HTAi, a global HTA society, current achievements and future initiatives

Health Technology Assessment international

An International Society for the Promotion of Health Technology Assessment

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Past Secretary of HTAi
Co-chair of the ISPC Tokyo HTAi 2016
Health Technology Assessment International (HTAi)

- Global scientific and professional society for those who produce, use, or encounter HTA
- ≈1,300 members from approx. 60 countries
  - Includes 16 for-profit and 60 not-for-profit organizations
- Embraces all stakeholders, including researchers, agencies, policymakers, industry, academia, health service providers, and patients/consumers
- Neutral forum for collaboration and the sharing of information and expertise
- Secretariat based at the Institute of Health Economics (Canada)
HTAi: The Clinical & Professional HTA Society

Country of origin - income classification

- Low income: 7%
- Lower middle income: 3%
- Upper middle income: 16%
- High income: 74%

Sector/workplace where members encounter HTA

- Government or health policymaking body: 26%
- Health care centre or health provider: 12%
- HTA agency or organization: 8%
- Industry: 4%
- Consulting: 2%
- Insurance fund/company: 1%
- University or other academic centre: 1%
- Other/unknown: 6%
Health Technology Assessment International (HTAi)

Mission:

Support and promote the development, communication, understanding and use of HTA around the world as a scientifically-based means of promoting the introduction of effective innovations and the effective use of resources in health care.
Board Executive Committee

President
Guy Maddern, Australia

Vice President
Sean Tunis, USA

Treasurer
Don Juzwishin, Canada

Secretary
Americo Cicchetti, Italy

Board Directors
Jeonghoon Ahn, South Korea
Katrine Frønsdal, Norway
David Grainger, Australia
Rabia Kahveci, Turkey
Deborah Marshall, Canada
François Meyer, France
Alric Rüther, Germany
HTAi a neutral and transparent society

- Code of conduct
- Conflict of interest
- Influence from sponsors and their relation with society’s activities
Policy in place regarding conflict of interest

There is…: AM guidelines

**Sponsorship.**

• With the exception of satellite symposia, organizations will typically not be permitted to sponsor specific scientific sessions during the Annual Meeting. Organizations sponsoring sessions of any kind must not display promotional materials (e.g., signage with organizational logos) within the session room. However, sponsors’ logos may appear on Annual Meeting programs, promotional brochures, “give - away” items, and signage displayed in hallways of the Annual Meeting venue.
Policy in place (ii)

• Under no circumstances may sponsors be permitted to exercise influence over the scientific content of the Annual Meeting, with the exception of submitting session proposals for consideration by the ISPC.
HTAi statement on relations with public and private organizations

1. HTAi is a scientific and professional membership society. It welcomes organizational members and sponsors whose support helps to further the mission of the Society, particularly through the development of new initiatives and the extension of activities to less developed countries.

2. HTAi recognises that all organisations (governments, non-governmental organisations and businesses) have interests. HTAi protects its integrity and independence by requiring transparency in all financial support, by relying primarily on individual members for core funding and by having a diversified pool of sponsors so that no single interest has undue importance.
Not just this but…

• For meeting sponsorship, HTAi welcomes contributions in support of an event as a whole, and such contributions will be given appropriate acknowledgement in programmes, posters and other promotional material. Sessions in main meeting programmes are run under the standards of scientific and professional peer review and these sessions may not be sponsored by an outside organisation. Social events, pre- and post-meeting workshops and other elements (e.g., bags, books, etc.) may be sponsored at the discretion of the Board. Those participating in HTAi meetings are personally responsible for the costs to them of registration and attendance. HTAi willingly invites organisations to sponsor participants’ attendance at meetings by subsidising the costs to participants of registration, travel and accommodation, particularly for students and for those attending from less developed countries.

• HTAi adheres to the principles on conflicts of interest promulgated by the International Committee of Medical Journal Editors. All those invited or offering to submit contributions to sessions or posters in main meeting programmes are obliged to declare sources of support and potential conflicts of interest as a regular part of the review process.

• All HTAi Board members are required to declare any interests which might conflict or be seen to conflict with their work for the Society. HTAi supports integrity and transparency by inviting all members and other interested parties to view these declarations and its financial statements.
What is technology?

«the systematic application of scientific and other organized knowledge to practical tasks»

When we talk about technology, we do not only refer to devices or machines, but the way we address and resolve problems.

