

Panel 7: Communication and Reporting Health Economic Information

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The goal of this panel was to identify key issues in communicating and reporting health-care economic evaluation information. Its specific objectives were to:

- identify and prioritize key issues;
- describe the mechanisms for putting pharmacoeconomic and outcomes information and data into the same operational format that decision-makers use to make formulary decisions;
- identify the entities that are conducting/supporting the research, the purpose of the research, and their target audiences for communicating research results;
- discuss outlets of communication of research results and ways to improve the effectiveness of the outlets;
- discuss optimal formats for communication of economic evaluation results;
- recommend next steps.

Background and Context

Given the time, effort, and resources invested in the performance of health economic evaluations, communicating the process and results of those evaluations well is critical. Without clear and effective communication, these evaluations will not live up to their potential to be useful and timely tools for healthcare decision-makers.

The audiences at which health economic information is directed are as diverse as the decisions

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that must be made. From government policy-makers involved in the allocation of federal resources to healthcare and biomedical research, through to the patient who needs to play a knowledgeable role in his or her own healthcare, each consumer of health economic information has specific needs. Audiences of health economic information include:

- government policy-makers;
- regulatory agencies;
- healthcare providers;
- healthcare professionals;
- the healthcare industry;
- researchers and educators;
- the public (e.g., consumers, patient interest groups).

If the messages contained in a health economic evaluation are to reach the intended audience, barriers to the use of these evaluations must be recognized and addressed. In order for this to happen, the evaluations and their results must be:

- clear and understandable;
- acceptable to the audience with respect to both content and design [1];
- communicated in the right way and at the right time.

Problem Statement

Users of health economic information represent many different perspectives with various levels of expertise and information needs. To obtain the most value from the resources invested in health economic research, how do we optimize the effectiveness of our communicating of health economic information?

Issues

These main areas for development have been identified as keys to more effective communication:

- **Relevance:** Is it needed?
- **Usefulness:** Will the intended audience be able to make use of it?
- **Credibility:** Is it believable?

Relevance

Is the message relevant for its intended audience? How well we meet the needs of the intended audience depends on how well we know them. Who are they? What information do they need to make appropriate choices? What is their decision-making process? What is their level of understanding and expertise?

This information can be obtained from numerous sources. However, the target audience itself should be involved in the delineation of its needs and process, although assistance from the producers of health economic information may be needed, according to the degree of experience of the user.

Among the points to be considered when evaluating relevance are:

- the varied information needs of end-users and their magnitude of importance;
- the changing environment or time constraints in which decisions are being made;
- the predominant influence(s) over those making them, for example, political, social, budgetary, clinical, or logistical.

There is often disagreement between researchers and their audiences concerning relevance of research design to the application of its results. Greater awareness of both the intended purpose of the research and the objectives of the user before the study is designed may help to reduce that conflict.

Usefulness

Will the information be useful to its intended end-user? These areas were identified as issues with regard to the usefulness of health economic information:

- reporting standards;
- communication formats;
- content.

Reporting Standards. How much standardization is wanted? There are distinct benefits to having standard formats for health economic report-

ing structures. They allow for greater clarity and understanding of the content, they create a sense of familiarity with terminology and format that allows faster integration of new information, and they promote comparability across studies. For educational purposes, they simplify the learning process and facilitate the work of editors and reviewers in the review and evaluation of health economic documents. Creating standard formats for all types of health economic communications will help end-users wade through the overload of information available, more quickly comprehend the message, and be able to compare it for decision-making purposes.

Creation of reporting standards for all types of health economic studies, clinical studies, modeling, and database studies, would necessarily be the first step toward standards for publication in peer-reviewed journals and elsewhere, and other modes of communication such as public presentations and posters, and formulary submissions.

Communication Formats. What is the most appropriate communication vehicle? Besides the ones that are most familiar (abstracts, posters, public presentations, reports and articles, health economic communications), more and more communications are taking place through other forms of written communication such as targeted briefing documents and various types of submissions to healthcare providers, on an interpersonal level, or through the mass media. Consideration should be given to the usefulness of each type of communication, and its potential role in information transfer.

Content. How useful will the intended audiences find the information content? Again, the users of health economic information possess a variety of backgrounds and expertise in this multidisciplinary field. The content of any message has to be tempered according to the level of sophistication of the users, as well as knowledge of the needs of the audience. Managed care organizations have different needs than do physicians, who may in turn be looking for something different than consumers. The key is knowing the needs and abilities of an audience.

Credibility

No matter how well presented or potentially useful health economic information may be, it will not be used unless the audience finds it credible.

To enhance the believability factor of health economic information, three areas must be addressed:

1. accepted standards of practice;
2. the concept of disclosure;
3. validation of the information.

Accepted Standards of Practice. Establishing standards of health economic performance is the mandate of other panels, with respect to methodologies, ethics, bias, and conflict of interest. It is important to note, though, that without a set of standardized criteria on which to base judgment of health economic information, only the most experienced audience will be able to feel (rationally) confident about its acceptability.

