

Volunteers Needed for Participation in Alzheimer's Disease Study Initiative

The Alzheimer's Disease Neuroimaging Initiative is seeking participants for the largest and most comprehensive research effort for the prevention and treatment of the disease and related dementias. The study aims to enroll 400 volunteers between 55 and 90 years of age who have received a diagnosis of early mild cognitive impairment, late mild cognitive impairment, or early/mild Alzheimer's disease. Participants must be fluent in English or Spanish; be in good health and willing to undergo in-clinic assessments, memory testing, and other procedures; and have someone who can accompany them to all visits and with whom they spend at least 10 hours each week. The study focuses on predicting and monitoring the onset and progression of Alzheimer's disease using biomarkers found in blood and cerebrospinal fluid, and through various imaging methods. The five-year longitudinal study is sponsored by the National Institutes of Health, and is operating in 55 clinical sites in the United States and Canada. Study investigators are encouraging family physicians to refer eligible patients to the trial, and reassure that they will continue to follow and care for their patients throughout the study. For more information, visit <http://www.aafp.org/news-now/health-of-the-public/20120613alzheimersstudy.html>.

New Vaccine for Infants Protects Against Meningococcal and Hib Diseases

The U.S. Food and Drug Administration (FDA) has approved a meningococcal groups C and Y and *Haemophilus b* tetanus toxoid conjugate vaccine for use in children six weeks through 18 months of age. The vaccine, which is marketed as MenHibrix, is indicated for the prevention of invasive disease caused by *Neisseria meningitidis* serogroups C and Y and *Haemophilus influenzae* type b (Hib). According to the package insert, MenHibrix is to be given as a four-dose series at two, four, six, and 12 to 15 months of age. The first dose may be given as early as six weeks of age, and the fourth dose as late as 18 months of age. The FDA has directed manufacturer GlaxoSmithKline to conduct a phase 3 controlled, multicenter study to evaluate concomitant administration of MenHibrix with rotavirus, 13-valent pneumococcal conjugate, and hepatitis A vaccines administered according to the vaccine schedule recommended by the Centers for Disease Control and Prevention (CDC). The study is to begin no later than October 31, 2013, with a final

study report to be submitted by December 15, 2016. For more information, visit <http://www.aafp.org/news-now/health-of-the-public/20120620menhibrix.html>.

CDC: Half of Adults Did Not Receive Key Preventive Health Services Before 2010

According to a study from the CDC, only about one-half of U.S. adults received certain preventive services, such as screenings, consultations, and prescriptions, from a health care professional before 2010. The study focused on adult clinical preventive services provided between 2007 and 2010, prior to the Patient Protection and Affordable Care Act. Some of the CDC's findings include the following: only 47 percent of patients with heart disease primarily affecting the blood vessels were prescribed the recommended daily use of aspirin; only 44 percent of adults with high blood pressure had their hypertension under control; only about one-third of men and one-fourth of women were screened for high cholesterol during the preceding five years; less than one-third of patients had their cholesterol level controlled; and fewer than one in 13 patients who used tobacco was prescribed medication to assist in quitting. These numbers could change in the future because of provisions included in the Affordable Care legislation that require new private health insurance plans to cover recommended preventive services with no cost sharing. Additionally, the law requires coverage for new annual wellness visits under Medicare and eliminates cost sharing for recommended preventive services provided to Medicare beneficiaries. The law, which passed in 2011, provided approximately 54 million Americans with at least one new free preventive service through their private health insurance. Also, more than 32 million Medicare beneficiaries received at least one free preventive benefit in 2011. For more information, visit http://www.cdc.gov/media/releases/2012/p0614_preventive_health.html.

