

**“Wishful thinking is no substitute for careful planning.”**  
**–Steve McConnell**

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## Challenges Ahead with the Next Phase of COVID Vaccination

As you are no doubt aware, starting on March 15, adults aged 18-64 with certain medical conditions will qualify for COVID vaccination, based on the clinical judgement of their medical providers. See below for the full list.

Operationalizing this process, coordinating the judgement of the clinician with the actual vaccinators will be challenging if the provider making the judgement is not also doing the vaccination. Even if the provider is doing both, the sheer volume of patients who qualify is daunting and raises many questions:

Do you treat all the groups below equally, or do you prioritize subsets for your first outreach efforts? How exactly does this fit into the patients who sign up through the centralized [myturn.ca.gov](https://myturn.ca.gov) site? How can [myturn.ca.gov](https://myturn.ca.gov) possibly know who meets the medical criteria based on their physician judgement? What role will Blue Shield play? The three final options in the list are vague and allow clinician judgement that may not be uniform. How do you interpret that language for your patient population?

While we may *wish* that these questions will be answered by March 15, it is probable that they won't be. Each of your health centers, offices and organizations will be expected to use this general guidance to create their own operational *plans*. This will likely involve using the registry function of your electronic health records to generate lists of potential patients in each group, sub-prioritizing your own outreach activities, and communicating this clearly to your patients. It will also involve ramping up and streamlining your vaccination process, from taking sign-ups, verifying eligibility, checking identity, and auditing for misapplication of the criteria.

These next few months will be even more challenging for primary care. *Hope for the best, but plan for the worst*. Keep your plans flexible and adaptable to most likely challenges: variable vaccine supply and disconnected communication between the different systems that will need to work together.

### [Provider Bulletin from the California Department of Public Health:](#)

Beginning March 15, healthcare providers may use their clinical judgement to vaccinate individuals aged 16-64 who are deemed to be at the very highest risk to get very sick from COVID-19 because they have the following severe health conditions:

- **Cancer**, current with debilitated or immunocompromised state

- **Chronic kidney disease**, stage 4 or above
- **Chronic pulmonary disease**, oxygen dependent
- **Down syndrome**
- Immunocompromised state (weakened immune system) from **solid organ transplant**
- **Pregnancy**
- **Sickle cell disease**
- Heart conditions, such as **heart failure, coronary artery disease, or cardiomyopathies** (excludes hypertension)
- Severe obesity (**Body Mass Index  $\geq 40$  kg/m<sup>2</sup>**)
- Type 2 **diabetes mellitus** with hemoglobin **A1c level greater than 7.5%**

**OR**

If as a result of a developmental or other severe high-risk disability, one or more of the following applies:

- The individual is likely to develop severe life-threatening illness or death from COVID-19 infection
- Acquiring COVID-19 will limit the individual's ability to receive ongoing care or services vital to their well-being and survival
- Providing adequate and timely COVID care will be particularly challenging as a result of the individual's disability

## Breaking News

### PHC Medical Equipment Distribution Services

Beginning April 1, 2021, the PHC Medical Equipment Distribution Services Program will be expanding and will offer four new monitoring and treatment medical equipment pieces to PHC members at no cost.

- Humidifiers
- Nebulizers
- Scales
- Vaporizers

As a friendly reminder, the program currently allows providers to request the following for their PHC patients:

- Blood pressure monitors
- Oximeters
- Digital thermometers

In addition, we will also supply additional blood pressure monitor cuff sizes, nebulizer replacement parts, and user instructions in the member's preferred language. Since program launch, PHC has provided over 2,000 devices to PHC members across 40 different healthcare organizations and continues to fulfill equipment requests daily.

To request equipment, providers are required to review the Medical Equipment Distribution [guidelines](#), complete the [request form](#), and submit the completed form to PHC by emailing [request@partnershiphp.org](mailto:request@partnershiphp.org) or by faxing the form to (707) 420-7855.

For any questions, please contact [request@partnershiphp.org](mailto:request@partnershiphp.org).

## Pharmacy Carve-out Postponed

DHCS announced in mid-February that the planned April 1, 2021, transition of prescription drug coverage from PHC, and other managed care organizations, to DHCS through the pharmacy benefit manager Magellan will not take place as scheduled. This has been postponed due to challenges with resolving conflict of interests arising from the announced acquisition of Magellan by Centene Health Plan. No new timeline has been announced. PHC will continue to cover the pharmacy benefit through our network after April 1, 2021.

## Another Option for Medical Nutrition Therapy and Diabetes Education

For almost 20 years, PHC has covered Medical Nutrition Therapy provided by Registered Dietitians (RDs) and Diabetes Education provided by Certified Diabetes Educators (CDEs). These services do not require prior authorization, nor referral pre-authorization. In-person services may be provided in some counties. Medical Nutrition Services may be provided to for most major conditions where medically appropriate, including diabetes, renal disease, hepatic disease, obesity/overweight, cardiovascular disease including hypertension and hypercholesterolemia, and eating disorders.

