

# Priority setting: towards evidence-informed deliberative processes

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# Outline

- Assessing the value of health technology to inform decision-making
- Towards evidence-informed deliberative processes

A drug that cures  
doesn't do any good  
if the people  
who need it

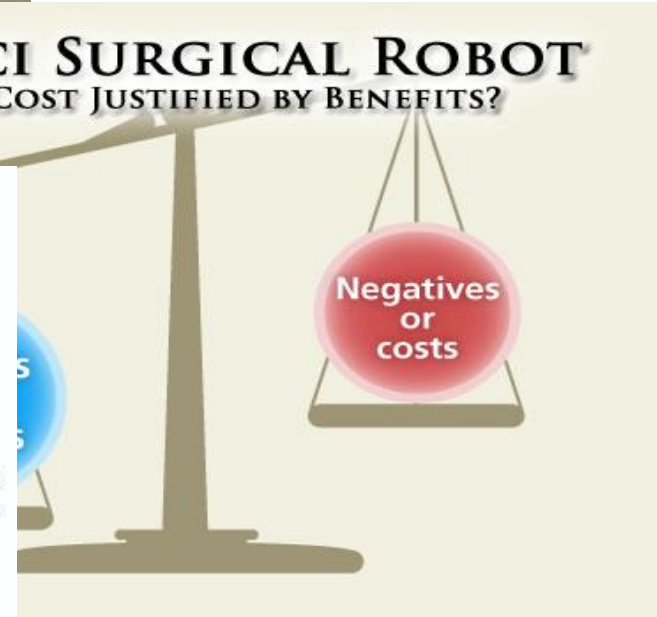
## DA VINCI SURGICAL ROBOT IS HIGH COST JUSTIFIED BY BENEFITS?

Countries with HPV vaccine in the national immunization programme



- Introduced\* to date (65 countries or 33.5%)
- Not Available, Not Introduced (129 countries or 66.5%)
- Not applicable

\* Includes partial introduction



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# Priority setting – value frameworks

- HT assessed by a judgment on the *relative importance* of certain criteria that may differ between stakeholders, countries
- The criteria considered traditionally include:
  - the level of clinical benefit
  - and in some cases a measure of the incremental cost-effectiveness
- Recently also indirect, unintended or ‘hidden’ outcomes (e.g. potential benefits and harms for other stakeholders), and ethical, legal, and organizational issues
- Criteria potentially differ across conditions and type of technology (e.g. end-of-life medicines in the UK)






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# Different value frameworks around the globe

- Frameworks have evolved over the years by using public consultation / multiple stakeholder involvement
- HTA agencies around the globe intend to support population health / payer considerations (coverage decisions)
- US: mainly targeting patient-clinician conversations (e.g. ASCO, NCCN)
- Other 'emerging' frameworks >>> often not used in practice

*Source: W. Oortwijn, L. Sampietro-Colom, F. Habens. Developments in Value Frameworks to inform the allocation of healthcare resources. International Journal of Technology Assessment in Health Care; 2017, pp 1-7. Available via: <https://www.htai.org/policy-forum/global-policy-forum/>*

# Value frameworks: evidence-informed...

Indication	Brand name (generic)	HTA recommendation					
							
<i>Breast cancer</i>	<i>Eribulin</i>	Equal benefit	Added benefit		Added benefit	Negative	Negative
<i>Colorectal cancer</i>	<i>Aflibercept</i>	Added benefit	Equal benefit		Not assessed	Negative	Negative
<i>Melanoma</i>	<i>Ipilimumab</i>	Added benefit	Added benefit		Added benefit	Positive	Negative
<i>Non-small cell lung cancer</i>	<i>Crizotinib</i>	Equal benefit	Added benefit		Not assessed	Negative	Negative
<i>Prostate cancer</i>	<i>Abiraterone</i>	Added benefit	Added benefit		Equal benefit	Positive	Negative
<i>Renal cell carcinoma</i>	<i>Axitinib</i>	Added benefit	Added benefit		Not assessed	Positive	Negative

Based on: Kleijnen, S., Lipska, I., Leonardo Alves, T., Meijboom, K., Elsada, A., Vervölgyi, V., d'Andon, A., Timoney, A., Leufkens, H.G., De Boer, A., Goettsch, W.G. (2016). Relative effectiveness assessments of oncology medicines for pricing and reimbursement decisions in European countries. *Annals of Oncology*, 27 (9): 1768-1775.



