

UMPQUA HEALTH CONNECTION

March 2025

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 (541) 229-4842

 umpquahealth.com

 3031 NE Stephens St.,
Roseburg, OR 97470



**UMPQUA
HEALTH**

PRACTICE TACTICS

UMPQUA HEALTH

Do You Know About Care Coordination Services?

Umpqua Health offers a comprehensive range of services to support our members through our Care Coordination Department. Our care coordinators play a vital role in ensuring that Umpqua Health Alliance (UHA) members receive appropriate care while promoting their safety and overall well-being.

Care coordination is a dynamic process that involves assessment, planning, implementation, coordination, monitoring, and evaluation—all aimed at improving member outcomes and experiences.

How to Make a Referral:

- 1 Providers and community partners can refer UHA members for care coordination services.
- 2 Complete the [Case Management Referral Form](#) (available on the [Umpqua Health website](#))
- 3 Send completed forms to Case Management for processing: casemanagement@umpquahealth.com

? For more information, visit our website or contact the Care Coordination Department at 541-229-4842.

“It is not [the case managers’] role to resolve [all] these problems personally. It is [their] job to connect the client with available resources that will help to resolve the problems.”

Ballew & Mink, 1996, p. 18

The Four Key Goals of Care Coordination:

1. Improve quality of care
– Providing members with essential health information and clarifying any misunderstandings.
2. Reduce health care costs
– Implementing proactive interventions to help prevent hospitalizations.
3. Coordinate care – Assisting members in navigating healthcare systems to achieve optimal health.
4. Encourage patient engagement and self-advocacy – Empowering members to take an active role in their healthcare journey and reach their personal health goals.

HEALTH RELATED SOCIAL NEEDS

HRSN Benefit Guidance

Rent and Utilities Assistance

- Rent assistance only.
Not available for mortgage assistance.
- Available for up to six months per household.
- Utilities assistance is only available for members with an approved HRSN rental assistance request.
- Qualifying household income limits
[Oregon HRSN Housing Eligibility](#)

Required Documentation:

- Missing documentation is the most common reason for denial.
- Submit request with all required documentation.
- Submissions without all required documentation will be delayed.
- Be sure all answers on the form are completed, and all signatures are provided.
- For everyone over age 18 who lives in the household, income documentation is required.



Member Requests:

Members can submit their own request. If a Member needs assistance with their request;

1. Providers can help members fill out the form, or
2. Members can get help from a case manager at UHA.

*Please be sure to use the form on the UHA website to ensure the most current version is used:
www.umpquahealth.com*

Focus on Housing

- Available for members with CCOA/CCOB coverage only.
- Members must be currently housed.
The goal of the program is to help prevent members from losing their housing.
- Members do not need to be behind on their rent to receive assistance.
- Members must meet criteria for population, social, and clinical risk factors.



Home Modifications and Home Remediations

- Available for members with a clinical need for the service requested.
- Limited to a set dollar amount per household.

Home Modification Services: (*may include)

- Ramps (*for members with a wheelchair or mobility need*).
- Grip bars (*for members with mobility or balance problems*).
- Door and cabinet handles (*for members having difficulty due to dexterity issues*).

Home Remediation Services: (*may include)

- Pest eradication.
- Installation of washable curtains or synthetic blinds to prevent allergens.

Chore services: (*limited to the following)

- Heavy housecleaning to ensure the member can safely navigate the home.
- Removal of hazardous waste, debris, or dirt from the home to remove health hazards.
- Removal of yard hazards to ensure the outside of the home is safe for the member to enter and exit.

PRACTICE TACTICS

UMPQUA HEALTH ALLIANCE

2025 Language Access Plan

Umpqua Health Alliance (UHA) is committed to ensuring equitable and comprehensive healthcare services for all members. The 2025 Language Access Plan outlines key initiatives and requirements to enhance language access across our service area.

UHA remains dedicated to collaborating with providers to eliminate language barriers and ensure that every member receives exceptional, linguistically appropriate care.

