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AHRQ News and Numbers

While more than one-third of Hispanics under age 65 do not have health insurance, the portion without insurance among those who are not U.S. citizens is far larger—nearly two-thirds. By comparison, about a quarter of Hispanics who are U.S. citizens are uninsured. Among Hispanics overall, about 12 percent of non-citizens have public health insurance, such as Medicaid. The rate is about 30 percent for those who are U.S. citizens. [Source: Agency for Healthcare Research and Quality, MEPS, *Statistical Brief #143: Health Insurance Status of Hispanic Subpopulations in 2004: Estimates for the U.S. Civilian Noninstitutionalized Population under Age 65* [statistical brief](#).]

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1. New Evidence Report Finds Most Genomic Tests to Identify or Treat Ovarian Cancer Have Not Shown Clinical Value

Genomic tests currently used to diagnose and guide treatment of ovarian cancer are not shown to decrease the number of women who die from the disease or improve their quality of life, according to a new report supported by a partnership with AHRQ and CDC's Division of Cancer Prevention and Control and National Office of Public Health Genomics. This report is the first of a series of five evidence reports that are part of an inter-agency collaboration between AHRQ and CDC. As part of the CDC-supported Evaluation of Genomic Applications in Practice and Prevention (EGAPP) project, the EGAPP working group will evaluate the evidence presented in the report and make recommendations in the near future about the use of these tests for screening, diagnosis, and treatment of ovarian cancer. The report, *Genomic Tests for Ovarian Cancer Detection and Management*, was prepared by a team of researchers led by Evan Myers, M.D., M.P.H., of AHRQ's Duke University Evidence-based Practice Center in Durham, North Carolina. Select to read the [report](#). A print copy of the report is available by sending an e-mail to ahrqpubs@ahrq.hhs.gov.

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2. AHRQ Offers HCUP Web-based Training on October 25

AHRQ is offering a 90-minute Web-based training session on October 25 called "Healthcare Cost and Utilization Project (HCUP): Tools and Software to Ease and Enhance Your Use of Powerful Administrative Healthcare Data." The Web seminar is being conducted in partnership with the American Medical Informatics Association (AMIA) through their e-Learning Center. The event will be delivered via Web-Ex, an on-line conferencing tool that can be accessed from remote locations. The cost for non-AMIA members is \$90. Select to [register](#) and for more information.

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3. New AHRQ HCUP Highlights – Hospital and Ambulatory Surgery Care for Women's Cancers

AHRQ's HCUP Highlights Issue 2, *Hospital and Ambulatory Surgery Care for Women's Cancers*, was just published. It summarizes trends in hospital and outpatient surgery use, treatment costs, and changing practice patterns for breast and gynecologic cancer care. The information is based on hospital discharge data and outpatient ambulatory surgery data drawn from HCUP databases. Major findings include:

- Hospital use and spending for women's cancers vary according to multiple factors, including patient's age, health insurance coverage, and cancer diagnosis. Medicare and Medicaid are billed for half of these hospitalizations.
- While the number of hospitalizations for breast cancer treatment declined between 2001 and 2003, hospital expenses continued to increase. Expenses rose both for patients without complications and for patients with neutropenia – a common complication of chemotherapy. Neutropenia-related expenses are typically higher than expenses for patients without complications, but over the 3-year period of study, the gap narrowed.
- Geographic location, health insurance type, and existing health factors (e.g., presence of other diseases) affect patterns of care for breast cancer treatment, particularly for outpatient surgeries.

Select to read this [highlight](#). A print copy is available by sending an e-mail to ahrqpubs@ahrq.hhs.gov.

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4. AHRQ Calls for Home Health Care Measures of Consumers' Experiences by October 25

AHRQ is soliciting the submission of instruments that measure perceptions of patients and their informal caregivers regarding the quality of home health care. This initiative is in response to the need to develop a new CAHPS® home health care survey. The survey is to assess the quality of care and services provided by nurses, therapists, home health aides, medical social workers, and home health agency administrative staff. Please submit instruments and supporting information by October 25. Select to read the September 25 [Federal Register](#) notice.