EHR Incentive Program Surpasses Goals for Use of Electronic Health Records in 2012

More than 100,000 health care professionals have received payment from the Centers for Medicare and Medicaid Services for using electronic health records (EHRs), exceeding the agency's goals for 2012. Payments are made through the EHR Incentive Program, which provides incentive payment to eligible health care professionals and hospitals to adopt, implement, upgrade, or meaningfully use certified EHR technology to improve

patient care, patient safety, and shared decision making between patients and physicians. As of the end of May 2012, 44 states are participating in the program. Additionally, more than 110,000 professionals and 2,400 hospitals have been paid a total of more than \$5.7 billion; approximately 48 percent of eligible hospitals have received a payment; and 20 percent of professionals participating in Medicare or Medicaid have received a payment. For more information, visit <http://www.hhs.gov/news/press/2012pres/06/20120619a.html>.

Health Insurer Report Card Shows Improvement in Medical Claims Errors

The American Medical Association (AMA) has released its fifth annual National Health Insurer Report Card, which shows that medical claim errors were reduced by about 50 percent from 2011 to 2012 (from 19.3 to 9.5 percent). According to a June 18, 2012, press release, one improvement likely saved the health care system about \$8 billion by reducing administrative work necessary to track down errors. All of the health insurance companies measured in the report card improved their accuracy ratings in 2012. The statistics are based on a random sampling of an estimated 1.1 million electronic claims for about 1.9 million medical services. Claims were submitted to health plans in February and March of 2012 by more than 380 physician practices of various specialties in 39 states. For more information, visit <http://www.aafp.org/news-now/news-in-brief/20120620wklynewsbrfs.html>.

New Suicide Prevention Toolkit Provides Resources for High Schools

The Substance Abuse and Mental Health Services Administration has created a new toolkit to help prevent suicide among high school students. "Preventing Suicide: A Toolkit for High Schools" provides teachers, administrators, counselors, and other staff with guidelines to identify at-risk students and resources to take action. The toolkit is based on practical experiences in high school suicide prevention programs, and it offers information on federal, state, and community programs to help with prevention efforts. One of the programs highlighted in the toolkit is the National Suicide Prevention Lifeline, which provides free and confidential crisis counseling 24 hours a day, seven days a week. For more information, visit <http://www.samhsa.gov/newsroom/advisories/1206222122.aspx>.

Physicians Face New Regulations on Physical Exams for Commercial Drivers

To improve highway safety and driver health, the U.S. Department of Transportation's Federal Motor Carrier Safety Administration has created a new training, testing,

and registration program for medical professionals who conduct medical certification examinations of commercial truck and bus drivers. Medical professionals who wish to apply for certification will be required to attend an accredited training program and pass a recertification test every 10 years. Every month, medical professionals will need to electronically transmit information about completed reports of drivers who have undergone an examination. They must also be prepared to submit copies of medical reports and certificates to the agency within 48 hours of a request from enforcement personnel. The new regulations will be implemented by May 21, 2014. For more information, visit <http://www.aafp.org/news-now/government-medicine/20120620fmcsaregistry.html>.

Foundations Pledge Support to Center for Health Professional Collaboration

Four of the nation's largest foundations announced their joint support of the advancement of interprofessional health education through the creation of a national Center for Interprofessional Education and Collaborative Practice. The Josiah Macy Jr. Foundation, the Gordon and Betty Moore Foundation, the John A. Hartford Foundation, and the Robert Wood Johnson Foundation collectively will provide \$8.6 million in grants over five years to support the new center. The center will focus on fostering collaboration among health care professionals. For more information, visit <http://www.aafp.org/news-now/news-in-brief/20120620wklynewsbrfs.html>.

AMA Adopts Policy Supporting Taxes on Beverages with Added Sweeteners

The AMA recently adopted a new policy addressing sugar-sweetened beverages in relation to the obesity epidemic in the United States. The group voted to support taxes on beverages with added sweeteners as a way of financing consumer education campaigns and other obesity-related programs. Because of the strong association between the intake of sugar-sweetened beverages and an increase in body weight and health conditions such as type 2 diabetes mellitus, the AMA asserts that reducing consumption of these beverages is a simple way to curb the intake of added sugar and empty calories. Additionally, the group will advocate for more research into the effects of long-term consumption of noncaloric sweeteners in beverages, particularly in children and adolescents. For more information, visit <http://www.ama-assn.org/ama/pub/news/news/2012-06-20-ama-policy-addresses-obesity.page>.

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