Generating new knowledge and moving knowledge into action

AcademyHealth is the professional home for health services and policy research and the professionals who produce and use this evidence to improve health and the performance of the health system. We are a professional society that works both in partnership with and on behalf of our members and other partners to provide the evidence, expertise, skills and tools necessary to make decisions in complex policy and practice environments. We support professional development and training, advance new research methods and the availability of appropriate data sources, and we bring together networks of diverse stakeholders to learn from one another and collaborate to tackle some of the most pressing challenges in health and healthcare. We also promote and advance the fields of health services and policy research, advocating for funding and other resources, communicating the value and relevance of evidence, and scanning for and cultivating innovation.

Building a vibrant and diverse community of researchers, policymakers, and practitioners

AcademyHealth serves a community of more than 5,000 members working across a variety of disciplines to produce and use evidence to improve health and the performance of the health system, supporting better outcomes for more people and supporting healthier communities.

Ours is a vibrant and changing field, as reflected by the recent growth in our student population. We have seen record numbers of abstracts and attendees at the premier meeting for HSR, the AcademyHealth Annual Research Meeting, and a diversification of the settings where members work.

The AcademyHealth Community

- Regular 72%
- Student 25%
- New Professional 2%
- International 1%

To improve health and the performance of the health system, AcademyHealth members ask and answer the questions:

- What works?
- For whom?
- In what context?
- At what cost?
Building Careers and Collaborating Across Disciplines

Through meetings and events; scholarships, fellowships and other awards; and advocacy for and promotion of new research, AcademyHealth is helping to advance the careers of its members and involve a growing network of stakeholders in improving health and the performance of the health system.

**AcademyHealth Interest Groups** facilitate interaction of individuals around specific topic areas relating to health services research and health policy. Interest Group members have an opportunity to exchange knowledge, disseminate research findings, inform policy and clinical decision-making, build research skills, and network with those sharing common goals. In 2013, we began an effort to evaluate the organization and function of our interest groups that included a member survey and special listening session for Interest Group leaders at the 2014 Annual Research Meeting. The results of that feedback are being used to refine and improve this member-led program to encourage more robust programming, streamline and clarify governance and leadership, and provide even greater member benefit.

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**ARM Demonstrates Growth and Impact of the Field**

The Annual Research Meeting has long been the premier meeting for the field of health services research, offering a forum for presentation of the best research and evidence our field has to offer, fostering discussion of policy challenges and funding opportunities, and supporting career growth through methods sessions, professional development content, networking, and interest-specific adjunct meetings. In 2013, we celebrated the 30th anniversary of the ARM with record breaking numbers of abstracts and attendees. The 2014 built on the tradition of sharing the latest and greatest health services research with the addition of our first call for late breaking abstracts. Both meetings were an opportunity for members and nonmembers to immerse themselves in new research, learn about methods and data, and develop career-building skills and networks.

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**ARM: By the Numbers**

### 2013
- Number of Sessions: 152
- Abstracts Submitted: 2,232
- Presenters: 637
- Posters: 1,190
- Adjunct Meetings: 61
- Total Attendees: 2,699
- Student Attendees: 530

### 2014
- Number of Sessions: 158
- Abstracts Submitted: 2,515
- Presenters: 631
- Posters: 1,330
- Adjunct Meetings: 63
- Total Attendees: 2,473
- Student Attendees: 453

*The 30th Annual Research Meeting (ARM) broke attendance records*
Awards Recognize and Promote Excellence in the Field

AcademyHealth awards help recognize and promote the research and researchers whose work contributes to our understanding of what works in health care, for whom, and at what cost. From early career awards for outstanding dissertation and new investigator, or the recognition of a career’s worth of insights and leadership, our awards demonstrate a commitment to raising the visibility of rigorous, relevant research and carry the esteem of having one’s work recognized for excellence by your peers.

**HSR Impact Award**

This award recognizes research that has made an impact on policy or practice. In 2013, the award was presented to the Oregon Health Insurance Experiment, recognizing its use, for the first time, of a randomized, controlled study design to answer questions about how access to public insurance affects health, health care use, and other outcomes. In 2014, the award was presented to landmark research by Richard Hirth, Ph.D. and colleagues at the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) that contributed to the development of a prospective payment system (PPS) that the Centers for Medicare and Medicaid Services (CMS) employed to improve patient choice and quality of care and potentially reduce costs.

**Distinguished Investigator Award**

The Distinguished Investigator Award recognizes investigators who have made significant and lasting contributions to the field of health services research through scholarship, teaching, advancement of science and methods, and leadership. 2013 Distinguished Investigator Dr. Steinwachs is professor, Department of Health Policy and Management, Johns Hopkins University Bloomberg School of Public Health and interim director, Institute for Policy Studies.

The 2014 Distinguished Investigator Jeffery Alexander is the Richard Carl Jelinek Professor of Health Management and Policy and Professor of Organizational Behavior and Human Resources in the School of Business at the University of Michigan and Faculty Associate, Survey Research Center in the School of Public Health. Through leadership, mentorship of new researchers, and significant contributions to the evidence base for health policymaking Dr. Steinwachs and Dr. Alexander have been instrumental in building the field of health services research and helping ensure its relevance.

