials [here](#).

### **Get Involved!**

Are you curious how SMFM decides to take a position on certain health policy issues and not others? Watch our [quick video](#) that explains the process.

If you enjoy engaging with your elected officials and advancing policies that impact pregnant women and MFM, I encourage you to sign up for the SMFM [State Liaison Network](#), apply for the [SMFM Reproductive Health Services Policy Award](#), or consider service on our [Health Policy and Advocacy Committee](#).

Your voice is critically important.

Katie


### **Katie Schubert, MPP**

Chair Advocacy Office

[kschubert@smfm.org](mailto:kschubert@smfm.org)

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[Watch the video ->](#) **Colorado Fetal Care Center**  
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## Editor's Note

Dr. Liza Kunz serves on the SMFM Communications Committee and was one of the editors for this month's issue of *Special Delivery*. A note from her:



**Dr. Kunz**

Welcome to the August edition of *Special Delivery*! It is hard to believe that the heart of summer has come and gone, many of us have children who are restarting school, and Labor Day is around the corner. We've got an especially jam packed newsletter for you this month. I encourage you to explore it for the many ways that you can get more involved in the Society and get more out of your annual membership dues. Consider applying to serve on a committee. Applications are due on September 20, with more details available on the [SMFM website](#). Personally I can attest to how much more I have gained from my membership once I became more involved. The connections to your colleagues throughout the Society are useful time and time again. And it makes attending the Annual Meeting so much more fun!

I also encourage you to explore Katie Schubert's piece on advocacy. There are many issues in which your unique voice as a MFM clinician can really serve to amplify the needs of patients throughout the U.S. With key facts on the issues and even letter templates for you to utilize, speaking up has rarely been easier. Public representatives in our home states and Washington, DC need to know how important issues of disparate outcomes and maternal mortality are to their constituents (YOU!).

Cheers,  
 Liza

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## Coding

### Register by October 3 for the Fall Coding Course

Our next [Coding Course](#) will be presented in conjunction with the [2019 Practice Management Conference](#), both in Orlando, FL. Attend one event or maximize your time away from home and attend both. Early bird registration for both courses closes October 3.

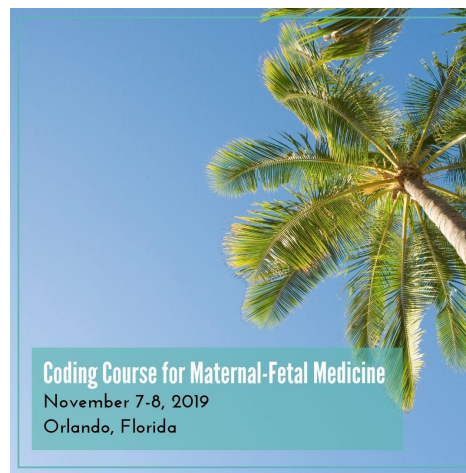
Designed especially for MFMs, practice managers, and MFM staff, the SMFM Coding Course is the most comprehensive and interactive course of its kind. Enjoy class

discussions, live polling, and case studies with national experts in coding.

To register, visit the [SMFM website](#). If you have questions or need assistance, please contact [Darryl Diamond](#).

### **Coding Tip: How to Accurately Report Umbilical Cord and Certain Placental Issues that Occur in the Antepartum Period**

The International Classification of Disease, 10th edition (ICD-10-CM), has a specific code category for umbilical cord complications ( O69 ). However, the use of codes from this category is limited to the labor and delivery period. Using codes from this category during the antepartum period, separate from labor/delivery, can result in claim denials.



So, how does the MFM accurately report umbilical cord and certain placental issues that occur in the antepartum period? The answer depends on exactly the nature of the complication. If the condition is related to placenta previa, ranging from low-lying to complete, the code is selected from the O44 placenta previa category. This is applicable whether the service is in the antepartum period or during labor/delivery.

