



# UHA CONNECTION

August 2024

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# PRACTICE TACTICS

## Interactive Online Training to Boost Immunization Rates

**Contact:** [train@cdc.gov](mailto:train@cdc.gov)

**Course Link:** [Fostering a Culture of Immunization in Your Practice](#)

Boost your practice's immunization rates today with this comprehensive and interactive training! The CDC has launched an innovative online training designed for health care professionals seeking practical and adaptable strategies to increase immunization rates. This course is suitable for the entire clinical team, from medical assistants to clinicians, and emphasizes the importance of effective communication about immunizations to ensure patients receive vaccinations safely and on time.



## Motivational Interviewing Training for Vaccine Hesitancy



**Contact:** [ndsu.cire@ndsu.edu](mailto:ndsu.cire@ndsu.edu)

**Course Link:** [Motivational Interviewing for Vaccine Hesitancy](#)

Enhance your skills and confidence in discussing vaccines with hesitant patients by taking advantage of this valuable training opportunity. The North Dakota State University Center for Immunization Research and Education is offering a free, four-part online video training module designed to enhance clinicians' confidence in addressing vaccine hesitancy during medical encounters. This comprehensive training is available to everyone at no cost.

Upon completing all four videos and their corresponding quizzes, participants are eligible to claim 1 free continuing education credit. This activity has been approved for AMA PRA Category 1 Credit™, which is recognized as continuing education by the Oregon Medical Board.

# PRACTICE TACTICS

## Requesting a Prior Authorization Change

UHA's Utilization Management team is dedicated to ensuring the accuracy of prior authorization to meet the needs of our members as well as the clinics and facilities providing their care. We understand that changes to a prior authorization may be necessary after submission.

The term "amendment" is often used broadly but specifically refers to changes made to finalized prior authorizations, usually those that have been approved. To request an amendment to a finalized prior authorization, please follow these steps:

### With CIM Access

1. In-network providers should submit all amendment requests through CIM; email requests are not accepted.
2. Locate the prior authorization by searching for the reference number or by finding it in the member's Care Type History.
3. Once the authorization loads, select the drop down arrow for "Referral."
4. Choose "Extend Authorization" and follow the on screen prompts to update the information.
5. Add a brief comment in the Comments text box explaining the amendment request.

*TIP: Finalized prior authorizations will display either green or red font in the Status field.*

### Without CIM Access

1. Fax your amendment request to 541-677-5881.
2. Include the reference number and a description of the changes needed.

For changes to a prior authorization that is not yet finalized, or is under review, please use the following process to avoid duplication and unnecessary rework:

### With CIM Access

1. Locate the prior authorization by searching the reference number or in the member's Care Type History
2. Click on the [priorauthorizations@umpquahealth.com](mailto:priorauthorizations@umpquahealth.com) hyperlink in the upper right-hand corner of the PA request to email our team.
3. If the hyperlink is not visible, send an email to [priorauthorizations@umpquahealth.com](mailto:priorauthorizations@umpquahealth.com).

### Without CIM Access

1. Fax or email your change request.
2. Fax number: 541-677-5881
3. Email address: [priorauthorizations@umpquahealth.com](mailto:priorauthorizations@umpquahealth.com)
4. Include the reference number and brief explanation of changes needed.

Thank you for your support! We hope these instructions help streamline your amendments requests.

# PRACTICE TACTICS



## Community Health Worker (CHW)

Below is a free web-based CHW training sponsored by Comagine Health Information.

### **Quality Improvement Integration for Community Health Workers**

Earn 1 Free Continuing Education Credit\*

This session will discuss the importance of community health workers' (CHWs) involvement in health care quality improvement (QI) teams and projects, particularly working with social health integration. This session will introduce tools to collect and analyze data, and design and track improvements to ensure stronger integration into care teams and to support effective systems that best serve patients.

**Date: Wednesday, August 14, 2024**

**Time: 12 p.m. - 1 p.m. PT**

Contact: Alexandra Topper, MPH  
Improvement Advisor / Population Health  
Comagine Health  
[atopper@comagine.org](mailto:atopper@comagine.org)

\*Continuing Education (CE) Credits:

Comagine Health is accredited by the Nevada Certification Board to provide continuing education for Community Health Workers in Nevada. Comagine Health designates this Live Event for 1.0 CE credit.

