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# Center for Outcomes Effectiveness Research and Education (COERE) Projects

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Stage	Project Name	Project Description	Principal Investigator	Partners
Completed	Internet Intervention for Improving Rural Diabetes Care	<p>This is a 4-year randomized trial of an Internet-based intervention for improving guideline adherence by rural Alabama physicians caring for adult patients with type 2 diabetes. Rural Alabama has many disadvantaged and minority patients with limited health care access. Patients with diabetes in rural Alabama receive poorer quality of care and have worse outcomes compared to urban patients. This project proposes to (1) assess barriers to implementation of diabetes guidelines and identify solutions through focus groups and case-based vignette surveys; (2) develop and implement an interactive Internet intervention including individualized physician performance feedback; (3) evaluate the intervention in a randomized controlled trial; and (4) examine the sustainability of improved guideline adherence once feedback ceases. In partnership with the University of Alabama rural medicine program, the study will randomize 200 rural physician offices to an intervention or comparison arm. This is an 18-month intervention, customized to the individual physician in real-time, consisting of Internet learning modules with case-based education, performance feedback, and benchmarks.</p>		NIDDK (\$2 Million)

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Completed	Deep South Partnership for Prevention of CVD Disparities (Alabama Collaboration for Cardiovascular Equality)	This is a 5-Year grant from the NHLBI which develops a PARTNERSHIP program building on the existing relationships between a minority serving system (Cooper Green Hospital, the Mineral District Medical Society, and Tuskegee University) and a research-intensive medical center, the University of Alabama at Birmingham (UAB) to focus on inequities in CVD prevention, care, and outcomes. Four interdisciplinary research projects and a training program are funded through this program grant.		NHLBI (\$2M)
Completed	Dental Tobacco Control.Net: Improving Practice	Tobacco control in dental practices is both important and under-used, in part because not enough is known about effective methods for translating tobacco counseling guidelines into practice. We propose a randomized controlled trial (RCT) to test an interactive, multimodal intervention designed to increase tobacco cessation counseling in dental practices. Methods: Using advanced Internet programming, and informed by focus groups with dentists, dental hygienists, and dental assistants we will develop DentalTobaccoControl.Net (DTC.Net) to deliver the intervention. The intervention will include case-based training, online opinion leader statements, a downloadable tobacco cessation toolbox, an "Ask the Expert" function, and a "collaboratory" where dental providers can communicate.		NIDCR (\$2M)

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Completed	MI-Plus: Web-Enhanced Post MI + Co-Morbidity Guidelines	This is a 5-year web-based intervention trial to increase adherence to practice guidelines aimed at the outpatient management of complex patients who are post Myocardial Infarction. The study will develop guidelines based performance measures for evaluating the quality of care provided by participating physicians, and to test the impact on performance of an interactive Internet intervention. The study will involve medical record review and analysis of claims data to ascertain adherence to the guidelines and the effectiveness of the intervention on improving performance measures. The study will randomize 200 community-based physicians and abstract approximately 3,000 medical records.		NHLBI (\$3.2M)
Completed	An Internet Intervention to Increase Chlamydia Screening	This is a randomized controlled trial of an internet-based intervention designed to 1) increase chlamydia screening for women at high risk of infection, 2) increase treatment of women testing positive for chlamydia, and 3) subsequently reduce the incidence of pelvic inflammatory disease.		AHRQ (TRIP II) (\$1M)
Completed	Measuring Quality by Achievable Benchmarks of Care (ABC)	Achievable Benchmarks of Care (ABC) involves expansion of quality measures under the Q-SPAN program. This 5-year project will further develop and evaluate the University of Alabama at Birmingham (UAB) Achievable Benchmark of Care (ABC) methodology, an objective, data-driven method of benchmarking provider performance. The project is one of 8 selected nationwide.		AHRQ (\$2.5M)

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Completed	Impact of Guidelines on Quality of Care: Unstable Angina	The Unstable Angina project is a 3-year study addressing the impact of guidelines on quality of care and is quasi-experimental, involving 22 hospitals in Alabama. The project tests an intervention to promote guideline compliance and quality improvement. This study will advance the scientific community's understanding of 1) the impact of the newly released AHCPR (now AHRQ) Guidelines on Unstable Angina, and 2) the effectiveness of the new approach of the Health Care Financing Administration, HCFA (now CMS) for improving quality of care for Medicare beneficiaries.		AHRQ (\$1.5M)
Completed	Improving Health Care for Aetna US Healthcare Beneficiaries with Depression Using ABCs	A cooperative project with U.S. Quality Algorithms, Inc (USQA) to improve the quality of care from Aetna U.S. Healthcare beneficiaries with depression across all age groups by 1) validating existing USQA claims-based algorithms for depression, and 2) using the UAB Achievable Benchmarks of Care (ABCs) derived from claims data and evidence-based practice standards for provider education.		Aetna Quality Care Research Fund (\$477,511)
Completed	Recognition of Depression and Distress in Primary Care: Improving Primary	This project examines the impact of an educational intervention designed to improve primary care physicians' skills in the detection of depression and distress. Utilizing distance learning technology, the study will focus on developing systematic screening procedures within primary care practices.		SmithKline Beecham Quality Care Research Fund (\$300,000)
Completed	Care Practice Total Cost-Effective Use of Perinatal Nevirapine in Zambia	The major goal of this project is to determine how Nevirapine, used to reduce perinatal transmission of HIV, should best be administered to bring the most benefit at a given cost. This will help policy makers in resource-poor areas of the world guide perinatal HIV control program design and implementation.		Elizabeth Glaser Pediatric AIDS Foundation (\$174,462)

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Completed	Mentored Patient-Oriented Research Career Development Award (K23)	This is a five-year grant supporting the investigator's independent research in behavioral sciences as applied to the development and evaluation of health care delivery systems for older Americans. The project involves the design and evaluation of a self-disclosure intervention (Write Health) targeted at reducing psychological distress-driven health care utilization in a geriatric primary care setting. (Completed)		NIH/NIA (\$449,886)
Completed	Economic Evaluation of Perinatal HIV Interventions	This project will evaluate the cost-effectiveness of strategies aimed at the prevention of perinatal HIV Transmission in Thailand.		UAB Lister Hill Center for Health Policy (\$20,000)
Completed	Patient Outcomes Research Team (PORT) on Low Birthweight	A multidisciplinary team at UAB recently completed the 5 ½ year Low Birthweight PORT. The goal of this PORT was to determine the effectiveness of various obstetric and other health care interventions on the reduction of low birthweight and related poor pregnancy outcomes in minority and high-risk women.		AHCPR, now AHRQ (\$4.8M)