

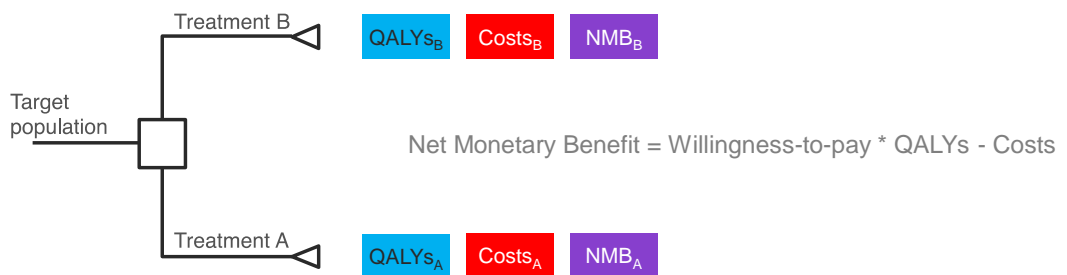
Fake or novel elements of value

Implementation of 'insurance value' and 'value of hope'

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Conventional cost-effectiveness analysis



Treatment A			Treatment B			Incremental NMB
QALYs	Costs	NMB	QALYs	Costs	NMB	
4	20,000	380,000	6	200,000	400,000	20,000

Willingness-to-pay for a QALY is 100k

Incorporating 'insurance value'

	Mean	Variance
Physical	health outcomes	health outcomes <i>risk</i>
Financial	healthcare spending	healthcare spending <i>risk</i>
Full value	Conventional value	Insurance value

Source: Lakdawalla D, Malani A, Reif J. The insurance value of medical innovation. Journal of public economics. 2017 Jan 1;145:94-102.

Incorporating 'insurance value'

$$dV = k \cdot dh - dc$$

$$dV_C = \pi(k \cdot dh - dc)$$

$$dV_F^{NHI} = \underbrace{\pi(k \cdot dh - dc)}_{\text{Conventional value}} + \underbrace{\pi(1 - \pi) \varphi k \cdot dh}_{\text{Reduction in physical risk}} - \underbrace{\pi(1 - \pi) \varphi dc}_{\text{Increase in financial risk}}$$

$$\varphi = \frac{\frac{u_c^S}{u_c^W} - 1}{\pi \frac{u_c^S}{u_c^W} + 1 - \pi}$$

$$dV_F^{NHI} = (k \cdot dh - dc) [\pi + \pi(1 - \pi) \varphi]$$

$$dV_F^{WHI} = (k \cdot dh - dc) [\pi + \pi(1 - \pi) \varphi] + \underbrace{\phi \pi(1 - \pi) \varphi dc}_{\text{Value of health insurance}}$$

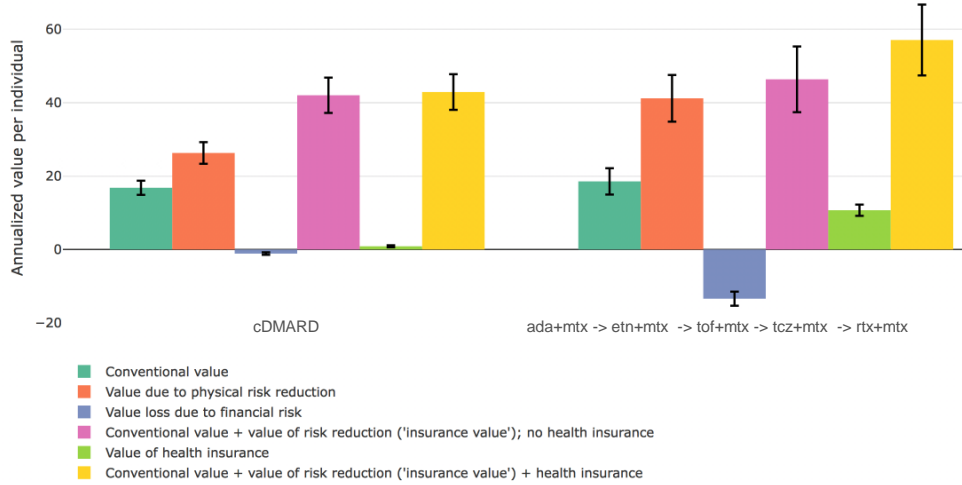
Source:

Lakdawalla D, Malani A, Reif J. The insurance value of medical innovation. Journal of public economics. 2017 Jan 1;145:94-102.

