CHAIR REPORT AND APPROVAL OF MINUTES

Dan Lessler, MD, MHA (Chair) and Ginny Weir, MPH, Bree Collaborative opened the meeting and those present introduced themselves. Ms. Weir discussed the goal of finalizing the recommendations. A motion was made to approve the minutes from the previous meeting.

Motion: Approve 5/9/2018 Minutes.
Outcome: Passed with unanimous support

SEXUAL MINORITY WOMEN HEALTH ACCESS AND DISPARITIES PRESENTED BY CORINNE HEINEN

A presentation was given by Corinne Heinen, MD, Department of Internal Medicine, Allergy & Infectious Disease University of Washington which discussed sexual minority women and:

- Demographics
- Barriers to care
- Mental health and substance abuse
- Sexual and reproductive health
- Cancer, cardiovascular, and other health risks

The workgroup discussed the importance of including disparities between sexual minority and majority women in the recommendations and whether the current language was sufficient.
The group reviewed the LGBTQ Health Care Recommendations Purpose Statement and Recommendations and discussed:

- Whether to change the demographics information included in the background to increase the proportions of those who identify as LGB. The workgroup decided to add language that acknowledges that many more people have had same sex experiences than actually identify as LGB and that behavior and identify are not the same.

Under Recommendations Focus Areas:

- Condensed focus areas from four to three.
- Added recommendation to support health plan data along with health plan records.
- PrEP recommendation to be based on “risk assessment” rather than “appropriate demographic.
  - Removed the word “treatment” after PrEP.
  - Michael Garret, MS, CCM, CVE, NCP, Principal, Mercer, suggested adding a glossary to define terms such as “HCV” or writing out the terms each time they are used.
  - In addition to hormonal therapy for transgender patients, recommendation for surgical procedures and other services to match those recommended by WPATH.
  - Changed “transgender” to “gender minority.”
  - Removed “for age 13 and up”.

The group viewed the LGBTQ Health Care Recommendations Specific Stakeholder Actions and Quality Improvement Strategies and discussed:

Recommendations for Persons Who Identify as LGBTQ:

- Changed recommendation to be able to identify your PCP to “Find a primary care provider that you feel comfortable talking with about your health care needs.”
- Michael Garret pointed out that resources are concentrated in Western WA (Seattle area).
  - Additions of resources in eastern WA (Spokane) and Olympia will be made.

Recommendations for Primary Care Providers

- Reference added for pediatricians to use most updated version HEADSS assessment.
- Expanded list of STIs to include Syphilis and Trichomonas.
- “Worry” about contracting an STI changed to “concern.”
- Under history of STI questions, added Hepatitis C, HPV, and Genital warts.

**Action Item:** Matt Golden, MD, Professor, Director, PHSKC, STD Control Program, University of Washington to send updated HIV and STI screening guidelines to Ginny Weir

- Added recommendation to inform patients with reportable conditions about possibility of Health Department contact.
- Changed HPV immunization recommendation from MSM and transgendered persons to “everyone.”
  - Added monitor for changes from national organizations.
- Added language on contraception methods.

**Action Item:** Kevin Wang, MD, FAAFP, Swedish Medical Center to send reproductive access resource and language

Recommendations for Health Plans

- To add language about reproductive health coverage.
- Added language for free STI and HIV screenings, and PrEP.
**Action Item:** Kevin Wang to send language for reproductive health recommendations for health plans

- Make identification of in-network provider experienced with LGBTQ care.
- Added language against requirements for behavioral health evaluations for gender confirmation surgeries, hormonal therapy etc.

Recommendations for *Employers*

- Michael Garrett to send language for reference to Corporate Equality Index.

Recommendations for *Washington State Agencies*

**Action Item:** Matthew Golden will write language for DOH to create STI clinic infrastructure

**Action Item:** Michael Garrett to send language for ensuring equitable coverage for employees with opposite sex partners

**NEXT STEPS AND PUBLIC COMMENTS**

Dr. Lessler and Ms. Weir thanked all for attending and asked for final comments and public comments. The meeting adjourned.