

# **Listening to Purchasers, Payers, and Industry: Meeting Stakeholder Needs for Comparative Effectiveness Research**

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**January 28, 2016**



PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

# Welcome

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We welcome your questions and comments via the chat function on the right side of your screen



We welcome your comments via Twitter to @PCORI and #PCORI



An archive of this webinar will be posted to <http://www.pcori.org/events/2016/listening-purchasers-payers-and-industry-meeting-stakeholder-needs-comparative> following this event.



If we are unable to address your question during this time, please e-mail your question to us at [surveys@pcori.org](mailto:surveys@pcori.org)



# Introductions

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## Moderators:

- Lori Frank, PhD, PCORI, Program Director Evaluation and Analysis
- William Silberg, PCORI, Director of Communications



## Presenters:

- Thomas Concanon, PhD, RAND, Senior Policy Researcher, Faculty Member, Pardee RAND Graduate School



## Discussant:

- Joanna Siegel, MS, ScD, PCORI, Director Dissemination and Implementation



# Introductions

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## Panelists:

- Thomas Parry, PhD, Integrated Benefits Institute (IBI), Purchaser Stakeholder
- Derek Robinson, MD, MBA, FACEP, Health Care Service Corporation (HCSC), Payer Stakeholder
- Randy Burkholder, Pharmaceutical Research and Manufacturers of America (PhRMA), Industry Stakeholder



# Agenda

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- Introduction to PCORI
- RAND Project Background & Objectives
- RAND Project Approach
- Key Project Findings
- Implications for PCORI & Stakeholders
- Panel Discussion & Questions



# Introduction to PCORI



PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE

# About PCORI

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- An independent research institute authorized by Congress in 2010
- Funds patient-centered comparative effectiveness research (PC-CER) that engages patients and other stakeholders throughout the research process
- Seeks answers to real-world questions about what works best for patients based on their circumstances and concerns



# PCORI - Our Mission

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PCORI helps people make **informed health care decisions**, and improves health care delivery and outcomes, by producing and promoting high integrity, evidence-based information that comes from **research guided by patients, caregivers and the broader health care community.**





# We Fund Patient-Centered Comparative Effectiveness Research

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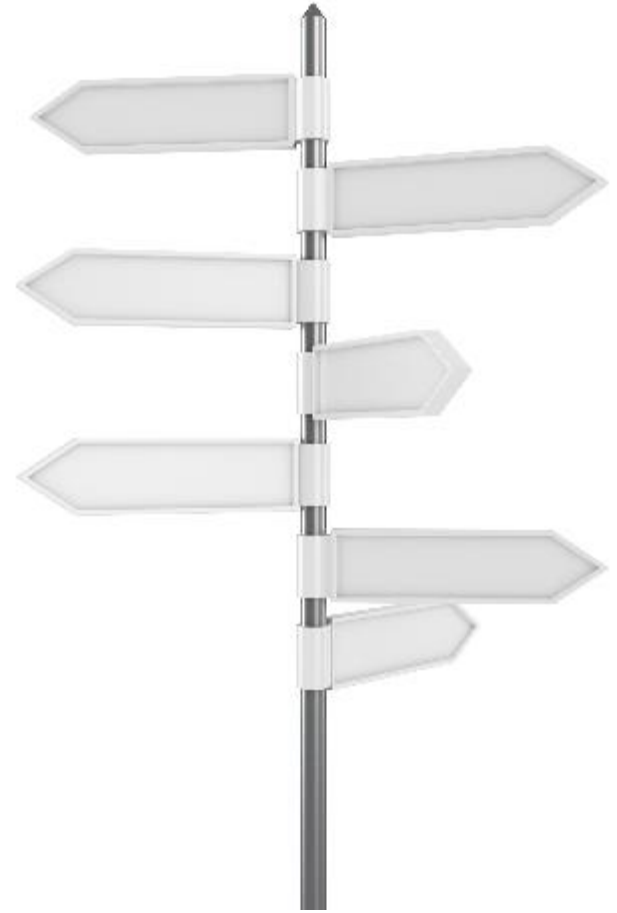
- Measures benefits in real-world populations
- Describes results in subgroups of people
- Generates and synthesizes evidence comparing benefits and harms of at least two different methods to prevent, diagnose, treat, and monitor a clinical condition or improve care delivery
- Helps consumers, clinicians, purchasers, and policy makers make informed decisions that will improve care for individuals and populations
- Informs a specific clinical or policy decision



