

# **Quality Improvement Committee**

Thursday, June 9, 2016

### **MEETING SUMMARY**

Committee Members Present: Lydia Bartholomew, Aetna (phone)

David Buchholz, Premera Blue Cross

Christopher Dale, Swedish Health Services

Nancy Fisher, Centers for Medicare & Medicaid Services (phone)

Bruce Gregg, MultiCare Health System (phone)

Dan Kent, UnitedHealthcare

Scott Kronlund, Northwest Physicians Network

Pat Kulpa, Regence Blue Shield

Dan Lessler, WA State Health Care Authority (phone) Bob Mecklenburg, Virginia Mason Medical Center

Randal Moseley, Confluence Health (phone)

Michelle Matin, Polyclinic

Kim Orchard, CHI Franciscan Health System Jonathan Sugarman, Qualis Health (phone)

Lynette Wachholz, The Everett Clinic

**Committee Members Absent:** Peter McGough, *UW Medicine (Chair)* 

Matt Handley, Group Health Cooperative

Gary Knox, Rockwood Clinic John Sobeck, Cigna Health Care

Terry Rogers, Foundation for Health Care Quality

Hugh Straley, The Bree Collaborative

Staff and Guests Present: Gary Franklin, UW and WA State Department of Labor and

*Industries* 

Laurie Kavanagh, Washington Health Alliance

Mary Kemhus, *Novartis* Cecilia Manyari, *Swedish* 

Amy Ven for John Sobeck, Cigna Health Care



## INTRODUCTIONS AND APPROVAL OF MEETING MINUTES

Laurie Kavanagh welcomed everyone. The QIC members reviewed the May 2016 meeting summary, which was approved as presented.

ACTION: Approval of May 2016 meeting summary

The majority of the meeting was devoted to Dr. Gary Franklin's presentation and a discussion of the Washington State Agency Medical Directors' Group's (AMDG) "Interagency Guideline on Prescribing Opioids for Pain." These guidelines, first issued in 2007 and updated in 2010 and 2015, encourage physicians to prescribe opioids more conservatively and at significantly lower doses.

The Alliance solicited the Quality Improvement Committee's guidance regarding how to best implement the guidelines into practice culture. The Committee had a very engaged discussion around the role of the QIC in this serious public health problem and how to take action in their practices, plans and in the public sphere. The Committee had numerous suggestions including:

- QIC issues a call to action to reduce opioid prescribing in Washington State relying on both the 2015 AMDG guidelines and the recently published 2016 CDC guidelines. Suggestions included:
  - Launch a "Save our Kids" campaign
    - Reduce inappropriate acute prescribing in teens
    - Limit the number of opioid prescriptions to more than 3 days or 10 pills particularly in self limited pain situations such as after third molar extraction or after sports-related injuries
  - Bree Collaborative:
    - Recommend opioid prescribing metrics and distribute for public comment
    - Once measures are finalized, propose adding measures to the WA State
      Common Measure Set
    - Engage the Dental Commission and Delta Dental to join the call to action and reduce the number and dosage of pills prescribed for teens
  - Washington Health Alliance and Bree Collaborative co-author a white paper with a call to action to reduce opioid prescribing in Washington
    - Drs. Gary Franklin and Bob Mecklenburg to take the lead; Alliance communication staff to help finalize
  - Health Plans
    - Use provider contracting to drive compliance with opioid prescribing guidelines
    - Consider pre-authorization for first time opioid prescriptions for prescriptions exceeding 3 days
    - Formally endorse white paper to reduce opioid prescribing
    - Include link to the white paper in newsletters geared toward providers and members
  - Providers



- Utilize hard-stops in EHR so that providers cannot write prescriptions for more than the AMDG's limit of 120mg/day
- Reduce inappropriate acute opioid prescriptions for teens
  - Limited to no more than 3 days or 10 pills
  - Implement hard stops in EMR and/or prior-authorization for four or more days acute prescriptions
- Register for and use the Prescription Drug Monitoring Program (PDMP)
  - Allows providers to see every source from which the patient has been dispensed a prescription opioid in near real time
- Formally endorse white paper to reduce opioid prescribing
- Engage state medical associations and boards in call to action
- Include link to the white paper in newsletters geared toward providers

### Purchasers

- Formally endorse white paper to reduce opioid prescribing
- Include link to the white paper in newsletters geared toward employees
- Collaborate with health plans to use provider contracting to drive compliance with opioid prescribing guidelines
- Washington Health Alliance
  - Collaborate with Drs. Franklin and Mecklenburg to write paper calling to reduce opioid prescribing in Washington
  - Broadly disseminate white paper
  - Publish data on opioid prescribing in Washington state
    - Use the Community Checkup as one platform to disseminate information
- o If resources are available:
  - Purchase a full-page ad in local newspaper

# **UPCOMING QIC MEETINGS**

- July 14, 2:00-4:00 pm at the Alliance
- September 8, 2:00-4:00 pm at the Alliance