This work was supported through a Patient-Centered Outcomes Research Institute (PCORI) Program Award (EA-2159-CHPD).

National Academy For State Health Policy Learning Collaborative

From Engagement to Evidence: Using PCOR and CER to Inform State Policymaking

For audio, please dial: (866) 740-1260
Access Code: 2383339

September 16, 2015
1:00-2:00pm Eastern
Agenda

- Introductions
- New learning collaborative opportunity goals
- Benefit to states
- What we expect from state teams
- Request for applications
- Key dates
- Questions & answers
Introductions

- **Patient-Centered Outcomes Research Institute (PCORI) staff**
  - Suzanne Schrandt, JD, Deputy Director, Patient Engagement
  - Greg Martin, BA, Deputy Director, Stakeholder Engagement

- **Center for Evidence-based Policy (CEbP) staff**
  - Adam Obley, MD, Clinical Epidemiologist
  - Martha Gerrity, MD, MPH, PHD, Clinical Evidence Specialist
  - Mark Gibson, Director Emeritus

- **National Academy for State Health Policy (NASHP) staff**
  - Mary Takach, RN, MPH, Senior Program Director
  - Jennifer Reck, MA, Project Director
  - Felicia Heider, Research Analyst
  - Hannah Dorr, Research Analyst

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PCORI’s Mission

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.
National Priorities for Research

- Assessment of Prevention, Diagnosis, and Treatment Options
- Improving Healthcare Systems
- Communication & Dissemination Research
- Addressing Disparities
- Accelerating PCOR and Methodological Research
Engaging Patients at Every Step

- Topic Selection and Research Prioritization
- Merit Review
- Evaluation
- Study Design/Implementation
The Engagement Rubric

The rubric is intended to provide guidance to applicants, merit reviewers, awardees, and engagement/program officers (for creating milestones and monitoring projects) regarding patient and stakeholder engagement in the conduct of research. *It is divided into four segments:*

- Planning the Study
- Conducting the Study
- Disseminating the Study Results
- PCOR Engagement Principles
About CEBP

- The **Center for Evidence-based Policy (CEbP)** is a national leader in evidence-based decision making and policy design. CEbP works with federal, state and local policymakers in more than 20 states to use high-quality evidence to guide decisions, maximize resources and improve health outcomes.

- Established in 2003 by Oregon Governor John Kitzhaber, M.D., the Center works with a wide range of stakeholders to improve public policy through innovation, collaboration, and use of best evidence.

- CEbP is housed at the Oregon Health & Science University.
About NASHP

- The National Academy for State Health Policy (NASHP) is an independent academy of state health policymakers.

- A non-profit and non-partisan organization, NASHP provides a forum for constructive work across branches and agencies of state government on critical health issues.

- 28 years of experience engaging and providing assistance to state health policymakers.

- NASHP has previously worked with PCORI:
  - “A Roadmap for State Policymakers to Use Comparative Effectiveness and Patient-Centered Outcomes Research to Inform Decision Making”; and
  - “Programs Supporting the Use of Comparative Effectiveness Research and Patient-Centered Outcome Research by State Policymakers”
Three states will be selected through the RFA to participate in the learning collaborative:

Primary goals:
- Increase the use of evidence, including PCOR and CER within state health policy decision making
- Establish a structure for inter-agency collaboration on the use of this research
- Develop a strategy for the meaningful engagement of the patient in program and policy development within various state agencies
What PCOR is – and is Not

✓ **Comparative Effectiveness Research (CER)** refers to research designed to compare the effectiveness of different interventions, examining the risks and benefits of several treatment interventions, supporting consistent and rational decision making, and improving the delivery of care.¹

✓ **Patient-Centered Outcomes Research (PCOR)** refers to research that assesses the benefits and harms of different interventions while also including an individual’s preferences and needs, focusing on those outcomes of most value to the patient.²

✖ **Cost Effectiveness:** PCORI will consider the measurement of factors that may differentially affect patients’ adherence to the alternatives such as out-of-pocket costs, but cannot fund studies related to cost effectiveness, costs of treatments or interventions.