The Concept of Disclosure. The concept of disclosure includes more than simple transparency. While transparency provides that all assumptions and all influences that went into the creation of the health economic information are revealed, disclosure goes beyond. The information provider must furnish sufficient detail to enable the audience to make a relevant decision about the information. The amount and sophistication of the detail disclosed will vary according to the expertise and the skills of intended user. At present this concept is poorly developed; standardization of levels of disclosure is needed.

Validation of Health Economic Information. How much protection does the consumer of health economic information want? That will probably depend on the importance of the decision to be made and the discriminatory abilities of the user to determine the quality of an analysis, which will in turn depend on their training and experience. There is no one appropriate level of health economic background needed by all, but clearly there is a need for a basic level of knowledge for all users of health economic information users (see panel 4, education and skills).

A systematized independent review process of health economic research that provided a measure of validity according to generally accepted standards would increase the level of credibility associated with that research. It would confirm that a study met acceptable design, methods, conduct, format, disclosure, and presentation standards. As a form of accreditation, this review would allow users to be more comfortable with reported results.

Recommendations and Next Steps

To strengthen the relevance, usefulness, and credibility of health economic communication, six areas that require future development have been identified.

Identification of Users and Their Needs

To extend the relevance of ongoing health economic research, key users of health economic information should be identified, along with their information needs. This should be a three-step process involving all interested stakeholders, but should be coordinated by an independent professional association such as ISPOR.

- Step 1: Perform a comprehensive evaluation of the literature to determine what has already been published on the subject.
- Step 2: Establish working groups that include other interested professional organizations to identify the relevant stakeholders, the types of information needed, and the potential barriers to communication that exist. This may be an iterative process, including other stakeholders at later stages.
- Step 3: With the information gathered in step 2, prepare and conduct a survey of all users of health economic information, to provide a basis for standardization of communications.

Standard Communication Formats

To increase usefulness of health economic communications, establish standard communication formats based on predetermined relevance, information, and credibility needs of users and on standard health economic performance standards that should be under development elsewhere. These should eventually include: (1) uniform presentation, (2) standard terminology, (3) adequate disclosure, and (4) a basis in previously published guidelines [2,3].

Reporting Guidances (RGs)

As standardized formats are established, reporting guidance (RGs) should be adopted by ISPOR and applied to all publicly presented communications, including ISPOR's journal. Other vehicles of communication, such as other biomedical journals and Internet publishers, should also be encouraged to use these standards. ISPOR reporting guidance should establish reporting standards for each major study type, and over the long term, they should be tailored to each specific type of audience as well.

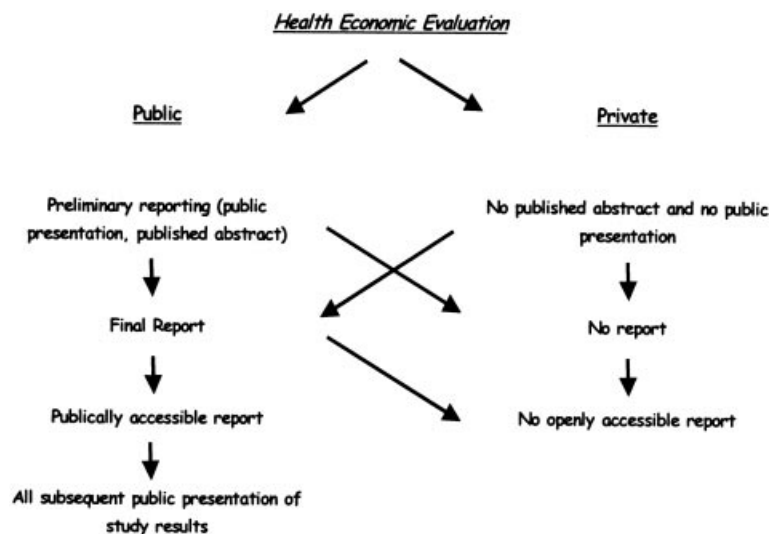


Figure 1 Scheme for the development of a system for public accessibility of health economic research.

Biannual Surveys

Performance surveys to evaluate the use of reporting guidance and the quality of reporting should be undertaken on a biannual basis.

Public Accessibility

A principle of publicly accessible reports that adhere to ISPOR RGs should be established. This would allow access to research reports that is not directly controlled by the researcher or the research organization. Once a report has been “filed” for public accessibility, all subsequent communications could refer to that report. Figure 1 illustrates a scheme for the development of a system for public accessibility.

Enhanced Peer Review

An enhanced mode of peer review should be instituted for all forms of health economic communications. This type of review would assure that there was compliance with ISPOR RGs and fair, full, and adequate disclosure, allow for review of the underlying data and any model used, and con-

firm that all other ISPOR standards for the conduct of health economic studies have been met.

Summary

Pharmacoeconomics has numerous diverse audiences with various perspectives, objectives, backgrounds, and skills. To get the most value from health economic research we need to increase the relevance, usefulness, and credibility of our communications to these audiences. Only by ensuring that we are aware of our audience’s true needs and endeavoring to provide a product they can understand and use, can we have the most impact on decision-making with health economic tools.

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