**Alice S. Hersh New Investigator Award**

The Alice S. Hersh New Investigator Award recognizes scholars early in their careers as health services researchers who show exceptional promise for future contributions to the field. 2013 Award winner, Dr. Ateev Mehrotra is an Associate Professor at the University of Pittsburgh School of Medicine and a Policy Analyst at RAND. 2014 winner Dr. Michael McWilliams is Associate Professor of Health Policy, Harvard Medical School and Brigham and Women’s Hospital.

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Dr. Richard Hirth, Ph.D. discusses research recognized for improving patient choice, quality of care

Jeffery Alexander, Ph.D.
Donald M. Steinwachs, Ph.D.
Michael McWilliams, M.D., Ph.D.
Ateev Mehrotra, M.D., M.P.H.
**Article of the Year**

The Article-of-the-Year Award recognizes the best scientific work that the fields of health services research and health policy have produced and published during the previous calendar year. The award-winning article provides new insights into the delivery of health care and advances the knowledge of the field.

The 2013 Article of the Year was **“The ‘Alternative Quality Contract,’ Based on a Global Budget, Lowered Medical Spending and Improved Quality.”** It was published in Health Affairs, Vol. 31, No. 8, 2012 and co-authored by Dana Gelb Safran, Bruce E. Landon, Mary Beth Landrum, Yulei He, Robert E. Mechanic, Matthew P. Day, and Michael E. Chernew.


**Outstanding Dissertation Award:**

The Outstanding Dissertation Award honors an outstanding scientific contribution from a doctoral thesis in health services research. In 2013, Alicia L. Cooper, Ph.D., M.P.H. received the award for her work **“Predictors and Outcomes of High-Risk Prescribing among Elderly Medicare Beneficiaries.”** At the time of the award she was an investigator in the Health Services Research & Development (HSR&D) division at the Providence Veterans Affairs Medical Center. The 2014 winner was Alva O. Ferdinand, Dr.P.H., J.D., from the University of Alabama at Birmingham, who was recognized for her work **“Studies on Distracted Driving: Three Papers Examining the State of the Literature and the Impact of Texting Restrictions on Motor Vehicle Crash-Related Fatalities and Hospitalizations.”**
Recognizing and Rewarding Leadership Among Early Career Professionals

AcademyHealth scholarships and fellowships, together with the activities of our 22 student chapters and mentoring and student networking events at major meetings, reflect a commitment to building the field and supporting the careers of young investigators.

**Alice S. Hersh Student Scholarship**, which provides two free registrations to the National Health Policy Conference (NHPC) and four free registrations to the Annual Research Meeting (ARM), is designed to encourage professional and educational development in health services research and policy among student members. It commemorates the dedication of Alice S. Hersh, the founding executive director of the Association for Health Services Research (AHSR), to supporting the next generation of health services researcher.

The AcademyHealth **Diversity Scholars Network** provides travel and registration support for five scholars to attend the Annual Research Meeting (ARM), pre-ARM Methods Workshops, and an Interest Group meeting of the scholar’s choice. The goal of the Network is to support the professional development of underrepresented racial/ethnic minority groups in the field of health services research (HSR). Mentoring is a core component of the Network.

The **Presidential Scholarship for New Health Services Researchers** engages early career researchers in networking and mentoring opportunities with AcademyHealth leadership and staff, and distinguished leaders in the field. Recipients receive financial support to attend the ARM and the opportunity to advise AcademyHealth about how to better meet the needs of new health services researchers and junior faculty.

The **Presidential Scholarship for Child Health Policy** provides early career producers and users of child health services research (including researchers, health policy analysts, and those working to translate research into policy) with financial support to attend the Child Health Policy Conference and the opportunity to engage in discussions about child health policy issues. It encourages individuals relatively new to the field to interact with AcademyHealth leadership and staff, gain an in-depth understanding of the role of health services research in child health policy, learn ways to inform child health policy on a state or federal level, and network with child health experts.

The **Scholarship for Outstanding Work in Public Health Systems Research**, a collaboration between AcademyHealth and the Robert Wood Johnson Foundation, recognizes graduate students who demonstrate potential to contribute to the field of PHSR through promising research. These 10 scholarship recipients receive registration and travel support to attend AcademyHealth’s Annual Research Meeting (ARM) and the PHSR Interest Group Annual Meeting. Ad-
ditionally, they are matched with mentors and present their research during the PHSR Interest Group Meeting’s poster session.

The Population Health Scholars Program is designed to bring emerging community health leaders to Washington to gain valuable insight into the policymaking process and learn new methods for translating and disseminating their work to decision makers. Recipients attend a policy bootcamp, participate in the National Health Policy Conference (NHPC), attend meetings with policymakers and community health stakeholders, and enjoy networking events with key advisors from AcademyHealth’s Translation and Dissemination Institute.

**A New Opportunity for Early-Career Professionals**

Demonstrating its commitment to early career professionals and in support of investigator initiated research, AcademyHealth launched its New Investigator Grants Program at the 2014 ARM. Funded by an investment from AcademyHealth, with additional support from the American Heart Association, the Association for Community Affiliated Plans and the March of Dimes, the program provides up to seven $10,000 grants along with mentoring and presentation opportunities.