PHC's adult specialty telemedicine provider Telemed2U, added these services a few years ago. Last year Telemed2U began integrating endocrinology visits for diabetes with a virtual care team, including RDs and CDEs. Patients are referred through the Telemed2U platform. Practices interested in working with Telemed2U should reach out to [telemedicine@partnershiphp.org](mailto:telemedicine@partnershiphp.org) to learn more.

This year, the Center for Wellbeing, based in Santa Rosa, is expanding its telemedicine capacity for RD and CDE services to serve PHC members in **any** of our counties. For more information, call (707) 575-6043 or email [info@nccwb.org](mailto:info@nccwb.org).

## Grant Opportunity to Improve Childhood Lead Screening

The Centers for Disease Control is offering government organizations (including local, county and state government agencies and tribal health organizations) substantial grants (\$250,000-\$500,000) to improve childhood lead screening. Screening rates in PHC counties are low, so we are hopeful that some of our counties will apply for this funding. Please talk to your county public health department if you think they might be interested.

Here is the link for more information:

[https://www.ruralhealthinfo.org/funding/5160?utm\\_source=racupdate&utm\\_medium=email&utm\\_campaign=update030321](https://www.ruralhealthinfo.org/funding/5160?utm_source=racupdate&utm_medium=email&utm_campaign=update030321)

## Direct Telehealth Specialty Services Now Available

PHC offers Direct Telehealth Specialty Services through our provider directory to Primary Care Providers (PCPs). Direct Specialty Telehealth Services are being provided by “TeleMed2U” for a select set of specialties. We will continue to expand these services to providers as the need for additional direct specialty telehealth services arise.

[More Information](#)

## Care Coordination Services at Partnership HealthPlan

Did you know that PHC offers comprehensive case management services to all of our members, regardless of age or location? PHC’s Care Coordination department is comprised of RN Case Managers, Medical Social Workers, Health Care Guides, Behavioral Health Clinical Specialists and Transportation Specialists ready to assist providers, members and community partners coordinate care and access services. These services are voluntary, provided at no cost to the member or provider, and the member can opt-out at any time.

Most of our teams’ work is done telephonically, with the possibility of face-to-face engagement in select instances.

When we connect with members, we assign them an Acuity Level that best matches their needs and level of intensity for case management services.

The lowest level is for our members that need help accessing their benefits or providers. The highest levels are for those members that have multiple unmanaged complex conditions and/or for those whom have difficulty navigating the healthcare system without intensive support of a case manager.

If you believe you have a PHC member that would benefit from the services available from our Care Coordination Department, please refer then by calling 800-809-1350 or e-mailing the Care Coordination Help Desk at:

- Southern Region: [CareCoordination@partnershiphp.org](mailto:CareCoordination@partnershiphp.org)
- Northern Region: [CCHelpDeskRedding@partnershiphp.org](mailto:CCHelpDeskRedding@partnershiphp.org)

We look forward to partnering with you on behalf of our members!

## Kaiser Series Focused on COVID Vaccine Concerns of Different Ethnicities

Kaiser Napa-Solano is hosting a number of live events on “An Open Conversation About COVID-19 and the Vaccine,” featuring ethnically concordant clinicians. They

agreed to open these up to the wider community, so you can have your staff or patients attend.

- Spanish-speaking population: Click [here](#) for recording
- English-speaking Latinx population: Click [here](#) for recording
- Tagalog-speaking community: Click [here](#) for recording
- African-American community: Click [here](#) for recording

## PHC Educational Opportunities and Events

### Spring 2021 PHC Regional Medical Directors Meeting

Biannually, PHC hosts a regional meeting with clinical leaders for primary care organizations. Due to the need to stay socially distanced, we will be hosting this event virtually. We are currently in the early stages of planning for this event and will be releasing more information over the next few months.

A few topics that we will cover are:

- PHC Updates, New Programs, Major Policy Changes, and COVID-19
- Other topics include Major Pharmacy Changes, Formulary Highlights, Clinical Updates, mental health & Substance use Disorder Treatment, Data Review: Opioid Use, Vaccination, Readmission, PCP-QIP Changes, Special Initiatives, Prop 56 incentive programs and more.

Agenda:

Time	Agenda Item
9 a.m. – 10:50 a.m.	Main meeting
10:50 a.m. – 11 a.m.	Break
11 a.m. – 11:50 a.m.	Breakout sessions
11:50 a.m. – Noon	Break
Noon – 1 p.m.	Main meeting

**Date:** Friday, May 21, 2021

**Time:** 9 a.m. – 1 p.m.

[Sign-up Now](#) (Please specify your county in the County/Region field)

### Lead Toxicity and Screening for Elevated Lead Levels: On-Demand Training

Lead screening is far below average in the PHC service area.

