



UHA Connection

Monthly Provider Newsletter: JANUARY 2023

WELCOME

Thank you for reading our Monthly Provider Newsletter, the UHA Connection. We hope this new format will allow you to easily access content and print it out if you would rather read it that way. In this PDF, you can still click on the links provided throughout the newsletter.

Flip through to learn more on topical information related to:

- Practice Tactics
- Clinical Corner
- Better Health For All
- On the Lookout
- CME for Thee
- Network News

Your success is critical to our member's health, behavioral and physical. Use this newsletter as a tool to succeed as a provider of Umpqua Health Alliance and resource for important updates.

If you have questions or would like to see information on a specific topic in the newsletter please reach out to:

- Dr. Douglas Carr at dcarr@umpquahealth.com
- Charlee Scheer at cscheer@umpquahealth.com

Thank you for all that you do to keep our members and patients safe and healthy!

GET CONNECTED

If you're seeking information regarding your patient's benefits, Umpqua Health Alliance is here to help you get the answers you need. Call us today, we're happy to assist you.

- Phone: (541) 229-4842
- TTY: (541) 440-6304 | Toll Free: (866) 672-1551
- Email: UHAMemberServices@umpquahealth.com

Umpqua Health Alliance has adopted the definition of cultural competence that appears on the Oregon Administrative Rules for Cultural Competence Continuing Education for Health Care Professionals (OAR 943-090-0010).

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PRACTICE TACTICS

The Prioritized List Changes on January 1st

The annual updates to the Prioritized List of Covered Services for the Oregon Health Plan are available on the HERC page: <https://www.oregon.gov/oha/hpa/dsi-herc/Pages/index.aspx>. There are several behavioral health conditions that are now covered because of adoption of the EPS-DT guidelines required by CMS. (See CME for These below with multiple references.)

Other notable additions to coverage include hydrocele repair, some genetic testing, and therapies for inflammatory skin diseases, PANDA/PANS, and keratoconus. The covered lines remain at #1 to #472.

Reminders About Commonly Requested Prior Authorizations

We won't repeat our Top Ten list this New Year but will focus on the most common reasons for PA denials.

- UHA supports the in-network specialists who have chosen to practice in our community. We will deny out of county referrals to orthopedics, general surgery, cardiology, ENT, etc. unless there is an appropriate clinical rationale.
- Chiropractic referrals are limited to conditions of the spine and require examinations <60 days from request.
- MRI imaging of spine requires supporting neurologic examinations!
- CGMs are not covered for Type 2 DM.
- PCPs: Please treat minor skin lesions that you have already diagnosed.

Adding More Dental Plan Members

Starting January 1, 2023, more adults will be eligible for Oregon Health Plan dental benefits.

This coverage will be under tier CCOF.

Dental-only coverage is for people who live in Oregon and don't qualify for full OHP benefits.

For more details, please visit OHA's website at the following link

<https://www.oregon.gov/oha/HSD/OHP/Pages/Dental-Programs.aspx>

Below is a list of coverage types UHA offers:

- CCOA: Medical, dental, and behavioral.
- CCOB: Medical and behavioral health care. OHP pays for dental care.
- CCOG: Dental and behavioral health care. OHP pays for medical care.
- CCOE: Behavioral health care only. OHP pays for medical and dental care.
- CCOF: Dental care only.

foodsmart

**New
Incentives
Available!**

Umpqua Health Alliance (UHA) members can now receive the following incentives when they sign for Foodsmart. Incentives will be emailed to the member after the task is completed.

- \$25 Gift Card when a member signs up for Foodsmart and takes the Nutriquiz
- \$25 Gift Card when a member sets up a Telehealth appointment with a Foodsmart Registered Dietitian

Refer your patients to Foodsmart to get them started on a better path to healthy eating!