**2015 New Investigators**

**Michel Boudreaux, Ph.D., M.S.**
University of Maryland Research Title: Born on Reform: Infant Health and Health Reform in Massachusetts (funded by March of Dimes)

**Melissa Bright, Ph.D., M.S.**
University of Florida Research Title: Transition to Medicaid Managed Care: Impact on Health Quality for Foster Youth (funded by Association for Community Affiliated Plans)

**Eva DuGoff, Ph.D., M.P.P.**
University of Wisconsin – Madison Research Title: Socioeconomic Factors and Pay for Performance Measurement in Medicare Advantage

**Rachel Hogg, Dr. PH., M.A.**
University of Colorado Denver Research Title: HealthCare Organization Participation in Public Health Systems and the Efficiency of Service Delivery

**Olufunmilola Odukoya, Ph.D., M.Sc.**
University of Pittsburgh Research Title: OTC Sleep Aids: Older Adult Medication - Taking Behavior and Safety Risks

**Wendy Xu, Ph.D., M.S.**
Ohio State University Research Title: Evaluation of the Utilization and Distributional Effects of Expanding Medicare Coverage of Preventive Cancer Screening under the Affordable Care Act
Fellowships Expand Career Options

The AcademyHealth Delivery System Science Fellowship (DSSF) provides a paid post-doctoral learning experience to help researchers gain more applied experience conducting research in delivery system settings.

Host sites have included Cincinnati Children’s Hospital Medical Center, Geisinger Health System, Hofstra North Shore-LIJ School of Medicine, Intermountain Healthcare, Kaiser Permanente Southern California, Mayo Clinic, Palo Alto Medical Foundation Research Institute, Providence Health and Services, U.S. Department of Veterans Affairs Quality Enhancement Research Initiative (QUERI) and Health Services Research and Development Service (HSR&D), and University of California Center for Health Quality and Innovation.

The NCHS/AcademyHealth Health Policy Fellowship brings visiting scholars in health services research-related disciplines to the National Center for Health Statistics (NCHS) in Hyattsville, Maryland for a period of 13 months to conduct studies of interest to policymakers and the health services research community. Fellows have access to NCHS data resources for use in their proposed studies, and also work on collaborative projects with NCHS staff.

The AcademyHealth/Aetna Foundation Scholars in Residence Fellowship is designed to retain underrepresented racial/ethnic minorities in health services research by providing professional training and networking activities for junior and mid-career level academics and clinical practitioners, who are conducting disparities research with a focus on population health. (See box for more on our initiatives to address diversity and disparities)

The AcademyHealth Senior Scholars Program includes long- and short-term opportunities for senior leaders in the field of health services research to work ‘in residence’ at AcademyHealth’s, Washington, D.C. offices. Scholars experience first-hand on the role that health services research can play in informing national policy issues and gain access to policymakers, thought-leaders and AcademyHealth staff. AcademyHealth welcomed two scholars and one senior fellow in 2013 and 2014:

- Shoshanna Sofair, Dr.P.H., was appointed as a senior fellow for public health research translation, supporting new initiatives to increase the use of evidence to inform public and population health policy.
- Hassan Tetteh, M.D., M.P.A., M.B.A. was named AcademyHealth’s third Senior Scholar in Residence in the fall of 2013, contributing his expertise to AcademyHealth’s existing global health, delivery system, Health IT, and diversity initiatives and professional networks.
- Diana Buist, Ph.D., M.P.H. joined AcademyHealth as a Senior Scholar in Residence beginning in April 2014. Dr. Buist applied her expertise in delivery system and multi-site projects to efforts to improve research translation and the speed with which evidence is effectively applied in health policy.

AcademyHealth provides the best opportunity for me to continue my research in health disparities, all of the host sites are prestigious health care organizations, and I have always been interested in additional training in embedded research. The DSSF Fellowship is a perfect match.”

— Jia Pu, Delivery System Science Fellow. Host Site: Palo Alto Medical Foundation Research Institute
Working with New Partners and Affiliates to Expand the Reach, Relevance and Application of HSR

AcademyHealth works in conjunction with individual members and our organizational affiliates to achieve its vision of generating new knowledge and moving that knowledge into policy and practice. In 2013 and 2014, we continued our efforts to engage new partners—to expand the big tent of multi-disciplinary cooperation that is emblematic of health services research and AcademyHealth in particular.

Supporting Diversity in Pursuit of Better Evidence

As the professional society for HSR and policy, AcademyHealth works to improve both the supply and quality of HSR by expanding and improving the scientific basis of the field, increasing the capabilities and skills of researchers, and promoting the development of the necessary infrastructure of financial, human and data resources. As part of these efforts, AcademyHealth is committed to promoting diversity among our staff, members and the field at large in terms of race, ethnicity, disability, sexual orientation, gender identity, and other historically underrepresented backgrounds. In 2014, AcademyHealth launched its Center for Diversity, Inclusion and Minority Engagement in HSR, creating a programmatic home for a number of new and existing initiatives designed to increase understanding, awareness, and promotion of diversity in health services research (HSR). Among the Center’s initial accomplishments was a successful one-day meeting of invited experts to develop recommendations for increasing diversity and minority inclusion in the future HSR workforce and the launch of the AcademyHealth/Aetna Foundation Scholars in Residence Fellowship Program.