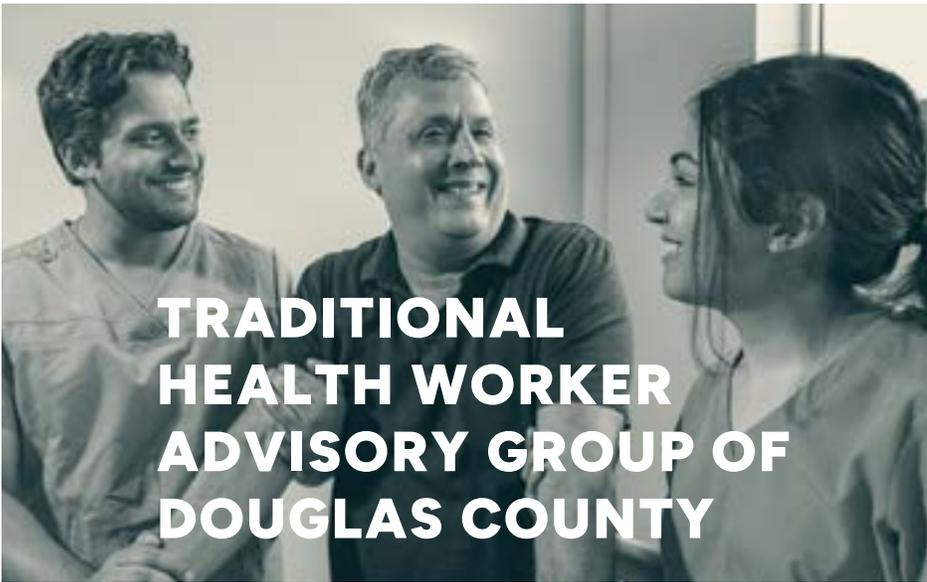
For questions, contact:

UHQualityImprovement@umpquahealth.com

Key Focus Areas:

- Interpreter Service Requirements & Offerings
- OHA-Certified/Qualified Interpreter Requirement
- Bilingual Provider Language Proficiency Verification
- Quarterly Language Access Data Submission
- UHA Resources & Support





TRADITIONAL HEALTH WORKER ADVISORY GROUP OF DOUGLAS COUNTY

**Roseburg Public Library,
Deer Creek Meeting
Room**

1409 NE Diamond Lake
Blvd., Roseburg, OR 97470

FREE – No cost to attend

Tuesdays, 3:30-5 p.m

Guiding the integration and utilization of Traditional Health Workers in Douglas County

Who Should Attend?

- Certified Traditional Health Workers:
 - Doulas
 - Community Health Workers (CHW)
 - Personal Health Navigators (PHNs)
 - Peer Support Specialists (PSS)
 - Peer Wellness Specialists (PWS)
- Those working in THW roles without certification
- Representatives of organizations partnering with THWs
- Community stakeholders interested in learning more about THWs

Parking Information

- Attendees must park in the Court Street lot and walk to the library.
- Handicap parking is available at the library.
- Parking passes for the Court Street lot are available at the meeting or in advance via email.



RSVP Information

RSVP is not required, but we encourage attendees to let us know in advance if possible.

Click [here](#) to register



3031 NE Stephens St., Roseburg, OR 97470

Get in Touch

541-464-6255

THWProgram@umpquahealth.com

www.umpquahealth.com

CME FOR THEE

TRADITIONAL HEALTH WORKERS

Cancer Education: Prevention & Training

This training is part of Umpqua Health Alliance's initiative to build a Health System Learning Collaborative in Douglas County.

Register online for a free training session on cancer education and prevention. This session will cover topics such as cancer development, risk factors, screening guidelines, prevention strategies, communication skills, and available resources. **Continuing Education Units (CEUs) are available.*

For questions:

Training content or CEUs,
Sarah Swanson
OHSU Knight Cancer Institute
530-515-1297
swansosa@ohsu.edu

Registration or accommodations,
Andrea Brown
Umpqua Health Alliance
541-464-6255
abrown@umpquahealth.com

For training suggestions or interest in offering a community program, email Andrea Brown.

Led by Sarah Swanson

Community Cancer Control Specialist
OHSU Knight Cancer Institute

Wednesday, April 16 | 3:30 - 5:30 p.m.

Aviva Health
Kenneth Ford Conference Center
150 NE Kenneth Ford Drive,
Roseburg, OR. 97470

Willamette and Rogue conference rooms
(*Second floor with accessible gender-neutral restrooms nearby*)

Parking available at Lower-lot
(*upper lot is reserved for Aviva patients*)



Register Online!

