


Washington State  
Health Care Authority

## Program updates


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WA – Health Care Authority  
*January 19, 2018*



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Health Care Authority


## Today's agenda

1. Genomic microarray testing and whole exome sequencing
2. Continuous glucose monitoring - update



## Meeting reminders

- Meeting is being recorded
- A transcript of proceedings will be made available on HTA website: [www.hca.wa.gov/hta/meetings-and-materials](http://www.hca.wa.gov/hta/meetings-and-materials)
- When participating in discussions:
  - State your name; and
  - Use the microphone
- To provide public comment during today's meeting:
  - Sign-up at the table outside this meeting room




## HTA program background

- The Health Technology Assessment Program (HTA) is located within the Washington State Health Care Authority (HCA),
- 2006 legislation designed HTA program to use evidence reports and a panel of clinicians to make coverage decisions for certain medical procedures and tests based on evidence of:
  - **Safety**
  - **Efficacy/ Effectiveness**
  - **Cost-effectiveness**



## HTA program background

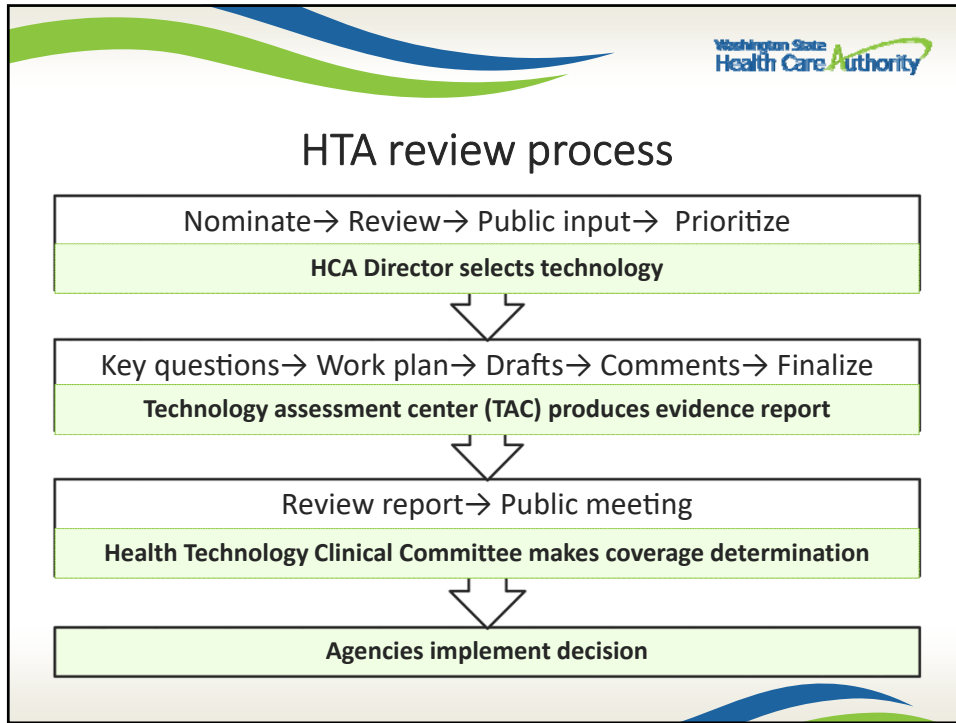
- Multiple state agencies participate to identify topics and implement policy decisions:
  - **Health Care Authority**
    - Uniform Medical Plan
    - Medicaid
  - **Labor and Industries**
  - **Corrections**
- Agencies implement determinations of the HTA program within their existing statutory framework.




## HTA program purpose

Ensure medical treatments, devices and services paid for with state health care dollars are safe and proven to work.

- Provide resources for state agencies purchasing health care
- Develop scientific, evidence-based reports on medical devices, procedures, and tests.
- Facilitate an independent clinical committee of health care practitioners who determine which medical devices, procedures, or tests meet safety, efficacy, and cost tests.