- Visit: <https://www.foodsmart.com/umpqua>
- Download the Foodsmart app on the App Store
- Call Foodsmart Customer Care at: 888-837-5325

CLINICAL CORNER

Medical Treatment for Weight Loss

UHA defers to the Oregon Health Authority Prioritized List (guideline notes 5 and 8) when reviewing medications intended for weight loss. The initial management of individuals who would benefit from weight loss is a comprehensive lifestyle intervention: a combination of diet, exercise, and behavioral modification. The treatment of obesity with medications is an OHP unfunded diagnosis and no obesity specific drugs are included on the FFS or UHA formulary. Intensive counseling visits (once every 1-2 weeks) are covered for 6 months but may continue for longer if there is evidence of continued weight loss. Maintenance visits are covered only monthly after this intensive counseling period. The Diabetes Prevention Program (DPP) can be used as an alternative to the intensive counseling as above, even in the absence of prediabetes.

Additionally, UHA member have access to dietician and food plan services through the Food Smart Program; details available online at <https://www.umpquahealth.com/foodsmart/>.

•Please refer to the UHA Formulary and UHA Prior Authorization Guidelines for medication coverage; details available online at: <https://www.umpquahealth.com/pharmacy-services>.

ON THE LOOK OUT

Dr. Bob Dannenhoffer from DPHN

As we make our way through the “tripledeemic” of Covid, influenza and Respiratory Syncytial virus (RSV) there are two other illnesses that are circulating in the world that could be confused with influenza or Covid.

There is a large outbreak of measles in the Midwest. This outbreak started in the Columbus Ohio area and has now spread to neighboring areas, with over 80 cases as of 12/28/2022. With holiday travel and with Ohio state fans travelling for the bowl games, the possibility of spread outside the area is a great concern.

For those of us who are older and have lived through a measles outbreak, measles is a terrible disease. I lived through several measles outbreaks as a young pediatrician. As a colleague said, “the least sick kid with measles is still really sick.” Historically and in the current Ohio outbreak, about a third of the cases require hospitalization.

Measles starts with a high fever and malaise but no other specific symptoms. Parents will often bring their child to an urgent care center or emergency room for evaluation. On the first or second day of symptoms, the diagnosis is VERY hard to make. The physical exam is usually normal, but might show mild cough, coryza and/or conjunctivitis. A very astute examiner might notice Koplik spots, white or grey spots on the buccal mucosa by the molars. Blood counts and tests for flu and strep are negative. Without other clues as to the illness, the diagnosis of measles is usually not made. Unfortunately, this stage of the disease is extremely contagious and everyone in the waiting room is likely exposed, with attack rates of 90% for those who are not immune. Over the next few days, the typical measles rash develops, but by then, many people may have been exposed.

Measles is now rare and most younger clinicians have never seen measles. The MMR vaccine is very protective, and cases are generally only seen in those less than 12 months old who have not yet received their MMR or in children or adults who have declined the vaccine.

Thus, BE ON THE LOOKOUT for measles, especially in:

- People who are not immunized for measles
- Those who have travelled from an area where measles is spreading, currently Ohio
- Those who have high fever and malaise, with no obvious source, normal blood tests and negative tests for flu and Covid.

In addition, there are now several reports of severe Group A strep infections in Europe and now in the US. Group A strep is endemic in the US and usually presents as mild to moderate illness in the form of strep throat or scarlet fever. However, in these severe cases, there is a toxic shock like syndrome and/or necrotizing soft tissue infection, with other signs of multi-system organ failure. There have been no reported cases in Oregon.