# CLINICAL CORNER



## Umpqua Health Has Partnered with Conversio Health

Umpqua Health in collaboration with Conversio Health has developed an innovative solution to enhance patient adherence, improve outcomes, and increase satisfaction for our members with Asthma and COPD. For more information about this partnership, please visit our [website](#). More specific information for providers can be found [here](#).

### How Conversio Health is a Partner in Care for UHA CCO OR CCOB Members:

1. **High-touch Chronic Respiratory Management Program** that helps providers improve outcomes of high-risk Asthma/COPD patients
2. **Nebulizer Medications available across each drug class** - shipped to patient homes along with Smart Devices (with no patient copay!)
3. **Virtual Pulmonary Rehab Program** - exercises, breathing techniques, health education, and smoking cessation for patients with COPD
4. **Support, coordination, and remote monitoring** from Clinical Pharmacists, Respiratory Therapists, and Health Coaches

### Ways to Enroll Patients:



Send an E-prescription to  
ConversioHealth



[Email](#)  
Patient Referral Form



Call  
(866) 239-3784

If you have any questions, please contact Conversio Health Pharmacists at (866) 239-3784, option two, or online at <https://conversiohealth.com/>.

# CLINICAL CORNER

## Why was My Prior Authorization Request Denied?

The following are some of the most common reasons why PAs are denied.



- **CGMs in T2DM:** requires use of short/intermediate acting insulin or documentation of clinical hypoglycemic episodes. Renewal requests must document that the patient is using the device at least 50% of the time.
- **MRI** criteria in the Prioritized List are the same as American College of Radiology-Appropriate Use Criteria. Often radiographs are required as first line evaluation. MRIs for tension headache or migraine are usually not medically necessary. Spine imaging requires radicular dysfunction and therefore an abnormal neurological exam that requires imaging confirmation.
- **Chiropractic** is limited to conditions of the spine. Referral should be based on an office visit that includes an evaluation/examination in the past 60 days. Chiropractic, like Physical Therapy, is for acute conditions, not “maintenance”. Lack of improvement will lead to suggestion of reevaluation for alternative interventions. (There is an annual limit of 30 visits for all therapies for a condition.) Do NOT prescribe chiropractic and physical therapy or acupuncture at the same time.
- **Dermatology** consultations are covered by the Prioritized List for significant conditions, not cosmetic. PCPs can treat the latter. Screening skin exams are not covered unless there is a personal history of skin cancer. We see many PA requests to consult on a mole when the skin exam is listed as “normal”.

# BETTER HEALTH FOR ALL

## Maternity Programs for UHA Members

Umpqua Health Care Coordination offers support and resources for pregnant members through three programs. The goal of these programs is for the member to experience a healthy pregnancy, delivery, and newborn.



- **General Maternity Care Coordination:** This program is available to all pregnant UHA members and focuses on supporting a healthy pregnancy and newborn. Services include needs evaluation, goal setting, care plan development, OB/GYN connections, appointment assistance, transportation, resource connections and additional support as needed.
- **New Day:** This program supports pregnant women with substance use or mental health disorders. In addition to the services provided by General Maternity Care Coordination, the New Day care coordinator collaborates closely with the member, OB provider, and community resources to offer specialized support and treatment for mental health and substance use disorders. The end goal is to have a healthy baby and reduce the need for neonatal intensive care unit admissions. ***To refer a patient to these programs, email [CaseManagement@umpquahealth.com](mailto:CaseManagement@umpquahealth.com) with the patient's name, DOB, and a description of their needs or call Customer Care at 541-229-4842.***
- **Optum - Maternal Fetal Monitoring (MFM):** For members experiencing high-risk pregnancies, the Maternity Support Program provides personal guidance through all stages of pregnancy and delivery. The support aims to increase gestational age and birth weight while reducing neonatal intensive care unit admissions. The program includes assessment, care planning focused on goal achievement, facilitation of self-management skills connections to community, public and UHA resources, care coordination, and advocacy. Optum staff will refer members to UHA case management for additional care addressing social determinants of health, medical, mental health, or substance use needs outside of the pregnancy. ***Members can be referred for this service by submitting a Prior Authorization in CIM for "MFM" through the patient's OB, specialist, or PCP.***

# BETTER HEALTH FOR ALL

## Addressing Health-Related Social Needs in Our Community

UHA offers Health Related Social Needs (HRSN) for member who are meet the rules. HRSN are social and economic needs that affect a persons ability to maintain health and well-being. These benefits are for members facing life certain life challenges. These services are to help members stay healthy during times of greater need. These interventions have been found to improve health outcomes and health inequities and decrease health care costs.