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- The 2018 committee calendar lists the following meetings:
- **March 16, 2018**
    - Gene expression profile testing for cancer tissue
  - **May 18, 2018**
    - Surgical interventions for symptomatic lumbar radiculopathy
    - Pharmacogenetic testing for patients being treated with anticoagulants
  - **July 13, 2018**
    - Meeting by webinar
  - **September 21, 2018**
    - Committee retreat
  - **November 16, 2018**
    - TBD
- The Washington State Health Care Authority logo is visible in the top right corner.



## To participate...

- Visit the HTA Web site:  
[www.hca.wa.gov/about-hca/health-technology-assessment](http://www.hca.wa.gov/about-hca/health-technology-assessment)
- Sign up to receive HTA program notifications via email
- Provide comment on:
  - Proposed topics
  - Key questions
  - Draft & final reports
  - Draft decisions
- Attend HTCC public meetings/ present comments directly to the clinical committee.
- Nominate health technologies for review.



## Thank You

**More Information:** [www.hca.wa.gov/hta](http://www.hca.wa.gov/hta)

**Email:** [shtap@hca.wa.gov](mailto:shtap@hca.wa.gov)



## Health Technology Clinical Committee

**Date:** July 14, 2017

**Time:** 9:00 am – 9:45 am

**Location:** Webinar and Pear Conference Room 127, Cherry Street Plaza  
626 Eighth Ave. SE, Olympia

**Adopted:**

**Meeting materials and transcript are available on the HTA website at:**  
[www.hca.wa.gov/about-hca/health-technology-assessment/meetings-and-materials](http://www.hca.wa.gov/about-hca/health-technology-assessment/meetings-and-materials)

### Draft HTCC Minutes

**Members present:** John Bramhall, MD, PhD; Gregory Brown, MD, PhD; Joann Elmore, MD, MPH; Chris Hearne, RN, DNP, MPH; Laurie Mischley, ND, PhD, MPH; Carson Odegard, DC, MPH; Sheila Rege, MD; Seth Schwartz, MD, MPH Christopher Standaert, MD; Kevin Walsh, MD; Tony Yen, MD

### HTCC Formal Action

1. **Call to order:** Dr. Standaert, chair, called the meeting to order; members present constituted a quorum. The meeting was conducted by means of a webinar and telephone conference call. All decisions were via roll call and voice vote.
2. **May 19, 2017 meeting minutes:** Draft minutes reviewed; no changes or updates suggested. Motion made to approve May 19, 2017 minutes as written, seconded. Committee voted to accept the minutes.

*Action: Ten committee members approved the May 19, 2017 meeting minutes.*

3. **Selected treatments for varicose veins – Draft findings and decision:** Chair referred members to the draft findings and decision and called for further discussion. Clarifying language was added to the **Indications** portion of the determination. As amended it reads,

*“Indications (required to be present):*

- *Demonstrated reflux in the affected vein AND*
- *Minimum of 3 months of symptoms of pain and/or swelling sufficient to interfere with instrumental ADLs, or presence of complications (e.g. ulceration, bleeding, recurrent thrombophlebitis).*
- *For tributary varicose veins, the above two conditions must apply and they must have a diameter  $\geq 3$  mm.”*

Two comments were received on the draft decision. The committee reviewed and discussed the comments.

**Draft**

*Action: Eleven committee members voted to approve the selected treatments for varicose veins findings.*

**Treatments for chronic migraine and chronic tension-type headaches:** Chair referred members to the draft findings and decision and called for further discussion. One communication contained multiple comments. The committee reviewed and discussed the individual comments.

A second response suggested revision to the first paragraph and line under, **Limitations of Coverage**, defining chronic migraines. The committee reviewed and agreed with the suggested change. As amended, it reads,

*“For treatment of chronic migraine (as defined by the International Headache Society)...”*

An additional comment addressed the final line on the determination. The committee reviewed and agreed with the suggestion for clarification. As amended, it reads,

*“Maximum of five treatment cycles. Additional treatment cycles may be considered at agency discretion.”*

*Action: Eleven committee members voted to approve the Treatment of chronic migraines and chronic tension type headaches findings and decision.*

5. Meeting adjourned.