

UMPQUA HEALTH CONNECTION

June 2025

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PROVIDER DIRECTORY

Keeping Your Information Current

Maintaining accurate provider information is essential for patient care and communication. All network providers are required to submit updates or termination notices promptly using the appropriate forms available on our website.

Timely submissions ensure our directory remains accurate, helping patients find and access the care they need.

For questions:

Provider Services
Umpqua Health Alliance
UHNProviderServices@umpquahealth.com

To update your provider information or report a termination:

1

Download the applicable form

Provider Update

umpquahealth.com/?wpdmdl=13246%27%3EUHA%20Provider%20Update%20Form%3C/a%3E

Provider Termination

umpquahealth.com/wp-content/uploads/2021/06/uha-provider-termination-form-fillable.pdf

2

Submit completed forms

Provider Services

UHNProviderServices@umpquahealth.com

INTERDISCIPLINARY TEAM

Add a Member to Our Team Meeting

Umpqua Health holds biweekly Interdisciplinary Team (IDT) meetings that bring together multiple community agencies and provider clinics. These meetings offer a collaborative space to address member needs and coordinate care more effectively.

If you're facing challenges with a member's care, contact our Care Coordination Department. We can add the member to the IDT meeting agenda for case staffing and problem-solving support.

As outlined in Oregon Administrative Rule 410-141-3870, Coordinated Care Organizations (CCOs) must consider the specific needs of members in the long-term services and supports (LTSS) and special health care needs (SHCN) populations. This includes holding an IDT meeting within 14 days of any transition in care, whether between levels, settings or care episodes.

However, the benefits of IDT meetings extend beyond these populations. They can support the needs of all Umpqua Health Alliance members.

To consult with a care coordinator or request that a member be added to an upcoming IDT meeting agenda, call Umpqua Health Member Services at 541-229-4842 and ask for the Care Coordination Department.



HEALTH RELATED SOCIAL NEEDS

Housing and Utility Assistance Guidance

Imminent Eviction

Members with a court-ordered eviction should be referred to UCAN before submitting a Housing-Related Services and Supports (HRSN) housing application. Referring to UCAN first can help address the immediate eviction and avoid delays in getting assistance.

Submitting an HRSN housing application before contacting UCAN may slow the process, as Umpqua Health Alliance (UHA) must review the application before making a UCAN referral.

Members who receive help from UCAN for an imminent eviction can still apply for HRSN housing assistance for future rent or utility payments.

General Guidance

- An eviction notice is not required to qualify for HRSN housing assistance.
- Having an eviction notice or being behind on rent or utility payments does not improve a member's chance of approval. However, eviction notices and related documents should be included with the application.
- For utility arrears, members must submit a separate, itemized bill for each month they are requesting payment.
- Members are encouraged to continue making rent and utility payments, if possible, while their application is under review.
- All requests must include complete and accurate documentation at the time of submission.

Please note:

The review process may take up to 90 days. Incomplete submissions will result in delays.



THW CONNECTIONS CORNER

TRADITIONAL HEALTH WORKERS

Ongoing Collaboration: THW Advisory Group Meets Monthly

The Douglas County Traditional Health Worker (THW) Advisory Group continues to meet monthly, creating a space for providers, THWs and community partners to strengthen care coordination and share best practices in THW integration.

These meetings support strategic alignment with Oregon Health Authority goals and provide a forum to identify barriers, elevate solutions and explore training needs.

Meetings are held the second Tuesday of each month and are open to all Douglas County THWs, whether currently employed or not, as well as partner organizations.

For questions, registration, or accommodations:

Andrea Brown
Umpqua Health Alliance
541-464-6255
abrown@umpquahealth.com

Led by Andrea Brown
Traditional Health Worker Liaison
Umpqua Health Alliance

Upcoming Sessions:

Tuesday, July 8 | 3:30 - 5:30 p.m.

Tuesday, Aug 12 | 3:30 - 5:30 p.m.

Tuesday, Sept 9 | 3:30 - 5:30 p.m.

** Meeting is held on the second Tuesday of each month. We hope to see you there!*

Attendance is **free** and open to all Traditional Health Workers in Douglas County, employed or not, as well as community partners who currently work with or are interested in working with THWs.



