Proposals for Coordination of HTA across Europe:
implications for rare disease

European network for Health Technology Assessment
Wim Goettsch, EUnetHTA JA3 directorate, Zorginstituut Nederland

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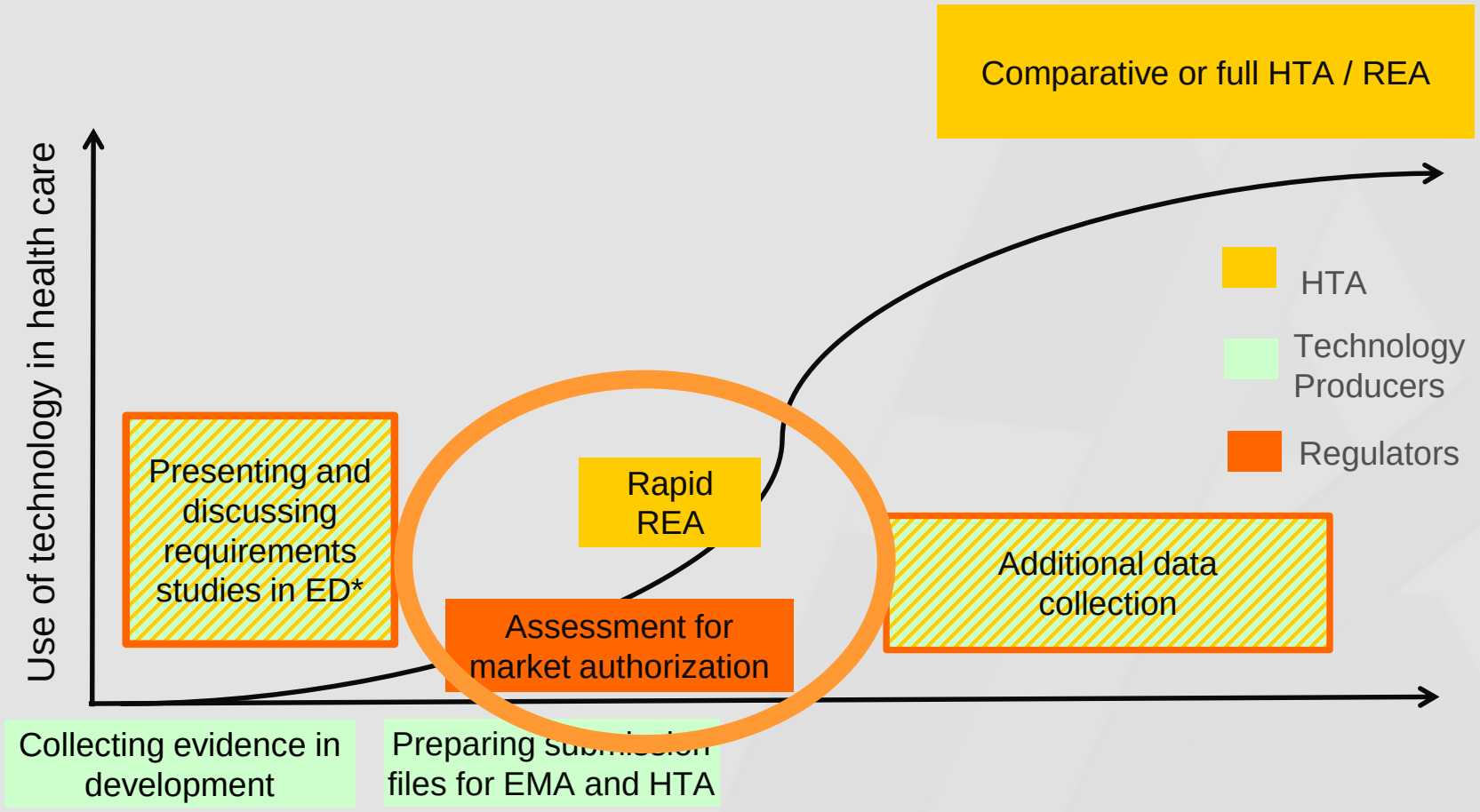
Program

- Moderator
  - Short introduction
- Rapporteur
  - Julia Chamova, director ISPOR, former EUnetHTA
- Speakers
  - Karolina Hanslik, Health Policy Officer, DG Sante, EC
  - Valentina Strammiello, Program Officer, EPF
- Panellist
  - Trevor Leighton, VP Pricing & Reimbursement, Shire Pharmaceuticals, UK
  - Francis Pang, Head, Global Market Access, Amicus Therapeutics UK Limited, UK
  - Andrea Granados, Senior Director Global HTA Strategy, Sanofi

HTA in the life cycle of technologies



*Early dialogue

Reasons for European collaboration

- HTA is an important tool for making choices on healthcare allocation (for instance on pharma)
- Expertise is mostly available in countries with a longstanding HTA experience
- Collaboration seems therefore necessary
  - Support the development of national activities and build on European processes and products
  - Decrease duplication on HTA assessments and increase efficiency of national HTA processes
  - But collaboration is on an assessment level (technical) and appraisal and reimbursement is a national remit

EUnetHTA JA3

Aims to build a sustainable model for the scientific and technical cooperation on Health Technology Assessment (HTA) in Europe

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

Project Coordinator:
Dutch National Health Care Institute (ZIN)

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

Implications for rare diseases

WP4 Joint Production

- To perform REAs on orphan drugs
- Organise input patients in these REA's both in scoping and consultation
- May increase timeliness of HTA production

WP5 Evidence Generation

- To organise input of patients in EDs of rare diseases
- To be involved in pilots on patient registries on rare diseases

WP6 Quality Management

- To involve patients in the development of methodologies and tools for joint work especially for rare diseases

WP7 National implementation and impact

- To study to which extent these activities improve the access to orphan drugs in a sustainable fashion