# How is Our Work Different?

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- We fund research on which care options work, for whom, under which circumstances.
- We focus on answering questions most important to patients and those who care for them.
- We aim to produce evidence that can be easily applied in real-world settings.
- We engage patients, caregivers, clinicians, insurers, employers and other stakeholders throughout the research process.
- This makes it more likely we'll get the research questions right and that the study results will be useful and taken up in practice.



# Who Are Our Stakeholders?

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# Research Presentation Agenda

- Project Objectives
- Approach
- Key Findings
- Implications



The background of the slide is a dense, light gray pattern of various mathematical symbols, equations, and diagrams. These include algebraic expressions like  $E=mc^2$ ,  $F=ma$ , and  $V=IR$ , as well as geometric shapes like circles and triangles, and other symbols like  $\pi$ ,  $\phi$ , and  $\infty$ . The text is overlaid on a solid dark blue rectangular area.

# PROJECT OBJECTIVES

# PCORI identifies nine stakeholder “communities” who have an important role to play in CER



# The views of patients, caregivers, clinicians and researchers have been studied in prior PCORI contracts



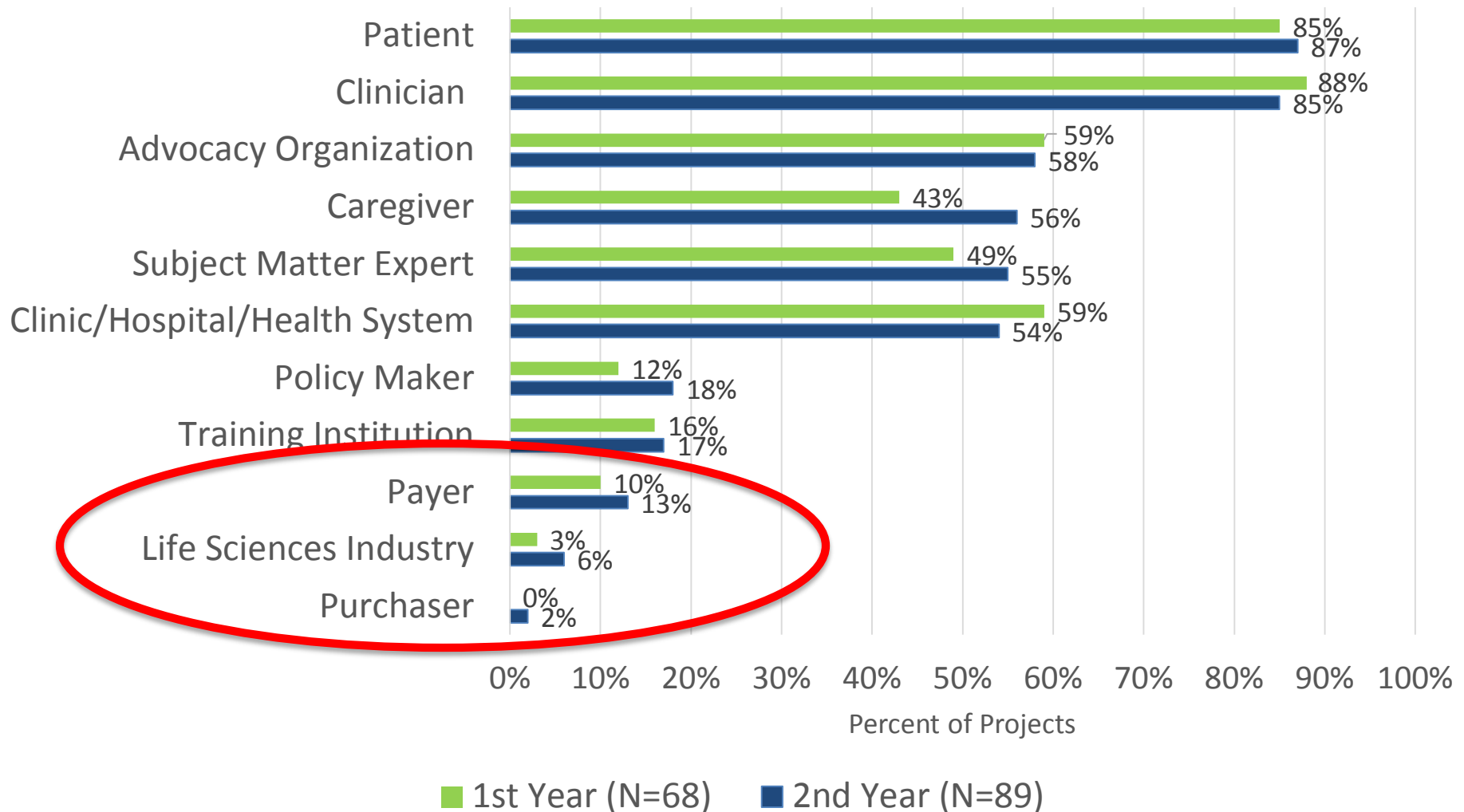
# PCORI contracted with RAND to understand the perspectives of purchasers, payers and industry