Incerti DI, Curtis JR, Shafrin J, Lakdawalla DN, Jansen JP. A flexible open-source decision model for value assessment of biologic treatment for rheumatoid arthritis. Pharmacoeconomics 2019;37:829-843.

CEA RA; Incorporating 'insurance value'

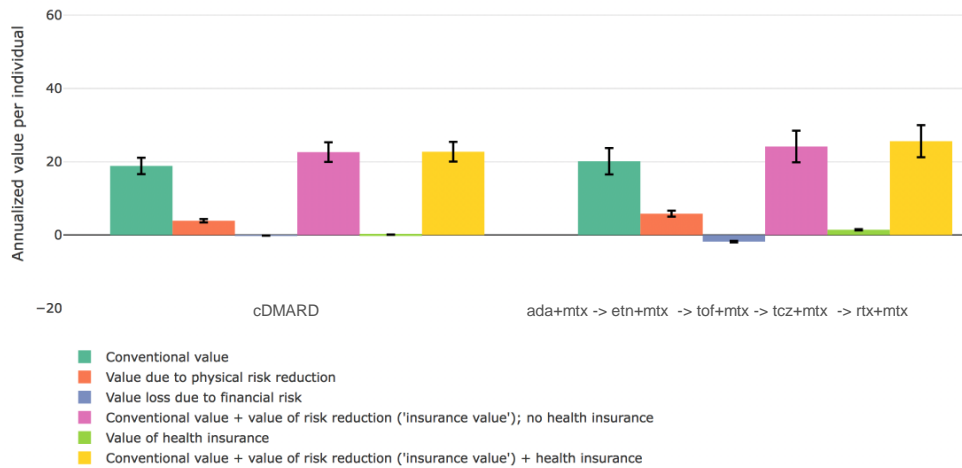
$$\frac{u_c^S}{u_c^W} = 2.5$$



Source: Incerti DI, Curtis JR, Shafir J, Lakdawalla DN, Jansen JP. A flexible open-source decision model for value assessment of biologic treatment for rheumatoid arthritis. *Pharmacoeconomics*. 2019;37:829-843.

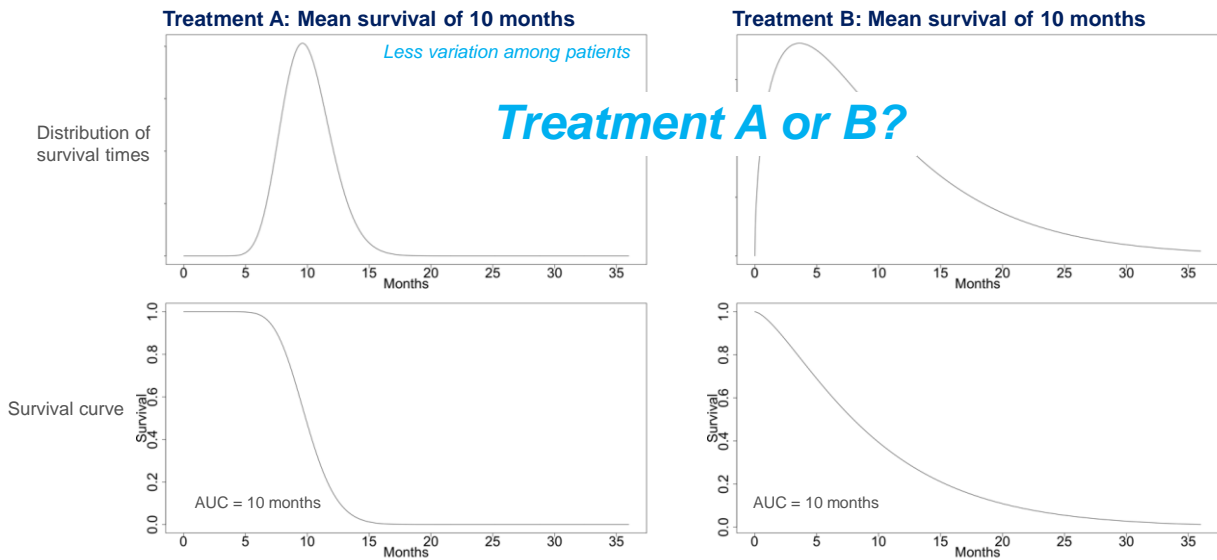
CEA RA; Incorporating 'insurance value'

$$\frac{u_c^S}{u_c^W} = 1.2$$



Source: Incerti DI, Curtis JR, Shafir J, Lakdawalla DN, Jansen JP. A flexible open-source decision model for value assessment of biologic treatment for rheumatoid arthritis. *Pharmacoeconomics*. 2019;37:829-843.

