



# UHA Connection

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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.

Scroll through to learn more on topical information related to:

- Practice Tactics
- Clinical Corner
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- 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](mailto:dcarr@umpquahealth.com)

Charlee Scheer at [cscheer@umpquahealth.com](mailto:cscheer@umpquahealth.com)

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



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# Practice Tactics

## EPSDT—A Provider Break-Down of Services

UHA aligns our policy and procedures with the Oregon Health Authority (OHA) requirements for Early & Periodic Screening, Diagnostic and Treatment (EPSDT). EPSDT is a comprehensive child and youth health care benefit for OHP members ages birth to 21 (EPSDT coverage ends when a person turns 21).<sup>1</sup> This includes physical, dental, behavioral health, and pharmacy services. UHA must cover any medically necessary and medically appropriate (or dentally appropriate) services for enrolled children and youth until their 21st birthday, regardless of:

- The placement of the service on the Prioritized List of Health Services.
- Whether it pairs or is a non-pairing service.
- Whether it is a historically non-covered ancillary service.
- Whether it is covered under the State Plan.

This includes any screenings, checkups, tests, treatments, pharmacy services and follow-up care for the child or youth's:

- Physical health (including vision and hearing)
- Oral/dental health
- Behavioral health

To be covered, in addition to being medically necessary and medically appropriate (or dentally appropriate) for the individual member, services must:

- Have an appropriate diagnosis (ICD-10) and procedure code (CPT or HCPCS).
- Be coverable under OHP. For example, purely cosmetic procedures are excluded from OHP coverage.



Medicaid is required to be a good steward of state and federal resources. CCOs and OHA may choose to cover the least costly effective option that will meet the member's needs.

CMS requires states to follow a periodicity schedule for children's services. Oregon uses the Bright Futures periodicity schedule found here [https://downloads.aap.org/AAP/PDF/periodicity\\_schedule.pdf](https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf). However, children and youth under age 21 may get care outside this schedule for any changes in health.

While some changes to prior authorizations have occurred due to EPSDT, please consult our PA Grid available at [www.umpquahealth.com/prior-authorizations](http://www.umpquahealth.com/prior-authorizations). Additional information and resources about EPSDT can be found on the OHA website at <https://www.oregon.gov/oha/hsd/ohp/pages/epsdt.aspx>. Any additional questions or information about this, please feel free to contact us at [priorauthorizations@umpquahealth.com](mailto:priorauthorizations@umpquahealth.com).



Find us on Facebook at <https://www.facebook.com/UmpquaHealth/>

# Clinical Corner

## Review of Colorectal Cancer Screening Covered by the Oregon Health Plan

We've noticed an increase in claims for Cologuard® tests for UHA members. This test is **NOT Covered under OHP**. See the quote from the Prioritized List (PL) of Healthcare Services below.

GUIDELINE NOTE 106, PREVENTIVE SERVICES:

Colorectal cancer screening is included on Line 3 for average-risk adults aged 45 to 75, using one of the following screening programs:

- A) Colonoscopy every 10 years
- B) Flexible sigmoidoscopy every 5 years
- C) Fecal immunochemical test (FIT) every year
- D) Guaiac-based fecal occult blood test (gFOBT) every year

Screening CT colonography (CPT 74263) is only covered for patients who are unable to complete a screening colonoscopy due to colon structural problems (for example, colonic obstruction, stricture, or compression or tortuous or redundant colon).

FIT-DNA (CPT 81528) (Cologuard®) and mSEPT9 (HCPCS G0327) are included on Line 495 CONDITIONS FOR WHICH INTERVENTIONS RESULT IN MARGINAL CLINICAL BENEFIT OR LOW COST-EFFECTIVENESS.

Colorectal cancer screening for average-risk adults aged 76 to 85 is covered after informed decision making between patients and clinicians which includes consideration of the patient's overall health, prior screening history, and preferences.