# Towards evidence-informed deliberative processes (EDPs)



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*“It is the decision-making process that warrants the legitimacy of (reimbursement) decisions and not only the robustness of evidence or the formal procedure followed”*

*Source: Klein R, Day P, Redmayne S. Managing scarcity: Priority setting and rationing in the National Health Service. Buckingham: Open University Press; 1996.*

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## Revise2020 project – [www.revise2020.com](http://www.revise2020.com)

- EDPs combines two existing frameworks:
  - A4R – deliberative process to identify relevant values
  - MCDA – Rational decision-making through evaluation of identified values

## Evidence-informed deliberative processes

Step-by-step practical guide for HTA organisations

Version: 1

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Nijmegen, October 2018

**revise2020**  
Rethinking the valuation of interventions



Available online at [www.sciencedirect.com](http://www.sciencedirect.com)

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journal homepage: [www.elsevier.com/locate/jval](http://www.elsevier.com/locate/jval)



### Value Assessment Frameworks for HTA Agencies: The Organization of Evidence-Informed Deliberative Processes



Rob Baltussen, PhD\*, Maarten Paul Maria Jansen, MSc, Leon Bijlmakers, PhD, Janneke Grutters, PhD, Anouck Kluytmans, MSc, Rob P. Reuzel, PhD, Marcia Tummers, PhD, Gert Jan van der Wilt, MSc (hon), PhD  
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Analysis

BMJ Global Health

### Progressive realisation of universal health coverage: what are the required processes and evidence?

R Baltussen,<sup>1</sup> M P Jansen,<sup>1</sup> L Bijlmakers,<sup>1</sup> N Tromp,<sup>1,2</sup> A E Yamin,<sup>3,4</sup> O F Norheim<sup>3,5</sup>

<http://ijhpm.com>  
Int J Health Policy Manag 2018, 7(11), 973–976

doi: 10.15171/ijhpm.2018.57

**IJHPM**  
International Journal of Health Policy and Management

Perspective



### Stakeholder Participation for Legitimate Priority Setting: A Checklist



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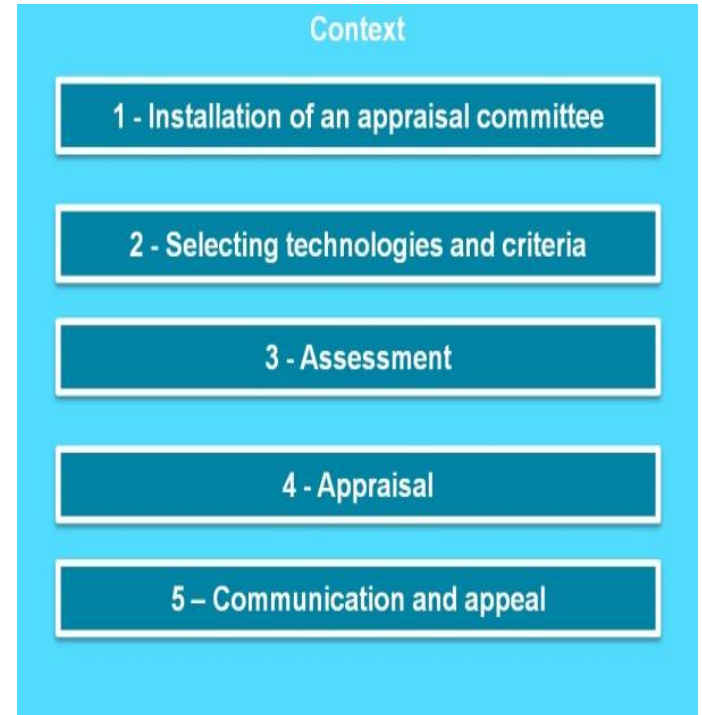
### Multi criteria decision analysis to support HTA agencies – benefits, limitations and the way forward

