

HTA capacity building in Thailand

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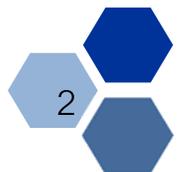
HTAi Conference, Bilbao

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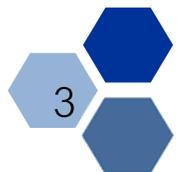
Outline

- Milestones on HTA development in Thailand
- Introduction to the Health Intervention and Technology Assessment Program, HITAP
- Current situation
- Framework for HTA capacity building
- Strengths and limitations of the model
- Lessons learned



Milestones on HTA development in Thailand

- 1960s: Assessment of safety, efficacy and quality of pharmaceutical products
- 1982: First economic evaluation in Thai setting published in international journal
- 1991: Pharmacoeconomics courses in schools of pharmacy
- 1993-1996: first HTA program – collaboration between Thailand's Health Systems Research Institute and Karolinska Institute, Sweden
- **2002: Universal health coverage → demands for HTA**
- 2002: HTA Institute, MOH's Department of Medical Service
- **2007: Health Intervention and Technology Assessment Program (HITAP)**



Health Intervention and Technology Assessment Program, HITAP



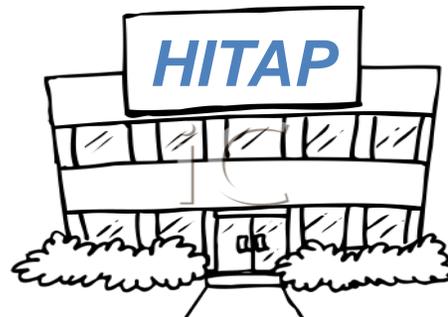
Staff: Total 50

- 40 researchers & RAs
- 7 PhD, 20 MSc (4 PhD candidates)
- Mentors: fellows 1:5



Finance: 1 million USD a year

- Domestic: international 9:1



Autonomous HTA unit,
under Ministry of Health

HTA :

- Research
- Infrastructure development
- Capacity strengthening
- Policy connection
- Dissemination



Networks: domestic & international

- Researchers/experts
- HTA users: policymakers, practitioners
- HTA units in Asia - HTAsiaLink
- Others



Current development on HTA in Thailand

- Expanding area of research, with policymakers' demands
- General perception: HTA = economic evaluation
- High-education training in schools of pharmacy (Pharmacoeconomics courses),
- Established standards, guidelines, tools:
 - National Methodological Guidelines for HTA
 - Cost-effectiveness threshold – 1 GDP per capita per QALY gained
 - Thailand's HTA database
 - Standard Costs Menu
 - EQ5D (Thai version)
- Contributions to policies:
 - Coverage decisions
 - National List of Essential Medicines
 - Program designs