Dr. Moore presented a comprehensive clinical summary of the evidence on lead toxicity and effects of elevated blood lead on pediatric development. The recorded webinar includes details on State, Federal and PHC regulatory requirements.

- Pediatric Screening for Elevated Lead Levels: [Recording](#) and [PowerPoint](#)

View more on-demand trainings on the [PHC Provider Learning Portal](#). Join our [email list](#) for upcoming and up-to-date content.

## Quality & Performance Improvement Training Events

For up-to-date events and trainings by the Quality and Performance Improvement Department, please view our [Quality Events Webpage](#).

Looking for more educational opportunities? The Quality & Performance Improvement Department has many pre-recorded, on-demand courses available to you. Trainings include:

- ABCs of Quality Improvement: An introduction to the basic principles of quality improvement.
- Accelerated Learning Educational Program: An overview of clinical measures including improvement strategies and tools.
- 2020 PCP QIP High Performers -- How'd They Do That: Learn best practices from the 2019 PCP QIP high performers.

You can find these on-demand courses, and more, on our [Webinars Webpage](#).

## Understanding the Benefits Delivery System

Ordering screenings in the primary care setting can trigger a common question: “Do my benefits cover that?” Join us for a webinar exploring PHC benefits affiliated with key primary care screenings, Optimizing Patient Understanding & Access.

**Who should attend?** Clinicians, practice managers, quality improvement staff and those who are responsible for billing, documentation, referrals and other aspects of screening completion.

### Objectives:

- Exploring opportunities to close gaps in care with an increased understanding of benefit coverage
- Increasing patient’s knowledge of coverage and access to benefits
- Increasing demonstration of screening completion
- Addressing common questions

**Date:** Thursday, March 18, 2021

**Time:** Noon – 1 p.m.

## Engaging Patients in Quality Improvement Webinar

We are pleased to invite you to a webinar that will support your continued quality improvement skill development. This training session will introduce the concept of patient engagement in quality improvement with the goal to improve patient experience and health outcomes.

Participants will be able to:

- Explain why engaging patients in quality improvement is important.
- Describe several strategies to engage patients in improvement.
- Describe aspects of care that could be improved through the involvement of patients.

**Date:** Tuesday, March 30, 2021

**Time:** Noon – 1:15 p.m.

[Sign-up Now](#)

## Accelerated Learning Education Programs

These learning sessions will cover PHC's Primary Care Provider Quality Incentive Program measures.

Targeted Audience: Clinicians, practice managers, quality managers, quality improvement team, and staff who are responsible for participating and leading quality improvement efforts within their organization.

### Well-Child Visits and Immunizations (0-2 years)

[Flyer](#)

**Date:** Tuesday, April 13, 2021

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### Early Cancer Detection (Cervical, Breast, and Colorectal Cancer Screening)

[Flyer](#)

**Date:** Tuesday, April 27, 2021

**Time:** Noon – 1:30 p.m.

[Sign-up Now](#)

### Controlling High Blood Pressure

[Flyer](#)

**Date:** Tuesday, May 11, 2021

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

## Diabetes Management HbA1C Good Control

[Flyer](#)

**Date:** Tuesday, May 25, 2021

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

## Improving Asthma Care and the Asthma Medication Ratio

[Flyer](#)

**Date:** Wednesday, July 14, 2021

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

## Child and Adolescent Well-Care Visits (3-17 years)

[Flyer](#)

**Date:** Tuesday, July 27, 2021

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

# Recommended Educational Opportunities Outside of PHC

## 2021 Virtual Provider CME Program

### Pediatric Burns – What Every Pediatric Provider Needs to Know

CME Credits Available

*Registration closes on Tuesday, March 16, 2021, at 2 p.m. PST.*

Who should attend? Pediatricians, primary care providers, registered nurses, and school-based nurses.

Learning Objectives:

- Describe the initial management of a major burn
- Outline the basic management of a burn wound
- Identify the signs of burn-related child abuse
- Describe how and when to refer a burn patient

**Date:** Tuesday, March 16, 2021

**Time:** 6 – 7 p.m.

[Sign-up Now](#)

## Annual Palliative Care Summit

### Working Together: Forging the Future of Serious Illness Care

The Coalition for Compassionate Care of California will host its annual summit virtually, again this year, partnering with coalition partners in Arizona and Hawaii. Don't miss this the presentations by national thought leaders in advanced illness,

palliative care and end-of-life issues. CME available, including for poster session on the evening of June 22.

**Dates:** June 22 and 23, 2021

**Time:** 11:30 a.m. – 4:00 p.m.

**Full Agenda and Registration:** [www.CCCsummit.org](http://www.CCCsummit.org)