Decision Support and Primary Comparative Effectiveness Research

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Patient-Centered Outcomes Research Institute

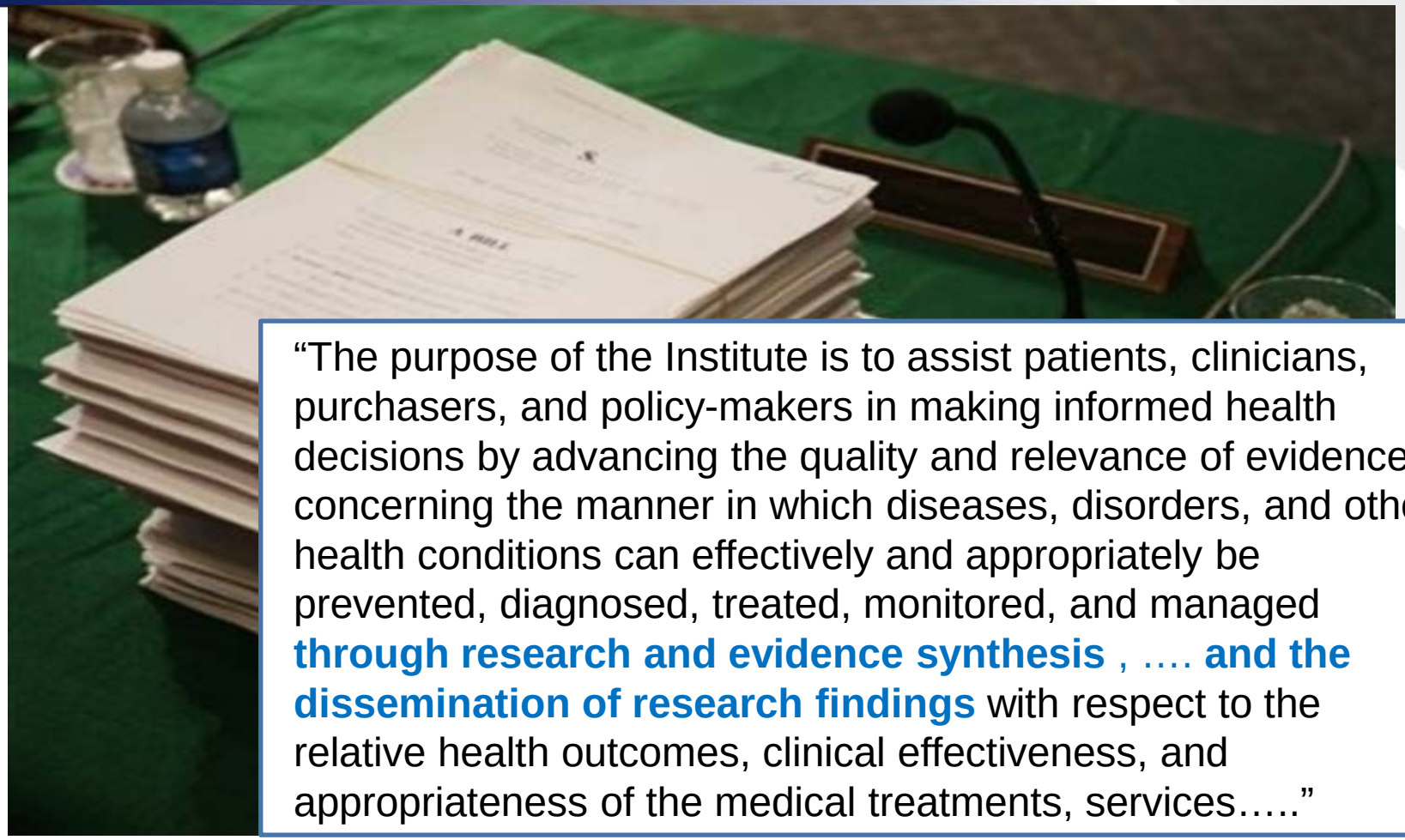
Strategic Issue and Questions

Issue: In the first 3 funding cycles, PCORI has received and funded relatively large numbers of studies that evaluate decision support, either for patients or for shared decision-making (patients, family members, clinicians).

Questions:

- Is there a sense on the Board of the optimal ratio of decision support studies to **“**primary” CER studies?
- Are PCORI’s proposed strategies for increasing the numbers of primary CER studies likely to be effective, sufficient?
- Are there further questions that need analysis?

PCORI's Purpose
(*from Patient Protection and Affordable Care Act)*



"The purpose of the Institute is to assist patients, clinicians, purchasers, and policy-makers in making informed health decisions by advancing the quality and relevance of evidence concerning the manner in which diseases, disorders, and other health conditions can effectively and appropriately be prevented, diagnosed, treated, monitored, and managed **through research and evidence synthesis** , …. **and the dissemination of research findings** with respect to the relative health outcomes, clinical effectiveness, and appropriateness of the medical treatments, services….."

