

ABHC

Alliance for Better Health Care

July 26, 2007

The Honorable John D. Dingell
Chairman
Committee on Energy and Commerce
United States House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Joe L. Barton
Ranking Member
Committee on Energy and Commerce
United States House of Representatives
2322-A Rayburn House Office Building
Washington, DC 20515

Dear Chairman Dingell and Ranking Member Barton,

As you prepare for markup of the “Children’s Health and Medicare Protection Act” (H.R. 3162), the undersigned members of the Alliance for Better Health Care (ABHC) thank the Committee for including in the bill provisions related to our guiding principles for comparative effectiveness research (CER). The ABHC is a coalition of organizations representing consumers, employers, health care providers, health plans, pharmacists, researchers, unions, and other interested stakeholders that believe—as you do—high quality health care requires sound evidence to improve medical decision-making.

ABHC believes that greater investments in CER now will help us move toward a high quality, cost-effective, and efficient health care system. As you may know, the ABHC developed the following principles for prioritizing, conducting, validating, disseminating, and using CER to inform ongoing policy discussions.

- CER has the potential to benefit the health of all Americans and is a true public good.
- Significant and stable investment is needed in CER—in the development of research methods and researchers, the design and conduct of studies, the scientific review of research, and the dissemination and communication of results—for it to reach its full potential.
- The scope of CER should address the full spectrum of health care treatments, including pharmaceuticals, devices, medical and surgical procedures, and other interventions.
- Scientific integrity and independence are paramount.
- CER should be based on scientific evidence employing an array of appropriate methods, such as randomized clinical control trials, observational studies, meta-analyses, and systematic technology assessment reviews.

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- The processes for identifying research priorities, conducting research, validating the science, and disseminating results should be transparent.
- Any entity that commissions or conducts CER should involve stakeholders in setting research priorities and disseminating research.
- Board governance should assure accountability in the conduct and dissemination of comparative effectiveness research.

CER holds the promise of improving health care quality and outcomes for all patients, but this can only be achieved if it is sound and trusted. It is imperative that legislation to expand our nation's CER portfolio include these basic principles. We thank you for recognizing the importance of our priorities by including elements of these principles in Section 904 of the "Children's Health and Medicare Protection Act." And, while we the undersigned support the provisions in H.R. 3162 that reflect our principles noted above, we individually have differing positions on other provisions in Section 904 and on H.R. 3162 itself.

ABHC looks forward to working with you to further the objectives reflected in these CER provisions. If you have any questions, please contact Emily Rowe by phone at 202.292.6743 or by e-mail at emily.rowe@academyhealth.org.

Sincerely,

Academy of Managed Care Pharmacy • Aetna
American Academy of Family Physicians • American Osteopathic Association
American Society of Health-System Pharmacists • Blue Shield of California
Coalition for Health Services Research • Marshfield Clinic
National Business Group on Health • Service Employees International Union
The Joint Commission

Joined by,

Consumers Union