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January 31, 2013

MaryAnne Lindeblad Administrator Washington State Health Care Authority P.O. Box 45502 Olympia, WA 98504-5502

Dear Ms. Lindeblad:

On behalf of the Bree Collaborative, I would like to submit a recommendation for your consideration.

Last October, the Bree Collaborative voted unanimously to support the following motion:

"To approve the Spine SCOAP proposal – that the Collaborative establish participation in Spine SCOAP as a community standard, starting with hospitals performing spine surgery¹ - with the following conditions:

- 1) Results are unblinded.
- 2) Results are available by group.
- 3) Establish a clear and aggressive timeline.
- 4) Recognize that more information is needed about options for tying payment to participation."

Spine SCOAP is a program of the Foundation for Health Care Quality, a neutral, nonprofit organization dedicated to providing a trusted, independent, third party resource to bring together people with varied perspectives around a shared goal: the continual improvement of sustainable health care that meets or exceeds established standards.

The Spine SCOAP registry is a clinician-led quality improvement collaborative made up of experts from 17 area hospitals that provide 80% of eligible spine surgeries in Washington State. The effort includes peer networks using clinical data, with performance benchmarking at the hospital level and a focus on quality and cost-effectiveness, which work to spotlight variation. The clinician-led expert advisory board includes a metrics committee which defines standards, targets new procedures, and

FOUNDATION FOR HEALTH CARE QUALITY PROGRAMS











¹ Spine SCOAP will begin with hospitals performing spine surgery and will expand to include procedures done at Ambulatory Surgery Centers as well as other non-hospital facilities such as interventional radiology suites.

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addresses medical/legal issues. Spine SCOAP impacts behavior through benchmarking, education, the use of standard orders and checklists.

Spine SCOAP benefits hospitals and communities in a variety of ways. By participating in the Spine SCOAP registry, hospitals work to reduce variability in quality, cost, and indications for surgery, and by addressing the issue of inappropriate care. Appropriateness is determined by assessing functional changes over time. Spine SCOAP creates an opportunity for real world comparative effectiveness research related to value of interventions; this is a key component of the *Washington State Spine Forum*.

Spine SCOAP development has been ongoing for the last two years. Data sources for the registry include both abstracted medical record data and information from patient reported outcomes. The Spine SCOAP registry currently includes 3,700 cases, with a focus on spine fusion procedures; other operative procedures include discectomy, laminectomy, and disc replacement. Patient reported outcomes include baseline and follow up regarding quality of life and functional outcomes through 5 years. Metrics are included for risk adjustment, indication, technique, the peri-operative process, risk adjusted clinical outcomes, pain, and functional outcomes. Data is submitted and queried as soon as a medical record can be abstracted. Currently, funding for Spine SCOAP is provided through research grants that support growth, a modest annual hospital fee, and abstraction resourcing by hospitals.

Currently, in Spine SCOAP, hospital-level data is not discoverable as SCOAP is covered by the Washington State CQIP statute. However, transparency is provided through the Washington State Spine Forum via quarterly public access to the spectrum of Spine SCOAP data as well as planned yearly risk-adjusted, outcome-oriented reports for hospitals and stakeholders. At this time, hospitals are reviewing their initial data reports to understand the current state of their performance; quarterly reporting will begin with Quarter 1 CY2013 discharge data (available approximately June 2013). In the mean time, the Bree Collaborative will continue to work with Spine SCOAP to ensure compliance with our activities, including furthering strategies to tie payment to participation.

As the administrator of the Washington State Health Care Authority, you play a key role in the implementation of the recommendations. Per the Bree Legislation, Chapter 70.250.050 RCW:

"the collaborative shall report to the administrator of the [Washington State Health Care] authority regarding the health services areas it has chosen and strategies proposed. The administrator shall review the strategies recommended in the report, giving strong consideration to the direction provided in section 1 of this act and this section. The administrator's review shall describe the outcomes of the review and any decisions related to adoption of the recommended strategies by state purchased health care programs. Following the administrator's review, the collaborative shall report to the legislature and the governor regarding chosen health services, proposed strategies, the results of the administrator's review, and available information related to the impact of strategies adopted in the previous three years on the cost and quality of care provided in Washington state."

The law also states:

"by January 1, 2012, and every January 1st thereafter, all state purchased health care programs must implement the evidence-based best practice guidelines or protocols and strategies identified under section 3 of this act, after the administrator, in consultation with participating agencies, has affirmatively reviewed and endorsed the recommendations."

Spine SCOAP, Bree Collaborative, and the State of Washington have a shared goal: to improve the quality and appropriateness of spine surgeries. To accomplish this goal, one needs a collaborative of all stakeholders and real-world data to know what's being done and to track outcomes that matter. That said, the Bree Collaborative asks that HCA support the Bree Collaborative Spine SCOAP recommendation by establishing Spine SCOAP as a community standard: all Washington State hospitals, ambulatory surgery centers, as well as other non-hospital facilities such as interventional radiology suites that perform spine surgeries join Spine SCOAP.

Thank you for your support of the Bree Collaborative, and your ongoing commitment to quality improvement in Washington State. Please contact me if you have any questions.

Sincerely,

Steve Hill

Chair, Bree Collaborative, on behalf of the Bree Collaborative

Cc: Rachel Quinn, Project Manager, Bree Collaborative Neal Shonnard, MD, Associate Medical Director, Spine SCOAP Vickie Kolios-Morris, SCOAP Program Director, Spine SCOAP Jason McGill, Governor's Executive Policy Advisor, Governor's office Josh Morse, Project Director, HTA

Members of the Bree Collaborative

Peter Valenzuela, MD, PeaceHealth

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Roki Chauhan, MD, Premera Blue Cross Susie Dade, Puget Sound Health Alliance Gary Franklin, MD, WA State Labor and Industries Stuart Freed, MD, Wenatchee Valley Medical Center Tom Fritz, Inland Northwest Health Services Joe Gifford, MD, Providence Health and Services Rick Goss, MD, Harborview Medical Center Mary Gregg, MD, Swedish Medical Center Anthony Haftel, MD, Franciscan Health Systems Beth Johnson, Regence Blue Shield Greg Marchand, The Boeing Company Steve Hill, Bree Collaborative Chair Robert Mecklenburg, MD, Virginia Mason Medical Center Robyn Phillips-Madson, DO, MPH, Pacific NW University of Health Sciences Carl Olden, MD, Pacific Crest Family Medicine Mary Kay O'Neill, MD, CIGNA John Robinson, MD, First Choice Health Terry Rogers, MD, FHCO Eric Rose, MD, Fremont Family Medical Kerry Schaefer, King County Bruce Smith, MD, Group Health Cooperative Jay Tihinen, Costco Jeff Thompson, MD, WA Health Care Authority