

## Comparative Effectiveness Research Survey

Introduction. Thank you for participating in this survey about Comparative Effectiveness Research (CER). Comparative Effectiveness Research includes studies and/or synthesis of existing research that compare the effectiveness of medical treatments and services in real world settings. The purpose of CER is to develop and disseminate evidence-based information about which interventions are most effective for which patients under various specific circumstances. A key provision of the Patient Protection and Affordable Care Act establishes the Patient-Centered Outcomes Research Institute (PCORI), a private, non-profit corporation empowered to develop and fund CER, and to provide evidence-based information to policy makers (government, health care plans, and employers), clinicians and patients. Part 1. Please rate your familiarity with Comparative Effectiveness Research, also known as CER. (Select one.)

- 1 - Not at all familiar (Have not heard of it)
- 2
- 3 - Somewhat familiar (Have general idea, but don't know details)
- 4
- 5 - Very familiar (Understand it reasonably well, and have considered implications for my organization)

2. Please rate the potential for Comparative Effectiveness Research to improve health benefit decisions made by your organization and/or its health plan and PBM vendors. (Select one.)

- 1 - No potential to improve health benefit decisions
- 2
- 3 - Moderate potential to improve health benefit decisions
- 4
- 5 – Very strong potential to improve health benefit decisions
- 6 - Don't Know

3. Below is a list of the types of information that could be used to compare alternative treatments (e.g., medicines, surgical procedures, other interventions). From your perspective as an employer, how important is it to include each type of information in CER?

	1 Not at all important	2	3 Moderately Important	4	5 Very important
Clinical outcomes of alternative treatments (e.g., heart attacks avoided, episodes of worsening asthma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information about which treatments work best for specific populations (e.g., gender, age, ethnic groups)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information comparing utilization and cost of treatments (medical and pharmacy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comparative safety of alternative treatments (e.g., radiation therapy vs. surgery for prostate cancer)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Impact of alternative treatments on employee absence, disability and ability to return to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Impact of alternative treatments on productivity at work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information comparing impact of treatments on quality of life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. The types of information from the prior question are listed again in the table below. In the middle column, please indicate if your organization has used each type of information to make health benefit and program decisions. In the right-hand column, indicate if you are confident that your vendor (health plan or PBM) has used each type of information to make benefit and reimbursement decisions.

	<i>My organization</i> has used this information	<i>Our vendors</i> have used this information
Clinical outcomes of alternative treatments (e.g., heart attacks avoided, episodes of worsening asthma)	<input type="radio"/>	<input type="radio"/>
Information about which treatments work best for specific populations (e.g., gender, age, ethnic groups)	<input type="radio"/>	<input type="radio"/>
Information comparing utilization and cost of treatments (medical and pharmacy)	<input type="radio"/>	<input type="radio"/>
Comparative safety of alternative treatments (e.g., radiation therapy vs. surgery for prostate cancer)	<input type="radio"/>	<input type="radio"/>
Impact of alternative treatments on employee absence, disability and ability to return to work	<input type="radio"/>	<input type="radio"/>
Impact of alternative treatments on productivity at work	<input type="radio"/>	<input type="radio"/>
Information comparing impact of treatments on quality of life	<input type="radio"/>	<input type="radio"/>
Other (please specify):	<input type="radio"/>	<input type="radio"/>



Part 2 This part of the survey uses two hypothetical and generalized scenarios to understand how CER results may be used by employers. After reading each scenario, you'll be asked questions about how likely your organization would be to take a number of specific actions in response to having the CER information.

Scenario 1 –Treatment of Chronic Low Back Pain: Imagine that CER has been completed, comparing alternative approaches to the treatment of chronic low back pain. Approaches evaluated include different surgical approaches and non-surgical options featuring the use of medications and physical therapy. The evidence concludes that certain treatment approaches are safer and more effective at reducing back pain and returning people to work more quickly than others.

6. If results like these (including the details, of course) were published by a trusted source (e.g., the new Patient-Centered Outcomes Research Institute), how likely is it that your organization would take the actions identified below based on the CER results?