# Who is Engaged?

*Researchers reported on the communities engaged in their projects in the last year*





# APPROACH

# We conducted 10 telephone and web-enabled focus groups with each community

n=75



## Purchasers

Small employers  
(<50)

Medium-sized (50-  
500)

Large employers  
(>500)

Business coalitions



## Payers

Public payers

Private payers

Integrated payers



## Industry

Device and diagnostics  
manufacturers

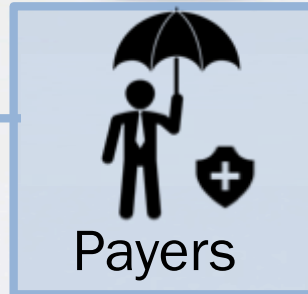
Biopharmaceutical  
manufacturers

Durable medical  
equipment  
manufacturers

# A total of 75 participants across the 10 discussions

	Purchasers				Payers			Industry			
	Large Employers	Medium-sized Businesses	Small Businesses	Business Coalitions	Public Insurers	Private Insurers	Integrated Payer	Bio-Pharmaceutical	Device & Diagnostics	Durable Medical Equipment	Total
Total contacted	60	95	45	35	75	92	125	24	26	54	631
Agreed to participate	7	8	8	10	8	9	8	10	9	10	87
Completed pre-focus group survey	6	4	4	9	7	6	7	9	7	7	65
Participated in focus group discussions	7	6	6	9	8	7	7	9	7	9	75

## Focus group protocol and surveys explored:



- **Health decisions** they make in their work
- **Information** they use to inform decisions
- Factors influencing their **involvement** in research
- **Familiarity** with CER and PCOR
- **Views** on PCORI mission, research, and initiatives
- **Perspectives** on the value of CER