In the O43 placental disorders category, there are codes for specific conditions, as well as more generic codes:

O43.01-	Fetomaternal placental transfusion syndrome
O43.02-	Fetus-to-fetus placental transfusion syndrome
O43.10-	Malformation of placenta, unspecified
O43.11-	Circumvallate placenta
O43.12-	Velamentous insertion of umbilical cord
O43.19-	Other malformation of placenta
O43.21-	Placenta accreta
O43.22-	Placenta increta
O43.23-	Placenta percreta
O43.81-	Placental infarction
O43.89-	Other placental disorders
O43.9-	Unspecified placental disorder

Every effort should be made to avoid use of the unspecified code categories (O43.10- and O43.9-). When there is not a code for a specific condition, the "other" codes (O43.19- and O43.89-) should be used, which represents that the physician has identified the issue even though there isn't a specific code.

If there is an anatomical malformation, in either the placenta or cord (e.g., two vessel cord, etc.), identified in the antepartum period, then the O43.19- code is the correct choice. If there is a non-anatomic complication in the antepartum period (such as vasa previa, an identified short cord, a cord lesion, etc.), then the appropriate code is O43.89-. While these codes are not specific, they are the best possible options to report these conditions.

For additional coding tips, visit the [SMFM website](#).

### Webinar: Coding Mistakes in the Office

The SMFM Practice Management Division's next webinar is on October 9 at 2:30 pm (ET). Called, "Coding Mistakes in the Office," SMFM members can join at no cost. Register and learn more on the [SMFM website](#).

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## 2020 Annual Meeting

Planning is well underway for [SMFM's 2020 Annual Pregnancy Meeting](#), being held at the Gaylord Texan in Grapevine, Texas from February 3 - 8. Registration for the meeting will open next month.

On behalf of the entire Annual Meeting Program Committee, I want to thank those who submitted abstracts. This year, we received close to 2,000 abstracts, more than the last time the meeting was held in Texas in 2018. Abstract acceptance notifications will be sent by October 1.



**Dr. Cahill**

### Late Breaking Abstracts

We will welcome your late-breaking abstracts from October 11 to November 8. Late-breaking abstract submissions must meet the following criteria:

- The research must be new and of sufficient scientific importance to merit special consideration after the standard abstract deadline. Abstracts should describe either large clinical studies or high-impact translational research that could not be completed prior to the original deadline.
- Clinical studies must be prospective in design.
- Late-breaking abstracts cannot be a revision of an abstract submitted prior to the submission deadline.

We will share a link to the submission site and additional details next month.

### Celebrating the 40th Anniversary

In 2020, SMFM will celebrate 40 years of the Pregnancy Meeting™ and will honor Dr. Mary D'Alton, Chair of the Foundation for SMFM, with a special event on Thursday evening. Since the first small gathering in 1980, the meeting has grown to a six-day event featuring



pre-meeting postgraduate courses, state-of-the-art lectures, scientific forums, and abstract presentations, attracting more than 2,800 participants. We look forward to celebrating with you on Thursday evening. Tickets and table reservations are available [here](#) and through meeting registration.

### SMFM Thrive Program

As part of the Society's ongoing mission to support the mental and physical well-being of our members, we are expanding our wellness offerings at the Annual Meeting. In addition to the yoga program offered by Dr. Shilpa Babbar

and the 5K run on Saturday to support the Foundation for SMFM, the 2020 meeting will also feature morning bootcamp classes, a steps challenge, and a dedicated scientific forum called "Burnout and Wellness." Registration for these offerings will be available through meeting registration.



### Childcare at #SMFM20

We are again offering childcare services through our partnership with KiddieCorp. For more information and testimonials from parents who utilized the program during the 2019 meeting, visit the [SMFM website](#). Because space in the childcare program is limited, we encourage you to reserve your child's space as soon as possible. To register for childcare services, please [click here](#).

