Washington Health Alliance Consumer Education Committee Meeting January 20, 2022

SUMMARY NOTES

Location: Remote

Committee Members in Attendance: Van Chaudhari, University of Washington, Committee Chair

Michelle George, Washington State Health Care Authority

Sarah Greene, Strategy Consultant and Advisor

Milana McLead, Washington State Medical Association

Andrew Radolf, Retired, UNESCO

Sherry Reynolds, Center 4 Health Innovation

Dayna Weatherly, Proliance Surgeons

Committee Members Not in Attendance: Gloria Brigham, Washington State Nurses Association

Sondra Earley, Earley Insurance Solutions

Michael Garrett, Mercer

Nancy Kokenge, Gallagher Benefit Services

Carolyn Martin, Network of the National Libraries of

Medicine

Matt Munson, King County

Guests/Staff: Megan Aukema, Aukema and Associates

Teresa Battels, Washington Health Alliance Leslie Bennett, Washington Health Alliance Sharon Eloranta, Washington Health Alliance Denise Giambalvo, Washington Health Alliance Nancy Giunto, Washington Health Alliance

After welcoming members and introductions, including new Alliance staff Denise Giambalvo, Director of Purchaser Strategies, who started this week and Teresa Battels, Project Coordinator for the Low Back Pain Implementation Collaborative, we reviewed the agenda.

A motion to adopt the minutes from our November 18th meeting was made and seconded. We started with comprehensive review of our accomplishments over the last year, including:

- Updates to the Own Your Health website, including articles, pictures, and updated infographic. There were several recommendations to revise the phrasing on the Own Your Health badges, that seem to be confusing since they are targeted at partners (purchasers) rather than consumers and to focus on getting more usage of the website by purchasers so that their members have more access to it.
- For Community Checkup, we created an instructional video, modified our instructions to help users navigate it, and updated visuals.
- For the Alliance website, we added our DEI statement and included our resource list by stakeholder group.

- A look at all of the analytics for all of the websites. Suggestions were made that we focus on traffic and where it's coming from and align usage with our stated goal. Comments suggested that the usage of the websites is low and that it would be helpful to do more analysis of audience usage and the purpose of the Own Your Health site, in addition to prioritizing mobile usage. It may be time to consider whether it's time for a re-boot. Support was expressed to get the consumer messaging created early. Focusing on a partner campaign would be helpful. Public outreach is a bit beyond the Alliance's resources, but it would be good to put effort into increasing the utilization of Own Your Health for Alliance members rather than putting our limited resources into content. Developing a goal and strategy for this is important as well as to improve collaboration between the CEC and the Purchaser Affinity Group to improve utilization.
- The Board Opioid Impact Project focused on opioid prescribing for acute low back pain and dental pain and the guidance directed at opioid prescribing for adolescents. A suggestion was made to have a framework for developing materials for other committees, a template or best practices would be useful and there was support for that idea, the CEC could also support messaging for other committees, and work as a sounding board for consumer messages.
- Reviewing the responses from the survey conducted last year, suggestions included:
 - o more coordination between CEC and broader work of the Alliance
 - o consider tailoring engagement opportunities such as training for members who need more assistance, such as "How do you use the Community Checkup?"
 - o incorporating needs of Alliance members in material production and dissemination
 - o focusing and increasing work on health equity
 - o more outreach to under-served communities
 - o providing an open forum for feedback

We reviewed our focus for the next year, including a look at the annual plan goals:

- Purchaser Affinity Group (PAG) Priorities; we will be looking for opportunities to support the PAG throughout the year, equity and social determinants of health.
- Diversity, Equity, and Inclusion; efforts are underway to utilize the Neighborhood Atlas to report on Social Determinants of Health with the Community Checkup.
- Framework for Action Series being held on January 27th co-sponsored with Bree Collaborative
 and some experience that some organizations have had with working on SDOH. This webcast
 was recommended to the group: https://healthleadsusa.org/communications-center/past-events/beyond-do-no-harm-elevating-bipoc-voices-in-sdoh-interventions/ as well as
 https://www.qualityhealth.org/bree/.