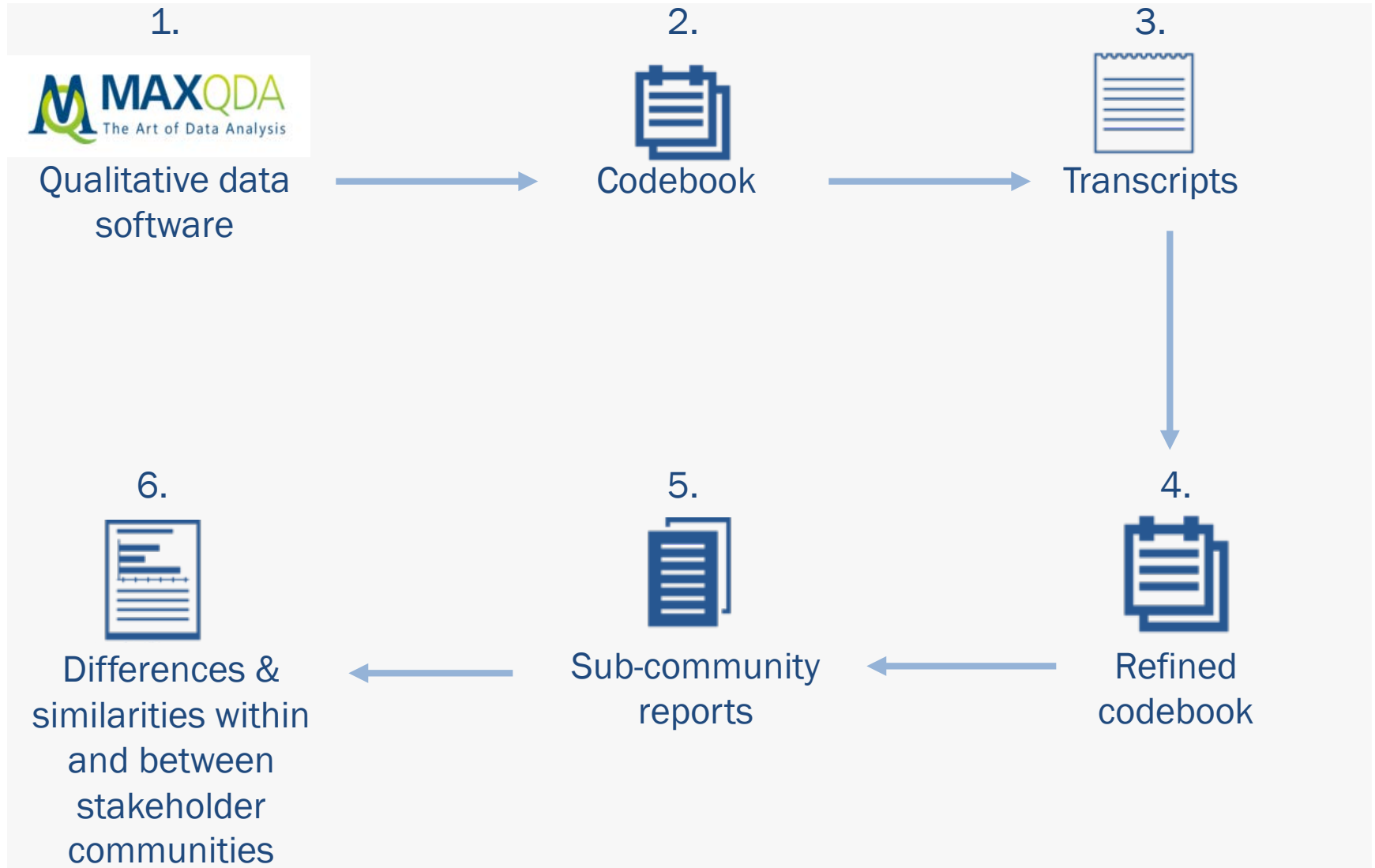


# A rigorous approach to data collection



- Pilot tested focus group discussion guides
- Collected data in stages
- Refined discussion guides as needed
- Audio recorded and transcribed discussions

# Data were coded and analyzed





# KEY FINDINGS



# 1. All stakeholder communities make a variety of health decisions...



Purchasers

- Health benefits
- Health plan selections



Payers

- Coverage decisions
- Setting co-pays
- Network inclusion



Industry

- Product coverage and reimbursement
- Targeted treatment for sub-populations
- Product use
- Product investment

## ...but seek information from different sources



Clinical Literature	✓	✓	✓
Expert Reviews		✓	
Demonstration Projects			✓
Registries			✓
Administrative Records		✓	✓
Professional Guidelines	✓		
Self-funded research	✓	✓	✓
Benefits Counselors	✓		

