

# Health Technology Assessment (HTA) and Access Policies

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XII FORESIGHT TRAINING COURSE  
INNOVATIVE MEDICINE AND RESEARCH:  
ETHICAL, LEGAL AND REGULATORY ISSUES  
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## Oviedo Convention

### **Article 3 – Equitable access to health care**

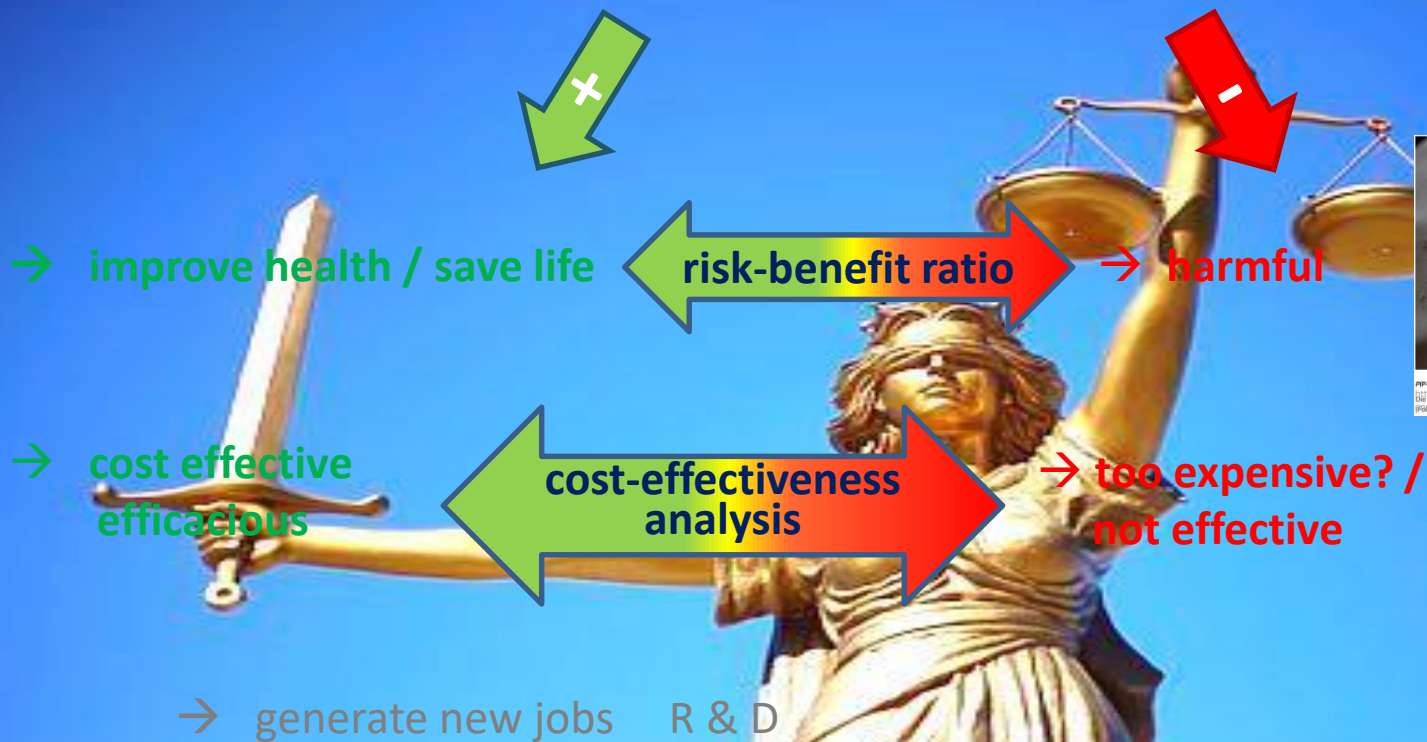
Parties, taking into account health needs and available resources, shall take appropriate measures with a view to providing, within their jurisdiction, **equitable access to health care of appropriate quality.**

*European Treaty Series - No. 164*

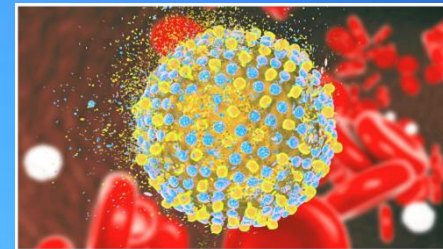
Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine \* Oviedo, 4.IV.1997

# Background

## New Health Technologies



PIP-Brustimplantate  
<https://www.handelsblatt.com/unternehmen/industrie/hip-haftstrafe-im-brustimplantate-skandal-09980>  
DE:Handelsblat/23063758.html?ticket=ST-32853140-Yn89f5coQ504gpXwke68-ep3 (12.09.2019)



Der Hepatitis-Virus in einer 3D-Illustration.  
[www.dpa.com/2011/01/20/story/000007187396/patentstreit-um-hepatitis-c-medikament-gerne-diene-grenzen-gegen-pharmakonzern](http://www.dpa.com/2011/01/20/story/000007187396/patentstreit-um-hepatitis-c-medikament-gerne-diene-grenzen-gegen-pharmakonzern) (13.09.2019)