Register Online!

[THW Advisory Group Meetings](#)

OREGON OFFICE ON DISABILITY & HEALTH

Free Disability Training for Health Care Professionals

The Oregon Office on Disability and Health is offering two free, self-paced training modules that provide continuing education credits (CME/CEU) and equip health care professionals with strategies to deliver accessible, inclusive care for patients with disabilities.

Topics include:

- Reducing health disparities for people with disabilities
- Addressing access barriers in clinical settings
- Practicing disability-competent care and adaptive communication

These modules are designed for anyone working in health care, especially those involved in direct patient care.

Learn more and access the training modules at: <https://www.ohsu.edu/oregon-office-on-disability-and-health/disability-trainings-health-care-professionals>



OREGON HEALTH AUTHORITY

OHP Clinical Connections Webinar Series: Engage with OHA Medical Leadership

The Oregon Health Authority's Medicaid Division invites clinicians, including nurse practitioners, doctors, oral health clinicians and physician assistants, to join the new quarterly OHP Clinical Connections Webinar Series.

This series offers a direct line to OHA's Medicaid Medical Leadership Team to:

- Receive updates on Oregon Health Plan (OHP) programs
- Share insights on OHP coverage and delivery
- Provide feedback on policy changes affecting your practice and patients
- Collaborate on inclusive planning for OHP improvements

Topics for June 17th session include:

- Health-Related Social Needs: Medically Tailored Meals
- EPSDT benefit
- Benefit Update Project (BUP)
- Open Q&A

Led by Oregon Health Authority
Medicaid Division

Upcoming Sessions:

Tuesday, June 17 | 1 PM - 2 PM

Tuesday, Sept 16 | 1 PM - 2 PM

Tuesday, Dec 16 | 1 PM - 2 PM



Register Online!

[OHP Clinical Connections](#)

Download flyer:

[English \(PDF\)](#)

[Spanish \(PDF\)](#)





BECOME A CERTIFIED PEER SUPPORT SPECIALIST!

Gain the skills and certification needed to support individuals in their recovery journey! This 40-hour training meets OHA certification requirements for Peer Support Specialists (PSS) and Certified Recovery Mentors (CRM).

 June 23rd - 27th

 9:00 AM – 6:00 PM

 Virtual (Zoom)

For Registration information
please contact Kendra at
kendraha@adaptoregon.org

Limited funding is available to
help with registration fees for
Coos, Douglas, and Curry Co,
residentis.

UPDATED GUIDANCE FOR PROVIDERS

Hepatitis C

Umpqua Health Alliance (UHA) provides specialized care for members diagnosed with hepatitis C. Hepatitis C treatment has significantly advanced and is more accessible than ever.

The Centers for Disease Control and Prevention (CDC) outlines the following clinical points:

- More than 95% of hepatitis C cases can be cured with an 8- to 12-week course of oral-only direct-acting antivirals (DAAs).
- Curative DAA treatment is recommended for nearly all individuals with hepatitis C.
- Providers can reduce the risk of liver disease progression through lifestyle counseling, co-infection monitoring and vaccinations for hepatitis A and B.

UHA adopts clinical practice guidelines based on strong evidence or expert consensus. The UHA Pharmacy team has developed an easy-to-use Hepatitis C management tool that aligns with the latest treatment guidance and the UHA formulary.

Access the Hepatitis C Provider Guidance tool https://www.umpquahealth.com/wp-content/uploads/2025/05/uha-provider-guidance-hcv-treatment_05-14-2025.pdf.

