

# **MEDICAL AND DENTAL CHALLENGES IN RURAL AREAS**

By: Deena Matagulay

2/12/24

# AGENDA

- Discuss Current State of Dental and Medical Insurance Options in Rural Areas
- Desired Outcomes to Address Improvements:
  - Discuss challenges shared today with CalPERS
  - Work with someone to change laws – No surprise billing
  - Plan strategies for 1/4ly progress reports
  - Keep track of specifics in a shared tool
  - Did you recently receive a CalPERS Survey?
  - PEEGs Health & Safety Subcommittee Role
  - Share strategies today to save money now

Let's all admit, whether you have issues now or not, at some point in life, so certain as death and taxes, you or your family will need to pay for medical care.

Goals:

\*Discuss these challenges with CalPERS (Share history and positive experience I had with CalPERS.)

\*CalPERS recent survey (I received in the week of 2/2/24. Did you receive one? If not, we should request more be sent out.)

\*Work with someone to change laws - Some of the items we discuss today may be related to laws. Let's not a legal expert. These are the next steps to plan for.

\*Hope to get a few staff signed up to assist in this effort - to help plan for next steps, and make sure we are juggling every of the overall big picture, check in quarterly on general progress, and to get keepers in entering data for staff that are willing to share personal challenges.

## Brainstorm Steps Moving Forward for Improvement

# DENTAL

In our Rural Area, we have Delta Dental and Western Dental

Delta Dental:

- Class Action Lawsuit filed in San Francisco in Jan 2023
- Most dentists (likely all) are no longer taking Delta Dental in Redding Section area
- Western Dental: Supervisors pay \$136/month premium for family (\$1632/yr) and staff pay \$35/month for family
- Webpage out of date. Shows 2 providers. Just 1.
- Not accepting patients.
- New staff are required to have this plan for 2 years.

# MEDICAL

in our Rural Areas, it looks like on paper we have lots of options. **In reality, we do not.**

- Limited Providers – 2 of my staff ( 1 ½ - 2 yr wait for Primary Care Physician)
- Webpages are out of date and make it look like there are a lot of providers when in reality there are not.
- Hospitals/Urgent Cares out of network in the middle of the year, while they negotiate
- Anthem Blue Shield/Blue Cross – Recording while on hold – Is that Legal?
- Some doctors are transitioning to only taking cash, and having the employee pursue reimbursement billing directly with insurance.
- Costs associated with time and money are occurring for employees
- Staff retention issue

1. CPT – showed 8 to 13 just checked. 5 were accepting new patients.

2. Primary Care Physician – They called Anthem, but as web page. Web page not correct. Shows many doctors. Must call all doctors to see if they are accepting. An engineer recently has estimated approximately 16 hours trying to call and receive return calls, only to find out she is almost ready to give up. But she is holding out hope she finds 1.

3. At the year 1 PCC meeting with David Givens and MCO, we brought the mid year loss of providers due to negotiations mid year. They were not aware this was happening. In rural areas, there is no one to help with negotiations. In Redding, when one facility drops (i.e. negotiations between the hospital and health insurance) gives past deadline for reimbursement agreements, users receive a letter.

How many of you have received these letters?

In Redding, that reduces our access to care by 50%.

More doctors in our area shifting to having the individual bill insurance because the doctors are not getting paid. (I'm having a hard enough time with the support of Stanford, to get codes acknowledged, agreement on doctors and facilities in network for every bill... I can't imagine the new trend where individuals in the rural areas are going to have to start managing their own billing.

# MEDICAL

## OPEN ENROLLMENT CASE Study

1. CPT -- showed 8 to 13 just checked. 5 were accepting new patients.  
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3. At the year 1 PCC meeting with David Givens and MCO, we brought the mid year loss of providers due to negotiations mid year. They were not aware this was happening. In rural areas, there is no other hospital option. In Redding, when one facility drops (i.e. negotiations between the hospital and health insurers gives past deadline for reimbursement agreements, users receive a letter.)  
How many of you have received these letters?  
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## RESOURCES

- How do we collaborate to have the medical providers update lists to say “not taking patients”?
- Pay Cash in lieu of Insurance
- Healthcare Blue Book Tool <https://www.healthcarebluebook.com/explore-home/>
- Google Scholar <https://scholar.google.com/>
- CalPers Board
- PECG rep has access to CalPersBoard
- PECG Health & Safety Committee

## LEGAL ITEMS

- Definition of Qualifying Event to Switch Health Care – If your critical hospitals/providers drop mid year, no ability to switch health care. Bureaucratic and nearly impossible process in place.
- Anthem Blue Cross and Blue Shield – voice message when you call, “any info you get from us cannot be considered reliable, and you won’t know anything until you get the bill.” With the No Surprises Act of 2021, it only applies to emergency services. We need this applied to information provided by our health care providers.

