



# UHA Connection

June 2024 Provider Newsletter

## In Good Health

Thank you for reading our Monthly Provider Newsletter, the UHA Connection. We hope this 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
- Community Announcements
- Better Health For All
- CME for Thee
- Network News
- On The Lookout

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)  
and Michelle Torina at  
[mtorina@umpquahealth.com](mailto:mtorina@umpquahealth.com)

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



541-229-4842



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



## Expedited Processing Reminder

Our Utilization Management Team offers expedited processing for prior authorization requests in accordance with 42 CFR 438.210(d)(2)(1).

Expedited processing should be requested in appropriate situations where standard processing could seriously jeopardize the member's life or health or ability to attain, maintain, or regain maximum function. Prior authorization requests to meet office scheduling usually do not meet.

When expedited processing is requested, please include an attestation that the request meets the guidelines set forth in 42 CFR 438.210(d)(2)(1).

An expedite attestation may be a simple note in the Comment Section of the PA or by sending an email to:

[priorauthorizations@umpquahealthalliance.com](mailto:priorauthorizations@umpquahealthalliance.com).

## Neuroimaging for Headache

UHA has seen an increase in the number of Brain MRI imaging requests for headache diagnosis. The OHP Prioritized List of Health Services (PLHS) has very specific criteria in Diagnostic Guideline D5, Neuroimaging for Headache (below) that determines if this type of imaging is covered.

### DIAGNOSTIC GUIDELINE D5, NEUROIMAGING FOR HEADACHE

Neuroimaging is not covered in patients with a defined tension or migraine type of headache, or a variation of their usual headache (e.g. more severe, longer in duration, or not responding to drugs).

However, neuroimaging is covered for headache when a red flag condition is present. Detailed documentation of the members subjective symptoms, as well as the objective findings from their exam is key in determining the appropriateness of this imaging.





## Outpatient Behavioral Health Prior Authorization Reminder

When submitting Outpatient Behavioral Health prior authorization requests for continuity of care (or continuation of services), please include a mental health assessment completed within the last 12 months, a treatment plan including SMART goals(s), and the three (3) most recent progress notes with a complete prior authorization request form.

If all, or some, of these supporting documents are missing the request may be denied as the Utilization Management Team is unable to determine medical necessity.

Also, we review outpatient BH services for a maximum of three (3) months at a time. If the member requires additional services beyond the three-month period, please submit a new request with all the supporting documentation described above.

## CIM/Aiyn (PhTech) Portal Contact Update

Occasionally a member of our Utilization Management team may need to contact you regarding a prior authorization request. To ensure prompt processing in these instances, we are requesting CIM Provider Portal submitters ensure their contact information is up to date.

Please follow the few steps below:

- Access CIM Provider Portal at <https://signin.phtech.com/IdentityServerWeb/core/login?signin=ffd55cd2f23faf47b951c1bde81ff069>
- Enter your portal Username and Password
- After signing in you will see a blue “Launch” button to start the application – stay on this page and locate your sign in information in the upper right hand corner.
- Click the blue square with a drop down arrow -
- Then select “Edit Account”
- When the Your Account page loads click on “Organization Profile” towards the top center of the page.
- Please ensure your contact phone number and fax number are up to date.

If they are not, select the “Edit” option on the right

If you have trouble updating your contact phone number and fax number in CIM please call our Utilization Management team at 541-672-1685 and they are happy to assist.

**We appreciate your help in ensuring our team is able to contact you in a timely manner.**





## New Language Access Resources

UHA places a heightened emphasis on connecting Limited English Proficient (LEP) Oregon Health Plan (OHP) members with Certified and Qualified health care interpreters (HCI).

Historically, OHP members who communicate in languages other than English or are hard of hearing face barriers accessing services and receive lower quality care relative to members whose preferred language is English.

UHA has many resources available to your organization to combat the impact of these health disparities:

## Scholarship Opportunities

- **[HCI Scholarship:](#)**  
UHA launched a scholarship program to cover the cost of training and exams for bilingual individuals interested in becoming a Qualified or Certified HCI. Interested individuals can complete an application to receive funds for the Oregon Health Care Interpreter Association's (OHCIA) 60-hour online HCI training.
- **[In-Person HCI Training Announcement:](#)**  
UHA is excited to offer a free-of-cost in-person training for individuals motivated to become an Oregon Qualified or Certified HCI.