[Cancer Education:
Prevention & Screening](#)



OHSU Knight Cancer Institute



OREGON ECHO NETWORK

Register Now for Spring Programs

Registration is now open for Spring programs offered by the Oregon ECHO Network. ECHO (Extension for Community Health Outcomes) series are virtual, interactive educational programs that allow healthcare professionals throughout the state to create a case-based learning environment through the convenience of video connection. Programs are always free and offer no-cost continuing education credits.

New programs include:

- Palliative Care
- Behavioral Health for Youth with Intellectual and Developmental Disabilities
- Integrated Behavioral Health

Additional programs available:

- Foundational Gender-Affirming Care
- Adult Mental Health
- Menopause
- Diabetes Management

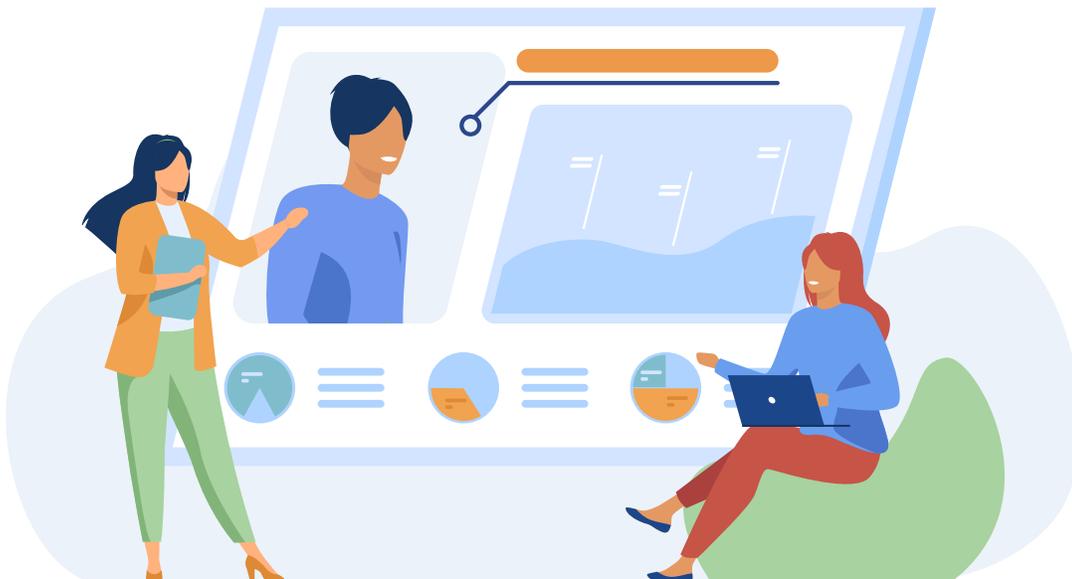


Learn More:

Get registered and stay up to date for a wide selection of courses and programs. *Oregon ECHO Network programs are always free and offer no-cost continuing education credits.

Spring 2025 Programs

www.oregonechonetwork.org/programs





AMERICAN COLLEGE OF PHYSICIANS

Migraine Prevention Advises Starting with Monotherapy

ACP's recommendations to prevent migraines in nonpregnant adults favor metoprolol or propranolol, valproate, venlafaxine, or amitriptyline as initial therapy and reported that all treatments provide similar net clinical benefit.

To prevent episodic migraines, a new ACP guideline suggests clinicians start with monotherapy using a beta-adrenergic blocker, either metoprolol or propranolol; the antiseizure medication valproate; the serotonin and norepinephrine reuptake inhibitor venlafaxine; or the tricyclic antidepressant amitriptyline.

The guideline, which was published Feb. 4 in *Annals of Internal Medicine*, also suggests that patients who do not tolerate these drugs or have an inadequate response should next try monotherapy with a calcitonin gene-related peptide (CGRP) antagonist, atogepant or rimegepant, or a CGRP monoclonal antibody such as eptinezumab, erenumab, fremanezumab, or galcanezumab. Patients who still do not tolerate therapy or have inadequate response should use monotherapy with the antiseizure medication topiramate, the guideline suggested.

The guideline used *economic evidence* and *evidence on patients' values and preferences* as primary decision factors in creating the recommendations.



Costs differed substantially between drug classes with median annual costs for the first-line options ranging from \$67 to \$393. Median annual costs for injectable CGRP monoclonal antibodies and oral CGRP antagonists, for which there are no generics, range from \$7,071 to \$22,790, and there are further associated costs that the guideline did not assess, such as those associated with outpatient IV infusions.

An evidence review of patients' values and preferences showed that they may prioritize the effect of migraine prevention treatments over the possibility of adverse events. Duration of migraine headache and its effect on daily activities may be more important than migraine recurrence.

Migraine severity may be more important than migraine frequency, and both were more important than adverse events. Route of administration of pharmacologic treatments was probably as important as their effect on

migraine frequency, with patients preferring oral treatments over injectables. The guideline emphasizes that a patient's adherence to pharmacologic treatment is crucial because improvement may occur gradually after long-term treatment for preventing episodic migraine.

The guideline also mentioned discussing lifestyle interventions, such as advising the patient to stay hydrated, maintain regular and adequate sleep and physical activity, and keep a migraine diary.

Clinicians should also evaluate whether the patient is using appropriate and adequate-strength medications to treat an acute migraine headache and can recommend cognitive behavioral therapy, relaxation training, or mindfulness-based treatment, the guideline said.

Read the full article:

<https://www.acpjournals.org/doi/10.7326/ANNALS-24-01052>

COMMUNITY ANNOUNCEMENTS

UMPQUA HEALTH ALLIANCE Health Care Interpreter Registry

Schedule interpreter services directly with an Oregon qualified or certified interpreter listed in the registry.



Learn More:

View the Health Care Interpreter Registry through Oregon Health Authority (OHA).

Interpreter Registry

www.hciregistry.dhsoha.state.or.us



COMMUNITY ANNOUNCEMENTS

UMPQUA HEALTH ALLIANCE

Introducing Oregon Certified Interpreter's Network (OCIN)

Umpqua Health Alliance (UHA) is excited to announce our contract with Oregon Certified Interpreter's Network (OCIN) to provide high-quality interpreter services for Oregon Health Plan (OHP) members. This collaboration ensures that members receive culturally and linguistically appropriate care, with services seamlessly billed to UHA. Meet the local OCIN interpreters in Douglas County who will be working with your patients:



Ana Alfaro

SPANISH MEDICAL INTERPRETER

Has more than four years of experience assisting patients in health care settings. Fluent in English and Spanish, she specializes in medical terminology and ensures clear, accurate communication between patients and providers. Ana is currently pursuing a nursing degree and is actively involved in the Roseburg community. She is passionate about bridging language gaps in health care and advocating for Spanish-speaking patients. In her free time, she enjoys hiking with her husband and dogs.



Diana Ramirez

SPANISH MEDICAL INTERPRETER

Holds a bachelor's degree in business administration from the University of Oregon and discovered her passion for interpreting while assisting family and friends during the pandemic. Diana completed formal interpreter training and now works for multiple agencies in the Eugene and Springfield areas while pursuing a master's degree in elementary education. She is dedicated to ensuring patients feel safe, supported, and understood. In her free time, she enjoys traveling, hiking, and exploring new restaurants.

How to Schedule Interpreter Services with OCIN:

Contact Us:

Umpqua Health
Customer Care
541-229-4842
uhcustomercare@umpquahealth.com

Contact OCIN:

Set up a free profile by
emailing Carlos.
carlos@oregoncertified.com

General questions:

Umpqua Health
Quality Improvement
UHQualityImprovement@umpquahealth.com



Jessica Rosales

SPANISH MEDICAL INTERPRETER

Grew up in Roseburg, Oregon and is currently completing formal training through Cultural Advantage to become a qualified medical interpreter. Jessica is passionate about helping people navigate the health care system and looks forward to supporting the local community. In her free time, she enjoys traveling, exploring nature, and spending time with her family.



Virginia "Vicky" Meza

SPANISH MEDICAL INTERPRETER

Has more than 20 years of experience in the caregiving field, working as a caregiver, med tech, and manager while living in Oregon most of her life. Vicky grew up interpreting for her family and is currently completing formal training through Cultural Advantage to become a qualified medical interpreter. She is also an active member of Mano Amiga in Roseburg. In her free time, she enjoys spending time with her family and engaging with her community.

