

PRESS ANNOUNCEMENT FOR IMMEDIATE RELEASE

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LANDMARK ARTICLES PUBLISHED BY QUALITYMETRIC SCIENTISTS REPORT IMPROVEMENTS IN SHORT-FORM HEALTH STATUS MEASURES AND ESTABLISH CRITERIA FOR FUTURE DEVELOPMENT

Invited Commentary by John E. Ware, Jr., PhD, provides context to the past, present and future use of patient-reported outcomes as a leading performance metric for healthcare quality

Lincoln, R.I. - January 30, 2008: As the healthcare industry struggles to balance cost with quality, standardized and scientifically valid outcomes data provides real-time, actionable health information to support clinical and business decision-making. In a recently published *Invited Commentary* appearing in the *Journal of Clinical Epidemiology* (JCE), Volume 61, Number 1, January 2008, John E. Ware, Jr., PhD, Chief Executive Officer and Chairman of the Board of QualityMetric Health Outcomes Solutions, outlines noted improvements made to short-form health outcomes surveys (including the SF-36v2[®], SF-12v2[®], and SF-8[™] Health Surveys), which significantly increase their usefulness and application and enhance their value as a recognized measurement standard for healthcare quality.

Ware's *Invited Commentary* also serves as introduction to a series of QualityMetric articles scheduled to appear in the JCE throughout 2008. Article topics range from the detailed substantiation of improvements made to "static" (paper and pencil administered) outcomes surveys to evaluating the migration to electronic data capture using computer adaptive testing (CAT), a measurement advancement first introduced to healthcare by QualityMetric over eight years ago. "Of note, we are publishing proof in the JCE article series that our CAT software is a more practical and precise way of knowing what the SF-36v2[®] Health Survey, the world's most widely accepted standard for outcomes measurement, tells us," commented Ware. "Practically speaking, we're making outcomes measurement faster, easier and more precise than ever before, while maintaining complete comparability with over 20 years of reliability and validity evidence and interpretation guidelines."

A second article in the QualityMetric series also appears in the January JCE issue. *Evaluation of a Preliminary Physical Function Item Bank Supports the Expected Advantages of the Patient-Reported Outcomes Measurement Information System (PROMIS)*, details development of an item bank that builds on advancements made by QualityMetric over six years ago. PROMIS seeks to improve and standardize tools of clinical research across multiple US National Institutes of Health (NIH). As part of a five-year project that began in 2004, PROMIS (www.nihpromis.org) has formed a cooperative network of institutions. Ware serves as Co-Principal Investigator with Jim Fries, MD at Stanford University, one of six PROMIS Primary Research Sites, with additional support provided by QualityMetric's measurement science team, including Matthias Rose, MD, PhD, lead author of the second article, and Jakob B. Bjorner, MD, PhD. "Investment in the early development of physical function and other item banks by QualityMetric has proven to be very useful in testing important assumptions regarding the practical application of CAT in healthcare," offered Ware. "We are gratified that these early efforts have supported PROMIS and to be a part of this very esteemed collaboration."

QualityMetric's efforts to support the PROMIS initiative are complemented by the company's expansive scientific research and innovation agenda, which includes development of CAT measurement systems for all of the eight domains of health as measured by the SF-36v2 and for disease-specific impact for adults with asthma, diabetes, obesity and coronary disease. The company is also developing CAT systems for children to include both generic and disease-specific outcomes measurement. QualityMetric's CAT systems are referred to as dynamic health assessments (DYNHA[®]) and offer increased precision, most notably at

the patient level, while achieving substantial reductions in respondent burden. The advantages of DYNHA include faster, easier, cost-effective data collection with real-time reporting at patient and provider levels.

QualityMetric's DYNHA development initiatives are supported by more than a dozen Small Business Innovation Research (SBIR) grants from the NIH, a federal set-aside program designed for domestic small business concerns engaging in research and development efforts that have strong potential for commercialization and public benefit. James E. Dewey, PhD, Chief Innovation Research Officer for QualityMetric stated, "We are integrating the latest research in modern psychometrics with advancements in technology to build DYNHA systems that combine the best of generic and disease-specific outcomes measurement, redefining how outcomes are measured and reported in healthcare."

About QualityMetric:

QualityMetric is the leading provider of health outcomes measurement surveys and real-time delivery systems that use proprietary methodologies and data assets to produce actionable health information. The company was founded in 1997 by John E. Ware, Jr., PhD, principal developer of the world's most widely used patient-reported outcomes surveys including the SF-36v2[®], SF-12v2[®], SF-10[™] for Children, and SF-8[™] Health Surveys. QualityMetric developed the world's first dynamic health assessments (DYNHA[®]), dramatically enhancing the insight that can be derived from outcomes data. Supported by an Outcomes Insight[™] Analytics Team, QualityMetric clients benefit from full-service solutions that combine scientific integrity, practical generic and disease-specific health information, ease of use and cost efficiency. Visit us at www.qualitymetric.com