# UMPQUA HEALTH CONNECTION

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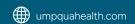
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# **PRACTICE TACTICS**

# Avoiding Common Errors with Physician-Administered Drug Claims

Physician-administered drugs (PADs) are often billed through professional or outpatient claims. Umpqua Health Alliance is contractually responsible for ensuring the HCPCS and NDC units on PAD claims are accurate. According to Oregon Health Authority (OHA), the most significant and frequent errors in these claims involve the use of generic "dump" codes.

A "dump code" should only be used when there is no specific code for the drug being administered (Examples: J3490, J3590). Too often, errors involving dump code on encounter claims go uncorrected, leading to fiscal compliance concerns.

To avoid these errors, ensure that specific HCPCS code and NDC codes are used for PADs administered in your practice whenever they are available. Proper coding is essential for compliance and ensures accurate billing.



#### UMPQUA HEALTH ALLIANCE

# **Exploring the Eight Dimensions of Wellness**

Traditional health workers (THWs) have long understood that health is not solely a physical concept. Through lived experience, they have seen how each aspect of life is interconnected, and how challenges in one area can create instability in the whole. For example, they have observed how low wages can lead to difficulty accessing healthy food. They know that occupational choices affect a person's ability to live in a safe environment.

They see how struggles with mental health can undermine the ability to make good decisions for one's body and they understand how losing connections to community can cause isolation, hopelessness, and limited access to resources and information that can forge new paths. The interconnected aspects of our lives that make up our overall health and wellbeing are called the Dimensions of Wellness. The exact number of dimensions may vary, for now, we will consider these:

Emotional	How you feel about yourself and your life.
Physical	The care you provide for your physical body.
Occupational	Your employment and/or means of obtaining income.
Social	Your sense of connectedness to your community and your relationships.
Spiritual	Your search for meaning and purpose in life.
Intellectual	Your commitment to continued growth, learning, and stimulating your mind.
Environmental	Your immediate living environment, including your home, neighborhood, and city, as well as environmental impacts.
Financial	Your management of resources and your ability to set goals and make sound financial decisions.



Some models may also include other dimensions, such as cultural wellness (acceptance of cultural values, whether your own or others') or digital wellness (mindfulness of your digital footprint and technological use).

Traditional health workers often engage with members across multiple dimensions of wellness, working to address gaps and strengthen areas that may be struggling. If your patients are experiencing challenges in any way, consider referring them to a traditional health worker in your community.



Healthy Relationships Psychological Resillience Intellectual & Emotional Potential Workplace Wellness Self-Efficacy

**EMOTIONAL** 

**PHYSICAL** 

**OCCUPATIONAL** 

**SOCIAL** 

**SPIRITUAL** 

**INTELLECTUAL** 

**ENVIRONMENTAL** 

**FINANCIAL** 



#### **Learn More:**

View the Umpqua Health Alliance Provider Direcory to find available Traditional Health Workers (THWs).

**Health Provider Directory** 

portal.umpquahealth.com/ ClientApp/facilities

# **CME FOR THEE**

CONTINUING MEDICAL EDUCATION

# For Oregon Providers at No-Cost

Oregon physicians, nurse practitioners, and physician assistants can access free Continuing Medical Education (CME) that meets state licensure requirements.

Explore and stay up to date with the latest medical education – at no cost to you, featuring a wide range of courses designed to fulfill Oregon's CME requirements.

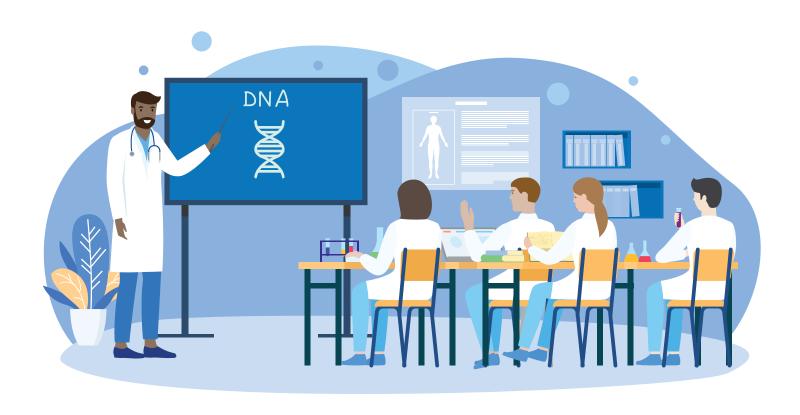


#### **Learn More:**

Get registered and stay up to date for a curated selection of primary care courses and conferences.

