

Health care access

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Healthcare Program Christopher Lopez Grand Canyon HLT418 August 12,
Abstract

The Effective Healthcare Program (EHP) is a subset of the Agency for Healthcare Research and Quality. The EHP provides funding for comparative effectiveness research, the research into the differences between different treatments for the same condition, as well as the means to publish the findings of this research. The budget of the EHP has changed nearly every year since its inception in 2005, in addition to the \$300 million provided as a one-time funding boost in 2009. However, this money has been spent slowly. The division of labor various sub-groups within the EHP ensure that the research is done in the most cost-effective manner and with consultation to clinical physicians.

The Effective Healthcare Program

Quality health care begins not with the patient or the provider, but with the research behind the treatments being used. The best treatments have been tested and studied for safety and efficacy. However, there may exist many treatments which are available for the same or similar medical conditions. The practice of researching the most cost-effective method of treatment that will still provide the best results is known as comparative effectiveness research. Comparative effectiveness research requires extensive study of the efficacy, side effects, curative powers, manufacturing costs, and price to the consumer, and cannot be done cheaply (Agency for Healthcare Research and Quality, n. d.). Thus, the existence of the Agency for Healthcare Research and Quality (AHRQ)'s " Effective Health Care Program", which provides grants to perform this sort of analysis.

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The Effective Health Care Program (EHP) is designed to uphold the general mission of the AHRQ, to improve the “ effectiveness and safety of American health care.” (Slutsky, 2008). The specific mission of the EHP is to create documentation, based on scientific evidence and literature, that can be used to assist in medical decision-making processes when more than one treatment option is available. The EHP documentation is intended to be accessible to every level of the health care team, from patient to provider to administrators and policy-makers. They include comprehensive comparative reviews of treatment of a disease or condition, reports specific to the effectiveness and safety of a single drug or treatment method, guides that translate medical jargon into language for the layman, and technical briefs for new technologies that have not yet been studied enough for a comprehensive review (Effective Health Care Program, 2008).

The EHC program was created as a result of the Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003, and received its first appropriation in 2005. This initial appropriation was only \$15 million, but in 2008 the program budget was raised to \$30 million. In 2009, the American Recovery and Reinvestment Act was passed, providing a one-time funding boost of \$300 million (Agency for Healthcare Research and Quality, n. d.).

The 2011 budget originally intended to provide a funding boost of \$286 million to the EHP, but much of this was cut during further budget negotiations. A point of note for the spending habits of the program is that as of February 2010, the AHRQ had not yet spent half of the money appropriated to them under the American Recovery and Reinvestment Act.

This fact indicates that the agency is being scrupulously frugal with their appropriations, but also most likely affected the budget in the following year

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(Hogan, 2010).

In an attempt to best achieve their mission, the EHC divides up the different steps in the research process into different component groups. The initial original research is done at individual research centers, which generates the information used in the comparative effectiveness research (Agency for Healthcare Research and Quality, n. d.). These types of research results are analyzed by the Evidence-based Practice Centers, which are made up of clinical-practice physicians who have an interest in research and a skill set in analysis. This allows the EHP to ensure that clinically-trained physicians are involved in comparative effectiveness studies (Agency for Healthcare Research and Quality, n. d.). In addition, the DEcIDE Network, a group of research centers, collects new information and creates original research on emerging medications and technology (Agency for Healthcare Research and Quality, n. d.). The Centers for Education and Research on Therapeutics are responsible for creating documentation about the risks and benefits of new, existing, or combined treatments, based on compilations of existing research (Agency for Healthcare Research and Quality, n. d.). The Scientific Resource Center is designed to assist researchers within the EHP, providing such services as peer review for research and designing protocols for scientific research. The work of the Scientific Resource Center helps the researchers in the other components to maintain impartiality and scientific credibility (Agency for Healthcare Research and Quality, n. d.). The Eisenberg Center organizes the resulting documentation from each of the other components, making it more accessible to the intended audience (Agency for Healthcare Research and Quality, n. d.).

The final component is the Stakeholder Group. The Stakeholder Group exists
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to provide a perspective on the research being produced that is not from a researcher or physician directly. Instead, the Stakeholder Group represents the interests of the American taxpayer and the medical office or hospital administrator; in effect, the Stakeholder Group exists to ensure transparency and efficiency of the EHP. The Stakeholder Group is also responsible for setting the standards for a successful piece of research and determining the need for funding for further research. In this way, the stream of funding is controlled not by those who will use the money, the researchers, but by those who will benefit from the results of its being spent (Agency for Healthcare Research and Quality, n. d.).

Based on the budgetary evidence and the need for a program to fill this role, the Effective Research Program is an excellent use of taxpayer money. The need to reduce the overall cost of health care while simultaneously providing wider insurance coverage ultimately leaves only the option to reduce the actual cost of treatment. Comparative effectiveness research provides policymakers, clinicians, and patients with the necessary information to choose the option best combining the needs of safety, efficacy, and cost. However, this research is unlikely to produce profit in the form of new medications and treatments, and so the for-profit pharmaceutical companies are unlikely to fund it (Mushlin & Ghomrawi, 2010). The EHP provides the information to make those health care choices, and does so in a cost-effective and administratively transparent way. Spending this money will increase the average quality of health care for all Americans.

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