AcademyHealth achieved a new record of 178 organizational affiliates in 2013 and 180 organizational affiliates in 2014, largely driven by new cooperative efforts to convene researchers and policymakers around areas of mutual interest. We began building programs around the use of health information technology with the American Medical Informatics Association, collaborating to develop a targeted version of our popular Health Policy Orientation for physician executives with the American College of Physician Executives (ACPE), and supporting a separate meeting to look at methods for improvement science and electronic clinical data with the Academy for Healthcare Improvement (AHI).
In addition, in 2014 AcademyHealth named its first International Advisory Board to support and extend our efforts to inform U.S. policymaking with research and experiences of health systems around the world. With the leadership of the Advisory Board, we also introduced a new level of international organizational affiliate membership, a tailored suite of benefits of interest to international organizations from the academic, not-for-profit and government sectors.

For the past two years, AcademyHealth and America’s Essential Hospitals have co-hosted an annual Innovations Summit on Capitol Hill in Washington, D.C., to highlight initiatives that improve population health or enhance workforce capacity. The summit provides an opportunity to brief policymakers on innovations from the field and discuss potential for replication, scale and spread.

Advocating for the Funding, Resources and Training Necessary to Support Robust, Relevant, and Useful Health Services Research

In the face of new threats and significant change in the landscape of health research and policy, AcademyHealth has enhanced our efforts to promote and protect federal investments in health services research. Just as 2012 was a call to action for the field of health services research, 2013 and 2014 presented an opening for us to build upon and spread our core message: health services research can inform those grappling with ways to curb the nation’s climbing debt and improve our nation’s overall health system and fiscal well-being.

The federal government supports different and equally necessary types of health research across a continuum in universities, medical centers, state and local health departments, and businesses across the nation.

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**Basic research** increases our knowledge about how living organisms work and what causes disease.

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**Clinical research** determines how to prevent and treat that disease in people. Federally funded clinical research provides the basis for drug and device development in the private sector.

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**Population-based research** (public health research) studies how to improve the health of the population by addressing and preventing injury, illness, and disease through non-medical means in communities where people live, work, learn, and play.

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**Translational research** studies how best to move evidence across the research continuum, from the lab bench to the patient’s bedside, and from there to the “curbside” – communities where patients and their families live, learn, work, and play. The faster the uptake of credible evidence, the quicker health care and health may improve, and the greater the returns on the nation’s research investment.
Together with the Friends of AHRQ, we continued our advocacy campaign to elevate AHRQ’s profile on Capitol Hill and within the administration. In 2013, those efforts coincided with preparing for the Agency’s first leadership transition in a decade. As part of that effort, we conducted interviews, focus groups, and a membership survey to assess the field’s perceptions of and priorities for the agency and began production of a report documenting AHRQ’s contributions to U.S. health and health care.

That report became a foundational document for 2013 and 2014 outreach, including a Congressional briefing commemorating AHRQ’s 15th year. It also became an important reference point for discussing the contributions of health services research and its role in the research continuum, messages we drove home during more than 125 meetings with legislators, administration officials and staff over the last 24 months.

We also continued to stand alongside our colleagues in the scientific community to counter “the war on science,” joining a new coalition and co-sponsoring a Congressional briefing on health economics to raise awareness about the value of behavioral and social science. In August 2013, we partnered with Karen Minyard and the Georgia Health Policy Center in organizing a Georgia delegation briefing on Capitol Hill, sponsored by Senator Chambliss (R-GA), on the use of dynamic simulation models and the value of evidence in policy-making.

In 2014, efforts shifted into response mode, as legislators began to consider the reduction or elimination of a funding mechanism known as the Public Health Service Evaluation Set Aside, or more colloquially, the “evaluation tap.” Such action would have severely impacted the research community and virtually eliminated AHRQ, given that its funding was almost entirely dependent upon the tap.

In response, the Friends of AHRQ and the Friends of NCHS—two voluntary coalitions led by AcademyHealth—launched an educational campaign on the tap. The groups created a one pager that describes the tap’s nuances and what important programs would be undermined or eliminated entirely unless a viable alternative funding mechanism is put in place to preserve the functions. The one pager was used by members of the Friends groups in their respective meetings with congressional offices, and provided to a CQ HealthBeat reporter who profiled the tap in one of her articles. In addition, AcademyHealth provided comments on the discussion draft of Rep. Andy Harris’s legislation, the “YES to Cures Act of 2014,” which would redirect the National Institutes of Health’s (NIH’s) contribution to the evaluation tap to support early-career scientists.

The campaign was largely successful and the “Cromnibus” funding bill signed by President Obama on December 16, 2014, funds the base budgets of AHRQ and NCHS with full budget authority for the first time in decades.