The HRSN benefits include:

- **Climate Supports - Effective March 2024**

- Payment for devices that maintain healthy temperatures and clean air, including air conditioners, heaters and air filters
- Mini refrigerators to keep medications cold during a power outage
- Portable power supplies to keep medical devices running during a power outage

- **Housing Supports - Effective November 2024**

- Rental assistance or temporary housing (e.g., rental payments, deposits, utility assistance) for up to 6 months
- Home modifications (e.g., ramps, handrails, environmental remediation)
- Pre-tenancy and tenancy support services (e.g., housing application, moving support, eviction prevention)
- Housing-focused navigation and/or case manager

- **Nutrition Supports - Effective January 2025**

- Links to community-based food resources (e.g., application support for Supplemental Nutrition Assistance Program (SNAP)/Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- Nutrition and cooking education
- Fruit and vegetable prescriptions (for up to 6 months, also known as VeggieRX) and healthy food boxes/meals
- Medically tailored meal delivery

- **Outreach and Engagement - Effective March 2024**

- Engaging OHP members who may be eligible for HRSN climate-related services
- Verifying the member's coordinated care organization (CCO) or open card enrollment
- For CCO members, verifying the member's CCO
- Sending the HRSN request to the member's CCO or to Oregon Health Authority (OHA) for open card members.
- Providing members with information and support to connect with other services they need. Other services include medical, peer, social, educational or legal services.

For more information on requesting these services or determining if a person is eligible, please visit our [website](#). Our website also outlines how to become a HRSN Service Provider.



# BETTER HEALTH FOR ALL

## Health Care Coverage for Higher Income Adult

OHP Bridge is a new Oregon Health Plan (OHP) benefit package that covers adults with higher incomes, starting July 1, 2024. Members who qualify will still have most of the same benefits as traditional Medicaid (OHP Plus) members. This includes access to medical, behavioral health, dental, transportation and health related services benefits. Just like OHP, there is no cost to members!

### To be eligible for OHP Bridge, members must:

- Have income between 138-200% of the federal poverty level
- Be 19-64 years old
- Have an eligible citizenship or immigration status to qualify
- Not have access to other affordable health insurance

### What is affordable insurance?

In 2024, a job-based health plan is considered "affordable" if your share of the monthly premium in the lowest-cost plan offered by the employer is less than 8.39% of your household income.

- The lowest-cost plan must also meet the minimum value standard.
- If you're the employee, affordability is based on only the premium you'd pay for self-only (individual) coverage.
- For coverage starting January 1, if you're offered job-based coverage through a household member's job, affordability is based on the premium amount to cover everyone in the household.
- Total household income includes incomes from everybody in the household who's required to file a tax return.

If the premiums aren't considered affordable for the employee and the household, they may qualify for savings in a Marketplace plan. But, if the premium is considered affordable for the employee, but not for other members of the household, then only the other household members may qualify for savings.

### How to apply?

Go to Oregon's ONE system to apply. You can also go to [HealthCare.gov](https://www.healthcare.gov). You can also contact UHA's Community Enrollment Specialist if you need help completing the application. You can call us at [541-315-4660](tel:541-315-4660) or send an email to [uhaenrollmenthelp@ayin.com](mailto:uhaenrollmenthelp@ayin.com).

# CME FOR THEE

## Fall ECHO Programs

Contact: [oen@ohsu.edu](mailto:oen@ohsu.edu)

Registration is now open for all Oregon ECHO Network programs that start in September. Continuing education credits are available, and each program is offered at no cost to you or your workplace.

