

ISSUE 12

NOVEMBER/
DECEMBER | 2022

JUST THE FACTS

A MONTHLY NEWSLETTER FROM YOUR
METRO HEALTH CLINICIAN AMBASSADORS



**METROPOLITAN
HEALTH DISTRICT**

MONTHLY HIGHLIGHTS

CALL FOR APPLICATIONS

The City of San Antonio Metropolitan Health District invites Obstetrics and Gynecology providers and Mental Health providers to apply to join the Core Working Group for its latest Access to Care initiative.

The work group will address one barrier to care for Black and Brown residents in San Antonio and Bexar County by annually showcasing providers who create a respectful, welcoming patient experience for all, with attention to Social Determinants of Health including racism. Assessments will include a review of institutional policies, pledges and trainings, and eventually, “secret shopper” appraisals.



Access to Care is one of six priority areas identified in Metro Health’s enhanced strategic plan, SA Forward, which is committed to protecting and improving the health of our community. The Access to Care team works to remove barriers to health services and increase public awareness about resources.

Core Working Group responsibilities are as follows: **The Core Working Group will be comprised of:**

- Monthly 1.5-hour meetings leading up to the pilot report (one year)
- Target population identification
- Creation of a broader coalition
- Provider outreach
- 3 Metro Health staff
- One OB/GYN Provider and one alternate
- One Mental or Behavioral Health Provider and one alternate
- Two members of the public and alternates

To request an application, or for any questions, please email Access to Care Project Manager Sarah Jo Wagner at Sarah.Wagner@sanantonio.gov. Applications close Thursday, December 15, at 5:00 PM, and invitations to participate will be sent Feb. 1, 2023.

American Diabetes Month

November is [American Diabetes Month](#). Each November, the American Diabetes Association seek to raise awareness, provide education and share resources about diabetes, and this year's theme is *Today's Diabetes Hits Different!*



The [campaign website](#) includes links to information on amputation prevention, a diabetes risk quiz, and recipes. The National Institute of Diabetes and Digestive and Kidney Diseases also has a campaign, called Diabetes Management: It Takes A Team, which encourages patients to build a healthcare team to help prevent diabetes complications. You can visit the site and view resources to share with patients, as well as [tips for talking to patients about prediabetes](#). It's also a great time to explore the [Healthy People 2030 Diabetes objectives](#), aimed at reducing the national burden of diabetes.

San Antonio Metro Health offers three **free** diabetes interventions, virtually and in person, at locations throughout the city:

Diabetes Prevention Program: Participants work together in a small group to learn about healthier eating and more physical activity to help lower their risk of developing diabetes. The program, designed by the Centers for Disease Control & Prevention (CDC), is led by a trained Lifestyle Coach in a classroom setting. The groups meet over 12 months, beginning with 16 weekly sessions followed by 6 bi-weekly & 3 monthly sessions. Participants must be at least 18 years old, overweight (BMI > 25), and at high risk of developing type 2 diabetes or already diagnosed with prediabetes.

Health & Wellness Program: Through six workshops developed at Stanford University, participants learn skills to manage the symptoms of chronic disease. Each workshop encourages participants to share experiences and support one another along the way. Topics covered include managing symptoms, exercise for strength and energy, healthy eating, medication use, working with your doctor, setting goals, problem solving, relaxation techniques, and dealing with negative emotions. Open to adults with any chronic disease, their family members, caregivers, or anyone hoping to learn some healthy habits.

Diabetes Self Management Program: Similar to the Health & Wellness Program, but designed for people diagnosed with diabetes, their family members or caregivers.
To refer a patient to any of these free programs or for more information, visit diabeteshelpsa.com.

U.S. Antibiotic Awareness Week – November 18-24, 2022

The CDC is sponsoring U.S. Antibiotic Awareness Week from Nov. 18 to Nov. 24 to raise awareness about antibiotic resistance, and educate healthcare professionals and patients alike on how to prevent it. You can access the CDC's [Be Antibiotics Aware Partner Toolkit](#) to learn more and find tools to help educate your staff and patients about the importance of appropriate antibiotic use, and best practices. In 2020, Texas had a higher than average rate of community antibiotic prescriptions – 637 prescriptions dispensed per 1,000 of the population (CDC.gov). You can view the CDC's newsletter to providers [here](#) and download “Antibiotics Aren't Always the Answer” brochures and flyers for patients [here](#).