*The No Surprises Act prohibits balance billing for emergency services and in instances where health care services are received from an out-of-network provider at an in-network facility for federally regulated health insurance products.*



**PRIMARY GOAL TODAY**



# **BRAINSTORM STEPS MOVING FORWARD FOR IMPROVEMENT – HOW DO WE GET THERE?**

- PEGC Benefits Committee to help organize thoughts/data?
- Create a support group to help Deena
- CalPers Board Meeting – seems a great next step
- RHIP?
- Communication Bulletin Boards to Share Tips and Hints
- Accept Up front Cash in lieu of Insurance is the New Normal or Use the Medical Blue Book?
- Time to Rethink Open Marketplace Benefit to Allow Employees to spend money on available plans?

(Deena's history of when she last spoke at the CalPers Board Meeting)

# IN REVIEW

- Discussed Current State of Dental and Medical Insurance Options in Rural Areas
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## Brainstorm Steps Moving Forward for Improvement

# SUMMARY

This is an issue that we need to start working on to address.

We could use some help with a subcommittee

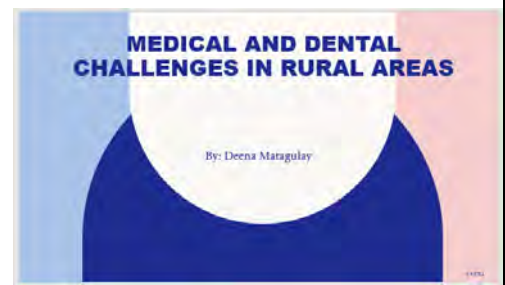


# **THANK YOU**

Deena Matagulay

[Deena.Matagulay@dot.ca.gov](mailto:Deena.Matagulay@dot.ca.gov)

- Open Enrollment – Case Study
- Demo of a Few Helpful Tools to Save Money



## Open Enrollment - Case Study

We received a letter from Stanford before Open Enrollment stating they were dropping Anthem Blue Cross Pers Gold effective Jan 1, 2024.

So we needed to start researching new plans....

➤ Luckily, negotiations for Anthem Blue Cross Pers Gold for Stanford had been completed before Open Enrollment.

➤ What are our options?

➤ Switch Health Care Plan

Pers Platinum \$1179/month, versus \$252 for PERS Gold...  
or what other plan choices?

➤ Switch Doctors/Hospitals

Many rural employees use UC or Stanford.

Problem: UC contract was in negotiations during open enrollment.

*Can I make a choice and assume UC will remain in network? Risk Management?*



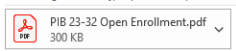
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➤ Luckily, negotiations for Anthem Blue Cross Pers Gold for Stanford had been completed before Open Enrollment.

➤ What are our options? Switch Health Care, Switch Doctors/Hospitals .....As difficult and very disruptive as it would be for my son's many doctors and medications... We had to choose with switching health care plans (big unknown) or doctors. So we began the research journey. Maybe we can keep our insurance and use UC Hospitals? (Only to find out from a friend that UC would be starting negotiations or were in negotiations, and they wouldn't be done with negotiations until Dec 31.

Therefore you would not know if UC was going to be viable until after Open Enrollment.



Search for your primary care doctor and specialist using the **Search Health Plans** tool in [Health Plan Search by ZIP Code - CalPERS](#) to see which plans they participate in. Medicare members will need to contact the plans directly, as they do today, to verify their doctor is included in their Medicare plan. Keep in mind that information shown in the tool is subject to change. Therefore, before making any plan changes, check with your health plan or your doctor's office to ensure your doctor is available in your plan.