www.pri-med.com/state/oregon-cme





#### **CLINICAL CORNER**

#### UMPQUA HEALTH ALLIANCE

# **New Formulary Update**

#### **Sublocade Syringe**

**Q9991** – Buprenorphine XR **100 mg or less** every four weeks

Monthly Dose (4 weeks)

100 mg/ 0.5 mL every four weeks

**Q9992** – Buprenorphine XR **over 100 mg** every four weeks

Monthly Dose (4 weeks)

300 mg/1.5 mL every four weeks

#### **Brixadi Syringe**

J0577 – Injection, Brixadi seven days or less

Weekly Dose (7 days)

8 mg / 0.16 mL every seven days

 $16 \text{ mg}/\ 0.32 \ mL$  every seven days

24 mg/ 0.48 mL every seven days

32 mg/ 0.64 mL every seven days

J0578 - Injection, Brixadi more than seven days

Monthly Dose (4 weeks)

 $64~\mathrm{mg}/~0.18~mL$  every four weeks

96 mg/0.27 mL every four weeks

128 mg/ 0.36 mL every four weeks

# Sublocade & Brixadi Now Covered Without Prior Authorization

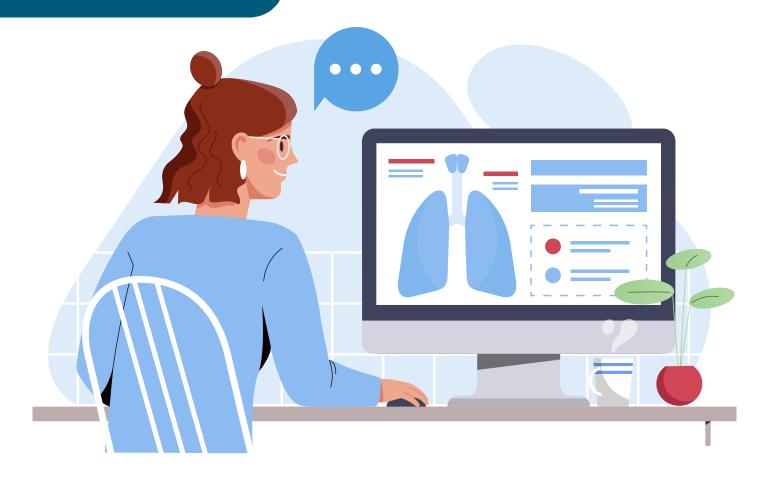
#### Effective Feb. 1, 2025,

Sublocade and Brixadi have been added to the Umpqua Health Alliance formulary and no longer require prior authorization under either Umpqua Health Alliance medical or pharmacy benefits.

However, when prescribed under the pharmacy benefit, prescriptions must be sent to *MedImpact Direct Specialty* and are subject to quantity limit restrictions based on FDA guidelines as outlined here.



#### **CLINICAL CORNER**



#### 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.

Brand new ECHO series this Spring include programs in Palliative Care; Behavioral Health for Youth with Intellectual and Developmental Disabilities; and Integrated Behavioral Health. In addition, healthcare professionals can sign up for programs in Foundational Gender Affirming Care, Adult Mental Health, Menopause, and 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





#### **DISEASE SPOTLIGHT**

#### **New Vitamin D Guideline**

The Endocrine Society abandoned the concept of vitamin D "sufficiency" and advised against most routine testing.

Many clinicians routinely test patients' vitamin D levels and recommend oral supplements to get levels higher than 30 ng/dL, despite controversy on the merits of this practice. In 2024, the Endocrine Society published a new guideline that recommends a more conservative approach to vitamin D testing and provides some clarity on when supplements should be used (NEJM JW Gen Med Sep 1 2024 and *J Clin Endocrinol Metab* 2024; 109:1907).

Most notably, the guideline does away with the concepts of vitamin D "sufficiency," "insufficiency," and "deficiency" altogether. It notes that current evidence does not show that supplementation specifically benefits asymptomatic people with low baseline levels and recommends against any routine testing of vitamin D levels. This recommendation applies broadly to healthy adults — it's not for people with symptoms suggestive of osteomalacia nor those with conditions such as malabsorption or chronic kidney disease.

The authors also generally advise against routine vitamin D supplementation beyond dietary guidelines, but with a few important exceptions. Empirical supplementation is recommended during pregnancy, in people with "high-risk prediabetes," and in older adults (age, ≥75), based on data showing limited harm and potential benefit in these groups, including a possible mortality benefit in older adults. Supplementation can consist of consuming fortified foods or vitamin D tablets. The guideline doesn't make specific dose recommendations, although for older adults it suggests indirectly that ≈1000 IU daily is reasonable; of note, the average doses in trials in pregnant patients and those with prediabetes were higher (≈3500 IU). Low daily doses are recommended over intermittent high doses.