December

WORLD AIDS DAY
ROCK THE RIBBON
1 DECEMBER 2022



December 1 is World AIDS Day. On this day each year, we focus on raising awareness, providing education and reducing stigma surrounding HIV and AIDS, to end the epidemic. The theme for World AIDS Day 2022 is “Putting Ourselves to the Test: Achieving Equity to End HIV.” Despite the progress we have made since the beginning of the HIV epidemic in the ‘80s, there remains more work to be done. Inequity in health care and social stigma continues to allow the perpetuation of this preventable disease, [especially among those who are the most marginalized among us](#) – women, people of color and those with lower socioeconomic status. For example, a [CDC report](#) in October showed that 22.6% of Hispanic people with HIV reported experiencing HIV health care discrimination during the previous 12 months, such as feeling that a medical provider didn’t listen to them, or treated them with less respect or courtesy than other patients. Thirty percent attributed health care discrimination to their HIV infection, 23% to their sexual orientation or sexual practices, and 20% to their race or ethnicity.

Now more than ever, we have the tools to prevent new infections and treat people living with HIV so they can live long, healthy lives, like any other person living with a chronic condition. However, despite these advances in treatment and prevention, and a huge expansion in the number of people eligible for treatment, HIV Pre-Exposure Prophylaxis (PrEP) continues to be vastly underutilized.

The CDC released new guidelines on prescribing [PrEP](#) in December 2021. These new guidelines include expanded eligibility to include all adults and adolescents at high risk, and all who request PrEP, even if no risks were disclosed. The new publication also includes indications for two oral PrEP regimens and the newly approved injectable PrEP. The CDC now recommends that clinicians provide education about PrEP to all sexually active adults and adolescents.

The [US Preventive Services Task Force](#) (USPSTF) recommends offering PrEP to all patients at high risk for acquiring HIV (Grade “A”). Updates to the recommendations as a result of the new guidelines are in progress.

You can get free training on PrEP and provider resources from www.pleaseprepme.org. PrEP services and medications are covered by insurance, and there are resources to help cover the cost of medications for those who are uninsured. You can find information on billing for these services [here](#). For more information, contact your Clinician Ambassador team!

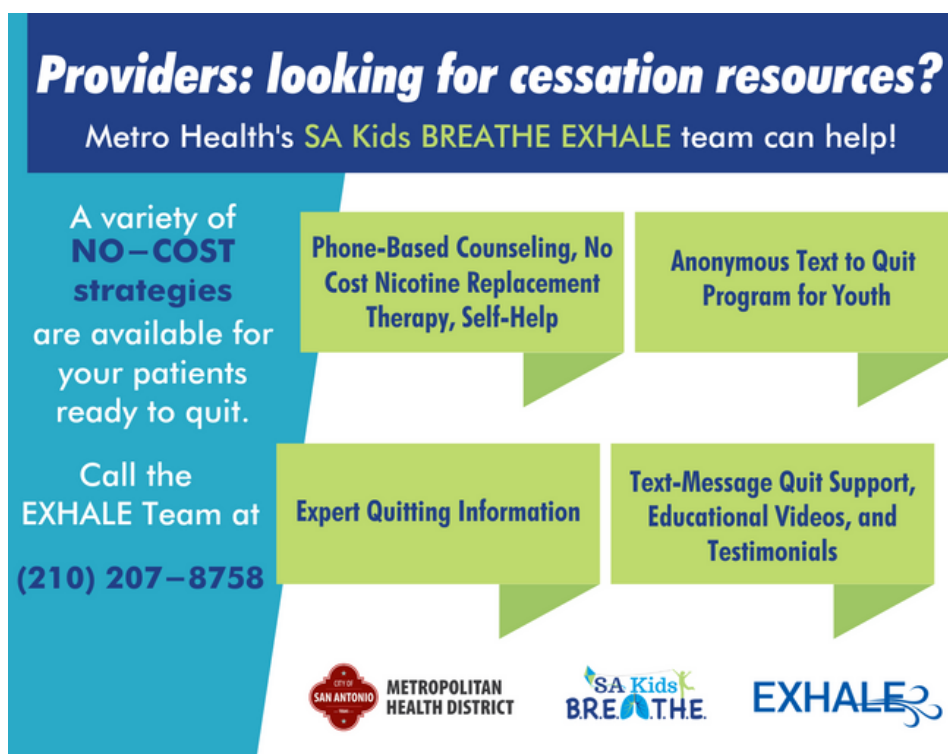
WONDERING IF YOUR PATIENT’S GOT COVID OR INFLUENZA?