## Requesting Interpreter Services

- **[How Do I Schedule Interpreter Services:](#)**  
This document outlines options for scheduling interpreter services with a Qualified or Certified HCI for UHA members as required by Oregon Administrative Rule (OAR) 950-050.
- **[Language Access Plan:](#)**  
This document outlines key initiatives and requirements related to language access within the UHA service area.
- **[Interpreter Service Request Workflow:](#)**  
This document offers suggested clinical workflows for scheduling and reporting interpreter services.





## In-Person Health Care Interpreter Training

Interested in becoming a Health Care Interpreter?

UHA is excited to offer a free-of-cost in-person training for interpreters motivated to become an Oregon Qualified or Certified Health Care Interpreter.

Bilingual individuals with a high school diploma who work with Douglas County OHP members are encouraged to apply for a spot in the training.

Click [here](#) to register!

### When?

**4-weekends for 60-hours total:**

- 9/16 - 9/17
- 9/28 - 9/29
- 10/12 - 10/13
- 10/26 - 10/27

### Where?

Mercy Medical 2700 NW Stewart Pkwy,  
Roseburg, OR 97471

### Questions? Contact

[UHQualityImprovement@umpquahealth.com](mailto:UHQualityImprovement@umpquahealth.com).

## HCI Training/Proficiency Requirements

- **[How to Become an Oregon Qualified or Certified HCI:](#)**  
UHA prioritizes connecting OHP members with Qualified or Certified HCIs as outlined by OAR. Use this document as a checklist to keep track of the requirements you have met along your journey to becoming a Qualified or Certified HCI.
- **[Provider Language Proficiency Requirements:](#)**  
Providers who conduct in-language visits are required to submit proof of language proficiency to CCOs in their service area as outlined by OAR 950-050. You can use this document as a checklist to ensure you have met all the necessary requirements.

### General

- **[Language Access Resource Binder:](#)** The Language Access Resource Binder compiles all the language access resources to provide a one stop view of interpreter services, health care interpreter training requirements, scholarship opportunities, and language proficiency requirements.

**We truly appreciate your partnership with connecting OHP members to language access services.**

### Questions?

Contact: [UHQualityImprovement@umpquahealth.com](mailto:UHQualityImprovement@umpquahealth.com).

## RESPIRATORY PRIOR AUTHORIZATIONS

### TALKING POINTS

#### GENERAL

- A New start request will be approved for 3-months (this applies to CPAP and oxygen)
- The reasonable useful lifetime for oxygen equipment is 5-years.

#### OXYGEN SUPPLIES

- The next request O2 request for continuation (9-mo) needs to include documentation that shows compliance with use and a continued need for supplies.
- Oxygen is a continuous rental for 36-months from the PA's start date. Once the 36-month rental period is reached, the member is in a capped rental period.
- The remaining 24-months (months 37-60) are the capped rental period.
- Maintenance and service (M&S): not separately payable during the 36-mo rental period. During the capped rental period (months 37-60), M&S is paid every 6-mo, starting no sooner than 6-mo following the capped rental period.
- Oxygen restart begins on year 5.
- Continuous rental is counted by consecutive months regardless of if a PA is in place for all months.
- For the initial request, face to face with PCP must be within 60 days.
- Chart notes should be current, within 6 months of request.
- Information for oxygen supplies can be found in OAR 410-122-0203 and CMS LCA A52514.



#### CPAP SUPPLIES

- As stated above, the initial request is for 3-months.
- During the initial 3-month rental period, the member must show compliance with use for least four hours per night on 70% of the nights during a consecutive 30-day period.
- The second request is for a 10-month rental to reach the 13-month purchase-out price.
- Information about CPAP qualifying criteria can be found on the Prioritized List of Health Services (PLHS) guideline note 27 and OAR 410-122-0202 for Positive Airway Pressure (PAP) Devices for Adult Obstructive Sleep Apnea



# Clinical Corner



## UHA'S 90-DAY MEDICATION SUPPLY & MAIL ORDER SOLUTIONS

UHA offers an array of pharmacy solutions aimed at providing convenient access to medications, including a 90-day supply option and in-network mail order services.

### EXTENDED MEDICATION SUPPLIES:

Patients may obtain a 90-day supply of most medications from any contracted retail or mail-order pharmacy. Here are some key points to note:

- Initial fills for new medications are limited to a 30-day supply.
- Please be aware that specialty medications and narcotics are excluded from this option.