Throughout, AcademyHealth was actively monitoring legislative action and calls for comment, engaging on behalf of the field in discussions of health data and privacy, 21st Century Cures and Yes to Cures proposals, a White House call for comments on “Driving Innovation through Federal Investments,” and the Labor, Health and Human Services subcommittee’s Fiscal year 2015 budget proposal.

To wrap up the year, and perhaps reflecting the increased visibility of health services research and AcademyHealth on Capitol Hill, we were approached by staff from the offices of Representatives Blumenauer and Black regarding legislation they were developing related to value-based insurance design (VBID). In response, AcademyHealth organized first a conference call, and then a small briefing, that brought member experts to Washington to brief Congressional staff on the current VBID evidence base and discuss potential impacts of VBID on underserved populations.
AcademyHealth works to encourage and promote the development and use of new methods and resources, and support professional development and skill building among research producers and those who use this work. Much of this effort falls into activities around online learning, building collaborative learning networks and fostering innovative new approaches to the understanding and use of emerging data.

Online learning benefits members, builds the field

AcademyHealth expanded the number and reach of its webinar offerings in the last two years in order to meet the changing needs of the field of health services research. The popularity of the webinar program is reflected in the more than 12,000 individual registrations received for 60 webinars offered in 2013 and 2014 - on topics ranging from research methods to communicating effectively with policymakers. The extensive learning catalog is largely offered free of charge, thanks to cooperative agreements and sponsorships.

In 2014, AcademyHealth expanded its approach to engage members and partners in a wide ranging discussion of the necessary skills and training for the field. These efforts resulted in initial efforts to convene an Education Council to identify and respond to new challenges for health services research and health policy educators. An interim council met for the first time at the 2014 ARM with a call for nominations scheduled for early 2015. In addition, AcademyHealth capitalized on the opportunity to assume the former Kaiser.edu scholarship and syllabi databases, which have been converted and updated, and are now available to AcademyHealth members via our website.

**Year In Webinars**

![Year In Webinars](chart.png)
Off the Field, for the Field

AcademyHealth is home to highly trained motivated staff who are themselves researchers, analysts and policy professionals, and who reflect and represent the field. These staff lend their expertise and perspective to assist in the creation of high quality programs that address the needs of the field and our members, while also working to advance the evidence base for decisionmaking through their own research and professional pursuits. In 2013 and 2014, AcademyHealth staff served as authors on the following publications:

Peer-Reviewed Articles
- A case study of pediatric asthma alerts from the Beacon Community Program in Cincinnati: Technology is just the first step
- Cincinnati Beacon Community Program Highlights: challenges and opportunities on the path to care transformation
- Data Governance and Data Sharing Agreements for Community-Wide Health Information Exchange: Lessons from the Beacon Communities
- Differences in inpatient pediatric quality of care among non-safety net, safety-net and children's hospitals
- Importance of the Medicaid Medical Directors' Multi-State Collaborative for Improving Care in Medicaid
- Journal of Adolescent Health - Measuring youth health engagement: development of the Youth Engagement With Health Services Survey
- Learning from Health Information Exchange Technical Architecture and Implementation in Seven Beacon Communities
- Making It Local: Beacon Communities Use Health Information Technology to Optimize Care Management. Popul Health Manag. 2014 Jan 29
- Medicaid Medical Directors Quality Improvement Studies: A Case Study of Evolving Methods for a Research Network
- The Adolescence of Child Health Services Research
- The role of policy in quality improvement
- Trends in racial-ethnic, income, and insurance disparities over time
- Understanding The Prevalence, Payment, and Most Common Diagnoses
- What does US$1.1 billion buy? An investment in the future

Issue Briefs
- Beacon Community Efforts to Improve Pediatric Prevention, Care and Outcomes
- Facilitators and Barriers to Payment Reform
- HCFO Study Snapshot: Benefit Design Effective in Encouraging Generic Use and Reducing Medicare Costs
- HCFO Study Snapshot: In Health Care Spending, Americans Who Make the Least Contribute the Greatest Share of Income
- HCFO Study Snapshot: Massachusetts Health Insurance Exchange Offers Insight into Facilitating Small-Group Employer Participation
- HCFO Study Snapshot: Protecting Uninsured Patients from High Hospital Charges
- HCFO Study Snapshot: The Link Between Major Illness and Financial Catastrophe
- Navigators and In-Person Assistors: State Policy and Program Design Considerations
Bringing Stakeholders Together to Learn and Share Innovations

In recent years, AcademyHealth’s approach to and programs for strengthening the capacity for health services research production and use have evolved to more broadly consider the variety of ways evidence is created, to support innovation directly as an incubator for new ideas and organizations, and to cultivate collaborative networks that address the challenges and opportunities of evolving health systems and data networks.

Lucinda Levine, a graphic recorder from Crowley and Co. takes notes during a session on moving evidence into action for the perspective of industry, held during the Fourth Annual EDM Forum Symposium, June 2014.

For example, through the work of the EDM Forum, the Beacon Evidence and Innovation Network, and other health information technology and electronic data infrastructure projects, AcademyHealth is helping the field of health services research capitalize on the growing availability of data, particularly electronic health data.

