Day 1 Follow-Up: Panelist Suggestions and Final Topic Ranking

IHS Advisory Panel Meeting April 20, 2013 (Day 2)

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Use One Care Management Question (Version 1)

“What care management strategies are most effective for patients/persons with common, costly, and debilitating chronic health conditions?”

- Combine Topics 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 14, and 15
- Include the following in the PFA:
  a. PCORI is interested in comparative effectiveness studies comparing promising treatment options with each other or with usual care and focusing on outcomes important to patients, so no need to include in the question.

b. PCORI is interested in applications addressing care management strategies for a broad range of common, costly, and debilitating chronic conditions such as cancer, COPD, mental health conditions, and pain (including palliative care).

c. PCORI is interested in evaluations of a broad range of management strategies including those involving IT applications, use of multi-disciplinary care teams (including NPs, PAs, NDs, chiropractors, acupuncturists, etc..), medical home models, value-based benefit designs, etc...
What is the effect of alternate systems approaches to improving patient centered outcomes?

- **Specific conditions of interest:** Chronic conditions, including multiple chronic conditions; Cancer, including screening and survivorship; Pregnancy, including care for high risk populations; Palliative care

- **Particular systems approaches of interest:** Systems that enhance continuity and coordination such as patient-centered medical homes, Care-management approaches, EHR approaches, Caregiver support

- **Systems that enhance informed and shared decision making for individuals and their families:** Decision support based on individual risk/benefit and preferences, other IT approaches

- **Systems that motivate delivery of appropriate patient-centered care:** Decision support, incentives, performance measurement, feedback to patients and providers, care management

- **Systems that improve patient engagement in care and self-care:** Care management, peer support, caregiver support
Care management (Aligns with Topic 2,3,4,5,7)
- Compare two or more care management programs [models] for chronic health problems, in regard to patient centered outcomes, definitions and characteristics of the program, and perceptions of providers and patient/family regarding their definitions of and expectations for the program.

Care management strategies (Aligns with Topic 2,3,4,5,7)
- Compared to usual care, what is the short term effect of integrating family members, peer counselors or advocates into the care management team of patients with chronic or progressive conditions, disability, cancer or other potentially life-changing illness. What are the longer term effects?
- Compared to case or care management (clinician leadership with or without patient involvement), what would be the effect on patient satisfaction, quality, or health outcomes of patient directed care for patients that chose self-management (patient leadership)?
Use One Care Management Question (Version 4)

Compared to usual care, what is the effect of Patient- and Family-Centered Care adoptions by a system on readmissions and the non-emergency use of Emergency Departments?

Is there a relationship between adoption of Patient- and Family-Centered Care by a system and readmissions or non-emergency visits to emergency departments, compared to the usual care?
What are the relative effects of care coordination strategies (not sure if we should mention specific ones, but to be patient-centered we could include peer health coaching, the TCM, TCP act) on patient-centered outcomes among different delivery settings (ACOs, PCMH, etc..), insurance features (VBID, CDHP, act) or sub populations (minorities, low income, children with disabilities, etc..)?
Comparing Medical Home model A to Medical Home model B (with different organizational characteristics such as network structures and service populations), which model produces better PCOs with respect to: chronic disease management, pregnancy management, cancer management, COPD management, mental health care management, palliative care management, etc.?
Alternative Approach for Care Management

Alternative models of care (Aligns with topics 1, 2, 3, 4, 5, 6, 7, 8, 9)
- Does the medical care home/ACO/etc. decrease hospitalizations/change outcomes?
- What are the effects of a proposed best practice in a comparative study that impacts patient centered outcomes.

Quality of care and outcomes (Aligns with topic 13)
- What strategies are most effective for helping clinicians and other stakeholders understand the value of taking a patient-centered approach to improving service quality, clinical quality, and clinical outcomes?
Proposed New Questions

**Pregnancy care (Aligns with Topic 6)**
- Compare patient satisfaction, culture of safety surveys, and outcomes at two hospitals, or one hospital and one setting for delivery outside of a hospital (i.e. home or birthing center), that have demonstrated they exceed expected performance in prevalence of preterm birth, Cesarean section rate, and use of episiotomy and medical induction of labor.

**Interdisciplinary care (Aligns with Topic 9)**
- Are x (pharmacists, physician assistant, nurse practitioners) as effective as physicians in primary care?
- What is the difference between medical home models that use team based approach to deliver care versus physician led approach?
- Comparing a medical home with a non-physician medical home, which produces better PCOs?
Proposed New Questions Continued

Mental health co-location *(Aligns with Topic 10)*
- Is management of chronic medical conditions in patients with mental health diagnosis improved if mental health is in the same location as primary care services versus another location?

Quality of care and outcomes *(Aligns with Topic 13)*
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Proposed New Questions Continued

- **Effect of Insurance Features** *(Aligns with Topic 14)*
  - Compare rate of harm from hospital errors, infections, and injuries among in health plans designed to incentivize high-quality care.

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Transitions in Care and Patient Safety (Aligns with Topic 15)

- Compare two systemic approaches to medication management for patients moving between delivery settings.
  - For instance, one approach might assign a care manager at discharge in a hospital, another might involve use of smart phones and other technology, and another might link CPOE systems to community pharmacists for e-prescribing.

Transitions in Care and Patient Safety (Aligns with Topic 15)

- Compared to state of the art practices that focus only on providers, what is the effect of patient safety interventions whose goal is to also to include patients and their families in promoting safe practices in the hospital?
Day 2 Expert Choice Results: Topic Re-Ranking

- Patient-Empowering Care Management Strategies (Topics 2, 3, 4, 5, and 7 Combined)
- Transitions in Care and Patient Safety (Topic 15)
- Perinatal Management (Topic 6 Renamed)
- Mental Health and Primary Care Co-Location (Topic 10)
- Health IT and Treatment Guidelines (Topic 12)
- Healthcare Homes (Topics 8 and 9 Combined)
- Effect of Insurance Features (Topic 14)

Vertical bars = 95% confidence interval
Colored points = aggregate topic scores
# IHS Advisory Panel Day 2
## Afternoon Prioritization Results

<table>
<thead>
<tr>
<th>Topic</th>
<th>Total Score</th>
<th>Rank</th>
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<tbody>
<tr>
<td>Patient-Empowering Care Management Strategies (Topics 2, 3, 4, 5, and 7 Combined)</td>
<td>134</td>
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<tr>
<td>Transitions in Care and Patient Safety (Topic 15)</td>
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<tr>
<td>Mental Health and Primary Care Co-Location (Topic 10)</td>
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<tr>
<td>Perinatal Management (Topic 6 Renamed)</td>
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<td>4</td>
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<tr>
<td>Effect of Insurance Features (Topic 14)</td>
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<td>5</td>
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<tr>
<td>Healthcare Homes (Topics 8 and 9 Combined)</td>
<td>53</td>
<td>6</td>
</tr>
<tr>
<td>Health IT and Treatment Guidelines (Topic 12)</td>
<td>52</td>
<td>7</td>
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</tbody>
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Panelists agreed upon the top five research topics (*Left*).

Topics ranked 3-5 received a hand vote, resulting in a top three tier hand vote (*above right*).
Adjourn