



2016 YEAR-IN-REVIEW

Working together to improve health care quality, outcomes, and affordability in Washington State.

PAST



Fifteen complete recommendations
Obstetrics – Cardiology – Hospital Readmissions – Total Knee and Total Hip Replacement – Low Back Pain – Spine SCOAP – Lumbar Fusion – End-of-Life Care – Addiction and Dependence Treatment – Coronary Artery Bypass Surgery – Prostate Cancer Screening – Oncology Care – Opioid Prescribing Guidelines – Bariatric Surgery – Pediatric Psychotropic Use

PRESENT



Four workgroups met in 2016
Behavioral Health Integration – Bariatric Surgery – Opioid Prescribing Guidelines – Pediatric Psychotropic Use – Prior Authorization Summit

FUTURE



Five workgroups for 2017
Continuing Opioid Prescribing Guidelines – Re-reviewing Total Knee and Total Hip Replacement – Hysterectomy – Opioid Use Disorder Treatment – Alzheimer's Disease and Other Dementias

Thank you to our dedicated Bree Collaborative members and our many workgroup members who have donated countless hours to identify evidence-based solutions to pressing health care issues. From all of us:

Hugh Straley, MD
Chair

Ginny Weir, MPH
Director

Paul Gruen, MHA
Implementation
Consultant

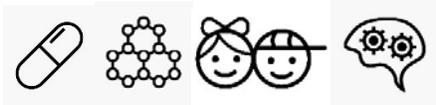
Emily Wittenhagen
Program Assistant

INSIDE:

2016 Accomplishments p. 2
Implementation Check: How Are We Doing? p. 3
Looking to 2017 p. 4
Get Involved p. 4

www.breecollaborative.org

2016 Accomplishments



Ongoing Work: Evidence-Based Prescribing of Opioids for Pain

Our members adopted the Washington State Agency Medical Directors Guideline on Prescribing Opioids for Pain in June 2015 and we have been convening a workgroup to design and carry out implementation of the Guideline since December 2015. Members are specifically focused on acute prescribing in adolescents and teens, developing a state-wide set of measure definitions aligned with the CDC's 2016 Guidelines, educating our community, and carrying out Governor Inslee's October 2016 Executive Order with many state governmental partners, associations, hospitals, providers, and others.

Read more: www.breecollaborative.org/topic-areas/opioid/

Completed: Bundling Payment for Bariatric Surgery

The Accountable Payment Models workgroup met from February to October 2016 to develop a bundled payment model to tie reimbursement for bariatric surgery to the entire episode of care, including pre and post-operative care, with no additional payment for complications due to the original surgery. This bundle is a voluntary, community-based, evidence-informed standard with bariatric surgery is a treatment option for select individuals. Our model requires a holistic approach in which surgery is but one possible component of care and follows our four-cycle model first used in the total joint bundle and warranty.

Read more: www.breecollaborative.org/topic-areas/apm/

Completed: Appropriate Antipsychotic Prescribing to Adolescents and Teens

Our Pediatric Psychotropic Use workgroup met from January to November 2016 to highlight and develop strategies to facilitate adoption of evidence-based best practices in: conducting an initial medical and psychological evaluation; ensuring access to comprehensive, family-centered psychosocial care whether within the primary care setting through integrated behavioral health care or through a supported referral; using best practice antipsychotic prescribing recommendations such as from the American Academy of Child and Adolescent Psychiatry; and if antipsychotics are prescribed, managing side effects including monitoring for changes in weight blood glucose, cholesterol, and other metabolic changes at baseline and regular intervals.

Read more: www.breecollaborative.org/topic-areas/psychotropics/

In Progress: Integrating Behavioral and Physical Health Care

Integrating behavioral health care into primary care, and primary care services into behavioral health care, increases access to needed care and decreases stigma. Our Behavioral Health Integration workgroup started meeting in April 2016 to develop a unified framework for integration that could be used within different care models and across diverse practice settings. Integrated care is team-based care provided to patients and family members by primary care and behavioral health care clinicians with clearly defined roles and that facilitates same-day access to both services, involves patients in their care, and is supported by operational systems that allow shared information and data for quality improvement. Recommendations are expected to be completed early 2017.

Read more: www.breecollaborative.org/topic-areas/behavioral-health/



Implementation Check: How Are We Doing?



Since May 2016, the Bree Collaborative has conducted a survey of the impact of our recommendations in medical groups, hospitals, and health plans. From reducing inappropriate caesarian sections to improving end-of-life care, our survey has revealed where our recommendations or other similar quality improvements have been implemented. In addition we are streamlining our processes from guideline creation to implementation. Upon completion this project will:

- **Assess** adoption of Bree Collaborative recommendations among all health care stakeholders in Washington.
- **Identify** the necessary enablers and common barriers for the implementation of our clinical recommendations and guidelines.
- **Develop** a common pathway for implementation based on the identification of best practices and the analysis of enablers and barriers.
- **Develop** a dashboard that we can continually update to show adoption of our or similar recommendations across the state.
- **Promote** the visibility of the Dr. Robert Bree Collaborative's mission, work, and recommendations among the health plans, provider groups, hospitals, and the public in Washington.



Read more about this effort here: www.breecollaborative.org/2016/09/06/survey/

www.breecollaborative.org

Looking to 2017



Our workgroups to re-review the **Total Knee and Total Hip Replacement Bundle and Warranty** and **Opioid Use Disorder Treatment** started meeting in December 2016. Workgroups for **Alzheimer's Disease and Other Dementias** and **Hysterectomy** will start meeting in January and February 2017. We will continue to work toward appropriate opioid prescribing for pain with our **Opioid Guideline Implementation** workgroup. The full Bree Collaborative will continue to meet every other month.

Find out when and where meetings are scheduled here:

breecollaborative.org/meetings/

- We will continue the work with all of our members and partners to improve health care quality, outcomes, and affordability in Washington State.
- We will maintain our strong partnership with the Health Care Authority and the state-wide transformation initiative, Healthier Washington, to advance these common goals.
- We will expand our relationships with private health care purchasers in order to promote alignment and adoption of our recommendations.
- We will continue to promote successful implementation strategies across the State.
- We will analyze the extent of how our recommendations have been implemented in the Health Care Authority's Accountable Care Networks and Center of Excellence contracts.

Get Involved



Follow Us on Twitter: [@Bree_WA](https://twitter.com/Bree_WA)

Like Us on Facebook: facebook.com/breecollaborative/

Join Our Group on LinkedIn: linkedin.com/groups/6690308

Catch Up With the Blog: breecollaborative.org/updates/

Attend a Meeting: breecollaborative.org/meetings/

Join Our Mailing List: bit.ly/2hGvvjV

Happy New Year from All of Us Here at the Bree!



www.breecollaborative.org