Speaker

APPRAISING THE APPRAISERS:
WHAT IS THE FUTURE OF HEALTH TECHNOLOGY ASSESSMENT IN EUROPE?

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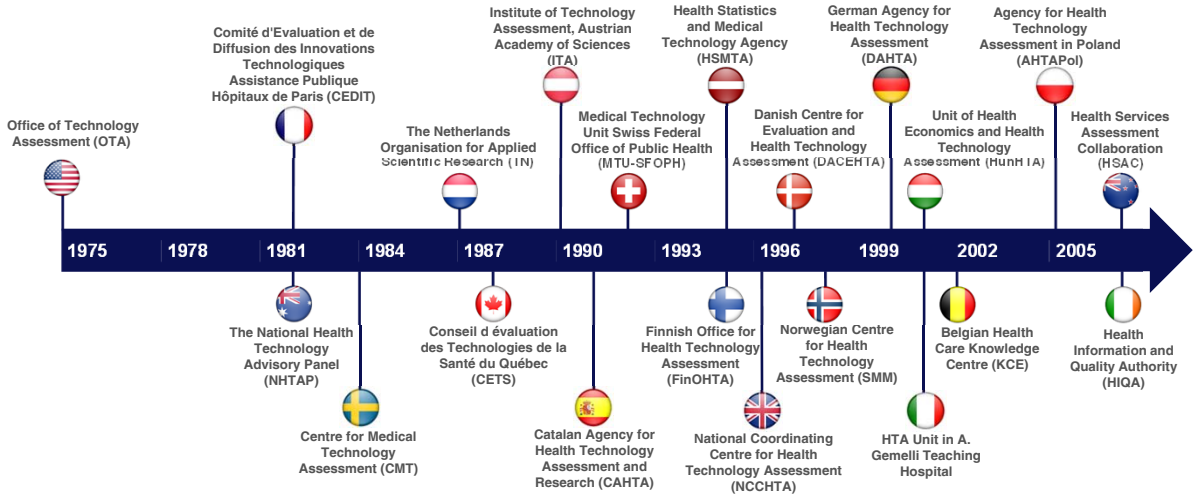
European National HTA and Decision Making Systems: How do they compare and what are the opportunities for further collaboration?

Nicola Allen, MPharm. PhD.
ISPOR Plenary: November 7th, Glasgow

Health Technology Assessment has developed into a diverse environment across Europe and globally

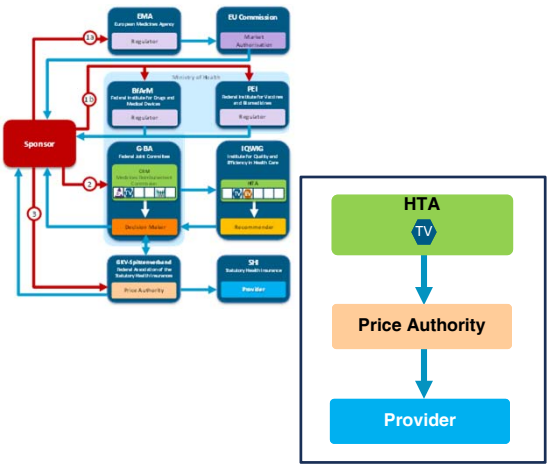
First HTA agency or unit per country in Australasia, Europe and North America
Not exhaustive



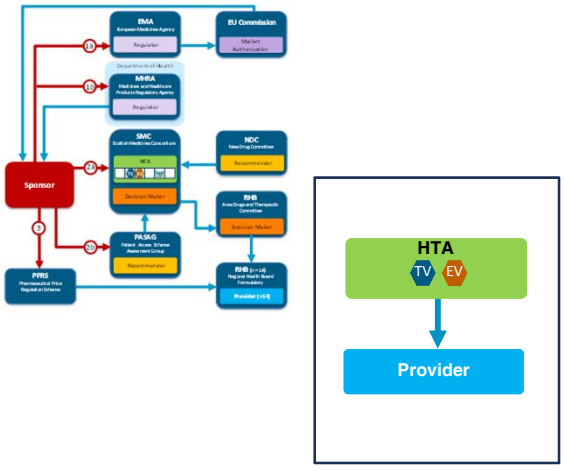
Sources: Velasco-Garrido and Busse et al., 2005; Garrido et al., 2008; Goodman, 2014; INAHTA., 2017

Comparing the national regulatory to reimbursement process enables identification of the key stakeholders and how they interact

Germany

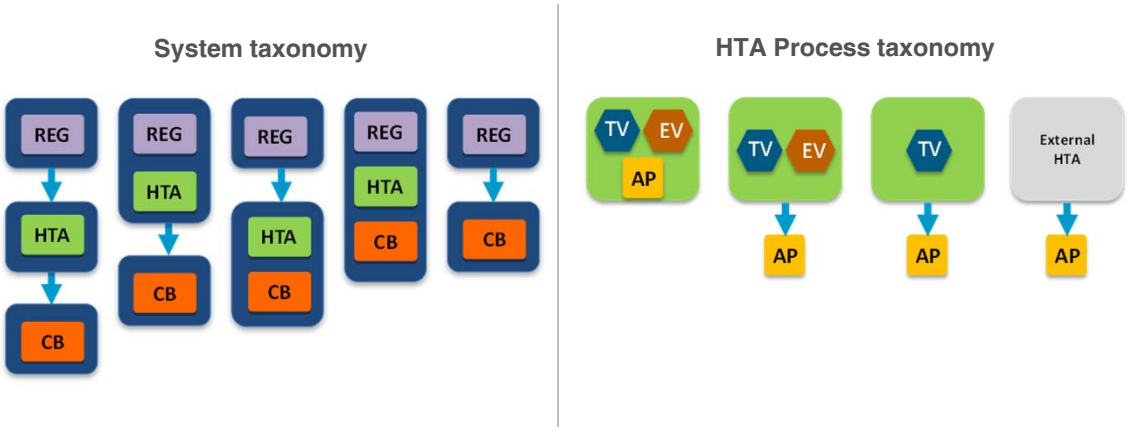


Scotland



Sources: Allen et al., 2017a; Allen et al., 2017b. CIRS, 2017

By comparing a broad sample of countries, key similarities and differences can be evaluated to develop archetypes

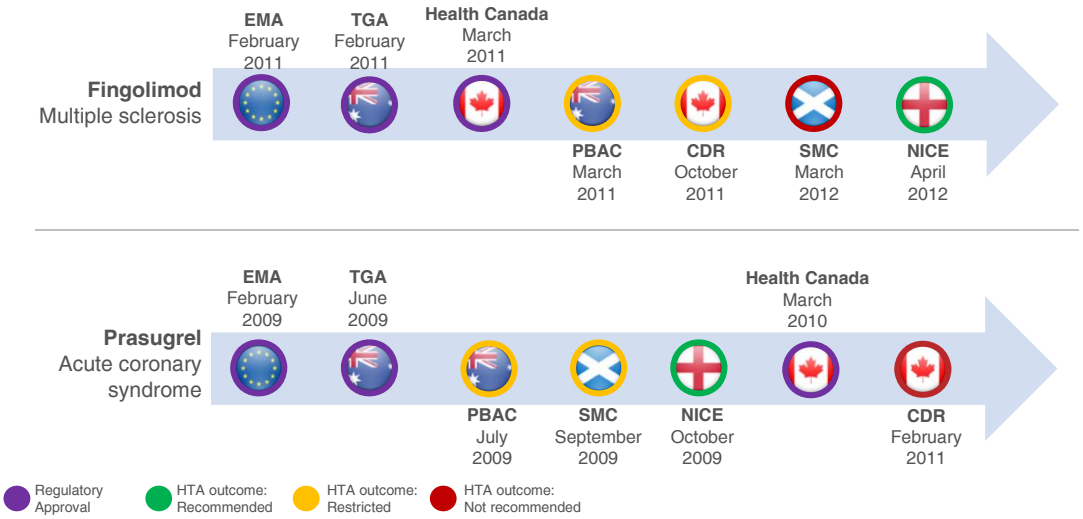


REG: regulatory approval, CB: coverage body; TV: therapeutic value; EV: economic value; AP appraisal

Sources: Allen et al., 2017b

Evaluating recommendations from agencies with similar processes can provide insights into other factors that may result in different decisions

Case studies of initial reviews from Australia, Canada, England and Scotland



Sources: Allen et al., 2017a

The current variation in European HTA environment can negatively impact stakeholders

Most cited consequences of different HTA approaches and/ or methodologies across EU

Sources: European Commission, 2017

The benefits of a more aligned HTA and reimbursement environment are recognised and collaborative programs are already in progress

Multinational and European HTA and reimbursement initiatives

eunethta

EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

MOCA
Mechanism of Coordinated Access to Orphan Medicinal Products

BeNeLuxA

Experts from the EU5 provided insights on the current HTA environment and opportunities for future collaboration

EU Strategy Team

Ex-TC
Rheumatologist by training (no longer practicing), and former President of the Transparency Commission for nine years

Proxy GKV-SV
Professor of Health Economics at leading German academic institution; former member of the Arbitration Board of Drug Prices

Proxy AIFA
Professor and Director of Public Health Policy at a payer-advising academic institute; +10 years in IT pharma industry, with hands-on experience in HTA submissions and pricing negotiations

Ex-regional HTA
Professor of Health Economics at leading academic institution; 8 years at regional HTA body in key region

Ex-SMC
Professor of Health Economics at leading UK academic institution; conducted +120 drugs reimbursement submissions reviews for the SMC

The HTA and reimbursement experts rated the feasibility of three future scenarios

