



August 27, 2021

Nakela L. Cook, M.D., M.P.H.
Patient-Centered Outcomes Research Institute
1828 L Street NW, Suite 900
Washington, DC 20036

Re: Response to RFI soliciting input on five proposed National Priorities for Health

Dear Dr. Cook:

AcademyHealth welcomes the opportunity to provide input to the Patient-Centered Outcomes Research Institute (PCORI) on the five proposed National Priorities for Health. We are the professional home of more than 3,500 health services researchers, policy experts, and practitioners, and we strongly support the production, dissemination, and use of evidence to inform policy and practice. Our membership is highly engaged with PCORI and its work, from informing the creation of the Institute to serving in PCORI's leadership to receiving funding support. AcademyHealth recognizes and applauds PCORI's unique contributions to the development and promulgation of practice- and policy-supporting evidence.

Priority One: Increase Evidence for Existing Interventions and Emerging Innovations in Health

PCORI aims to fund comparative effectiveness research (CER) on both new and existing healthcare approaches. AcademyHealth supports an emphasis on CER, but encourages PCORI to use broader definitions of the research program than is currently indicated in these priorities. For example, PCORI should consider this [definition](#) as provided by the Harvard University, School of Public Health's Comparative Effectiveness Research Initiative:

“Comparative Effectiveness Research (CER) is research that identifies what clinical and public health interventions work best for improving health. Interventions include not only the elements of direct clinical care such as diagnosis and treatment protocols, but also innovations in health care delivery, organization, and financing, as well as public health interventions in the community, including those intended to modify health awareness, lifestyle, diet, or environmental exposures. In a CER study, interventions should, at a minimum, be compared on the basis of some health-related outcome measure. Study methods may include randomized trials with at least two active (non-placebo) intervention arms, database studies, observational studies, model-based studies, and decision analysis.”

A broader and more universal CER framework can better allow for greater responsiveness to stakeholder evidence needs, and versatility in funded research, specifically in generating innovations on areas where there may be considerably more uncertainty due to a lack of high-quality evidence.

Priority Two: Enhance Infrastructure to Accelerate Patient-Centered Outcomes Research

It is both critical and within the capacity of PCORI to strengthen the infrastructure and capacity necessary for the creation, dissemination, and implementation of patient-centered research. Additionally, it is a high priority of AcademyHealth and the health services research community to support a sufficient, diverse, and multi-disciplinary HSR workforce that has the resources, training, and autonomy to engage in



innovate research. PCORI can be a key leader for the HSR field in developing and enhancing research capacity among diverse organizations.

AcademyHealth appreciates PCORI focusing on the number and diversity of people and communities who lead or partner in research. To this point, we encourage you to refer to our [response](#) on April 9, 2021 to NIH's request for comment on how to advance racial equity, diversity, and inclusion in the biomedical workforce as PCORI considers health research infrastructure needs. PCORI can support systems research investments in diverse academic organizations such as Historically Black Colleges and Universities (HBCUs), Minority Serving Institutions (MSI), and Hispanic Serving Institutions (HSIs) by directing research grants to include them as partners and leaders and helping to invest in building their institutional capacity. Research funding opportunities should require that investigators meaningfully engage members of under-resourced communities as partners in determining research priorities and questions, study design, implementation, analysis, reporting, and translation into practice and policy. A key component here is "meaningfully". This means that funding applications should describe how these communities were engaged in the process of priority-setting to develop the research questions and the study design proposed as well as how researchers will continue to engage community members throughout the research cycle. It also means appropriately compensating community members and community-based organizations for their engagement in research.

In developing institutional infrastructure, PCORI should consider diverse funding mechanisms and test innovations in proposal review and selection. By definition, contract or grant funding secured for individual projects is unstable and reliance on grant funding to build research infrastructure does not guarantee the sustainability of the infrastructure. Work commissioned as part of AcademyHealth's Paradigm Project ([here](#) and [here](#)) documents some of the more innovative approaches to funding research adopted by other fields that could provide PCORI with opportunities to experiment.

Priority Three: Advance the Science of Dissemination, Implementation, and Health Communication

AcademyHealth [hosts](#) the Annual Conference on the Science of Dissemination and Implementation in partnership with the National Institutes of Health, which illustrates how critical we believe disseminating and implementing evidence is to improving health outcomes. We support PCORI's focus on the importance of translating scientific discovery into changes in the practice and policy of health care and doing so at all levels, including the patient, clinician, community, healthcare organization and state and federal policy. It is important to continue to make this information accessible to those directly affected by the findings. We encourage PCORI to support cross-institutional collaboration and funding schemes that maximize the diversity and breadth of policies that are communicated, as well as ensuring diversity in the audiences. Additionally, PCORI should proactively engage with diverse and underserved communities to identify barriers to implementation.

Priority Four: Achieve Health Equity

Advancing health equity and proactively identifying and eliminating racial, ethnic, and socioeconomic disparities is a key priority for PCORI. As the professional home for HSR, AcademyHealth has been active in DEI since its inception, as delivering high value health care for all patients in the health care system is inherently intertwined with conversations about health equity and disparities. Our Center for Diversity, Inclusion and Minority Engagement has led our work in this space since 2015 and we host a very active Health Disparities Interest Group. On August 11, 2021, AcademyHealth [released](#) a report written by an Advisory Group on Diversity, Equity and Inclusion in Health Services and Policy Research (DEI in HSR), which sought to create a sustainable, action-oriented strategy for AcademyHealth to

address DEI issues in HSR. We are now developing our implementation plan for responding to this report and we encourage PCORI to consider this report as it operationalizes this priority.

AcademyHealth's [Paradigm Project](#), a multi-year initiative to develop, test, and spread bold innovations to enhance the relevance of health services research for policy and practice, has underscored the need for our field and health care broadly to address structural racism in all its institutions. Our use of human-centered design in the Paradigm Project has demonstrated that achieving DEI requires innovations in how the field undertakes scientific inquiry, and changing the way we do science to achieve greater impact cannot happen without DEI. For example, one innovation we are developing to help health systems to access and apply published research in the care they provide has also evolved through stakeholder input to become a tool for addressing disparities in care and empowering community-based organizations as agents of change.

As stated above, it is critical that PCORI direct research grants and build institutional capacity of researchers at HBCUs, MSIs, HSIs, and TCUs. This includes requiring that investigators meaningfully engage members of underrepresented communities as partners in determining research priorities and questions, study design, implementation, analysis, reporting, and translation into practice and policy. This engagement cannot be a "check the box" superficial engagement but should include these communities and researchers as close and active partners throughout the research process.

Priority Five: Accelerate Progress Toward an Integrated Learning Health System

Integrated learning health systems (LHS) are a powerful tool for exploring innovative interventions and translating them into practice. These systems can create cross-sectoral engagement from communities, health systems, patients, public health agencies, social services, and others to design research and implement evidence. We encourage PCORI to ensure that a sustainable learning health system is one that is comprehensive and agile, which would include an expansive understanding of health systems to include health technology companies, public health agencies, community-based service providers, and others as identified.

Thank you for the opportunity to discuss these National Priorities for Health. For further comment, clarification, or inquiry, please email Josh Caplan at Josh.Caplan@AcademyHealth.org.