# 2018 Annual Research Meeting (ARM) Conference Theme Areas of Focus

The 2018 ARM is organized around the following 21 themes in health services research and policy:

# AGING, DISABILITY, AND END-OF-LIFE

This theme encourages abstract submissions that address one or more of its three dimensions: aging, disability, and end-of-life

- Innovative policies, programs, and initiatives to encourage quality and better coordination of services for older adults and people with disabilities
- Alternative payment models in long-term services and supports (LTSS) across the care spectrum
- The role of social determinants and non-health care services (e.g., housing, transportation, meal programs, informal care) in the well-being of older adults and people with disabilities
- Policy, planning, and strategies that address changing needs and preferences for LTSS, informal care, and family caregiver support
- Approaches for improving access and outcomes in palliative and end-of-life care
- Successful approaches to optimizing function and quality of life for people with dementia and their families
- Strategies to reduce disparities in access to, and quality of, LTSS

#### **BEHAVIORAL HEALTH**

- Evaluating the implementation and effects of federal and state policy changes (e.g., federal parity, Medicaid expansions, ACA behavioral health benefit expansions, ACOs/shared savings models, cannabis legalization) on health services utilization, cost, and outcomes
- Understanding and overcoming disparities in behavioral health services and outcomes
- Prevention and management of unhealthy substance use
- Development, testing, and implementation of behavioral health services, including models/methods used, alternate or promising payment models, outcomes, and unintended consequences
- Innovations in behavioral health services, including telemedicine, technology, and media supports in behavioral health care
- Behavioral health interventions for returning veterans and service members

### CHILD AND FAMILY HEALTH

- Coverage, access, and payment for child and family health, including mental health and substance use treatment and addressing social determinants of health, in the era of health reform - CHIP, Medicaid, ACA
- Promoting healthy development and addressing developmental trauma and toxic stress: care models, evidence and impact, work force development and policy
- Disparities/inequities in child, adolescent and family health, differential causes of child and family morbidity & mortality, innovative policy and programmatic interventions to advance child health equity, both domestic and international
- Innovations for the delivery of child, adolescent and family health care: cross-sector, new models of integrated care, health system
- Patient- and family-centeredness: promoting engagement and agency among families and communities, patient/stakeholder engagement in the research process

 Developments and methodological improvements in the measurement and reporting of child and family health care quality/safety, for health systems, providers and policy makers

#### **CONSUMER CHOICE AND INCENTIVES**

- Choice of health insurance plans, particularly in health insurance exchanges
- Consumerism and use of different types of information (e.g., prices, quality, ratings) in health care decisions
- Impact of insurance benefit designs (e.g., high-deductible health plans) on health care choices and utilization
- Strategies to enhance patient engagement
- Decision making around social determinants of health
- Using behavioral economics (e.g., financial incentives) to influence consumer and provider decisions
- Evidence on shared decision making tools

### **COVERAGE, ACCESS, AND MEDICAID**

- Trends in coverage (employer sponsored, Marketplace, Medicaid, uninsured, and churning between programs) and the impacts of federal and state policy and regulatory changes on coverage
- Trends in access, utilization, health, financial security, and labor market outcomes and impacts of federal and state policy and regulatory changes on these outcomes
- Trends in public and private health plan characteristics, including provider networks, premiums, and cost-sharing, and their impacts on access, use, health and financial security
- State Medicaid policy variation, including waiver approaches, and implications for coverage, access, use, health, and program costs
- Legal and regulatory issues with implications for health insurance coverage and access to care, including those related to provisions of the ACA and alternative reform proposals

