

Clinical Economic Research at AHRQ

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To improve the quality, safety, efficiency, and effectiveness of health care for all Americans



Clinical Economics

Clinical Economics

A Guide to the Economic Analysis of Clinical Practices

John M. Eisenberg, MD, MBA

The tools of economics can be applied to the analysis of Medical practice to improve physicians' choices of ways to Use social and individual resources for clinical Interventions in the hope of improved health. JAMA 1989;262:2879.



Clinical Economics

- Economic evaluation examining *costs* and *outcomes* of interventions to inform resource allocation decisions
 Typical types of CE evaluations

 Cost-minimization analysis
 Cost-effectiveness analysis
 Includes Cost-utility analysis
 - Cost-benefit analysis



Fundamental Premise

The goal of cost-effectiveness analysis and related evaluations is to inform decision makers about one aspect of a decision (i.e. the balance of costs and outcomes between an intervention and alternatives within the population of interest).



AHRQ and Clinical Economics

Focus today on CE rather than full spectrum of health economics research
 Primary focus has been on methods and resources for clinical economics
 Organizing this talk around *costs* and *outcomes*

ICER=

Cost(a)-Cost(b)

Outcome(a)-Outcome(b)





Methods

- AHRQ/NCI/VA sponsored conference and journal supplement: "Health Care Costing: Data, Methods, and Future Directions" (Medical Care, July 2009)
 - Examine arenas of application, data and analytic methods, challenges and future research for cost data





Medical Expenditure Panel Survey (MEPS)

- Nationally representative survey of health care utilization and expenditures
- Started 1996
 - Successor to National Medical Care Expenditure Survey and National Medical Expenditure Survey
- Design
 - Two year overlapping cohort panel survey
 - □ Uses NHIS as a sampling frame



2-Dimensional Concept of Health

- Longevity
- Health-related quality of life (HRQL)
- Consistent with outcomes for CEA
 - "Health-adjusted life expectancy"
 - Function of Longevity, HRQL
 - QALYs = LY * u



Outcomes - Methods

US Valuation of EuroQoL EQ-5D utility survey

- Shaw JS, et al. Med Care 2005:43:203.
- Nationally representative utility weights for the EQ-5D survey
- Foundation for "Catalogs" of utilities including:
 - Nyman JA, et. al. Med Care 2007;45:618.
 - Sullivan PW, et. al. Med Decis Making 2006;26:410.
 - Hanmer J, et al. Med Decis Making 2006;26:391.



Outcomes - Resources

- MEPS Self-Administered Questionnaire (SAQ)
 - Administered to adults in the MEPS
 - EQ-5D (2000-2003)
 - SF-12 Health Survey (2000-)



And now, for a brief word on Comparative Effectiveness...



Effectiveness

If something is not worth doing, It is not worth doing well! - M. Drummond et al.



Program Infrastructure

Translate evidence into information useful for stakeholders



Review / compare existing evidence

Accelerate practical studies



Effectiveness

Effective Health Care Program

- Research Synthesis EPC Program
- New Research DEcIDE/CERTs Programs
- Understand what is known and generate new knowledge on effectiveness
- Effectivehealthcare.ahrq.gov
- Essential to the outcomes side of the ICER measure



Evidence-Based Practice (EPC) Program

- Systematic reviews of the medical literature
- Primary focus on efficacy, effectiveness, and comparative effectiveness of health care interventions
- 20 reports on dietary supplements since 2003

Evidence Report/Technology Assessment Number 183

Vitamin D and Calcium: A Systematic Review of Health Outcomes

Prepared for: Agency for Healthcare Research and Quality U.S. Department of Health and Human Services 540 Gaither Road Rockville, MD 20850 www.ahrc.gov

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Upcoming EPC Methods Projects

 Framework for Economic Evaluation alongside Systematic Review
 Decision and Simulation Modeling alongside Systematic Review
 Value of Information for Research



