



Emerging practice taskforce

Expert elicitation methods for health care decision making

Interim findings

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Overall aim

- Provide emerging good practice guidance in formal (structured) elicitation methods to support a range of HCDM processes, across a range of settings.
 - Harmonize methodology across HCDM settings, where appropriate, and ultimately, improve decision making.

Expert elicitation methods for health care decision making

Task Force Members

Laura Bojke (co-chair), Centre for Health Economics, University of York, York, England.

Maarten IJzerman (co-chair), Erasmus School of Health Policy & Management, Rotterdam /
Melbourne School of Population and Global Health, Melbourne.

Abigail Colson (co-chair), University of Strathclyde, Glasgow, Scotland.

Marta Soares (co-chair), Centre for Health Economics, University of York, York, England.

Karen Lee, Canadian Agency for Drugs and Technologies in Health, (CADTH), Ottawa.

Salah Ghabri, Department of Medical Evaluation, HAS, Paris.

Oswaldo Ulises Garay, Roche Diagnostics International AG, Lucerne, Switzerland.

Jim Felli, Eli Lilly and Company, Indianapolis, Indiana, USA

Alec Morton, University of Strathclyde, Glasgow, Scotland.

Oswaldo Morales Napoles, Delft University of Technology, Delft, the Netherlands.

Victoria Shaffer, University of Missouri, Columbia, USA.

Rationale for task force

- Many decision makers are using EE as part of their processes.
 - Structure processes (SEE) can support robust evaluation/decision making
 - Methodology used for SEE in HCDM is heterogeneous
 - Need to consider what guidance is most appropriate in this context.
- The priority for global guidance on SEE in HCDM is more apparent given recent policy changes.
 - Processes to provide promising medicinal products to patients earlier in the R&D pathway (adaptive pathways).
 - Focus on other technologies, including diagnostics, medical devices, and complex interventions (public health or social care).
 - Evidence base for these interventions and programs is often less developed.
 - Less rigorous regulatory requirements.

Why an ISPOR TF?

- The use of 'real world data' is increasingly promoted - ISPOR's Real World Evidence Initiative.
 - Expected insufficiencies in the evidence base.
- Aligned with ISPOR's mission is to promote health economics and outcomes research excellence to improve decision making for health globally.
 - Expert elicitation is a valuable tool to support decision making.
 - The TF will develop emerging good practices on an important process for decision makers from a global perspective.
 - Will consider alternative guidance and methods when applying SEE in HCDM across a range of settings.
- Recommendations will be of broad interest to a number of ISPOR stakeholders now and in the future.
 - Timely, given the currently methods updates by NICE, UK and CADTH, Canada.

Activities/Content

- A report describing SEE methods to inform evidential uncertainties to support HCDM processes.
- 1. Outline the rationale for SEE and its use in HCDM
- 2. Outline the main available protocols/guidance for expert elicitation and methods within these:
 - Sheffield method (SHELF)
 - Delphi method
 - Cooke's classical method
 - IDEA protocol
 - MRC protocol
- 3. Consider the applicability of these protocols/guidance in different contexts/settings
 - Make recommendations specific to these different contexts.

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- [Consolidated Health Economic Evaluation Reporting Standards \(CHEERS\) II](#)
- [Joint HTAi - ISPOR Deliberative Processes for HTA](#) **NEW**
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Content of this forum

- Describe the rationale for the use of expert elicitation and different ways in which it has been used to support health care decision making (Maarten IJzerman).
- Key methods available to elicit experts' judgements (Abigail Coulson)
- Structured discussion. TFs initial considerations on each topic (Marta Soares), polling and audience discussion.
 - Topic 1: Alternative decision-making contexts/settings over which elicitation may be applied in, and challenges/barriers to implementation in these types of contexts.
 - Topic 2: Potential facilitators for elicitation.

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Thank you!