Programs include a new Sexually Transmitted Infections ECHO designed to help primary care clinicians care for the sexual health of their patients and decrease the prevalence of syphilis in Oregon, and a completely revamped introduction to substance use disorder ECHO titled Foundations of SUD Care.

ECHO programs fill quickly. Sign up as soon as possible if you are interested in participating in any of these programs: <https://www.oregonechonetwork.org/programs>

### General ECHO Programs

- [Adult Mental Health I](#)
- [Child Psychiatry](#)
- [Sexually Transmitted Infections](#)
- [Nursing Facility Behavioral Health](#)
- [Public Health Preceptor](#)

### Addiction Medicine ECHO Programs

- [Foundations of Substance Use Disorder Care](#)
- [Substance Use Disorders in Adolescents](#)
- [Substance Use Disorder in Hospital Care](#)
- [Substance Use Disorders in Jails](#)

### Communities of Practice

- [Addiction Medicine Community of Practice](#)
- [Hepatitis C Community of Practice](#)
- [Gynecology and Reproductive Health Community of Practice](#)
- [Dementia Community of Practice](#)



**REGISTER NOW**

# NETWORK NEWS

## Introducing Our Provider Relations Team

**Rob Senger** recently joined Umpqua Health as the Provider Relations Manager. With a master's degree in healthcare administration and over 20 years of experience in the field, Rob is committed to building strong relationships between Umpqua Health and its network of providers. His focus will be on developing and implementing provider education programs to enhance provider performance and positively impact our members.



**Amaya Goins** has been promoted to Provider Relations Coordinator. Having worked with Umpqua Health since 2019 in the Customer Care department since 2019, Amaya is well-acquainted with both members and providers. In her new role, she will be a key point of contact for any questions or concerns related to the provider network. You can reach her directly at 458-803-4061 or via email at [agoins@umpquahealth.com](mailto:agoins@umpquahealth.com). Amaya will also be visiting clinics to offer support.



**Samantha Slobodiak** recently joined Umpqua Health as a Provider Relations Specialist within the Provider Network Team. With a decade of healthcare experience, Samantha is dedicated to providing the necessary support for quality care delivery. She will serve as the contact for culturally and linguistically appropriate services (CLAS), ensuring effective, equitable, and respectful care tailored to diverse cultural health beliefs and practices. Samantha will also be available for any questions or concerns regarding the provider network and CLAS-related inquiries.



# NETWORK NEWS

## Network Adequacy

As a Coordinated Care Organization (CCO), Umpqua Health is committed to ensuring network adequacy for our members. Network adequacy ensures that members have access to healthcare providers when and where they need it. Each health plan contracts with a group of doctors and other providers, forming a provider network.

OHA enforces rules on how long it should take and how far members must travel to see their providers, considering their location and the provider's locations. Starting January 1, 2024, OHA updated the network adequacy rules for OHP to include four area types: county with extreme access considerations, rural, urban, and large urban areas.

OHA uses a tier system for providers:

- **Tier 1:** Includes primary care, primary care dentistry, mental health, pharmacy, and SUD treatment, with a **30-minute or 20-mile access standard in rural areas.**
- **Tier 2:** Includes specialty care services like cardiology, durable medical equipment, hospital, methadone clinic, neurology, obstetrics and gynecology, occupational therapy, medical oncology, radiation oncology, ophthalmology, optometry, physical therapy, podiatry, psychiatry, and speech language pathology, with a **75-minute or 60-mile standard in rural areas.**
- **Tier 3:** Includes less frequently accessed specialties like allergy & immunology, dermatology, endocrinology, gastroenterology, hematology, nephrology, otolaryngology, pulmonology, rheumatology, skilled nursing facility, and urology, with a **110-minute or 90-mile standard in rural areas.**

Umpqua Health's robust provider network meets and exceeds the 95% threshold set by OHA for network adequacy.

## Access to Care Surveys

Network adequacy can improve the quality of life for patients by providing preventative care, early treatment of health problems and management of chronic conditions. Access to care surveys plays a crucial role in enhancing the quality of Health Services provided by Umpqua Health and its network of providers. Umpqua Health sends out quarterly, surveys. These mandatory surveys for all providers, ensure a consistent flow of information about the accessibility of healthcare services. By gathering feedback, the surveys help identify gaps in care, and promote effective communication between Umpqua Health and its provider network.