COLORECTAL  
CANCER



# Better Health for All

## Unveiling Disparities in Heart Health

Heart disease, the leading cause of death in the United States, is a prime example of a disease that affects different racial and ethnic groups in distinct ways. We would like to shed light on the racial and ethnic disparities in heart disease, exploring three critical areas: deaths, reported prevalence, and risk factors.

### 1. Deaths per 100,000 Persons:

From 1999 through 2017, heart disease death rates experienced an overall decrease for all racial and ethnic groups. However, the rate of decline has slowed in recent years. A stark revelation emerged: Non-Hispanic black individuals were more than twice as likely as their non-Hispanic Asian or Pacific Islander counterparts to succumb to heart disease in both 1999 and 2017.

### 2. Reported Prevalence

Examining the reported prevalence of heart disease among adults aged 18 and over reveals a varied landscape. While non-Hispanic white adults had a prevalence of 11.5%, non-Hispanic black adults faced a significantly higher rate of 9.5%. Hispanic adults followed with a prevalence of 7.4%, and non-Hispanic Asian adults had the lowest prevalence at 6.0%.

### 3. Risk Factors

Understanding the risk factors associated with heart disease is essential for effective prevention and management. Four clinical risk factors (hypertension, obesity, diabetes, and high total cholesterol) reveals striking disparities.

- Hypertension: Non-Hispanic black adults aged 20 and over were most likely to have hypertension in 2015–2016.
- Obesity: Hispanic and non-Hispanic black adults aged 20 and over were most likely to have obesity in 2015–2016.
- Diabetes: Hispanic and non-Hispanic black adults aged 20 and over were most likely to have diabetes in 2015–2016.
- High Total Cholesterol: Hispanic, non-Hispanic white, non-Hispanic black, and non-Hispanic Asian adults aged 20 and over were equally likely to have high total cholesterol in 2015–2016.

As we strive for a healthier community, understanding and addressing these disparities is vital. By recognizing the nuanced challenges faced by various racial and ethnic groups, we can work towards better health for all.

Source: National Center for Health Statistics (NCHS), National Health and Nutrition Examination Survey (NHANES)

# Better Health for All Cont.

## Language Access Report

UHA wants to highlight the significance of the Quarterly Language Access (LA) Report. The purpose of the LA Report is to monitor the ease of access and appropriate use of interpreter services for Oregon Health Plan (OHP) members. UHA staff will contact your office via e-mail with instructions and a template if there is evidence of interpreter service needs for a member that was seen in your office. If you have not indicated to UHA that you would like a template to be e-mailed, we will contact your office via phone and ask for the needed information.

If you have any questions, please contact UHA's Quality Improvement Department at [UHQualityImprovement@umpquahealth.com](mailto:UHQualityImprovement@umpquahealth.com).

As a reminder, effective July 01, 2022, Oregon Administrative Rule (OAR) [950-050-1060](#) requires:

A. The use of Oregon qualified or certified healthcare interpreters for medical visits.

- Visit the [OHA Health Care Interpreter Registry](#) for a full list of qualified or certified interpreters.
- Review the [Language Access Plan](#) for a full list of interpreter vendors covered by UHA.

B. Providers that offer in-language services other than English send proof of language proficiency to [UHQualityImprovement@umpquahealth.com](mailto:UHQualityImprovement@umpquahealth.com).

- Refer to the [Clinician Language Proficiency Requirements](#) for how to prove language proficiency.

For information regarding UHA's goal to promote health equity and reduce health disparities in our community, you can find our updated 2024 Language Access Plan [here](#).



# DIABETES DOESN'T STOP ME

## LIVING WELL WITH DIABETES

The Living Well with Diabetes Program is a 6-week program for people who want to manage their diabetes better. Participants get support from a trained professional who also has a chronic condition and a group of people who are just like you.

### Virtual Meeting:

**Information session Feb 6th 9-10am**

**6 Sessions: Tuesdays Feb 20th- Mar 26th,  
from 9am-11:30am**

## Topics Include:

- Managing symptoms
- Solving problems
- Handling frustration, fatigue, pain, and isolation
- Improving eating habits
- Exercising at your level
- Getting better sleep
- Building a support system
- Working with your doctor



833-673-9355

[oregonwellnessnetwork.com](http://oregonwellnessnetwork.com)





# LIVING WELL WITH CHRONIC CONDITIONS

A 6-week program to learn the unique challenges of living with chronic conditions.