Sharon Eloranta provided a summary of the Low Back Pain Implementation Collaborative, supported by Arnold Ventures. Purchasers involved in the Driving Value project identified low back pain as an area to focus on to reduce low value care and increase high value care. The effort already has 27 participants, including purchasers, commercial insurance plans, large provider groups, Washington Health Benefit Exchange, Washington State Dept. of Labor and Industries, and America Physical Therapy Association. They have provided signed letters of agreement, a pre-survey has been distributed to all participants, it will launch on 2/3. The expectation is that true action will be taken with changes across the system with the hope that it can be taken action. The objectives for that project are:

- Reduce low-value care, such as advanced imaging, unnecessary surgeries, opioids
- Evaluate network adequacy
- Increase value-based benefit design and payment models

- Reduce obstacles and increase incentives for high-value care
- Ensure equitable access, there was a question in the chat about what this means for the project

We discussed an application that the Alliance was submitted to the ABIM Foundation to address misinformation relating to low back pain to develop messaging for purchasers, plans, providers, and consumers building on the Low Back PIC. A suggestion was made to think about whether the additional funding could help support an Own Your Health re-boot by utilizing the partner pages to provide resources to the different stakeholder groups. We discussed working with the Bree Collaborative on the low back issue and it is an affiliate organization of the project.

For reporting:

- We will be releasing the Total Cost of Care by county/ACH with allowed charges
- o Following that will be a report on the Total Cost of Care by medical group/clinic
- For the 16th Community Checkup, there will be 3 new HEDIS measures
 (https://www.ncqa.org/hedis/measures/prenatal-and-postpartum-care-ppc/,
 - High dosage opioids (prescription for > 15 days > 90 mg)
 - Prenatal care (prenatal visit in the first trimester)
 - Postpartum care (visit between 7 and 84 days after delivery)-this suggestion was added in the chat for more information from NCQA on prenatal and postpartum care.
- There are plans to add cost to Quality Composite Score
- o We will also be using ADI with the Community Checkup

For Own Your Health, we reviewed two new articles, one on COVID-19 and one on Total Cost of Care.

- Caring for Someone with COVID-19
- Have you come into contact with COVID-19?

Proposed article pictures were reviewed and we discussed adding pictures of people getting vaccinated and self-testing. A suggestion for where people can get answers for concerns about vaccinations. A question was raised about whether we should be the provider of the message and whether it is appropriate for providing this type of communication and whether it's duplicative.

A question was raised about what the parameters are for the website. For example:

- What are people looking for that they can't get elsewhere?
- How can our brand be a resource for consumers?
- Is it anticipating what's next or amplifying what's out there?
- What are we trying to do?
- How do we teach people how to find valid COVID resources, amplifying the good resources?
- Where are people getting COVID information from?

Comments included that we are a one-stop shop and if they come to the Alliance, they arrive at a landing page that provides resources. We can provide links to good information and let them keep up to date on how to find valid sources of COVID information. Suggestion was made not to link to media, but to government sources. We should be focused on public health resources since it changes so quickly. A question was raised about whether Own Your Health is for consumers or purchasers and how we can link consumers to Own Your Health through purchasers as a focus of our work over the next year.

We discussed the summary slides for brokers that focus on Alliance reports, a very high level and general overview, including the Quality Composite Score, First, Do No Harm, and inpatient price variation to identify high quality health care. Comments included how these slides would be used by brokers in front of employees, using carrier's information, quality, focusing on MRIs, for example, and directing them to the broker to assist.

We discussed the next Community Checkup due out in March and proposed an idea to look at HEDIS results and work with the QIC and PAG to identify a measure to work on to help make improvements across stakeholders. We reviewed performance for chlamydia screening and well-child visits in the first 15 months, looking at both the commercially and Medicaid insured.

The QIC will next meet in February.

Among the follow-ups:

- 1. Communications framework discussion
- 2. Revisiting Own Your Health to determine its goal and focus, reinvigorating partner pages with purchasers, revising badges
- 3. PAG priorities alignment
- 4. Measure focus with QIC & PAG
- 5. Low Back PIC equity & communication