Established by the State Legislature
Goal to improve quality, health outcomes, and cost-effectiveness of care in Washington State
Bring together member clinicians, Washington State agencies, hospitals, health care systems, health insurance plans, and quality improvement organizations
Select health care topics every year and develop evidence-based recommendations by convening workgroups of clinical experts, administrative experts, patients, and others
Recommendations guide health care purchasing for Washington State agencies and set a community standard of care.

Why LGBTQ Health Care?

Building a health care system that allows everyone to have a fair opportunity to be healthier is a goal across Washington State. Lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ) people share common challenges and have health care needs distinct from those who do not identify as LGBTQ. LGBTQ people may also face access issues relating to health insurance coverage and policies that reinforce stigma within the health care system and across communities.

Our Report and Recommendations:

- Are based on whole-person care framework, taking into consideration a person’s multiple individual factors that make up health, wellness, and experience (e.g., behavioral health, past trauma, race/ethnicity) in such a way that is not identity or diagnosis-limiting.
- Are oriented mainly to primary care, and also include language directed to hospital settings, health plans, health care purchasers, and patients themselves.
- Recommend that all health care encounters occur using non-judgmental, non-stigmatizing language, body language, and tone.

Communication, Language, and Inclusive Environments
- Use of the patient’s chosen pronouns, name, and gender identity.
- Use of respectful, appropriate, non-stigmatizing terms (e.g., chest tissue).
- Support from electronic health record and health plan data.
- Environments (e.g., onsite gender-neutral restrooms, diverse images)
- Non-discrimination reflected in forms, protocols and employee training

Screening and Taking a Social and Sexual History
- Screening (e.g., behavioral health concerns, intimate partner violence, tobacco)
- Social history using recommended minimum information with flexibility around language depending on patient population (e.g., sexual partners, type of sex, STI history)

Areas Requiring LGBTQ-Specific Standards and Systems of Care
Providers and health care systems should establish referral networks to provide these services when they cannot be provided within an individual practice.
- Appropriate referrals and follow-up including further screening, immunizations, HIV pre-exposure prophylaxis based on risk assessment or HIV treatment and engagement with care.
- Hormonal therapy, surgical care, and other services for gender minority depending on patient preference.
- Information on appropriate community resources.
- Include members of the LGBTQ community on patient advisory committees and governing bodies.

Read our report: www.breecollaborative.org/topic-areas/previous-topics/lgbtq-health-care/