

LEVEL OF ICER OF HEALTH ECONOMIC ASSESSMENT IN FRANCE IN 2023

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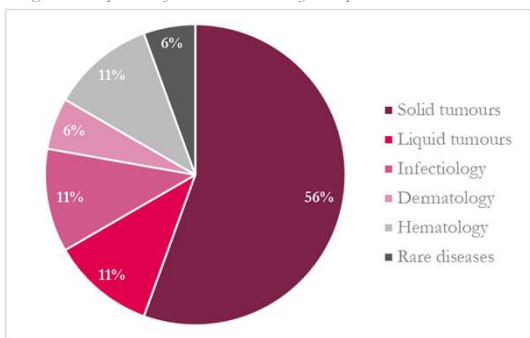
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Context

In France, the objective of the Health Technologies Economic Assessments is to **inform the price negotiation, through the incremental cost-effectiveness ratio (ICER)**. The methodological validity of the ICER is appraised by the Economic & Public Health Assessment Commission (CEESP). The framework agreement signed between the pharmaceutical industry and the French Pricing Committee (CEPS) stipulates that economic evaluations can only be considered in negotiations **if there are no major methodological reservations or major uncertainties**.

Results

Figure 1. Proportion of validated ICER by therapeutic area



Ten out of 18 ICERs concern oncology (i.e solid tumours) treatments, 2 onco-hematology (i.e liquid tumors), 2 infectiology, 1 dermatology and 2 hematology.

The levels of ICER vary widely: 6 ICERs are below €50,000/QALY, 4 between €50,000 and €150,000/QALY, 3 between €150,000 and €250,000/QALY and 4 above €250,000/QALY. One treatment was dominant in part of its indication, and none was dominated.

Objective & Methods

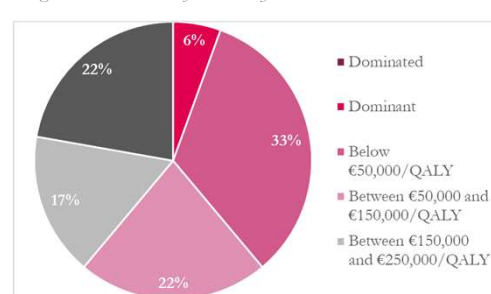
Using the **Vyoo Agency database**, which collects all the opinions published by the CEESP since 2014, validated ICER published by CEESP between January 1st and December 31st, 2023, were reviewed to analyse the levels of ICERs.

Material

In 2023, 25 economic opinions were published on the HAS website. In these opinions, 16 (64%) economic evaluations are not invalidated by the CEESP.

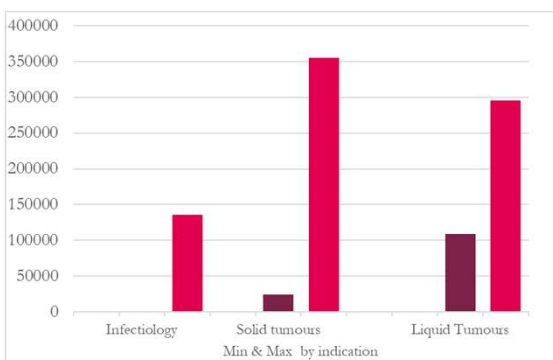
The analysis focuses on the 18 ICERs reported in these opinions. opinion presented 2 ICERs by analysing sub-populations.

Figure 2. Distribution of ICERs by level



In 2023, the average ICER across all therapeutic areas is €382,627/QALY and €143,738 without outlier (highest RDCR). The level of ICER is highly variable. The highest ICER is for a rare disease indication with €3,965,948/QALY. The lowest ICER is for a vaccine to prevent COVID-19 infection at €18/QALY. In hematology, one opinion reports a dominant ICER.

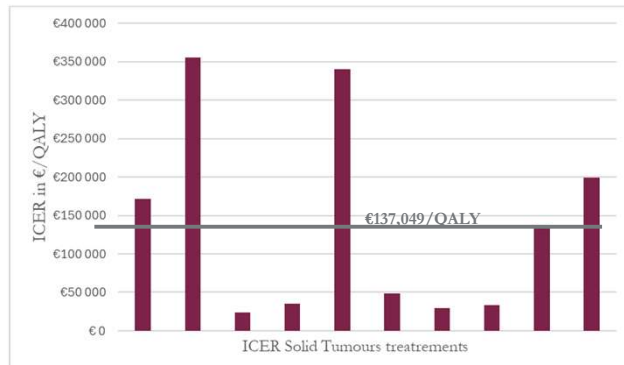
Figure 3. Variability of ICER in €/QALY by therapeutic area



For therapeutic areas with several RDCRs, intra-area variations are also important. The analysis of variability in solid tumour opinions is interesting given the number of ICERs available.

For treatments of solid tumours, the range of ICERs varies between €23,950/QALY and €355,002/QALY. The average is €137,049/QALY.

Figure 4. ICER value and average in €/QALY, solid tumours



Conclusion

The French levels of ICER are high compared to those accepted abroad, notably the UK. This is partly explained by CEESP's methodological requirements. The CEESP's recommendations for exploring and controlling uncertainty leads to the selection of conservative assumptions to prevent any risk of underestimating ICER. Another observation is that ICER varied widely. The approach of dealing with uncertainty by favouring the choices that are least favourable to the product studied could explain some of this variability.

References

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