### MAIL ORDER PHARMACIES:

#### 1. BirdiRx (Preferred):

- Visit their website at [www.birdirx.com/](http://www.birdirx.com/)
- Call at 1-855-247-3479 or (855) BirdiRx
- Email at [patientcare@birdirx.com](mailto:patientcare@birdirx.com)

#### 2. Postal Prescription Services (PPS) (Preferred):

- Visit their website at [www.ppsrx.com](http://www.ppsrx.com)
- Call at 1-800-552-6694.

#### 3. SortPak Pharmacy:

- Visit their website at [www.sortpak.com](http://www.sortpak.com)
- Call at 1-877-570-7787
- **SortPak Highlight:** They offer the convenience of synchronized medication refills, allowing patients to receive all their medications together.

### GETTING STARTED:

To take advantage of these pharmacy options, patients can create an online account on the respective websites, providing essential information such as name, address, and insurance details.

Additionally, providers can directly transmit prescriptions to these pharmacies. Once the medications are ready, patients can coordinate their delivery preferences directly with the pharmacy.

### NEED ASSISTANCE?

For any inquiries about our 90-day medication supply or mail order pharmacy service options, please don't hesitate to reach out to our Pharmacy Services team.

- Call us at 541-229-4842
- Email us at [UHAPharmacyServices@UmpquaHealth.com](mailto:UHAPharmacyServices@UmpquaHealth.com)

**We're here to support you and your patients in optimizing their pharmacy experience and ensuring timely access to vital medications.**

## LPN CAREER FAIR



### ATTENTION LOCAL PROVIDERS!



Are you looking to connect with future LPNs? Here's your chance to engage with the next generation of healthcare professionals.

We're inviting you to share insights and employment opportunities with first-year nursing students at Umpqua Community College.

Did you know that UCC nursing students are eligible to sit for their PN-NCLEX after their first year of study?

Your presentation could be the spark that ignites their career path! Let's collaborate to inspire, inform, and empower our future nurses.

**Presentations will be on Thursday, June 6th 2024 from 9:00-11:00.**

Each community partner will be allotted 10 minutes for presentations. Table space will also be provided for promotional materials and to connect with nursing students after the presentations. Interested? Great, we would love to have you!

Please contact Rivka Spain Butler at [rivka.spainbutler@umpqua.edu](mailto:rivka.spainbutler@umpqua.edu)



# **NATIONAL DIABETES PREVENTION PROGRAM**

**OFFERED THROUGH OREGON  
WELLNESS NETWORK**

This 12-month program helps adults at risk for type 2 diabetes improve their overall health and well-being. There are 16 weekly sessions, followed by a session every 2 weeks for the remaining 8 months.

**To be eligible for referral patients must:**

- Be at least 18 years old and
- Be overweight (Body Mass Index greater than or equal to 25; or 23 if Asian) and
- Not be pregnant and
- Have no previous diagnosis of type 1 or type 2 diabetes and
- Have a blood test result in the prediabetes range within the past year:
  - Hemoglobin A1C: 5.7-6.4%
  - Fasting plasma glucose: 100-125 mg/dL or
  - Two-hour plasma glucose (after a 75gm glucose load): 140-199 mg/dL or
- Have a previous clinical diagnosis of gestational diabetes or
- Take the Prediabetes Risk Test and receive a screening result of high risk for type 2 diabetes

**INFORMATION SESSION: FRIDAY, JUNE 21ST AT 12PM-1PM**  
**SESSION 1: FRIDAY, JUNE 28TH AT 12PM-1PM**

Referrals can be submitted through Connect Oregon (Unite Us) or by filling out the referral form available at <https://www.umpquahealth.com/download/provider-referral-form-fir-dpp-dsmes/?wpdmdl=14994&refresh=64adc0382d2441689108536>.

Afterward, fax the completed referral form, along with lab results and medication lists, to 503-304-3465, attention: Health Promotion.

For additional details, please reach out to the Oregon Wellness Network at 1-833-673-9355 or email [health.promotion@nwsds.org](mailto:health.promotion@nwsds.org).

# TRADITIONAL HEALTH WORKERS

DO YOU KNOW SOMEONE WHO HAS FOOD INSECURITY, HAS TROUBLE FINDING RESOURCES, OR NEEDS HELP NAVIGATING THEIR CARE?

