Dr. Robert Bree Collaborative Lumbar Fusion Bundled Payment Model Re-Review Workgroup Minutes Tuesday, February 27, 2018 | 3:00-4:30 Foundation for Health Care Quality

Members Present

Robert Mecklenburg, MD, Virginia Mason (Co-Chair) Lydia Bartholomew, MD, Aetna Courtney Brenner,* MPH, CPH, (for Sara Groves-Rupp), Harborview Medical Center Gary Franklin,* MD, MPH, Labor and Industries Andrew Friedman,* MD, Virginia Mason Farrokh Farrokhi*, MD, Virginia Mason Michael Hatzakis, MD, Overlake Hospital Vicki Kolios, MHA, (for Arman Dagal), Spine SCOAP Marcia Peterson, Washington State Health Care Authority Linda Radach,* Washington Advocates for Patient Safety Kerry Schaefer, King County (Co-Chair) Mia Wise, DO, Premera Blue Cross

Staff/Guests

James Babbington, MD, Swedish Medical Brook Martin, University of Utah Neal Shonnard,* MD, Proliance Surgeons Jason Thompson, MD, Valley Medical Center Ginny Weir, MPH, Bree Collaborative

* By phone/web conference

WELCOME, INTRODUCTIONS

Kerry Schaefer, MS, King County and Robert Mecklenburg, MD, Virginia Mason, opened the meeting. All those present introduced themselves. Dr. Mecklenburg reviewed the new <u>Request for Proposals from</u> <u>the Health Care Authority</u>. The group discussed the broader inclusions within this RFP as compared to the 2014 Lumbar Fusion Bundle. Ginny Weir, Bree Collaborative, reviewed the 2013 low back pain recommendations.

LUMBAR FUSION BUNDLE AND WARRANTY

Dr. Mecklenburg presented the draft Lumbar Fusion Bundle and Warranty. The group discussed:

- The article on American College of Physicians <u>Noninvasive Treatments for Acute, Subacute, and</u> <u>Chronic Low Back Pain: A Clinical Practice Guideline From the American College of Physicians</u>
 - Lack of specific treatment plans regarding physical therapy/physiatry.
- Spine SCOAP data
 - Whether inclusion criteria should data be based on diagnosis rather than level of fusion
 - o Limitations of database
- Scope of the bundle:
 - Whether to expand from single level fusion
 - That patients with increasing levels of fusion are even more in need of a trial of conservative therapy prior to surgery due to increased risk of harm.
 - o Inclusion and exclusion of certain diagnoses e.g. scoliosis/deformity
 - o Concerns of length of recommendations and practicality for primary care physicians
 - To postpone discussion of segregation of bundle based on level of fusion. Different payment amounts and structures should exist for different levels of fusion (e.g., one vs six), but this is beyond the workgroup's scope.

Cycle I: Disability Despite Non-Surgical Therapy

- A: Measure of disability
 - Whether to add pain interference scales
 - Redundancy of the measures as one measure may be needed of PROMIS-10, ODI, or TAOS rather than all
 - o Possible use of PROMIS-29
 - Education of doctors on use of patient reported outcomes
 - o Adding "with at least one of the following"
 - Papers show high similarity between the scales
- B: Imaging standards
 - o Additional imaging required to show required 5mm slippage

Action Items:

- Dr. Babbington to send papers showing similarity between PROMIS-10 and ODI
- Dr. Hatzakis to share PROMIS-29
- Dr. Babbington and Dr. Hatzakis to revise Cycle 1: A using updated information
- Dr. Farrokhi and Dr. Thompson to draft language to revise Cycle 1: B imaging standards
- Spine SCOAP to share number of procedures by diagnosis

GOOD OF THE ORDER/OPPORTUNITY FOR PUBLIC COMMENT

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