



Should the US Establish a Coordinated Technology Assessment Capability? How Should Future Efforts be Organized?

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April 4, 2006



Globalize the Evidence Localize the Decision

AHCPR



Overview

- **What is AHRQ?**
- **Effective Health Care Program**
- **Important Considerations**
- **Questions**



AHRQ focuses on the Health Care System

- Assess the *effectiveness, comparative effectiveness, and cost-effectiveness* of health care services
- Identify ways to improve *patient safety and quality* of health care systems
- Advance the appropriate use of *health information technology*
- Understand *system issues*: role of organizational design, management, workflow, management, and incentives on efficiency and effectiveness
- Develop *data* on the health care system for monitoring and decision-making



AHRQ: Strategic Redirection

Accelerating the Pace of Innovation

- ***Ensuring Value*** through More Informed Choice
- ***Assessing*** Innovation ***Faster***
- ***Implementing*** Effective Interventions ***Sooner***



Cesarean Delivery on Maternal Request



DRAFT STATEMENT
March 29, 2006
5:50 PM

NATIONAL INSTITUTES OF HEALTH
STATE-OF-THE-SCIENCE CONFERENCE STATEMENT
Cesarean Delivery on Maternal Request
March 27–29, 2006

NIH consensus and state-of-the-science statements are prepared by independent panels of health professionals and public representatives on the basis of (1) the results of a systematic literature review prepared under contract with the Agency for Healthcare Research and Quality (AHRQ), (2) presentations by investigators working in areas relevant to the conference questions during a 2-day public session, (3) questions and statements from conference attendees during open discussion periods that are part of the public session, and (4) closed deliberations by the panel during the remainder of the second day and morning of the third. This statement is an independent report of the panel and is not a policy statement of the NIH or the Federal Government.

The statement reflects the panel's assessment of medical knowledge available at the time the statement was written. Thus, it provides a "snapshot in time" of the state of knowledge on the conference topic. When reading the statement, keep in mind that new knowledge is inevitably accumulating through medical research.

Cesarean Delivery on Maternal Request, AHRQ Evidence-based Practice Center: RTI-University of North Carolina, March 2006



C-Section Headlines

- Are doctors performing too many C-sections? – *Newsweek*
- C-Section Births Gaining Popularity – *National Public Radio*
- Advice for pregnant women considering scheduled and medically unnecessary cesarean sections – CBS Healthwatch
- NIH Panel Finds No Extra Risk in Caesarean Section – *The Washington Post*
- Trying to Avoid 2nd Caesarean, Many Find Choice Isn't Theirs – *The New York Times*

\$95 billion/year on research

- The U.S. spends 6 cents of every health care dollar on bio-medical research
- We only spend 1/10 of a cent of every dollar on longer-term evaluation of which drugs and treatments work best at the lowest cost



Moses et al
9/21/05
JAMA
Study



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Medicare Modernization Act

Section 1013

- To improve the quality, effectiveness and efficiency of health care delivered through Medicare, Medicaid and the State Children's Health Insurance programs
- AHRQ will conduct and support research with a focus on outcomes, comparative clinical effectiveness and appropriateness of health care items and services (including pharmaceutical drugs), including strategies for how these items and services are organized, managed and delivered



Effective Health Care Program

- **Goal:** Develop evidence on the comparative effectiveness of different treatments and appropriate clinical approaches to high-priority health problems
- AHRQ has started the first phase of 10 research reviews that will provide scientific-based information on the effectiveness of health care interventions, including prescription drugs, to enhance decision-making by Medicare policymakers, beneficiaries, and providers
- AHRQ's Evidence-based Practice Centers will conduct the reviews

Working Definitions

■ Effectiveness

- Can it work?
- Does it work in practice?
- Is it worth it?

Haynes B. Can it work? Does it work? Is it worth it?

*BMJ*1999;319: 652-3

■ Comparative Effectiveness

- Comparison of the effectiveness of various treatments and procedures - looking at which treatments for specific clinical problems work best for whom



Top 10 Conditions Affecting Medicare Beneficiaries

- \$15 million initiative, authorized by MMA Section 1013, to develop state-of-the-art information about effectiveness of interventions, including prescription drugs, for top 10 conditions affecting Medicare beneficiaries:

Arthritis and non-traumatic joint disorders

Cancer

Chronic obstructive pulmonary disease/asthma

Dementia, including Alzheimer's disease

Depression and other mood disorders

Diabetes mellitus

Ischemic heart disease

Peptic ulcer/dyspepsia

Pneumonia

Stroke, including control of hypertension



Effective Health Care Program



Review / compare
existing evidence
(Evidence Practice Centers)