Below is the general schedule-at-a-glance to assist you in planning your travel and to determine when you might make use of childcare services. Note: times may change slightly.

Monday - Tuesday, February 3 - 4

8:00 am - 5:00 pm Postgraduate Courses, Workshops, and Symposiums

Wednesday, February 5

8:00 am - 2:30 pm Postgraduate Courses, Workshops, and Symposiums

3:00 - 5:30 pm Scientific Forums, SMFM Special Topic Forum: Implicit Bias

5:00 - 6:30 pm Diversity Reception

6:00 - 8:00 pm Opening Reception

Thursday, February 6

7:30 am - 5:30 pm President's Address and Scientific Sessions

6:00 - 8:00 pm Celebration of the 40th Anniversary of the Pregnancy Meeting and honoring Dr. Mary D'Alton

Friday, February 7

7:30 am - 5:30 pm Foundation for SMFM Address and Scientific Sessions

Saturday, February 8

6:30 - 7:30 am	Foundation for SMFM 5K Run/Walk
8:00 - 8:30 am	Awards Ceremony for Thursday and Friday Sessions
8:45 am - 1:00 pm	Scientific Sessions

### Hotel Accommodations

All official Annual Meeting activities will take place at the Gaylord Texan Resort. Visit the [hotel's website](#) to reserve your hotel room at the group rate of \$249/night. To enjoy the discounted rate, reservations must be made by January 3, 2020 or until the hotel block is full, whichever comes first.

Finally, as new information is available, it will be posted on the [SMFM 40th Annual Pregnancy Meeting website](#). I encourage you to continue to check back and look forward to seeing you at the Gaylord Texan.

Warm regards,

**Alison Cahill, MD, MSCI**  
2020 Scientific Program Chair

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## Volunteer with the Society

### Apply for Committee Service

Are you interested in serving on a SMFM Committee in 2020? Consider applying! The Society is accepting applications until September 20, 2019 via our [online system](#). Alternatively, you can log into your account and visit your [profile page](#) to apply. Click on the "committees" tab to apply today. If you have questions about the process or difficulties applying, please contact SMFM's Membership Manager, [Tim Heinle](#).

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## Foundation for SMFM

The Foundation for SMFM is pleased to recognize several recently selected awardees.

### Queenan Fellowships for Global Health

Dr. Martha Tesfalul, a second-year Maternal-Fetal Medicine Fellow at the University of California, San Francisco, is the recipient of the Investigator-Initiated Research Project Award for her work, "Promoting Freedom from Hardship in Pregnancy in Rural Eritrea by Advancing Clinical Research for Rahwa Maternal Health Agent Program." Dr. Tesfalul will work with stakeholders and community members in Eritrea to identify and address key gaps in the Rahwa Maternal Health Agent (MHA) Program. She will develop protocols and assist in training MHAs. Dr. Tesfalul has a great appreciation for the integral role of community organizations and healthcare workers in attaining health equity. She plans to incorporate this experience in her pursuit of a career in academic medicine and global health.



**Dr. Tesfalul**

### Reproductive Health Mini-Sabbatical Grantees

Dr. David Abel will receive four weeks of clinical training in advanced abortion procedures, mentored by faculty in the Division of Family Planning at the University of California, Davis, directed by Dr. Mitchell Creinin. Dr. Abel is a Clinical Associate Professor in the Department of Obstetrics and Gynecology, Division of Maternal-Fetal Medicine at the University of California San Francisco-Fresno. He will use the mini-sabbatical training to provide services to primarily low-income women with limited resources in the community where he works and to establish formal abortion training in the residency program at his institution. Throughout his medical career of more than 25 years, Dr. Abel has been an advocate for women's reproductive health rights.



