Members Present

Susie Dade, MS, Washington Health Alliance
Phil Colmenares, MD (for John Espinola, MD, MPH,) Premera Blue Cross
Stuart Freed,* MD, Confluence Health
Rick Goss, MD, Harborview Medical Center
Gary Franklin, MD, Labor and Industries
Christopher Kodama, MD, MBA, MultiCare
Dan Lessler, MD, Health Care Authority
Paula Lozano, MD, MPH, Group Health Cooperative
Rick Ludwig, MD, Providence Health Accountable Care
Greg Marchand, the Boeing Company

Robert Mecklenburg, MD, Virginia Mason Medical Center
Kim Moore, MD, Franciscan Health System
Carl Olden,* MD, Pacific Crest Family Medicine
Mary Kay O’Neill, MD, MBA, Partner, Mercer
John Robinson, MD, SM, First Choice Health
Terry Rogers, MD, Vice Chair
Kerry Schaefer, MS, King County
Bruce Smith, MD, Regence Blue Shield
Lani Spencer, RN, Amerigroup
Hugh Straley, MD, Chair
Carol Wagner, RN, MBA, Washington State Hospital Association
Shawn West,* MD, Edmonds Family Medicine

Members Absent

Jeanne Rupert, DO, PhD

Staff and Guests

Jackie Barry, Physical Therapy Association of Washington
Selena Bolotin, LICSW, Qualis Health
Bonnie Burlingham, Department of Health
Tony Butruille, MD, Cascade Medical
Van Chaudhari, MHA, UW Medicine
Mary Fliss, Health Care Authority
Michael Glenn, MD, CMO, Virginia Mason
Paul Gruen, Bree Collaborative
Jim Jackson, Department of Health and Human Services
Andrew Kartunen, Virginia Mason
Sarah Koca,* CHAS Health
David LaMarche, Virginia Mason

Sue Miller
Kate Mundell, MultiCare
Paul Nielsen, Alkermes
Nancy Noe, Johnson and Johnson
Bob Perna,* Washington State Medical Association
Roger Rupp
Swatee Surve
Ginny Weir, Bree Collaborative
Duncan West
Emily Wittenhagen, Bree Collaborative
Yanling Yu, Washington Advocates for Patient Safety

* By phone/web conference

Agenda and all meeting materials are posted on the Bree Collaborative’s website, [here](#), under 2016, November 16th materials.
CHAIR REPORT & APPROVAL OF NOVEMBER 16, 2016 MINUTES

Hugh Straley, MD, Chair, opened the meeting and all present introduced themselves. Dr. Straley spoke about his talk at the January State of Reform Conference and uncertainty of the future of the Affordable Care Act.

Motion: Approve the November 16th Meeting Minutes.

Outcome: Passed with unanimous support.

PANEL DISCUSSION: RURAL HEALTH IN WASHINGTON STATE

Ginny Weir, program director, introduced a panel to discuss rural healthcare in Washington State: Bonnie Burlingham from the State Office of Rural Health of the DOH; Tony Butruille, MD, from Cascade Medical; Stuart Freed, MD, from Confluence Health, Sarah Koca from CHAS Health; and Carl R. Olden, MD, FAAFP, family physician in Yakima, Washington. The panel discussed their backgrounds and organizations and described the demographics of those living in rural areas. The panel also discussed unique regional capacities and issues, supporting coordinated care teams, regional referral networks, the state of value-based care, the lack of time of providers from smaller groups to engage in State-wide efforts, and issues around recruiting providers to more remote areas.

Action Item: Bonnie Burlingham to send demographic data map to Ms. Weir to disseminate.

MEASURING IMPLEMENTATION IN WASHINGTON STATE

Paul Gruen, implementation consultant, spoke to the current state of the Bree implementation work and introduced Andrew Kartunen, Program Director, Growth & Strategy at Virginia Mason and David LaMarche, Administrative Director of Finance at Virginia Mason. Mr. Kartunen described how Bree recommendations have elevated the standard of practice and shifted conversations at Virginia Mason and gave background on the organization’s path to implementation, with strengths around surgical bundles and the needs for improvement around addiction and dependence treatment. Mr. LaMarche spoke about Virginia Mason’s work over the last four years on bundle implementation, the influence of the Bree, challenges and solutions. Michael Glenn, MD, the CMO of Virginia Mason described the acculturation processes with newly acquired facilities and work to implement unified electronic records. Robert Mecklenburg, MD, Virginia Mason, spoke about a paper that was published this week in the journal Spine: Multidisciplinary Evaluation Leads to the Decreased Utilization of Lumbar Spine Fusion: An Observational Cohort Pilot Study.

Action Item: Dr. Mecklenburg to share a link to the Spine paper with Ms. Weir to disseminate.

