

RAPID REVIEWS TO INFORM STATE HEALTH DECISIONS



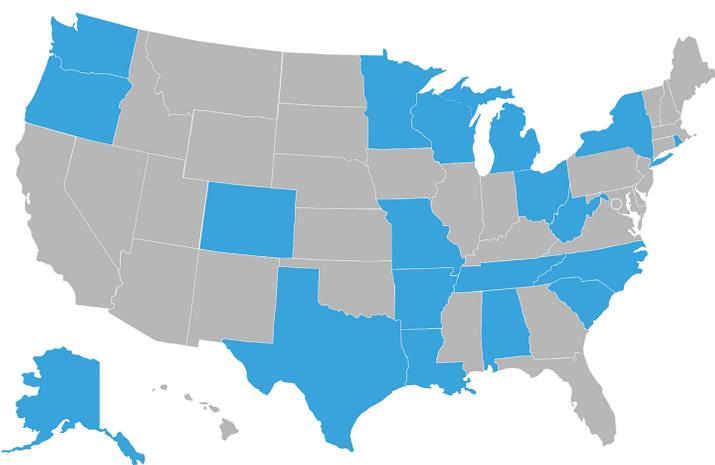
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BACKGROUND

Medicaid is a partnership of federal and state governments providing insurance coverage for poor and disabled U.S. citizens. The Medicaid Evidence-based Decisions Project (MED) at Oregon Health & Science University's Center for Evidence-based Policy is a self-governing collaborative of 20 state Medicaid programs. MED produces reports to inform coverage decisions, including rapid evidence reviews, policy reviews, and special reports. Researchers worked with policymakers to develop and refine rapid reviews (RRs) to meet their policy needs.

States Participating in MED



METHODS

- MED's RR methodology was developed with policymakers over a 10-year period, attempting to balance the need for rigorous methodology with associated costs and timelines.

Development of RR Methods

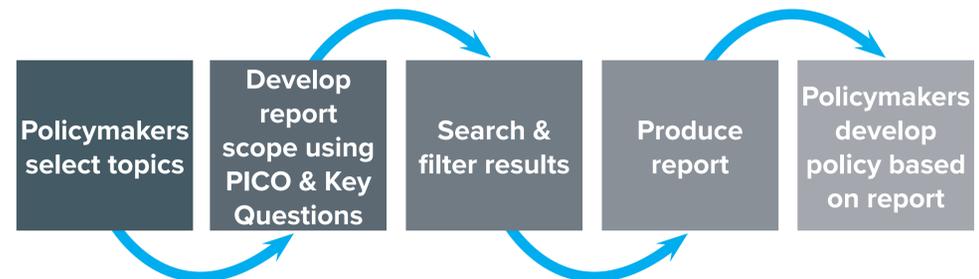
2006 — 2008	2009 — 2011	2012 — PRESENT
<ul style="list-style-type: none"> ■ Work with policymakers to define needs ■ Produce summaries of SRs & contextual "wrappers" on knowledge service products ■ Approximately 80 reports 	<ul style="list-style-type: none"> ■ Policymakers request complete reports using standard methods, clinical practice guidelines, & public insurance coverage policies ■ Produce SRs ■ Approximately 90 reports 	<ul style="list-style-type: none"> ■ Develop core methods using high-quality SRs as starting point ■ Optional guideline & policy analysis ■ Include refinement of topic scope, protocol & timeline with policymakers ■ Over 330 reports

* SR = systematic review

- MED RRs completed between January 2008 and March 2013 were evaluated for inclusion of any SRs, Cochrane SRs, and additional information.

RESULTS

The iterative development process resulted in the following rapid review methodology.



Of 47 RRs completed January 2008 to March 2013:

- 85% based on high-quality SRs
 - 58% included at least one Cochrane SR
 - All addressed efficacy
 - Not all populations of interest addressed
 - None included sufficient data on harms and cost-effectiveness
- Often, reports included additional randomized and non-randomized trials, and guideline or policy analyses

CONCLUSIONS

- RR methods & report format were developed & refined with extensive policymaker input over a 10-year period
- Integrity & transparency were key
- RRs based on high-quality SRs help policymakers base decisions on the best available evidence
 - Usually balanced rigor with resource use & timeline
 - Often required additional information

Balancing Rigor & Costs

