



**FOR IMMEDIATE RELEASE**

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## **PIPC Publishes White Paper on CER Priority-Setting**

*Partnership to Improve Patient Care paper maps sound process for setting research priorities*

**Washington, D.C.** –The [Partnership to Improve Patient Care](http://www.improvepatientcare.org) (PIPC) today announced the release of a white-paper on priority-setting in comparative effectiveness research (CER). The paper, [“Priority Setting for Comparative Effectiveness Research: A Review of Key Elements,”](#) is intended to help the Patient Centered Outcomes and Research Institute’s (PCORI) Board of Governors as they work to establish a program for patient-centered CER.

The paper identifies five key elements for sound CER priority-setting: transparency and openness; stakeholder participation; multiple input opportunities; clinical input and guidance; and a systematic procedure for decision-makers to gather and incorporate the input they receive.

“We hope that our paper is helpful to the PCORI board as they move forward in their important mission of enhancing the quality of health care for American patients,” said PIPC Chairman Tony Coelho. “If done right, CER will provide valuable information to help patients and doctors come to better informed medical decisions. An important initial step in this will be identifying research priorities that matter most to patients and providers.”

The PCORI board, which was created by the Patient Protection and Affordable Care Act, is charged with setting CER priorities and communicating results to the public in a clear and understandable manner. The board includes a diverse array of members, including three patient and consumer representatives who will advocate for patient’s interests on the board.

The Partnership to Improve Patient Care worked closely with policymakers and patient groups during the health care debate to help ensure that patient-centered CER provisions, like PCORI, were included in the final health care law. PIPC is now closely monitoring the implementation of those provisions as CER efforts in the United States continue to take shape.

### **About PIPC**

*The Partnership to Improve Patient Care was formed in November 2008 to support proposals to expand the government’s role in comparative effectiveness research that are centered on patient and provider needs; raise awareness about the value of well-designed CER; and promote the important role of continued medical innovation as part of the solution to cost and quality challenges in health care. Partnership members include a wide range of health care organizations representing patient advocacy, provider, and industry groups.*

To learn more about PIPC, visit <http://www.improvepatientcare.org>.