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Appendix Table 1. Variables and Information Abstracted for Economic Review of Tailored Pharmacy-based Interventions for Medication Adherence

	Study Author (Year), Trial Name, Design, Comparison, Perspective, Analytic Years,		
Study Characteristics	Funding- Pharma/Public/None		
	CVD Prevention or CVD Management, Pilot/Trial/Full-scale, Setting, Pharmacist Type, Additional		
Intervention	Interventions, Intervention Length, Duration of intervention, Intervention Summary, Selection of		
Characteristics	patients, Frequency of contacts, Components of Pharmacist Meeting, Disease Focus		
	Area (US Census region), City, Country, State (US), Intervention Size, Control Size, % CVD, %		
Population	T2DM, % Dyslipidemia, % HTN%, Mean Age, % Female, % Minority, % Medicaid, % Medicare,		
Characteristics	% Commercial Insurance, % Less than HS, % Unemployed, % Urban/Rural, Patient selection		
Currency	Currency, Index Year, CPI, PPP		
Intervention Costs	Intervention cost per patient per year, Intervention Cost Components, Source of Intervention Cost		
	Change in Healthcare cost per patient per year, Healthcare Cost Method, Healthcare Cost Modeled		
Change in Healthcare	(Y/N)?, Healthcare cost components, Type Healthcare Cost (Whether CVD or All Cause), Source		
Costs	of Healthcare Cost		
Cost Offsets (Benefits)	Productivity at worksites		
	QALY/DALY, QALY/DALY Modeled (Y/N)?, Cost per QALY/DALY, Cost-effectiveness		
Cost-effectiveness	Horizon		
Cost-benefit	Intervention Cost Plus Benefits Period, Cost-benefit, ROI		
	Other Effectiveness Measures, Adherence Change, SBP Change, DBP Change, LDL Change, A1c		
Effectiveness Changes	Change, QoL Change, Adherence Baseline, SBP Baseline, DBP Baseline, LDL Baseline, A1c		
and Baseline Values	Baseline, QoL Baseline		

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Appendix Table 2. Variables and Information Abstracted for Economic Review of Permanent Supportive Housing with Housing First

	Study Authors (Year), Country, State (US), Region (US), City, Design, Comparison,		
Study Characteristics	Perspective, Pilot/Trial/Full-scale, Setting, Trial Name, Funding Source		
	Additional Interventions, Intervention Length, Follow-up (Health outcomes), Intervention Size,		
Intervention	Control Size, Intervention Year (Index), Patient Selection, Services Offered, Setting, Urban/Rural,		
Characteristics	Summary, Comparison		
	Disease/Condition Focus, Mean Age, % Female, % Race Black, % Race White, % Race Hispanic,		
	% Race Other, % Veterans, % Medicaid, % Medicare, % Commercial Insurance, % Less than HS,		
Population	% Unemployed, % Alcohol Use, % Substance Use, % With Arrest History, % with Hospitalization		
Characteristics	History, Longest Homeless (months)		
Currency	Currency, Index Year, Consumer Price Index (CPI), Purchasing Power Parity (PPP)		
-	Intervention Cost per Patient per Year, Intervention Cost Components, Source of Intervention Cost,		
Intervention Costs	Estimation Methods for Intervention Cost		
	Time Horizon (months), Change in Healthcare Cost, Change in Physical Healthcare Cost, Change		
Change in Healthcare	in Mental Healthcare Cost, Change in SUD Healthcare Cost, Healthcare Cost Method, Healthcare		
Costs	Cost Modeled (Y/N), Healthcare Cost Components, Source of Healthcare Cost		
	Change in Total Benefits (Cost Offsets), Components of Benefits, Change in Productivity, Change		
	in Welfare, Change in Interim Housing, Change in Judicial, Change in Other Costs, Benefits Period		
Cost Offsets (Benefits)	(months), Benefits Estimation Method, Benefits Modeled (Y/N), Source of Benefits		
	Change in Quality Adjusted Life Year (QALY) or Disability Adjusted Life Year (DALY),		
	QALY/DALY Method, Cost per QALY or DALY, Cost per QALY/DALY Modeled (Y/N), Cost-		
Cost-effectiveness	effectiveness Horizon, Cost-effectiveness Method		
	Cost-benefit (C-B), Return on Investment (ROI), Included Benefits Components, C-B or ROI Time		
Cost-benefit	Period		
	Homelessness, Housing Stability, Hospital or Emergency Department (ED) Use, HIV-Related		
Effectiveness Changes	Health, Wellness or Quality of Life, Arrests or Jail, Other, Source of Effectiveness Outcomes,		
and Baseline Values	Methods for Estimation, Follow-up Period		

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Appendix Table 3. Community Guide Systematic Economic Reviews: Comparisons between Original* and Updated Methods

Original Methods	Updated Methods	
Involve 4 steps: (1) systematic literature	Involve 9 steps: (1) prioritization of review; (2) creation of a Coordination	
search; (2) selection of studies using	Team; (3) conceptualization of review; (4) literature search; (5) screening	
economic analytic methods, such as cost,	studies for inclusion; (6) abstraction of studies; (7) analysis of results; (8)	
cost-effectiveness, cost-benefit or cost-utility	translation of evidence to CPSTF economic findings; and (9) dissemination of	
analyses based on explicit inclusion criteria;	findings and evidence gaps	
(3) abstraction and adjustment of economic		
data using a standardized abstraction form;		
and (4) listing of adjusted summary measures		
in summary tables and their interpretation		
Inflation adjustment with either the consumer	No change except for inflation adjustment, which uses consumer price index	
price index (CPI) or the medical consumer	(CPI) to provide conservative cost and economic benefit estimates	
price index (MCPI) and conversion of foreign		
currencies to U.S. dollars using purchasing		
power parity rates		
No quality scoring of economic estimates	Explicit quality assessment of each economic estimate based on two domains:	
	quality of capture and quality of measurement	
Economic evidence is included in the	Reporting of any cost-benefit, ROI, and cost-effectiveness finding is included	
Rationale section of the Community	within the Recommendation section after the recommendation statement and	
Preventive Service Task Force's	also in the Rationale section	
Recommendation and Rationale Statement		
No decision criteria for generating economic	Explicit decision tables based on study quality and the quality of economic	
findings for the Community Preventive	estimates, together with the number of estimates, are used to obtain a CPSTF	
Services Task Force (CPSTF)	economic finding	
Use societal perspective for costs, economic	Allow for ROI economic finding based on the narrower perspective of the	
benefits and summary economic estimates	investor	
following the guideline of the Panel on Cost-		
Effectiveness in Health and Medicine		

^{*} Carande-Kulis VG, Maciosek MV, Briss PA, Teutsch SM, Zaza S, Truman BI, Messonnier ML, Pappaioanou M, Harris JR, Fielding J. Methods for systematic reviews of economic evaluations for the Guide to Community Preventive Services. Task Force on Community Preventive Services. Am J Prev Med. 2000 Jan;18(1 Suppl):75-91.