

Dear Community Member,

There is much to report. A centerpiece of our work is the first public report comparing health care practices in the Puget Sound region, expected to be out in 2007. In addition to physicians and other health care experts, more employers and individuals are getting involved to use our collective voice to improve health care quality, affordability and the patient experience. We welcome everyone in the Alliance. After all, it's your health, your health care dollar, and your community. To find out more about joining the Alliance, go to www.pugetsoundhealthalliance.org/join/joinnow.cfm

Share this Update with colleagues, friends and family to create even greater momentum to improve health care in this region.

Margaret Stanley
Executive Director

Progress At-A-Glance Thanks to the work of many local leaders and community members, the Alliance has made substantive progress in several areas:

- ✓ Adopted **evidence-based care guidelines** for diabetes and for heart disease, plus identifying the ways that we'll **measure quality of care** in those areas
- ✓ Adopted a **strategy for securely compiling health care information across the region** that will be used in the public reports comparing local health care practices
- ✓ Recommended that clinics and hospitals adopt policies to reduce or **eliminate the influence of drug company sales and marketing aimed at doctors**, in order to improve patient safety and quality of care
- ✓ Helped launch a program to award **\$1 million to small clinics and hospitals for electronic medical records** and other health information technology
- ✓ Expanded **resources to improve health habits and manage your own health care**, available for use by anyone in the community (*see the Alliance website*)
- ✓ Published **results of our consumer survey**, which confirm strong interest in having a useful comparison report on the quality and cost of local health care
- ✓ **Reached the “century mark”, with more than 100 organizations that have joined the Health Alliance**, along side many individual consumers

Want to know who recently joined the Alliance? *Keep reading...*

Look Who's Part of the Alliance ... Welcome to all new Alliance participants. The entire community THANKS YOU for your support and involvement!

- Express Scripts, Inc.
- Carpenters Trusts of Western WA
- Ingenix
- Institute of Complementary Medicine
- Lakeshore Clinic
- Merck & Co., Inc.
- Molina Healthcare of Washington
- Northwest Administrators Inc.
- Novartis Pharmaceuticals Corporation
- Overlake Hospital Medical Center
- Stevens Hospital
- WA State Nurses Association
- Roger Collier
- Dr. Gary Feldbau
- Tiffany Reiss
- Senator Pat Thibaudeau
- Carmen Warren

Nearly 110 organizations in addition to individual consumers are part of the Alliance! If you care about improving health care quality, affordability and patient experiences with local health care, you should join too. For a complete list of Alliance participants, go to <http://www.pugetsoundhealthalliance.org/join/participants.html>

\$1M Available for Health Information Technology (IT) The Washington Health Information Technology Collaborative is accepting applications from small clinics and hospitals for awards up to \$20K for acquisition, implementation and expansion of health care IT. Letters of Intent are due June 16, 2006. The Collaborative is the joint effort of First Choice Health, the Washington State Health Care Authority, Qualis DOQ-IT and the Health Alliance. For more information, including how to contribute to next year's fund to encourage even greater efficiency and quality improvement in health care, go to www.wahealthinfocollaborative.org

Alliance Recommends that Clinics and Hospitals Put Safe, Affordable Care Ahead of Drug Company Sales & Marketing. After extensive discussion and content work within the Pharmaceutical Clinical Improvement Team, the Quality Improvement Committee and the Consumer Advisory Group, the Alliance Board unanimously adopted two position statements which encourage clinics and hospitals to restrict or eliminate pharmaceutical 'detailing' (e.g., visits by drug company sales reps, accepting branded promotional items, etc.) and stop distributing free drug samples. These positions are supported by many local doctors, including the Washington Academy of Family Physicians. To read the position statements and related materials, go to www.pugetsoundhealthalliance.org/services/guidelines.html#Recommendations

Major Step Toward to Public Comparison Report on Health Care. In order to publish what some refer to as a 'Consumers Reports®' comparing health care in the Puget Sound Region, Alliance participants have been working on the right approach for securely accessing compiled data (note: it will not include personally identifiable health information). The Health Information and Technology Committee explored key issues and implications of different options and developed a recommended approach. The Alliance Board adopted that approach, laying the groundwork to ensure that the public report will include data from the five-county area for the most comprehensive report comparing quality, cost and patient experience ever produced in the region.

The Alliance is Hiring We are seeking qualified candidates for several positions. For more information, go to www.pugetsoundhealthalliance.org/about/employment.html

Clinical Improvement Teams

Back Pain – The Back Pain Clinical Improvement Team is working on recommendations to promote a conservative care pathway for spine care and encourage adoption of guidelines and standards for effective care of low back pain. They are also developing suggestions for incentives for appropriate care and ways to discourage unnecessary imaging or surgery. The team expressed support for measures soon to be released by the National Committee for Quality Assurance’s (NCQA) Spine Care Recognition Program, with a suggestion submitted to NCQA that the measures also address evidence-based complementary and alternative medicine.