STEP 5: PRIOR AUTHORIZATION (IF REQUIRED)

Umpqua Health Alliance aligns with OHA DAA prior authorization criteria and treatment goals:

- Approve use of cost-effective treatments supported by the medical evidence.
- Provide consistent patient evaluations across all hepatitis C treatments.
- Ensure appropriate patient regimen based on disease severity, genotype, and patient comorbidities.
- Link to OHA DAA Therapy Document: https://www.oregon.gov/ohd/PA_Docs/HCV_directactingantivirals.pdf

STEP 1: PATIENT SCREENING

Testing Recommendations for HCV Infection <https://www.hcvguidelines.org/evaluate/testing-and-linkage>

- Universal Screening: All adults 18 and older once per lifetime & all pregnant women once per pregnancy
- One-Time Screening: Under 18 years old with increased risk of HCV infection
- Periodic Repeat Screening: Offered to all persons with increased risk of HCV infection
- Annual Screening: Recommended for persons who inject drugs, HIV-infected men who have unprotected sex with men, men who have sex with men taking pre-exposure prophylaxis (PrEP)

STEP 2: DIAGNOSTIC TESTING

Order HCV Antibody with Reflex to RNA Testing

Interpretation of Results of Tests for HCV Infection https://www.cdc.gov/hepatitis/hcv/pdfs/hcv_flow.pdf

- If HCV Antibody is non-reactive, then no further action required
- If HCV Antibody is reactive, but HCV RNA is not detected, then no further action required in most cases
- If HCV Antibody is reactive, AND HCV RNA is detected, then proceed to step 3

STEP 3: PRE-TREATMENT ASSESSMENT

Recommended Assessments Prior to Starting DAA therapy <https://www.hcvguidelines.org/evaluate/monitoring>

Rule out Decompensated Cirrhosis	Fib-4 score; CTP score; Ultrasound of liver	If hepatic complications present, consult with a hepatologist, gastroenterologist, or infectious disease specialist.
Determine baseline details of HCV infection	HCV viral load	Genotyping recommended for cirrhotic patients if not prescribing a pan-genotypic DAA regimen
HIV & HBV Status	HBeAg, HBsAg, HBeAb	Recommend that specialist be consulted prior to treatment for patient with documented HIV or HBV coinfection
HCV Treatment Experience	Patient history	Review guidance for management of treatment-experienced patients: https://www.hcvguidelines.org/treatment-experienced
Medication Review	Med reconciliation; drug-drug interactions	Complete within three months of treatment initiation. Pregnancy testing should be offered to women of childbearing age
Laboratory Testing	CBC, INR, ALT, AST, eGFR	Little evidence supports initiation of HCV treatment in patients with life expectancy <1 year owing to monitor-related comorbid conditions
Comorbid conditions	Patient history	Educate about proper administration of medications, adherence, and prevention of reinfection.
Education	Education patient	

STEP 4: DIRECT ACTING ANTIVIRAL (DAA) DRUG SELECTION

Treatment Naïve Patient Without Cirrhosis <https://www.hcvguidelines.org/treatment-naive/simplified-treatment>

- Glecaprevir (300 mg) / pibrentasvir (120 mg) (Mavyret) to be taken with food for a duration of 8 weeks
- Sofosbuvir (400 mg) / velpatasvir (100 mg) for a duration of 12 week

Treatment Naïve Patient With Compensated Cirrhosis <https://www.hcvguidelines.org/treatment-naive/simplified-treatment-compensated-cirrhosis>

- Genotype 1-6: Glecaprevir (300 mg) / pibrentasvir (120 mg) to be taken with food for a duration of 8 weeks
- Genotype 1, 2, 4, 5, or 6: Sofosbuvir (400 mg) / velpatasvir (100 mg) for a duration of 12 weeks
- Genotype 3 (requires baseline NS5A resistance-associated substitution (RAS) testing) Without Y93H: Sofosbuvir (400 mg) / velpatasvir (100 mg) for a duration of 12 weeks
- With Y93H: Refer to HCV guidelines for treatment recommendations.

Umpqua Health Alliance CCO Pharmacy Services
Updated 5-14-2025

Umpqua Health Alliance and Rely Health: Elevating Value-Based Care Through Innovative Coordination and Transitions of Care

Rely Health is honored to celebrate our ongoing partnership with Umpqua Health Alliance, now in its fourth year, as we work together to advance value-based care for members and communities across the Pacific Northwest. Our collaborative approach centers on proactive care coordination and seamless transitions of care, powered by a unique blend of AI technology and dedicated human care navigators.