Network Changes

The following providers have been added or removed from the Umpqua Health Alliance network:



Additions

- Logan Nash Gull, DPM – Roseburg Foot and Ankle Specialists PC | Feb. 19, 2025
- Andrea Marie Gifford, LCSW – Tougas Therapy LLC | Feb. 19, 2025
- Mitzi Thompson, CHW – Aviva Health Center Roseburg | Feb. 12, 2025
- Donald E. Wonderly, MD – Aviva Health Center Roseburg | Feb. 12, 2025
- Piper L. Sullivan, MA, LPC – Umpqua Community Health | Feb. 6, 2025



Termed

- Gotten, Nathan Chase, QMHA-R Adapt | Jan. 31, 2025
- Willie Joseph Harris, QMHP – Adapt Integrated Health Care | Feb. 4, 2025
- Cynthia Dawn Kent, LPCA – Adapt Integrated Health Care | Feb. 6, 2025
- Laura Elizabeth Nielson, CRM – Adapt Integrated Health Care | Feb. 18, 2025
- Amber Michelle Cripe, CADC I – Adapt Integrated Health Care | Feb. 17, 2025
- Ladema Louise Spurlock, CRM – Adapt Integrated Health Care | Feb. 18, 2025

UMPQUA HEALTH ALLIANCE Provider Portal Sign-Up

The Umpqua Health Alliance provider portal offers seamless access to patient information, secure communication tools and an efficient workflow. The portal is designed to enhance administrative processes, improve patient care coordination and ensure compliance with industry standards.

An official step-by-step guide is available to help you register, set up your account and troubleshoot common issues.



How to get started:

1

Download the *official step-by-step guide*



2

Follow the instructions to complete the sign-up process.

Ayin | Health Solutions

3

Need help? Access our support resources for guidance.

For assistance, contact:
Umpqua Health
Provider Relations Department
Email: uhnproviderservices@umpquahealth.com

DISEASE SPOTLIGHT

Avian Influenza

This winter has been a terrible season for influenza, with the highest rates of illness we have seen in the United States in 15 years.

For the first time since the 2017-18 season, flu deaths have outpaced fatalities from Covid19. 2.6% of all deaths were attributed to influenza this past month. In Douglas County, South Umpqua School District closed after over 50% of students were absent with flu-like symptoms.

At public health labs, nearly 97% of flu samples were positive for influenza A, and of those subtyped 55.4% were H1N1 and 44.6% were H3N2. A rare subtype of influenza that public health is monitoring closely is Highly Pathogenic Avian Influenza (HPAI), the “H5” lineage, also known as “bird flu”.

As of today, 2/18/24, here is what we know:



Cases in People:

In the United States, we have identified 68 confirmed cases of H5 and one death.

There has not been any documented person-to-person spread at this time. Of these 68 human cases, 41 had exposure to dairy herds, 23 were exposed to poultry, one had another animal exposure, and for three cases the exposure source was unable to be identified. Oregon has had one person test positive thus far.

Our neighboring states, California and Washington have identified 38 and 11 cases respectively. Of these 68 human cases, four were detected through broad national flu surveillance (127,000+ specimens tested) and 64 were identified through targeted H5 surveillance (14,800 people monitored and 770 tested).

Locally, in our Southern Oregon region public health has monitored two people for HPAI. Two residents in Coos County developed compatible symptoms after their backyard flock tested positive. They were presumptively treated with antivirals, tested negative, and have recovered.



Cases in Animals:

In the United States thus far, 11,966 wild birds, 159,307,978 poultry, and 968 dairy herds have tested positive for H5. Over 40 different species of mammals have tested positive, ranging from 8 bottlenose dolphins in Florida to 2 polar bears in Alaska. 89 domestic cats have tested positive. Cats appear to be particularly susceptible to severe illness, often resulting in death. Presumptively treated with antivirals, tested negative, and have recovered.



Prevention:

To prevent avian influenza, public health experts recommend that we: wash our hands, stay home when we are sick, avoid drinking raw milk or unpasteurized dairy products, avoid eating raw eggs and meat, avoid contact with sick or dead animals, and get the seasonal flu vaccine. Pet owners should avoid raw pet food products and keep pets on a leash outside to not allow pets to get close to dead wildlife or eat bird poop. Hunters, farm workers, backyard flock owners and other people who come into close contact with animals should follow more specific advice in the prevention infographics at the end of this report.