## 2. Familiarity with CER was high among payers and industry but mixed among purchasers

15 of 28 familiar  
with CER



Purchasers

Already familiar with CER



Payers

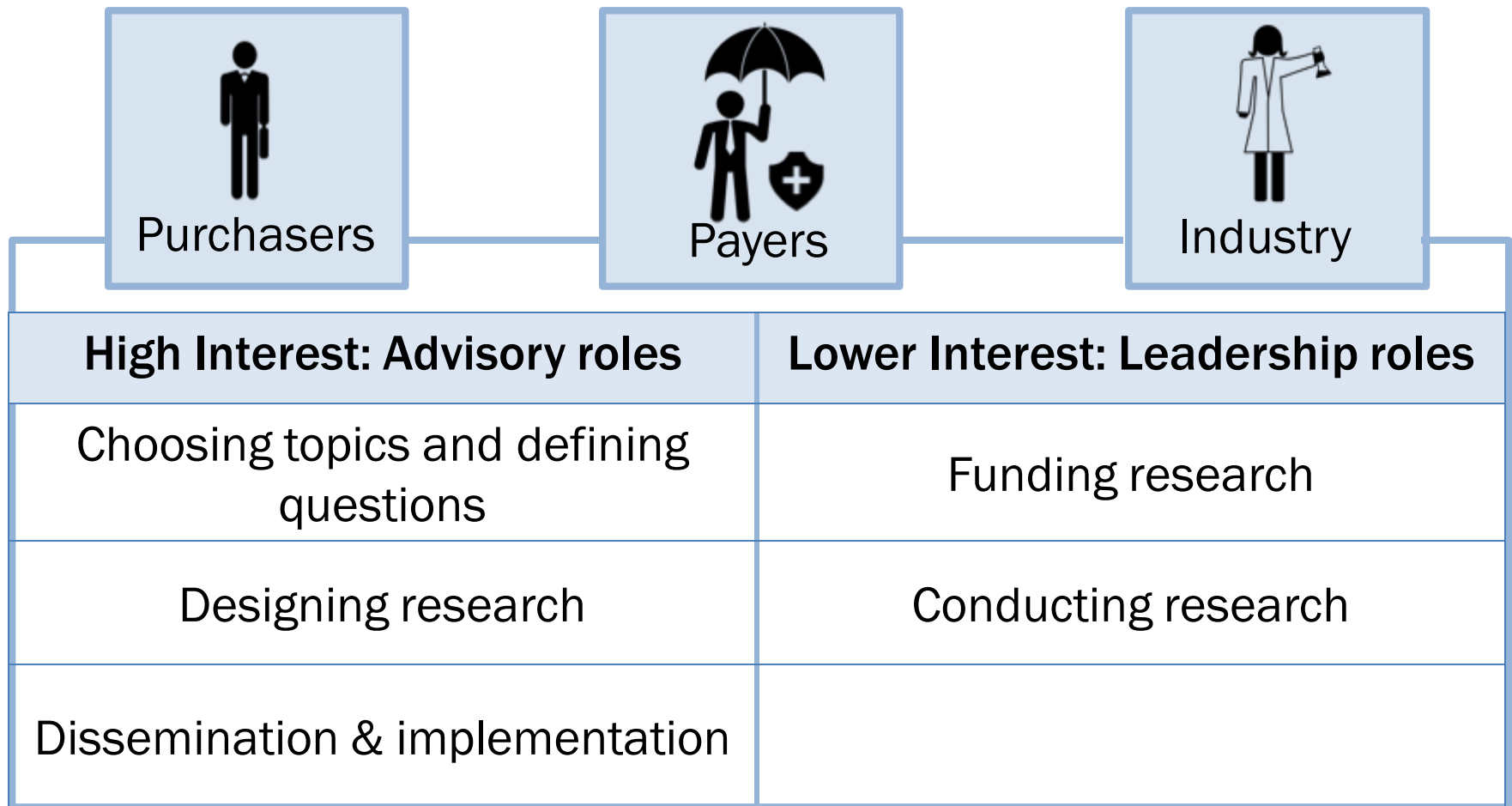


Industry

- **All groups:** CER could support a number of health care-related decisions
- **Purchasers and payers:** make coverage decisions and care recommendations for specific populations
- **Industry representatives:** use of products in the real world, identifying sub-populations for whom a product is more (or less) effective, investment decisions