The CDC has a handy [algorithm](#) for clinicians to use during this flu season to determine what testing to perform and when. Since this fall and winter will see upticks in both COVID-19 infections with new variants circulating in addition to the seasonal flu, it can leave us with questions about what tests to order and when. Current guidance recommends testing for COVID-19 in otherwise healthy patients that don’t require a higher level of care. If the patient tests positive for COVID-19 and has risk for progression to severe disease, treat the patient according to the NIH treatment recommendations. If the patient tests negative for COVID-19, you can either follow up with an influenza test if the result would change your plan of care, or if the patient has been symptomatic for < 2 days, clinicians can initiate empiric treatment with approved antiviral medications for flu. Check out the guidance and the algorithm here: www.cdc.gov/flu/professionals/diagnosis/testing-guidance-for-clinicians.

JUST A FACT

Did you know that at least **3 out of every 4 adults** are behind on routine vaccines like influenza, Td/Tdap, hepatitis A, and HPV? In addition, COVID-19 vaccine recommendations continue to evolve, and new changes were made to hepatitis B, shingles, pneumococcal, and flu vaccine recommendations since 2021. The National Adult and Influenza Immunization Summit released a handy [Clinician Tip Sheet](#) to update providers on the recent changes and help you get your patients “back on track” with their immunizations. The tip sheet offers a link to a [quiz](#) for your patients to help them find out which vaccines they may need. You can also access a [downloadable immunization record template](#) for patients that need one.

SA KIDS BREATHE



ALTERNATIVE RESOURCES FOR MENTAL HEALTH

[CPAN](#), or the Child Psychiatry Access Network, is Texas pediatric clinicians' **free** and trusted mental health resource. This state-funded initiative offers provider-to-provider consultations and training to pediatric clinicians. Call 1-888-901-CPAN (2726) to enroll and get help with a patient quickly. CPAN staff are available Monday-Friday, 8 a.m.-5 p.m. You can also leave a message anytime.

CPAN provides the following support at no cost:

- Patient care consultation from a mental health clinician within 30 minutes
- Vetted and patient-specific resources and referrals within one business day
- Free CEs and other learning opportunities

Examples:

- For individual primary care providers: Prompt access to a child psychiatrist for phone consultation on medication questions, including follow-ups.
- For practices that have behavioral health clinicians: Expert consultation on difficult cases.
- For pediatric health homes: Help to fully incorporate behavioral services into the practice through access to a child psychiatrist.
- For patients needing specialized care: Help to identify resources for evaluation and ongoing care.

Next on the horizon is PeriPAN, for prenatal and postpartum providers. Until that launches locally, providers are encouraged to link patients to Postpartum Support International, postpartum.net, and the National Maternal Health Hotline, 1-833-943-5746 (1-833-9-HELP4MOMS).



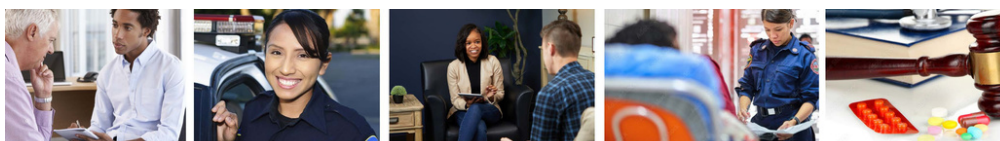
Be Well Texas is a state-funded program for Texans seeking help with substance use and/or mental illness, using an interdisciplinary team of addiction medicine specialists, behavioral experts and people with lived experience in recovery. Locally, it is run by UT Health San Antonio. Expert, evidence-based care is offered through on-demand telemedicine and in-person services to patients with or without insurance or the ability to pay. Services are at no cost for those who qualify.

Services include psychiatric evaluation, Medication Assisted Treatment, medication management, counseling, peer recovery support, technology tools and case management. All laboratory and medication costs are included and free for those who qualify. Learn more or refer a patient at [BeWellTexas.org](https://www.BeWellTexas.org).

[RecoveryTexas.org](https://www.RecoveryTexas.org) offers on-demand access to certified peer recovery support specialists with lived experience in recovery from substance use disorder. Recovery Texas is a warm line, not a crisis line, run by peers - those who have been through extreme challenges themselves and are there primarily to listen. RecoveryTexas.org is part of Be Well Texas and meets Texans where they are in their recovery journey, offering resources, meetings, yoga, recovery on-demand, or direct access to treatment. People can call 833-922-2557 to speak to a peer, or 833-778-2571 to make an appointment.

The **San Antonio Council on Alcohol and Drug Awareness (SACADA.org)** offers two recovery support groups via Zoom daily at 2 pm and 6 pm M-F. Coaches are not healthcare providers and do not provide medical advice, diagnosis, or treatment. For more information, call SACADA at 210-225-4741 or email info@sacada.org.

The **Center for Substance Use Training and Telementoring (c-STAT)** also is a part of Be Well Texas and provides education, technical assistance, and training to providers and professionals on compassionate, evidence-based techniques to treat substance use disorders. Six sessions are held via Zoom each month. Earn free continuing education credits, engage with subject matter experts, and improve patient access to high quality care! To register or learn more, visit c-stat.uthscsa.edu.



CURRENT ECHO PROGRAMS

All programs meet via Zoom

Harm Reduction ECHO

1st Thursday of each month, 12 - 1 p.m. CST
Evidence-based strategies for reducing harm and premature death for individuals with substance use

Public Safety Solutions for Substance Use Disorder (SUD) ECHO

2nd Thursday of each month, 11 a.m. - 12 p.m. CST
Building public safety professionals' capacity in successfully responding to substance use in their day-to-day work

TxRx (Medications for Substance Use Disorder) ECHO

3rd Tuesday of each month, 12 - 1 p.m. CST
Medications for substance use disorder

SHOUT (Support Hospital Opioid Use Disorder Treatment) ECHO

3rd Thursday of each month, 12 - 1 p.m. CST
Treating opioid use disorder in hospital settings

RSS (Recovery Support Services) ECHO

4th Wednesday of each month, 12 - 1 p.m. CST
Fundamentals of peer recovery support services

Systems and Sustainability ECHO

4th Thursday of each month, 12 - 1 p.m. CST
Leadership-facing program addressing systems-level challenges to successful SUD treatment services implementation and sustainability



FOR MORE INFORMATION OR TO REGISTER, VISIT:
<https://c-stat.uthscsa.edu/echo>

Center for Substance Use Training and Telementoring | cstat@uthscsa.edu | <https://c-stat.uthscsa.edu>

This training is provided by the Center for Substance Use Training and Telementoring (c-STAT).
c-STAT is funded by the Texas Health and Human Services Commission (contract #HH5001042300003). For more information, please contact us at cstat@uthscsa.edu

Save the Date for the **Texas Substance Use Symposium (TxSUS)**, March 27-28, 2023 at the Henry B. Gonzalez Convention Center. The mission of the Texas Substance Use Symposium, or TxSUS (pronounced "Texas") is to reduce the burden of substance use on Texas communities by convening over 400 health care providers, public safety professionals, behavioral health providers, and peer recovery support specialists to collaboratively identify our local substance use challenges and solutions to this public health concern. Registration opening soon! For more information regarding sponsorship or exhibitor opportunities, please contact cstat@uthscsa.edu.



TEEN SEXUAL HEALTH TASK FORCE

Join the Teen Sexual Health Task Force for a series of free virtual educational sessions, including screening and treating STIs, pregnancy prevention and adolescent consent. A new virtual session will be held each month from 12-1pm CST. Continuing education is available. December's topic will be Sex Ed In Schools: What Are the Laws? Register [here](https://bit.ly/3CMKvFv) or visit <https://bit.ly/3CMKvFv>. To view a calendar of events, please view the flyer.

TEEN

sexual health

An ECHO Program 2022-2023

TEEN SEXUAL HEALTH

task force

| | |
|--------|--------------------------------------|
| Nov 9 | ADOLESCENT-FRIENDLY HEALTHCARE |
| Dec 14 | SEX ED IN SCHOOLS: WHAT ARE THE LAWS |
| Jan 11 | ADOLESCENT CONSENT |
| Feb 8 | PREGNANCY PREVENTION |
| Mar 8 | SCREENING FOR STIs |
| Apr 12 | TREATING STIs |

REGISTER NOW

Click here to register!
<https://bit.ly/3CMKvFv>

Join virtually

All sessions 12-1 pm CST

Continuing education credits available

HoustonAETC@bcm.edu

ECHO

Bayless

South Central

AETC

South Central

UTHealth

The University of Texas Health Science Center at Houston

TEXAS

Health and Human Services

HOUSTON HEALTH

DEPARTMENT

HEALTHY FUTURE

OF TEXAS

COVID CORNER

POST-ACUTE SEQUELAE OF COVID-19 (PASC) GUIDELINES

Medical and other scientific communities are coming to grips with the wide-ranging, long-term effects of COVID-19 infections. Post-Acute Sequelae of COVID-19 (PASC) is the umbrella term for the various medical conditions experienced by many who acquired COVID-19. These include respiratory symptoms, cognitive symptoms and ongoing fatigue among others. Going forward, identifying, acknowledging and managing these sequelae will require specific, evidence-based approaches. The American Association of Physical Medicine & Rehabilitation (AAPM&R) has called for a national plan to address these conditions, and published a set of guidelines in collaboration with other disciplines to address PASC. The guidelines currently address pediatric, respiratory, cardiovascular, cognitive, autonomic dysfunction and fatigue, and the collaborative continues to write additional guidelines they plan to publish on their website. You can access the guidelines [here](#). To learn more or get involved, email covidresponse@aapmr.org.

For patients, one of the largest online support groups is Survivor Corps, survivorcorps.com.

GAO FINDS COVID-19 RESPONSIBLE FOR 25% OF MATERNAL DEATHS

To study the effects of the COVID-19 pandemic on maternal health as a part of its oversight efforts, the Government Office of Accountability (GAO) reviewed data on maternal health outcomes and disparities. The GAO found that maternal deaths increased during 2020 and 2021 compared to 2018 and 2019, and that 25% of maternal deaths were due to COVID-19. Additionally, the report indicated that despite other changes in the healthcare system related to COVID-19, maternal mortality continued to be disproportionately higher among non-Hispanic Black women. A major factor was inadequate access to care. Maternal mortality rates for White and Hispanic women also increased, indicating that the pandemic had a negative impact on maternal mortality overall. To read the report, visit www.gao.gov.

ASK YOUR CLINICIAN AMBASSADOR – QUESTIONS FROM THE FIELD

Have a burning public health question? Ask a clinician ambassador! Email lucinda.zeinelabdin2@sanantonio.gov or sign up for an [academic detailing session!](#)

I've heard that PrEP requires a lot of lab work, and frequent visits. Is this true, and are the visits and lab work covered by insurance?

The December 2021 updates to the [CDC PrEP Guidelines](#) recommend the following testing schedules based on the type of PrEP your patient is on (oral or injectable).

Baseline testing for all types of PrEP includes STI testing (including syphilis, gonorrhea, chlamydia and hepatitis C), and HIV testing within 7 days of starting PrEP using an HIV Ag/Ab test.

ORAL PREP REGIMENS

Oral PrEP regimens require follow up STI testing, HIV testing and pregnancy testing (if applicable) one month after starting PrEP. HIV and STI screening should be conducted every 3 months – right around the time the patient is due for a medication refill.

Patients who are 50 or older and those with eCrCl less than 90ml/min should have a eCrCl at initiation and every 6 months thereafter. All patients continuing PrEP should have eCrCl every 12 months, as well as triglycerides and cholesterol if using the newer pill formulation that includes tenofovir alafenamide.

Follow up appointments should occur every 3 months to assess tolerance and adherence.

INJECTION PREP

Injection PrEP regimens require follow-up HIV testing at one month after initiation of treatment.

Patients will come in every 2 months (8 weeks) for injection, at which time they should have an HIV Ag/Ab, and HIV RNA and pregnancy testing if applicable.

Patients on injection PreP should also have STI testing at every other visit (every 4 months).

INSURANCE COVERAGE FOR PREP

Almost all private and public insurers cover PrEP. The US Department of Health and Human Services determined that the services associated with PrEP such as STI testing and clinic visits are included in this coverage.

Patients without prescription drug coverage can apply for assistance through readysetprep.hiv.gov.

For patients who have no insurance coverage or have coverage that does not cover PrEP, and meet certain income requirements, the drug manufacturer offers a medication assistance program to cover the cost of medications and HIV testing. A separate program assists with out-of-pocket costs or copays. Providers can apply for assistance for their patients at www.gileadadvancingaccess.com.

For more information, reach out to your Clinician Ambassadors at 210-602-5169.

YOUR CLINICIAN AMBASSADOR

Schedule an appointment
today!



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For health alerts from
Metro Health text
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COSA (1-844-824-2672)

Message and data rates
apply.

You can now self-schedule
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detailing sessions with the
Clinician Ambassador
team!

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