**Dr. Abel**

Dr. Leilah Zahedi-Spung will conduct a research project, "Missouri's Abortion Law: Access to Care for Patients with Lethal Fetal Anomalies at a Midwest Tertiary Care Center." Dr. Zahedi-Spung is a second-year MFM Fellow in the Department of Obstetrics and Gynecology at Washington University School of Medicine. Through her mini-sabbatical, she will perform statistical analyses and geocoding for an observational study, develop an impactful advocacy tool for reproductive rights, and receive formal training in healthcare reform and policy. This experience will allow her to further develop her interests in the intersection between MFM and Family Planning.



**Dr. Zahedi-Spung**

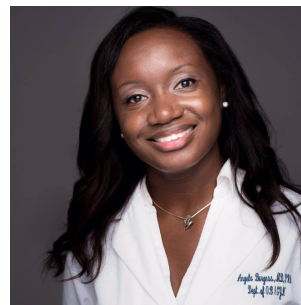
These grants are one component of the Reproductive Health Project for Maternal-Fetal Medicine, an initiative with the Society for Maternal-Fetal Medicine (SMFM) to integrate family planning and reproductive health care services into MFM practice to reduce the rate of maternal morbidity and mortality among high-risk women in the United States.

### Garite Mini-Sabbatical Grantees

Dr. Angela PH Burgess, a third-year Maternal-Fetal Medicine Fellow at Baylor College of Medicine in Houston, will conduct a research project, "Contribution of Antenatal Maternal Stress to Biologic Markers in Placental Tissue Linked to Preterm Labor:



An Evaluation of Health Disparities Utilizing Everyday Discrimination Scale." Dr. Burgess will spend six weeks at the University of California, San Francisco under the mentorship of Brittany D. Chambers, PhD, MPH. Through this pilot study, Dr. Burgess hopes to obtain information regarding feasibility and scalability of a larger trial, refine methodologies, and validate the Edinburgh Postnatal Depression Scale across racial and economic strata when comparing biologic equivalence among parturients using the robust methods described by Dr. Chambers and her team.



**Dr. Burgess**

Dr. Tani Malhotra, a second-year Maternal-Fetal Medicine Fellow at Metrohealth Medical Center in Cleveland, was selected for her proposal "Understanding the Development and Implementation of Public Health Policy as a Maternal-Fetal Medicine Specialist." She will spend six weeks in the spring of 2020 in Washington, DC, mentored by Katie Schubert, SMFM's Chief Advocacy Officer, and Dr. Dana Block Abraham, an MFM whose research focuses on health advocacy. Through this mini-sabbatical, Dr. Malhotra hopes to better understand the process by which public health policy is developed, improved, and implemented, allowing her to advance her skills as a patient and physician advocate.



**Dr. Malhotra**

### Apply for Foundation Funding

The Foundation is currently accepting applications for the programs listed below. Please consider applying or encourage a colleague to do so.

- [Bridge Funding Award](#)
- [Danielle Peress, MD Memorial Fund](#)
- [Quality Improvement Research Award](#)
- [Quilligan Scholars Program](#)

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## Global Health

The SMFM Global Health Committee highlights the work of Dr. Phillip Greig below. If you are working in global health research or are aware of clinical opportunities, SMFM wants to hear from you. Visit the [SMFM website](#) and scroll down to the bottom of the page to enter your information. If you have any questions, please email [Jessica Sheehan](#).

### Can you describe your background?

I did my residency and fellowship at Wake Forest from 1987 to 1993, and then I was on staff at Duke University for three years. From there, I moved to Greenville, SC to be Division Director at Greenville Hospital System. I currently work for Bon Secours Mercy Health System in Greenville.

### What made you decide to go into global health?

My first global health experience was part of a multispecialty medical team going into Hanoi, Vietnam in 2001 to teach at Bac Mai Hospital. We were the first American team into Hanoi since the war. This was an incredible teaching and learning experience for me. I found I just loved teaching and having an impact in improving patient care. Since there, I have shifted to low resource countries that are in greater need. I spent five years going to Haiti teaching and working in a rural clinic and hospital in Jeremie. Six years ago I was invited to go with an ENT team to Kenya and have been going back every year since.

