

Weekly Medical Directors Briefing June 13-17, 2022

“Constantly talking isn’t necessarily communicating.”

–Charlie Kaufman, playwright/screenwriter

The Hazards of Medical Spanglish

A Spanish-speaking patient calls her primary care health center, and talks with a triage nurse who speaks Spanish. She says her 5 year old son was seen in an emergency room in Southern California and told that her son has Monkeypox. She was given an appointment, the patient was roomed and the medical assistant recorded the chief complaint of Monkeypox.

It turns out, that the patient had infectious mononucleosis (this was what was diagnosed at the emergency room). How did this get misinterpreted?

The answer: Medical Spanglish!

The medical translation of Monkeypox is *viruela del simio*, but a more colloquial translation is *viruela del mono*. *Viruela* is the Spanish translation for Smallpox, so *viruela del simio* means *Smallpox of the simians*, and *viruela del mono* means “Smallpox of the monkeys.”

In contrast, the medical translation of infectious mononucleosis (or acute Epstein-Barr virus infection) is *mononucleosis infecciosa* or *infeccion por el virus de Epstein-Barr*. If the emergency physician had used one of these terms, there would not have been the confusion that ensued.

However, the emergency room physician spoke a little Spanish, and so mixed that Spanish with an English language shortened term for infectious mononucleosis: mono.

“Su hijo tiene el virus de mono” which means to the parent: “Your child has the monkey virus,” which is pretty close to Monkeypox.

Early monkeypox presents with fever, fatigue, headache, and muscle aches, which is also the prodrome for COVID, infectious mononucleosis, influenza, and a hundred other illnesses so the lack of the characteristic rash is not sufficient to make a definitive diagnosis in the early stages.

Decades ago, Chevrolet had great difficulty selling a particular car model in Mexico and South America: the Nova. Nova in English is reminiscent of the French word for new, “nova” as in Nova Scotia. However in Spanish, “No va” means “no go” as in “the car that will not function.”

Providers with a little Spanish language capacity often have such miscommunications when they attempt to talk to their patients without a translator. They mix in English words, speaking Medical Spanglish.

Just as clinicians need to be precise and careful in their diagnostic process, this diagnostic information must be communicated to the patient in a way that they can fully understand, or the diagnostic process has failed. Communicating clearly with non-English speakers is a critical part of our professional responsibility as health care professionals.

For information on PHC provided video and telephonic interpreter services, see [our website](#).

This Week's News

Update to Prop 56 Supplementary Payments

Each year, as part of the California state budget process, the use of dollars generated on the \$2 per pack tax on tobacco (passed by the voters in 2016 in Proposition 56), is allocated. One small change in July of 2022: the portion of the [Value Based Payment incentives](#) targeted at **private** medical practices are being eliminated (**does not impact** health centers, including FQHCs, RHCs, and IHCs).

The remaining funding allocations are **unchanged**:

1. Supplementary payment for all PCPs who screen for Adverse Childhood Events.
2. Supplementary payment for all PCPs for performing developmental screenings at certain ages.
3. Supplemental payments for certain family planning services (affecting private providers).
4. Enhanced payment for non-health center organizations for primary care payments and dental payments for MediCal.

New Medi-Cal Rx Pharmacy Benefit: Blood Pressure Monitors and Cuffs

Effective June 1, 2022, Medi-Cal Rx covers personal home use blood pressure monitors and blood pressure cuffs. Medi-Cal Rx covers 1 monitoring device every 5 years and 1 cuff every 365 days. Covered products are restricted to the Medi-Cal Rx **List of Covered Personal Blood Pressure Monitoring Devices and Blood Pressure Cuffs**. TARs will not be accepted for products not on the Medi-Cal Rx list. Covered items include standard blood pressure monitors, monitors with talking functions, and monitors with Bluetooth connectivity and remote patient monitoring capabilities. Please refer to the Medi-Cal Rx Covered Product Lists <https://medi-calrx.dhcs.ca.gov/provider/forms/> for additional information.

[Click here for a summary of what is covered.](#)

Many pharmacies are unaware of this change, and the limited list of what is covered. We highly recommend you reach out to your local pharmacies with the list above and agree on which devices they will order and carry. Additionally, we recommend you configure your electronic health record prescription list to include devices that will be covered and carried. For convenience, we recommend a generic phrase like: "BP Monitor-Large Cuff" and let the pharmacy see what they have in stock that MediCal will cover and dispensing that. An exception: if you want a specific connected device you will want to specify the device exactly.

Note the options from the list above for devices compatible with remote patient monitoring programs.