Variability in outcomes: ‘individual uncertainty’



Source: Garrison LP, Jansen JP, Devlin NJ, Griffin S. Novel approaches to value assessment within the cost-effectiveness framework. Value in Health 2019;22(6S):S12-S17

Certainty equivalent

- Utility function: $u(x) = x^\eta$
 - risk averse: $\eta < 1$
 - risk loving: $\eta > 1$

- The certainty equivalent, α_{AB} , for treatment B relative to A is computed by solving:

$$\int u(x - \alpha_{AB})f_B(x)dx = \int u(x)f_A(x)dx$$

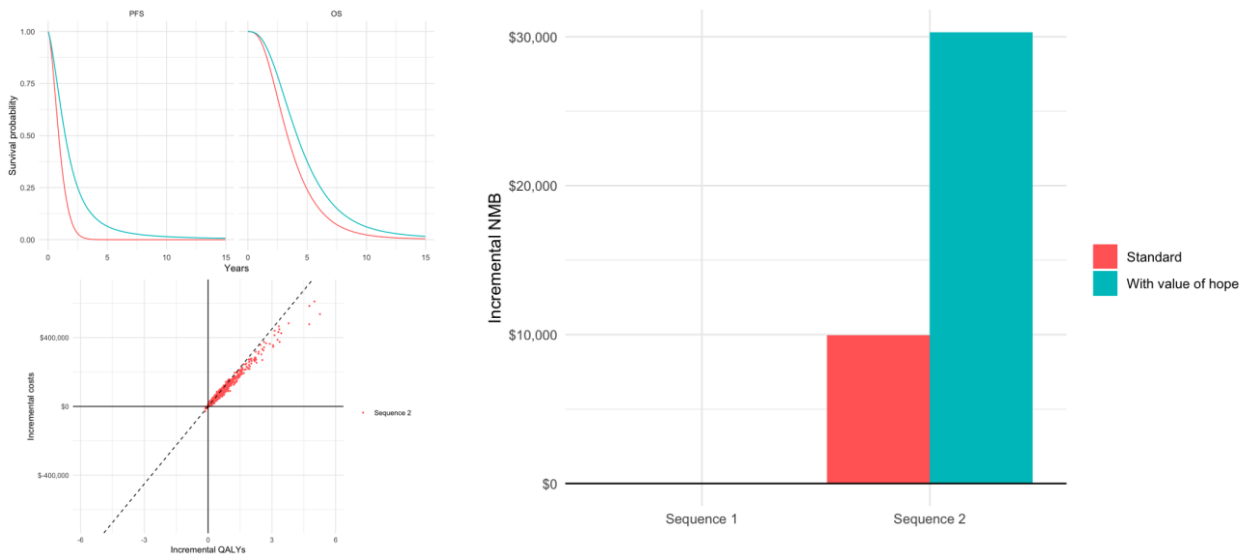
“How much do I need to subtract from x with B to make A and B equally valuable”

- ‘Value of hope’ is calculated as is the difference between the certainty equivalent and difference in expected x with A and B:

$$VoH = \alpha_{AB} - [E_B(x) - E_A(x)]$$

Source: Incerti D, Jansen JP. A Description of the IVI-NSCLC Model v1.0; last updated January 31, 2019; available from <https://innovationvalueinitiative.github.io/IVI-NSCLC/modeldoc/model-doc.pdf>.

CEA EGFR+ NSCLC; incorporating 'value of hope'



Source: Incerti D, Jansen JP. A Description of the IVI-NSCLC Model v1.0; last updated January 31, 2019; available from <https://innovationvalueinitiative.github.io/IVI-NSCLC/modeldoc/model-doc.pdf>.

Summary

- Implementation of 'insurance value' and 'value of hope' in open-source models
 - Structural uncertainty?
- Better to use a single framework where 'value of risk reduction' ('insurance value') and 'value of hope' are both captured simultaneously (Lakdawalla and Phelps 2019)
- Evidence for the required parameters
 - Marginal rate of substitution, risk aversion
 - Parameter uncertainty?
- When does it make a difference?

Thank you