Results
The Tobit model produced a logically consistent value set. Values ranged from −1.1 to 1. Pain and discomfort was the most important dimension (PD5 = -0.750) followed by anxiety or depression (AD5 = -0.463) and mobility (MO5 = -0.374). The least important dimensions were usual activities (UA5 = -0.295) and self-care (SC5 = -0.218).

Methods
This study used the standardized valuation protocol developed by EuroQol, using computer-assisted personal interview software (EQ-VT). A representative sample of 1,000 Slovenian residents were interviewed by a team of 11 interviewers, under the supervision of the research team. Health states were valued using composite time trade-off. The composite time trade-off data were modelled using a Tobit model with conditional heteroscedasticity. Dependent variable (the observed utility) was transformed with substruction of 1, left censored at -2 and estimated without the intercept, assuming Gaussian distribution of the dependent variable. Heteroscedasticity was modelled via numeric values of the dimension levels with log scale link. Modelling was used to create values for the 3125 possible health states.

Conclusions
This study provides a TTO-based value set built on societal preferences of the general Slovenian population, using an EQ-5D-5L instrument. While it offers more sensitivity, it will definitely complement the existing Slovenian EQ-5D-3L value set and will further enable the development of local quality-of-life research and the use of health technology assessment in decision making within the healthcare sector.