HCSRN BOILERPLATE FOR GRANT WRITERS

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**The Health Care Systems Research Network** (HCSRN, [www.hcsrn.org](http://www.hcsrn.org/)), formerly known as the HMO Research Network, is a consortium of 18 U.S. health care systems with a 19th member site in Israel. Each HCSRN research center is affiliated with a not-for-profit health care system and conducts public domain research meant to advance population health. Most of the HCSRN’s research centers have been active for the several decades. The HCSRN’s vision is to be the nation’s preeminent source of population-based research that measurably improves health and health care.

Collectively, the HCSRN represents over 1,900 scientists and research staff from health care systems serving >28.4 million unique patients. The HCSRN brings together methodological and content expertise for an array of disciplines - such as epidemiology, health services research, outcomes and quality of care assessment, qualitative methods, health disparities, health economics, and clinical trials.

HCSRN affiliated health care systems provide care through group or staff model delivery systems, network, and individual practice association or point of service models. HCSRN plans provide services through various financial models (e.g., capitation, fee-for-service and self-insurance that includes copayments and deductibles). Most also provide care through commercial, Medicare, Medicaid and state-specific ‘gap’ insurance programs, reflecting essentially all health services and finance options in the U.S. This provides a rare opportunity to study the impact of clinical questions for all ages and insurance relationships within a unified health service delivery and health information systems framework.

All HCSRN health systems have electronic medical records that allow for more efficient and richer data-only studies, as well as the potential for unique interventions. HCSRN organizations have also invested in additional information technology to connect and standardize information across multiple health system databases. Each health system uses unique medical record numbers to allow tracking of study participants across their databases, with detailed membership records and resource utilization. Data on death from health plan and state death records, along with information on costs, are available for most systems. A unique aspect of the Network is the availability of clinical data in the form of inpatient and outpatient diagnoses and procedures, pharmacy data, and lab testing/results. Many HCSRN sites have ≥ 90% of members with a pharmacy benefit employing only modest copays, providing strong financial incentives to fill prescriptions through their health plan insurance to yield nearly comprehensive data on drug exposure.

Key organizational characteristics of the HCSRN:

* The HCSRN offers a nationally representative sample of the U.S. health care experience that reflects community-based care.
* Using population-based care models, all member plans provide comprehensive health services (e.g., primary prevention to end-of-life care).
* HCSRN member plans provide care to commercially insured individuals and those insured via Medicare, Medicaid, state specific gap programs and other financial arrangements. Thus, HCSRN-based research can address clinical and health policy questions relevant to every market segment through which insured Americans receive health care, although will be most generalizable to insured individuals.
* All HCSRN member plans have provided health care for > 25 years and serve relatively stable populations that are diverse across age, gender and race/ethnicity. Research conducted by our investigators demonstrates that disenrollment rates diminish with older age and in the presence of chronic illnesses. This stability provides a unique opportunity for longitudinal research with systematic follow-up and assessment.
* HCSRN delivery systems have extraordinary administrative and clinical data resources to support research. All plans have fully-implemented, comprehensive electronic medical records. In addition, HCSRN organizations have developed robust disease-specific registries for multiple chronic conditions (e.g., coronary heart disease, heart failure, diabetes, hypertension, dyslipidemia) and other conditions. These registries provide detailed population-based clinical information for key chronic illnesses and health behaviors.
* Finally, HCSRN collaborations offer the ability to “close the loop” of the cycle between research results and clinical care by facilitating tracking of therapies delivered, identifying factors associated with differential treatment and the consequences of the adoption or non-adoption of cardiovascular therapies within usual care, “real world” patient populations.