### 3. Involving these stakeholder communities may be difficult unless CER is aligned with business interests

**in•volve•ment:** stakeholders may serve on research projects as partners, staff, consultants, or advisors and be involved in every stage of research



## 4. All stakeholder communities support PCORI's mission...

*PCORI helps people make informed healthcare decisions, and improves healthcare delivery and outcomes, by producing and promoting high-integrity, evidence-based information that comes from research guided by patients, caregivers, and the broader healthcare community.*



Purchasers



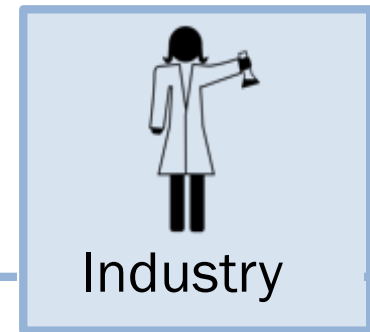
Payers



Industry

- Patient-centeredness and multi-stakeholder approach
- Benefit to patients and clinicians
- Too broad in scope and lack of emphasis on translation

## 5. All agree PCORI's CER should prioritize prevalent and high-cost conditions



- Cancer
- Cardiovascular conditions
- Multiple chronic co-morbidities

- Autism
- Mental and behavioral health
- Diabetes
- Musculoskeletal

## 6. Priority populations resonated with some payers, but less with purchasers and industry stakeholders



Purchasers

- Workforce composition
- Pre-/post-retirement
- Multiple chronic comorbidities



Payers

- Racial and ethnic minorities
- Persons with disabilities
- Large and integrated payers: LGBT



Industry

- Recognized that priority populations “reflect public health priorities”
- Focus on all patients eligible for care except when oversampling is needed

## 7. All viewed “real world” studies useful, but had different opinions on design elements

Most approved large study samples, randomized study designs, studying interventions in usual care settings

### Opinions on Design

### Early Dissemination



Purchasers

Outcomes might include return-to-work measures

Appreciate dissemination of early results



Payers

What does “usual care” entail for particular populations?

Cautious about early dissemination



Industry

Additional information about study design may be useful

Publishing interim findings should be considered on individual study basis



## 8. Familiarity with PCORnet was mixed to low



Purchasers  
**Low**  
familiarity



Payers  
**Mixed**  
familiarity



Industry  
**Mixed**  
familiarity

# But reception was positive once PCORnet was described

- New types of data
- Large-scale studies with limited resources
- Comparative analyses of care, interventions and outcomes

## Topics



### Purchasers

Provider measurement  
Benefit design  
Network design  
Formulary development  
Smoking cessation



### Payers

Knee and hip  
replacement criteria



### Industry

Device information in  
EHR infrastructure

## 9. All communities saw value in CER for patients, providers, other stakeholders



The value of CER was considered especially high when design, implementation and translation are carefully tuned to the needs of each stakeholder group.

### Uses of CER



#### Purchasers

Benefits consultants  
Consumer health care decisions



#### Payers

Rx benefits  
Payment policy  
Care guidelines



#### Industry

High-value product investment  
Patient satisfaction

# 10. Cost information is important in decisions made by purchasers and payers

The anticipated absence of cost information in PCORI-funded CER was considered a roadblock to its usefulness



Purchasers

Cost and cost effectiveness

Value

Employer involvement



Payers

Value

Patient-centeredness

Payer Involvement



Industry

Endorsed restrictions on cost effectiveness analysis

Produce economic information for payers

# Implications for PCORI & Stakeholders

**Joanna Siegel, MS, ScD**

PCORI's Director of Dissemination & Implementation



# Panel Discussion



**Thomas Parry**  
Purchaser  
Representative



**Derek Robinson**  
Payer  
Representative



**Randy Burkholder**  
Industry  
Representative



# Thank you!

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- Acknowledgements
  - The RAND Corporation
  - The National Pharmaceutical Council
  - Focus Group Participants
  - Webinar Panelists
- Stay current with email alerts at <http://www.pcori.org/home/signup> and follow us on Twitter @PCORI
- Please find the RAND Final Report [here](#)
- Please send questions or comments to:  
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