# **DIGITAL TECHNOLOGIES AND HEALTH**

- Ethical, legal, and regulatory/policy issues surrounding digital technologies (e.g., EHRs, telemedicine, sensors, consumer-oriented technologies (e.g., patient portals), administrative (i.e., insurance, scheduling) systems, ancillary (e.g., pharmacy, radiology, laboratory, long-term care, home care) systems)
- Progress in adoption, implementation, diffusion, and value-creation from digital technologies and digital data for clinical care, public health, and research
- Socio-technical and organizational issues surrounding the use of digital technology platforms to enable clinical transformation, population health management, and the development of a learning health system
- Patient and community engagement in health via patient portals and other consumeroriented technologies (e.g., electronic patient reported outcomes, patient decision making, mHealth, self-scheduling)
- Challenges and opportunities for technology innovation and entrepreneurship
- The impact of big data analytics, data science, and open science on health system transformation
- Emerging data sources (e.g., sensor technologies, social media, social determinants, and linked open data) and their impact on health systems and policies
- Leveraging technology to make sense of complex data (e.g. how to combine genomics, clinical, financial, digital dust, etc. to accelerate discovery)

### **DISPARITIES AND HEALTH EQUITY**

- Research that advances our understanding of social risk factors or the social determinants of health on health disparities and health equity
- Research that evaluates delivery reform, stakeholder engagement, or community linkages to reduce disparities and advance equity through interventions aimed at reducing social risk factors at the local, state/regional or national level
- Descriptions of methodological challenges in implementing multi-level/multi-component interventions in "real world" pragmatic studies to reduce disparities
- Research on the role of telehealth and health IT (including EHR, e-prescribing, mobile applications, text messaging, and virtual reality) in reducing disparities in populations experiencing isolation (including geographical or due to transportation)
- Research (including qualitative and mixed method research) that focuses on creating a common language and that seeks to avoid paternalistic and potentially disempowering language (e.g. poor, needy, vulnerable, at-risk, and underserved)
- Research examining the effect of health policies (including insurance loss, reduction, or ineligibility, delivery system reform, value-based and alternative payment models) on health and health care disparities
- Research that advances our understanding of the relationship between health literacy and language access on health, health disparities, and health equity (including for immigrants and refugee populations)

#### **HEALTH WORKFORCE**

- Characteristics and outcomes of interprofessional and team-based models of care
- Licensed and unlicensed health professional career trajectories
- Workforce implications of increasing use of technology and telehealth
- Impacts of emerging care delivery and payment models on the workforce (e.g., PCMHs, ACOs, Accountable Health Communities)
- Workforce implications of health care and social service integration
- Impacts of health professions' regulatory and practice environments on effective use of the health workforce
- Strategies that support practice in high need areas (e.g., medically underserved, rural, primary care)
- Innovations in measuring health workforce supply, demand and relationship to population need

### HIGH COST, HIGH NEED

- Improving measurement of care quality, outcomes and value for people with high needs and costs due to complex chronic conditions.
- Innovations in care coordination and management focusing on patient-centered care
  planning across care settings (e.g., primary care, transitional care, palliative care, long
  term care) and diseases.
- Addressing multi-morbidity and treatment burden across the lifespan including behavioral health and social needs.
- Innovations for financing and delivery systems to support optimizing care for complex chronic conditions
- Understanding the implications of intersecting complex social and health care needs on patient experience, functional status, cost, or quality of care.
- Insurance and benefit design for high-need, high-cost individuals alongside low risk individuals, including consideration of appropriate risk pools

### IMPROVING SAFETY, QUALITY, AND VALUE

- Studies of innovative interventions that aim to improve quality, safety, or value such as new policies, payment strategies, initiatives, tools, or care models at the federal, state, or local level (both design and evaluation)
- Studies of potential roles for the person, patient, or public in quality, safety, and value improvement
- Approaches for achieving person-, provider-, and community-level engagement in quality, safety, or value improvement
- Studies of the impact of diagnostic and treatment delays or errors on quality and value
- Studies of contextual factors (payment, organizational, professional) that influence the effectiveness of improvement interventions, their implementation, and sustainability
- Studies of cognitive, team-based, and systems-oriented solutions to improve safety and quality of care.

