

Comparative Health System Performance Initiative

In June 2015, AHRQ awarded 5-year cooperative agreements to three Centers of Excellence:

- **Dartmouth College**,
Principal Investigator:
Elliot Fisher, M.D.,
M.P.H.
- **National Bureau of Economic Research**,
Principal Investigator:
David Cutler, Ph.D.
- **RAND Corporation**,
Principal Investigator:
Cheryl Damberg, Ph.D.

AHRQ funded a Coordinating Center to facilitate collaboration between the Centers of Excellence and disseminate findings:

- **Mathematica Policy Research**, Principal Investigator: Eugene Rich, M.D.

The Agency for Healthcare Research and Quality (AHRQ) created the Comparative Health System Performance Initiative to study how health care systems promote evidence-based practices in delivering care. The initiative provides about \$52 million over 5 years to establish three Centers of Excellence and a Coordinating Center to identify, classify, track, and compare health systems. AHRQ's goal is to understand the factors that affect health systems' use of patient-centered outcomes research (PCOR) and to identify best practices in disseminating and using PCOR.

Motivation

The effective adoption and use of PCOR evidence holds promise as a way to improve clinical outcomes and reduce costs. However, little is known about the characteristics of high-performing health systems and the factors that affect their acceptance and use of PCOR evidence. The Comparative Health System Performance Initiative will address these knowledge gaps and accelerate the diffusion of PCOR evidence among health systems.

Objectives

- Classify and characterize types of health systems and compare their performance in terms of clinical and cost outcomes.
- Identify characteristics of high-performing health systems.
- Evaluate the role of PCOR in health system performance.
- Disseminate findings broadly to help diffuse PCOR evidence across health systems nationally.

Core Activities

Establish three Centers of Excellence to:

- Develop a data core to systematically track health systems, their characteristics, and their performance on quality and cost outcomes.
- Identify, characterize, and classify the proliferating forms of health systems.
- Assess the use of PCOR evidence among health systems.
- Evaluate the association between use of PCOR evidence and quality and cost of care.
- Identify characteristics of high-performing health systems, the influence of external environments on high performance and PCOR adoption, and the role of PCOR evidence in these systems.
- Disseminate findings to health system leadership, patients and consumers, policymakers, and payers.



Create a Coordinating Center to:

- Facilitate collaboration between the Centers of Excellence and convene stakeholders and technical experts.
- Synthesize findings from the Centers of Excellence and conduct data analyses.
- Develop a compendium on health system performance that includes information on system characteristics.
- Promote broad dissemination of findings on the characteristics of high-performing health systems and factors influencing the successful adoption of PCOR evidence.

Focus Areas of the Centers of Excellence

Market and organizational factors that influence implementation of innovations

Dartmouth College, in partnership with the University of California at Berkeley, Harvard University, and the High Value Healthcare Collaborative, is studying factors that influence the implementation of three major classes of innovations within health systems. These innovations include:

- Biomedical innovations that target specific diseases and are generally ordered or delivered by physicians.
- Care delivery innovations that target patient groups defined on the basis of function or illness severity and are implemented largely by managers and teams.
- Patient engagement innovations that focus on new ways patients and their caregivers interact with providers.

A national database to study health systems

National Bureau of Economic Research, is partnering with many collaborators, including the Health Research & Educational Trust and the Network of Regional Healthcare Initiatives. They are creating a national database of claims data and patient and family self-reports on health system care to examine the performance of different types of health systems in various geographic locations over time. This database will be used to investigate:

- Health system characteristics related to the use of PCOR-based evidence and related clinical and economic outcomes.
- Evidence- and non-evidence-based care used to treat oncology and pediatric patients.
- Outcomes of corporate consolidation in postacute care facilities and dialysis facilities.

Role of incentives, health information technology, and organizational integration within systems

RAND Corporation, in partnership with Pennsylvania State University, University of California at Los Angeles, Harvard University, and five regional health improvement collaboratives, is examining mediating factors that may influence physician behavior and contribute to PCOR uptake and health system performance. These factors include:

- Financial and nonfinancial incentives.
- Health information technology.
- Integration of care by providers within health systems.
- Strategies used by safety net providers to improve primary care practice.