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Retirement Benefits

Health Benefits

Death Benefits

Home > Active Members > Health Benefits > Plans & Rates > Health Plan Search by ZIP Code

## Health Plan Search by ZIP Code

### Terms of Use

You may include a doctor or medical group in your search. Results are based on the ZIP code, mile radius, and coverage you choose.

You can search for doctors in the United States. If the doctor you search for isn't listed, contact the doctor or health plan to confirm availability.

You can search for medical groups in California for basic health plans only. For information on how medical groups work with certain Medicare plans, contact the health plan directly. If the medical group you search for isn't listed, contact the health plan to confirm availability.

Searching for a doctor or medical group doesn't automatically assign you to that doctor or medical group. Information is subject to change. Contact the doctor or health plan to confirm availability before making any plan changes.

By accepting, you're agreeing to the Terms of Use.

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Home > Active Members > Health Benefits > Plans & Rates > Health Plan Search by ZIP Code

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Accept

## Health Plan Search by ZIP Code

You may use this tool to find CalPERS health plans available in your area.

To find monthly premiums for each health plan and get side-by-side benefit comparisons, log in to myCalPERS and use **Search Health Plans**.

### Search Criteria

**ZIP Code** (required)

96003

**Plan Year**

2024

**Member Type** (required) [What's a Member Type?](#)

- State or CSU
- Public Agency or School

**Are you a member of an Association?** (required) [What's an Association??](#)

- Yes
- No

**Health Coverage Type** (required)

- Basic Plans [What's a Basic Plan?](#)
- Medicare Plans [What's a Medicare Plan?](#)
- Combination Plans [What's a Combination Plan??](#)
- All Plans

Search for Health Plans

## Search for a Doctor or Medical Group

Do you want to include a doctor or medical group in your search? *(required)*

- Yes, search for a doctor
- Yes, search for a medical group
- No, continue to health plan results

[Continue](#)

[Edit Search Criteria](#)

## Search Results

### Health Plan Availability

- There are no HMO plans available in this area.

 Print

The following health plans are available in the service area of the ZIP code and Member Type you selected.

EPO Plans [What's an EPO Plan?](#)

Basic Plans

- [Blue Shield Access+ !\[\]\(13dd0e1ab3baa23f7c1ed52b3eec2756\_img.jpg\)](#)

PPO Plans [What's a PPO Plan?](#)

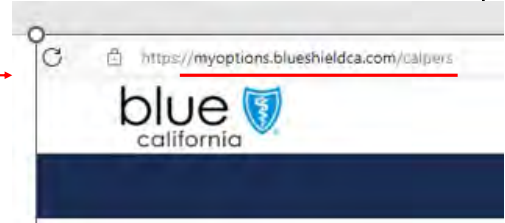
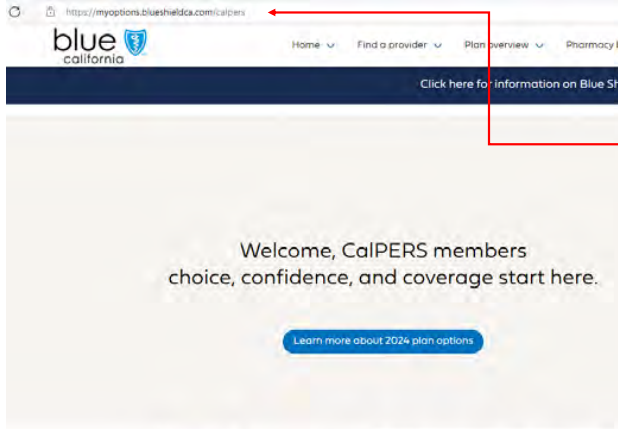
Basic Plans

- [PERS Gold !\[\]\(9bfa69b6b0f097b09744337d04f22d78\_img.jpg\)](#)
- [PERS Platinum !\[\]\(7d26c345cabf494d35782f002b741ce9\_img.jpg\)](#)

Have Questions or Need to Make Changes?

- If you're an **active member**, contact your health benefits officer or personnel office.
- If you're a **retired member**, call us at **888 CalPERS** (or 888-225-7377).