## TRADITIONAL HEALTH WORKERS (THWS) CAN:

- Improve overall health
- Improve engagement and satisfaction with services and supports
- Address health disparities
- Promote health equity
- Improve quality of life for community members

Southwestern Oregon Workforce Investment Board (SOWIB) has an Oregon Health Authority grant to integrate THWs into Coos, Curry, and Douglas Counties and ensure the sustainability of their services.

## WHO ARE TRADITIONAL HEALTH WORKERS (THWS)?

THWs are essential links between healthcare systems and communities. They understand local challenges impacting health and can devote time to clients, meeting outside clinical settings to build trust.

Through culturally tailored education, advocacy, and support, THWs empower individuals to enhance their health and well-being.

There are a variety of THW specialties.

SOWIB's THW Training Program offers training and support in five THW specialties that were determined by a community assessment:

Birth Doula

Community Health Worker (CHW)

Peer Support Specialist-Mental Health (PSS-MH)

Peer Support Specialist-Substance Use Disorder (PSS-SUD)

Youth Peer Support Specialist (PSS-YSS)





# TRADITIONAL HEALTH WORKERS CONT.

WHAT TRADITIONAL HEALTH WORKERS  
CAN DO FOR YOU...

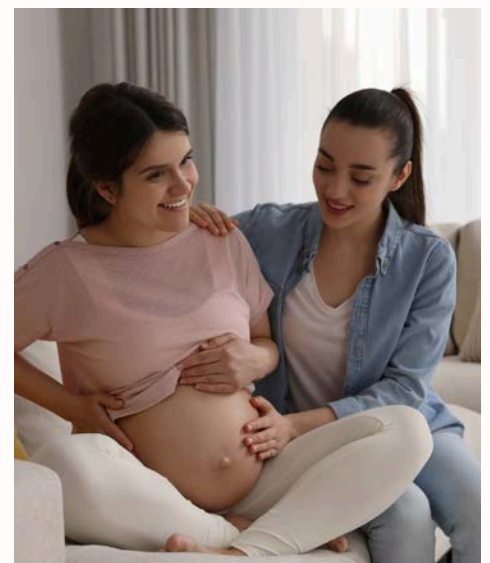
## WHY DO THWS MAKE A DIFFERENCE?

**THWs** offer support and services for individuals so they may lead a more self-directed life and gain control over their own well-being. THWs have a valuable role in the interconnection of physical and mental health.

**CHWs** are frontline workers who are trusted members of the community and help individuals in communities understand how to stay healthy and access healthcare.

**Birth Doulas** provide personal and nonmedical support to women and families throughout a pregnancy, childbirth, and postpartum experience.

**PSSs**, through their own relatable lived experience, offer emotional support, advocacy, education on personal growth and help in navigating systems and services.



## HOW CAN THWS HELP YOUR COMMUNITY?

- Improve quality of life for your community members
- Improve overall health
- Address health disparities
- Improve engagement and satisfaction with services and supports
- Promote health equity

Southwestern Oregon Workforce Investment Board

## DISEASE SPOTLIGHT: PERTUSSIS (WHOOPIING COUGH)

### Pertussis

Pertussis is a bacterial respiratory infection that typically presents without fever and a characteristically severe cough followed by a “whooping” inhale sound that can last 6-10 weeks. Oregon has seasonal outbreaks of pertussis every few years.

As of today, May 20th, 2024, there have been over 145 cases of pertussis reported this year in 10 counties in Oregon. The majority (84%) of these cases are under the age of 20. There have been school outbreaks reported in Deschutes, Multnomah, and Lane counties.

So far, we have not had any cases reported in Douglas County, but DPHN would like to encourage providers to be on the lookout.

### Highly Contagious

Pertussis is highly contagious and often serious for infants, as it can make it difficult for them to eat, drink and breathe. It can cause pneumonia, heart problems, bleeding in the brain and death. Older people and partially immunized children often have milder symptoms.

Pertussis is a restrict-able, reportable disease in Oregon. All confirmed and presumptive cases must stay home from school and work for 5 days after starting antibiotics, or 21 days if they choose not to complete treatment. The typical treatment is 1 day of 500 mg of azithromycin followed by 4 days of 250 mg.

