Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Health Care Committee

HB 2575

Brief Description: Establishing a health technology assessment program.

Sponsors: Representatives Cody, Morrell and Moeller; by request of Governor Gregoire.

Brief Summary of Bill

• Creates an evidence-based health technology assessment program, including a clinical advisory committee and a state-funded assessment center.

Hearing Date: 1/19/06

Staff: Dave Knutson (786-7146).

Background:

The Agency for Healthcare Research and Quality (AHRQ) is the health services research arm of the U.S. Department of Health and Human Services (DHHS). Its mission is to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. The AHRQ sponsors and conducts research that provides evidence-based information on health care outcomes, quality, cost, and access for use by health care decisionmakers, including patients, clinicians, health system leaders, federal and state policymakers and others. In 1997, it launched its initiative to promote evidence-based practice in everyday healthcare through establishment of 12 Evidence-based Practice Centers (EPCs). The EPCs develop evidence reports and technology assessments on topics relevant to clinical, social science/behavioral, economic, and other health care organization and delivery issues—specifically those that are common, expensive, and/or significant for the Medicare and Medicaid populations. With this program, AHRQ became a "science partner" with private and public organizations in their efforts to improve the quality, effectiveness, and appropriateness of health care by synthesizing the evidence and facilitating the translation of evidence-based research findings.

AHRQ launched the EPC program in 1997 as an initiative to promote evidence-based practice in everyday care. The EPC program is a user-driven research partnership with private and public sector organizations to facilitate the translation and dissemination of research findings to the memberships and other target audiences of the partner organizations. These include federal and state agencies, private sector professional societies, health delivery systems, providers, payers, and others committed to evidence-based health care. Topics of interest identified by these partners may address clinical, social science/behavioral, economic, and other health care organization and

delivery issues. They generally are common, expensive, and otherwise significant topics for Medicare, Medicaid, or other special populations.

Since the start of the program in 1997, the EPCs have conducted more than 100 systematic reviews and analyses of the literature on a wide spectrum of topics. The major products of the program are evidence reports, including comprehensive and more focused systematic reviews and technology assessments. These are based on rigorous syntheses and analyses of scientific literature.

In June 2002, AHRQ announced the award of a second round of five-year contracts to the following 13 EPCs:

Blue Cross and Blue Shield Association Technical Evaluation Center (TEC); Chicago, IL

Duke University; Durham, NC ECRI; Plymouth Meeting, PA

Johns Hopkins University; Baltimore, MD

McMaster University; Hamilton, Ontario, Canada Oregon Health & Science University; Portland, OR

RTI International-University of North Carolina; Chapel Hill, NC

Southern California Evidence-based Practice Center—RAND; Santa Monica, CA

Stanford University, Stanford, and University of California; San Francisco, CA

Tufts-New England Medical Center; Boston, MA

University of Alberta; Edmonton, Alberta, Canada

University of Minnesota; Minneapolis, MN

University of Ottawa; Ottawa, Canada

The 13 EPCs under contract to AHRQ produce science syntheses—evidence reports and technology assessments—that provide public and private organizations the foundation for developing and implementing their own practice guidelines, performance measures, educational programs, and other strategies to improve the quality of health care and decisionmaking. The evidence reports and technology assessments also may be used to inform coverage and reimbursement policies.

In 2003, the Legislature directed the Health Care Authority to establish an evidence-based prescription drug program. The program includes an independent pharmacy and therapeutics committee and a contract with one of the thirteen Evidence-based Practice Center (EPC) centers established by the federal government to conduct the scientific review of prescription drug classes for the State Preferred Drug List.

Also in 2003, the Legislature directed the Health Care Authority to coordinate state agency efforts to develop and implement uniform policies to ensure prudent, cost-effective health services purchasing, maximize administrative efficiencies, improve the quality of care provided, and reduce administrative burdens on health care providers. The polices include:(1) health technology assessment, (2) monitoring health outcomes, (3) developing a common definition of medical necessity, and (4) developing common strategies for disease management and demand management.

Summary of Bill:

An evidence-based health technology assessment program is established. It will conduct systematic reviews of scientific and medical literature, establish a statewide health technology clinical advisory committee, and establish a state funded evidence-based health technology assessment center. The program will also develop methods and processes to track health outcomes across state agencies and provide transparent access to the scientific basis of coverage decisions and treatment guidelines.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.

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