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Choosing topics for clinical practice guidelines: thinking of implementation since the beginning.

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Background: In Brazil, health care delivery, utilization and financing is provided by a public-private mix. Since 2008, some protocols have been used to regulate the mandatory coverage in private health care. Health insurance companies accepted these protocols were very well, but they were focused just on coverage and not on assistance. Although it wasn't the best way to improve health care, it was the first step to introduce the clinical practice guidelines.

Purpose: This study is a descriptive analyzes about how the regulatory agency can choose the topics of highest priority for the development of guidelines and how this process can contribute to over-come some implementation barriers and improve private health care.

Methods: The National Agency of Supplementary Health (ANS) established a collaboration term with the Brazilian Medical Association (AMB) to develop guidelines and monitor their implementation. A priority-setting process was implemented to identify the high priority topics for the guidelines and it were based on the participation of representatives of health insurance companies and medical specialty societies, and it was mediated by the regulatory agency in Brazil. ANS and AMB did some workshops with these representatives intended to find out what were their highest priority topics.

Results: We got 180 topics on this process, and then general criteria were established to prioritize the topics. After this, a table with the topics ordered by importance was done according to these criteria. Although we know this goal is difficult to achieve we propose some general principles to encompass the possible interests of all groups.

Discussion: The involvement of the actors that will use the guidelines on the process since its beginning is very important. We believe that, when the Regulatory Agency knows what is the demand of these actors, one of the most important implementation barriers could be knocked down.