Vaccine:

The seasonal flu can weaken your immune system and make it harder to fight off future infections. While the vaccine for seasonal influenza is not protective against avian influenza, it can protect you from getting both at the same time. In public health, we call this coinfection. When animals or humans are coinfecting with influenza, it can cause genetic reassortment. When two influenza viruses infect a cell at the same time, they can swap genetic information. This could create a new virus subtype.



Symptoms:

The symptoms of avian influenza usually include respiratory symptoms and conjunctivitis, sometimes with gastrointestinal symptoms like diarrhea. Mild illness may include cough, sore throat, eye redness or discharge, fever, runny nose, fatigue, myalgia, headache. This can progress to shortness of breath, altered mental status, and seizures. Complications include pneumonia, respiratory failure, multi-organ failure, sepsis and meningoencephalitis.



Testing:

While over-the-counter rapid tests for influenza A, B and Covid19 exist, there are none available that can subtype influenza A. Only a state public health laboratory or the CDC can identify an avian influenza infection at this time. The preferred specimens for testing are a nasopharyngeal swab and a nasal swab combined with an oropharyngeal swab (2 swabs combined into one viral transport media).



Treatment:

People exposed to avian influenza should be monitored for 10 days. Symptomatic people with animal exposures should be tested and start antiviral treatment with oseltamivir as soon as possible, ideally within 48 hours of illness onset. The antiviral medication oseltamivir (Tamiflu) is the recommended treatment. Oseltamivir post exposure prophylaxis can be given to persons who had a high risk exposure to animals confirmed to be infected with the virus. For example, people who handled or cared for sick or dead birds without PPE.



AVIAN INFLUENZA

**Public Health Communicable
Disease Reporting Lines**



Coos Health & Wellness	541-266-6700
Douglas Public Health Network	541-464-3914
Josephine County Public Health	541-474-5221
Oregon Health Authority	971-673-1111

Report sick or dead **wild** birds
Oregon Department of Fish & Wildlife
Hotline: (866) 968-2600
Email: odfw.wildlifehealth@odfw.oregon.gov

Report sick or dead **domestic** birds
Oregon Department of Agriculture
Phone: (503) 986-4680

ADVANTAGE DENTAL

How To Know If Your Child's Tooth Really Hurts

Advantage Dental+



For More Information:

[advantagedental.com](https://www.advantagedental.com)

(866) 268-9631

Toothaches in little ones can be tricky to spot. They might not always be able to tell us exactly what's wrong, so parents need to be extra observant. Here are a few red flags to watch out for:

- Fussy Factor
- Chewing Challenges
- Face Rubbing
- The Picky Eater
- Hot and Cold Sensitivity
- Swelling
- Fever
- Bad Breath
- Sleepless Nights

Beyond the Obvious:

- Ear Tugging
- Difficulty Speaking
- Changes in Appetite
- Drooling

Understanding Toothache Causes:

- Cavities
- Gum Disease
- Abscesses
- Trauma
- Teething

What to Do:

- Comfort First
- Pain Relief
- The Dentist is Your Friend

Preventing Toothaches:

Early Start:

Start brushing as soon as first tooth erupts. Use a soft-bristled toothbrush and a tiny amount of fluoride toothpaste.

2x2x2:

Encourage them to brush their teeth twice a day, morning and night, for two minutes.

Flossing:

Once they have two teeth that touch, it's time to start flossing!

Diet:

Limit sugary drinks and snacks. Offer plenty of fruits, vegetables, and water.

Regular Check-ups:

Schedule regular dental check-ups.

Read the full article:

<https://www.advantagedental.com/blog/how-to-know-if-your-childs-tooth-really-hurts>



THANK YOU

Thank you for reading our Monthly Provider Newsletter. Utilize this as a resource — your success is vital to the health and well-being of our members.



Questions and suggestions regarding a specific topic:
Contact, **Dr. Douglas Carr** at dcarr@umpquahealth.com

More information about the newsletter:
Contact, **Alexis Cole** at acole@umpquahealth.com