EUnetHTA Joint Action 3
Update HTA Network

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EUnetHTA JA3 Directorate

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Outline

• Objectives for EU-netHTA Joint Action 3 (JA3)
• First progress in JA3.
• Stakeholder involvement in JA3
EUnetHTA Joint Action 3

For a **sustainable network on** Health Technology Assessment (HTA) in Europe

**Specific objectives of JA3**

- To increase production of high-quality HTA joint work
- To increase uptake and implementation of joint HTA work at the national, regional, and local level
- To support evidence-based, sustainable, and equitable choices in healthcare and health technologies
EUnetHTA JA3 Participants

79 partners consisting of national, regional and non-for-profit agencies that produce or contribute to HTA

Project Coordinator:
Dutch National Health Care Institute (ZIN)
Where do we come from?

• Three preparatory meetings with HTA network (first half of 2015)
  – Start of first draft JA3 proposal in June 2015 (under JA2)

• Nomination process by the Member States
  – Two official meetings in October and November 2015
  – Submission of initial proposal at January 26, 2016
  – Submission of revised proposal at March 30, 2016

• Kickoff meeting at March 3 in Amsterdam
  – Retroactive start of JA3 at June 1, 2016
  – Signature of grant agreement by coordinator and Commission on August 26, 2016

• All partners signed the contract
  – 30% funding has been transferred to ZIN on September 20
  – Funds will be transferred to partners in the coming months.
## Organisational and governance structure

**DG SANTE and CHAFEA**

### Work Package 1 Network Coordination - Dutch Health Care Institute

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### Countries

- Spain
- United Kingdom
- Finland
- Malta
- Italy
- Sweden
- Belgium
- France
- Poland
- Estonia
- Norway
- Croatia
- Greece
- Portugal
- Lithuania
- Austria
- Cyprus
- Hungary
- Romania
- Bulgaria
- Netherlands
- Czech Republic
- Ireland
- Slovakia
- Switzerland
- Germany
- Denmark
- Latvia
- Slovenia

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European network for Health Technology Assessment | JA3 2016-2020 | www.eunethta.eu
Summary of select activities in JA3

WP4 Joint Production
- To produce 43 rapid REA on other technologies and 37 on pharmaceutical
- To provide a system for topic selection and prioritization

WP5 Evidence Generation
- To conduct Early Dialogues (joint HTA or parallel/joint with regulators)
- To link additional data collection to on-going activities

WP6 Quality Management
- To provide quality management for EUnetHTA joint products
- To further develop methodologies and tools for joint work if necessary

WP7 National implementation and impact
- To facilitate the uptake of joint products at the national/local level
- To measure the impact of joint work in collaboration with other work packages
Meetings

- 1st Executive Board (WP1) meeting in Diemen, June 15, 2016
  - WP6 meeting in Cologne, on August 31-September 1, 2016
  - Additional workshop on EUnetHTA tools on October 18-19, 2016
- WP3 meeting in Stockholm on September 19, 2016
- WP4 meeting in Oslo, on September 27-28, 2016
- WP2 meeting in Madrid on October 3-4, 2016
- WP7 meeting in Rome, on November 14-15, 2016
- WP5 meeting in Paris, on November 24, 2016.

- EUnetHTA Assembly meeting in Brussels on October 20, 2016
- EUnetHTA Forum meeting in Brussels on October 21, 2016

- 2nd Executive Board (WP1) meeting in Rome November 16-17, 2016

- EUnetHTA-EMA meeting December 7 in London
Practical activities

- Workplans for the different WPs will be finalized this month
  - With focus on the plans for the first year.
  - Additional work plan with EMA will be developed

Examples of activities in the different WPs

- WP4
  - First collaborative assessments for non-pharma has started and first expressions of interest for pharma expected this month

- WP5
  - Call for expression of interest for ED published this week

- WP6
  - Activities on the updates of EUnetHTA tools has taken-off (workshop)

- WP7
  - Research activities on the mechanisms to support and encourage the use of jointly produced HTA and resuse of HTA information have been started
Issues for further discussions

- Setup of system for horizon scanning and priority setting
  - How to develop a system for horizon scanning (based on possible existing systems)?
  - Further development of priority setting by for instance the organisation of a liaison committee (link between EUnetHTA and national practice)

- Interaction with regional activities
  - How can EUnetHTA activities support regional activities such as the BeNeLux-Austria?
  - How to balance top-down (joint assessments) and bottom-up (collaborative assessments) approaches?

- Ensure alignment with the DG Sante HTA activities on the post 2020 scenario
  - Close interaction between the DG Sante research activities and EUnetHTA work on future scenario’s
  - Involvement of EUnetHTA ExBoard in the discussion on the five options
Stakeholder involvement in JA3

- Political and strategical involvement is moved to HTA Network

- Scientific and operational involvement will receive more attention in JA3
  1. Participation in the EC/EUnetHTA Forum
     • October 21\textsuperscript{st} (yearly interactions)

2. Participation in Work Packages
   • Facilitation of the provision of specific subject-matter information/knowledge on specific technical questions
   • Public consultations on deliverables
   • Interaction on the level of specific activities like the Early dialogues (WP5) and Joint Assessments (WP4)
   • Interaction on the level of methodologies, guidelines and procedures (WP6)
Practical examples of early involvement

- Technology producers
  - Meeting with EFPIA on Joint Assessments
  - Meetings with individual pharma companies on pilots
  - Participation in meetings with medtech industry

- Patients organisations
  - Several meetings with and without Commission to discuss involvement of patients

- Health care providers
  - Involvement in several Horizon2020 projects
  - Collaboration in registry projects in WP5.
  - Contacts with societies such as ECCO, ESC

- Payers
  - First contacts in the light of WP5.
HTA in the life cycle of technologies

- Presenting and discussing requirements studies in ED*
- Rapid REA
- Assessment for market authorization
- Additional data collection
- Comparative or full HTA / REA

Use of technology in health care:

Collecting evidence in early development.

Time line of innovation

*Early dialogue
Thank you
Any Questions?