Baltussen R<sup>1</sup>, Marsh K<sup>2</sup>, Thokala P<sup>3</sup>, Diaby V<sup>4</sup>, Castro Jaramillo H<sup>5</sup>, van der Cleemput J<sup>6</sup>, Garau M<sup>7</sup>, Goetghebeur M<sup>8</sup>, Iskrov G<sup>9,10</sup>, Manesh A<sup>11</sup>, Mirelman A<sup>12</sup>, Mobinizadeh M<sup>13</sup>, Morton A<sup>14</sup>, Tringali M<sup>15</sup>, van Til J<sup>16</sup>, Valentim J<sup>17</sup>, Wagner M<sup>18</sup>, Youngkong S<sup>19</sup>, Zah V<sup>20</sup>, Toll A<sup>1</sup>, Jansen<sup>1</sup>, Leon Bijlmakers<sup>1</sup>, Wija Oortwijn<sup>1</sup>, Henk Broekhuizen<sup>1</sup>

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# How to do it?

- Targeting HTA agencies
- Five steps
  - Methodological guidance and best practices in each step
- Most countries already have processes in place
  - And can improve – ‘menu of options’



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## Examples of countries *perceived* as “best practices”



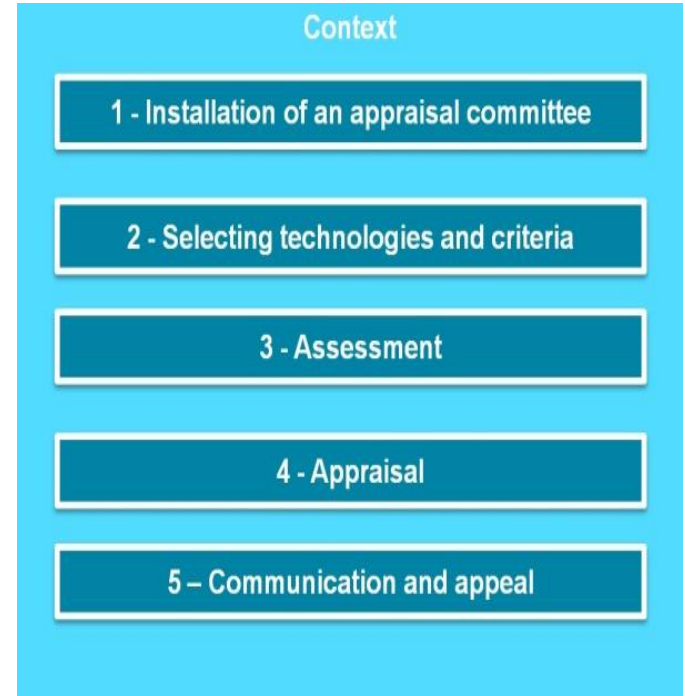
*Note: there is **no single country** that may be referred to as best practice country for its system as a whole. A country may only be a best practice for a (subset of) element(s).*

*Based on: Oortwijn, W, Determann, D., Schiffers, K., Tan, S.S, van der Tuin, J. Towards integrated health technology assessment for improving decision-making in selected countries. Value in Health, 2017, 20 (8): 1121-30; Results of survey among INAHTA members – [www.inahta.org](http://www.inahta.org) (2018)*

# Step 1: Appraisal committee

- Process guidelines
- Ideally involving relevant stakeholders as members
- Many other options to involve stakeholders
- Decision-makers remain responsible
  - consensus not required
  - stakeholder dominance

Examples: 

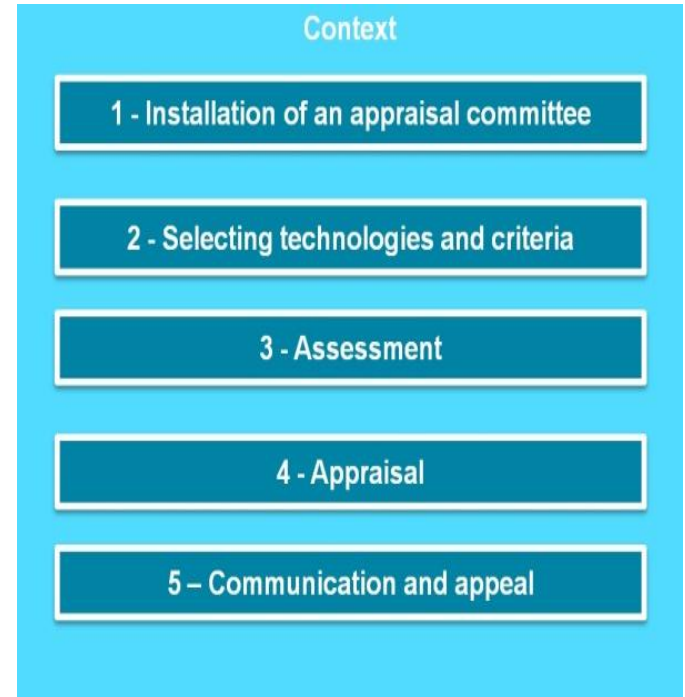


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## Step 2: Selecting of technologies and criteria

