II. Prioritization criteria, 2nd Draft, May 19, 2009 (distributed to TEPP after first conference call)

Draft Prioritization Criteria for

BCBSA TEC Pilot Project on Identifying Research Needs on *Comparative Effectiveness of Therapies for Clinically Localized Prostate Cancer* (Minnesota EPC, February 2008)

Prioritization Criteria for Research Gaps

Category	Criterion
	 Incorporates both clinical benefits and harms.
	 Represents important variation in clinical care due to controversy/uncertainty regarding appropriate care.
Current importance	 Addresses high costs to consumers, patients, health-care systems, or payers.
	 Utility of available evidence limited by changes in practice, e.g., disease detection.
Potential for significant health impact	Potential for significant health impact:
	 To improve <u>health outcomes</u>.
	 To reduce <u>significant variation</u> related to quality of care.
	 To reduce <u>unnecessary burden</u> on those with health-care problems.
	 Potential for significant economic impact, reducing unnecessary or excessive costs.
	Potential for evidence-based change.
	 Potential risk from inaction, i.e., lack of evidence for decisionmaking produces
-	unintended harms
	 Addresses inequities, vulnerable populations, patient subgroups with differential impact (e.g., by age).

Prioritization Criteria for Research Studies/Designs to Address Research Gaps

Category	Criterion
Current importance	 Incorporates both clinical benefits and harms. Represents important variation in clinical care due to controversy/uncertainty regarding appropriate care. Addresses high costs to consumers, patients, health-care systems, or payers. Utility of available evidence limited by changes in practice, e.g., disease detection. Potential for significant health impact: To improve health outcomes. To reduce significant variation related to quality of care.
Potential for significant health impact	 To reduce <u>unnecessary burden</u> on those with health-care problems. Potential for significant economic impact, reducing unnecessary or excessive costs. Potential for evidence-based change. Potential risk from inaction, i.e., lack of evidence for decisionmaking produces unintended harms Addresses inequities, vulnerable populations, patient subgroups with differential impact (e.g., by age).
Incremental value	 Adds useful new information to existing portfolio of research on topic OR Validates existing research when body of evidence is scant.
Feasibility	Factors to be considered: Interest among researchers. Duration. Cost. Methodological complexity (e.g., do existing methods need to be refined?). Implementation difficulty. Facilitating factors. Potential funders.