# Case Study

**Sovaldi © Gilead (Sofosbuvir)**

**How much money per patient/year would you be willing to spend?**

**Which factors would influence your decision making?**



Source: background image: pixabay – creative commons (Vacho/medikamente), accessed: September 22, 2019

# Case Study

## Sovaldi © Gilead (Sofosbuvir)

### Some more facts ...

Incidence (EU and EEA) in 2017 ~ **5,6 Mio infected people** (RKI (2018))

### Costs (EU)

~ **€ 50.000.-/patient/treatment** (LBI (2014))

→ more than **20 % of a yearly medicines-budget** to treat all patients in one MS (LBI (2016))

Source: background image pixabay - creative commons (Vacho/medikamente), accessed: September 22, 2019

**How much is this specific medicine worth?**  
**How much can it cost in publicly/on the basis of solidarity  
financed health systems?**

# Access Policies

Does it work?

Is it worth being covered (at what price)?

<b>Innovativeness and Safety</b>		<b>Equal and Affordable Access to new Health Technology</b>		
<b>R&amp;D</b>	<b>MA</b>	<b>Decision Support Before P&amp;R Decision</b>	<b>P&amp;R Decision</b>	<b>Market monitoring after P&amp;R Decision</b>
<b>Research and Development</b>	<b>Marketing authorization</b>	Horizon Scanning	Procurement procedures	Competition Law
		<b>HTA</b>	Tendering	Pharmacovigilance
			Market Entry Agreements	

**New Health Technology**



**Table 1:** Tools and Regulatory Framework to ensure equal and affordable access to new health technology (own compilation, based on: Vogler S, Paris V, Panteli D (2018), Ensuring access to medicines: How to redesign pricing, reimbursement and procurement? Policy Brief 30, World Health Organization 2018 (acting as the host organization for, and secretariat of, the European Observatory on Health Systems and Policies).

# Decision Support

**independent**

## Decision Tools for Health Policy Makers



- Horizon Scanning
- HTA
- Procurement Procedures
- Market Entry Agreements (MEA)
- Tendering



**fragmented**

- Regional/local level (political)
- Regional/local level (institutional)
- National level (political)

**Administrative Authorities and Courts**

e.g. Competition or health authorities

# HTA - Definition

*“HTA is a method of **evidence synthesis** that considers evidence regarding **clinical effectiveness, safety, cost-effectiveness** and, when broadly applied, includes **social, ethical and legal aspects** of the use of health technologies.”*

## HTA aims at answering the following 3 questions:

1. *“Whether a new health technology **does work** (Effectiveness)?”*
2. *“Whether the new health technology is **worth it** (Economic Value)?”*
3. *“Whether the new health technology is **worth being implemented** or covered by the public system’ (coverage by public system)?”*

Bryan R. Luce et al (2010) pp 271-272, p 271

**HTA (so far) does not aim at recommending a price for a new technology, thereby considering ability to pay/economic situation of different countries (in the sense of a ‘differential pricing’ see Vogler et al (2015) /fair price building).**



# European Level - ?

## Competence ?

EU

Member States

*Art. 168 (7) TFEU: “Union action shall respect the responsibilities of the **Member States** for the definition of their health policy and for the organisation and delivery of health services and medical care. The responsibilities of the Member States shall include the management of health services and medical care and the **allocation of the resources assigned to them [...].**”*

shutterstock.com • 668617123

Source: Pixabay – free images

# HTA

## Competence ?

EU

Member States

*Does a new health technology work (Effectiveness)?*

*Under which circumstances is the new health technology worth it (Economic Value/Price)?*

*Is the new health technology worth being implemented or covered by the public system?*