Search Results Below by Zip Code:



Contact us

**Non-Medicare Plans**  
[\(800\) 334-5847 \(TTY 711\)](#)  
7 a.m. to 8 p.m., seven days a week

**Medicare Plans**  
[\(888\) 802-6599 \(TTY 711\)](#)  
7 a.m. to 8 p.m., seven days a week

Watch our interactive video to help you:

Our interactive video will help you to:

- Compare plans quickly
- Find network doctors
- Explore wellness programs and more

[Access HMO and Trio HMO interactive video](#)

[Blue Shield EPO interactive video](#)

Upon contact with Blue Shield:

1. The top one was available in Shasta County
2. They couldn't find the second one

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1. The top one was available in Shasta County
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Recall the previous search that stated no HMOs in our area, but then:

1. The search results above show it is available by zip code?
2. And Blue Shield confirmed it was available in our area?

Search Results

**Health Plan Availability**

- There are no HMO plans available in this area.

The following health plans are available in the service area of the ZIP code and Member Type you selected.

EPO Plans [What's an EPO Plan?](#)

Basic Plans

- Blue Shield Access+

PPO Plans [What's a PPO Plan?](#)

Basic Plans

- PERS Gold
- PERS Platinum

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Search Results Below by Zip Code:

Is Anyone Confused Yet?

I now pursue the well known Ground Rules for Open Enrollment for all Medical Plans – It is on the employee to check with both the medical facilities/doctors and with the health insurance to determine network availability.

Details get further confusing as I talk to hospitals and doctors.

My CalPers portal state identified Blue Shield EPO, but Blue Shield stated no. All the way until several weeks after open enrollment closed.

In that time period, many contacts with CalPers and HealthCare Plans obtaining misinformation about availability, who or how to further elevate and ultimately misinformation that would have cost my family \$10,000 dollars in premiums for the year.



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2. And Blue Shield confirmed it was available in our area?

EPO Plans [What's an EPO Plan?](#)

Basic Plans

- Blue Shield Access+<sup>®</sup>

PPO Plans [What's a PPO Plan?](#)

Basic Plans

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My CalPers portal state identified Blue Shield EPO, but Blue Shield stated no. All the way until several weeks after open enrollment closed.

Ground Rules for Open Enrollment for all Medical Plans – It is on the employee to check with both the medical facilities/doctors and with the health insurance to determine network availability.

1. So now I start calling doctors first to make sure they take the insurance, and then plan on calling

**Contact us**

**Non-Medicare Plans**

[800.334.5847 \(TTY 711\)](tel:8003345847)

7 a.m. to 8 p.m., seven days a week

**Medicare Plans**

[888.807.4529 \(TTY 711\)](tel:8888074529)

7 a.m. to 8 p.m., seven days a week

**Watch our interactive video to help you:**

Our interactive video will help you to:

- Compare plans quickly
- Find network doctors
- Explore wellness programs and more

[Access HMO and Trio HMO interactive video](#)

[Blue Shield EPO interactive video](#)

Upon researching doctors (calling both doctors, and blue shield as advised)

1. The top plan was available in our area, but not usable due to primary care physician rules (closest available Chico, outside their rules of allowance.)
2. They still couldn't find the second one





https://myoptions.blueshieldca.com/calpers

blue  
california

Home Find a provider Plan overview Pharmacy

Click here for information on Blue Shield of California

Welcome, CalPERS members  
choice, confidence, and coverage start here.

Learn more about 2024 plan options

**Contact us**

**Non-Medicare Plans**  
[\(800\) 334-5847 \(TTY 711\)](#)  
7 a.m. to 8 p.m., seven days a week

**Medicare Plans**  
[\(888\) 807-4589 \(TTY 711\)](#)  
7 a.m. to 8 p.m., seven days a week

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[Access+ HMO and Trio HMO interactive video](#)

[Blue Shield EPO interactive video](#)

Many phone calls by myself, personnel, and CalPERS resulted at first in this not being an option. It could not be found in the Blue Shield system.

This occurs to me this is too scary to switch health care plans at this point.... So

What happens when your medical facility gets dropped?....

In rural areas, there are not a lot of medical options. In Redding, when one facility drops (i.e. negotiations between the hospital and health insurances goes past deadlines for reimbursement agreements, users receive a letter.)

## What happens when your medical facility gets dropped....

### Does this impact Anthem members who are being treated for ongoing conditions or other long-term conditions at UC Health facilities?