Comparative Effectiveness Review: Gastroesophageal Reflux Disease

- **Major Finding:** Drugs can be as effective as surgery for management of gastroesophageal reflux disease (GERD)
- GERD is one of the most common health conditions among older Americans, causing heartburn and potential damage to the esophagus
- Report is first from AHRQ's new effective health care program that compares alternative treatments for health conditions



Effectiveness of Noninvasive Diagnostic Tests for Breast Abnormalities

- **Major Finding:** Four common noninvasive tests for breast cancer are not accurate enough to routinely replace biopsies for women who received abnormal findings from a mammogram or physical exam
 - May miss about 4 – 9% of cancer cases among women testing negative who have average risk for the disease
- **Common noninvasive tests:**
 - Magnetic resonance imaging
 - Ultrasonography
 - Positron emission tomography scanning
 - Scintimammography



Effective Health Care Program



Review / compare
existing evidence
(Evidence Practice Centers)

Accelerate
practical studies
(DEcIDE Network)



DEcIDE Research Network

- Will expeditiously develop valid scientific evidence about outcomes, comparative clinical effectiveness, safety, and appropriateness of health care items and services
- Network of academic, clinic, and practice-based centers with access to electronic health information databases and capacity to conduct accelerated research



Guide for Patient Registries

- **Effective Health Care Program:**
AHRQ is developing a “how-to” **reference guide** to help health care organizations create patient registries to track the outcomes of medical treatments, including drugs
 - Provides criteria for evaluating registries and the quality of their data
 - Provides guidance on how registry data can be used to conduct valid scientific research



Effective Health Care Program

Translate evidence into improvements
*(Eisenberg Clinical Decisions &
Communications Science Center)*



Review / compare
existing evidence
(Evidence Practice Centers)

Accelerate
practical studies
(DEcIDE Network)



Clinical Decisions and Communication Science Center

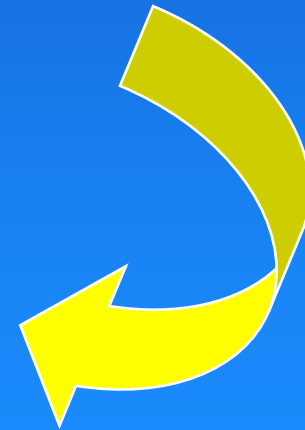
- Translate scientific evidence and make it accessible to patients, providers, and policy-makers to promote informed health choices
- Conduct research to communicate complexities of decision-making and inform development of health care information products and decision aids
- Construct prototypes for decision aids and house MMA 1013 related decision aids

Clinical Decisions and Communication Science Center



Facilitate Informed Health Care Decisions by:

- Patients
- Providers
- Policymakers





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U.S. Technology Assessment Capability: Challenges

- Asking the right questions
 - Clinical uncertainty remains major driver
 - Intervention *and* application
- Addressing the needs of multiple audiences
 - Growth of consumer-directed options *
- *Process* – and product
 - Supply side capacity exceeds informed demands



Improving the quality of clinical research will depend on more active involvement of clinical and health policy decision makers in all aspects of clinical research, including priority setting, study design, study implementation, and funding.



Coordinated U.S. Technology Assessment Capability

- Why doesn't it currently exist?
 - Fear
 - Limited Transparency
- National vs. Local?
 - Variation
 - Who should do what?
- Role of Health IT
 - Potential for Increased Transparency
 - Data Aggregation



No National TA Program: Pros and Cons

Pros

- Regional variation allows for adjustment to different patient populations, clinical services, and specialties.
- Federalism: Devolving power to the States and local jurisdictions
- Free enterprise

Cons

- Industry may not have access to the "rules" and "processes" that go into regional assessments
- Transparency may be lost
- Different standards for evidence

Personalized Medicine

- Pillars of Translation
 - Discovery
 - Development
 - Regulation
 - Delivery/Practice





Important Opportunities

- Common information infrastructure for care improvement and surveillance, observational studies, registries?
- Strategy for rapid response to decision makers' needs for information
- Practical clinical trials
- Link to maintenance of certification
- Rapid-cycle evaluation that keeps up with technological innovation
- Can we address quality (doing it well) and comparative effectiveness concurrently?



Requirements

- “Harmonization”
- Methods, methods, methods
- Clarification of outputs
 - Clinical decision support
 - Decision aids for individuals
- Continuous updating



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Your questions?