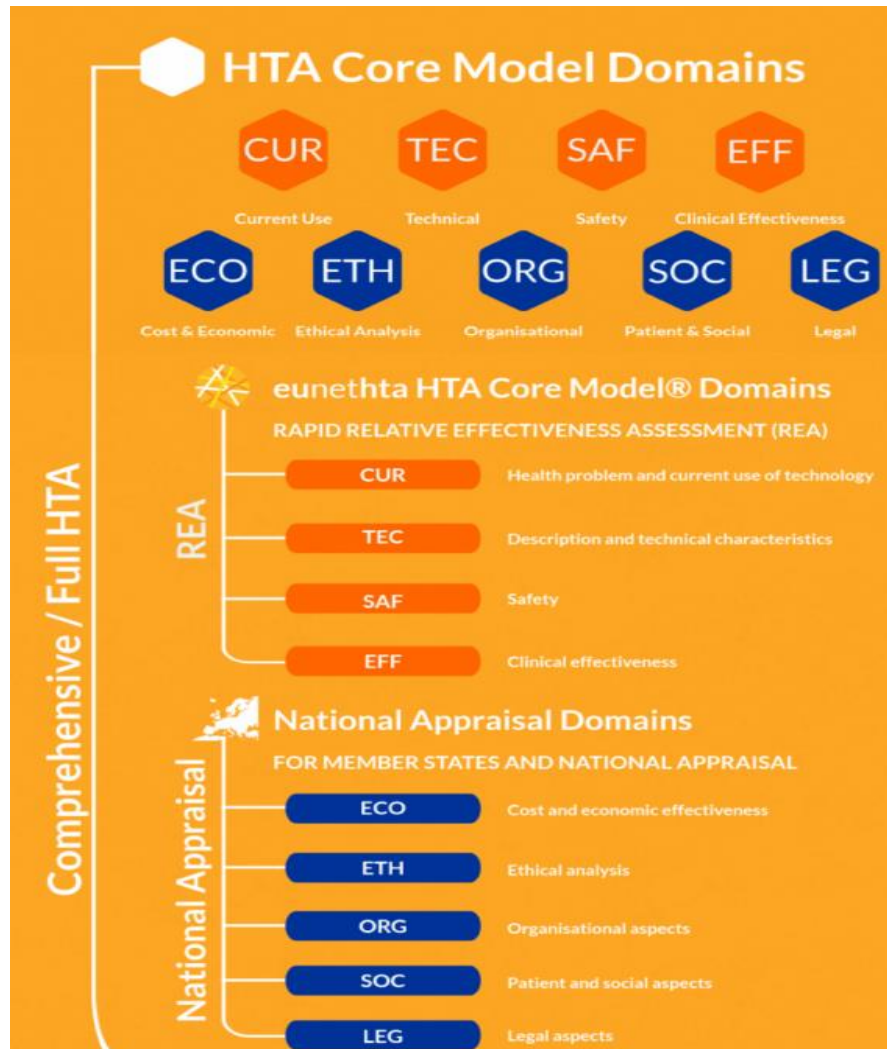
shutterstock.com • 668617123

Source: Pixabay – free images

# Joint HTA strategy - Legal Basis

- **Directive 2011/24/EU** on the application of **patients' rights in cross-border healthcare**:  
**Art. 15** : *“functioning network of national HTA-agencies and bodies”,* thereby *“assuring the exchange of scientific information.”* → **EUnetHTA**
- **European Commission: Proposal for a Regulation** of the European Parliament and the Council on **health technology assessment** and amending Directive 2011/24/EU COM(2018) 51 final (31.1.2018) – based on Art. 114 TFEU (**Internal Market**)
- Amended text by the **European Parliament** (first reading) (14.2.2019) – based on Articles 114 and 168(4) TFEU (**Internal Market** and **Public Health**)
  - **joint clinical assessments** by a **coordination group / sub-groups** for:
    - medicinal products,
    - other medicinal products not subject to the authorisation procedure ,
    - specific medical devices (classified as class IIb and III)
    - specific in vitro diagnostic medical devices (classified as class D)

# Reference to EUnetHTA Core Model



# Case Study

## Sovaldi © Gilead (Sofosbuvir)

### How much is a specific medicine worth?

How much can it cost in publicly/ on the basis of solidarity financed health systems?



Source: background image: pixabay – creative commons (Vacho/medikamente), accessed: September 22, 2019

- For **companies**: **duty to disclose financing** and **costs**, **if public funding** for research and development has been received → this information could be used for pricing recommendations in Joint HTA
- For **decision makers**: **duty to disclose conditions of MEA** (also: Risk-Sharing-Agreements), etc..

# Critical Appraisal of Legal Basis

## Proposal of a Regulation on HTA – as amended by the European Parliament (first reading) (14 February 2019)

- **Transparency/incomplete information**: no **duties for companies** to provide insights about financing and costs for research and development (if public funding has been involved) / no **duties for Member States** to provide insights of MEA, etc. regarding existing/new products.
- **Financing** mechanism: work of coordination Group (and sub-groups) shall be financed by Union – what about the financing of the scientific input necessary for a high quality of work?
- Still very much based on **voluntary cooperation** (no HTA-agency)

# Obstacles for joint HTA in Europe

## Europe is divers ...

- **No EU HTA-Agency** - different competencies/procedures/methodologies of HTA agencies in Member States
- **Intransparent assessments** (in some countries assessments are even confidential), etc.
- **Independence of HTA-bodies: different standards** re conflict of interest
- **Missing data for assessments**
- **Fragmentation of national health systems** (high variety of decision making bodies due to federal systems)
- Assurance of **timely delivery of joint HTA, ....**

(see also European Commission (2017)2455149 - 15/05/2017)

# Discussion

- **Fair Pricing:**

Which (further) information is needed for fair pricing mechanisms?

How can access to this information be provided?

Should pricing recommendations be included in HTA reports?

- **Health Market:**

Is the health market really to be treated like a regular other 'internal market'?

- **Patent Law:**

Patents in combination with other property rights and intransparent decisions in Member States lead to strong negotiating positions of companies and to high priced technologies.

Could/should adjustments in patent law contribute to more sustainable health systems and **equitable access to health care of appropriate quality?**

(see also: Wildt C in Nowotny M (2018)).



# Literature

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