“It is the knowledge of how to combine resources to produce desired products, to solve problems, fulfill needs, or satisfy wants; it includes technical methods, skills, processes, techniques, tools and raw materials”.
Health technology

“Any intervention that can be used to promote health, to prevent, diagnose or treat a disease or for rehabilitation or long term care. This includes pharmaceuticals, medical devices, procedures and organizational systems used in health care.”

OTA, 1978
Health Technology Assessment

• [HTA] is a multidisciplinary field of policy analysis. It studies the medical, social, ethical, and economic implications of development, diffusion, and use of health technology

(International Network of Agencies for Health Technology Assessment 2002).
HTA and how it is seen
HTA is much more than health economics

"To infinity and beyond!"
From regulation to coverage

Can it work? Safety and efficacy

Effectiveness

Does it work? Comparative effectiveness

Does it work proper than others?

Comparison of effectiveness among different technologies

Is it worth it?

Organizational, economic, legal social/cultural, political, ethical

Coverage reimbursement decisions

Market authorization

Prescription

Provision

Health Technology Assessment international
HTA is mainly a *retrospective* assessment approach.
Research & Development
- Early dialogue
- Proofs of concept
technology feasibility reports

Regulation
- Market authorisation
- HTA reports
  including ELSOI and economic analysis

Disinvestment
- Exclusion from provision

Investment
- Health provision
- Clinical Practice Guidelines
  and Post-introduction HTA reassessments

Clinical trials and other epidemiological designs
Need for context...

- Evidence
  - Physical
  - Economic
  - Biological
- Values
  - Ethics
  - Law
- Organization
  - Social
  - Cultural
  - Health system
Portfolio of activities

- Annual meetings
- Policy forum
- Interest subgroups
- Other meetings (Regional, Regional PF)
- IJTAHC
- International Collaborations
- Grants and scholarships
- Online resources
Major Activities

• **HTAi Annual Meetings**: the key global venue for sharing advances in research, policy, methods
  – 2010: “Maximizing the value of HTA,” Dublin, Ireland
  – 2011: “HTA for Health System Sustainability,” Rio de Janeiro, Brazil
  – 2012: “HTA for integrated care in a patient-centered system,” Bilbao (Basque Country), Spain
  – 2013: Seoul, Korea, Values

• **2014 HTAi Washington**: *Optimizing Patient-Centered Care in an era of Economic Uncertainty*

• **2015 Oslo, Norway**: Global Efforts in Knowledge Transfer: HTA to Health Policy & Practice
HTAi Policy Forum

• A venue for senior leaders from the public and private sectors to hold strategic discussions informed by the perspectives of their different organizations
• Meets twice annually; meetings held under the Chatham House Rule
• Summary of discussions published in the International Journal of Technology Assessment in Health Care
• Recent topics: Evidence production, Adaptive licensing, HTA and Disinvestment, HTA-Regulatory Interactions, Managed Entry Agreements, HTA for Optimization of Health Technology Use, Coverage with Evidence Development, Harmonization of HTA
Papers of the HTAi Policy Forum

- Published in *International Journal of Technology Assessment in Health Care*; free access at [http://www.htai.org](http://www.htai.org)
  - 2015 Background paper - "Improving the effectiveness and efficiency of evidence production for HTA in the light of current trends in drug and device development, health system funding, regulation and HTA" K. Facey on behalf of the HTAi Policy Forum
  - "Adaptive Approaches to Licensing, Health Technology Assessment, and Introduction of Drugs and Devices"
  - D. Husereau, C. Henshall & J. Jivraj on behalf of the HTAi Policy Forum
  - "Using Health Technology Assessment to Support Optimal Use of Technologies in Current Practice: The Challenge of "Disinvestment"" (deliberations from the 2012 meeting)
  - Interactions between HTA, coverage, and regulatory processes: emerging issues, goals, and opportunities (deliberations of 2011 forum)
  - What principles should govern the use of managed entry agreements? (deliberations of 2010 forum)
  - HTA to optimize health technology utilization: using implementation initiatives and monitoring processes (deliberations of 2009 forum)
  - Harmonization of evidence requirements in HTA for reimbursement decision-making (deliberations of 2008 forum)
Interest Groups

Ten Interest Groups serve as hubs for sharing international experiences and expertise among HTA users and producers worldwide:

- Conditional Coverage/Access with Evidence Development
- Disinvestment
- Ethical Issues in HTA
- Hospital-based HTA
- HTA-Regulatory Interactions
- HTA in Developing Countries
- Early Career Network
- Information Resources
- Patient and Citizen Involvement
- Impact on Public Health Interventions (Nutrition)
Major Activities