Exposed, unvaccinated children must be excluded from school for 21 days after their last exposure unless they receive a pertussis vaccine. Close contacts of cases who are at higher risk of serious complications from pertussis are recommended to take post-exposure prophylaxis (antibiotics). These include infants, pregnant women in their third trimester, and household /close contacts of those infants, especially in daycare or childcare settings.

Like all respiratory infections, pertussis can be prevented by practicing good hand hygiene, staying home when ill, not sharing food or drink, coughing into tissues or sleeves, and wearing a mask. It is best prevented by staying up to date on vaccinations. Babies need 3 shots of the combination vaccine DTaP to prevent diphtheria, tetanus, and pertussis. Young children need 2 booster shots to maintain protection through early childhood.

Preteens should be vaccinated between the ages of 11 and 12. Pregnant women should get Tdap during their 3rd trimester of pregnancy to pass antibodies on to their new infant. Adults should get a Tdap booster every 10 years. Both natural and vaccine-induced immunity wanes over time, so it is important for everyone, including grandparents, to get their boosters.





## *Bad Habits to Avoid If You Want Healthy Teeth and Gums*



As humans, we are regularly developing habits, whether good or bad. Unfortunately, bad habits are quite common, and a lot of them are formed unintentionally. Many times, we develop habits that aren't good for us without even being aware of it, and often these habits can cause problems, pain, and cost a lot of money to correct.

Being proactive is the best approach if you want to keep your teeth for your lifetime, so make it your mission to practice excellent oral hygiene, have routine dental visits, and create good oral habits. Here are eight habits to avoid if you want a healthier smile.

### **1. Biting Your Nails**

If you are always biting your nails, your oral health will pay the price. Not only are you spreading harmful bacteria that hang out under your nails, biting non-edible items like fingernails can crack, fracture, or chip your teeth, and even hurt your jaw over time.

**Instead: Apply some bitter-tasting nail polishes and work on lowering your stress levels.**

**Awareness and calming your anxiety can keep your nails (and teeth) looking their best!**



# DENTAL DIGEST CONT.

## 2. Brushing Too Hard

Scouring your chompers with harsh strokes can leave them hurting instead of clean and healthy. Rough handling can wear down tooth enamel and irritate the gums, which can ultimately cause receding the gums, exposing the layer of dentin below.

**Instead:** Brush at least twice a day for two minutes with a soft-bristled toothbrush and massage the teeth gently. It will clean the teeth surfaces without damaging them in the process.



## 3. Clenching and Grinding

If you are constantly clenching your jaw and grinding your teeth (awake or asleep), it can damage your teeth and jaw. This habit is called bruxism, and it often arises from unrelieved stress. It wears down enamel leaving teeth and makes them vulnerable to decay. You may also find yourself with painful jaw or joint pain, or even fractured or chipped teeth.

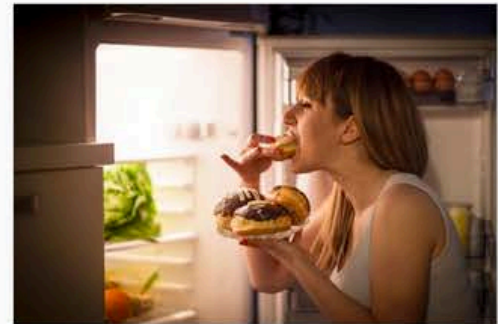
**Instead:** Practice relaxation techniques to relieve jaw stress and wear a custom night guard while you sleep.



## 4. Chronic Snacking

Whether you continually snack or sip sweetened beverages throughout the day, both can hurt your teeth. And it's not just coating your teeth in sugar that can lead to cavities. Snacking on chips and carbohydrate-filled goodies feed your mouth's harmful oral bacteria, resulting in plaque buildup and tartar that can harm your gums.

**Instead:** Quench your thirst and protect your teeth with water. Hydrating with water will also prevent dry mouth by giving your saliva the solution it needs to clear out oral debris and bacteria during the day.



## 5. Heavy Drinking

Regularly alcohol consumption increases plaque levels in your mouth that ultimately leads to tooth loss. Since alcohol acts as a diuretic, it can reduce saliva flow (which can result in dry mouth).

**Instead:** Limit your alcohol intake and drink plenty of water in between to hydrate.





## DENTAL DIGEST CONT.

### 6. Ice Chewing

Chomping on ice cubes might feel good on a hot day, but your teeth are not designed for it. This habit can lead to cracks and chips in your teeth. Both your teeth and ice are crystals, so the effect of rubbing them together can cause tooth damage, even potentially damaging dental fillings.

