

# Improving Access to High-Cost Technologies in the Asia Region

Reflections on the HTAi Asia Policy Forum held in Jakarta, Indonesia on 29 and 30 October 2018.



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HTAi is proud to have convened the sixth Asia Policy Forum in Jakarta, Indonesia. One of the distinguishing features of all HTAi Policy Forum meetings is the open and frank discussion between a variety of stakeholders. This year was no exception, with senior leaders from around Asia (including, for the first time, India and Cambodia) and industry enjoying wide ranging debate and free flowing dialog. HTAi contribution was also prominent with two past-presidents, Executive Committee and Board members in the

room, showing the interest of the society in promoting the debate in the region.

Moreover, the Forum saw great participation and support from the Indonesian Ministry of Health, and we were honored to have an opening speech from Prof. Dr. dr Nila Farid Moeloek (Indonesian Minister of Health). As last year, members also enjoyed a tour of a local teaching hospital to truly see hospital-based HTA in action. I believe great strides were made toward development of consensus on improving access to high-cost technologies in Asia.

## **Professor Brendon Kearney** Chair of the HTAi Asia Policy Forum

The 2018 HTAi Asia Policy Forum convened over 60 senior representatives from HTA agencies and payers and industry from Asia. Members received a keynote speech from the Indonesian Minister of Health, wonderful case studies from Malaysia and Taiwan, WHO and industry, guided group discussions, and of course the background paper and survey developed for the meeting. We spent two days debating the topic '**Improving Access to High-Cost Technologies in Asia**', with a focus on Managed Entry Schemes (MES) as a mechanism to improve access.



During the two days of discussions, it became apparent that there is no standardised definition of high-cost and there are limited policies in action throughout the region. There is also limited experience with performance-based MES in Asia, though what experience there is does seem to mirror that of the international context.

While it was agreed that a simple definition and approach to considering high-cost technologies and MES is far from simple, there are common factors that could be considered across the region. These are presented in more detail below.

## Key Messages

### A simple definition of high-cost is not simple!

What constitutes a high-cost technology is context-specific, however there are common factors that can affect the introduction of a high-cost technology into a country's public health system. These factors include: severity and burden of disease; affordability and overall budget impact; the value and impact of technologies; the need for transparency between stakeholders; and consideration to the time horizon of a technology and the entire care pathway. All stakeholders, especially the patient, should be considered and disinvestment is important in the context of identifying resources to fund new and innovative technologies.

### Price negotiation can be challenging; collaboration could be the key.

Price negotiation can be challenging (particularly for countries with less experience). Options to collaborate to pool buying power and also to learn from each other should be actively sought out and encouraged. An additional issue noted by members was that centres of excellence promoting collaboration across the public and also private sectors (thereby reducing duplication of under-used high-cost technologies) should be explored when possible.

### Managed Entry Schemes in Asia; pragmatic, transparent and simple.

MES represent a mechanism to allow patients access to healthcare that may otherwise be challenging for a public health care system to adopt. And while MES can improve access to technologies, patients must be aware of their obligation to comply with long-term data collection and the fact that technologies not meeting MES criteria may be removed from the healthcare system.

When considering the development of MES, it is important to consider access to drugs, devices and treatment for orphan (rare) diseases separately; one size/approach does not fit all. However, simplicity is the key: solutions to increase access to healthcare technologies should be pragmatic, affordable and sustainable. The purpose of an MES should be articulated before the scheme commences and MES should be fit-for-purpose; complex MES should be the exception rather than the rule.

## Next steps

A consensus statement from the meeting will be developed. This will include a road map for MES in the Asia region. This road map will clearly articulate the '*rules of engagement*' for all stakeholders – patients, providers, payers and industry.