Caregivers also welcome.

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**Mondays, 3/4 - 4/8, 2024**

**10:00 a.m.-12:30 p.m.**

**Held virtually**

**Info session Monday, 2/26 from 10-11a.m.**

**No cost to participants**

For information or to register,  
call (833) 673-9355 or visit our website at  
[oregonwellnessnetwork.org](http://oregonwellnessnetwork.org)



# On the Lookout



The lessons gleaned from the pandemic are driving a paradigm shift in public health communication and delivery. Douglas Public Health Network recognizes the benefits of a more tailored and personal approach to relationships between public health and clinical medicine and thus developed a new initiative, Public Health Detailing. This innovative approach, the first of its kind in Oregon, embodies a commitment to customized outreach and relationship building not only among our healthcare partners but also within the community. Drawing on the success of Academic Detailing, which has a four-decade track record of partnering with medical providers to enhance patient outcomes, Public Health Detailing takes this approach a step further.

DPHN's detailing program, developed as part of a dedication to innovative public health services in our rural community, goes beyond the conventional boundaries to improve your patient outcomes and help you meet your metrics. Our Public Health Detailer serves as a conduit for unbiased, evidence-based information on current public health topics and challenges. The program's objectives are to improve outreach, cultivate partnerships, effectively share information, promote practices to improve patient outcomes, and help providers meet your metrics.

*"Over the last month, I have visited offices in not only Roseburg, but Glide, Drain, Reedsport, Glendale, and other outlying communities. I met with many staff and some doctors and learned about their patients, community, and the challenges they face. I was able to provide some helpful resources and information and am eager to find and develop more. I look forward to visiting all of the clinics again in the coming weeks!"*

- Kendra Murray, MPH, CHES

There are many detailing projects currently underway at DPHN, some examples include support for communicable disease identification and treatment guidelines, communication of emerging public health threats and best practices to improve childhood vaccine uptake. Public Health Detailing is a dynamic tool capable of addressing a wide array of topics and meeting the evolving needs of our community. As a powerful instrument of public health modernization, detailing has quickly and positively impacted our community in just a few months in Douglas County. Please watch for upcoming outreach, trainings, and communications including clinic visits from our Public Health Detailer Kendra Murray, and help us make this initiative a model for the rest of the state, ultimately improving patient outcomes and supporting you in your practice.





# Network News

## Clinic and Provider Updates

- David Germany LPC practicing as Core Dynamics Counseling has joined the Umpqua Health Network, offering telehealth counseling appointments, and can be reached at 541-530-8136.
- Central Eyes Optometry, and Dr's Barrett and April Napier are no longer a part of the Umpqua Health Network, effective 1/5/2024.
- Touchstone Interventional Pain Center and associated facility Rogue Valley Surgery Center have joined the Umpqua Health Network, offering pain management care at 1411 E McAndrews Rd, Medford OR. They can be reached at 541-773-1435.
- Stronger Oregon with locations in Roseburg and Coos Bay provides both telehealth and in-person counseling and mental health services. Their Roseburg office is located at 272 NW Medical Loop Ste E, and their Coos Bay office is located at 632 Anderson Ave Ste D. Either office can be reached at 541-900-4285.
- Common Ground Consultation LLC has joined the Umpqua Health Network, providing mental health services at 20 N 5th St in Cottage Grove. Provider Angel Reeves LMFT sees all ages and can be reached at 541-337-1483.
- Chelsie Hugo LPC provides mental health services exclusively by telehealth for children 0-5 through Wholistic Counseling & Wellness, and can be reached at 541-321-0066.
- Beginning in the first quarter of 2024, Cow Creek Wellness Clinic and its providers will provide services to Heritage Naïve American (HNA) as recognized by Oregon Health Authority (OHA).
- Ruben Acevedo DC no longer provides services at Umpqua Chiropractic. Dr. Acevedo now practices at Urban Chiropractic and additionally provides EMG and Nerve Conduction studies. He can be reached at 503-372-6016.
- Centennial Orthopedics is excited to welcome Dr. Phillip Braunlich. Dr. Braunlich is an orthopedic surgeon with advanced training in surgery of the hand and upper extremities. He is passionate about all conditions of the shoulder, elbow and hand. He joined Centennial Orthopedics in January 2024. Centennial Orthopedics also welcomed Dr. Stephen Franzino who specializes in Orthopedic Sports Medicine. He joined Centennial Orthopedics and Podiatry in October 2023. Prior to that, he practiced in Los Angeles (CA), Anderson (SC) and Napa (CA) with vast experience with college, minor league, and professional sports teams. Both are accepting patients - for more information, please call 541.229.2663 or visit [Contact Us | Centennial Orthopedics & Podiatry in Roseburg, OR](#)