**Instead:** Consume your beverages through a straw to keep you from accidentally munching on ice. Be sure not to chew on the straw! Also, try chilling your drinks in the refrigerator beforehand.



### 7. Kick the Tobacco Habit

A tobacco habit not only stains your teeth but inflames your salivary glands so they can't perform correctly. As if that wasn't bad enough, smoking leads to bad breath, gum disease, increased loss of jaw bone density, and oral cancer.

**Instead:** Find a smoking cessation support program that works for you. Your lungs, teeth and gums will thank you!



### 8. Teeth Are For Chewing

Your teeth are not tools! Do not use them to tear off tags, open a bag of chips or hold your pen.

**Instead:** Stick to biting and chewing your food with your teeth, and use the correct tools to handle everything else.



When it comes to your habits, we encourage you to take extra care of your smile so it will take good care of you!

You will reap the benefits of healthier teeth, longer-lasting dental work and a more beautiful smile!

**CLICK HERE** 

To Schedule An Appointment!

## CME FOR THEE



# Children’s Social Emotional Health: Training Spotlight Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

TF-CBT is well-supported, evidence-based treatment<sup>1</sup> that helps children and adolescents across many cultures to recover after trauma, that has been evaluated and refined during the past 25 years. Research shows that TF-CBT successfully resolves a broad array of emotional and behavioral difficulties associated with trauma experiences such as physical or sexual abuse, domestic violence, community violence, an unexpected death of a loved one, natural disasters and war. TF-CBT is for children or youth 3-18 years of age, and their parent or other caregiver. Average length of treatment is 12-14 sessions provided in an outpatient setting or via telehealth. Click here for more [information about TF-CBT](#) & here for [Culture-Specific information about TF-CBT](#).

For 2023-2025, the Oregon Health Authority has funded full training toward certification for 240 additional outpatient mental health therapists who serve Medicaid-eligible clients statewide.

### [Register to participate in the upcoming free, OHA-sponsored TF-CBT training](#)

a virtual, intermediate-level course designed for Oregon master’s level mental health professionals who work directly with children who have experienced trauma. The training includes up to 20 hours of training and up to one year of consultation with up to 13 Continuing Education Credits available for participants.

Participants are responsible for pre-training expenses of approximately \$75 and post-training certification expenses.

- Training dates: June 6 and 7, 2024, from 9 a.m. to 5 p.m.

### TRAINING PREREQUISITES

- Complete the TFCBT web course [here](#)
- The web course costs \$35 and offers 11 CEs
- Completion certificates must be uploaded below *prior* to the start of the 2-day training.



# CME FOR THEE



## SPRING AND SUMMER EVENT AND TRAINING OFFERINGS!

**Greetings! We are excited for the many upcoming events on offer with Trauma Informed Oregon. Please join us!**

<https://traumainformedoregon.org/newsletters/2024-05/2024-05-17.html>





# LIVING WELL WITH CHRONIC CONDITIONS

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

\*\*\*\*\*

**Thursdays, 6/13 - 7/25, 2024**

**12:30 p.m. - 3:00 p.m.**

**Held virtually**

**Info session Thurs, 6/6/24, 12:30-1:30 p.m.**

**No cost to participants**

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





# 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.

### 6 Virtual Sessions:

**Info session: May 22nd - 12-1 p.m.**

**Wednesdays May 29th- July 3rd, -  
Noon - 2:30 p.m.**

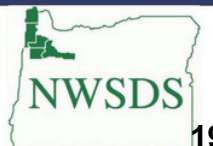
## Topics Include:

- 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.org](http://oregonwellnessnetwork.org)





# NATIONAL DIABETES PREVENTION PROGRAM



- This year-long program was developed specifically for people who have prediabetes or are at risk for type 2 diabetes, **but who do not already have diabetes.**
- Receive weekly support from a trained lifestyle coach for a year.
- Improve overall health by losing weight and becoming more active.
- Program covered by Medicare and Medicaid.
- Must have a scale to weigh in the morning of each class.

**Join us for a virtual class**  
**Info session: Friday, June 21st from**  
**12-1:00 p.m.**

**First session: Friday, June 28th 12-1 p.m.**

For information or to register,  
call (833) 673-9355 Or  
oregonwellnessnetwork.org