Scenario 1

A pan-European HTA agency to produce therapeutic value and economic value reports **with a non-mandatory reimbursement recommendation**

Scenario 2

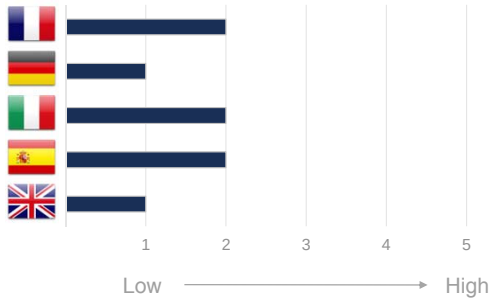
A pan-European HTA agency to produce therapeutic value and economic value reports for participating member states, **without a recommendation**

Scenario 3

A pan-European HTA agency to coordinate the production of **Relative Effectiveness Assessment** reports

The first scenario evaluated is considered to be the most challenging to implement

Perceptions on current feasibility of scenario 1
Individual HTA expert ratings (n=5)



"It is possible to unify the evaluation of the medical benefit of the drug, but there is also the economic perspective. We know it is possible to have a national HTA evaluation with a decentralised decision, but I think it will be difficult. Perhaps in the very far future"
-FR HTA expert

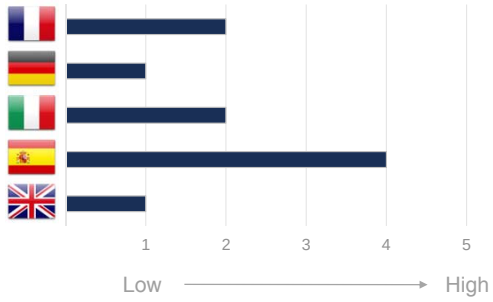
"I don't see how the difference in comparators or acceptance of relevant endpoints across countries will be taken in to consideration"
-DE HTA expert

Scenario 1

A pan-European HTA agency to produce therapeutic value and economic value reports **with a non-mandatory reimbursement recommendation**

Scenario 2 provides more flexibility for participants to interpret a centralised review, but key factors will determine feasibility

Perceptions on current feasibility of scenario 2
Individual HTA expert ratings (n=5)



"If the agency provides robust and rapid, high quality assessments I would rate it a 4. If it wasn't rapid then everyone could argue that they would make a decision when the report wasn't available"
-ES HTA expert

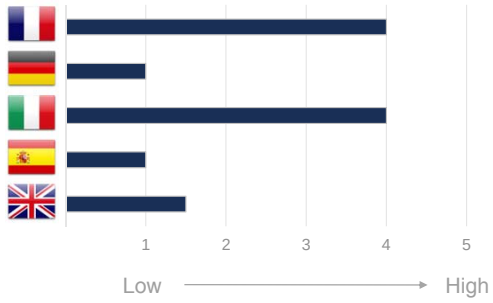
"The common legal basis for this is currently missing and it won't happen on voluntary collaboration"
-DE HTA expert

Scenario 2

A pan-European HTA agency to produce therapeutic value and economic value reports for participating member states, **without a recommendation**

Overall, the third scenario was considered the most likely option to implement in Europe

Perceptions on current feasibility of scenario 3
Individual HTA expert ratings (n=5)



"Such a pan-European agency would be more desirable. It would be useful for national agencies to refer to an effectiveness assessment and then focus on considering affordability and so on"

-IT HTA expert

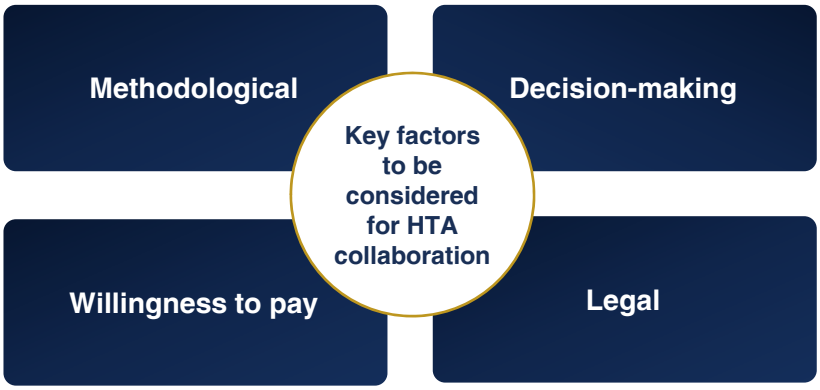
"If I was in a country with a lot less resources to conduct HTA, I might consider this to be a lot more promising and helpful, but I am in the UK"

-UK HTA expert

Scenario 3

A pan-European HTA agency to coordinate the production of **Relative Effectiveness Assessment** reports

While there are challenges to HTA alignment in Europe, some aspects can be resolved and further collaboration lies ahead



Thank you