The EDM Forum facilitates learning and collaboration among researchers and other key stakeholders who are generating the data, methods and evidence needed to build learning health systems that will improve patient care and outcomes. One such activity, the collaborative research projects, addresses shared challenges across the community and develops proposed approaches to analytic methods, clinical informatics, governance, or approaches to build learning health systems in support of useful innovations in health care quality, population health, and discovery. For example, the EDM Forum supported The Sage Bionetworks Governance project led by John Wilbanks, to identify new opportunities to adapt the Consent to Research Platform for use in clinical networks for research and quality improvement (QI). The resulting Participant-Centered Consent (PCC) toolkit, informed by this project has the potential to change how research is conducted. The tool is built for people who are designing clinical studies and who wish to make their informed consent user-centered, rather than document-centered. It contains the building blocks of a visual, interactive approach to informed consent. The PCC toolkit lets its users create visual summaries of consent forms, mapped to key underlying text, for use in software or print.

In other collaborative successes, the EDM Forum and PHSR teams commissioned a series of papers and convened a joint meeting to discuss data being used to conduct public health services and systems research (PHSSR), including challenges with current data sources and opportunities provided by new data and health system transformation. Motivated by the strength of the discussion and new relationships forged by common interest, the initial meeting led to the creation of an AcademyHealth-led Population Health Community of Practice. This new initiative, built on our demonstrated expertise cultivating learning communities, brings together state and local public health practitioners who are working on ways to improve data and analytics for population health. The group shares current successes and challenges and aims to then accelerate innovations around the use of new data streams, such as data from electronic health records and mHealth, and identify opportunities for future collaboration.

Lucinda Levine, a graphic recorder from Crowley and Co. takes notes during a session on moving evidence into action for the perspective of industry, held during the Fourth Annual EDM Forum Symposium, June 2014.
In 2013, AcademyHealth, through the EDM Forum project, launched the online, open access, peer reviewed journal, *eGEMs*, focused on using electronic health data to advance patient centered outcomes research and quality improvement, with the overall goal of improving patient and community outcomes. *eGEMs* is unique in its focus on the journey of scientific discovery, not just the outcomes. In the first two years, the journal published a total of 81 papers which were downloaded more than 22,000 times. The top 10 downloads to date have included:

<table>
<thead>
<tr>
<th>Date published</th>
<th>Title</th>
<th>Full text downloads</th>
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<td>2/13/2013</td>
<td>Security Approaches in Using Tablet Computers for Primary Data Collection in Clinical Research</td>
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<td>1/17/2013</td>
<td>In Search of a Data-in-One, Electronic Health Record-Linked, Multicenter Registry— How Far We Have Come and How Far We Still Have to Go</td>
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<td>10/1/2014</td>
<td>How Patients Can Improve the Accuracy of their Medical Records</td>
<td>1571</td>
<td>Prashila</td>
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<td>8/2/2013</td>
<td>Advances in Patient Reported Outcomes: The NIH PROMIS Measures</td>
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<td>10/8/2013</td>
<td>Data Warehouse Governance Programs in Healthcare Settings: A Literature Review and a Call to Action</td>
<td>1042</td>
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<td>12/1/2013</td>
<td>Estimating Causal Effects in Observational Studies Using Electronic Health Data: Challenges and (some) Solutions</td>
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<td>10/28/2013</td>
<td>Applications of Electronic Health Information in Public Health: Uses, Opportunities and Barriers</td>
<td>975</td>
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*Represents 164 total submissions from 2013-2014. Downloads represent cumulative total across all eGEMs publications and are current as of 12/15/2014
Expanding our role in the data space, and leveraging our operational expertise and networks, AcademyHealth also served as an incubator for the Health Data Consortium during its two-year journey to become an independent 501C(3) organization.

Beyond the emphasis on electronic data, other new programs demonstrate how AcademyHealth is thinking differently about how evidence is created, cultivating collaboration among atypical partners, and identifying and responding to gaps in knowledge.

AcademyHealth recently partnered with the Kaiser Permanente Institute for Health Policy and The Pew Charitable Trusts to explore the utility of registries in a learning healthcare system. We developed resource portfolios to convey the key aims, attributes and benefits of six unique data registries. Each portfolio includes a one page overview of the registry, a perspective piece, and full case study. Collectively, the resources provide information on current use, intended future use, and value generated thus far from each registry. AcademyHealth, the Kaiser Permanente Institute for Health Policy, and The Pew Charitable Trusts partnered to explore the utility of registries in a learning healthcare system. The partnership developed three resource portfolios to convey the key aims, attributes and benefits of six unique data registries. Each portfolio includes a one page overview of the registry, a perspective piece, and full case study. Collectively, the resources provide information on current use, intended future use, and value generated thus far from each registry.

In 2014 AcademyHealth also entered the final phase of the PCORI Pilot Projects Learning Network, which monitors the work of PCORI’s first 50 awardees and facilitated peer learning and collaboration across projects. As the project concludes, roughly half of the pilot projects are also participating in one of eight different collaborative projects on cross cutting topics of import in the field (e.g., IRB issues unique to PCOR, experiences using PROMIS measures in PCOR). Peer reviewed papers summarizing many of these experiences are in development.

