



**From Dr. Mark D. Niehaus, Internal Medicine-Pediatrics Primary Care at Sentara Family Medicine at Belvedere in Charlottesville and SQCN Associate Medical Director, Charlottesville Region**



Welcome to the September edition of the SQCN/SACO newsletter, *Inside Population Health*. We are focusing on pain awareness month, low back pain, healthy aging and fall prevention, opioid awareness and substance recovery, telehealth awareness and malnutrition awareness, in how it relates to diabetes. For our pediatric population we are focusing on childhood weight inclusion methods. **Our measures include imaging for low back pain and screening for falls and risk for falls.**

Every one of us manages patients with acute and chronic pain on a daily basis. **An estimated 51 million Americans live with chronic pain.** There is no one-size-fits-all approach to treatment and pain management is usually aimed at reducing pain, not eliminating it. Typically, successful pain management requires finding a combination of multidisciplinary, multimodal therapies that reduce pain enough to improve quality of life and increase function.

Lower back pain (LBP) is one of the most common causes of both acute and chronic pain. According to the Centers for Disease Control and Prevention (CDC), this has an estimated daily point-prevalence of 11.9%, monthly point-

prevalence of 23.3%, annual prevalence of 39%. and lifetime prevalence of 75-84%. Non-specific LBP is the most common presentation of LBP, with 90% of cases. The prevalence increases with age up to 80 years, while **the highest number of LBP cases occurs at the age of 50-55 years.**

We spend a disproportionate amount of healthcare dollars on imaging for LBP, with a low clinical return on that spend. The same is true for falls in the older population. **There are 3 million annual injuries treated in emergency departments and over 800,000 hospitalizations. Studies show that these costs totaled more than \$50 billion in 2015.** More than 75% of these costs were covered by Medicare and Medicaid. See our tip sheets below on both LBP management and fall prevention tips, which you can share with your patients. Our HCC coding tip this month covers frailty.

September 21 is National Opioid and Substance Awareness Day. **About 41 people die from prescription opioid overdose daily in the U.S.** This includes hydrocodone, morphine, and oxycodone. It's important to get the message out that anyone can become addicted because the brain and nervous system change with the drug. Work with your patients on pain management, but also be sure to discuss the benefits versus risk. See below for pharmacy information on medications and treatment options.

We have included content on diabetes management and appetite loss, along with a shareable tip sheet. We go into why words matter when helping children who have a high body weight. In the past, we have focused on what to do about childhood obesity and now, how to positively reinforce your pediatric patients and parents/guardians with healthy and empowering choices. For telehealth awareness, we have included a few tips to make the experience pleasant and efficient—along with how to set it up within your practice. And finally, we have an update on our Epic Healthy Planet platform.

We appreciate all that you do! Thank you for being part of the network.

### **SQCN September 2023 Primary Care Meetings\***

- The Adult PCRC meeting will be held on September 12 from 6-7:30 p.m. Dr. Moss Mendelson is presenting on HCC coding updates. Meeting link [here](#).
- The Pediatric PCPC will be on September 19 from 6-7:30 p.m. Dr. William Owen is presenting on sickle cell anemia. Meeting link [here](#).

### **SQCN September 2023 Practice Managers Meeting\***

- The meeting is on September 26 from 12:15-1 p.m. Meeting link [here](#).

## SACO September 2023 Primary Care Leadership Meeting

- The monthly meeting will be cancelled this month. The next meeting will be held on October 20 at 7 a.m. Discussion TBD.

\*No preregistration is necessary, simply join the links above. Click on the button below to access the 2023 meeting schedule and information.

2023 SQCN Primary Care Engagement Bonus Meetings

## SQCN Impact Scorecards

**This [link](#) will take you to your monthly 2023 Adult and Pediatric Practice Impact Scorecard. Please be sure to check back monthly for your practice performance.**

Avoidable ED visits (rate per 1,000) remain as our utilization metric and there are several quality metrics for adult and pediatric populations. These metrics are scored for each practice and the total score is expressed as a percentage from 30-100%. That Performance score will be combined with attribution to determine distributions. The report will be updated monthly so that you can track your practice's performance.