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² [http://www.pcori.org/research-results/research-we-support](http://www.pcori.org/research-results/research-we-support)
An overview of NASHP’s Roadmap

1. Identifying When Comparative Effectiveness and/or Patient-Centered Outcomes Research can Inform Policymaking
2. Finding Research and Other Relevant Resources
3. Evaluating the Evidence
4. Using the Evidence to Design a Program or Policy
5. Communicating and Disseminating the Decision
6. Monitoring and Evaluating New Research As It Becomes Available

State Team Benefits

• Individual and bimonthly technical assistance calls

• One in-person site visit from NASHP/CEbP to work with stakeholders from your state on project goals

• Ongoing access to NASHP and CEbP staff

• Four small group technical assistance webinars

• Assistance with stakeholder engagement

• Support from an electronic shared platform
What We Expect from State Teams

- Convene a project team with representation from a patient organization and multiple state agencies/organizations

- Complete a needs assessment describing the resources within their state and the specific challenges to address to meet the state’s identified goals

- Develop a work plan to identify actionable steps to achieve the goals

- Increase their knowledge and understanding of the use of evidence in policymaking, in particular PCOR and CER

- Establish a plan for cross-agency collaboration to ensure state agencies share research-related resources and review PCOR and CER decision-making process

- Agree on a strategy supporting the meaningful engagement of the patient in program and policy development for use across multiple agencies
1. Assemble state team*
2. Complete application questions
3. Draft work plan

* Please note NASHP convened a meeting on this topic in August 2014 with representatives from a variety of agencies in 26 states (AL, AR, CO, CT, IL, IN, IA, KS, KY, ME, MD, MA, MN, MO, NE, NV, NH, NM, ND, OH, OK, OR, PA, UT, VT, WV). If interested in connecting with representatives from your state who attended this meeting, please email fheider@nashp.org.
Assemble State Teams

Teams must include:

1) Representation from at least 2-3 state agencies and/or departments such as:
   • Medicaid (strongly recommended)
   • Public Health
   • State Employee Health Benefits
   • Workers’ Compensation
   • Department of Corrections
   • Department of Mental/ Behavioral Health
   • State Legislature
   • Governor’s health office
   • Academic institution

2) Patient or family partner or representation from a patient or family organization

3) Team lead

- May include other stakeholders deemed appropriate by the state
1. Where are you now?
   a. Please describe any work agencies in your state have done independently or in collaboration to support the use of research, including CER and PCOR, in policymaking.
   b. Describe any systems or structures in place to support this work that you can further develop or expand by participating in this learning collaborative. (For example, do you have any entities such as advisory groups or committees that convene to review research and make policy recommendations? Do you have any training in place to help staff use research when making policy decisions? Do you have any other systems or processes in place?)
   c. Describe any cross-agency collaborations you have in place to support the use of research in policymaking.
   d. Describe any work you have done to engage patients in program and policy development.

2. Where would you like to be? (Please use your answers to these questions to complete a draft work plan.)
   a. Please describe gaps in your state’s use of research, including CER and PCOR, to inform policymaking that this collaborative could help you address.
   b. Describe the kind of cross-agency collaboration you would like to develop to support the use of research in policymaking.
   c. Describe how you would like to better engage patients to support the use of research in policymaking.
The State work plan is intended to serve as a resource that will outline activities to meet state goals. If selected, states will complete a more detailed work plan to use throughout the duration of the learning collaborative.

State Work Plan Template

State: __________________________

This template, designed around the expected outcomes set forth in the Request for Applications, is meant to serve as a resource that will outline activities to achieve your goals. States selected to participate in the learning collaborative will develop a more-detailed work plan throughout the duration of the learning collaborative. This document must be submitted with a list of state team members and answers to application questions.

Key Objectives: Please list state-specific goals, if any, in addition to the three learning collaborative goals NASHP has listed below.

| 1. Increase the use of evidence, including PCOR and CER, within state health policy decision making |
| 2. Establish a structure for inter-agency collaboration on the use of this research |
| 3. Develop a strategy for the meaningful engagement of the patient in program and policy development within various state agencies |
| 4. |
| 5. |

1. **Increase the use of evidence, including PCOR and CER, within state health policy decision making**

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Key Dates

• **October 7, 2015**: Application deadline. Please email completed applications to Hannah Dorr, hdorr@nashp.org by 5:00 PM Eastern.

• **October 16, 2015**: Notification of state selection

• **November 2015**: Learning collaborative kick-off call

• **February 2017**: Learning collaborative activities end
Questions?

To ask a question please use the chat box on the left or press *7 to unmute your line.
This work was supported through a Patient-Centered Outcomes Research Institute (PCORI) Program Award (EA-2159-CHPD).

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Email questions to:
Felicia Heider (fheider@nashp.org) or Hannah Dorr (hdorr@nashp.org)

National Academy for State Health Policy: nashp.org