### What has been the most rewarding in your career?

Teaching health care providers in low-resource settings how to better care for their patients has been really special. These doctors, nurses, and ultrasonographers are so hungry for knowledge. They want to take the best care of their people. This always energizes me and makes the long trips worth it.



### What are some of the projects that you are currently doing?

Maternal deaths around the world are unacceptably high. With just a little training and resources, most can be prevented. I am currently working very closely with the OB/Gyn Department at Tenwek Hospital in rural western Kenya. Teaching, helping start an OB/Gyn residency, and developing a patient database are some of the things we are working on with the full-time staff. My hope is that as part of the SMFM African Coalition we can create a large database that we can use for research to develop better maternal and child protocols.

### What advice would you give to residents/fellows who are interested in global health?

I would recommend finding an OB/Gyn program that already has an established global health program and ask about doing a rotation at their international location. A month rotation as a resident or fellow would be an incredible experience for so many reasons. It will be life and career enriching. It will allow you to spend time with other physicians who love working around the world and see if this is something you want to be a part of. You can be in an academic job or private practice and still be involved to some degree in global health. It is never too late in your career to start. If you are a burned out MFM, working in global health will get you back loving your job.



### What do you like to do outside of work?

When not working, I cycle to keep me in shape and for mental health.

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## Practice Management Resources

### Register by October 3 for the Practice Management Conference

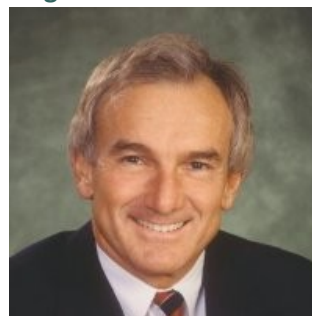
The [2019 Practice Management Conference](#) (previously called the AMFMM Annual Business Meeting) will be presented in conjunction with the next [Coding Course](#), both in Orlando, FL. Attend one event or maximize your time away from home and attend both. Early bird registration for both courses closes October 3.

Bring more than one person and save! SMFM is offering a group discount when both the physician and practice manager from the same organization attend. Email [Darryl Diamond](#) to get a 10% discount off both registrations.



### Understanding the Potential of the Patient Experience in Sustaining the MFM Practice

One of my duties within the Society is to conduct program assessments for privately employed, hospital-owned, and faculty practice settings. As I travel around the country evaluating member institution strengths and weaknesses, a universal need is observed: a greater understanding of the program building potential of the patient experience.



**Frank Ciafone, MBA**

Creating a great experience for your three primary MFM customers (patients, referring physicians, and contracted carriers) will yield substantial benefits that are critical to your organization's long-term success. Disciplined effort in addressing the needs of these groups will bring returns in community position, referral volumes, better contracted rates, and most importantly higher physician and staff job satisfaction.

Three questions serve as a starting point for the physician leader in creating the aforementioned results:

1. Is your organization providing an experience that considers the fears of its patients in utilizing services? Compassion for their confusion relating to diagnoses, procedures, and finances?
2. Are you creating a relationship with referring physicians that assures them that your association with them values quality care and promoting total patient satisfaction?
3. Are you creating a value based proposition in carrier relationships featuring subscriber satisfaction and efficient care that will promote financial security for the practice?

An honest and thorough consideration of these questions will provide the baseline from which initiatives and disciplined long term programs can be implemented to build and protect your organization's sustainability. To learn more about how your organization can more effectively answer these questions, consider attending the [2019 Practice Management Conference](#) described above.

For more information on the SMFM Practice Management Division and to get involved, visit the [SMFM website](#).

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## NEW! Patient Education Resources

MotherToBaby, a service of the non-profit Organization of Teratology Information Specialists, creates and maintains patient- and provider-friendly bilingual (English/Spanish) fact sheets on a wide variety of exposures during pregnancy and breastfeeding. Fact sheets can be downloaded at no-cost on the [MotherToBaby website](#).