	1 Not at all likely	2	3 Somewhat likely	4	5 Very likely
Ask our PBM to make changes to our formulary as indicated by CER evidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask our health plan(s) to change coverage of back surgeries as indicated by CER evidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implement a “Value-Based” approach, using patient copayments to encourage use of more effective approaches, and discourage use of less effective approaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use case management/care management programs to educate and proactively steer patients toward more effective treatment options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 2 – Management of Type II Diabetes: Imagine that CER has been completed, comparing alternative approaches to the management of Type-II diabetes. Approaches evaluated include different prescription drug protocols, and approaches to lifestyle (diet and exercise) modification. The evidence concludes that certain treatment approaches are safer and more effective at lowering HbA1C levels and improving overall patient health outcomes than others.

7. If results like these (including the details, of course) were published by a trusted source (e.g., the new Patient-Centered Outcomes Research Institute), how likely is it that your organization would take the actions identified below based on the CER results?

	1 Not at all likely	2	3 Somewhat likely	4	5 Very likely
Ask our PBM to make changes to our formulary as indicated by CER evidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ask our health plan(s) to change coverage of lifestyle-focused programs as indicated by CER evidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implement a “Value-Based” approach, using patient copayments to encourage use of more effective approaches, and discourage use of less effective approaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use case management/care management programs to educate and proactively steer patients toward more effective treatment options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Generally, how do you anticipate that your organization will respond to the increasing availability of CER results in the years ahead? (Select one.)

- We will rely completely on our vendors (health plans, PBM, EBCs) to monitor, interpret and apply CER findings
- We expect our vendors (health plans, PBM, EBCs) to use CER findings, but we will want to stay informed about the research results to make sure information is being used to drive better value for our organization
- We will play an active role to monitor, interpret and apply CER findings as needed to get the greatest value from our benefit policies and programs
- Don't know



Part 3: The next few questions are about your interest in being informed about CER.

9. Please rate your interest in receiving the following different types of information pertaining to CER.

	1 Not at all interested	2	3 Moderately interested	4	5 Very interested
Progress updates on Comparative Effectiveness Research activities, including priorities, research agenda and anticipated timing of results	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Examples of how employers are using CER findings to make pharmacy benefit decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Examples of how employers are using CER findings to make medical benefit decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information about ways for employers to get involved in CER research, including impacting the research agenda or communicating CER findings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. What do you think will be the three most reliable and trusted sources of CER information for employers in the future? (Pick three.)

- Information directly from the Patient-Centered Outcomes Research Institute (PCORI)
- Health and benefits-oriented journals and magazines
- Health and benefits-oriented e-news sources
- Health care coalition meetings/presentations
- Employee benefit consultants
- Health plan partners
- PBM partners
- Pharmaceutical, medical device and/or biologics manufacturers
- Other (Please specify): \_\_\_\_\_

11. At this time, it is unclear whether employer-relevant outcomes will be part of the CER methodology. How important is it that CER includes outcomes such as absence, disability, and work performance when appropriate? (Select one.)

- 1 - Not at all important
- 2
- 3 - Somewhat important
- 4
- 5 - Very important

***If 4 or 5 in Q 11, go to Q 12, otherwise go to Q 13***

12. What are some of the ways that you might consider expressing your interest in having employer-relevant outcomes included in CER when appropriate? (Check all that apply).

- Communicate directly with individuals/organizations (e.g., PCORI) charged with determining the CER research methodology.
- Encourage employer health organizations (e.g., National Business Group on Health, National Business Coalition on Health) to communicate support for the inclusion of employer-relevant outcomes.
- Encourage industry groups (e.g., National Association of Manufacturers, National Chamber of Commerce) to communicate support for the inclusion of employer-relevant outcomes
- Encourage vendor partners (Health Plans, PBMs) to communicate support for the inclusion of employer-relevant outcomes
- Other (Please specify): \_\_\_\_\_

Part 4: Finally, we will ask just a few questions to classify your responses with others taking this survey. All information is confidential and will not be reported on an individual basis.

13. Your role in Overall Employee Health Strategy

- Decision-Maker
- Significantly Influence Decisions
- Provide Some Input to Decision-Making

14. Respondent Information:

Name:

Title:

Company Name:

Street Address:

City:

State:

Zip code:

15. Please list your organization's total number of U.S. employees.

16. What percent of your covered lives is self-insured?

17. Please send honorarium to:

- Myself
- Charity or Other (Enter details below)
- No thanks. I would like to decline the honorarium.

***If "Please send honorarium to: Charity or Other (Enter details below)" is selected, go to Q18.***

18. Charity/Other Honorarium Address

Name:

Street Address:

City:

State:

Zip Code: