What’s Keeping Me Up At Night?
Reflections from Global Policy Forum members PLUS the report from the Global Policy Forum panel session in Vancouver

Dr. Sean Tunis
President, HTAi

In this HTAi Policy Forum Series newsletter, we summarize some key messages from the ‘What’s Keeping Me Up At Night?’ session – always a stimulating part of the first day of the Forum. This gives Global Policy Forum members time to share their views on burning HTA-related issues. It’s a popular session that encourages industry and not-for-profit participants to have frank discussions about their critical concerns.

We recognize that this session is not designed to identify solutions to these burning issues, but it is hoped that collaborative forums such as this provide a useful platform to express these concerns and challenges. We believe that these discussions are an important step toward developing a shared agenda for more extensive dialogue in the future, leading to potential strategies that will address the issues raised.

Dr. Laura Sampietro-Colom
Chair, HTAi Global Policy Forum

In this newsletter, alongside the key themes from the ‘What’s Keeping Me Up At Night?’ discussions, we also return to the 2018 Global Policy Forum topic briefly. We presented these results on horizon scanning for disruptive technologies at a panel session at the HTAi Annual Meeting, in Vancouver in June. We invited representatives from a HTA agency, an insurance provider, a clinician conducting leading hospital-based HTA at a teaching hospital, industry and patients to reflect on the key messages from the Global Policy Forum. Below we highlight the messages from this session.

I would like to thank all members of the Global Policy Forum for their ongoing contributions to the stimulating ‘What’s Keeping Me Up At Night?’ session. I would also particularly like to acknowledge and thank the participants of the panel session on the Global Policy Forum for their valuable contributions.

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WHAT’S KEEPING ME UP AT NIGHT? Session reflections and key themes

‘POLITICIZATION’ OF HTA, OR RATHER ‘EVIDENCE AVERSE’ STAKEHOLDERS

Increasing involvement of stakeholders such as politicians, patients, the public and health system factors in decision-making may result in decisions that are not evidence-based and in accordance with the findings of HTA assessments. Without improving general knowledge of HTA, what it can do and why it is important, then the ongoing value of HTA will not be fully utilized and may not be sustainable in the face of the oncoming changes in health care. This is coupled with a departure from holistic HTA assessments (i.e. with ethical, legal and safety elements) to an increased focus on using only effectiveness and economics for pricing decisions.

Reflections during the June business meeting suggested, however, that politicization is not the issue; this is inherent to HTA. Rather, it is the evidence-aversion of politicians and the de-contextualisation of key issues that are of concern. Adding in the possible misuse of social media and ‘fake news’ by various stakeholders, the balance of including and informing all relevant stakeholders remains an ongoing challenge.

‘GLOBALIZATION OF HTA’

The changing role of HTA in Europe post 2020 (with the European Commission aiming to boost cooperation across Member States) and the potential impact of this on global HTA was discussed. As Europe has driven much of the current HTA frameworks, there is huge global interest in these developments and what the impact might be. What can other countries learn; are shared approaches and collaborations possible across countries where factors such as judicialization of decisions (i.e. where rights to health ‘trump’ the outcomes of an evidence-based HTA), with different evidence requirements for HTA and regulators who accept different levels of uncertainty possible?

In June, it was highlighted that there are divergent views, even within Europe, with regards to a common HTA approach, indicating that collaboration is challenging. Additionally, replicating HTA structures exactly between countries may not be appropriate, with adaption to the local context and drivers of health systems likely necessary. This is countered by the potential efficiency gains in using the existing assessments and learnings, where appropriate (for example on the clinical aspects of HTA).

THE FUTURE OF HTA APPROACHES

There are many challenges for traditional HTA methods. For example, ‘transformative’ technologies, the rise of big data, observational data and Real World Evidence, combination technologies and poly-morbidities are all complex factors that need to be addressed by the HTA community. New methods for assessment, including in the post–market space and cross-country collaboration linked with horizon scanning, will be needed and the relevance of current HTA frameworks will need to be considered. This is all coupled with a likely skills shortage as a wider variety of skills will be needed both within and outside the HTA community.

At the June meeting, transformative and regenerative technologies (such as CAR-T therapies) remained a key issue, and it was suggested that cross-border registries may be of some benefit. Novel trial designs (such as basket trials) exemplify the challenges in upskilling HTA practitioners and also effectively include all stakeholders such as payers and clinicians.

UPDATE FROM THE GLOBAL POLICY FORUM PANEL SESSION IN VANCOUVER

TO BE TRULY EFFECTIVE, HORIZON SCANNING SYSTEMS NEEDS TO BE FULLY INTEGRATED

Echoing the key messages from the Global Policy Forum, the session concluded that there is room for improvement in horizon scanning systems (HSS). HSS can only be truly effective when integrated into the healthcare system, taking longer term perspectives, and with policy makers who are receptive to the findings. The role of all stakeholders needs to be defined and they need to be involved early in the process, with HTA agencies potentially leading as conveners. Finally, the rise of innovative technologies was noted; these are changing the healthcare landscape, with the issue of ‘buying a cure versus renting a treatment’ that will fundamentally impact HSS, HTA and ultimately healthcare systems.