Using Resources in New Ways
AcademyHealth is leveraging existing resources in new ways to understand how research is produced, identify needs of research consumers and improve their ability to translate evidence into action.

Fostering Innovation to Support the HSR Field of the Future
AcademyHealth programs:
• Support development and use of new data and tools (e.g., EDM Forum)
• Partner to accelerate access to data to improve health and care (e.g., Health Data Consortium)
• Encourage development, application and sharing of new methods / best practices (e.g., Beacon Evidence and Innovation Network)
• Facilitate and share innovations in stakeholder engagement (e.g., PCORI Pilot Projects Learning Network)

In 2014, AcademyHealth, together with the Association of American Medical Colleges (AAMC), undertook an analysis of data from the Health Services Research Projects-in-Progress (HSRProj) database from the National Institutes of Health’s National Library of Medicine to describes the funders and funding recipients of health disparities-focused HSR and gaps in the populations and outcomes studied. The report of that work, The State of Health Equity Research: Closing Knowledge Gaps to Address Inequities, examines five-year trends in the evolution of disparities research, from documenting inequities, to investigating casual mechanisms and identifying solutions.

Work also continued to address the frontline evidence needs of delivery system leaders. In 2013 and 2014, AcademyHealth continued to offer regional Delivery Systems Meetings in conjunction with the ARM. The meetings focus on the intersection of research and delivery system change, with a focus on innovations in the local market. For example, the 2013 meeting Transforming Health and Health Care: Focus on Maryland discussed lessons from Health Enterprise Zones (HEZs), an initiative to target state resources to reduce health disparities among racial and ethnic groups and geographic areas, improve health care access and health outcomes in underserved areas, and reduce health care costs and hospital admissions/readmissions. The 2014 meeting showcased Southern California innovations and provided updates from forward-thinking leaders on health information technology, health disparities, information exchange and safety net redesign.
Move Knowledge into Action Through Synthesis, Translation, Dissemination, and Technical Assistance

As a key component of our mission, AcademyHealth translation activities cross-cut the entire organization and are embedded in almost all of our programs. For example:

- **2014 marked the 14th annual AcademyHealth National Health Policy Conference**, a one-of-a-kind event that looks at the year to come in health policymaking, with an eye toward evidence-based policy and impacts on the research community.

- **Health Care Financing and Organization (HCFO)**, a national program of the Robert Wood Johnson Foundation administered by AcademyHealth, has a long history of bringing its grantees to Washington for small informational briefings and supporting and monitoring dissemination and translation at the end of each grant.

- **The Research Insights** series of publications summarizes issues of interest to policymakers and outcomes of collaborative sessions convened by AcademyHealth in order to extend these conversations to other research consumers in quick and easy formats.

- **State Coverage Initiatives (SCI)**, a national program of the Robert Wood Johnson Foundation administered by AcademyHealth, has been supporting state-level technical assistance and peer-to-peer learning for more than two decades. In 2013 and 2014, SCI embraced a new role in supporting the State Health Reform Assistance Network, which provides technical assistance to 11 states as they implement coverage provisions of the Affordable Care Act.

- AcademyHealth’s **Public Health Systems Research** program translates research findings and promotes partnerships among stakeholders to advance evidence-based decision making in public health policy and practice.

**Advancing the Art and Science of Translation and Dissemination**

Amid a complex and evolving policy and media environment, the challenge to reach the right audience, break through the clutter of competing priorities, and offer practical, actionable information is ever greater. In 2013, AcademyHealth stepped up its investment in assessing the ‘state of the art and science’ of translation and communication, seeking out and promoting best practices in communicating science to policy audiences and other stakeholders and testing new technologies and media with the launch of the **AcademyHealth Translation and Dissemination Institute**.

The Institute leverages AcademyHealth’s unique resources and vantage in serving both the producers and users of HSR to address the challenge of getting evidence noticed and used, and to offer the lessons of its experience for the benefit of the field. Over the course of 2013 and 2014, and with support from the Robert Wood Johnson Foundation and the Kaiser Permanente National Community Benefit Fund, AcademyHealth launched its first two initiatives, a listening project to identify policymakers’ self-identified information needs and data gaps, and a lessons project to cull best practices in translation and dissemination of information with an eye toward improving the dissemination of health services research for underserved populations.

The first listening project report, **Improving the Evidence Base for Medicare Policymaking**, was published in February 2014. Well received by media and the research community alike, it was followed by a second report, **Improving the Evidence Base for Medicaid Policymaking**, funded in part by The Medicaid and CHIP Payment and Access Commission (MACPAC).
The first Lessons Project invitational workshop in April 2014 discussed the findings of eight commissioned eight papers on a diverse set of perspectives and drew an audience of participants from inside and outside the health sector. The discussion informed our thinking about new ways to translate and disseminate evidence and provided a foundation for future initiatives to pilot test dissemination tactics from other fields. In addition, the insights and connections gleaned through this process helped inform AcademyHealth’s participation in a project led by Mathematica to develop a framework for dissemination and implementation of evidence for the Patient Centered Outcomes Research Institute (PCORI). That project included a landscape review of current best practices, stakeholder engagement and feedback about successful and desired dissemination and implementation strategies and the development of a dissemination and implementation toolkit for PCORI’s use.