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5. AHRQ's Healthcare 411 Audio Newscast Highlights Health IT Study and Features "Quality Insider" on Risks and Benefits

AHRQ's latest audio newscast features an interview with AHRQ health IT grantee Susan Horn, Ph.D., senior scientist for the Institute for Clinical Outcomes Research, Salt Lake City, UT, discussing her study that used health IT to reduce the prevalence of pressure ulcers in nursing homes. Dr. Horn worked with the nursing home staff to help them design new forms to better track the health of the residents and

reduced pressure ulcers by one-third. The 12-minute newscast also highlights some findings from a recent Kaiser/AHRQ survey on the public's view of medical errors, discusses a comparative study on medications for osteoarthritis, and includes a 40-second promo we created about the four-part *Remaking American Medicine* series that began airing on PBS on October 5. Select to listen to this [newscast](#). In addition, AHRQ's latest Healthcare 411 "Quality Insider" is about understanding the risks and benefits of medical treatments and procedures. AHRQ Director Carolyn M. Clancy, M.D., explains the terms and discusses how risks and benefits help you to make decisions about your health care treatment. Select to listen to the 9-minute [audio](#) program. You can listen directly through your computer if it has a sound card and speakers and can play MP3 audio files, or you can download it to a portable audio device. In any case, you will be able to listen at your convenience—whenever you have the time. Visit our [Healthcare 411](#) series main page to access any of AHRQ's newscasts and special reports. Sign up for a free subscription to the series to receive notice of all future AHRQ podcasts.

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6. AHRQ's MEPS and HCUP and the American Public Health Association Continuing Education Institute Seminar Set for November 4

The American Public Health Association and AHRQ are sponsoring two free workshops on November 4 in Boston, MA. HCUP is sponsoring a half-day workshop to introduce health services and policy researchers to HCUP and provide them with the foundational resources to apply HCUP data to their research interests. MEPS is sponsoring a 1-day workshop to provide an in-depth learning experience concerning MEPS' Household Component. Select for [registration](#) and more information.

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7. AHRQ Issues Addendum to Funding Opportunity Announcement for CERTs Program

On October 11, AHRQ announced an addendum to two CERTs FOAs published September 27 and now intends to commit up to \$1 million to fund an additional Health IT CERTs Research Center. This amount is in addition to the funding level of approximately \$7 million in FY 2007 to fund up to seven cooperative agreements and up to \$400,000 annually for one coordinating center described in the published FOA announcements for the [Research Centers](#) and for the [Coordinating Center](#). Select to read the [addendum announcement](#). Letters of intent are due by November 10. All applications must be submitted electronically by 5:00 p.m. EST on December 14.

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8. Change in Standing Receipt Dates for AHRQ Grant Applications Beginning in January 2007

AHRQ published on October 5 a notice informing the extramural research community of a change in standard receipt dates for grant applications submitted to AHRQ. The new receipt dates will be effective as of January 2007 and will apply to both paper and electronic applications. New dates are announced for a variety of new, renewal, resubmission, and revision applications. Select for [details](#) on specific changes by funding mechanism.

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9. AHRQ in the Professional Literature

We are providing the following hyperlinks to journal abstracts through PubMed® for your convenience. Unfortunately, some of you may not be able to access the abstracts because of firewalls or specific

settings on your individual computer systems. If you are having problems, you should ask your technical support staff for possible remedies.

Glaser AY, Hall CB, Uribe S JI, et al. Medical students' attitudes toward the use of an endoscopic sinus surgery simulator as a training tool. *Am J Rhinol* 2006 Mar-Apr; 20(2):177-179. Select to read the [abstract](#) in PubMed®.

Ridley DB, Kramer JM, Tilson HH, et al. Spending on postapproval drug safety. *Health Aff* 2006 Mar-Apr; 25(2):429-436. Select to read the [abstract](#) in PubMed®.

Raebel MA, Carroll NM, Andrade SE, et al. Monitoring of drugs with a narrow therapeutic range in ambulatory care. *Am J Manag Care* 2006 May; 12(5):268-274. Select to read the [abstract](#) in PubMed®.

Carter MW, Porell FW. Nursing home performance on select publicly reported quality indicators and resident risk of hospitalization: grappling with policy implications. *J Aging Soc Policy* 2006; 18(1):17-39. Select to read the [abstract](#) in PubMed®.

Gandhi TK, Kachalia A, Thomas EJ, et al. Missed and delayed diagnoses in the ambulatory setting: a study of closed malpractice claims. *Ann Intern Med* 2006 Oct 3; 145(7):488-496. Select to read the [abstract](#) in PubMed®.

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