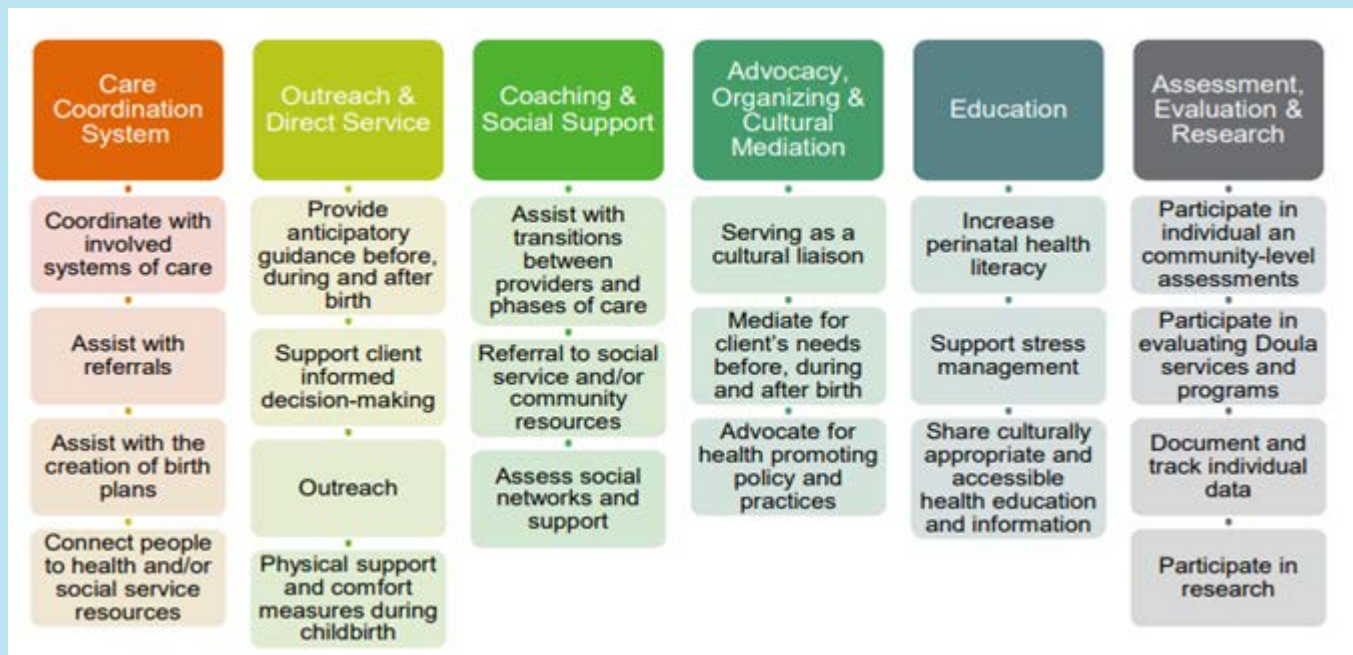


NETWORK NEWS

DOULAS

Umpqua Health Alliance (UHA) is proud to announce the addition of contracted Doulas, also known as Birth Doulas, who are readily available to serve UHA members. A Doula provides continuous, culturally responsive one to one support to women and their families just before, during, and after childbirth, focusing on their needs for education, emotional care, physical comfort, reassurance, and advocacy. It is important to note that Doulas do not provide medical care or medical advice. Doula support and services are a covered benefit to UHA members. Doulas contracted with Umpqua Health Network (UHN) are certified Traditional Health Workers who have completed all birth doula training, certification, and credentialing requirements with UHN. A Traditional Health Worker (THW) is a public health worker that either works in a clinical or community setting to support the quadruple aim of health while ensuring the promotion of health equity.

Birth Doula Scope of Practice



Benefits of Integrating Birth Doulas

CARE (quality, availability, reliability)	COST (lower, contain, affordability)	HEALTH (improve lifelong health)
<ul style="list-style-type: none"> • Higher patient satisfaction rates • Advocates and facilitates clarity in communication • Higher levels of psychosocial support and improved attachment 	<ul style="list-style-type: none"> • Shorter average labor lengths and decreased use of pain relief medications and interventions • Lower rates of Cesarean births • Higher newborn APGAR scores • Lower hospital readmissions for mothers and babies 	<ul style="list-style-type: none"> • Lower morbidity and mortality rates for mothers and infants • Lower incidence of maternal mental health complications associated with childbirth • Higher rates for breastfeeding success and duration

List of UHN Contracted Birth Doulas:

•**Rogue Valley Doulas LLC**

Hours: M-F 8:30a – 4:30p

Closed for lunch 12-1

305 N Bartlett St

Medford, OR 97501

(541) 690-8482 F (541) 500-3310

Accepting New Patients: Yes

Web site: www.doulasandcompany.com

Language(s) spoken: EN, ES

Rivera Conjura, Martha (ES) – Birth Doula

Verbeck, Jacque – Birth Doula

•**Reeds & Rushes Doula LLC**

(541)-636-8188

Email: ReedsRushesDoula@gmail.com

Accepting New Patients: yes

Website: <https://eareed55.wixsite.com/reedsdoula>

Language(s) spoken: EN

Reed, Elizabeth – Birth Doula

•**Nourishing Birth**

Services provided at home and birthing facilities

(541) 999-4880 (541) 935-4483

Email: nourishingbirth.jen@gmail.com

Accepting New Patients: yes

Web site: www.nourishingbirth.org

Language(s) spoken: EN

Nelson, Jennifer – Birth Doula

PROVIDER NETWORK UPDATES

•Northwest Eye Center PC, dba Weston Eye Center located at 341 NW Medical Loop Ste 120 will permanently close December 31, 2022.

•Little Lamb Speech Therapy will be opening a new office in addition to their in-home services. The new office is located at 130 S Comstock Ave Ste 104 in Sutherlin and will open January 2, 2023, phone (541) 680-4686, website: <https://andrea-botwinick.clientsecure.me>

•Boulder Care Provider Group offers telehealth addiction treatment for substance use disorder (SUD) including opioid use disorder and alcohol use disorder, (888) 288-4715

•Kaizen Psychiatric Services is based in Beaverton, Oregon and provides holistic mental and behavioral health care via telehealth, (360) 836-0171

CME FOR THEE

Implementing Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit in Oregon

January 24 webinar

Contact: : Laura Sisulak (Laura.Sisulak@dhsosha.state.or.us)

Effective January 1, 2023, Oregon will implement the full Early and Periodic Screening, Diagnosis and Treatment benefit (EPSDT) for children and youth until their 21st birthday. This means both the Open Card program and coordinated care organizations (CCOs) must cover any medically necessary and medically appropriate services (and dentally appropriate, for dental services) for enrolled children and youth, regardless of:

- The location of the diagnosis on the Prioritized List of Health Services;
- Whether it pairs, or is a non-pairing service;
- Whether it is a previously “non-covered” ancillary service; or
- Whether it is covered under the State Plan.

Provider education (no-cost):

- Audience: Clinicians and practice managers serving children and youth who are Oregon Health Plan members.
- Presenters will include the following OHA clinician leaders: Dana Hargunani, MD, MPH, OHA Chief Medical Officer; Dawn Mautner, MD, MS, Medicaid Medical Director; Margaret Cary, MD, MPH, OHP Fee-For-Service Medical Director.
- Session One: January 24, Noon–1 p.m. Overview of the EPSDT policy change and implementation. Register here: <https://www.zoomgov.com/meeting/register/vJltdumorT8oH4rMXC81IzetQsxfNMIHDg>
- Session Two: February 7, Noon–1 p.m. Ensuring EPSDT access — documenting medical necessity, prior authorization and related processes for Open Card patients. Register here: <https://www.zoomgov.com/meeting/register/vJlIc-Copz8oGIcpxF3BQWwG0ahplrcIYPs>
- Both sessions will be recorded, and webinar materials will be made available in Spanish.
- Please contact Tom Cogswell (Thomas.Cogswell@dhsosha.state.or.us, 971-304-9642) if you need an accommodation to fully participate in these webinars. Examples of accommodations include American Sign Language (ASL) or language interpretation, and closed captioning.

Additional information may be found at: www.oregon.gov/EPSDT, including:

- [EPSDT Guidance Document for CCOs](#)
- [EPSDT Policy Change Memo for OHP providers](#)
- [EPSDT Guidance for OHP Providers](#)
- [EPSDT Fact Sheet for OHP members](#) (available soon in additional languages)