Depression – The Depression Clinical Improvement Team has identified two sets of evidence-based guidelines that are particularly helpful: the Colorado Clinical Guidelines Collaborative “short” guideline on major depression, and the Institute of Clinical Systems Improvement’s more extensive guideline on major depression in adults treated in primary care settings. The team is developing recommendations for changing behavior in several areas, including: ensuring appropriate diagnosis, promoting patient compliance with treatment suggestions, and effectiveness of treatment for depression.

Rx (Pharmacy) – The Rx Clinical Improvement Team recently completed work on their Phase 1 Report which includes a recommendation improve consumer awareness of the value of generic drugs. The team has now begun to work on Phase II issues, which may include: promotion of prescription drugs with proven value through formulary re-design and improved cost-sharing incentives for patients, and targeting specific high-volume or high-cost drugs that have a high incidence of over-utilization.

Reminder: Any organization or individual who has joined the Alliance can access committee materials by logging into the Participant Only section of our website. Participants are also welcome to attend any Alliance committee, workgroup or Board meeting. To join, go to <http://www.pugetsoundhealthalliance.org/join/joinnow.cfm> or contact Sean McCliment at sean@pugetsoundhealthalliance.org.

Other Activities and News to Note

Institute for Oral Health Conference on Early Childhood Dental Care. This newly-formed Institute, initially funded through a grant from Washington Dental Service, is sponsoring its first national conference November 13 and 14, 2006, with a special focus on improving children’s dental care. The event will be November 13 and 14, 2006, at the Grand Hyatt in Seattle. See www.institutefororalhealth.org

Washington HIMSS Medical Informatics Summer Symposium. On Friday, June 16, be at the Bellevue Community College main campus from 9am – 3pm for a symposium on The Consumer in Medical Informatics. Speakers are from Columbia University, Group Health, Oregon Health Sciences University, HIMSS, and UW. For more information go to www.bcc.ctc.edu/informatics

U.S. Health Care Spending Highest Among Industrialized Countries – The U.S. spent the most money on health care per capita among industrialized countries, spending \$5,635 per person in 2003. U.S. spending was 48% higher than Norway, which was the second-highest spender per capita at \$3,807. The U.S. spends more in part due to higher prices for health care goods and services. In contrast, the U.S. only spent 43 cents per capita on health information technology (IT) -- less than one-tenth of the spending in Australia, which has the second-lowest spending level on health IT. Canada spends \$31.85 per person and Germany spends \$21.20 per person on health IT. The U.S. lags "at least a dozen years" behind other industrialized countries in adopting electronic health records. *Source: Health Affairs May 2006*

Hospital Campaign to Save 100,000 Lives Exceeds Goal – Hospitals have reduced mistakes to prevent unnecessary deaths of more than 120,000 patients in the past 18 months. All hospitals in Washington state participated along with about 3,000 hospitals nationwide, sharing mortality data and carrying out study-tested procedures that prevent infections and mistakes. **The campaign involved rapid response team specialists** that gave extra attention to patients at their first sign of decline; **evidence-based care** -- such as early administration of aspirin and beta-blockers -- for acute myocardial infarction; **checking for medication errors**; and **intervention to prevent infections** and ventilator-associated pneumonia. *Source: Seattle Times, June 15, 2006*

Cutting Waits at the Doctor's Office – Doctors are redesigning their office work processes to cut costs and fix problems that have long frustrated patients. Practice web sites allow patients to download forms and fill them out prior to an office visit or ask non-urgent questions via secure e-mail. Electronic medical records/practice-management software allows patients to receive alerts and reminders about follow-up care. The new programs borrow lessons from other industries to help doctors work more efficiently. One approach employs calculations used by airlines, hotels and restaurants to predict demand so doctors can cut patient wait times. Doctors are also relying on electronic health records and practice-management software to streamline administrative tasks. *Source: "Cutting Waits at the Doctor's Office," Wall Street Journal, April 19, 2006.*

Clean Hands Is the First Step to Prevent Infection – A hospital patient recovering from an illness or medical condition is an everyday occurrence. Unfortunately so is the chance -- estimated at 1 in 20 -- of that patient contracting an infection during the hospital stay. Infections acquired in hospitals are said to cause 90,000 deaths annually, and estimates on the cost of treating survivors amount to more than \$4.5 billion. The Centers for Disease Control and Prevention (CDC) recently awarded \$10 million to five medical centers to research new approaches to reducing infections in health care settings. *Source: "Infections: Clean hands first step in preventing transmission," Washington Times, May 30, 2006.*

If you have comments or suggestions regarding the content of this Health Alliance Update, please contact Diane Giese at (206)448-2570 ext 117 or diane@pugetsoundhealthalliance.org