

# **Quality Improvement Committee (QIC)**

Thursday, October 13, 2016

#### **MEETING SUMMARY**

Committee Members Present: Kim Orchard, CHI Franciscan Health System (Chair)

Lydia Bartholomew, Aetna (phone)

Christopher Dale, Swedish Health Services

Peter Dunbar, Foundation for Health Care Quality

Matt Handley, Group Health Cooperative

Dan Kent, UnitedHealthcare

Gary Knox, Rockwood Clinic (phone)

Scott Kronlund, Northwest Physicians Network (phone)

Pat Kulpa, Regence Blue Shield (phone)
Dan Lessler, WA State Health Care Authority

Michelle Matin, Polyclinic

Peter McGough, UW Medicine (phone)

Bob Mecklenburg, Virginia Mason Medical Center (phone)

Randal Moseley, Confluence Health

Terry Rogers, retired

John Sobeck, Cigna Health Care (phone)
Hugh Straley, The Bree Collaborative
Jonathan Sugarman, Qualis Health (phone)
Lynette Wachholz, The Everett Clinic

Committee Members Absent: David Buchholz, Premera Blue Cross

Nancy Fisher, Centers for Medicare & Medicaid Services

Frances Gough, Molina Health Care
Bruce Gregg, MultiCare Health System

Staff and Guests Present: Nancy Giunto, Washington Health Alliance

Emily Inlow-Hood, Washington Health Alliance Laurie Kavanagh, Washington Health Alliance

Janet Piehl, UW Medicine



#### INTRODUCTIONS AND APPROVAL OF MEETING MINUTES

Kim Orchard opened the meeting by welcoming everyone, especially new members Dr. Peter Dunbar and Dr. Frances Gough. A motion was made to approve the September 2016 meeting summary as presented and to endorse potential new member Dr. Janet Piehl, Associate Medical Director for Clinical Quality, UW Neighborhood Clinics.

 ACTION: Approval of September 2016 meeting summary and endorsement of Dr. Janet Piehl as a new member.

## UPDATE ON THE CALL TO ACTION TO REDUCE PRESCRIBING OF OPIOIDS

Ms. Kavanagh provided a status update on elements of the QIC's communication strategy to reduce opioid prescribing. The Robert Bree Collaborative will partner with the QIC on the call to action. Drs. Gary Franklin (L&I) and David Tauben (UW) will serve as content experts, reviewing all communication pieces for medical accuracy. QIC members Dr. Chris Dale, Swedish Health Services and Dr. Terry Rogers, ex- officio, volunteered for a joint work group with members from the Alliance Consumer Engagement Committee (CEC) to ensure alignment on messaging to the general public. Members approved language suggested by Dr. Tauben to not co-prescribe benzodiazepines and prescription opioids and suggested that communication pieces also include language to not co-prescribing muscle relaxants and prescription opioids.

Given the number of local organizations working on this topic, the QIC would like to see engagement with the Dental Community and suggested collaboration with the WSMA-WSHA Joint Task Force and to find commonalities in messaging across efforts.

## TAILORING A MACRA PRESENTATION TO THE QIC

Dr. Nancy Fisher, CMO, Centers for Medicare & Medicaid Services, Region 10 has generously offered to present on MACRA at the QIC meeting on December 8. Members would appreciate a presentation that dives under the hood into specific topic areas, summarized below:

- 1. Please provide guidance as to how health systems might improve their EHR in a way that would be more clinically useful.
- 2. What is known about how institutions are preparing for this change, including barriers and enablers?
- 3. Describe CMS' rationale behind the legislation including:
  - O What didn't make it in?
  - o What direction is CMS going?
- 4. How will MACRA help to move health systems to value based payment (VBP)?
- 5. How will MACRA impact rural communities and small practices?
- 6. In implementing MACRA, what is CMS doing to address provider transformation fatigue?
- 7. What will be the impact of a proliferation of qualified clinical data repositories (QCDR)?



#### **PLANNING FOR 2017**

Ms. Orchard led members in a discussion about potential areas for QIC focus in 2017. There was a strong push from members for the Committee to focus on meaningful impact and changing practice in Washington state. Two specific topic areas garnered the most discussion: reducing opioid prescribing and increasing immunization rates. The two topics lend themselves to future discussion, including those noted below:

- 1. Reducing opioid prescribing
  - a. How might QIC member organizations use the existing variation in opioid prescribing across the state to improve tracking of prescriptions by provider and dentists?
- 2. Increasing immunization rates
  - a. How might QIC member organizations focus on increasing immunization rates of pediatrics, adolescents and adults against flu, meningitis, pneumonia, varicella-zoster?
  - b. How might QIC member organizations help to increase use of the Washington State Immunization Information System (WAIIS)?

QIC member organizations are asked to share with the Committee their top five ambulatory priorities for 2017, with two goals in mind: 1) using them to learn from each other and 2) discussing ways in which the QIC may support areas of common efforts. A few member organizations started the conversation by sharing their topics. In comparing these with the priorities provided at the December 2015 QIC meeting, similarities exist over the year and across organizations including care coordination, depression management and better integrating behavioral health into primary care.

Dr. Dan Lessler shared information about the Washington State Health Care Authority's (HCA) tentative agreement with the Centers for Medicare & Medicaid Services (CMS) for a five-year demonstration waiver. This demonstration project would allow up to \$1.5 billion of federal investment to help drive Medicaid transformation. It includes three initiatives aimed at improving how HCA cares for individuals by providing support to providers—so they can better address local health priorities, deliver quality cost-effective care that treats the whole person, and create critical linkages between clinical and community-based services.

## **ACTION:**

- QIC members will continue to submit to Ms. Kavanagh questions they would like addressed during the MACRA presentation at the next QIC meeting on December 8
- QIC members will submit to Ms. Kavanagh their organization's top five quality priorities for ambulatory care for 2017

### **UPCOMING QIC MEETING**

• December 8, 2:00-4:00 pm at the Alliance

NOTE: There is no QIC meeting in November



## Tentative 2017 meeting dates, 2:00 – 4:00pm

January 12

February 9

March 9

April 13

May 11

June 8

July 13

September 14

October 12

December 14