Over the past nine months, our efforts have delivered measurable results in the value based care metric of Substance Use Disorder Initiation and Engagement of Treatment (SUD IET). We have consistently achieved over 3% above CCO target goals, demonstrating our commitment to helping members start and sustain recovery journeys.

We have had the pleasure of expanding our care navigation coverage to serve members in the following value based care measures beginning this Q2:

- **Well Care Visit Adherence:** By connecting members to in-network primary care providers and supporting appointment follow-through, we are closing gaps in preventive care and fostering long-term health relationships.
- **Immunization Adherence in Children:** Our personalized outreach and navigation ensure that children receive timely vaccinations, protecting individual and community health.
- **Post-Partum Care Adherence:** We support new mothers with tailored navigation, ensuring they access essential post-partum care and resources for a healthy transition after childbirth.

We are excited to announce the expansion of our Care Navigator services beyond the emergency department, now engaging all UHA members and addressing these four value-based care priorities. Our scalable, multi-channel engagement model-leveraging SMS, email, and AI-powered calls-enables us to reach more members, close care gaps, and deliver hyper-personalized support.

Together, Rely Health and Umpqua Health Alliance have demonstrated the power of partnership, technology, and human touch in improving outcomes and strengthening communities by navigating thousands of members over the last several years. With the new measures added, we plan to engage with even more members to provide education, resources, and care coordination support. We are grateful for the trust UHA has placed in us and we look forward to deepening our relationship to continue supporting members with innovative, high-impact care navigation solutions.

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](#)

hciregistry.dhsoha.state.or.us



COMMUNITY ANNOUNCEMENTS

UMPQUA HEALTH ALLIANCE

Person-Centered Social Needs Screening Implementation Workshop

This interactive training is designed for individuals directly involved in social needs screening and referrals.

It emphasizes trauma-informed, culturally responsive and person-centered workflows. Organizations are encouraged to send teams, as collaborative learning supports effective implementation and long-term sustainability.

Key learning objectives:

- Best practices for developing person-centered organizational screening systems
- Strategies for implementing team-based workflows
- EMR tool design for screening and follow-up documentation
- Techniques to reduce workforce burnout through organizational support
- The value of co-designing workflows with patients to improve usability and engagement

Led by Ariel Singer

Principal Consultant

Waterwheel Health Consulting

Wednesday, July 30 | 9 - 4:30 p.m.

Aviva Health

Columbia Conference Center

150 NE Kenneth Ford Drive,

Roseburg, OR. 97470

Parking available at Lower-lot

(upper lot is reserved for Aviva patients)

For more information:

Umpqua Health Alliance

Quality Improvement

UHQualityImprovement@umpquahealth.com



Register Today!

[Person-Centered
Social Needs Screening
Implementation Workshop](#)

This workshop supports implementation efforts aligned with the Social Determinants of Health (SDoH) metric, which measures the percentage of CCO members screened using an Oregon Health Authority–approved tool and referred, as needed, for services in housing, food and transportation.

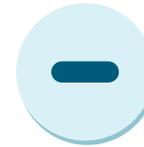
Network Changes

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



Additions

- Varnell Person-Turner, MSW, LCSW
– Cow Creek Health and Wellness (Roseburg) | March 7, 2025
- Patricia Ann Wilson, DNP, PMHNP
– Cow Creek Health and Wellness | March 7, 2025
- Myndee Jean Ferrill, MA, PCA – Myndee Ferrill Counseling LLC | March 3, 2025
- Laura Jane Finnegan, Birth Doula – Eugene Birth and Family LLC | April 7, 2025
- Tiffany Lee Granton, Birth Doula – Eugene Birth and Family LLC | April 7, 2025
- John A. Billingsley, M.D.
– Andrea V. Gray M.D. PC | May 5, 2025
- Christie R. Apodaca, SLP – Hello Sunshine Speech Therapy | Feb. 3, 2025
- Lauren M. Broussard, LCSW – Juniper Tree Counseling LLC | April 7, 2025
- Stephanie Ann Riccalarsen, M.D. – Peachtree Family Medicine and Weight Loss | April 1, 2025



Termed

- Kristie Marie Knight
– Adapt | May 5, 2025
- Samantha Renee Jernstrom, QMHP-C
– Adapt | June 6, 2025
- Christine Josephine Murray, CHW-I
– Adapt | June 25, 2025
- Allison Tone Fox
– Douglas C.A.R.E.S. | March 31, 2025
- Kyle Simpson
– Oregon Social Learning Center Developments Inc. | Sept. 15, 2023
- Kanani Dilcher, M.D.
– Aviva | April 25, 2025
- Kourosh Mehrazar
– Aviva | April 11, 2025

UCAN Family Connects



Who can receive services?