## Network News Cont.

### PROVIDER DIRECTORY UPGRADES

Recently clinics have reached out, requesting the weekly Behavioral Health Referral Matrix as a valuable tool for them when making referrals.

Recent upgrades to our online searchable Provider Directory have included a detailed listing of modalities that we hope will take the place of the BH Referral Matrix. We encourage you to visit our online directory at <https://portal.umpquahealth.com/ClientApp/providers> and to view not only your own listing for accuracy, but to research detailed information that is shown under the Providers and Facilities tabs.

The Facilities tab will list not only the clinic or organization name, but all of the modalities offered as shown below:

Behavioral Therapy (CBT), Contingency Management, Counseling, Crisis Intervention, Dialectical Behavioral Therapy (DBT), DUI Treatment, Early Assessment & Support Alliance (EASA) [15-25], Eye Movement Desensitization & Reprocessing (EMDR), Family Counseling, Forensic Services, Group Counseling, In Home Behavioral Health Treatment (IIBHT), Individual Counseling, Individual Placement Support (IPS) Supported Employment, Internal Family Systems, Mental Health Medication Management, Motivational Interviewing (MI), Parent Child Interaction Therapy (PCIT), Peer Delivered Services, Peer Support Services, Prevention Services, Problem Gambling Treatment, Psychological Testing, School Based Therapeutic Services, Skills Training, SUD Medication Assisted Treatment (MAT), SUD Opioid Treatment Program, SUD Outpatient, SUD Residential, SUD Withdrawal Management/Detox, Trauma Informed, Wraparound, Youth SUD Residential (13-17)

Under the Providers tab, Mental Health Provider can be selected, and the drop-down menu under Specialty will list all treatment options. Once selected, a list of all providers offering that type of care will appear on the right.

Facilities Providers Pharmacies

Provider Name

Gender

Provider Type

Specialty

Language

City

Zip Code

Accepts New Patients

Age Range

ADA Accessible

The Provider Directory has been re-designed to benefit not only our members, but our Provider Network. Please review your clinic and provider profiles regularly and contact Karen Wright, Provider Network Representative at (458) 803-4058 or at [kwright@umpquahahealth.com](mailto:kwright@umpquahahealth.com) with any necessary edits. We want the directory to be as accurate as possible and welcome your input.

The directory has also been updated to include more detailed information regarding the ADA accommodations you provide. In the past ADA Accessibility was limited to yes/no, but now we have gathered more detailed information about each area of compliance, as shown in the drop-down menu below:

Accepts New Patients

Age Range

ADA Accessible

Telehealth

We have developed a survey for ADA accommodations that can be accessed at: <https://www.surveymonkey.com/r/M2K5WHK>

Practices who have not submitted ADA information will be shown in the public-facing directory in this way, so it is important to provide the information needed to complete your listing.