• Other national, regional, and international meetings and symposia
  • HTAi Asia Policy Forum. Singapur 2015
  • HTAi Latin American Regional Meeting, November 2014 (in collaboration with PAHO, REDETS, CENETEC)
  • HTAi Asia Policy Forum. Korea 2013
  • HTAi Latin American Regional Meeting, November 2012 (in collaboration with PAHO, World Bank, Ministries of Health)
  • HTAi Latin American Regional Meeting, October 2010 (in collaboration with PAHO, Ministries of Health, industry partners)
  • Workshop for regulatory and HTA agency heads, co-organized by HTAi and regulatory bodies, October 2010
  • Symposia at relevant region-wide meetings of other societies (Society for Medical Decision Making, International Society for Quality in Health Care)
  • Workshop on HTA implementation for the Ministry of Health in China
Major Activities

• International Journal of Technology Assessment in Health Care
• International collaboration. Partnership
• Grants and scholarships
• Online resources
  – HTA Glossary, Vortal, newsletters, bulletins
The International Journal of Technology Assessment in Health Care (IJTAHC), published online quarterly by Cambridge University Press, is the official journal of HTAi.
## Partnerships

<table>
<thead>
<tr>
<th>Organization</th>
<th>Description</th>
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<tbody>
<tr>
<td>WHO</td>
<td>HTAi is a non-governmental organization in official relations with the WHO</td>
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<tr>
<td>INAHTA</td>
<td>Partner, MoU</td>
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<tr>
<td>Euroscan</td>
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HTAi also collaborates with over 75 organizational members and regularly works with other like-minded organizations, societies to further promote/support HTA.
Grants and scholarships

- HTAi offers scholarships and travel grants to support individuals working in HTA in low and middle income countries:
  - **HTAi Educational Scholarships**
    To benefit individuals from developing countries studying HTA
  - **The Jill Sanders Memorial Scholarship**
    To benefit individuals from Africa studying HTA
  - **HTAi Travel Grants**
    To support individuals from low and middle income countries and to support representatives from non-profit patient organizations to attend HTAi Annual Meetings
HTA Glossary

• The HTA glossary is an official collaboration between International Network of Agencies for Health Technology Assessment (INAHTA), Health Technology Assessment international (HTAi) and other partner organizations (EuroScan, ISQuA,…).
History of HTA Glossary

- 2002 INAHTA meeting: members discussed the need for a list of standard definitions of terms used in health technology assessment
- March 2004: First draft circulated to all INAHTA members
- Fall 2004: aggregation with glossary developed by Cliff Goodman for the course TA 101 of the US National Library of Medicine
- 2006 INAHTA meeting: Start of development of the French language version coordinated by CEDIT, continued by AETMIS
- 2007 AVILA-T Start of development of the Spanish language version coordinated by AVILA-T
- 2005-2010 Glossary under the responsibility of the INAHTA working group Education and Training
- 2010 Approval of the ToR of Glossary Steering Committee by boards of INAHTA and HTAi
- 2011 Start of Steering Committee work with numerous partner organisations
http://www.htaglossary.net/

- International collaborative work through Wikibased website
- Divisions of 500+ terms into 13 fields (health economics, biostatistics, …)
- English, French and Spanish (coming versions German and Portuguese)
- ISO norms 704,860,10241, 1087-1 to be implemented
- Linkage with established technical terminologies (such as the Canadian Termium database)
Composition of Steering Committee

- Board of HTAi representative and Chair: Reiner Banken, Canada
- Board of INAHTA representative: Wendy Babidge, Australia
- European network for Health Technology Assessment (EUnetHTA): Patrice Chalon, Belgium
- Canadian Bureau of translation: Sylvie Bouchard, Canada
- International Information Network on New and Emerging Health Technologies (EuroScan): Iñaki Gutierrez-Ibarluzea, Spain
- Cochrane Collaboration: Sally Green, Australia
- International Society for Quality in Health Care (ISQua): Wendy Nicklin, Canada
- Guidelines International Network (G-I-N): Minna Kaila, Finland
- English Editorial Board: TBD
- Spanish Editorial Board: Leonor Varela Lema, Spain
- French Editorial Board: Marie-Josée Pelletier, Canada
HTAi vortal
FEATURE TOPIC: HTA IN A PATIENT-CENTRED SYSTEM

HTA for integrated care in a patient-centred system

Many countries in the world face a growing elderly population and increases in chronic disease, driven in part by advances in health technology and health systems that have led to a reduction in mortality rates of certain diseases. This fact increases the pressure on institutions and professionals to provide social and medical care in the most cost-effective way. To address this problem, a major reorganization of the health and social care sectors is required.