Understanding the needs of clinics is essential for improving healthcare delivery. The surveys serve as a platform for providers to update any changes within their clinics, ensuring that Umpqua health is well-informed about resources and support required.

# NETWORK NEWS

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This ongoing dialogue fosters a collaborative approach to patient access.

The importance of these surveys extends beyond mere compliance; they are vital for understanding where clinics require support and for facilitating timely responses to emerging challenges. These surveys and the vital feedback help ensure members have adequate access to the healthcare services they need.

## Secret Shopper Calls

In today's healthcare landscape, ensuring access to care for all patients is paramount. Secret shopper calls and patient inquiries serve as crucial tools for healthcare organizations to assess their customer service and identify gaps in the patient experience. These evaluations help to ensure that new patients can easily navigate the appointment process and receive the correct information they need, particularly regarding interpretation services for those who require language assistance.

The importance of providing accurate information cannot be overstated, as it directly impacts a patient's right to healthcare. When patients encounter barriers due to misinformation or inadequate support, their ability to access necessary services is compromised. By prioritizing effective communication and customer service, healthcare providers can foster a more inclusive environment that respects and upholds patients' rights. As the healthcare industry continues to evolve, understanding the nuances of patient interactions and the significance of their experiences becomes essential.

## Provider Grievances

If a provider has a complaint or concern, please email UHN Provider Services [UHNProviderServices@UmpquaHealth.com](mailto:UHNProviderServices@UmpquaHealth.com). Once received we will investigate and get back to you as soon as possible. We appreciate your feedback and will work with you to find a resolution.

## Network Changes

### Termed

- Evan Alvord, PsyD (Rogue Psych Consultants, LLC) – effective 07/13/24
- Kacy Mullen, PhD (Rogue Psych Consultants, LLC) – effective 07/13/2024
- Kimberly Talley, FNP (Cow Creek Health & Wellness Center) – effective 06/18/2024
- Chelsea Wold, LCSW (Juniper Tree Counseling, LLC) – effective 06/01/2024
- Jacob McAvoy, PA-C (Adapt Primary Care Madrone) – effective 07/11/2024

### New Locations

- Deborah Koopman, APRN-NP (Aviva Health Center Sutherlin)

## All About Blood Clots After Tooth Extraction

# Advantage Dental+

### **What is a Blood Clot?**

A blood clot is a protective layer that develops over the underlying bone and nerve endings at the extraction site. It contains red blood cells that promote healing.

### **What Does a Blood Clot Look Like?**

A blood clot looks like a dark-colored scab inside the tooth socket. Do not disturb it as it protects the socket.

### **Why Does a Blood Clot Occur ?**

Clotting is a natural part of the healing process. After tooth extraction, the dentist will place a piece of gauze over the site and ask you to close your mouth with firm pressure. This helps to slow the bleeding and to promote clotting.

### **How Long Does it Take For a Blood Clot to Form?**

A blood clot will begin forming immediately after extraction. Platelets and fibrin work together to create the clot, which will protect the bone and nerves for 24 hours. It will remain for about 7 to 10 days, during which new tissue will close the wound.

### **What Happens if a Blood Clot Comes Out?**

If the clot is dislodge or doesn't form properly, you may develop dry socket. Symptoms include:

- Throbbing pain at the site and on your face
- Swelling due to irritation
- A taste of blood

If you experience these symptoms, contact your dentist for treatment. They may clean the site, apply a medicated dressing, and prescribe pain relief.

### **How Can I Protect a Blood Clot?**

To reduce your risk of dry socket and promote healing:

- Avoid drinking through a straw for a week as suction can dislodge the clot.
- Do not swish mouthwash; instead tilt your head let it sit at the extraction site.
- Refrain from smoking for at least 48 hours to prevent delays in healing.
- Eat soft foods and avoid hard, chewy or crunchy items.
- Maintain your regular oral hygiene routine and follow your dentist's postsurgical instructions.

For more information and detailed care tips, visit our [website](#).



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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.

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 Alexis Cole at [acole@umpquahealth.com](mailto:acole@umpquahealth.com).

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



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