Assessment of Environment for Health Care Decision-Making

Thank you for taking the time to participate in our sixth annual survey. We are interested in your assessment of the health care decision-making environment today, especially as it relates to **comparative effectiveness research**, evidence-based medicine, and value-based purchasing of health care.

Your responses will be **completely confidential**. Information will be reported only as grouped data so that neither you nor your organization can be identified. The aggregate results will be used to inform policymakers and other stakeholders about the ongoing changes to the comparative effectiveness research environment.

The questionnaire should take no more than 10 minutes to complete. After you read each question, mark the response that best represents your view of the health care decision-making environment, using the categories listed.

For the purposes of this assessment, please think about comparative effectiveness research as the comparison of available treatment options in real world settings, utilizing a range of research methods that include randomized controlled trials, observational studies, and systematic reviews (structured assessment of evidence available from multiple primary studies).

In appreciation of your efforts, we would like to contribute \$50 to one of four major charities that you may select at the end of the questionnaire. The charitable organizations are American Red Cross, Feeding America, St. Jude Children's Research Hospital, and the Wounded Warrior Project.

	Q1. How familiar are you with the broad area of comparative effectiveness research? Very familiar → GO TO Q2 Somewhat familiar → GO TO Q2 Slightly familiar → GO TO Q2 Not at all familiar → As comparative effectiveness research is the focus of this study, you do not need to answer the remaining questions in this section.							-	important ortant	ſ	
		role ove	er the ne	ext 5 ye		-		-	ou believe will play a effectiveness resear	rch listed.	
		AHRQ	NIH	FDA	PCORI	Aca	ademia	health plans	medical products industry	Patient Groups	Other
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Q4. How much impact do you feel comparative effectiveness research has had or will have on health care decision-making during the following time periods?

	Negative impact	No effect at all	Slight improvement	Moderate improvement	Substantial Improvement	No Opinion
The last 12 months						
The next 12 months						
The next 3 years						
The next 5 years						

Q.5 on he	What do you think will increase the impact comparative effectiveness research will have alth care decision-making? Please select the top 3.
	Improving the quality of CER methods
	Improving the relevance of CER <u>questions</u>
	Improving the adequacy of databases used for CER
	Greater input into CER from those who provide medical services
	Greater input into CER from patients
	Better translation of CER results into actionable recommendations
	Broader dissemination of CER results
	Increased infrastructure and resources for decision-makers to use CER results
	Other (please specify)
1. 2.	

Q6. Please read the statement below and use it as the basis for your response to the question that follows.

Generally agreed-upon and accepted standards are needed for the conduct of high quality comparative effectiveness research.

Thinking about the environment in which patients and health care providers and plans make treatment decisions, please select the number below that most closely corresponds to your view of the **availability of agreed-upon research standards today**.

1 No agreed- upon research standards	2	3	4	5	6	7 Widely agreed- upon research standards	No Opinion

Q7. Please read the statement below and use it as the basis for your response to the question that follows.

Research priorities for comparative effectiveness research should consider the types of choices faced by patients and providers, including different drugs, devices, invasive and noninvasive procedures, as well as medical management.

Please select the number below that most closely corresponds to your view regarding **priorities for comparative effectiveness research today**.

Priorities for research do not adequately address treatment choices faced by patients and providers	2	3	4	5	6	7 Priorities for research adequately address treatment choices faced by patients and providers	No Opinion

Q8. Please read the statement below and use it as the basis for your response to the question that follows.

The current comparative effectiveness research evidence base should be complete enough to inform the choices faced by patients and providers.

Thinking about the environment in which patients and health care providers and plans make treatment choices, please select the number below that most closely corresponds to your view of how complete the current comparative effectiveness evidence base is.

1 No Evidence Available	2	3	4	5	6	7 Complete Evidence Base	No Opinion

Q9. Please read the statement below and use it as the basis for your response to the question that follows.

Medical evidence and research must be interpreted in order to inform treatment decisions, aid the development of guidelines, or provide the basis for formulary decisions. Objective and transparent processes for interpretation that consider the totality of the evidence will help to ensure confidence in decisions made.

Thinking about the environment in which patients and health care providers and plans make treatment decisions, please select the number below that most closely corresponds to your view regarding the **transparency and objectivity of processes for interpreting evidence today**.

1 Not at all transparent & objective	2	3	4	5	6	7 Fully transparent & objective	No Opinion

Q10. Please read the statement below and use it as the basis for your response to the question that follows.

Real-world evidence should be included in the development of drug and other medical policies.

Thinking about the environment in which patients and health care providers and plans make treatment decisions, please select the number below that most closely corresponds to your view regarding the **use of real-world evidence today**.

1 Not at all used	2	3	4	5	6	7 Widely used	No Opinion

Q11. Please read the statement below and use it as the basis for your response to the question that follows.

While clinical effectiveness is paramount in selecting treatment options, the process of assessing the value of different medical interventions should include such factors as changes in quality of life, workplace productivity effects, quality of care, and the potential for improved adherence to treatments.

Thinking about the environment in which patients and health care providers and plans make treatment decisions, please select the number below that most closely corresponds to your view of the extent to which treatment assessments have incorporated a broad focus on quality of life, outcomes and other measures of value today.

Treatment assessments narrowly focused only on clinical effectiveness	2	3	4	5	6	7 Treatment assessments broadly focused to include quality of life, outcomes, and other measures of value	No Opinion

Thank you for taking the time to participate in this survey. Your information is valuable in the assessment of the role of comparative effectiveness research and value assessments in health care decision-making. As thanks for your time, we will make a \$50 donation on your behalf to one of the four charities listed below.

	American Red Cross
	Feeding America
	St. Jude Children's Research Hospital
	Wounded Warrior Project
	OPT OUT
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This contribution may not be deductible for tax purposes.