There is no immediate impact to those currently receiving care or who have preauthorized services through UC Health. By state law, health contract terminations must provide for **continuity of care**. This means members with certain specified conditions — those who are pregnant or with a newborn, individuals with chronic conditions, significant mental health issues, and those undergoing treatment for a potentially terminal illness, for example — will continue to be able to see their current providers in-network for the time specified by the continuity of care provisions under state law.



## This Website is Temporarily Down

### Independent Medical Review & Consumer Complaints

The online Independent Medical Review and consumer complaint form is not available during this time. However, if you are experiencing an urgent issue please contact the DMHC Help Center at 1-888-466-2219 for assistance. For all non-urgent issues, website services including the online Independent Medical Review and consumer complaint form will be available again soon.

### Health Plans or Other Filers

If you are a health plan or other organization that files information with the DMHC, please note that all web portals accessible from this website are down.

Thank you for your continued patience and understanding. The DMHC website should be available again soon.

## Continuity of Care

### If Your Doctor, Medical Group, or Hospital Leaves Your Health Plan

You may receive a notice that your doctor, medical group, or hospital is no longer in your health plan.

Usually this means that you must change doctors, medical groups, or hospitals. But in some cases, you may be able to keep your doctor, medical group, or hospital for a limited time. This is called "continuity of care."

To receive continuity of care, you must call your health plan to ask for continuity of care. Also, your doctor, medical group, or hospital must agree to keep you as a patient.

#### Only people with certain kinds of health problems or conditions can get continuity of care:

Type of Problem or Condition	How long you get continuity of care
Acute Condition (for example, pneumonia)	As long as the condition lasts
Serious Chronic Condition (for example, severe diabetes or heart disease)	No more than 12 months – usually until you complete a period of treatment, and your doctor can safely transfer your care to another doctor
Pregnancy	During Pregnancy and immediately after the delivery (the post-partum period)
Terminal Illness	As long as the person lives
Care of a Child under 3 years	For up to 12 months
An already scheduled surgery or other procedure (for example, knee surgery or colonoscopy)	The surgery or procedure must be scheduled to happen within 180 days of your doctor or hospital leaving your health plan

### **If Your Health Plan Changes and You Lose Your Doctor, Medical Group, or Hospital**

You may also qualify for continuity of care if your health plan changes, and you are required to switch to a new plan. This is called "new enrollee" continuity of care. The rules are the same as the rules described above.

- Continuity of care is available if you get your health plan from your employer, your employer stops offering that plan and you have to change to a plan that does not have your treating doctor, medical group, or hospital.
- Continuity of care is available if you buy your own individual health plan (either through Covered California or directly from the plan) and you have to change plans because your individual health plan is no longer available in the marketplace.

Check with your health plan to find out if you qualify for continuity of care. Tell them the name of your doctor, medical group, or hospital, your medical condition, and the treatments you are receiving. If you have problems asking for continuity of care or have any other questions, please call the Department's Help Center at [1-888-466-2219](tel:1-888-466-2219).

If Anthem and UC Health System reach agreement and I changed to a different health plan during 2023 Open Enrollment, am I able to change back to Anthem?

