



## ***"A Societal Benefits Approach to HTA: What do we mean in terms of definition and scope?"***

**Epossi AIP-HTA Expert Meeting**  
Held on 10 November 2011  
Brussels, Belgium

### **EXECUTIVE SUMMARY**

#### **1 Programme objectives**

Epossi's Advanced Innovation Programme on Health Technology Assessment (AIP-HTA) was launched in 2011 with the aim of:

- identifying deficiencies in current HTA structures and processes
- developing a new framework to deliver better outcomes for all stakeholders.

Following a series of consultation meetings with expert and interested actors from patients' organisations, science, HTA agencies, policy-makers and industry during the course of 2010 and 2011, the consensus was that the programme should focus on how to effect **attitudinal** as well as **systemic change** in order for a **societal benefits approach** to HTA to be adopted, which can take better account of smaller, specific patient groups across Europe, as well as the needs of the wider populations.

This was framed as a core question that the AIP-HTA should address:

***"How can HTA agencies at national level consider societal benefits as an integral element of their HTA core model which positively contribute not only to the realisation of better health outcomes for EU citizens but also to a smart, sustainable economy?"***

Over the course of the next three years, the AIP-HTA aims to develop an innovative European framework for a societal benefits approach to HTA with workable templates for implementation at national level.

#### **2 Expert meeting – purpose and key outcomes**

The purpose of the meeting was to:

- a) determine "What do we mean in definition and scope by 'societal benefits in HTA?'"
- b) advise on the scope of concrete actions needed and stakeholders to be engaged to develop the framework, as well as measures to achieve its acceptance within the EU.

To enable a full and frank exchange of views, all discussions were held under the Chatham House Rule<sup>1</sup> (where speakers are not identified only their stakeholder category).

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<sup>1</sup> [www.chathamhouse.org](http://www.chathamhouse.org)

It was agreed that a societal benefits approach to HTA should ideally comprise elements of differing values, namely:

- therapeutic value
- health system value
- societal value
- contextual values - ethics

#### **Next steps – key actions for 2012**

- 1 Actively engage key stakeholder groups integral to our ability to address the core question.
- 2 Develop a taxonomy for a societal benefits approach with multi-stakeholder consensus.
- 3 Identify a selection of core models currently in operation across Europe.
- 4 Map the best (and interesting) HTA societal benefits practices in Europe today against the definition developed in 2011 and the taxonomy exercise in 2012
- 5 Develop case studies on where HTA recommendations made by national HTA authorities have exemplified the societal benefits approach to HTA either by design or by accident.
- 6 Develop the framework.
- 7 Reach consensus between stakeholders on the ideal evidence-based societal benefits approach framework (consensus conference in Q4).

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#### **PARTICIPATING EXPERTS AND STAKEHOLDERS**

##### **Patients' Organisations**

- Alastair Kent (EGAN and Genetic Alliance UK)
- Hildrun Sundseth (European Institute of Women's Health)
- Leanne Dronfield (EPDA)
- Paul Arteel (GAMIAN Europe)
- Vladimir Tomov (Bulgarian National Alliance of People with Rare Diseases)

##### **Science and Public Administrations**

- Jerome Boehm (European Commission)
- Ksenia Zheltoukhova (Fit for Work Europe)
- Lizzie Amis (NICE)
- Martina Garau (Office of Health Economics)
- Neha Dave (Fit for Work Europe)
- Sarah Chan (University of Manchester)

##### **Industry**

- Andrea Rappagliosi (GSK)
- Christine Muzel (Philips)
- Clare McGrath (Pfizer)
- Emmanuel Chantelot (Shire)
- Frank DeFelice (MSD)
- Graeme Holland (GE)
- Jennifer Cain (EDMA)
- Kajsa Wilhelmsson (Edelman The Centre)
- Laura Savini (PPTA)
- Moira Howie (Eli Lilly)
- Ruediger Gatermann (CSL Behring)
- Victoria Malakhova (Eucomed)