See the button below for more information about the Impact Scorecard and the SQCN distribution plan.

Please contact [SQCN@sentara.com](mailto:SQCN@sentara.com) if you have any questions.

Impact Scorecards SBAR

## HCC/Coding Tip : Frailty Indicators

When frailty or advanced illness begins to impact function and overall quality of life, certain preventive screenings and disease-specific medical treatments become less important. Coordinated care helps maintain function and quality of life in the face of declining health. It's important to identify our vulnerable patients by coding these conditions each year.

Frailty includes:

- Gait instability or reduced mobility
- Use of assistive devices (walker, cane, hospital bed, commode chair, oxygen)
- Pressure ulcer
- Sarcopenia (muscle wasting)
- Having a fall (risk for falls not included)
- Need for ADL assistance

This is identified by two of the indications on two different service dates.

Advanced illness includes (please note that most of these are HCC codes):

- Cancer
- Dementia
- Alcohol dependence
- Parkinson's
- Chronic heart failure
- End stage renal disease
- Emphysema, fibrosis, or respiratory failure
- Cirrhosis

This is identified from two outpatient, emergency department, observation visits, OR one acute inpatient stay OR one dispensed dementia medication. This excludes from most HEDIS measures.

## **Healthy Aging: Fall Prevention**

Falls in the older population may not only be serious, but also expensive. Fall prevention planning is an important topic for your elderly patients.

Here are a few questions to ask:

- Have you fallen, or almost fallen in the past year?
- Do you sometimes feel dizzy or lightheaded, especially when standing up from a couch or chair?

- Do you feel less steady on your feet?

A fall can change a person's mobility, independence, and confidence. Falls can also decrease quality of life and contribute to social isolation from family and friends.

If you have a patient who may benefit from fall prevention tips and resources, [download this two-page tip sheet](#). Contact us at [SQC�@sentara.com](mailto:SQC�@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com) for care management services.

### Facts About Falls

Have you fallen, or almost fallen in the past year?

Do you sometimes feel dizzy or lightheaded, especially when standing up from a couch or chair?

Do you feel less steady on your feet?

Falls are not only the leading cause of fatal injury in older adults, but they are more likely to lead to long-term complications. These can include hip fractures, decreased mobility and head injuries. Your quality of life and independence can be forever decreased as a result of a fall.

**By the numbers**

For those over the age of 65...

More than **1 out of 4 people** fall each year. Less than half tell their doctor.

At least **95% of hip fractures** are caused by a fall. Most traumatic brain injuries are caused this way too.

Falls account for **over 36,000 deaths** a year. In this age group, falls are the leading cause of injury death.

A fall can instantly change your mobility, independence, and confidence. The results from a fall can decrease quality of life and contribute to social isolation from family and friends. There are many ways to alter your home, diet, and daily habits to help prevent a fall. See the following prevention tips.

Source: <https://www.cdc.gov/falls/index.html>. Accessed 25 August 2023.






## Innovative Practice: Sentara Awareness for Falls Education (S.A.F.E.) Program

The S.A.F.E. program was developed to help reduce the risk and fear of falls in the elderly. This individualized program is designed to improve flexibility, strength, balance, and walking endurance over a one-year period. There are follow-ups in place to monitor progress.

The following conditions are addressed:

- Generalized weakness
- Walking instability
- Decreased balance

A S.A.F.E. program evaluation can be set up through the Sentara Outpatient Therapy Scheduling Office at 855-852-9066.

More information on Sentara Fall-Prevention Therapy can be found [here](#).

## Low Back Pain: Treatment Options

Low back pain is a common condition that can become costly. Depending on

the severity and onset, patients may go to urgent care or emergency department settings instead of their primary care team.