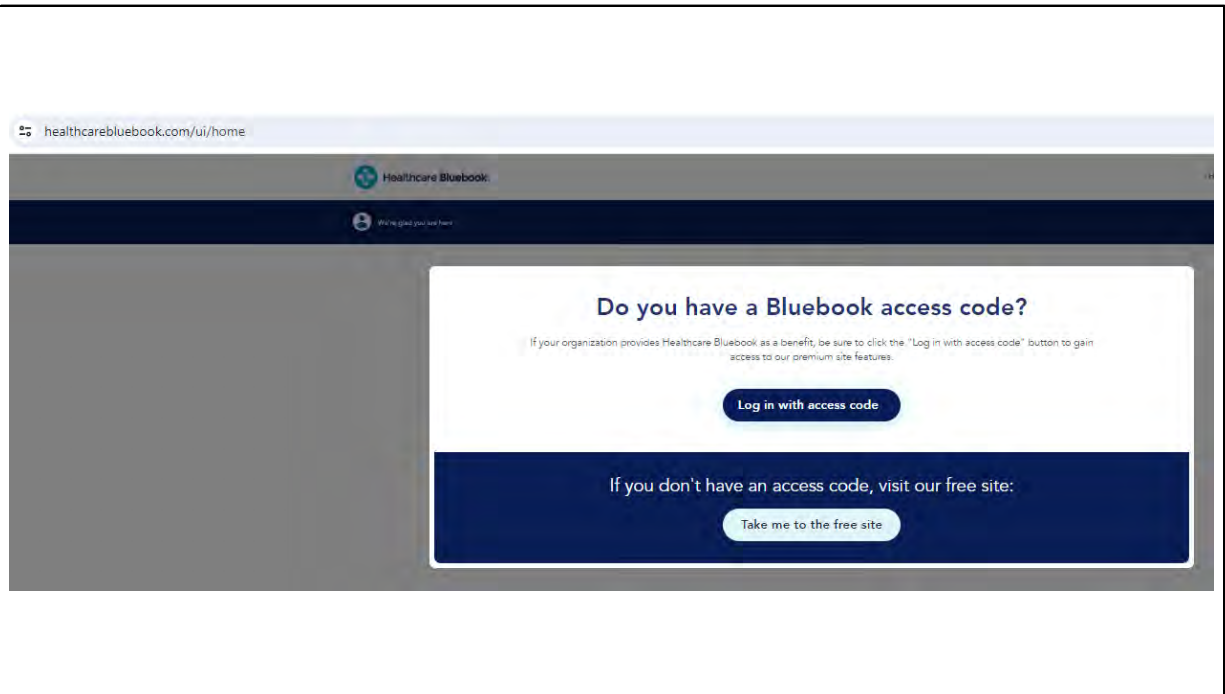
No, changes to a plan's network are not a qualifying event to change your health plan.

## Is the termination considered a qualifying event, allowing CalPERS members to change health plans?

No, contract terminations are not considered a qualifying event to change health plans. Members would not be able to change health plans because of a termination.



## Demo of a Few Helpful Tools





We're glad you are here

Home

### Please register for a personalized account

By registering for a free account, you can access Bluebook's free site and complete up to 10 searches per month (searches reset on the 1st of the following month).

Deena,  
See how Healthcare Bluebook can help you save on  
medical costs:



On average, members who use Healthcare Bluebook to shop  
for care save **\$792** on their medical procedures.

Common Searches

[Colonoscopy No Biopsy](#)

[Total Knee Replacement](#)

[Knee MRI No Contrast](#)

[Office Visit 15 Minutes](#)

## Shopping for Care

**SEARCH SERVICES**



Search by City or State

**Colonoscopy (no biopsy)**

Fair Price **\$1,795**

The Fair Price™ for Colonoscopy (no biopsy) is \$1,795

\$1,008 **\$1,795** \$2,871+

Facilities • Physicians • Anesthesia • SED

**Facilities**

**Additional search results may be available with Bluebook's premium product for employers.**

**Ways to Save**

Colonoscopy pricing can vary significantly. It's not uncommon to find colonoscopy pricing below \$1,000 or above \$3,000. Make sure the price of your colonoscopy covers physician, facility, and anesthesia.

Q knee mri

Redding,

**Procedures (3)**

Knee MRI (no contrast)

Knee MRI (with and without contrast)

Knee MRI (with contrast)

**Knee MRI (no contrast)**

The Fair Price™ for Knee MRI (no contrast) is \$643 in your area.



**Ways to Save**

Prices for MRI and CT scans have some of the greatest price variances in healthcare. The most important factor impacting the cost of your care will be which facility you use. Some imaging centers charge three to five times more than other centers. Hospitals are usually the most expensive, and "free-standing" (non-hospital) centers are usually less expensive.

<https://scholar.google.com/>

Google Scholar

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**Tonsillectomy** Outcomes in Children After Solid-Organ **Transplantation**: A 15-Year Single-Center Experience

I Hazkani, N Hajnas, M Victor, E Stein ... - Head and Neck ..., 2023 - Wiley Online Library  
... Almost all patients were treated with **tacrolimus**, and 38/52 were treated with mycophenolate ... Following organ **transplantation**, EBV **infection** leads to uncontrolled B-cell proliferation that ...  
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... COVID-19 **infection**, confirmed by PCR testing, with symptoms of **sore throat** and fatigue. He ... authorization by another physician with no adjustment to his **tacrolimus** dose. He notified the ...  
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