TOPIC UPDATE: AMDG OPIOID PRESCRIBING GUIDELINES IMPLEMENTATION

Gary Franklin, MD, Labor & Industries gave an update on the work of the AMDG Opioid Prescribing workgroup, covering focus areas including overdose reporting, the challenge of developing metrics and identifying which metrics are most relevant, use of prescription monitoring program data and goals of aligning with metrics being developed by a subcontractor to the Centers for Disease Control and Prevention. Dr. Franklin and Ms. Weir announced the dental summit coming up on March 9, 2017, at which representatives from the Dental Association, Delta Dental, and the State Dental Quality Commission and other dental specialty societies. Ms. Weir outlined the factsheets and communication campaign from the Washington Health Alliance for both opioid prescribers and patients. Ms. Weir and
Susie Dade, WHA, asked for those present to disseminate and endorse the guidelines within their networks.

**Action Item**: Ms. Weir to send out the opioid guideline PDFs out to the group.

**NEW TOPIC: TOTAL KNEE AND TOTAL HIP REPLACEMENT RE-REVIEW**

Dr. Mecklenburg introduced the workgroup members and outlined the discussion thus far around re-reviewing the total knee and total hip replacement bundle and warranty. Dr. Mecklenburg reviewed the Centers for Medicaid and Medicare Services work to test bundled payment models for hips and knees, reviewing key differences between our Washington State model and the Federal model that does not include appropriateness standards and does include non-elective procedures. Dr. Mecklenburg also reviewed changes to the bundle including adding the HOOS and KOOS Jr, the Veterans RAND 12-item Health Survey, single questions on function on lower extremity activity scale and pain on numeric pain rating scale, and clarifying that for non-surgical therapy intra-articular injection of corticosteroids may be contraindicated within 6-12 months of surgery due to increased risk of infection.

**Motion**: Approve the Accountable Payment Models Charter and Roster.

**Outcome**: Approved with unanimous support.

**DISSEMINATION FOR PUBLIC COMMENT: BEHAVIORAL HEALTH INTEGRATION**

Mary Kay O’Neill, MD, MBA Partner, Mercer, spoke to the set of recommendations put together by the Behavioral Health Integration workgroup. Dr. O’Neill covered the key elements of the recommendations, current models that exist for behavioral health integration, defining the concept of integrated care, the roadmap-style framework to facilitate implementation, technological and federal regulation barriers to integration (disconnected EHRs and regulations against patient medical record sharing, for instance), the significance of same-day access and open communication with the patient, best practices for handling collocated referrals, and the use of telehealth and other appropriate tools. There was positive feedback on the format of the recommendations roadmap and interest in using it as a standard for future recommendations.

**Motion**: Approve the Behavioral Health Integration report and recommendations for public comment.

**Outcome**: Approved with unanimous support.

**NEW TOPIC: ALZHEIMER’S DISEASE AND OTHER DEMENTIAS**

Ms. Weir spoke about the newly formed Alzheimer’s Disease and Other Dementias workgroup, which recently had the first meeting. There was a suggestion to revise the charter’s aim to include an affirmative statement about advancing/upholding the existing standard of care. Ms. Weir discussed the current workgroup chairs and members, as well as members they would like to have represented, and using the voice of the patient to illustrate the recommendations, the goal to have a product ready by the fall, the phased approach to making recommendations based on implementation time, other work being done around Alzheimer’s and dementia standards of care, and the work done in the first meeting. The group discussed the possible involvement of Eric Larson at Group Health who has a long longitudinal
study of Alzheimer’s, the need to define and spread awareness of other dementias, and collaboration with the Dementia Action Collaborative (DAC).

Motion: Approve Alzheimer’s Disease and Other Dimensions Charter and Roster.
Outcome: Approved with unanimous support.

NEW TOPIC: OPIOID USE DISORDER
Ms. Weir clarified the differentiation between this workgroup and the Opioid Prescribing workgroup – this Opioid Use Disorder workgroup will be focused on treatment for addiction to opioids while the Opioid Prescribing workgroup is focused on more upstream prevention through prescribing. The group discussed the language of the charter and whether the aim should reflect more about increasing access and more closely match the purpose statements. The group shared their desire for a health plan member and a patient voice to be a part of the workgroup. The goal is to have a product ready by fall. A new bill – HB 1330 – was introduced today that concerns opioid prescribing by medical practitioners including dentists, putting a cap on the duration of prescriptions.

Motion: Approve Opioid Use Disorder Charter and Roster.
Outcome: Approved with unanimous support.

GOOD OF THE ORDER/OPPORTUNITY FOR PUBLIC COMMENT
Dr. Straley and Ms. Weir thanked all for attending and asked for public comments and final comments. The meeting was adjourned.

Next Bree Collaborative Meeting:
March 22, 2017 | 12:30 - 4:30
Puget Sound Regional Council