Now 20 members strong and with nearly 30 years of experience behind us, the Health Care Systems Research Network (HCSRN) is positioned to impact health and U.S. health care policy as never before. The HCSRN has the embedded researchers, expertise and population base needed to carry out comparative effectiveness studies and translational health services research in a manner unmatched by other U.S. based health research networks.

Since 1994, the HCSRN has sought to improve population health and the delivery of health care.

We accomplish this by:

- fostering multidisciplinary research collaboration
- disseminating information about the research interests, resources, and capabilities of our sites and researchers
- sharing methodologies, best practices, and consultative expertise across research centers
- leveraging our unique assets, embedded researchers, populations, and comprehensive data
HCSRN research centers are committed to public domain research that advances population health.

Each health care delivery system is a private entity that provides comprehensive health care (e.g., primary prevention to end-of-life care) to commercially insured individuals, as well as those insured via Medicare, Medicaid, state-specific gap programs, and other financial arrangements. Thus, our research addresses clinical and health policy questions relevant to every market segment through which insured populations receive health care.

HCSRN research includes:
- Advanced biostatistics
- Behavioral & mental health
- Cancer research
- Comparative effectiveness research
- Complementary & alternative medicine
- Communication & health literacy research
- Dissemination & implementation
- Epidemiology
- Genomic & genetic research
- Health disparities research
- Health informatics
- Health services & health economics
- Infectious & chronic disease surveillance
- Patient-centered care
- Pharmacoepidemiology
- Pharmacoeconomics
- Primary & secondary prevention
- Systems change & organizational behavior

HCSRN members have extraordinary administrative and clinical data resources to support research, including mature electronic medical records and robust disease-specific registries for multiple key health behaviors and chronic conditions (e.g., cancer, heart disease, asthma, diabetes, hypertension, obesity). These systems can help us track therapies delivered, identify factors associated with differential treatments, and determine the consequences of adoption or non-adoption of new diagnostic modalities and therapies in real-world patient populations.

The Virtual Data Warehouse (VDW) facilitates efficient multicenter research. An HCSRN-wide workgroup determines the administrative, clinical and claims data to extract from sites’ legacy systems, agrees on definitions and formats to apply, and coordinates implementation across sites. Patient-level data remain at each site until a study-specific need arises. After ethical, contractual and HIPAA requirements are met, a program can be written by one site and run at other sites with minimal customization. HCSRN researchers can leverage these data assets to report on health outcomes and other patient-, provider-, and system-level factors affecting health and healthcare.

This approach maximizes patient privacy and security yet is tremendously efficient. The VDW is a growing resource, as we are routinely adding new variables and data areas.

Health Care Systems Research Network collaborations offer the ability to close the loop between research and clinical