

Meeting Summary

Thursday, June 9, 2022 (Meeting held virtually)

Members Present: Steve Jacobson, Premera (Chair)
Rick Hourigan, Cigna (Vice-Chair)
Mary Anderson, The Polyclinic
Caryn Avery, KPWA
Lydia Bartholomew, Aetna
Edwin Carmack, Confluence Health
Kavita Chawla, Virginia Mason Franciscan Health
Frances Gough, Molina Healthcare
Jennifer Graves, KPWA
Matt Jaffy, UW Neighborhood Clinics
Dan Lessler, Comagine
Cat Mazzawy, WSHA
Drew Oliveira, Regence
Komal Patil-Sisodia, Evergreen Health
Wayne Rawlins, WellSpark Health
Jeanne Robinson, KPNW
Michael Shannon, Multicare
Dayna Weatherly-Wilson, Proliance Surgeons

Guests: Amy Florence, Premera
Dan Monahan, Novartis
Shirley Quach, Novartis

Staff Present: Teresa Battels, Sharon Eloranta, Denise Giambalvo, Nancy Giunto, Mark Pregler, Jim Andrianos

Introductions, approval of meeting minutes

Members introduced themselves and we welcomed our guests; reviewed agenda.

Actions

The QIC meeting summary from April 2022 was approved with no changes; the committee also approved the advancement of three prospective QIC members: Michael Menen, Jeanne Robinson, and Michael Shannon, to the Board for final approval.

Diversity, Equity and Inclusion: building our culture

Sharon and Denise discussed the WHA-sponsored director's cut of the documentary film, *Between the Shades*, to be shown 6/25/2022 free of charge to registrants. The film involves the LGBTQ+ community's experience with labeling, and the mental health challenges affecting the community. We thanked the QIC organizations that are sponsoring the event and encouraged the committee to attend and to share the poster/QR code with others in their organizations.

Update from QIC Chair and Co-chair

Steve Jacobson and Rick Hourigan are holding one-on-one conversations with QIC members. The calls are going well; high level summary thus far includes: the members are a great group who find the work of the WHA and the QIC valuable; there is interest in improving quality in home organizations and in communities; they see the value in getting together and may be interested in longer meetings twice a year in order to have in-depth opportunities to do work.

Community Checkup Measures Discussion

Sharon reviewed the QIC's prior conversation regarding Community Checkup measures for which statewide WHA performance has fallen below the national NCQA 25th percentile over several years – and our intent to determine what can be done to improve. A set of four metrics (HbA1c testing, cervical cancer screening, chlamydia screening and well-child visits between 0 - 15 months) was identified and results shown to the group along with comparisons to national 90th percentile.

Comments/discussion included general agreement that this is a good set of metrics; that telehealth during COVID may have had an impact on the screenings; there are likely equity aspects for all of these issues including misinformation about vaccines in some regions of the state and concerns about not closing gaps and the impact of delayed care.

Several organizations have interventions in place for some of these metrics and indicated willingness to share best practices. There was discussion regarding the number of metrics that could be taken on – maybe 2 of the four? Rick suggested that the group set a big, hairy, audacious goal; come up with a shared best practice.

Next steps: 1) Sharon will send around the metrics table and ask QIC members to rank the metrics in terms of clinical importance, frequency (numbers of affected patients), downstream impacts of poor performance, and potential equity aspects. The rankings may be used to choose which metric(s) are chosen for the BHAG. 2) Sharon will try to get time on the next WHA purchaser affinity group meeting to get purchaser feedback on these metrics – what is important to them/what do they want the QIC to do? 3) Sharon will ask the QIC representatives of perennial high-performing organizations to share their best practices at the next meeting.

Composite Score: unintended consequence

Mary Anderson discussed the fact that, unexpectedly, the Polyclinic did not appear on the list of highest composite score performers on the latest release of the Community Checkup. This result didn't make sense given their past performance, so they called WHA for an explanation.

Mark Pregler then explained how this happened, as he had during the call with the Polyclinic team. Polyclinic's score for the third composite – Coordinated Care – was unreportable due to having fewer than 11 numerator elements in the 30 day hospital readmission metric. WHA's methodology requires that, for privacy purposes, metrics with fewer than 11 instances in the numerator be suppressed (this is the policy used by CMS as well). Without that metric, the entire Composite 3 score could not be reported; therefore no composite score was created for the group.

Mark recommended that in future, WHA will allow for the inclusion of metrics with low numerators into the composite score, but will continue to suppress reporting of affected measures at the measure detail level. A motion was made, seconded and approved to make this change.

Open Information Exchange/Journal Club

Dan Lessler has proposed that the group look at three articles on the topic of management of metrics for our August meeting. We also have an offer of a brief educational presentation about atherosclerotic cardiovascular disease, to be made by Shirley Quach of Novartis. We will determine the finalized content of this section prior to the August meeting.

The meeting was then adjourned by Steve.

2022 meeting dates: 2:00 – 4:00pm 2nd Thursday of every other month:

- February 10
- April 14
- June 9
- August 11
- October 13
- December 8