PHP174 COMPARISON OF DRUG ASSESSMENTS IN FRANCE, GERMANY AND THE UNITED KINGDOM: IS EUROPEAN HTA A REALITY?

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OBJECTIVES: In 2006, the ElNehHTA project was launched. One of its main strategic objectives was to strengthen the link between HTA and health care policy making in the EU. Seven years after ElNehHTA establishment, the objective of this study was to compare HTA agencies’ assessments in France, Germany and UK, focusing on method and outcomes. METHODS: Scope of the study was all the products getting a positive opinion from CHMP during two years, starting at January 1, 2011. Comparison between assessments was made for products assessed by the three HTA agencies: IQWIG, NICE, and HAS. RESULTS: A total of 87 drugs were included in this study. 11 (13%) have been assessed by the three agencies. Among these drugs, manufacturer use of an inappropriate comparator (45/47) or using different ICER thresholds (32/107), and use of economic evidence that was not sufficiently robust (40/107). The reasons for rejection were consistent across the four agencies, with a similar proportion basing their decision at least partly on one of the three reasons provided as the main reason for rejection. Conclusions: A large proportion of submissions were rejected despite ICERs below the threshold. In instances where decisions went against the ICER thresholds, there was a clear tendency for identifiable problems with the clinical and economic assumptions to diminish the reliability of the ICERs presented. This result highlights that a lower-than-threshold ICER is not enough for a positive recommendation and manufacturers must support their submission with accurate and reliable data to achieve a favourable outcome.

PHP175 USING THE DELPHI METHOD FOR SELECTING MEDICAL TECHNOLOGIES FOR BUDGET CONSTRAINTS: A FEASIBILITY STUDY

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OBJECTIVES: In 2006, the EUnetHTA project was launched. One of its main strategic objectives was to provide a method to select medical technologies for inclusion in the National List of Health Services (NLHS) in member states. The Delphi method was applied in two groups: medical specialists (oncologists and cardiologists) and observers in the NLHS committee. Participants in each group were asked to choose different medical technologies from the list of technologies submitted for inclusion in the 2012 NLHS and ranked them according to their importance. The participants repeated the experiment after receiving aggregated feedback on the relative ranking of each technology within the same group after the first round. Comparison of the results was performed using descriptive statistics and non-parametric tests. RESULTS: After two rounds of the experiment, observers and medical specialists reached agreement on four of the five highest ranked technologies in each field (oncology and cardiology) regarding their importance to be included in the NLHS. Three of these four technologies were indeed included in the NLHS for 2012. CONCLUSIONS: The Delphi method is one of the best-known techniques to control group interaction and reach a consensus by utilizing the expertise of committee members. The study demonstrated the feasibility using the Delphi method for ranking health care technologies.