There are several at-home methods to help with less severe pain. Share this tip sheet with patients so they know when to treat at home and when and where to seek care.

If you have a patient who may benefit from low back pain treatment options, [share this tip sheet](#).

Contact [SQCN@sentara.com](mailto:SQCN@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com) for care management services.

### How to Treat Low Back Pain


**A Message on Behalf of Your Primary Care Team or Specialist**

Low back pain is common. It can be the result of an injury, medical condition, or life event. The pain itself can feel dull and constant or sharp and sudden. It generally goes away on its own.

If your symptoms are not severe, there are a variety of home treatments:

- ✓ Pain medication, such as acetaminophen
- ✓ Applying ice or heat
- ✓ Getting a massage
- ✓ Gentle stretches and exercises, including tai chi and yoga
- ✓ Meditation

Try a series of no-cost videos and meditations. Click or scan the QR code to access.



How do you know if you need help?



Watch for symptoms like these, in addition to back pain:

- Pain, numbness, or weakness in legs
- Trouble urinating
- Fever
- Unintentional weight loss
- Significant trouble walking
- Pain that wakes you up at night

If you have any of the above, contact your provider. Going to your primary care team or specialist can be less expensive than urgent care or the emergency department. Wait times are likely shorter too. If you do not have a provider, try a physical therapy center, pain management center, or an orthopedic practice.

Your primary care team or specialist is working with a team of trained registered nurse care managers and care coordinators. Together, they can help you understand and manage lower back pain and any other conditions that you may have. These services are personalized and do not cost you anything. Contact the care management team at [SQCN@sentara.com](mailto:SQCN@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com).

Source: <https://www.niams.nih.gov/health-topics/back-pain>. Accessed 5 September 2023.



## Pharmacy Highlights: Opioid Awareness

Even though the opioid crisis was declared a nationwide Public Health Emergency on Oct. 27, 2017, there is still much work to do. While many types of drugs contribute to overdose mortality, opioids accounted for almost 75% of all drug overdoses deaths in 2020. In June 2021, synthetic opioids were involved in an estimated 87% of opioid deaths and 65% of all drug overdose deaths. The CDC now estimates more than 108,000 drug overdose deaths occurred in the 12-month period, ending April 2022.

Click on the button below to download medications and other options.

[Opioid Awareness Medication Information](#)

## Care Corner: Diabetes and Appetite Loss

Having diabetes can cause changes in your patient's appetite due to not feeling well or having depression. There may be medication side effects or even gastroparesis.

If you have a patient who may benefit from learning more about the connection between diabetes and appetite, [share this tip sheet](#).

Contact [SQCN@sentara.com](mailto:SQCN@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com) for care management services.

## Diabetes and Your Appetite

### A Message on Behalf of Your Primary Care Team

Having diabetes can cause changes in your appetite due to not feeling well or having depression. There may be medication side effects. Or, gastroparesis, caused by food sitting in the stomach too long. A healthy, balanced diet is so important with diabetes.

Sometimes, you may not feel hungry. It's not a good idea to skip meals because it can lead to high blood sugar levels. When your body doesn't get enough energy from food your liver produces more sugar.

Your primary care team is working with a team of specially trained registered nurse care managers and care coordinators. Together, they can help you understand and manage your diabetes and any other conditions that you may have.

### Some ways to manage your appetite:

- ✓ Eat several small meals instead of three large ones. Have something every 2-3 hours. This prevents you from overeating during a large meal.
- ✓ Consume foods that are higher protein, especially at breakfast. This keeps you fuller during the day.
- ✓ Bring portable snacks for eating on the go. Stock your pantry and fridge for easy eating at home.
- ✓ Keep active and move around often.
- ✓ Set reminders on when to eat. Make your dining space an inviting place to sit.