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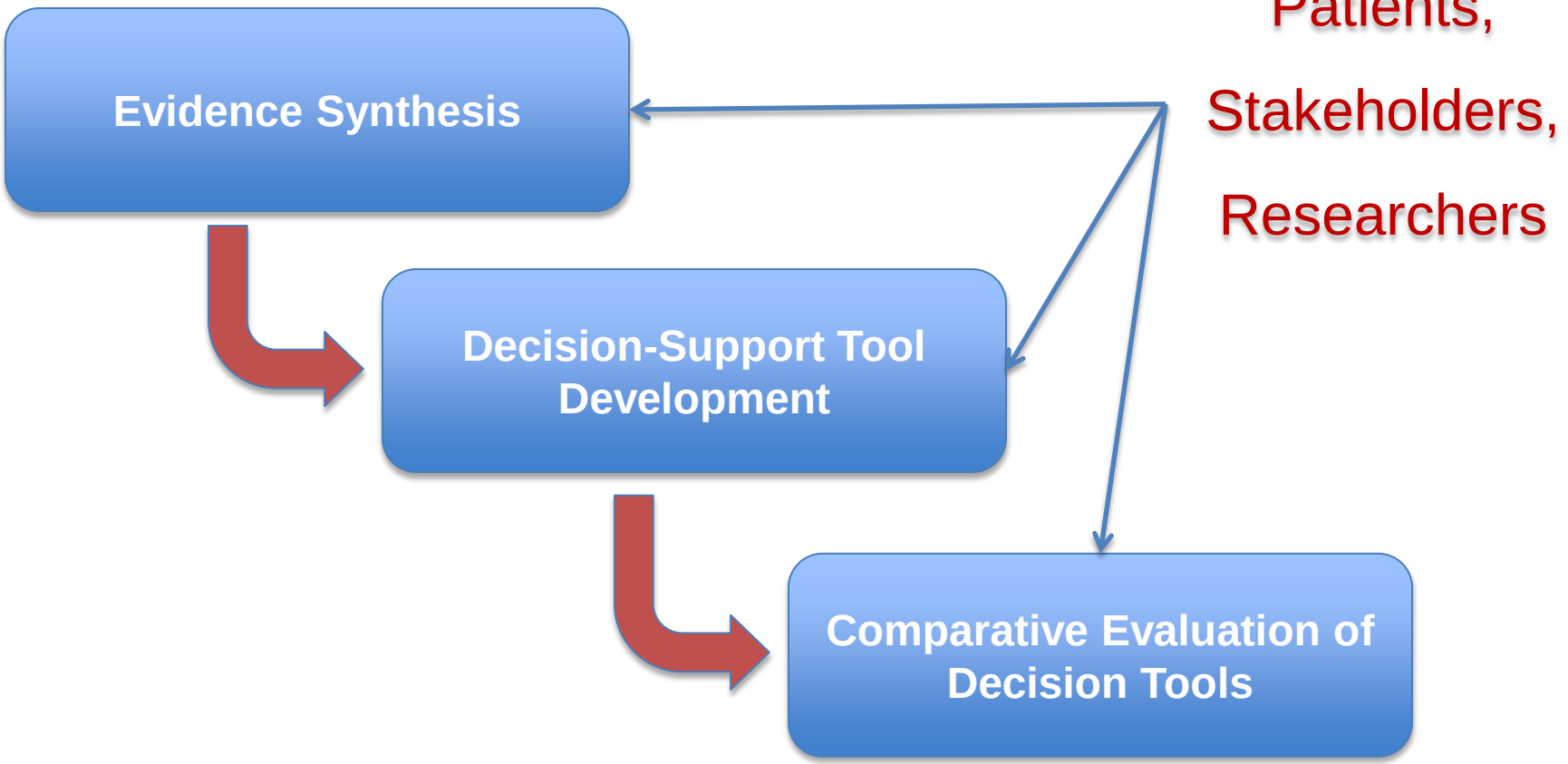
Common Study Design



Decision-making projects: First Three Funding Cycles

Program	DM projects	Total projects (N)	Proportion DM (%)
Clinical Effectiveness	21	53	40%
Disparities	1	23	4%
Communication/ Dissemination	12	20	55%
Health Systems	3	32	9%
Totals	**37**	**128**	**29%**

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Two Views of the Problems Patients Face

- Not enough information on the shelf
- Large gaps in knowledge
- Poor quality evidence
- Need for more and better quality research information

- Plenty of information on the shelf
- Not synthesized or presented in useful ways at point of decision-making
- Shared decision-making needs to be expanded and supported

Assessment and Proposed Actions

- **ASSESSMENT**:

  Both evidence generation (primary CER) and evidence synthesis/decision support are essential parts of a patient-centered CER program.

- **PROPOSED ACTIONS**:

  - Strengthen PCORI'S portfolio in decision support research through active management
  - Take steps to increase PCORI'S portfolio of primary comparative evaluations of prevention, diagnostic, and treatment and management options

Proposed Steps to Strengthen PCORI's Decision Support Portfolio

- Carefully assess PCORI's current portfolio of decision-support projects, looking for common approaches and themes, identify remaining questions and gaps
- Assess the current activity of other funders in decision support
- Conduct landscape review and workshop on decision-making in health care with Methodology Committee to develop a framework to guide solicitations and portfolio management
- Modify funding announcements to clarify what we are and are not looking for in future decision support research

Introducing Hal Sox – Senior Advisor (Independent Consultant)

- To provide advice on development of a conceptual and operational framework for comparative research in decision support

Proposed Steps to Increase PCORI's Portfolio of Primary CER Studies

- Issue broad, standing funding announcements devoted solely to pragmatic, head-to-head comparison studies
- Feature increased funding levels, longer studies
- Emphasize high-priority questions, strong engagement with relevant stakeholder groups
- Target date for release of first announcement: mid-January 2014

Discussion

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- Are PCORI’s proposed strategies for increasing the numbers of primary CER studies likely to be effective, sufficient?
- Are there further questions that need analysis?