Although food sources can contribute to recommended intake, determining an individual's dietary intake accurately is infeasible in most primary care settings. In practice, then, these guidelines could result in clinicians advising more patients (including essentially everyone older than 75) to take supplements. Luckily, supplements are widely available, safe, and inexpensive. And the simple advice for us to stop checking and following vitamin D levels should be liberating for many clinicians.



# Fundamentals of Peer Support

March 17-21 8am-5pm Scholarships Available First step for P.S.S & C.R.M Certifications

First Methodist Church 1771 W Harvard AVE

Roseburg, OR
40 hour in-person training
Work Source and Self-sufficiency
for funding

Family Nurturing Center
Wade Calkins
Training Coordinator
541-613-0177
Wade.Calkins@rvfnc.org

# **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



# **NETWORK NEWS**

# **Network Changes**

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



# **Additions**

Kathleen Riordan, FNP
 Evergreen Family Medicine
 (Edenbower) | Jan.17, 2025



# **Termed**

• Gotten, Nathan Chase, QMHA-R Adapt | Jan. 31, 2025



#### **DENTAL DIGEST**



# The History of Dentistry:

# Weird and Curious Facts You Didn't Know

In years past, a visit to the dentist could be a painful experience. As a result, people invented odd and ingenious methods to ease their troublesome dental issues. From noisy marching bands to hippopotamus ivory these unusual remedies are certainly curious.

### The Far-Fetched History Behind Painless Parker and His Traveling Show

Edgar Randolph "Painless" Parker launched his teeth-pulling traveling show in the late 1800s when most people avoided going to the dentist due to pain.

Early in his career, Parker read an article about a local anesthetic — a diluted cocaine solution thought to reduce pain during tooth extractions. Parker asked a druggist to prepare the formula that they named "hydrocaine." Parker and the druggist tested the solution by injecting it into their gums. The hydrocaine solution worked!

Parker traveled the U.S. and Canada in the 19th and early 20th centuries holding shows on street corners.

Wearing a top hat, a white lab coat, and accompanied by a band, Parker started his performance with a speech about the importance of dental hygiene.

Then he announced that he would pull an audience member's tooth for 50 cents each. He stated that if the person experienced pain, he would give them a \$5 refund. Parker injected the cocaine solution into the volunteer's gums before extracting the tooth.

Supposedly, the band's ear-splitting music was designed to distract patients and drown out their painful moans! Parker also treated animals, including a hippopotamus.

Parker had his license to practice dentistry revoked on occasion, but only for a short period.





#### The Story Behind: George Washington's Wooden Teeth.

Some believe George Washington, the famous military officer, and Founding Father, had teeth made of wood. Some historians say he may have carved the teeth himself. But is this true?

Washington lost his first tooth when he was 24 years old. He endured dental problems throughout his life including toothaches, tooth decay and loose teeth. He is believed to have had dental problems due to heredity.

By the time Washington became president at the age of 57, he lost all of his teeth except one. A pair of his dentures were fashioned of gold wire, brass springs, hippopotamus ivory and human teeth.

Washington owned numerous pairs of dentures throughout his life. They were made from a variety of materials including zinc, copper, lead, ivory and cow's teeth.

To remedy his dental ailments, Washington enlisted the help of several notable dentists, including Jean-Pierre, a French dentist that treated the teeth of high-ranking British officers during the Revolutionary War.

# Were George Washington's Teeth Made of Wood?

There's no evidence that Washington's dentures were made of wood. Some historians believe this myth was started to make the president more relatable to the general population. It's believed that some historians mistook the stained, grainy appearance of his ivory dentures for wood. If you look closely at Washington's portrait you may notice a lip bulge caused by dentures.

Washington mentioned his dental problems in correspondence over the years. His letters mention inflamed gums, aching teeth and ill-fitting dentures. Over the years, he sought to remedy his tooth problems himself by purchasing an assortment of dental devices, including teeth files, cleaners, medications and numerous pairs of dentures.

Very few of Washington's complete dentures have survived. The only remaining full-set in existence can be viewed at Donald W. Reynolds Museum and Education Center at Mount Vernon, in Alexandria, VA.

#### Read the full article:

advantagedental.com/blog/weird-and-curious-facts-about-dentistry





# **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 <u>dcarr@umpquahealth.com</u>

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