Your diabetes self-care manager can work with you on the above goals and more:

- Discuss your medications and side effects.
- Empower your lifestyle choices.
- Achieve your best health.

Your diet may be off because of food insecurity issues. It may be hard to buy healthy foods because of your budget, difficulty in getting to the store, or being able to get a healthcare appointment. This is another way care management services may help. Contact care management services at [SQCN@sentara.com](mailto:SQCN@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com).

Source: <https://www.livestrong.com/article/462560-diabetes-loss-of-appetite>. Accessed 29 August 2023.



## It's Childhood Obesity Awareness Month

September is Childhood Obesity Awareness Month. There is a stigma associated with children who have a high body weight, and parents or guardians may blame themselves or delay seeking healthcare. The stigma may include judgment, bullying, or even victimization from peers. It may also include weight bias within the family, educators, and even the healthcare system.

Consider a more weight-inclusive approach. Here are some questions to ask during healthcare visits:

- What are some healthy eating and physical activity goals you think your child can sustain long-term? (Give examples of a balanced diet and/or trying local sports leagues.)
- Did you know that when health behaviors improve, so do things like stamina, mood, and even gastrointestinal (or other individual) issues?
- Have you considered seeing a dietitian or mental health provider for a personalized plan? (Include referral resources that don't have a long wait time or other obstacles.)

The idea is to shift the focus and dialogue away from the outside appearance and instead, reiterate the benefits to the whole body when improving health. Use person-centered language—for example, use "child with obesity" rather than calling the child "obese." And most importantly,

provide the same secure and comfortable setting as with all patients.

Source: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6311448/>

## Telehealth: Are You Connected?

Since the beginning of the COVID-19 public health emergency, telehealth has become more common given the relaxed regulations and expanded reimbursements. Telehealth can be a useful tool that allows providers to increase continuity of care, help overcome clinical shortages, provide support for patients managing chronic health conditions, help stop the spread of infectious disease, and much more.

As healthcare continues to change, there are opportunities to learn more about how to incorporate telehealth into your practice's workflows and which situations are appropriate for virtual appointments and which are recommended to stay in-person. Here are some tips to help your practice get started and/or enhance your telehealth experiences:

- **Establish specific times** that you will be available for telehealth appointments.
- **Ensure the patient can see and hear you.** Check the lighting and eliminate background noise, if possible.
- **Maintain eye contact.** Let the patient know when you are charting so they know why you are looking down.
- **Use two screens** so that you can have your medical record open on one screen and the telehealth appointment on the other.

To get started with telehealth, or if you want to optimize your use, [visit this Health and Human Service \(HHS\) link](#) and find more information on how to plan your workflow, prepare your patients, and find best practices.

## Healthy Planet Update: September Tip

Epic Healthy Planet allows SQCN independent partners to review and contribute clinical information to an Optima Health Commercial patient's record using the existing EpicCare Link web-based platform on MDOOffice. Recently, the Value-Based Program (VBP) Scorecards integrated within Epic Healthy Planet and available on Epic Hyperspace for Sentara partners went through a refresh with the new Epic upgrade. These scorecards allow all SQCN partners to track and trend quality measures, pull care gap lists, and close care gaps.



Along with a fresh look, new features to the Director VBP Scorecard are available including filtering HEDIS® measures to view Year-to-Date (YTD) or Rolling 12 Months (R12) or both. You can also hide the Primary Score (claims data only), to only view Score (claims and clinical data).

Training guides are available on the [MDOffice Provider Portal](#).

For additional questions, please email [Heather Lynn](#).

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### **Questions About SQCN or SACO?**

**For Independent Practices, please contact the Population Health Team:**

**757-455-7330 | [SQCN@sentara.com](mailto:SQCN@sentara.com)**

**757-455-7040 | [SACO@sentara.com](mailto:SACO@sentara.com)**

**For SASD and SMG practices, please contact your Director of Business Operations and Director of Medical Operations, respectively.**

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