- Selection of interventions for evaluation
- Selection of criteria
  - > generic and contextual

Examples: 



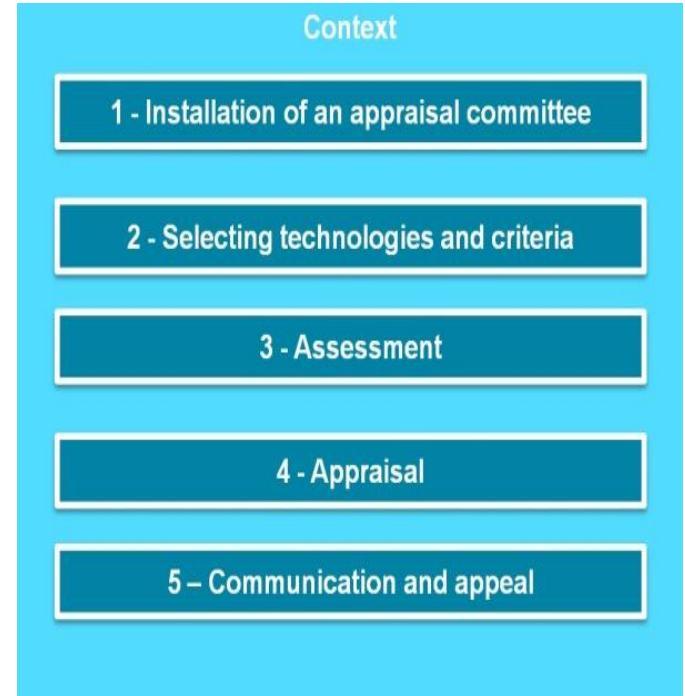
## Step 3: Assessment

- Evidence collection
  - On all identified relevant criteria
  - Quantitative or qualitative information

*Also:*




- Use of evidence reports
- Stakeholder involvement

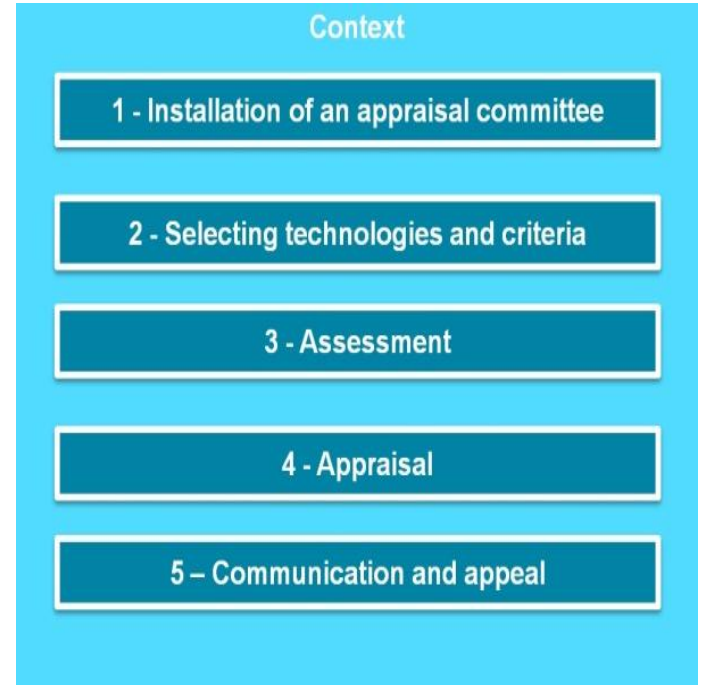
Examples: 





