

Is there a European view on health economic evaluations?

– Experiences from the development of a EUnetHTA guideline for economic evaluations

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Guideline on Economic evaluation: Objective

- To set a **general framework** for economic evaluations and **increase the transferability** of economic evaluations between EUnetHTA partners

The purpose of this guideline can be divided into two points:

- increase the knowledge about similarities and differences between guidelines for economic evaluations in European countries
- develop a framework for the methodology of economic evaluations



Why a methodological guideline for health economic evaluations?



Not all EUnetHTA partners have a methodological guideline

Economic evaluations part of the HTA CORE model

Currently no methodological guideline for economic evaluations for EUnetHTA

Organisation and key steps of the work with the guideline on economic evaluation:

Project participants

SBU (Emelie Heintz, Thomas Davidson, Måns Rosén)

HAS (Françoise Hamers, Salah Gabri, Mira Pavlovic)

IER (Valentina Rupel, Renata Erker)

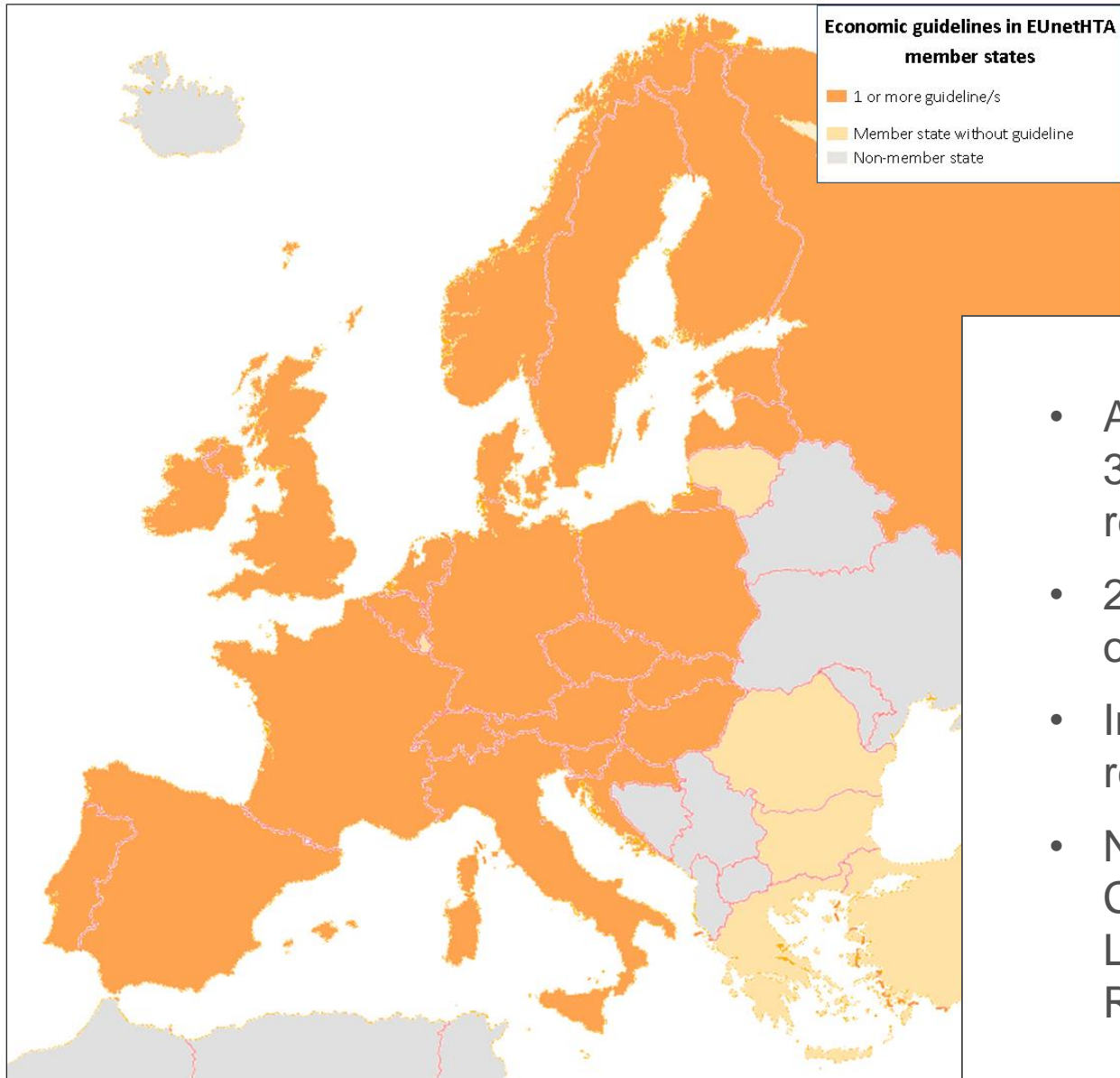
IQWiG (Andreas Gerber-Grote, Stefan Lhachimi)

Key steps in guideline elaboration:

- Collection of methodological guidelines for economic evaluations used in the countries of the EUnetHTA partners
- Development of template for extraction of data (calibration exercise)
- Extraction of data from guidelines
- Summary of results (differences and similarities between EUnetHTA partners)
- Elaboration of guideline



Results: Collection of guidelines



- At least one person from all 33 partner countries responded
- 25 of 33 reported at least one guideline
- In total, 51 guidelines were reviewed
- No guideline: Bulgaria, Cyprus, Greece, Lithuania, Luxembourg, Malta, Romania and Turkey

Main recommendations

Type of analysis

Sources for clinical effectiveness

Time horizon

Decision models

Perspective of the analysis

Costs

Outcome measures

Discounting

Presentation of results

Uncertainty

Recommendations based
on commonalities

Recommendations on
sensitivity analysis



Example 1: Type of analysis

Review of guidelines

- All countries with guidelines accept CEA or a CUA with QALYs as outcome measure
- Most recommend CUA as the main type of analysis, several expect CEA with LYG as the outcome measure.

Recommendation

- Results should be presented in terms of both CEA and CUA.
- The primary outcome measure(s) should be presented as natural units (including life-years) and as QALYs.



Example 2: Time horizon

Review of guidelines

- **All but one:** Sufficiently long to reflect all important differences in costs or outcomes
- Germany: the time horizon should be at least the length of RCTs. Yet the appropriate time horizon is also stated to depend on the nature of the disease

Recommendation

- The time horizon for the reference case analysis should be sufficiently long to reflect all relevant differences in costs or outcomes between the technologies being compared



Example 3: Costs

Costs:

Many prefer national sources

Recommendation

To facilitate adjustments of costs to local settings, it is recommended that the use of resources is clearly presented in natural units, e.g. hospital days or physician visits.



This will hopefully lead to ...

- A first step towards a common European platform for health economic evaluations
- More useful health economic evaluations within EUnetHTA
- Elimination of unnecessary methodological differences
- Support for partners who do not have guidelines
- Further collaborations can focus on the issues where the views are differing
 - ... And we have already received some suggestions...

Suggestions for future projects

Type of analysis:

- Use of CBA?

QALYs:

- Methods for derivation of values of health outcomes?
- By whom the health outcomes should be valued?
- Criteria for proving the relationship between surrogate and final outcomes?

Indirect costs

- Valuation methods for indirect costs?

Uncertainty:

- How to graphically display results of a PSA (e.g. scatter plot of CE-plane, CEAC)?

Discount rate:

- Specific discount rate for costs and effects

European collaboration conducting a health economic evaluation together



Thank you very much!

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