- Any family with a newborn or baby under 3 months old is eligible for Family Connects services.
- All families are accepted including bereaved, foster, and adoptive families
- Private insurances and Oregon Health Plan are required to cover the service and families will not be charged for any service provided.

What we do



- Infant health assessment including vitals, physical assessment, and weights and measurements.
- Post partum health assessment including blood pressure, vitals, questionnaires about nutrition, bleeding, and any post partum warning signs
- Post partum mood disorder screening, substance use screening, and inter-personal violence screening.
- Feeding help either breast or bottle feeding
- Answer parent's questions
- Provide referrals to other community supports parents might need
- All families receive an initial Welcome Bag with sleep sack, books, infant thermometer, handouts, and other newborn items they may need.

Who provides the service?



- UCAN provides Family Connects using qualified Registered Nurses that are trained in breastfeeding support, infant care, and post partum health.
- All Registered Nurses participate in regular continuing education and are supervised on a regular basis.

How to refer

- Online at ucancap.org/referral/
- Email or Fax a CORE form to 1-541-804-7234
- Call 541-440-3622



UMPQUA HEALTH ALLIANCE

Join the Social Determinants of Health Clinical & Community Partner Collaborative

Umpqua Health Alliance (UHA) invites clinical and community partners to participate in our Biannual Social Determinants of Health (SDoH) Clinical and Community Partner Collaborative.

This interactive virtual event brings together teams involved in social needs screening and referral processes. It's an opportunity to share insights, strengthen partnerships and develop strategies to improve SDoH outcomes across the region.

We encourage organizations to attend as teams. Group participation supports workflow alignment, shared learning, and more effective implementation of SDoH initiatives.

Led by Umpqua Health Alliance
Social Determinants of Health (SDoH)

Upcoming Virtual Sessions:

Thursday, June 26 | 12 PM - 1:30 PM

Thursday, Nov. 6 | 12 PM - 1:30 PM



Register Online!

[Social Determinants of Health \(SDoH\) Clinical & Community Partner Collaborative](#)

Questions:

Contact the UHA Quality team at:
UHQualityImprovement@umpquahealth.com

ADVANTAGE DENTAL

A Parent's Guide to Baby Teeth

Most babies begin teething around six months old, but some may start as early as three months, while others won't get their first tooth until after their first birthday. Every baby is different, and genetics often play a role in when teething begins.

Typically, the first teeth to emerge are the lower central incisors, followed by the upper front teeth a few months later. By the time a child is three years old, they will likely have a full set of 20 primary teeth.

The signs and symptoms of teething can be a challenging time for both babies and parents. While some babies seem unfazed, others experience discomfort and irritability. Common signs of teething include:

- Increased drooling
- Chewing on hands, toys, or household objects
- Irritability or fussiness
- Swollen or tender gums
- Disturbed sleep
- Mild fever

Teething can be painful and uncomfortable for babies, but there are several ways to provide relief. Many parents find that offering a cold teething ring or a chilled (not frozen) washcloth for their baby to chew on helps ease the discomfort.



Gently massaging the gums with a clean finger may also provide relief. For babies who have started eating solids, chilled fruits like bananas or cucumbers in a mesh feeder can be a soothing and safe option.

If discomfort persists, over-the-counter infant pain relievers like acetaminophen or ibuprofen (for babies older than six months) may be helpful.

But remember to always consult a pediatrician before giving any medication to your infant. It's important to avoid teething gels that contain benzocaine, as they can be unsafe for young children.

Read the full article:

<https://www.advantagedental.com/blog/when-do-babies-start-teething>

Advantage Dental+



For More Information:

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

(866) 268-9631



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