#### **LESSONS FROM ABROAD**

This theme encourages abstract submissions from a range of country contexts, from high income settings to low and middle income settings

- Translation of evidence into practice or policy, within a single country or across borders
- Experimental evaluations of population health interventions
- Research involving patients, public, policy makers and the impact of such involvement
- The impact of shifting priorities and resources from hospital to community or population based health and care
- Solutions for multi-morbidity and long-term care
- Tackling inequities in health and/or health care: political, organizational and technical responses
- Innovations in health services and systems research: data, methods, participation
- Responding to the challenge of non-communicable diseases: lessons from countries at all levels of development

### MEASURING SAFETY, QUALITY, AND VALUE

- Measuring inappropriate use of health services, including medications
- Measures of provider, practice, and health system characteristics to support improvement of the safety, quality, value, and equity of health services
- Application of qualitative and mixed methods to measure the safety, quality, value, and equity of health services
- Developing personalized quality metrics that consider patient and disease heterogeneity
- Methods for measuring patient-reported outcomes
- The inadvertent consequences of quality measurement and reporting
- Methods for measuring benefit-risk balance of new medicines and devices
- Measuring the value of hospital care, provider services, and pharmaceuticals in a valuebased payment world

#### **MEDICARE**

- Impacts of alternative payment models such as ACOs, bundled payments, and Medicare Advantage on cost and quality
- Prescription drugs and other specialty care markets
- Role of beneficiary choice: plans, providers, treatments, access to expensive services and specialty care including issues for Medicare/Medicaid dual eligible beneficiaries and other economically vulnerable seniors
- Performance measurement, quality of care, and value-based purchasing initiatives

- MACRA incentives, provider integration and consolidation and other issues in physician payment
- Interactions between Medicare and other healthcare markets and payers

#### METHODS RESEARCH

- Real-world compilation, linkage, and analysis of "big" and complex data (e.g., claims, electronic health records, omics, clinical, financial, digital dust)
- Development of techniques to promote patient engagement in research
- Innovative approaches to development or standardization of health informatics tools
- Methods for causal inference
- Development and evaluation of metrics for dissemination and implementation strategies and outcomes
- Innovative approaches in systems science, decision science, and simulation
- Artificial intelligence, predictive modeling, machine learning, and deep learning in health care
- Methods to adapt and scale-up local innovations from diverse settings
- Qualitative and quantitative methods for building inter-sectorial collaborative partnerships

#### **ORAL HEALTH**

- Oral health during the life course. Interprofessional partnerships and integration of oral health into primary health care and community health and wellness.
- Identifying and addressing oral health disparities. Incorporating an oral health equity lens into population oral health.
- Impact and implications of oral health policies on oral health, dental care and disparities.
- Impact and implications of dental workforce models on oral health, dental care access and quality across diverse populations. Provider behavior and organizational context to implement evidence-based care.
- Innovations in dental care delivery systems and practices to improve access to care and care coordination, oral health promotion and disease prevention, disease management and quality of care.
- Innovation in cost and payment models promoting patient-centered dental care, population oral health and oral health equity.
- Strategies for adaptation, scale up and spread of evidence-based dental interventions and for de-implementation of dental interventions that are not evidence-based, harmful, wasteful or sub-optimal to patients.
- Data quality, sharing and analytic methods; standards, metrics and measures including patient-centered oral health outcomes.
- Advocacy and patient and consumer experience and engagement in oral health research, practice and policies

## ORGANIZATIONAL BEHAVIOR AND MANAGEMENT

- Organizational and system factors driving cost, quality of care, and patient care experiences.
- Innovative and emerging health care delivery models for inpatient and outpatient care settings
- Approaches to defining, measuring, rewarding, and improving team performance in health care
- Strategies or initiative to improve operational efficiency and clinician/staff engagement in performance improvement, including unintended consequences

- Interventions and policies that promote the adoption of evidence-based organizational capabilities and processes in health care, including organizational unlearning and divestment
- Role of clinicians, managers, teams, boards, and consumers in leading and managing change in health care organizations

#### PATIENT-CENTERED RESEARCH

- Share best stakeholder engagement strategies to successfully conduct patient-centered outcomes research (PCOR)
- Generating PCOR/CER evidence within PCORnet: Challenges and Opportunities
- Development of new PCOR/CER methodology and strategies
- PCOR influence on policy and national research directions
- Reports on patient-centered interventions in clinical trials
- Design and testing of individually- tailored interventions in research
- Engaging patients and families as partners in research studies
- Value of engagement in dissemination and implementation
- Engagement makes better science lessons learned from PCORI research

