

Launched for the first time at the HTAi 2018 Annual Meeting, in partnership with and sponsored by Merck Canada Inc., the Idea Factory brought together individuals from HTA bodies, governments, payer organizations, patient advocacy groups, the private sector and other stakeholders from around the world in a collaborative 90-minute ideation session which generated ideas on health system readiness and cancer care innovation. Participants included over 50 individuals representing the United States, Canada, United Kingdom, Taiwan, Korea, Brazil, Argentina and Austria, among other countries.

INSIDE THE FACTORY: The Idea Factory was conducted using an electronic meeting facilitation system which allowed participants to develop, capture and prioritize ideas to address a current health challenge provided by Merck Canada Inc. as the session partner. Participants were presented with a challenge statement to apply to three main themes and then asked to develop as many ideas, recommendations and solutions as possible over a 35-minute period.

CHALLENGE STATEMENT: Advances in cancer care present an exciting outlook for patients, researchers, government, and industry. At the same time, this wave of innovation will bring a new set of challenges around budget sustainability and health system capacity to absorb these new technologies. HTAs and other stakeholders will be instrumental in helping governments create and implement new approaches to ensure innovative medical advances result in meaningful clinical and health systems outcomes.

FACTORY PRODUCT: In response to the challenge question posed under each theme, the Idea Factory resulted in **137 participant generated ideas, recommendations and solutions**. Participants then had the opportunity to prioritize these ideas based on impact, feasibility and sustainability. The highest ranked ideas, recommendations and solutions for each of the specific challenge questions are listed below.

The listed ideas, recommendations and solutions in this document are those of the Idea Factory session attendees and contributors and do not necessarily reflect the views of Health Technology Assessment international or Merck Canada Inc.

Theme 1 | Budget Predictability and Access: *With the many new treatments available in oncology, often across multiple tumor types, how can payers, pharmaceutical companies and other stakeholders: a) improve the budget predictability of new therapies, b) accelerate access for patients, c) ensure new therapies and indications are cost-effective?*

1. Develop a mechanism to reach multi-stakeholder agreement on real-world evidence collection methodology.
2. Implement conditional coverage agreements structured over three-year periods in which real-world evidence is collected and outcomes are re-assessed after the three years.
3. Advocate for 'light touch' assessments or rapid reviews that focus on budget impact, which could improve budget predictability and expedite access for patients.
4. Consider budget tiering and discount agreements, rather than hard caps (for example, based on volume), in order to enhance clinical freedom while providing greater incentives for manufacturers.
5. Manufacturers to share more details in order to conduct horizon scanning on pipelines and upcoming launches.

Theme 2 | Optimal Clinical Impact and Patient Outcomes: *How can we ensure that resources are allocated to the most effective interventions across the entire health system and what processes might help to assist in reallocating resources where this is justified?*

1. Implement strategies to create budget headroom such as: delisting of less effective technologies and the introduction of biosimilars.
Note: this may require legislative changes and multi-stakeholder consensus.
2. Integrate transparency and decision-making between health system entities. By removing funding siloes across multiple agencies and players, budget trade-off decisions can be made in a collaborative manner.
3. Establish a public real-world evidence collection mechanism in order to better identify effective therapies. This could include linking of data systems and collection of passive data (e.g. patient input through smart phones, watches, etc.).
4. Consider value frameworks that embed social determinants of health.
5. Advocate for home-based care in order to alleviate hospitalization costs and create headroom for oncology drugs.
Note: this would require more thought on palliation, symptom management, and other non-drug resources.

Theme 3 | Patient and Clinician Engagement in Oncology HTA and Decision-Making: *How can we make HTA decision-making processes more accessible to patients and clinicians, and ensure that they address these stakeholder's needs?*

1. Host workshops bringing together different stakeholders (clinicians, patients, HTA, manufacturers) to discuss key issues such as: patient needs (beyond the QALY), payer challenges, benefits and risks, etc.
Note: workshops would need to be hosted by a neutral 3rd party.
2. Expand existing patient citizen involvement groups.
3. Ensure patient involvement in all relevant processes, including from the outset and throughout the full course of HTA.
This will ensure outcome measurements used are truly relevant and meaningful for patients.
4. Make HTA information and decision making accessible for patients and the public. For example, create lay language summaries and reports on HTA.

NEXT STEPS: A comprehensive report from the Idea Factory is in development. This report is meant to inform meaningful dialogue and action plans by each of HTAi's stakeholder groups.