Now in its fifth year, the National Pharmaceutical Council’s annual survey of health care stakeholders continues to shed light on the environment for comparative effectiveness research (CER) and health care decision-making.

**THE STAKEHOLDERS WE SURVEYED...**

- Associations 12%
- Government 10%
- Business Coalitions 22%
- Employers 10%
- Insurers/Health Plans 7%
- Researchers/Thought Leaders 39%

**SAID CER IS IMPORTANT...**

- Very Important: 62%
- Somewhat Important: 30%
- Slightly Important: 7%
- Not at All Important: 1%

**BUT ITS IMPACT ON DECISION-MAKING IS STILL 3-5 YEARS DOWN THE ROAD.**

**STAKEHOLDERS ALSO TOLD US WHICH ORGANIZATIONS ARE PLAYING KEY ROLES IN THE CER EFFORT.**

**KEY ROLES IN SETTING CER PRIORITIES**

- AHRQ (62%)
- NIH (63%)
- PCORI (75%)

**KEY PLAYERS IN SETTING RESEARCH STANDARDS**

- NIH (50%)
- Academia (50%)
- AHRQ (68%)
- PCORI (77%)

**KEY ROLES IN FUNDING, MONITORING RESEARCH**

- Industry (65%)
- NIH (73%)
- PCORI (81%)

**KEY GROUPS IN CONDUCTING CER**

- Academia (60%)
- Industry (60%)
- NIH (48%)

**KEY PLAYERS IN DISSEMINATING CER**

- Academia (60%)
- PCORI (89%)
- AHRQ (78%)

For key roles, stakeholders were asked to choose among the Agency for Healthcare Research and Quality (AHRQ), the National Institutes of Health (NIH), the Food and Drug Administration (FDA), the Patient-Centered Outcomes Research Institute (PCORI), academia, private health plans and the biopharmaceutical industry. N=122 for Stakeholders Surveyed. N=115 for Importance of CER. N=114 for Impact of CER in the Past Year and 1 Year; N=115 for the Next 3 Years and Next 5 Years; N=117 for remaining figures.