For new or a different size BP cuffs only, the pharmacy TARs must indicate that the cuff is for a **home use monitor** and that the current cuff does not fit or is damaged. The indication of 'home use' is key. For questions regarding Medi-Cal Rx coverage or billing of blood pressure monitors and cuffs please contact Magellan at (800) 977-2273.

You may also continue to order BP monitors through the [PHC medical equipment distribution program](#) until our stock runs out.

PHC Educational Opportunities and Events

Starting and Continuing Naltrexone for Alcohol Use Disorder in the PCP Setting

This will be a practical webinar on best practices in alcohol use disorder treatment. Discussion will include key steps to patient assessment and treatment, including with Naltrexone & other evidenced based treatments, and an approach to alcohol withdrawal.

Target Audience: Primary care clinicians, case managers caring for patients with alcohol use disorder, behavioral health staff working at PCP offices.

Date: Thursday, June 30, 2022

Time: Noon – 1 p.m.

[Sign-up Now](#)

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

Application for CE credit has been filed with the California Board of Registered Nursing, Provider Number CEP16728. Determination of credit is pending.

Electronic Clinical Data Systems Webinar: Measure for PCP and Perinatal QIP

Electronic Clinical Data Systems (ECDS) is a HEDIS reporting standard for health plans collecting and submitting quality measures to NCQA. This reporting standard defines the data sources and types of structured data acceptable for use for a measure. Data systems that may be eligible for ECDS reporting include electronic health records.

ECDS reporting is part of NCQA's larger strategy to enable a Digital Quality System and is aligned with the industry's move to digital measures. Here are the measures that will be covered in this webinar: (ECDS measures are indicated by a "-E" after the measure name.)

The following measures are currently ECDS measures:

1. Several Depression Related Measures: (DMS-E, DSF-E, DRR-E, PND-E, and PDS-E), including screening for depression in prenatal and postpartum periods, depression screening rates, appropriate follow up for depressed individuals, and improving depression symptoms.
2. Follow up care for children prescribed ADHD medication (ADD-E).
3. Breast Cancer Screening (BCS-E)
4. Unhealthy Alcohol Use Screening and Follow-up (ASF-E)

There is an ECDS Unit of service measure in the 2022 PCP QIP, in which PHC has hired a programmer to program the master code for these measures in two commonly used EHRs, eClinicalWorks and NextGen, to assist our PCPs with adopting this measure. Starting in 2023, the submission of ECDS supplemental data from electronic health records will be required for several PCP QIP measures, so using the 2022 unit

of service. Submission of ECDS Depression measure will also be required for payment of the perinatal QIP, this year.

In this webinar, we will go through the master code, supporting documentation, and answer questions about the measures and the process.

Who should attend: Configuration and reporting specialists for electronic health records in PCP and prenatal care practice settings, clinician champions of analytics, quality or medical informatics. If you have a vendor that supports your work in this area, they may attend.

Attendance limited to PHC providers (including their vendors), PHC staff, and PHC-invited guests.

Date: Tuesday, June 28, 2022

Time: Noon to 1 p.m.

[Sign-up Now](#)

Accelerated Learning Education Program Webinars

CME/CE's Available, see linked flyers for more details.

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

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

Pediatric Health – Child and Adolescent Well-Care Visits (3-17 years), Screenings, and Immunizations for Adolescents

[Flyer](#)

Date: Tuesday, July 12, 2022

Time: Noon - 1 p.m.

[Sign-up Now](#)

Update on Childhood Lead Poisoning Prevention

Targeted audience: Pediatrician, neonatologist, critical care, emergency medicine, resident, hospitalist, family practice, PA, NP, nurse, first responder, and all other interested clinical groups.

Education objectives:

- Describe the scope, risk factors, clinical effects, management and treatment of childhood lead exposure
- Identify cultural risk factors for lead exposure and children in all socioeconomic groups who may be at risk for lead exposure
- Explain California's Childhood Lead Screening statutes and regulations, provider mandates, and the role of anticipatory guidance in preventing childhood lead exposure

- Outline health and environmental interventions for children with lead exposure, and services provided by the state of California and local Childhood Lead Poisoning Prevention Programs

Date: Thursday, July 14, 2022

Time: Noon – 1:30 p.m.

[Sign-up Now](#)

This session is approved for 1.50 Online AAFP Prescribed. California Board of Registered Nursing, Provider Number CEP16728, for 1.50 contact hours.

Recommended Educational Opportunities Outside of PHC

CSAM State of the Art Addiction Medicine Conference

The California Society of Addiction Medicine's annual conference is one of the best in the country for learning about the latest in the science of substance use disorder treatment.

Dates: August 24-27, 2022

Location: San Diego, CA

[Sign-up Now](#)

There is an opportunity to present a poster at the conference. Learn how to submit an abstract [here](#).