**ADA Accessible**  
 Exam Room: No  
 Exterior Building Access: No  
 Interior Building Access: No  
 Parking: No  
 Restroom: No  
 Telecommunication Device: No  
 Waiting or Reception Access: No  
 Wheelchair Weight Scale: No

# Dental Digest

## What Causes Sensitive Teeth?

Underneath the enamel of your teeth is a layer of tissue called dentin. Within the dentin are tiny tubules that normally remain protected by the enamel. When enamel wears down, exposed tubules in the dentin allow substances to stimulate the nerve cells deep within the tooth, and the result is sensitivity or pain.

## Teeth Can Look Terrific, But Still Be Sensitive

Receding gums or worn tooth enamel allow exposure of these sensitive surfaces. Sometimes this happens slowly, and sensitivity increases gradually. Eventually, however, it's difficult to ignore. Here's what you should know about causes of sensitive teeth and how to know when it's time to see your dentist about tooth sensitivity.

## Common Causes of Sensitive Teeth

Brushing teeth too forcefully, particularly with a hard-bristled toothbrush, can lead to tooth sensitivity by scrubbing away some of the enamel surface. Additionally, some people with sensitive teeth find some toothpastes to be overly abrasive and associated with increased sensitivity.

A common habit that can increase tooth sensitivity is drinking carbonated soft drinks throughout the day. Switching to sugar-free sodas only helps so much, however, because even without added sugar, sodas are acidic and hard on teeth. Diet sodas are somewhat less acidic than regular sodas, but they can still damage tooth enamel, making teeth more vulnerable to sugars in other foods and drinks. Acidic foods like lemons, tomatoes, and grapefruit can also lead to tooth sensitivity. Trauma to teeth that causes teeth to chip or crack can lead to sensitivity, or straight-up pain. When fillings weaken and allow decay around the edges, acid buildup and enamel breakdown can result, causing increased sensitivity in the area of the filling. Fortunately, fillings can usually be easily replaced.

## Overzealous Tooth Whitening Can Increase Sensitivity

Everyone wants a bright smile, but overuse of tooth whitening products can make teeth more sensitive. Whitening products containing hydrogen peroxide can penetrate even strong enamel, causing irritation to the dentin underneath. This type of sensitivity is usually reversible as long as you follow product instructions about how often they can be used. It's also a good idea to skip a day of whitening if your teeth feel more sensitive after using your whitening products. If you're committed to using whitening products, always follow the instructions, and hedge your bets by cutting out processed sugars and acidic foods. Regularly rinsing with a fluoride mouthwash can strengthen your enamel as well. You may find seeing your dentist for a custom whitening kit to be a better route to a bright smile, because dentists have custom kits that are designed to minimize discomfort and sensitivity while safely whitening your teeth.



# Dental Digest Cont.

## When Should You See a Dentist About Sensitive Teeth?

Sudden or overnight sensitivity that makes you cringe should be seen. You could have a cracked or damaged tooth that needs the attention of your dentist. If teeth are sensitive to both heat and cold, particularly if it has been going on for more than a few days, it's time to call your dentist. In some cases, a sensitive tooth is the only clue that there is a cavity or even an abscess that's not yet visible. And if your sensitive teeth keep you from enjoying food or interfere with daily life, you definitely should see your dentist.

## How Dentists Treat Tooth Sensitivity

While there are toothpastes for sensitive teeth sold over the counter, sometimes these aren't enough to keep sensitivity under control. Your dentist will determine what is causing your tooth sensitivity, and the cause will help him or her determine the best course of treatment. It may include a prescription toothpaste for sensitive teeth, applying special gels to sensitive teeth, or repairing fillings that have broken down and cause sensitivity.

New treatments for sensitive teeth may be on the horizon as well. [Sub-micron silica particles](#) with special surface coatings can deliver treatments to the dentin of the teeth that increase mineral components of the dentin and enamel, promoting repair that closes the exposed tiny tubules that make teeth sensitive. Dental researchers are currently determining the best way to coat these particles for tooth repair.

Advantage Dental+ understands the special needs of sensitive teeth, and we understand that many people feel anxiety seeing their dentist. Find a location near you, and let's talk about solving your dental problems with care and concern to improve your life quality.

**Schedule an Appointment Today!**

**Schedule an Appointment**