Here's a list of fact sheets that MotherToBaby's experts recently created or revised.

- [Triazolam](#) (new)
- [Citalopram & Escitalopram](#)
- [Guaifenesin](#)
- [Mold](#)
- [Teriflunomide](#)

To view all fact sheets, including the Spanish versions, [click here](#). If you cannot find a fact sheet on a specific exposure of interest, please contact one of MotherToBaby's experts at + 1 (866) 626-6847 (toll-free).

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## Did You Know?...

### We Have Members Around the World

Did you know that SMFM has more than 500 international members? The Society is focused on growing globally and we have membership options for anyone interested in or working in the high-risk pregnancy space. We created a tiered pricing structure to make membership affordable no matter where you live. Do you have international colleagues that may be interested in joining? [Learn more](#).

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## Ultrasound Resources

### NEW! Resources to Support Your Success

During the past year, SMFM members have requested more [resources on ultrasound](#). Find our complete offering of both patient care and practice management offerings on the [SMFM website](#). Highlights include:

- [Fetal Anomalies Resource Library](#): Organized by organ system, clinicians can access a series of 16 presentations at no cost. The ultrasound images available in this resource library are available at no cost to members and non-members.
- [The Essential Ultrasound Course for Maternal-Fetal Medicine](#): Earn up to 15.5 AMA PRA Category 1 Credits by watching the recorded version of our May 2019 live course, "Essential Ultrasound for Maternal-Fetal Medicine." Discounts available for SMFM members.

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## Upcoming Educational Offerings

### [September 4: Second Annual Prenatal Genetics in Chicago](#)

Advanced registration for this course is now closed; onsite registration will be accepted beginning September 3 in Chicago.

### [September 5-6: Fourth Annual Maternal Medicine Course in Chicago](#)

Advanced registration for this course is now closed; onsite registration will be accepted beginning September 3 in Chicago.

### [October 11-13: Dan O'Keeffe SMFM Leadership Academy in Denver](#)

Just two spots still available!

### [October 12: Advances in Prenatal Diagnosis, Preeclampsia Prediction and Future Technologies in Berlin](#)

A joint course between SMFM and ISUOG; available via livestream.

### [October 26-28: First-Year Fellows Retreat in Itasca, IL](#)

Invitation only.

### [November 21-23: Critical Care Course in Scottsdale, AZ](#)

A joint course with Banner-University Medical Center, Phoenix and SMFM. Note: course tuition is covered for one MFM fellow per program. Any other travel expenses are the responsibility of the fellow. To register, call +1- 602-230-CARE.

### [GOHO Ultrasound Course: December 8-10 in Ft. Lauderdale, FL](#)

The GOHO Foundation offers a free ultrasound course for second-year MFM fellows.

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## Patient Safety and Quality

### Submit a Video

The National Improvement Video Challenge is a competition sponsored by the Council for Patient Safety in Women's Healthcare, of which is SMFM is a core member. For the Video Challenge, clinicians are invited to submit a 3-5 minute video showcasing how you implemented or used one of the Council's bundles on patient safety at your institution. There is no need to cover the entire bundle; videos can focus on any aspect of the bundle. (i.e.: how you overcame a particular hurdle or challenge).

Deadline for applications is Friday, October 18. More information and application forms can be found on the [Council's website](#). We'd love to see an SMFM member(s) win the challenge!

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## Postdoctoral Fellowship

The UCSF Preterm Birth Initiative (PTBi) is now accepting applications for its Transdisciplinary Postdoctoral Fellowship. MDs, PhDs, DNPs, ScDs and DrPHs who are U.S. citizens or permanent residents are eligible to apply. The two-year fellowship is an opportunity to advance community-grounded research to eliminate racial disparities in preterm birth and improve health outcomes for babies born too soon. Applications are due October 1. Learn more [here](#).

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STAY CONNECTED

