EUnetHTA
European network for Health Technology Assessment

Health Technology Assessment (HTA) – A structured process of applied research to inform policies and decisions in healthcare

Conference: Putting Science into Standards – evidence-based quality assurance – an example for breast cancer
Joint Research Centre, ISPRA, Italy, October 22, 2015

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HTA’s contribution to quality improvement

• While quality assurance or development is about doing things right, health technology assessment (HTA) is about doing the right things.

• The origins of HTA are Evidence Based Medicine, health policy analysis, and health economics.

• EUnetHTA was established to create an effective and sustainable network for HTA across Europe.
An example of an HTA

An example of an HTA of prognostic tests for breast cancer recurrence (uPA/PAI-1 [FEMTELLE], MammaPrint, Oncotype DX)


What is Healthcare Technology?

- Healthcare **technology** is defined as prevention and rehabilitation, vaccines, pharmaceuticals and devices, medical and surgical procedures, and the **systems** within which health is protected and maintained.
HTA definition

*HTA* is a multidisciplinary process that summarises information about the medical, social, economic and ethical issues related to the use of a health technology in a systematic, transparent, unbiased, robust manner.
HTA aim

The aim of HTA is to inform the formulation of safe, effective, health policies that are patient focused and seek to achieve best value.

Despite its policy goals, HTA must always be firmly rooted in research and the scientific method.
Eclectic (multidisciplinary)

Four main streams of applied research methodology have contributed to the development of HTA

- policy analysis
- evidence based medicine
- health economic evaluation
- social and humanistic sciences
HTA as an input to priority-setting and decision-making
Scope of EUnetHTA’s work

EUnetHTA supports collaboration between European HTA organisations that brings added value at the European, national and regional level through

- facilitating efficient use of resources available for HTA
- creating a sustainable system of HTA knowledge sharing
- promoting good practice in HTA methods and processes
HTA and context

Globalize the evidence, localize the decision

J.M. Eisenberg

Locate the decision, globalise the evidence, localise the reporting

EUnetHTA
### The Domains of the HTA Core Model® - assessing dimensions of value

#### SCOPE

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<th>Comprehensive/Full HTA</th>
<th>Rapid REA</th>
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#### HTA Core Model DOMAINS

1. Health problem and current use of technology
2. Description and technical characteristics
3. Safety
4. Clinical effectiveness
5. Costs and economic evaluation
6. Ethical analysis
7. Organisational aspects
8. Patient and social aspects
9. Legal aspects

![Diagram showing domains of HTA Core Model](image-url)
Health Technology Life-cycle

Use of technology in health care

Time line of innovation

Early scientific advice
Rapid REA
Additional data collection

HTA / REA
The POP Database

Description
The EUnetHTA Planned and Ongoing Projects (POP) database allows EUnetHTA Partners and Associates to share information on planned, ongoing or recently published projects of participating agencies and identify similar projects through a matching system provided by the online database.

Purpose
To facilitate collaboration among European HTA agencies and reduce duplication of work.
14 Methodological Guidelines for HTA and Rapid Relative Effectiveness Assessment

Development
9 Methodological Guidelines for Rapid REA of Pharmaceuticals developed in JA1 and revised in JA2 to include medical devices plus 5 new for HTA

Content
Guidelines on methodological challenges that are encountered by health technology assessors while performing a rapid relative effectiveness assessments and HTA

Primary Aim
To help the assessors of evidence interpret and process the data that are presented to them as part of an HTA.
EUnetHTA Joint Assessments and early scientific advice (early dialogues)

- 15 joint full HTAs and REAs
- 20+ early dialogues (incl. SEED Project)
EU Participants* in EUnetHTA

EUnetHTA Partners and Associates in JA2

44 Partner organisations designated by EU Member States

Large number of regional agencies and non-for-profit organisations that produce or contribute to HTA

*) Norway participates in the Third EU Health Programme (2014-2020)
Some of the Partner Organisations in Joint Action 2 (2012-15), e.g.

- GBA, IQWIG, DIMDI, Medical Valley - EMN, Germany
- HAS, France
- NICE, NETSCC, HIS, United Kingdom
- AGENAS, AIFA, ASSR, Veneto Region, Gemelli Hospital, Italy
- ISCIII, AETSA, AQuAS, Avalia-T, IACS, OSTeba, Sescs, Uets, Spain
- Aotmit, Poland
- NSPH MPD, Romania
- ZIN, Netherlands
- KCE, INAMI, Belgium
- INfarmED, Portugal
- SBU, TLV, Sweden
- LBI, HVB, GöG, Umit, Austria
- THL, Fimea, Finland
- AAZ, CHIF, Croatia
- NHS, Latvia

NCHTA, Russia, as a Collaborating Partner, has paid a keen interest to the activities of EUnetHTA since 2010
International experience from the last few decades

- HTA is very valuable for the healthcare system
- HTA is driven by policy needs – clarifying options and consequences for the decision-making (by politicians, competent authorities)
- Establishment of HTA is a complex process and needs permanent operational support
- Implementation of an HTA system takes substantial time
Article 15 of the Directive 2011/24/EU on cross-border health care

“The Union shall support and facilitate cooperation and the exchange of scientific information among Member States within a voluntary network connecting national authorities or bodies responsible for health technology assessment designated by the Member States… That network shall be based on the principle of good governance including transparency, objectivity, independence of expertise, fairness of procedure and appropriate stakeholder consultations”
The timeline of reaching a sustainable and permanent HTA network in Europe

- **2005**: Call for project proposals
- **2006-2008**: EUnetHTA Project
- **2009**: Call for joint action
- **2009**: EUnetHTA Collaboration
- **2010-2012**: EUnetHTA JA
- **2011**: Call for joint action
- **2011-2012**: Draft Cross Border Healthcare Directive. Article 15 on HTA network
- **2011-12**: CBHC Directive now decided
- **2013**: EU Cooperation on HTA Implementing Decision
- **2011 FP7-Health**: New methodologies for HTA (example INTEGRATE-HTA)
- **2016-2019**: Financial support HTA (JA3)
- **2020-Permanent collaboration**
- **2020**: Horizon 2020 Calls Health Care

**Legislation**

**DG R&I**

**Health Programme**
Thank you for your attention

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