# **PAYMENT AND DELIVERY SYSTEMS INNOVATIONS**

- Evidence on trends and patterns in the adoption of alternative payment models and delivery system innovations
- Evidence on the impact of different payment mechanisms on the delivery of care
- Evaluations of payment and delivery reforms aimed at achieving multiple goals, including improving health outcomes, quality, equity, care coordination, or the value of care
- Evidence on the effects of health care innovations aimed at improving the management of high-need, high-cost patients
- Evidence on the effects of alternative payment models at the level of the payer, organizational provider or individual practitioner
- Evaluations of payment and delivery reforms promoting population health management
- Evidence on payment and delivery reforms intended to address the social determinants of health and improve linkages between providers and their communities
- Evaluations of payment and delivery reforms that integrate medical and behavioral health care
- Analyses using systems science to study delivery system innovations
- Analyses of the ethical dimensions of changes in provider payment and incentives

### **PUBLIC AND POPULATION HEALTH**

- State and local innovations and evidence of their impact on population health
- Population health efforts (including community-clinical linkages) supported by the health care sector
- Increasing health equity through: public policy, community level advocacy initiatives, and efforts to address social determinants of health
- Examining intersectionality as a framework for population health and structural racism as a contributing factor to health inequity
- Making the business case for population health: economic evaluations of evidencebased interventions
- Innovative systems science, metrics, and measurement to evaluate systems change and multi-sectoral approaches to improve population health
- Ethical dimensions of resource allocation and public policy affecting population health

### TRANSLATION, DISSEMINATION, IMPLEMENTATION, AND IMPACT

- Advances in qualitative, quantitative, and/or mixed methods measurement of implementation context, fidelity, readiness for change and other implementation-related constructs, such as treatment adaptation
- Innovative approaches to the dissemination, implementation and scale up/spread of research results by healthcare providers, including through research-clinical-policy partnerships, network interventions, and health information technologies
- Strategies for improving implementation, adaptation, scale-up and spread of evidencebased practice including knowledge management and transfer.
- Implementation strategies that work across different settings, including from micro (e.g. individual, group or pilot study) to macro (e.g., institutions, countries or large scale studies)
- Methodologies to evaluate the impact of translation, dissemination and implementation on a series of clinical outcomes (e.g., using comparative effectiveness designs)
- Testing strategies for enhancing stakeholder engagement in implementation, spread and/or sustainment of evidence-based practices or new care models, including multilevel engagement
- Strategies to reduce the use of interventions or de-implementation of practices that are not evidence-based, have been prematurely and widely adopted, yield sub-optimal benefits for patients, or are harmful or wasteful
- Examination of the interaction of macro, meso and micro processes in measurement and testing and interpretation of implementation findings
- Development and testing of translation, dissemination and implementation measurement
- Multi-stage studies that establish evidence, translate it and scale it.

#### **WOMEN'S HEALTH**

This theme encourages abstracts that address the full continuum of women's health issues across the lifespan

- Women's preventive health services across the life course (e.g., mammography screening, chronic disease - cardiovascular/diabetes/HIV - prevention) and across communities (e.g., population health, shared decision making, health disparities; social/physical environmental context)
- Family planning, reproductive health, and maternal health (e.g. maternal morbidity & mortality; social, behavioral, and environmental determinants of health; family planning policies and implementation)
- Role of gender as a social determinant of health and health outcomes (e.g., intimate partner violence and sexual assault; health disparities/inequities; participation in research)
- Chronic disease experience, management (e.g., atypical disease presentations; new diagnostic and treatment strategies; social/emotional coping with chronic illness; chronic pain; anxiety/depression). Papers related to cardiovascular disease and Alzheimer's are encouraged.
- Caregiving and the multiple demands on women (e.g., multigenerational care) impact on women's health, including stress, coping and resilience
- Low value care in women's health, best health care evidence and practices on overuse/ underuse of treatments, medications, uncertainty, diagnoses