Dr. Robert Bree Collaborative Meeting Minutes March 23rd, 2022 | 1:00-3:00 Held Virtually

Members Present

Hugh Straley, MD, Bree Collaborative (Chair)
Norifumi Kamo, MD, MPP, Virginia Mason
Franciscan Medical Center
Susane Quistgaard, MD, Premera Blue Cross
Sharon Eloranta, WHA
Mark Haugen, MD, Physician, Walla Walla Clinic
Carl Olden, MD, Pacific Crest Family Medicine
Kevin Pieper, MD, MHA, Kadlec Regional Medical
Center
Mary Kay O'Neill, MD, MBA, Merc

Susie Dade, MS, Patient Representative
Kimberly Moore, MD, Franciscan Health System
John Robinson, MD, SM, First Choice Health
Rick Ludwig, MD, Providence Health
Darcy Jaffe, MN, ARNP, NE-BC, FACHE, Washington
State Hospital Association
Jaymie Mai, PharmD, (for Gary Franklin),
Washington State Department of Labor and
Industries

Members Absent

Dan Kent, MD, United Health Care
DC Dugdale, MD, MS, University of Washington
Care Medical Center
Judy Zerzan, MD, MPH, Washington State Health
Care Authority

Jeanne Rupert, DO, PhD, The Everett Clinic Stuart Freed, MD, Confluence Health Greg Marchand, The Boeing Company

Staff and Members of the Public

Ginny Weir, MPH, FHCQ
Nick Locke, MPH, Bree Collaborative
Amelina Kassa, FHCQ
Leah Hole-Marshall, (WA-HBE)
Amy Florence, Premera
Tiffany Jones, PharmD PacificSource

Colleen Daly, PhD, Microsoft
Jackie Barry, APTA Washington (a chapter of the Aviva Horowitz, Pacific Source
American Physical Therapy Association)
Luis Padilla, PacificSource Health Plans
Beth Shervey

All meeting materials are posted on the Bree Collaborative's website, here, under previous meetings.

CHAIR REPORT, APPROVAL OF MINUTES

Hugh Straley, MD opened the meeting, and all that were present introduced themselves by entering information in the chat.

Motion: Approve the January 26th, 2022 Meeting Minutes

Outcome: Passed with unanimous support

DISCUSSION: COVID-19 CHECK-IN

Dr. Straley lead those present on a conversation about COVID-19 numbers and updates related to changing guidance. Several members discussed decreasing numbers of patients presenting with COVID-19, as well as decreasing numbers of patients on ventilators. Additionally, members have seen increases in vaccination rates at their clinics. Despite this progress, most members reported difficulty maintaining safe staffing levels, and concerns about discharge planning for patients with COVID-19 and other social needs, such as housing.

TOPIC UPDATE: OPIOID PRESCRIBING IN OLDER ADULTS

Gary Franklin, MD, MPH, L&I presented on the workgroup's progress. The initial plan to have a draft for public comment by this March meeting was pushed back due to ongoing edits. Special attention is being given to the non-pharmacologic modalities. The workgroup reviewed 10 non-pharmacologic modalities, but would like to prioritize the modalities based on strength of evidence in order to make appropriate recommendations, especially related to coverage. The workgroup hopes to present a draft for public comment at the May meeting.

TOPIC UPDATE: INFECTION CONTROL

Mark Haugen, MD, Physician, Walla Walla Clinic opened his presentation by calling for more involvement from outpatient physicians. The group has grown since January's meeting but could still use more representation from physicians. Dr. Haugen also discussed the workgroup's scope, which will cover all outpatient facilities generally, but will not specifically dive into specialty care concerns (such as aerosol exposures in dentistry clinics). The workgroup has chosen to filter recommendations through a five-part framework which includes preventative measures, disease surveillance, minimizing exposures, environment and sterilization, and community spread. The workgroup will apply this framework to several different audiences in the outpatient space, including outpatient facilities, health plans, employers, and patients. Dr. Haugen hopes to have a draft for review by late summer, as this is a rapidly evolving space with shifting COVID-19 guidance.

TOPIC UPDATE: HEPATITIS C

Jon Stockton, MHA, Washington State Department of Health, described the overlap between the Bree Collaborative's Hepatitis C Virus (HCV) workgroup and existing efforts to address Hepatitis C through the Hep C Free Coordinating committee. About 60,000 residents of Washington state live with HCV, with cases clustered in two separate demographic groups: younger people who may be drug users, and older adults who are not as familiar with the healthcare system. In 2018, Governor Inslee declared HCV elimination a top priority for the state, and the Department of Health compiled a list of over 90 recommendations to achieve HCV elimination. Since then, the clinical coordinating committee of the Hep C Free Coordinating Committee worked to prioritize several recommendations for immediate implementation. The Bree Collaborative's HCV workgroup will continue this work and has decided to address five recommendations to develop focused action steps. These five areas include developing new metrics for the common measures set, integrating pharmacists into the care team, improving local public health capacity, expanding low-barrier treatment access, and expanding access to case management for treatment.

TOPIC UPDATE: PEDIATRIC ASTHMA

Nick Locke, MPH, Bree Collaborative, provided an update on the Pediatric Asthma workgroup. The workgroup is comprised of several stakeholders with various perspectives, ranging from clinical providers to policy makers. To date, members have discussed several focus areas to guide their work, including appropriate diagnosis, metrics, clinical control, home environment, school environment, community environment, and funding mechanisms. Broadly the group has a three-pronged approach for addressing pediatric asthma – looking at clinical mechanisms, community context, and payment mechanisms to support high-value interventions. At the next few meetings the workgroup will begin to draft recommendations for specific focus areas. Additionally, Bree Collaborative staff will identify a clinican workgroup chair to drive work forward.

DISCUSSION AND UPDATE: LEGISLATIVE SESSION

Ginny Weir, MPH, FHCQ updated the group on the health policy changes from the recent legislative cycle. Most notably, the Bree was awarded money from the state's general fund for fiscal years 2022 and 2023 to support collaborative learning and targeted technical assistance for quality improvement initiatives. More information about how the funds will be used to support implementation will be available at the May meeting.

Other relevant budget items included funding for the Health Care Authority to study cost and implementation impacts of a state-wide community information exchange (CIE), funds for the ongoing COVID-19 public health response, and an increase in reimbursements to vendors providing services to people with developmental disabilities or long-term care needs.

NEXT STEPS AND CLOSING COMMENTS

Dr. Hugh Straley thanked those who presented and closed the meeting.

Next Bree Collaborative Meeting: May 25th, 2022 | 1:00 – 3:00 | Zoom