## Step 4: Appraisal

- How can an appraisal committee balance all relevant criteria?
- ‘Menu of options’ – different impact on quality, consistency and transparency  
Always: deliberate to assess evidence and make judgements on criteria
  1. Interpretation of criteria – e.g. 
  2. Use of criteria weights (E-European agencies)
  3. Use of simple decision rules – e.g.  
- Depending on the context, HTA agencies can make their own choice

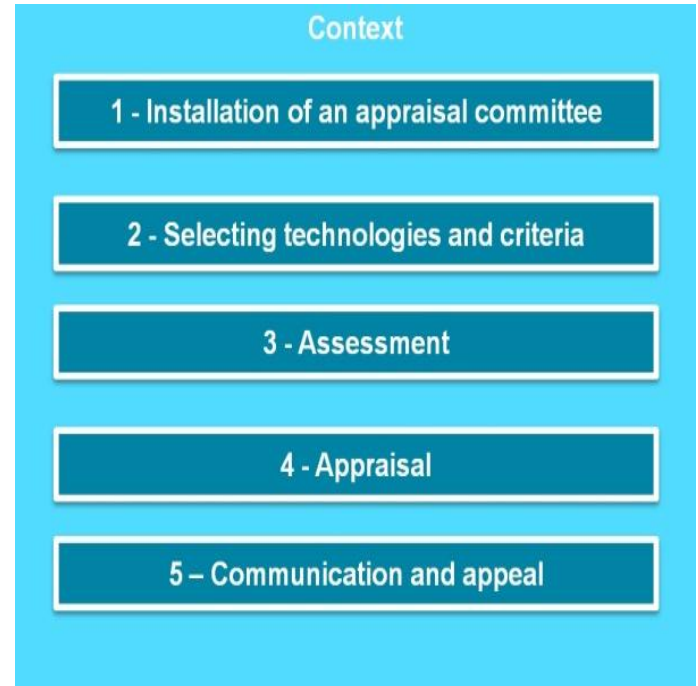


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## Step 5: Communication & appeal

- Make all decisions and underlying argumentation public
- Install mechanisms for appeal
- Monitoring and evaluation

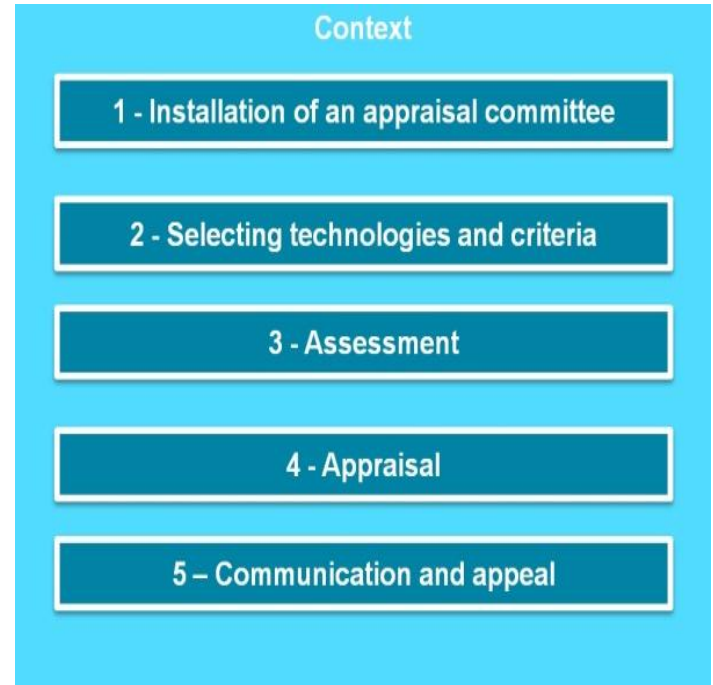
Examples: 



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## Added value...

- Explicit focus on legitimacy
- Theoretically sound, very practical
- Decision-making values visible
- Explicit guidance on balancing values



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# Key messages

- EDPs can facilitate legitimate decision-making:
  - It supports organizations to be more systematic, explicit and transparent, by making recommendations/decisions sensitive to a wider range of needs and values, and by promoting consistency across decisions
- Transparency and explicitness of processes and methods will not automatically appear - it takes time
- Broad, multidisciplinary, stakeholder involvement will be necessary throughout the process, and should start from the beginning of the HTA process to determine relevant criteria
- It will increase accountability and predictability for all stakeholders



THANK YOU!

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