The concept of "integrated care" emerges as a response to these challenges. This concept is based on coordinated work between institutions and professionals as a means to guarantee the continuity of care, to improve health, quality of care and patient satisfaction, to increase efficiency and the effectiveness of social and health systems, and to foster patients' empowerment.

Integrated care can be defined as a well-planned and well-organized set of services and care processes, targeted at the multidimensional and multifaceted needs/problems of an individual client or group of persons with similar needs/problems. Integration is frequently understood as a cross-organizational integration of health and social services, but tasks and services also have to be integrated within organizations. The latter type of integration is more common management tasks, while integration across organizations and services is a relatively new issue for profession-

It is clear that the provision and evaluation of these systems is crucial to the development of well-designed services that meet the needs of the patient and society. In fact, new technological solutions are being developed in parallel to integrated health care. Telemedicine, point of care devices and ICTs, in general, are part of such technological developments and generate new challenges to health technology assessment. That is the reason why HTA could play a key role by ensuring not only that the individual health technologies (mainly procedures, devices and systems) are properly assessed, but that a global perspective is considered. In concrete terms, that the medical, social, ethical and economic implications of the development, diffusion, and integrated use of these technologies is factored into assessment.
Upcoming Activities: Highlights

• WHO General Assembly
• HTA promotion in Asia-Pacific:
  – Third edition of the Asian PF
• HTA promotion in LAC
  • Fourth edition of the LAC regional meeting in collaboration with REDETSAN
• New activities of the Interest Groups
• Upcoming Policy Forum discussions
Big Hits

• WHO resolution on Universal Health Coverage and the role of HTA
• HTAi is the unique HTA society that deserves consideration of WHO as member of the WHA since 2014.
Join us

• Do you want to meet and contact high profile decision makers (clinicians, patients, managers, politicians,…) within the HTA and Health Outcomes research arena?

• Would it be cost & time effective to meet multiple prospects in one setting over three days? HTAi meeting Tokyo

• Do you want a fast track to gaining competitive advantage and increased discussion share?

• If your answer is yes to any of these questions, you should be participating in this society and positioning yourself as thought leaders in the HTA space.
HTAi Tokyo 2016

**Theme:** Informing Health Care Decisions with Values and Evidence

**Chairs:** Iñaki Gutiérrez-Ibarluzea, Basque Country (Spain)
Isao Kamae, Japan

**Sub-themes:** Unlocking the Value Potential of New Technologies in Health Care, Waste in Science, Global Experiences in Universal Health Coverage

**Abstract Submission Deadlines:**
- Panel & Workshops: November 2, 2015
- Poster & Oral Presentations: November 30, 2016

**Travel Grants Application Deadline:** January 8, 2015

**May 10-14, 2016** Keio Plaza Hotel, Tokyo, Japan
**Plenary sessions**

- **Prof. Kristian Kidholm** (Denmark). What methods are most appropriate to use when assessing these technologies, a way forward, MAST and additional methodological initiatives needed.
- **Dr. Yvonne Bombard** (Canada). Socio-cultural aspects in addressing new technologies,
- **Dr. Madeleine De Rosas-Valera** (Philippines). Patient involvement, social aspects and outcomes of interest to patients

- **Unlocking the Value Potential of New Technologies in Health Care**
  - Moderators:
    - **Guy Maddern** (Australia)
    - **Takashi Fukuda** (Japan)
Plenary sessions

- **Paul Glasziou**. CEBM. The REWARD initiative. *Stages of waste in the production and reporting of research evidence relevant to clinicians and patients*
- **Prof John Ioannidis**. Stanford University. "Clinical trials: what a waste".
- **Dr Lex M. Bouter (ZNW)** The Netherlands. Perverse Incentives or Rotten Apples? Accountability in Research: Policies and Quality Assurance

- **Waste in Science**
  - Moderators:
    - **Tammy Clifford** (Canada)
    - **Iñaki Gutiérrez-Ibarluzea** (Basque Country, Spain)
Plenary sessions

- Dr. Yot Teerawattananon, HITAP Impact on policy-making and clinical practice
- Dr. Jeonghoon Ahn (Korea) NECA, The process of enabling innovation access to the health care sector. Role of HTA.
- Ms. Yue Xiao, CNHDRC (China). The health reform in China. HTA development in China

- Global Experiences in Universal Health Coverage
  - Moderators:
    - Isao Kamae (Japan)
    - Wim Goettsch (Zinl. The Netherlands)
More Information

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HTAiOrg