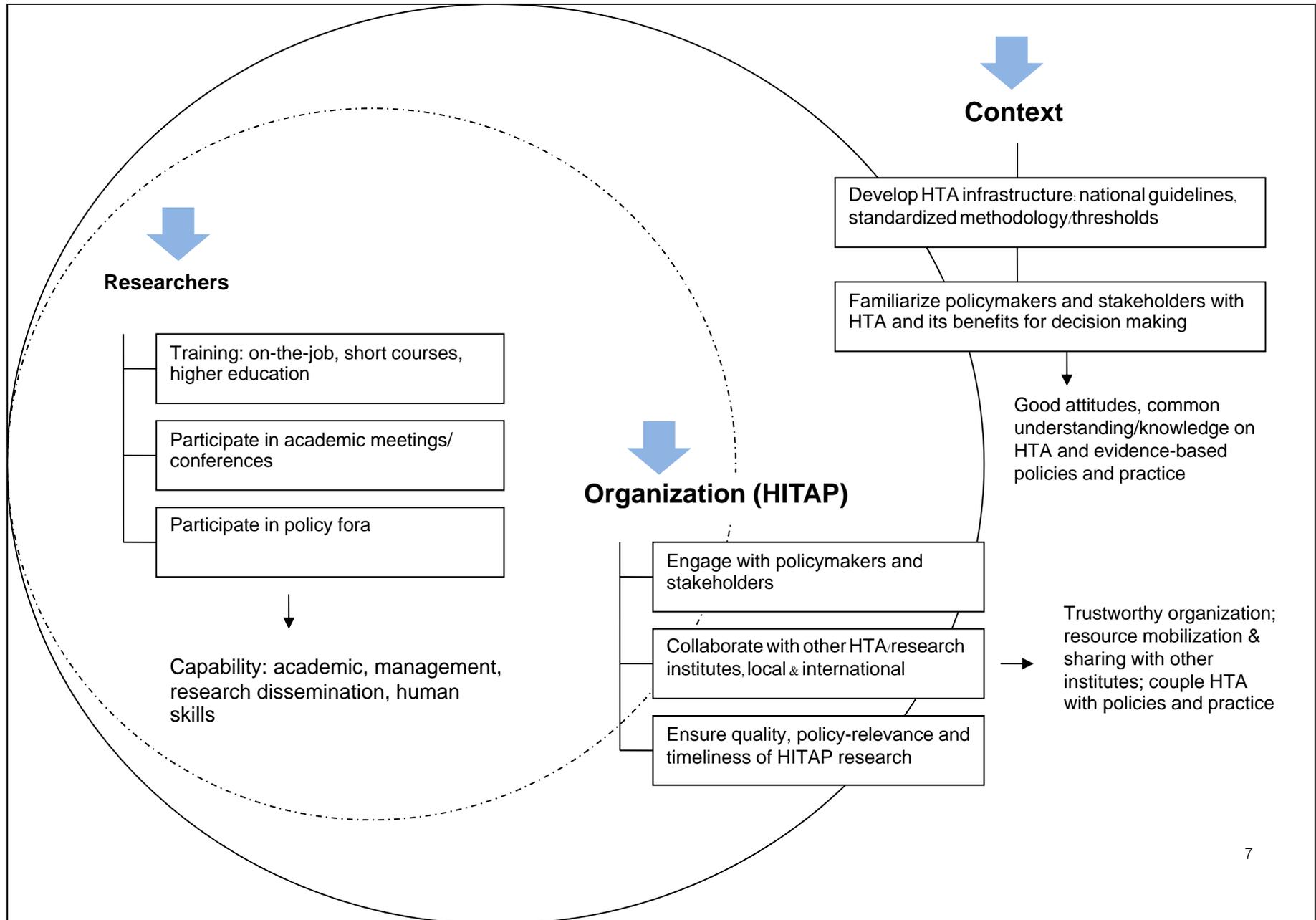


Capacity building framework for HTA in Thailand (1)

- Goals: not only conduct quality HTA, but also connect HTA with policy and practice
- Strategies for development at three levels:
 - Individual researchers
 - Organization
 - Context (environment)
- Expected outcomes
 - Comprehensive, technically-rigorous and policy-relevant HTA
 - Resource mobilization and exchange among HTA units
 - Understandings/knowledge → good attitudes towards HTA and policy contributions



Capacity building framework for HTA in Thailand (2)



Strengths & limitations of the model



Strengths:

- Existing impediments, at all levels, are systematically addressed
- Standardization of methodology and processes, through stakeholder involvement
- Regular evaluation and revision – a ‘learning model’

Limitations:

- HITAP-centered? Equal partnership?
- Inadequate human resources: mentors and researchers

Lessons learned: ‘Building the Ship as We Sail It’

(How to meet rising demands, while supply is limited)

- Building a model, with understandings on policy cycle and research-policy connection → policymakers and other stakeholders should not be excluded
- Drawing lessons from other settings, with modification to suit local context
- Policy champions and leaderships are necessary



- Finding staff and partners: good heart, head and hand
- Collaborations with other HTA units inside and outside the country
- Learning by doing, with evaluation

