



STATE OF WASHINGTON

OFFICE OF THE GOVERNOR

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January 20, 2006

TO: Robin Arnold-Williams, Secretary, Department of Social and Health Services

Mary Selecky, Secretary, Department of Health
Steve Hill, Administrator, Health Care Authority

FROM: Governor Christine Gregoire

SUBJECT: Chronic Care Improvement

As you know, five percent of Washington residents covered by government health care programs are responsible for, roughly, 50 percent of the programs' costs. Many of these clients are consumers of long-term care services, and more than half have diagnoses of depression and chronic pain. This burden of chronic illness directly impacts Washington State and its citizens' health and finances.

It is wholly within the state's power to target these costs and improve chronic care – by forging more effective links between long-term care, preventive care and primary care, and by providing a new coordinated across-the-care continuum. Such coordination would improve client health outcomes by targeting chronic illnesses, related morbidity, and mortality – all factors that have a disproportionate impact on the elderly and other groups in our population.

Unfortunately, the current health care system is often so focused on acute care that few medical providers track prevention-based care and its ability to keep patients with chronic disease from developing complications. This is one reason that the Institute of Medicine has called for a national shared-agenda of six improvement goals: making health care safe, effective, patient-centered, timely, efficient, and equitable.

State purchasers of health care have the responsibility to serve as a model by improving the care of those with chronic illnesses and by creating an environment that fosters and rewards improved care. In doing so, the state helps ease the long-term impact of chronic illnesses on state health care spending.

Robin Arnold-Williams

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I am, hereby, directing the Health Care Authority, the Department of Social and Health Services, and the Department of Health, by June 2006, to collaborate on an initiative to improve chronic illness care in Washington State. I am further directing the agencies to evaluate options and make recommendations for the Governor's 2007-09 biennial budget, taking into consideration steps to:

- Identify common health risks of populations for which state agencies purchase health care;
- Identify appropriate predictive models;
- Survey current interventions and compare these to “Best-in-Class” interventions;
- Develop a pilot intervention for fiscal year 2007;
- Share predictive information with case managers and providers so they can better manage clients, employees, injured workers and dependents; and
- Develop “Measures of Success” to identify areas of cost savings and improved health that can be measured and reported.

Furthermore, by January 2007, the agencies will also develop a new patient-centered model of disease management that incorporates the Institute of Medicine’s agenda for improvement and enhances the state’s ability to:

- Support “medical homes” for informed, activated patients and prepared practice teams;
- Identify and encourage treatment that works – an evidence-based approach to chronic care;
- Facilitate the use of information technology to speed care and improve quality;
- Align payment incentives to providers with goals to improve care;
- Address differences in disease burden among populations;
- Improve coordination of primary, acute and long-term care; and
- Utilize principles of continuous quality improvement.

I appreciate your collective efforts in carrying out this directive.