“The Medicaid Listening Project made a significant contribution to our work by helping identify the practical research questions that are important to policymakers at the state and federal level.”

– Anne Schwartz

The Translation and Dissemination Institute also hosted its first Innovator in Residence in 2014. Dr. Ernest Moy served as an Innovator-in-Residence in July 2014, during which time he developed an agent-based model of health disparities. Created using the web-based software NetLogo, Dr. Moy’s model is intended to help policymakers, students, and others understand the factors and complex interactions affecting health disparities.

Another relatively new addition to our translation and dissemination portfolio is the Payment and Delivery System Reform initiative, which supports the efforts of the Robert Wood Johnson Foundation (RWJF) to learn from, manage, and maximize the impact of its payment reform investments. Beginning in 2012 and carrying through 2013 and 2014, AcademyHealth worked with nine RWJF payment reform grantees that were implementing innovative payment reform projects to drive high-value health care in their communities. By providing technical assistance and fostering a learning network, AcademyHealth has been able to support their work and inform strategic conversations among these grantees and other RWJF grantees working to implement payment reform. In fact, evaluations at the conclusion of the program indicated that many had applied a lesson from the workshops to advance their work, learned a new concept to apply to their work, or met a new contact or connection that benefited their work.

“The evaluations of the Payment and Delivery System Reform workshops and learning network convened by AcademyHealth offered really heartening and fantastic details that spoke to the importance of cross-pollination across programs, and left me feeling confident about what we have been able to spark among participants”

– Andrea M. Ducas, MPH
Additionally, AcademyHealth is working to build on lessons learned from RWJF grantees and other payment reform efforts occurring across the country in order to accelerate the development and application of successful payment and delivery system reform strategies.

Our focus on the science of dissemination and implementation took center stage in December 2014, when AcademyHealth joined the National Institutes of Health (NIH) as a co-host for the 7th Annual Conference on the Science of Dissemination and Implementation: Transforming Health Systems to Optimize Individual and Population Health. The meeting, a chance to resume and reinvigorate the annual NIH Dissemination and Implementation conferences, brought researchers, evaluators and implementers together to identify opportunities, challenges, and strategies for disseminating the findings and implementation of research to key stakeholders. The partnership was successful, more than tripling the number of abstracts received and drawing more than 800 attendees for three days of discussion and in-depth exploration of approaches to advance dissemination and implementation science.

**Learning Networks Support Translation and Technical Assistance**

Translation of evidence takes a practical and applied approach via AcademyHealth supported learning networks.

Learning communities take many forms and address a wide variety of goals, from the **PCORI Pilot Projects Learning Network** to the Medicaid Medical Director’s Learning Network, AcademyHealth has deep experience recruiting, supporting and empowering communities that address shared challenges via facilitated peer-to-peer learning. In 2014, AcademyHealth built on our experience in this space to launch the **State-University Partnership Learning Network**, an initiative to support evidence-based state health policy and practice with a focus on transforming Medicaid-based healthcare, including improving the patient experience with care, improving the health of populations, and reducing the per capita cost of healthcare. The learning network blends translation, dissemination of best practices and technical assistance to build effective partnerships that address the needs of state policymakers.

**Dissemination Mentors Offer One-on-One Coaching**

In summer 2014, with generous support from the Robert Wood Johnson Foundation, AcademyHealth launched its first Dissemination Mentors Program. The goal of the Program was to assist with the swift translation of evidence by linking PHSR researchers (“mentees”) with communications experts (“mentors”). Each pair was tasked to produce a product: either a communications strategy, an elevator pitch for the research, or a document summarizing policy-relevant findings in an easily digestible, user-friendly format (e.g. issue brief, policy brief, media pitch). The program was a resounding success, with mentors and mentees learning together and producing useful translation tools to raise the visibility of their work. According to mentee Nathan Hale, the experience was transformative, “The engagement with AcademyHealth has constituted the single best year of my professional life.”.
Maintaining the Necessary Resources to Support the Field and Realize our Vision

AcademyHealth’s activities to facilitate the generation of relevant and timely evidence and move that evidence into policy and practice are supported by membership dues, conference revenue and extramural funding. As a non-profit, nonpartisan organization working with and for the field of health services research, good stewardship of our financial resources is critical to achieving our mission. In addition, we pride ourselves on recruiting talented professionals that share our commitment to improving health and health care through the development and application of evidence.

Throughout 2013 and 2014, AcademyHealth grew its team and funding base to better serve the needs of a growing membership and respond to new opportunities to build the infrastructure for quality improvement and patient centered outcomes research, improve research translation, and cultivate innovation around the use of new and emerging data.

Financials

![Financials Chart]

- **Dues for Membership**: 5%
- **Advocacy**: 3%
- **Interest and Other Income**: 2%
- **Contributions**: 2%
- **Foundation Grants**: 32%
- **Federal Grants and Contracts**: 38%
- **Meeting Registration and Exhibit Fees**: 17%
- **Move Knowledge into Action**: 32%
- **Build a Vibrant and Diverse Research Community**: 36%
- **Generating New Knowledge**: 30%
- **Other Programs**: 2%