Mapping of HTA methodologies in EU and Norway

Annexes

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Annexes

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Section II

Country profiles

Disclaimer:

The information and views set out in this study are those of the author and do not necessarily reflect the official opinion of the Commission. The Commission does not guarantee the accuracy of the data included in this study. Neither the Commission

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Austria

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Technologies considered potentially relevant comparators	Pharmaceuticals	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	
Medical devices and other non-pharmaceutical technologies			
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology	Always	Always	
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always	
Assessments analyse safety	Always	Always	
Assessments include other (non-clinical) domains	Yes	Yes	
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)	Always	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)	Always	Sometimes (depending on the assessors)
Assessments analyse safety	Sometimes (depending on what is assessed)	Always	Sometimes (depending on the assessors)
Assessments include other (non-clinical) domains	Yes	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Assessments include other (non-clinical) domains	Yes	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	
Quality Adjusted Life Years (QALYs) applied	Never	Never	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	
Assessments analyse patient aspects	Don't know	Sometimes (depending on what is assessed)	
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)	
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)	
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)	
Medical devices and other non-pharmaceutical technologies			
Assessments include other (non-clinical) domains	Yes	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Quality Adjusted Life Years (QALYs) applied	Never	Never	Sometimes (depending on the assessors)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies	Randomised controlled studies Non-randomized prospective studies	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Identical	
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Identical	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	NO	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Medical Technologies Other technologies		NO
The GRADE approach in routine use	Yes		
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies	Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Medical Technologies Other technologies		Don't know
Relevant patient or population sub-groups considered	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
Key deficiencies in available data considered	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies	Don't know
Transferability issues considered	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
Summary of findings section included in reports	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (We have to consider all submitted and available information)	A. scientific journal publications B. grey literature (e.g. published reports) D. register data	A. scientific journal publications, B. grey literature (e.g. published reports) C. unpublished data
Confidential data from manufacturers accepted	All technologies		
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Other evidence (e.g. patient aspects)	Efficacy/effectiveness Safety	Technical characteristics of the technology Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	In accordance with legislation on the Main Association of Austrian Social Security Institutions § 31 Abs. 3 Z 12 ASVG incumbent upon the Federation to issue a reimbursement code (short EKO) of social security for the delivery of medicinal products on behalf of a social security institutions in private practice.	Decision support to hospital benefit catalogue (7-10 per year) Decision support to drug commissions (8-10 per year) Other projects directly to diction-makers	We are owned by the MoH and for them we conduct HTA-Reports or Quick Assessments which are defined in the annual work-programme with our Ministry. In most cases the types of Technology assessed are Population Level Health Interventions, other therapeutic technologies and Medical devices. Only seldom does the MoH ask for pharmaceutical assessments (for pharmaceuticals outpatient the MoH is not the direct decision maker, this is the Social Insurance. Furthermore, we are conducting also HTA-Assessments for other decision makers in Austria (e.g. Pension-Funds) and also for German institutions (DIMDI, Iwi). In this questionnaire, we refer - as this is the main direct decision maker - to the assessments from the MoH. As pharmaceuticals assessments, the decision maker is the Social Insurance and we seldom assess them, we don't fill in the specific questions for it in this questionnaire.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other: Interventions on the health care system level, education of health professionals	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other: Policy instruments	B. Therapeutic Medical Devices E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals	NO	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Recommendations on adoption of the technology included in reports	Medical Technologies Other technologies	Medical Technologies Other technologies	Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Medical Technologies Other technologies	NO	NO
The institution does re-assessments	NO	Medical Technologies Other technologies	NO
Situations where re-assessments are done		When significant new evidence or circumstances emerge at the request of a decision-maker	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals	NO	NO
HTA work externally contracted / commissioned	Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies	NO
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information	

Appendix tables

Table A1 Choice of assessment comparators

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Formal requirement to use comparator(s) that meet the criteria	National	No	
Background of this formal requirement	Legislation		
Medical devices and other non-pharmaceutical technologies			
Formal requirement to use comparator(s) that meet the criteria	No	No	No
Background of this formal requirement			

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology	Always	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	No	
Background of this formal requirement	Legislation		
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	National	No	
Background of this formal requirement	Legislation		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	No	
Background of this formal requirement	Legislation		
Assessments analyse safety	Always	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	No	
Background of this formal requirement	Legislation		
Assessments include other (non-clinical) domains	Yes	Yes	
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No	No
Background of this formal requirement			
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No	No
Background of this formal requirement			
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)	Always	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments analyse safety	Sometimes (depending on what is assessed)	Always	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments include other (non-clinical) domains	Yes	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Assessments include other (non-clinical) domains	Yes	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	No	
Background of this formal requirement	Legislation		
Quality Adjusted Life Years (QALYs) applied	Never	Never	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	No	
Background of this formal requirement	Legislation		
Assessments analyse patient aspects	Don't know	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain		No	
Background of this formal requirement			
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain		No	
Background of this formal requirement			
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain		No	
Background of this formal requirement			
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain		No	
Background of this formal requirement			

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Medical devices and other non-pharmaceutical technologies			
Assessments include other (non-clinical) domains	Yes	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Quality Adjusted Life Years (QALYs) applied	Never	Never	Sometimes (depending on the assessors)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	No	No	
Background of this formal requirement			
Defined requirements from commissioned work	NO	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	NO	Pharmaceuticals Medical technologies Other technologies	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		Pharmaceuticals Medical technologies Other technologies	
Major differences and commonalities		We have changed ALL pharma + med Technologies assessments to the Core Model, but NOT for complex + comprehensive HTA.	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies	Randomised controlled studies Non-randomized prospective studies	
Formal requirements to use data that meet the criteria	National level	No	
Background of this formal requirement	Legislation		
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Identical	
Explanation of how methodology requirements compare to HTA Core Model REA features	Clinical effectiveness categorised according to the legal requirements	Our former template + methodology was not so much different	
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies
Formal requirements to use data that meet the criteria	National level	No	No
Background of this formal requirement			
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Identical	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		Our former template + methodology was not so much different.	Mostly overlapping - however in our template some headings are not split in the same way as in the HTA Core Model and if we are conducting a very quick assessment for our commissioner not all domains are addressed in detail.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Key deficiencies in available data considered	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies	Don't know
Examples of key deficiencies	Inadequate period of follow up, inadequate/missing (active) comparator, inadequate/missing endpoint	Standardisation of endpoints/outcomes Different ways of measurements Lack of knowledge on clinical important difference	

Appendix tables

Table A6 Evidence search and handling

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Confidential data from manufacturers accepted	All technologies		
If NO, why not?			

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://www.hauptverband.at/portal27/hvbportal/content?contentid=10007.693702&portal: componentId=gtn24b97351-625b-45cd-a10f-aa68358bc3db&viewmode=content http://www.hauptverband.at/portal27/hvbportal/content?contentid=10007.693707&portal:componentId=gtn24b97351-625b-45cd-a10f-aa68358bc3db&viewmode=content	Decision support to hospital benefit catalogue (7-10 p.a.): http://hta.lbg.ac.at/page/bewertung-medizinischer-einzelleistungen-mel-berichte/en Decision support to drug commissions (8-10 p.a.): http://hta.lbg.ac.at/page/horizon-scanning-in-der-onkologie-berichte/en many further projects DIRECT to diction-makers (4-6 p.a.): http://hta.lbg.ac.at/page/currentprojects/en	For an overview see: http://www.goeg.at/de/Bereich/Ausgewaehlte-Publikationen-und-Vortraege-123.html
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	http://www.hauptverband.at/portal27/hvbportal/content?contentid=10007.693799&portal:componentId=gtn31cc8e5f-38bf-467a-921c-dc559eb0aa4b&viewmode=content		
Relevant hyperlink(s) to guidelines	http://www.hauptverband.at/portal27/hvbportal/content?contentid=10007.693799&portal:componentId=gtn31cc8e5f-38bf-467a-921c-dc559eb0aa4b&viewmode=content		1. HTA-Method-Manual (HTA-Methodenhandbuch) including Checklists 2. HTA-Process-Manual for GÖG (HTA-Prozesshandbuch) http://www.goeg.at/de/Bereich/Methodische-Vorgehensweisen414.html

Appendix tables

Table A8 Contribution to HTA from outside the institution

Austria

Institution	**Hauptverband der Österreichischen Sozialversicherungsträger (HVB)**	**Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)**	**Gesundheit Österreich GmbH (GÖG)**
Submissions / dossiers from companies or others	Pharmaceuticals	NO	NO
Written requirements on how submissions should be done	Pharmaceuticals		
Relevant hyperlink(s)	http://www.hauptverband.at/portal27/hvbportal/content?contentid=10007.693799&portal:componentId=gtn31cc8e5f-38bf-467a-921c-dc559eb0aa4b&viewmode=content		
Templates for entering structured HTA information	Pharmaceuticals		
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals		
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	No report on this topic available		
HTA work externally contracted / commissioned	Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies	NO
Defined requirements from commissioned work	NO	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	NO	Pharmaceuticals Medical technologies Other technologies	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		Pharmaceuticals Medical technologies Other technologies	
Major differences and commonalities		We have changed ALL pharma + med Technologies assessments to the Core Model, but NOT for complex + comprehensive HTA.	
Content of assessment reports from HTA bodies in other countries used	Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies	NO
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information	

Belgium

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies	Medical devices
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Don't know
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Plan for finding information when there is no published data	NO	NO
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies	NO
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies	
The GRADE approach in routine use	Yes	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals; Medical Technologies Other technologies	Pharmaceuticals
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals; Medical Technologies Other technologies	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Don't know
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (All information that is obtained is critically assessed. Information from any kind of source is not excluded a priori)	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (All above + abstracts + expert opinion)
Confidential data from manufacturers accepted	NO	Pharmaceuticals
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety	Efficacy/effectiveness Safety Health problem

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	KCE is active in the field of" Clinical Practice Guidelines", "Health Services Research" and "HTA" (and recently also in public funding of trials). Between 2006 and 2016, KCE published 278 reports, of which 91 HTA reports	HTA is part of decision making process on reimbursement of pharmaceuticals and other medical technologies. RIZIV provides scientific support (HTA) for Commissions, that formulate proposals for decisions to the Minister. legal basis: Law 14.07.1994
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other: Proposals related to all kind of health interventions can be submitted	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO	Pharmaceuticals Medical technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	NO

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO	Pharmaceuticals
The institution does re-assessments	NO	Pharmaceuticals
Situations where re-assessments are done		According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
The institution receives submissions / dossiers from companies or others	NO	Pharmaceuticals Medical technologies Other technologies
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation H. Patients and Social aspects J. Conclusions K. Recommendations L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At institutional level	No
Background of this formal requirement	Internal guideline or procedure description	
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	at institutional level	no
Background of this formal requirement	internal guideline or procedure description	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include other (non-clinical) domains	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Don't know
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	NO	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	Institutional level	no
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The basics about search strategy (PICO, systematic, databases, etc.), critical assessment of evidence, transparent reporting of evidence, etc. are similar.	Methodology is based upon HTA Core Model and SOP JA2 EUnetHTA
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	Institutional level	no
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features	The basics about search strategy (PICO, systematic, databases, etc.), critical assessment of evidence, transparent reporting of evidence, etc. are similar.	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Examples of key deficiencies	this is part of the critical assessment (related to e.g. randomization procedure, blinding, etc.)	Non-published information

Appendix tables

Table A6 Evidence search and handling

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Confidential data from manufacturers accepted	NO	Pharmaceuticals
If NO, why not?	KCE's reports are made public. Up to now, no data for HTA reports were ever provided by manufacturers that could not be made public.	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Relevant hyperlink(s) describing the institution's formal role in HTA	KCE is active in the field of ”Clinical Practice Guidelines", "Health Services Research" and "HTA" (and recently also in public funding of trials). Between 2006 and 2016, KCE published 278 reports, of which 91 HTA reports (available at our website: kce.fgov.be).	Legal basis: Law 14.07.1994 http://www.inami.fgov.be/nl/toepassingen/Paginas/docleg-webtoepassing.aspx#.WH98Z61TGUk
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		http://www.riziv.fgov.be/nl/publicaties/reglementering/Paginas/default.aspx#.WH936q1TGUk
Relevant hyperlink(s) to guidelines	http://kce.fgov.be/content/kce-processes https://kce.fgov.be/sites/default/files/page_documents/kce_process_notes_hta.pdf	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Belgium

Institution	**Belgian Health Care Knowledge Centre (KCE)**	**National Institute for Health and Disability Insurance (INAMI-RIZIV)**
Submissions / dossiers from companies or others	NO	Pharmaceuticals Medical technologies Other technologies
Written requirements on how submissions should be done		Pharmaceuticals
Relevant hyperlink(s)		https://www.riziv.fgov.be/webprd/appl/pssp/SSP/DEM2/Pages/MnuHelp.asp
Templates for entering structured HTA information		Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution		Pharmaceuticals
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		Guidelines are not constructed in function of EUnetHTA template, but evidently ask for a number of common information. Identification of the Health Service, clinical evidence, …….: these are similar
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies	NO
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	NO	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation H. Patients and Social aspects J. Conclusions K. Recommendations L. Other kind of information

Bulgaria

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Assessments include a plan for methodologies to be applied	NO
Plan for information retrieval	
Plan for finding information when there is no published data	
Predefined description of how the assessment of the available evidence will be done	
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	NO
Network meta-analysis may be used in estimations in indirect comparisons	
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	NO
Transferability issues considered	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Regulation No. 9 of 01.12. 2015 on the conditions and procedures for conducting health technology assessment says, that HTA shall be conducted by the National Centre for Public Health and Analysis (NCPHA) supported by a Committee for HTA. The HTA procedure is described in a series of legal documents - Regulation No. 9 of 01.12. 2015 on the conditions and procedures for conducting health technology assessment issued by Ministry of Health Number of reports per year about 40.
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals
The institution does re-assessments	Pharmaceuticals
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO
Content of foreign reports used	

Appendix tables

Table A1 Choice of assessment comparators

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Bulgaria

Institution	**National Center of Public Health and Analyses (NCPHA)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	no
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Bulgaria	
Institution	**National Center of Public Health and Analyses (NCPHA)**
Key deficiencies in available data considered	NO
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Bulgaria	
Institution	**National Center of Public Health and Analyses (NCPHA)**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide

Bulgaria	
Institution	**National Center of Public Health and Analyses (NCPHA)**
Relevant hyperlink(s) describing the institution's formal role in HTA	The HTA procedure is described in a series of legal documents - Regulation No. 9 of 01.12. 2015 on the conditions and procedures for conducting health technology assessment issued by Ministry of Health - http://www.mh.government.bg/media/filer_public/2015/12/11/naredba9-1-12-2015.pdf Number of reports per year - ~40
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	http://www.mh.government.bg/media/filer_public/2015/12/11/naredba9-1-12-2015.pdf
Relevant hyperlink(s) to guidelines	http://www.mh.government.bg/media/filer_public/2015/12/11/naredba9-1-12-2015.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Bulgaria	
Institution	**National Center of Public Health and Analyses (NCPHA)**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	http://www.mh.government.bg/media/filer_public/2015/12/11/naredba9-1-12-2015.pdf
Templates for entering structured HTA information	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	NO
Nature of content of foreign reports used	

Croatia

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Medical devices Surgical and Medical Procedures Other Therapeutic Technologies
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Always
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Always

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies
The GRADE approach in routine use	Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	NO
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	HTA is not yet sustainable and mandatory linked to reimbursement/investment or disinvestment decision process in Croatia. In brief, main Croatian decision-makers (Ministry of Health, Croatian Health Insurance Fund-CHIF and hospital managements) could ask our Agency for HTA, on whole range of health technology from different life cycles, in form of single technology assessment (STA) or multiple technology assessment (MTA). Still there is no formal topic selection and prioritization process, but Ministry of Health could ask for priority assessment. Agency produces requested HTAs with recommendations, according the Croatian HTA Guideline. National HTA reports are still in Croatian language only; joint international reports (in form of Rapid Relative Effectiveness assessment on pharmaceuticals, medical devices and other technologies, as well as full (comprehensive) Core HTAs), produced in English language through EUnetHTA are further adapted to national level and translated to Croatian language. The same is the case for HTA reports produced by other HTA institutions; if topic and scope are relevant these reports are further updated and adapted to Croatian level. Up to 5 national HTA reports and up to 3 international (joint or collaborative HTA reports). National HTA reports are still in Croatian language only and fully visible on Agency web page.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	NO
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
The institution receives submissions / dossiers from companies or others	NO
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects

Appendix tables

Table A1 Choice of assessment comparators

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at national level
Background of this formal requirement	internal guideline or procedure description legislation

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	In AAZ we are doing assessment according the flexible format of the Core Model, but in Croatian language, using the EUnetHTA tools and methodological guidelines; Manufacturer submission file for CHIF Appraisal process are strictly defined in law - Ordinance regarding reimbursement on drugs
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description Legislation
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	AAZ is doing assessment according the flexible HTA Core Model, in Croatian language, with EUnetHTA tools and methodological guidelines.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	According Risk of bias, GRADE, studies in progress, unpublished data...

Appendix tables

Table A6 Evidence search and handling

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Confidential data from manufacturers accepted	NO
If NO, why not?	Our all reports are publicly available on the web site so we could not use confidential data bzt also do not want to use if analyses could not be published.

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Relevant hyperlink(s) describing the institution's formal role in HTA	Agency produces requested HTAs with recommendations, according the Croatian HTA Guideline, http://aaz.hr/hr/procjena-zdravstvenih-tehnologija, http://aaz.hr/sites/default/files/hrvatske_smjernice_za_procjenu_zdravstvenih_tehnologija.pdf. Reports are still in Croatian language only and fully visible on Agency web page (http://aaz.hr/hr/procjena-zdravstvenih-tehnologija/baza).
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Ordinance regarding reimbursement on drugs: CHIF Drugs Committee is responsible for Appraisal process of Industry submission file (with Marketing authorization approval, calculation of drug price, scientific opinion; scientific evidence proving the benefits of the drug; tabular view of drug health insurance status in EU; Mandatory Budget Impact Analysis, BIA (should becaccording ISPOR Guideline); Optional: the applicant may submit the Cost-effectiveness analysis. HTA could be requested for (if requested should be delivered in 1 month timeframe) (Official gazette No. 83/13 i 12/14). AAZ does not receive submission/dossiers from companies for assessment, only CHIF receives submission file according the written instruction in Ordinance (by-law), for Appraisal process. AAZ uses specific questions and required some data from Manufacturers for medical devices (like CE mark documentations, Instruction for use, date of marketing authorisation, studies in progress.....). http://www.hzzo.hr/wp-content/uploads/2014/01/Pravilnik.pdf?6d8ad4
Relevant hyperlink(s) to guidelines	The Croatian Guideline for Health Technology Assessment Process and Reporting (for all health technology, not separately for pharma, MD or procedures) http://aaz.hr/sites/default/files/hrvatske_smjernice_za_procjenu_zdravstvenih_tehnologija.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Croatia

Institution	**Agency for Quality and Accreditation in Health Care and Social Welfare (AAZ)**
Submissions / dossiers from companies or others	NO
Written requirements on how submissions should be done	NO
Relevant hyperlink(s)	
Templates for entering structured HTA information	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects

Cyprus

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Never
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Assessments include a plan for methodologies to be applied	NO
Plan for information retrieval	
Plan for finding information when there is no published data	
Predefined description of how the assessment of the available evidence will be done	
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	NO
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Don't know
Transferability issues considered	NO
Summary of findings section included in reports	NO

Issues in HTA research methodology

Table 6 Evidence search and handling

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data G. other sources (guidelines)
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Don't know

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	No formal HTA reports are produced at this stage but elements of HTA are used to inform the recommendations made by Drugs Committee. Drugs Committee makes recommendations to the Minister of Health regarding reimbursement of products (i.e. inclusion in the National Formulary) and their criteria of use.
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	NO

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Recommendations on adoption of the technology included in reports	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Don't know
The institution does re-assessments	NO
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
The institution receives submissions / dossiers from companies or others	NO
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO
Content of foreign reports used	

Appendix tables

Table A1 Choice of assessment comparators

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Don't know
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Don't know
Background of this formal requirement	
Assessments analyse social aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	no
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Key deficiencies in available data considered	Don't know
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Cyprus

Institution	**Pharmaceutical Services, Ministry of Health**
Submissions / dossiers from companies or others	NO
Written requirements on how submissions should be done	
Relevant hyperlink(s)	
Templates for entering structured HTA information	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	NO
Nature of content of foreign reports used	

Czech Republic

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Never
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Never
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Assessments include a plan for methodologies to be applied	NO
Plan for information retrieval	
Plan for finding information when there is no published data	
Predefined description of how the assessment of the available evidence will be done	
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	NO
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals
Transferability issues considered	Pharmaceuticals
Summary of findings section included in reports	NO

Issues in HTA research methodology

Table 6 Evidence search and handling

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals
Evidence where systematic search strategies are applied	Don't know

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	State Institutes for Drug Control (SUKL) performs critical appraisal of submitted evidence and makes decisions. The number of appraisal of new molecules (excl. me-too drugs) is about 50 per year, number of variations to condition of reimbursement is about 70 a year, the number of complex reassessments is about 55 per year.
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	NO

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO
The institution does re-assessments	Pharmaceuticals
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO
Content of foreign reports used	

Appendix tables

Table A1 Choice of assessment comparators

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse social aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The methodology requirements roughly correspond with REA, however, in the national appraisal report the data are summarized with providing references and the conclusion is made.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Key deficiencies in available data considered	Pharmaceuticals
Examples of key deficiencies	Insufficient safety/effectiveness/cost-effectiveness evidence, inconsistent data. In these cases, negative decision can be issued.

Appendix tables

Table A6 Evidence search and handling

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Confidential data from manufacturers accepted	Pharmaceuticals
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Section 15 paragraph 9 and Part 6 of the Act No. 48/1997 Coll., on Public Health Insurance, as amended, Implementing Decree No. 376/2011 Coll. and Act. No. 500/2004 Coll., Code of Administrative Procedure https://www.zakonyprolidi.cz/cs/1997-48 https://www.zakonyprolidi.cz/cs/2011-376 https://www.zakonyprolidi.cz/cs/2004-500
Relevant hyperlink(s) to guidelines	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Czech Republic

Institution	**State Institute for Drug Control (SUKL)**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	Section 15 paragraph 9 and Part 6 of the Act No. 48/1997 Coll., on Public Health Insurance, as amended. Implementing Decree No. 376/2011 Coll. Act. No. 500/2004 Coll., Code of Administrative Procedure https://www.zakonyprolidi.cz/cs/1997-48 https://www.zakonyprolidi.cz/cs/2011-376 https://www.zakonyprolidi.cz/cs/2004-500 http://www.sukl.cz/leciva/sp-cau-027 http://www.sukl.cz/leciva/sp-cau-028
Templates for entering structured HTA information	NO
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	NO
Nature of content of foreign reports used	

Denmark

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Never

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Denmark

Institution	**DEFACTUM**
Assessments include a plan for methodologies to be applied	Medical Technologies Other technologies
Plan for information retrieval	Medical Technologies Other technologies
Plan for finding information when there is no published data	NO
Predefined description of how the assessment of the available evidence will be done	Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Medical Technologies Other technologies
The GRADE approach in routine use	Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	NO
Surrogate endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	NO
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	NO
Network meta-analysis may be used in estimations in indirect comparisons	
Relevant patient or population sub-groups considered	Medical Technologies Other technologies
Key deficiencies in available data considered	NO
Transferability issues considered	Medical Technologies Other technologies
Summary of findings section included in reports	Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Denmark

Institution	**DEFACTUM**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Denmark

Institution	**DEFACTUM**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Number of report/year: 1-2 The Health directors from the 5 Danish regions decide whether or not a HTA is to be carried out. They pre-define the role of the HTA and will subsequently decide on the basis of the report and other information which actions to take.
Health technologies assessed	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Denmark

Institution	**DEFACTUM**
Recommendations on adoption of the technology included in reports	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Medical Technologies Other technologies
The institution does re-assessments	NO
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Denmark

Institution	**DEFACTUM**
The institution receives submissions / dossiers from companies or others	NO
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO
Content of foreign reports used	

Appendix tables

Table A1 Choice of assessment comparators

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	no
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Denmark

Institution	**DEFACTUM**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Denmark

Institution	**DEFACTUM**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	no
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The methodologies are quite identical, but we might in some areas deviate in methodology.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Denmark

Institution	**DEFACTUM**
Key deficiencies in available data considered	NO
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Denmark

Institution	**DEFACTUM**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Denmark

Institution	**DEFACTUM**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	Danish handbook from the Danish Health Authority from 2007, EUnetHTA guidelines, HTA core model. https://www.sst.dk/en/publications/2008/health-technology-assessment-handbook http://meka.thl.fi/htacore/ http://www.eunethta.eu/eunethta-guidelines

Appendix tables

Table A8 Contribution to HTA from outside the institution

Denmark

Institution	**DEFACTUM**
Submissions / dossiers from companies or others	NO
Written requirements on how submissions should be done	NO
Relevant hyperlink(s)	
Templates for entering structured HTA information	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	NO
Nature of content of foreign reports used	

Estonia

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on the assessors)
Assessments analyse social aspects	Never
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies,
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Estonia

Institution	**University of Tartu**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	NO
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Don't know
Composite endpoints may be used when estimating effectiveness or risk	Don't know
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	NO
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Estonia

Institution	**University of Tartu**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Estonia

Institution	**University of Tartu**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The Centre for Health Technology Assessment was established in 2012 as part of the Department of Public Health at the University of Tartu, we have been providing HTA reports to decision makers (Ministry of Social Affairs, Estonian Health Insurance Fund) since 2011.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures H. Population Level Health Interventions
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	9.1

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Estonia

Institution	**University of Tartu**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Estonia

Institution	**University of Tartu**
The institution receives submissions / dossiers from companies or others	NO
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	no
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Estonia

Institution	**University of Tartu**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Estonia

Institution	**University of Tartu**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies
Formal requirements to use data that meet the criteria	no
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	We have been contributing to HTA Core Model development through EUnetHTA JA2. Thus, our own methodology is positively influenced by methodological guidelines and joint work with the Core Model.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies,
Formal requirements to use data that meet the criteria	no
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Our methodological guidelines do not distinguish separate 'tracks' for pharmaceuticals and medical devices/screening technologies (as in Core Model). Instead, they provide general guidance on assessing the different aspects of the technology and how to approach these issues (e.g. literature review).

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Estonia

Institution	**University of Tartu**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	Lack of relevant comparators from RCT data, unreliable or lacking evidence of certain aspects of the assessed technology

Appendix tables

Table A6 Evidence search and handling

Estonia

Institution	**University of Tartu**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide

Estonia

Institution	**University of Tartu**
Relevant hyperlink(s) describing the institution's formal role in HTA	More background information on HTA in Estonia: http://tervis.ut.ee/en/health-technology-assessment/health-technology-assessment-estonia
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Estonia

Institution	**University of Tartu**
Submissions / dossiers from companies or others	NO
Written requirements on how submissions should be done	NO
Relevant hyperlink(s)	
Templates for entering structured HTA information	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness L. Other kind of information

Finland

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Assessments include a plan for methodologies to be applied	NO
Plan for information retrieval	
Plan for finding information when there is no published data	
Predefined description of how the assessment of the available evidence will be done	
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals
Transferability issues considered	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals
Evidence where systematic search strategies are applied	Efficacy/effectiveness

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Fimea provides assessments on hospital-only pharmaceuticals (approx. 10 reports/year). The Council for Choices in Health Care in Finland makes a national recommendation on uptake of the assessed product (i.e. inclusion in the range of public health services).
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Recommendations on adoption of the technology included in reports	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals
The institution does re-assessments	NO
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO
Content of foreign reports used	

Appendix tables

Table A1 Choice of assessment comparators

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	No
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The domains and issues are derived from the EUnetHTA Core Model. The CUR and TEC domains are less formally assessed and detailed, and are provided more as an overview.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Key deficiencies in available data considered	Pharmaceuticals
Examples of key deficiencies	- only surrogate endpoints available and validity of the surrogate is not demonstrated - results based on a single clinical trial - limited duration of the study (with regard to duration of treatment in clinical use) - limitations in applicability - only indirect comparison to a relevant comparator is possible - heterogeneity of treatment effect

Appendix tables

Table A6 Evidence search and handling

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Confidential data from manufacturers accepted	Pharmaceuticals
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://palveluvalikoima.fi/en/frontpage http://www.fimea.fi/documents/542809/2233402/AssessmentOfHospitalOnlyMedicinalProducts161024/6d15214e-e134-4aec-8448-26369bd013e9
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	http://www.fimea.fi/documents/542809/2233402/AssessmentOfHospitalOnlyMedicinalProducts161024/6d15214e-e134-4aec-8448-26369bd013e9 http://www.fimea.fi/documents/160140/1153780/21537_Fimea_KAI_JULKAISUSARJA_2_2012_netti.pdf/a7b84a6d-2719-427b-9af6-a2ea465a926e

Appendix tables

Table A8 Contribution to HTA from outside the institution

Finland

Institution	**Finnish Medicines Agency (FIMEA)**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	NO
Relevant hyperlink(s)	
Templates for entering structured HTA information	NO
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	NO
Nature of content of foreign reports used	

France

Issues in HTA research methodology

Table 1 Choice of assessment comparators

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Other criteria
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

France

Institution	**Haute Autorité de Santé (HAS)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies
Plan for information retrieval	NO
Plan for finding information when there is no published data	NO
Predefined description of how the assessment of the available evidence will be done	NO
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies
Key deficiencies in available data considered	Don't know
Transferability issues considered	Pharmaceuticals Medical Technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

France

Institution	**Haute Autorité de Santé (HAS)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (reimbursement data)
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

France

Institution	**Haute Autorité de Santé (HAS)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	All drugs for which the MAH claims reimbursement have to be assessed by HAS. All MDs marketed Under brand name too. For activity, see annual report on HAS website.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies I. Service Delivery Systems J. Other: Nutrition for specific diseases, suppliance technologies
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

France

Institution	**Haute Autorité de Santé (HAS)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker When receiving a new submission for a manufacturer For other reason(s)

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

France

Institution	**Haute Autorité de Santé (HAS)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at national level
Background of this formal requirement	Don't know

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Don't know
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Don't know
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

France

Institution	**Haute Autorité de Santé (HAS)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

France

Institution	**Haute Autorité de Santé (HAS)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The method used in the international assessments turns around PICO and the one in France is based on the presentation of a paper which aims to show first the evidence and then the quantity of effect for effectiveness and safety.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Don't know
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The method used in the international assessments turns around PICO and the one in France is based on the presentation of a paper which aims to show first the evidence and then the quantity of effect for effectiveness and safety.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

France

Institution	**Haute Autorité de Santé (HAS)**
Key deficiencies in available data considered	Don't know
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

France

Institution	**Haute Autorité de Santé (HAS)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
France

Institution	**Haute Autorité de Santé (HAS)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://www.has-sante.fr/portail/jcms/r_1455081/Home-page
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Code de la securite sociale (R163-1 to 21 for medicines and R165-1 and followings for MDs)
Relevant hyperlink(s) to guidelines	http://www.has-sante.fr/portail/jcms/r_1455081/Home-page

Appendix tables

Table A8 Contribution to HTA from outside the institution

France

Institution	**Haute Autorité de Santé (HAS)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies
Written requirements on how submissions should be done	Pharmaceuticals Medical technologies Other technologies
Relevant hyperlink(s)	see HAS website
Templates for entering structured HTA information	Pharmaceuticals Medical technologies Other technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals Medical technologies
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	Both templates are deeply different. France does not include PICO structure and our reports are closer to a scientific paper and include in addition mandatory chapters such as the estimation of the target population the impact on public health the recommendations for further data collection, ... This is linked to legal requirements.
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations

Germany

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Don't know	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Don't know	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Sometimes (depending on the assessors)	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on the assessors)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	No	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Sometimes (depending on what is assessed)	Always
Assessments include other (non-clinical) domains	No	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Always
Assessments analyse patient aspects		Always
Assessments analyse social aspects		Never
Assessments include a separate ethical analysis		Never
Assessments analyse legal aspects		Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Never
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		Never
Assessments analyse patient aspects		Sometimes (depending on what is assessed)
Assessments analyse social aspects		Never
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Assessments analyse legal aspects		Never

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
The GRADE approach in routine use	No	No
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	NO	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals	NO
Summary of findings section included in reports	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data F. manufacturer data G. other sources (Clinical trials registers, Regulatory documents, Queries to authors)
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies	NO
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Current technology use	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The G-BA is the highest decision-making body of the joint self-government of physicians, dentists, hospitals and health insurance funds in Germany. In Germany, there is a 2-step approach to HTA decisions for pharmaceuticals. For non-orphan drugs, IQWiG conducts an HTA assessment. G-BA then conducts the appraisal process (including public written and oral hearings, involvement of payers, providers and patients) resulting in publishing resolutions (conclusions in the resolutions sometimes deviate from the recommendation in the IQWiG assessment report). That means, the G-BA itself is the decision-making body itself. For orphan drugs, the HTA assessment report are done in-house (at G-BA). Thus, strictly speaking, only for orphan drugs is the G-BA INFORMING the decision maker (i.e., itself). Every drug entering the market has to go through the HTA process.	The statutory commission to assess the advantages and disadvantages of medical procedures is one of IQWiG's responsibilities. IQWiG may only accept commissions from the Federal Joint Committee (G-BA) or the Federal Ministry of Health (BMG). The G-BA is the supreme decision-making body of the self-government in health care and decides, for example, which medical services are to be reimbursed by the statutory health insurance funds. Legal regulations on these points in SGB V: • §139a ("Institute for Quality and Efficiency in Health Care") describes the Institute's establishment, legal form, committees, responsibilities etc. • §139b ("Conduct of tasks") stipulates the commissioning of the Institute, the involvement of external experts in its working processes, and the importance of its recommendations. It also transfers the public proposal procedure for HTA reports (in German: "Themencheck Medizin", means "Topic check medicine") to IQWiG. • The Act to Promote Competition in Statutory Health Insurance (GKVWSG) offers the opportunity for the G-BA to commission IQWiG with health economic evaluations. It also provides for the involvement of interest groups in "all important phases of the assessment procedure". • The Act on the Reform of the Market for Medicinal Products (AMNOG) and the Regulation on the Benefit Assessment of Drugs (AM-NutzenV) form the legal basis for the procedure of the early benefit assessment of new drugs. The legal regulation of the BMG supplements §35a SGB V. • The Structure of Health Care Act of the Statutory Health Insurance (GKV-VStG) provides the legal basis for the G-BA to be able to initiate high-quality clinical studies if medical devices or diagnostic procedures show the potential of a treatment alternative. More info see: https://www.iqwig.de/en/home.2724.html Number of reports per year (2015; see IQWiG's annual report): - HTA reports: 12 + 1 addendum - Dossier assessments: 42 + 20 addenda - Dossier assessments orphan drug: 15 - Rapid reports. 2
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Recommendations on adoption of the technology included in reports	NO	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment		YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	When significant new evidence or circumstances emerge For other reason(s)	At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies
HTA work externally contracted / commissioned	Pharmaceuticals	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO	NO
Content of foreign reports used		

Appendix tables

Table A1 Choice of assessment comparators

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At national level	At national level
Background of this formal requirement	Legislation	Legislation
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria		at national level
Background of this formal requirement		legislation

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Sometimes (depending on the assessors)	Always
Formal requirement to address some of the topics that are reflected in this domain		National
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Sometimes (depending on the assessors)	Always
Formal requirement to address some of the topics that are reflected in this domain		National
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Legislation	Internal guideline or procedure description Legislation
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Legislation	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	No	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Legislation	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Legislation	Internal guideline or procedure description
Assessments analyse safety	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Legislation	Internal guideline or procedure description
Assessments include other (non-clinical) domains	No	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Legislation
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse patient aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse social aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse patient aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Assessments analyse social aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Assessments analyse legal aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	Pharmaceuticals	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO	
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level	National level
Background of this formal requirement	Legislation	Internal guideline or procedure description Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		Part of the methods recommended by EUnetHTA guidelines are also laid down in IQWiG's methods paper. However, often IQWiG's methods paper is more specific. Furthermore, IQWiG's methods paper is reflecting the German legal requirements which also result in certain methodological approaches (e.g. concerning the description of the extent of added benefit in early drug assessment).
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	Don't know	National level Regional level
Background of this formal requirement		Internal guideline or procedure description Legislation
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		Part of the methods recommended by EUnetHTA guidelines are also laid down in IQWiG's methods paper. However, often IQWiG's methods paper is more specific. Furthermore, IQWiG's methods paper is reflecting the German legal requirements which also result in certain methodological approaches (e.g. concerning the description of the extent of added benefit in early drug assessment).

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies		Key deficiencies are risk of bias, missing data and inadequate statistical analyses Please note also to question 9.2: surrogates are used only if validated (please refer to our methods paper: https://www.iqwig.de/en/methods/methods-paper.3020.html)

Appendix tables

Table A6 Evidence search and handling

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies	NO
If NO, why not?		All data used for a report will and must be published in full without exception (see legal requirements above). Any confidential data which are not allowed to publish together with the final report are not used. So, if in 6.1.2. is meant strict confidentiality the answer is "no". If the data can be published together with the final report the answer would be: Pharmaceuticals Medical Technologies Other Technologies All Technologies

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Relevant hyperlink(s) describing the institution's formal role in HTA		http://www.gesetze-im-internet.de/sgb_5/_139a.html http://www.gesetze-im-internet.de/sgb_5/_139b.html https://www.jurion.de/gesetze/gkv_wsg https://www.jurion.de/gesetze/amnog) http://www.gesetze-im-internet.de/amnutzenv/ More info see: https://www.iqwig.de/en/home.2724.html See IQWiG's annual report: https://www.iqwig.de/en/projects-results/publications/iqwig-annual-reports.3027.html
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	SGB 5, § 35a (social code book) AM Nutzen V (regulation) https://www.gesetze-im-internet.de/sgb_5/__35a.html http://www.gesetze-im-internet.de/am-nutzenv/	• See description in table 7 • §139a ("Institute for Quality and Efficiency in Health Care") describes the Institute's establishment, legal form, committees, responsibilities etc. • §139b ("Conduct of tasks") stipulates the commissioning of the Institute, the involvement of external experts in its working processes, and the importance of its recommendations. It also transfers the public proposal procedure for HTA reports (in German: "Themencheck Medizin", means "Topic check medicine") to IQWiG. • §35a ("Assessment of the benefit of drugs containing new active ingredients") contains the legal requirements for the early benefit assessment of drugs. • §35b ("Evaluation of the benefits and costs of drugs") provides the legal basis for the health economic evaluation of drugs. http://www.gesetze-im-internet.de/sgb_5/_35a.html http://www.gesetzeim-internet.de/sgb_5/__35b.html
Relevant hyperlink(s) to guidelines	https://www.g-ba.de/downloads/62-492-1282/VerfO_2016-07-21_iK-2016-10-29.pdf	https://www.iqwig.de/en/methods/methods-paper.3020.html

Appendix tables

Table A8 Contribution to HTA from outside the institution

Germany

Institution	**Gemeinsamer Bundesausschuss (G-BA)**	**Institute for Quality and Efficiency in Health Care (IQWiG)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies
Written requirements on how submissions should be done	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies
Relevant hyperlink(s)	https://www.g-ba.de/downloads/62-492-1282/VerfO_2016-07-21_iK-2016-10-29.pdf	https://www.iqwig.de/en/methods/methods-paper.3020.html
Templates for entering structured HTA information	Pharmaceuticals	Pharmaceuticals Medical technologies Other technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO	Pharmaceuticals
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		
HTA work externally contracted / commissioned	Pharmaceuticals	NO
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	Pharmaceuticals	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO	
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	NO	NO
Nature of content of foreign reports used		

Hungary

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies
The GRADE approach in routine use	Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	All technologies
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The HTA Office is now part of the National Institute of Pharmacy and Nutrition (NIPN), and is called the Department of Health Technology Assessment. The HTA Office supports health care decision making activities of Directorate of Health (that belongs to Ministry of Human Capacities) and National Health Insurance Fund. When manufacturers apply for reimbursement they submit a request to the National Health Insurance Fund (NHIF). Then the NHIF sends the submission to the HTA Office and asks for a critical appraisal. The HTA Department's experts participate in the sessions of the Technology Evaluation Committee (NHIF sets up this Committee for normal procedures), and in the sessions of the National Council for Medicine Therapies, where they present their critical assessments of the submissions. Number of critical assessments: - pharmaceuticals: approximately 90-100 / year - medical aids: 100-110 / year - healthcare technologies: 4-5 / year
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Recommendations on adoption of the technology included in reports	Medical Technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO
The institution does re-assessments	NO
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals
Content of foreign reports used	D. Clinical Effectiveness E. Costs and economic evaluation J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at national level
Background of this formal requirement	internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	D) No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Topics are the same, issues are less detailed
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Topics are the same, issues are less detailed

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	validity, generalisability

Appendix tables

Table A6 Evidence search and handling

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Confidential data from manufacturers accepted	All technologies
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Relevant hyperlink(s) describing the institution's formal role in HTA	https://www.ogyei.gov.hu/health_technology_assessment/ lll
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Act XCVIII of 2006 on the General Provisions Relating to the Reliable and Economically Feasible Supply of Medicinal Products and Medical Aids and on the Distribution of Medicinal Products; Other relevant legislations are available only in Hungarian: - Decree 32/2004 (26 April) of the Ministry of Health, Social and Family Affairs (formal and content requirements for the submissions of pharmaceuticals) - Decree 14/2007 (14 March) of the Ministry of Health sets out the formal and content requirements for the submissions of medical aids - The rules governing the submissions of healthcare technologies are set out in Government Decree 180/2010 (13May) as well as Decree 28/2010 (12 May) of the Ministry of Health. https://www.ogyei.gov.hu/laws_and_regulations/
Relevant hyperlink(s) to guidelines	the new version of the Technical Guideline for the Making of Health-Economic Analyses by the Ministry of Human Resources is going to be published in English in 2017

Appendix tables

Table A8 Contribution to HTA from outside the institution

Hungary

Institution	**National Institute of Pharmacy and Nutrition (OGYÉI)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies
Written requirements on how submissions should be done	Pharmaceuticals Medical technologies
Relevant hyperlink(s)	the relevant legislations are available only in Hungarian: - The Decree 32/2004 (26 April) of the Ministry of Health, Social and Family Affairs (formal and content requirements for the submissions of pharmaceuticals) - Decree 14/2007 (14 March) of the Ministry of Health sets out the formal and content requirements for the submissions of medical aids - The rules governing the submissions of healthcare technologies are set out in Government Decree 180/2010 (13May) as well as Decree 28/2010 (12 May) of the Ministry of Health.
Templates for entering structured HTA information	Pharmaceuticals Medical technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals
Nature of content of foreign reports used	D. Clinical Effectiveness E. Costs and economic evaluation J. Conclusions K. Recommendations

Ireland

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies	
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	
Assessments include a description of technical characteristics of the technology	Always	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Assessments analyse safety	Always	
Assessments include other (non-clinical) domains	Yes	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Never
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	Somewhat overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	NO
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies	
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies	
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies	
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies	
The GRADE approach in routine use	Yes	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies	
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies Other technologies	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	NO
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	NO

Issues in HTA research methodology

Table 6 Evidence search and handling

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	All technologies	Pharmaceuticals
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)	Efficacy/effectiveness Safety Current technology use Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Our function is to provide HTA advice to inform national policy decisions by the Minister/Department of Health and national service decisions by the Health Service Executive (public healthcare provider). The number of HTA reports varies according to size and scope e.g. 2015 three full HTAs and two rapid HTAs	NCPE provide reports on the clinical and comparative effectiveness and cost effectiveness of new pharmaceuticals seeking reimbursement in Ireland.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other: Chronic disease self management	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Situations where re-assessments are done	At the request of a decision-maker	According to formal requirement to do re-assessments at intervals At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies	Pharmaceuticals
HTA work externally contracted / commissioned	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals
Content of foreign reports used	C. Safety D. Clinical Effectiveness E. Costs and economic evaluation	L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At national level	At national level
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	at national level	
Background of this formal requirement	internal guideline or procedure description	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Legislation Formal agreement with a decision-maker	Legislation
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments include a description of technical characteristics of the technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description Legislation Formal agreement with a decision-maker	
Assessments analyse safety	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments include other (non-clinical) domains	Yes	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation Formal agreement with a decision-maker	Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level	No
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Legislation Formal agreement with a decision-maker	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level	no
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	There is no requirement in REA not covered in our internal process requirement.	We will also include information on the disease and its management and will also include information on the model structure that is used for modelling the disease.
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	
Formal requirements to use data that meet the criteria	National level	
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	
Explanation of how methodology requirements compare to HTA Core Model REA features	There is no requirement in REA not covered in our internal process requirement.	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Examples of key deficiencies	Studies included in a meta-analysis should be graded for quality of evidence. The quality of evidence should be clearly stated. Heterogeneity of treatment effect between studies must be assessed. Where significant heterogeneity is observed, attempts should be made to identify its causes. Substantial heterogeneity must be dealt with appropriately and may preclude a meta-analysis. Attempts should be made to identify possible sources of bias such as publication bias, sponsorship bias and bias arising from the inclusion of poor quality studies. Potential sources of bias must be reported along with steps taken to minimise the impact of bias.	Single arm trials vs RCTs

Appendix tables

Table A6 Evidence search and handling

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Confidential data from manufacturers accepted	All technologies	Pharmaceuticals
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Relevant hyperlink(s) describing the institution's formal role in HTA		
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Health Act 2007 confers statutory function to provide advice to the Minister for Health and the (Health Service) Executive on the clinical and cost-effectiveness of health technologies including drugs http://www.irishstatutebook.ie/eli/2007/act/23/enacted/en/pdf	http://www.irishstatutebook.ie/eli/2013/act/14/enacted/en/pdf
Relevant hyperlink(s) to guidelines	https://www.hiqa.ie/healthcare/health-technology-assessment/guidelines	https://www.hiqa.ie/healthcare/health-technology-assessment/guidelines

Appendix tables

Table A8 Contribution to HTA from outside the institution

Ireland

Institution	**Health Information and Quality Authority (HIQA)**	**National Centre for Pharmacoeconomics (NCPE)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals Medical technologies	Pharmaceuticals
Relevant hyperlink(s)	EUnetHTA submission template	http://www.ncpe.ie/submission-process/submission-templates/format-of-full-submissions/
Templates for entering structured HTA information	Pharmaceuticals Medical technologies	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals Medical technologies	Pharmaceuticals
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	We use the EUnetHTA template but provide advice as to the specific areas we are most interested in.	Our template contains the following domains: Disease and its management Intervention under assessment Clinical Evidence The decision problem and model structure Economic model inputs Results of incremental cost effectiveness analysis Budget Impact Analysis HTAs in other jurisdictions
HTA work externally contracted / commissioned	NO	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals
Nature of content of foreign reports used	C. Safety D. Clinical Effectiveness E. Costs and economic evaluation	L. Other kind of information

Italy

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	
Criteria for choice of comparator(s) in assessments		
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators		Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Other technologies
Criteria for choice of comparator(s) in assessments		The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Assessments analyse safety	Always	
Assessments include other (non-clinical) domains	Yes	
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Always	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Assessments analyse social aspects	Never	
Assessments include a separate ethical analysis	Never	
Assessments analyse legal aspects	Never	
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Always
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Other kinds of observational studies	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment		Randomised controlled studies Non-randomized prospective studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals	Medical Technologies
Plan for information retrieval	NO	Medical Technologies
Plan for finding information when there is no published data	NO	NO
Predefined description of how the assessment of the available evidence will be done	NO	NO
Formal tools or algorithms for evidence grading applied		
The GRADE approach in routine use		
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO	NO
Standard forms or tables available for evidence analysis and synthesis		
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals	Medical Technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals	NO
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals	Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals	Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals	NO
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals	
Relevant patient or population sub-groups considered	Pharmaceuticals	Medical Technologies
Key deficiencies in available data considered	Pharmaceuticals	Medical Technologies
Transferability issues considered	NO	Medical Technologies
Summary of findings section included in reports	Pharmaceuticals	Medical Technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals	NO
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Health problem Current technology use	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Rapid HTA report are required for each drug	
Health technologies assessed	A. Pharmaceuticals	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies F. IT Systems, e-Health and m-health Technologies
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO	Medical technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals	Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals	Medical Technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	NO
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals	Medical Technologies
The institution does re-assessments	Pharmaceuticals	NO
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge At the request of a decision-maker When receiving a new submission for a manufacturer For other reason(s)	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals	Medical Technologies
HTA work externally contracted / commissioned	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals	Medical technologies
Content of foreign reports used	E. Costs and economic evaluation J. Conclusions K. Recommendations	C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Appendix tables

Table A1 Choice of assessment comparators

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	National	
Background of this formal requirement	Internal guideline or procedure description	
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria		at national level
Background of this formal requirement		formal agreement with a decision-maker

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse safety	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments include other (non-clinical) domains	Yes	
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National
Background of this formal requirement		Formal agreement with a decision-maker
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	National
Background of this formal requirement		Formal agreement with a decision-maker
Assessments include other (non-clinical) domains	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse social aspects	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National	At national level
Background of this formal requirement	Legislation	Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Never
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At national level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Other kinds of observational studies	
Formal requirements to use data that meet the criteria	National level	
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	
Explanation of how methodology requirements compare to HTA Core Model REA features	the process is similar but without assessment elements: the process is more rapid in the evaluation	
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment		Randomised controlled studies Non-randomized prospective studies
Formal requirements to use data that meet the criteria		National level
Background of this formal requirement		formal agreement with a decision-maker
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		We use Core Model application, choosing Assessment Elements (AEs) of interest during the scoping phase. To facilitate the use of the Model we adopt for some AEs a description adapted to our common practice.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Key deficiencies in available data considered	Pharmaceuticals	Medical Technologies
Examples of key deficiencies	long term effects size effects TToT curves budget impact QoL	Deficiency of data can be found in the national information System

Appendix tables

Table A6 Evidence search and handling

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Confidential data from manufacturers accepted	Pharmaceuticals	NO
If NO, why not?		Because we make public all the evidences we analyse.

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Relevant hyperlink(s) describing the institution's formal role in HTA		
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		http://www.salute.gov.it/portale/temi/p2_4.jsp?lingua=italiano&tema=Dispositivi medici e altri prodotti&area=dispositivi-medici http://www.salute.gov.it/portale/news/p3_2_1_1_1.jsp?lingua=italiano&menu=notizie&p=dalministero&id=1885
Relevant hyperlink(s) to guidelines		http://www.agenas.it/aree-tematiche/hta-health-technology-assessment/attivita-hta/report-hta

Appendix tables

Table A8 Contribution to HTA from outside the institution

Italy

Institution	**Italian Medicines Agency (AIFA)**	**National Agency for Regional Health Services (AGENAS)**
Submissions / dossiers from companies or others	Pharmaceuticals	Medical Technologies
Written requirements on how submissions should be done	Pharmaceuticals	Medical technologies
Relevant hyperlink(s)	no hyperlink available	http://www.agenas.it/aree-tematiche/hta-health-technology-assessment/attivita-hta/report-hta
Templates for entering structured HTA information	Pharmaceuticals	Medical technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals	Medical technologies
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	No major, except for economic requirement	We use an on-line notification system available at http://bvts.agenas.it/ based on a template we had developed and shared with Stakeholders groups. At the moment, we are modifying the template according to the EUnetHTA template for medical devices. In our regulatory system, the submission is not mandatory for medical device industries or providers so it will take some time to implement the new template.
HTA work externally contracted / commissioned	NO	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals	Medical technologies
Nature of content of foreign reports used	E. Costs and economic evaluation J. Conclusions K. Recommendations	C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Never	Always
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Quality Adjusted Life Years (QALYs) applied	Never	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always	Always
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Assessments include a plan for methodologies to be applied	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	NO	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Medical Technologies Other technologies	NO
Formal tools or algorithms for evidence grading applied	Medical Technologies Other technologies	
The GRADE approach in routine use	Yes	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals	Don't know
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted		Medical Technologies
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Non-pharmaceutical health Technologies: HTA reports are requested by decision makers and provide advisory information to decision makers within the regional health system (including regional health directorate and managers of local health trusts and hospitals). HTA reports can be requested for innovative Technologies and for Technologies already in use, Pharmaceuticals: not HTA reports, but structured information based on scientific evidence with recommendations for clinical practice. These scientific reports are used by the Regional Therapeutic Formulary Committee that can endorse the recommendations when deciding on provision of pharmaceuticals by regional hospitals and healthcare facilities. Recommendations endorsed by the Regional Therapeutic Formulary can be used during procurement negotiations.	We assess request to introduce new health technologies (or existing ones with new clinical indications) in the Hospital Formulary. In 2016 till September, we assessed 25 pharmaceuticals. For medical device (MD) we assess application by clinician that require medical device not included into MD hospital list. from January to September we evaluated 31 applications of MD.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	NO	Pharmaceuticals Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker	At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
The institution receives submissions / dossiers from companies or others	NO	Pharmaceuticals Other technologies
HTA work externally contracted / commissioned	NO	Pharmaceuticals Medical technologies Other technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendation	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	No	At national level
Background of this formal requirement		Formal agreement with a decision-maker
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	no	at institutional level
Background of this formal requirement		internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	Local
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional Local
Background of this formal requirement		Legislation Formal agreement with a decision-maker
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional Local
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	Local
Background of this formal requirement		Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	Local
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	Local
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	Local
Background of this formal requirement		Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Never	Always
Formal requirement to address some of the topics that are reflected in this domain		National level Regional level Institutional level
Background of this formal requirement		Legislation Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At institutional level
Background of this formal requirement		Formal agreement with a decision-maker

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied	Never	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Internal guideline or procedure description
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At institutional level
Background of this formal requirement		Internal guideline or procedure description
Defined requirements from commissioned work		NO
Templates for entering structured HTA information		NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies
Formal requirements to use data that meet the criteria	no	Institutional level
Background of this formal requirement		Formal agreement with a decision-maker
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Systematic search of literature, use of databases, PRISMA Tables of Evidence, GRADE	We conduct very rapid REA (within a month) for internal decision makers. For that reason, our model is a simplified version of the HTA Core Model, which it's adapted to the main characteristic of each assessed pharmaceutical.
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	no	at institutional level
Background of this formal requirement		Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Assessment questions of HTA Core Model; systematic search, PRISMA, Tables of Evidence, GRADE	Some adaptations to local level are required

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	Outcomes included in project plan for which no evidence has been retrieved/is available Availability of only indirect evidence Indirectness of population of included studies Internal validity issues	More common deficiencies are in the choice of comparators, type of studies (non-inferiority vs. superiority), small or not representative sample size, and in the access to detailed data

Appendix tables

Table A6 Evidence search and handling

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Confidential data from manufacturers accepted		Medical Technologies
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Relevant hyperlink(s) describing the institution's formal role in HTA		
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		
Relevant hyperlink(s) to guidelines		We refer to national (AIES guidelines for economic evaluation) and international guidelines (as EUnetHTA ones and ISPOR guidelines and recommendations for economic assessments and budget impact analyses)

Appendix tables

Table A8 Contribution to HTA from outside the institution

Italy

Institution	**Regione Emilia-Romagna**	**Università Cattolica del Sacro Cuore (UCSC)**
Submissions / dossiers from companies or others	NO	Pharmaceuticals Other technologies
Written requirements on how submissions should be done	NO	Pharmaceuticals Medical technologies Other technologies
Relevant hyperlink(s)		Internal procedure
Templates for entering structured HTA information		Pharmaceuticals Medical technologies Other technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution		Pharmaceuticals Medical technologies Other technologies
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		The template adopted by A. Gemelli Teaching Hospital is simplified and its users are mainly clinicians with no experience on EUnetHTA.
HTA work externally contracted / commissioned	NO	Pharmaceuticals Medical technologies Other technologies
Defined requirements from commissioned work		NO
Templates for entering structured HTA information		NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendation	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations

Latvia

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Surgical and Medical Procedures Providing advice
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Medical devices Surgical and Medical Procedures Other Therapeutic Technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Assessments analyse patient aspects	Never
Assessments analyse social aspects	Never
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Never
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Never

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Latvia

Institution	**The National Health Service (NVD)**
Assessments include a plan for methodologies to be applied	NO
Plan for information retrieval	
Plan for finding information when there is no published data	
Predefined description of how the assessment of the available evidence will be done	
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	NO
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	NO
Transferability issues considered	NO
Summary of findings section included in reports	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Latvia

Institution	**The National Health Service (NVD)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Latvia

Institution	**The National Health Service (NVD)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	HTA is a part of administrative act and available on National Health Service of Latvia Legislation: Cabinet Regulation No. 899, Adopted 31 October 2006 "Procedures for the Reimbursement of Expenditures for the Acquisition of Medicinal Products and Medicinal Devices Intended for Out-patient Medical Treatment" Cabinet Regulation No.1529, adopted 17 December2013 Cabinet Regulation No.468, adopted 28 June 2005 Baltic Guideline for Economic Evaluation of Pharmaceuticals (Pharmacoeconomic Analysis)
Health technologies assessed	A. Pharmaceuticals G. Other Therapeutic Technologies
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Latvia

Institution	**The National Health Service (NVD)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Don't know
The institution does re-assessments	Pharmaceuticals
Situations where re-assessments are done	When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker When receiving a new submission for a manufacturer For other reason(s)

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Latvia

Institution	**The National Health Service (NVD)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Other technologies
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Other technologies
Content of foreign reports used	D. Clinical Effectiveness J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	no
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	Regional
Background of this formal requirement	Legislation
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed
Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Latvia

Institution	**The National Health Service (NVD)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse social aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Latvia

Institution	**The National Health Service (NVD)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Legislation
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Latvia

Institution	**The National Health Service (NVD)**
Key deficiencies in available data considered	NO
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Latvia

Institution	**The National Health Service (NVD)**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Latvia

Institution	**The National Health Service (NVD)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://ligumi.vmnvd.gov.lv/nas/library.nsf Links related to legislation: http://likumi.lv/ta/id/147522-ambulatorajai-arstesanai-paredzeto-zalu-un-medicinisko-iericu-iegades-izdevumu-kompensacijas-kartiba http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba https://www.ispor.org/peguidelines/source/Baltic-PE-guideline.pdf
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Cabinet Regulation No. 899, Adopted 31 October 2006 "Procedures for the Reimbursement of Expenditures for the Acquisition of Medicinal Products and Medicinal Devices Intended for Out-patient Medical Treatment" Cabinet Regulation No.1529, adopted 17 December2013 Cabinet Regulation No.468, adopted 28 June 2005 http://likumi.lv/ta/id/147522-ambulatorajai-arstesanai-paredzeto-zalu-un-medicinisko-iericu-iegades-izdevumu-kompensacijas-kartiba http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba
Relevant hyperlink(s) to guidelines	Baltic Guideline for Economic Evaluation of Pharmaceuticals (Pharmacoeconomic Analysis) https://www.ispor.org/peguidelines/source/Baltic-PE-guideline.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Latvia

Institution	**The National Health Service (NVD)**
Submissions / dossiers from companies or others	Pharmaceuticals Other technologies
Written requirements on how submissions should be done	Pharmaceuticals Other technologies
Relevant hyperlink(s)	Cabinet Regulation No. 899, Adopted 31 October 2006 "Procedures for the Reimbursement of Expenditures for the Acquisition of Medicinal Products and Medicinal Devices Intended for Out-patient Medical Treatment" Cabinet Regulation No.1529, adopted 17 December2013 Cabinet Regulation No.468, adopted 28 June 2005 Baltic Guideline for Economic Evaluation of Pharmaceuticals (Pharmacoeconomic Analysis) http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba http://likumi.lv/ta/id/147522-ambulatorajai-arstesanai-paredzeto-zalu-un-medicinisko-iericu-iegades-izdevumu-kompensacijas-kartiba http://likumi.lv/ta/id/263457-veselibas-aprupes-organizesanas-un-finansesanas-kartiba https://www.ispor.org/peguidelines/source/Baltic-PE-guideline.pdf
Templates for entering structured HTA information	NO
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Other technologies
Nature of content of foreign reports used	D. Clinical Effectiveness J. Conclusions K. Recommendations

Lithuania

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Technologies considered potentially relevant comparators		
Criteria for choice of comparator(s) in assessments		
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Medical devices Surgical and Medical Procedures Other Therapeutic Technologies	Providing advice
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,	Don't know

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology		
Assessments include a description of technical characteristics of the technology		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		
Assessments analyse safety		
Assessments include other (non-clinical) domains		
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	No	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Assessments include other (non-clinical) domains		
Assessments analyse cost, budget impact or include economic evaluation		
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		
Assessments analyse patient aspects		
Assessments analyse social aspects		
Assessments include a separate ethical analysis		
Assessments analyse legal aspects		
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied		Never
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Assessments analyse patient aspects		Never
Assessments analyse social aspects		Never
Assessments include a separate ethical analysis		Never
Assessments analyse legal aspects		Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment		
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Don't know
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	Don't know

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Assessments include a plan for methodologies to be applied	NO	Other technologies
Plan for information retrieval		Other technologies
Plan for finding information when there is no published data		NO
Predefined description of how the assessment of the available evidence will be done		Other technologies
Formal tools or algorithms for evidence grading applied		Other technologies
The GRADE approach in routine use		No
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)		Other technologies
Standard forms or tables available for evidence analysis and synthesis		Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Don't know
Composite endpoints may be used when estimating effectiveness or risk	NO	Don't know
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO
Indirect comparisons may be used when estimating effectiveness or risk	Medical Technologies Other technologies	NO
Network meta-analysis may be used in estimations in indirect comparisons	NO	
Relevant patient or population sub-groups considered	Medical Technologies Other technologies	Other technologies
Key deficiencies in available data considered	Medical Technologies Other technologies	Don't know
Transferability issues considered	NO	Other technologies
Summary of findings section included in reports	Medical Technologies Other technologies	Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Sources of evidence on the technology	A. scientific journal publications, B. grey literature (e.g. published reports) D. register data E. administrative data	A. scientific journal publications B. grey literature (e.g. published reports)
Confidential data from manufacturers accepted		
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use	Efficacy/effectiveness Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	State Health Care Accreditation Agency under the Minister of Health has to do the a health technology assessment in the following areas: medical devices, therapy or surgical treatment, medical equipment used in diagnosis or treatment.	The Committee on Health technology assessment is established by the Health Minister's Order No. V-277, dated of 21 February, 2014. The committee consist of representatives of various institutions: different departments of the MoH; the State Patient Fund; the State Medicine Control Agency; the State Health Care Accreditation Agency at the MoH; the Institute of Hygiene, Lithuanian Health Science university.HTA reports are presented to the Committee. The Committee approves or rejects the report. The results of the approved report are presented to the Minister and the Minister assigns tasks (for example, to take the HTA results into consideration) to the relevant institutions/commissions which make reimbursement decisions. However, clear procedures (from HTA report to decision making) are not established yet.
Health technologies assessed	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures	H. Population Level Health Interventions
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Medical technologies	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	NO	NO

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Recommendations on adoption of the technology included in reports	Medical Technologies Other technologies	Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO	Other technologies
The institution does re-assessments	NO	NO
Situations where re-assessments are done		

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
The institution receives submissions / dossiers from companies or others	Medical technologies	NO
HTA work externally contracted / commissioned	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Medical technologies	Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology D. Clinical Effectiveness E. Costs and economic evaluation J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria		
Background of this formal requirement		
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	no	
Background of this formal requirement		

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse safety		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include other (non-clinical) domains		
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse safety	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments include other (non-clinical) domains	No	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Assessments include other (non-clinical) domains		
Assessments analyse cost, budget impact or include economic evaluation		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse patient aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse social aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied		Never
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Assessments analyse patient aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse social aspects		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis		Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment		
Formal requirements to use data that meet the criteria		
Background of this formal requirement		
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		
Explanation of how methodology requirements compare to HTA Core Model REA features		
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Don't know
Formal requirements to use data that meet the criteria	no	
Background of this formal requirement		
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Identical	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features	We use EUnetHTA methodology while doing our assessments.	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Key deficiencies in available data considered	Medical Technologies Other technologies	Don't know
Examples of key deficiencies	All types of bias, incomplete reporting of results, errors/mismatches in text.	

Appendix tables

Table A6 Evidence search and handling

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Confidential data from manufacturers accepted		
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Relevant hyperlink(s) describing the institution's formal role in HTA	https://www.etar.lt/portal/lt/legalAct/f1c0e290c01e11e5a6588fb85a3cc84b	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	State Health Care Accreditation Agency under the Minister of Health has to do a health technology assessment in the following areas: medical devices, therapy or surgical treatment, medical equipment used in diagnosis or treatment. Health care technology assessment includes health care technologies safety, efficacy, clinical and cost-effectiveness as well as social, legal and ethical impact assessment. https://www.e-tar.lt/portal/lt/legalAct/f1c0e290c01e11e5a6588fb85a3cc84b https://www.e-tar.lt/portal/lt/legalAct/TAR.E2B2957B9182/DzJApLsfZr (54 item).	
Relevant hyperlink(s) to guidelines		

Appendix tables

Table A8 Contribution to HTA from outside the institution

Lithuania

Institution	**State Health Care Accreditation Agency at the Ministry of Health (VASPVT)**	**Institute of Hygiene**
Submissions / dossiers from companies or others	Medical technologies	NO
Written requirements on how submissions should be done	Medical technologies	
Relevant hyperlink(s)	https://e-tar.lt/portal/lt/legalAct/TAR.AD1ECA8BEF4F	
Templates for entering structured HTA information	Medical technologies	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		
HTA work externally contracted / commissioned	NO	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Medical technologies	Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness J. Conclusions K. Recommendations	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology D. Clinical Effectiveness E. Costs and economic evaluation J. Conclusions K. Recommendations

Luxembourg

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	Other criteria
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	Other criteria

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Always

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Not overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Assessments include a plan for methodologies to be applied	Medical Technologies Other technologies
Plan for information retrieval	Medical Technologies Other technologies
Plan for finding information when there is no published data	Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	NO
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	NO
Relevant patient or population sub-groups considered	Medical Technologies Other technologies
Key deficiencies in available data considered	NO
Transferability issues considered	Medical Technologies Other technologies
Summary of findings section included in reports	Medical technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	NO
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Health problem Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The CEM was instituted by the law reform of the healthcare system of December 17th 2010 and has a legal basis as specified in article 65bis (1) of the Luxembourgish Social Security Code (CSS). According to article 65bis (1) of the Social Security Code, the CEM has the following missions: 1. Propose (...) the definitions and the coefficients of various medical acts and services; and propose their indications and application conditions according to evidence-based best practice; 2. Scientifically evaluate medical devices on relevant factors to formulate recommendations on the validity of their reimbursement by the national healthcare insurance; 3. Collaborate on the development and promotion of good medical practice standards; 4.Analyse notes regarding the expected outcome of an act or service according to its (public) health and financial relevance and impact; 5.Provide the secretariat and technical support of the scientific council. These missions are interrelated. Hence, to sum up, the CEM (a) provides technical and scientific support to the development of the national medical classification and tariff system by proposing coefficients and descriptions for medical procedures and consultations, (b) assesses the effectiveness, quality, and economic efficiency/impact of selected medical devices, i.e. to provide recommendations on their use and determine their scientific rationale for reimbursement by the national healthcare insurance; (c) collaborates with the national scientific council on the elaboration, regular adaptation and implementation of evidence-based clinical practice guidelines and provides the secretariat for the scientific council.
Health technologies assessed	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Medical technologies Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Recommendations on adoption of the technology included in reports	Medical technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Medical technologies Other technologies
The institution does re-assessments	Medical technologies Other technologies
Situations where re-assessments are done	At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
The institution receives submissions / dossiers from companies or others	NO
HTA work externally contracted / commissioned	Medical technologies Other technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Medical technologies Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Defined requirements from commissioned work	NO
Templates for entering structured HTA information	NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	No
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Not overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The CEM makes use of relevant HTA methods and published HTA reports to support their assessments (re-use). CEM's reports provide information on aspects that are relevant depending on the subject of the request from the decision-maker. Reports thereby vary in their structure, quantity and domains that are addressed. CEM uses narrative literature reviews of the existing literature and systematically provides answers to twelve aspects that are required to be answered. These 12 aspects are linked to the national classification and fee schedule of medical acts and are assessed systematically (include e.g. organisational and economic impact issues). The other aspects are not assessed systematically.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Key deficiencies in available data considered	NO
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Confidential data from manufacturers accepted	NO
If NO, why not?	Risk of conflict of interest

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://www.mss.public.lu/acteurs/igss/cem/III
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	http://www.secu.lu/assurance-maladie/livre-i/chapitre-v-relations-avec-les-prestataires-de-soins/relations-dans-le-secteur-extrahospitalier/art-65bis/
Relevant hyperlink(s) to guidelines	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Luxembourg

Institution	**Cellule d'expertise médicale in the Ministry of Health**
Submissions / dossiers from companies or others	NO
Written requirements on how submissions should be done	
Relevant hyperlink(s)	
Templates for entering structured HTA information	
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	Medical technologies Other technologies
Defined requirements from commissioned work	NO
Templates for entering structured HTA information	NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Medical technologies Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Malta

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it Other criteria
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Always
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Assessments include a plan for methodologies to be applied	Pharmaceuticals
Plan for information retrieval	NO
Plan for finding information when there is no published data	NO
Predefined description of how the assessment of the available evidence will be done	NO
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Don't know
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Don't know
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Don't know
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Don't know
Transferability issues considered	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) E. administrative data
Confidential data from manufacturers accepted	
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The Directorate is required to provide HTA reports, and an annual number of HTA reports, according to the guidance of the Ministry for Health and the GFLAC (Government Formulary List Advisory Committee). This varies from year to year according to priorities and exigencies of the specific present.
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Recommendations on adoption of the technology included in reports	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals
The institution does re-assessments	Pharmaceuticals
Situations where re-assessments are done	When significant new evidence or circumstances emerge

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed
Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse patient aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Don't know
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	There is over-lapping of almost all the domains.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Key deficiencies in available data considered	Don't know
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Confidential data from manufacturers accepted	
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	

Appendix tables

Table A8 Contribution to HTA from outside the institution

Malta

Institution	**Directorate for Pharmaceutical Affairs - Ministry for Health**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	http://www.doi-archived.gov.mt/EN/legalnotices/2009/03/LN%2058.pdf
Templates for entering structured HTA information	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis K. Recommendations

Netherlands

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Always
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Never
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Always

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	NO
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies
Summary of findings section included in reports	Don't know

Issues in HTA research methodology

Table 6 Evidence search and handling

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data F. manufacturer data
Confidential data from manufacturers accepted	NO
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Health problem

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Request from our ministry of health or requests from a third party (e.g. payer, physician group or patient organisation). In addition, sometimes when there is a (new) legal dispute between a payer and patient with regards to the reimbursement of a treatment. In total, we publish about 60 to 80 HTA reports per year.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Recommendations on adoption of the technology included in reports	Don't know
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	When significant new evidence or circumstances emerge At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies
HTA work externally contracted / commissioned	Medical technologies Other technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	C. Safety D. Clinical Effectiveness

Appendix tables

Table A1 Choice of assessment comparators

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at national level
Background of this formal requirement	internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Don't know
Assessments analyse patient aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Defined requirements from commissioned work	Don't know
Templates for entering structured HTA information	Don't know
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	See previous answer. Content = almost the same.
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Almost identical.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	We always write a discussion section in this section we can describe key deficiencies in the available evidence. We do not have an internal document available for this.

Appendix tables

Table A6 Evidence search and handling

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Confidential data from manufacturers accepted	NO
If NO, why not?	We always tell the manufacturer that the data we receive will be published. Our role is also to inform third parties and we cannot keep data confidential. We leave the decision to the manufacturer which data they want to include in the submission file.

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Relevant hyperlink(s) describing the institution's formal role in HTA	https://www.zorginstituutnederland.nl/publicaties/rapporten+en+standpunten https://www.zorginstituutnederland.nl/publicaties/geneesmiddelbeoordelingen
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	https://www.zorginstituutnederland.nl/binaries/content/documents/zinl-www/documenten/publicaties/rapporten-en-standpunten/2015/1501-beoordeling-stand-van-de-wetenschap-en-praktijk/1501-beoordeling-stand-van-de-wetenschap-en-praktijk/Beoordeling+stand+van+de+wetenschap+en+praktijk.pdf https://www.zorginstituutnederland.nl/binaries/content/documents/zinl-www/documenten/publicaties/rapporten-en-standpunten/2013/1312-pakketbeheer-specialistische-geneesmiddelen/1312-pakketbeheer-specialistische-geneesmiddelen/Pakketbeheer+specialistische+geneesmiddelen.pdf https://www.zorginstituutnederland.nl/binaries/content/documents/zinl-www/documenten/publicaties/rapporten-en-standpunten/2015/1510-pakketbeheer-weesgeneesmiddelen/1510-pakketbeheer-weesgeneesmiddelen/Pakketbeheer+weesgeneesmiddelen.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Netherlands

Institution	**Zorginstituut Nederland (ZIN)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	https://www.zorginstituutnederland.nl/pakket/werkwijze+pakketbeheer/beoordeling+geneesmiddelen/procedure Submission file formats are in the document section on this webpage
Templates for entering structured HTA information	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	The structure of our (national) formats are different from EUnetHTA. Content is almost the same; except for some national questions about reimbursement.
HTA work externally contracted / commissioned	Medical technologies Other technologies
Defined requirements from commissioned work	Don't know
Templates for entering structured HTA information	Don't know
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	C. Safety D. Clinical Effectiveness

Poland

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other Technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Always
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	NO
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies
The GRADE approach in routine use	No
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	NO
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The Agency for Health Technology Assessment and Tariff System (AOTMiT) was established in 2005 as an advisory body to the Ministry of Health. Since 2009 AOTMiT is defined as a legal entity. The main task of AOTMiT is the preparation for the Minister of Health recommendations on financing all health care services from public funds. The role of AOTMiT is to assess and appraise all medical technologies and services claiming public money founding. Recommendations, statements and opinions issued by AOTMiT are based on additional officially published data, experts' opinions, Manufacturer's submission and polish public payer (National Health Fund) evaluation. (based on law: The Act on Health Care Benefits issued in 2009 (in Polish) and The Reimbursement Act issued in 2011 (in Polish) Launched in January 2015 The Act of Law (amendment to the Act on healthcare benefits financed from public funds) added new task related to valuation tariff of health care services. The main body of AOTMiT is the President, who leads and oversees all AOTMiT activities. The other most important body within AOTMiT: The Transparency Council of AOTMiT (TC) - an advisory, independent body with 20 highly qualified members , The Council for Tariffs Affairs of AOTMiT (CTA) - an advisory, independent body with 10 highly qualified members, both appointed by Minister of Health. The role of AOTMiT in decision making process is connected with assessment and appraisal, what is coherent with international standards regarding HTA. Assessment is provided by Analytic Team, using Polish HTA guidelines (first issue 2007) and is related with revision of industry submission. Appraisal is prepared by TC and President of AOTMiT. It's assessment with added context-specific judgments such as: impact of alternative options, social consequences, organisational implications, relative priorities and wider social and ethical aspects. Core activities of AOTMiT is also connected with producing health technology assessment (HTA) reports and collect, make available, and disseminate information on HTA results, methodologies, and recommendations generated within or outside of Poland.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices E. Surgical and Medical Procedures G. Other Therapeutic Technologies J. Other: Special Purpose Dietary Supplements
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Recommendations on adoption of the technology included in reports	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	J. Conclusions K. Recommendations

Appendix tables

Table A1 Choice of assessment comparators

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at national level
Background of this formal requirement	internal guideline or procedure description legislation

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description
Assessments include a separate ethical analysis	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description +AA83:AA105Legislation
Defined requirements from commissioned work	NO
Templates for entering structured HTA information	NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	E.g.: In some cases, the indication assessed is different from the registered one (more narrow or wider) comparators should be relevant at the national level; In some cases, there are specific requirements in case no RCTs are available
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level
Background of this formal requirement	Internal guideline or procedure description Legislation
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	E.g.: In some cases, the indication assessed is different from the registered one (more narrow or wider) comparators should be relevant at the national level; In some cases, there are specific requirements in case no RCTs are available

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	risk of bias as by Cochrane differences in the scope in the evidence vs. PICO lack of proper administrative data from the payer (e.g. selected for the indication and not only for the active substance)

Appendix tables

Table A6 Evidence search and handling

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies Other technologies
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://isap.sejm.gov.pl/DetailsServlet?id=WDU20042102135 http://isap.sejm.gov.pl/DetailsServlet?id=WDU20111220696
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Regulation of the Minister of Health of 2 April 2012 on the minimum requirements to be satisfied by the analyses accounted for in the applications for reimbursement and setting the official sales price and for increasing the official sales price of a drug, a special purpose dietary supplement, a medical device, which do not have a reimbursed counterpart in a given indication, delivered in compliance with the Act of May 12th, 2011 on the reimbursement of medicinal products, special purpose dietary supplements and medical devices, in force from January 1st, 2012; (Dz.U. 2012 poz. 388). Regulation of the Minister of Health of 18 December 2013 r. on the mode and procedure of performing the verification analysis of AOTMiT and the fee for this analysis (Dz.U. 2014 poz. 4) Regulation of the Minister of Health of 15 December 2014 r. on the mode and procedure of performing the report on health benefit assessment (Duo. 2014 poz. 1849) http://www.aotm.gov.pl/www/wpcontent/uploads/wytyczne_hta/2012/Regulation_MoH_minimum_requirements_03042012_eng.pdf http://isip.sejm.gov.pl/DetailsServlet?id=WDU20140000004 http://isap.sejm.gov.pl/DetailsServlet?id=WDU20140001849
Relevant hyperlink(s) to guidelines	http://www.aotm.gov.pl/www/wp-content/uploads/wytyczne_hta/2016/20161104_HTA_Guidelines_AOTMiT.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Poland

Institution	**Agencja Oceny Technologii Medycznych i Taryfikacji (AOTMiT)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies
Written requirements on how submissions should be done	Pharmaceuticals Other technologies
Relevant hyperlink(s)	Regulation of the Minister of Health of 2 April 2012 on the minimum requirements to be satisfied by the analyses accounted for in the applications for reimbursement and setting the official sales price and for increasing the official sales price of a drug, a special purpose dietary supplement, a medical device, which do not have a reimbursed counterpart in a given indication, delivered in compliance with the Act of May 12th, 2011 on the reimbursement of medicinal products, special purpose dietary supplements and medical devices, in force from January 1st, 2012; (Dz.U. 2012 poz. 388; in English at http://www.aotm.gov.pl/www/wp-content/uploads/wytyczne_hta/2012/Regulation_MoH_minimum_requirements_03042012_eng.pdf)
Templates for entering structured HTA information	NO
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies
Defined requirements from commissioned work	NO
Templates for entering structured HTA information	NO
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	J. Conclusions K. Recommendations

Portugal

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies
The GRADE approach in routine use	Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies
Transferability issues considered	Pharmaceuticals Medical Technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Infarmed does HTA for all reimbursement requests of pharmaceuticals (starting now doing for reimbursement requests of medical devices) and provides the resulting reports to inform / support the Ministry of Health (MoH) as the final decision maker, except for generics and biosimilars (the decision maker was sub delegated by the MoH on the Infarmed's President of Executive Board). In 2015, there was 778 decisions: Outpatient: 762 pharmaceuticals (576 generics, 86 new active substances, 100 other type (as new pharmaceutical forms)) and 1 medical devices (spacer devices). Inpatient: 15 pharmaceuticals (0 generics, 10 new active substances, 5 new indications)
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Medical Technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	At national level
Background of this formal requirement	Internal guideline or procedure description,
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	at institutional level
Background of this formal requirement	internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments analyse legal aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Defined requirements from commissioned work	Pharmaceuticals Medical technologies
Templates for entering structured HTA information	Pharmaceuticals Medical technologies
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	Institutional level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	According with the available evidence
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	Institutional level
Background of this formal requirement	Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	According with the available evidence

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies
Examples of key deficiencies	Data source Population Time horizon Identifying costs Measuring costs Measuring consequences

Appendix tables

Table A6 Evidence search and handling

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	1- "Decreto-Lei n.º 97/2015", to be found in "Diário da República, 1.ª série — N.º 105 — 1 de junho de 2015" 2- "Portarias 195 (A-B-C-D)", for reimbursement, reference price system, price margins and pharmacotherapeutical classification reimbursement, to be found in "Diário da República, 1.ª série — N.º 125 — 30 de junho de 2015" 3- "Deliberação n.º 662/2016 Regulamento da Comissão de Avaliação de Tecnologias de Saúde (CATS)", to be found in "Diário da República, 2.ª série — N.º 72 — 13 de abril de 2016" https://dre.pt/application/file/67352197 https://dre.pt/application/file/67614426 https://dre.pt/application/file/67614427 https://dre.pt/application/file/67614428 https://dre.pt/application/file/67614429 https://dre.pt/application/file/74125759
Relevant hyperlink(s) to guidelines	http://www.infarmed.pt/documents/281/1432055/PCAEC04_vering.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Portugal

Institution	**National Authority of Medicines and Health Products (INFARMED)**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	http://www.infarmed.pt/web/infarmed/entidades/medicamentos-uso-humano/avaliacao-tecnologias-de-saude
Templates for entering structured HTA information	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies
Defined requirements from commissioned work	Pharmaceuticals Medical technologies
Templates for entering structured HTA information	Pharmaceuticals Medical technologies
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Romania

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Don't know

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Assessments include a description of technical characteristics of the technology	Sometimes (depending on the assessors)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Never
Assessments analyse safety	Sometimes (depending on the assessors)
Assessments include other (non-clinical) domains	Don't know

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Don't know
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Don't know
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Romania

Institution	**National Institute of Public Health**
Assessments include a plan for methodologies to be applied	Other technologies
Plan for information retrieval	Don't know
Plan for finding information when there is no published data	NO
Predefined description of how the assessment of the available evidence will be done	Don't know
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Don't know
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Don't know
Composite endpoints may be used when estimating effectiveness or risk	Don't know
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	NO
Indirect comparisons may be used when estimating effectiveness or risk	Don't know
Network meta-analysis may be used in estimations in indirect comparisons	
Relevant patient or population sub-groups considered	Other technologies
Key deficiencies in available data considered	Don't know
Transferability issues considered	Don't know
Summary of findings section included in reports	Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Romania

Institution	**National Institute of Public Health**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (Other national institutions generating data such as National Institute of Statistics)
Confidential data from manufacturers accepted	Other technologies
Evidence where systematic search strategies are applied	Health problem

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Romania

Institution	**National Institute of Public Health**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	There are several obligations to report to the Ministry of Health according to several legal regulations. E.g. Order of Minister of Health no. 386 of 31 March 2015 on the approval of the technical achievement of national public health programs for 2015 and 2016
Health technologies assessed	F. IT Systems, e-Health and m-health Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Romania

Institution	**National Institute of Public Health**
Recommendations on adoption of the technology included in reports	Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Don't know
The institution does re-assessments	Don't know
Situations where re-assessments are done	

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Romania

Institution	**National Institute of Public Health**
The institution receives submissions / dossiers from companies or others	Other technologies
HTA work externally contracted / commissioned	Other technologies
Technologies where content of assessment reports from HTA bodies in other countries is used	Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety F. Ethical analysis G. Organisational aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	Sometimes (depending on the assessors)
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	Don't know

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Romania

Institution	**National Institute of Public Health**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	Don't know
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	Other technologies
Templates for entering structured HTA information	Other technologies
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Romania

Institution	**National Institute of Public Health**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Don't know
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Romania

Institution	**National Institute of Public Health**
Key deficiencies in available data considered	Don't know
Examples of key deficiencies	

Appendix tables

Table A6 Evidence search and handling

Romania

Institution	**National Institute of Public Health**
Confidential data from manufacturers accepted	Other technologies
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Romania

Institution	**National Institute of Public Health**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://www.lexmed.ro/doc/Ordin_MS_386_2015.pdf
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	
Relevant hyperlink(s) to guidelines	http://www.insp.gov.ro/index.php/uatm/prog-nat-de-evaluare-si-promovare-a-sanatatii-si-educatie-pentru-sanatate

Appendix tables

Table A8 Contribution to HTA from outside the institution

Romania

Institution	**National Institute of Public Health**
Submissions / dossiers from companies or others	Other technologies
Written requirements on how submissions should be done	Other technologies
Relevant hyperlink(s)	http://www.insp.gov.ro/index.php/uatm/prog-nat-de-evaluare-si-promovare-a-sanatatii-si-educatie-pentru-sanatate
Templates for entering structured HTA information	Other technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	Other technologies
Defined requirements from commissioned work	Other technologies
Templates for entering structured HTA information	Other technologies
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety F. Ethical analysis G. Organisational aspects I. Legal aspects J. Conclusions K. Recommendations L. Other kind of information

Slovakia

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Other Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	No	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	No	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Assessments analyse patient aspects		Always
Assessments analyse social aspects		Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Assessments analyse legal aspects		Always
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Assessments analyse patient aspects		Always
Assessments analyse social aspects		Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Assessments analyse legal aspects		Always

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	somewhat overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Assessments include a plan for methodologies to be applied	NO	Pharmaceuticals Medical Technologies
Plan for information retrieval		Pharmaceuticals Medical Technologies
Plan for finding information when there is no published data		Pharmaceuticals Medical Technologies
Predefined description of how the assessment of the available evidence will be done		Pharmaceuticals Medical Technologies
Formal tools or algorithms for evidence grading applied		Pharmaceuticals Medical Technologies
The GRADE approach in routine use		Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)		Pharmaceuticals Medical Technologies
Standard forms or tables available for evidence analysis and synthesis		Pharmaceuticals Medical Technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies
Composite endpoints may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies
Network meta-analysis may be used in estimations in indirect comparisons		Pharmaceuticals Medical Technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies
Key deficiencies in available data considered	NO	Pharmaceuticals Medical Technologies
Transferability issues considered	NO	Pharmaceuticals Medical Technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted	NO	NO
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem	Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	Ministry of health has advisory body responsible for HTA reports preparation. On yearly basis, the ministry of health assessed approximately 600 reports.	The Slovak Ministry of Health established the Reimbursement (or Categorisation) Committee to act as its advisory body in regards to reimbursement processes. The Categorisation Committee consists of three representatives from the Ministry of Health, three representatives from the Slovak Medical Chamber and five representatives from health insurance companies. The Categorisation Committee is supported by different advisory working groups, a medical board and the Working Group for Pharmacoeconomics, Clinical Outcomes and Health Technology Assessment of the Ministry of Health. Health Technology Assessment is still a relatively recent concept in Slovakia and the country is in the early stage of its implementation. Source: Szalay T, Pažitný P, Szalayová A, Frisová S, Morvay K, Petrovič M, et al. Slovakia Health system review. Health Systems in Transition 2011 [cited 2016 Nov 07]; 13(2):[1-200 pp.]. Tesar T. Health Technology Assessment in reimbursement policy of the Slovak Republic. Journal of Health Policy & Outcomes Research. 2012;2012(1):21-3.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Other technologies	Pharmaceuticals Medical technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies	Pharmaceuticals Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO	Pharmaceuticals Medical Technologies
The institution does re-assessments	NO	Pharmaceuticals Medical Technologies
Situations where re-assessments are done		According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
The institution receives submissions / dossiers from companies or others	Don't know	Pharmaceuticals Medical technologies
HTA work externally contracted / commissioned	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO	Pharmaceuticals Medical technologies
Content of foreign reports used		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness

Appendix tables

Table A1 Choice of assessment comparators

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At national level	At national level
Background of this formal requirement	Internal guideline or procedure description	Internal guideline or procedure description
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	at national level	at national level
Background of this formal requirement	internal guideline or procedure description	internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include other (non-clinical) domains	No	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include other (non-clinical) domains	No	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse patient aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse social aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse legal aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	No	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse patient aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse social aspects		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse legal aspects		Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Legislation
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level	National level
Background of this formal requirement	Internal guideline or procedure description	Internal guideline or procedure description
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		There are not official national guidelines for performing REA in Slovakia
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level	National level
Background of this formal requirement	Internal guideline or procedure description	Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Somewhat overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features		There are not the official national guidelines for REA in Slovakia.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Key deficiencies in available data considered	NO	Pharmaceuticals Medical Technologies
Examples of key deficiencies		Lack of data, issue of quality of data, uncertainty, missing information.

Appendix tables

Table A6 Evidence search and handling

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Confidential data from manufacturers accepted	NO	NO
If NO, why not?	All data have to be publicly available	The process is fully transparent. All information is published on the web side of the Slovak MoH. Source: Barnieh L, Manns B, Harris A, Blom M, Donaldson C, Klarenbach S, et al. A synthesis of drug reimbursement decision-making processes in Organisation for Economic Co-operation and Development countries. Value Health. 2014 Jan-Feb;17(1):98-108.

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Relevant hyperlink(s) describing the institution's formal role in HTA		http://www.euro.who.int/__data/assets/pdf_file/0004/140593/e94972.pdf.
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	All official documents along with the relevant links are fully available at SKMoH website http://www.health.gov.sk/?kategorizecia-a-uuc	Act No. 363/2011, coll. provides that pharmacoeconomic reports are mandatory in the decision process on reimbursement of medicinal products. As stated by Decree No. 422/2011 of the Ministry of Health, the decision of within the drug reimbursement process requires a pharmacoeconomic analysis (cost minimization, cost-utility or cost-effectiveness analysis) and budget impact analysis. However, the official national guidelines for the rest of HTA Core model dimensions (except economic) are not available in Slovakia. Source: [Act No. 363/2011 Coll. on the scope and conditions of payments for medicines, medical devices and dietetic foods from public health insurance and amending certain acts, as amended] Zákon č. 363/2011 Z. z. o rozsahu a podmienkach úhrady liekov, zdravotníckych pomôcok a dietetických potravín na základe verejného zdravotného poistenia a o zmene a doplnení niektorých zákonov, (2011). [Decree No. 422/2011 of the Ministry of Health of the Slovak Republic on the details of the pharmacoeconomic analysis of medicine] Vyhláška č. 422/2011 MZ SR o podrobnostiach farmako-ekonomického rozboru lieku, (2011). http://www.zakonypreludi.sk/zz/2011-363. http://www.zakonypreludi.sk/zz/2011-422.
Relevant hyperlink(s) to guidelines	http://www.health.gov.sk/?medicinsko-ekonomicky-rozbor	The official national guidelines for the rest of HTA Core model dimensions (except economic) are not available in Slovakia. Source: Ministry of Health of the Slovak Republic. [Methodical guidance for the completion of pharmacoeconomic analysis of a drug, health-economic analysis of a medical device and health-economic analysis of dietetic food] Metodická pomôcka pre vykonávanie farmako-ekonomického rozboru lieku, medicínsko-ekonomického rozboru zdravotníckej pomôcky a medicínsko-ekonomického rozboru dietetickej potraviny. Bratislava: Ministry of Health of the Slovak Republic; (2008). http://www.health.gov.sk/?farmako-ekonomicky-rozbor-lieku.

Appendix tables

Table A8 Contribution to HTA from outside the institution

Slovakia

Institution	**Ministry of Health**	**Union Health Insurance Fund**
Submissions / dossiers from companies or others	Don't know	Pharmaceuticals Medical technologies
Written requirements on how submissions should be done		Pharmaceuticals Medical technologies
Relevant hyperlink(s)		Source: [Act No. 363/2011 Coll. on the scope and conditions of payments for medicines, medical devices and dietetic foods from public health insurance and amending certain acts, as amended] Zákon č. 363/2011 Z. z. o rozsahu a podmienkach úhrady liekov, zdravotníckych pomôcok a dietetických potravín na základe verejného zdravotného poistenia a o zmene a doplnení niektorých zákonov, (2011). http://www.zakonypreludi.sk/zz/2011-363.
Templates for entering structured HTA information		Pharmaceuticals Medical technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution		Pharmaceuticals Medical technologies
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		Health Technology Assessment is still a relatively recent concept in Slovakia and the country is in the early stage of its implementation. Act No. 363/2011, coll. provides that pharmacoeconomic reports are mandatory in the decision process on reimbursement of medicinal products. As stated by Decree No. 422/2011 of the Ministry of Health, the decision of within the drug reimbursement process requires a pharmacoeconomic analysis (cost minimization, cost-utility or cost-effectiveness analysis) and budget impact analysis. However, the official national guidelines for the rest of HTA Core model dimensions (except economic) are not available in Slovakia. The Slovak templates for entering structured HTA information is not comprehensive enough. EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices is comprehensive.
HTA work externally contracted / commissioned	NO	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	NO	Pharmaceuticals Medical technologies
Nature of content of foreign reports used		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness

Slovenia

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Technologies considered potentially relevant comparators	Pharmaceuticals
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it
Medical devices and other non-pharmaceutical technologies	
Technologies considered potentially relevant comparators	
Criteria for choice of comparator(s) in assessments	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Assessments include a description of technical characteristics of the technology	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Assessments analyse safety	Sometimes (depending on what is assessed)
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Assessments include a description of technical characteristics of the technology	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Assessments analyse safety	
Assessments include other (non-clinical) domains	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Assessments analyse patient aspects	Never
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Never
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	
Assessments analyse cost, budget impact or include economic evaluation	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Assessments analyse patient aspects	
Assessments analyse social aspects	
Assessments include a separate ethical analysis	
Assessments analyse legal aspects	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	not overlapping
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals
Plan for information retrieval	NO
Plan for finding information when there is no published data	Pharmaceuticals
Predefined description of how the assessment of the available evidence will be done	NO
Formal tools or algorithms for evidence grading applied	
The GRADE approach in routine use	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO
Standard forms or tables available for evidence analysis and synthesis	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals
Transferability issues considered	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data G. other sources (The evidence is provided by the applicant (Marketing authorization holder, i.e. industry) and all the above selected evidence would be accepted in the application, or be gathered by JAZMP itself in the available dependable sources, or taken from the official evidence database of JAZMP
Confidential data from manufacturers accepted	Pharmaceuticals
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines
Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	JAZMP is a decision-making body for the determination of prices of medicinal products. HTA elements are evaluated in the premium price determination procedure (extraordinary higher price as stipulated by the law to accommodate justified requests of applicant for a price that is higher than normal ceiling regulated price). However, HTA report as such (in an HTA structured format) is not prepared. Number of premium price determination procedures/year is approx. 350.
Health technologies assessed	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO
The institution does re-assessments	Pharmaceuticals
Situations where re-assessments are done	When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals
HTA work externally contracted / commissioned	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis J. Conclusions

Appendix tables

Table A1 Choice of assessment comparators

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Formal requirement to use comparator(s) that meet the criteria	No
Background of this formal requirement	
Medical devices and other non-pharmaceutical technologies	
Formal requirement to use comparator(s) that meet the criteria	
Background of this formal requirement	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Assessments include a description of the health problem and current use of technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments include a description of technical characteristics of the technology	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always
Formal requirement to address some of the topics that are reflected in this domain	National
Background of this formal requirement	Legislation
Assessments analyse safety	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No
Background of this formal requirement	
Assessments include other (non-clinical) domains	Yes
Medical devices and other non-pharmaceutical technologies	
Assessments include a description of the health problem and current use of technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a description of technical characteristics of the technology	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse safety	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include other (non-clinical) domains	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed
Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Assessments include other (non-clinical) domains	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level
Background of this formal requirement	Legislation
Assessments analyse legal aspects	Never
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Medical devices and other non-pharmaceutical technologies	
Assessments include other (non-clinical) domains	No
Assessments analyse cost, budget impact or include economic evaluation	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Quality Adjusted Life Years (QALYs) applied	
Assessments analyse organisational aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse patient aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse social aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments include a separate ethical analysis	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Assessments analyse legal aspects	
Formal requirement to address some of the topics that are reflected in this domain	
Background of this formal requirement	
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Pharmaceuticals	
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level Institutional level
Background of this formal requirement	Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Not overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	
Medical devices and other non-pharmaceutical technologies	
Sources of evidence included as relevant clinical evidence for the clinical assessment	
Formal requirements to use data that meet the criteria	
Background of this formal requirement	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	
Explanation of how methodology requirements compare to HTA Core Model REA features	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Key deficiencies in available data considered	Pharmaceuticals
Examples of key deficiencies	-evidence of non-substantial advantages to the comparator; -presence of comparator with better cost-effectiveness; -evidence of disproportional market penetration of the product;

Appendix tables

Table A6 Evidence search and handling

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Confidential data from manufacturers accepted	Pharmaceuticals
If NO, why not?	

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guide
Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Relevant hyperlink(s) describing the institution's formal role in HTA	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Medicinal Products Act (MPA) (Slovenian language); unofficial English version available. Pricing bylaw to the MPA: Rules on determining the prices of medicinal products for human use (Official Gazette of the Republic of Slovenia [Uradni list RS], No. 32/15 and 15/2016), Article 16 (Slovenian language version available) http://www.pisrs.si/Pis.web/pregledPredpisa?id=ZAKO6295 http://www.jazmp.si/fileadmin/datoteke/seznami/en/ZZdr-2_ANG.pdf, see articles 158-164 http://www.pisrs.si/Pis.web/pregledPredpisa?id=PRAV12442
Relevant hyperlink(s) to guidelines	The Medicinal Products Act listed in item 4.1.1 (a) in its Article 158(2) and the pricing bylaw listed in item 4.1.1.(b) provide explicitly for certain technical elements (including a scoring mechanism) of HTA evaluation of the application for the premium price determination (see article 18), however the format does not follow structure of the EUnetHTA guidelines with respect to the requirements for the content of the application and neither for the format of the assessment. This applies also to templates for entering structured HTA information.

Appendix tables

Table A8 Contribution to HTA from outside the institution

Slovenia

Institution	**Agency for Medicinal Products and Medical Devices (JAZMP)**
Submissions / dossiers from companies or others	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals
Relevant hyperlink(s)	Rules on determining the prices of medicinal products for human use (Official Gazette of the Republic of Slovenia [Uradni list RS], No. 32/15 and 15/2016), Article 16 (Slovenian language version available at: http://www.pisrs.si/Pis.web/pregledPredpisa?id=PRAV12442)
Templates for entering structured HTA information	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	
HTA work externally contracted / commissioned	NO
Defined requirements from commissioned work	
Templates for entering structured HTA information	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	
Major differences and commonalities	
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis J. Conclusions

Spain

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Technologies considered potentially relevant comparators		Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments		Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population Other criteria	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies			
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies		Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,		Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology		Always	Always
Assessments include a description of technical characteristics of the technology		Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		Always	Always
Assessments analyse safety		Always	Always
Assessments include other (non-clinical) domains		Yes	Yes
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Always		Always
Assessments include a description of technical characteristics of the technology	Always		Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)		Always
Assessments analyse safety	Sometimes (depending on what is assessed)		Always
Assessments include other (non-clinical) domains	Yes		Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Assessments include other (non-clinical) domains		Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects		Always	Sometimes (depending on what is assessed)
Assessments analyse social aspects		Always	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse legal aspects		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies			
Assessments include other (non-clinical) domains	Yes		Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment		Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		Not overlapping	Mostly overlapping
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies		Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping		Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Assessments include a plan for methodologies to be applied	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Plan for information retrieval	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Plan for finding information when there is no published data	Medical Technologies Other technologies	Pharmaceuticals	NO
Predefined description of how the assessment of the available evidence will be done	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Medical Technologies Other technologies	NO	Medical Technologies Other technologies
The GRADE approach in routine use	No		No
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Medical Technologies Other technologies	NO	Pharmaceuticals Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Medical Technologies Other technologies		Pharmaceuticals Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals
Relevant patient or population sub-groups considered	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies
Summary of findings section included in reports	Medical Technologies Other technologies	NO	Pharmaceuticals Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) D. register data
Confidential data from manufacturers accepted	Medical Technologies Other technologies	Pharmaceuticals	
Evidence where systematic search strategies are applied	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use	Efficacy/effectiveness Safety Health problem Current technology use Other evidence (e.g. patient aspects)	Efficacy/effectiveness Safety Health problem

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	The HTA reports are required by the Spanish Ministry of Health, Social Services and Equality (MoH). MoH is the organization dealing with topic selection and prioritisation of the topics to be assessed. The Spanish Network of HTA Agencies was created in 2012 and provides the HTA reports. This HTA network is composed of 8 agencies. AETS-ISCIII is one of them. Number of reports/year (AETS-ISCIII): 14	AEMPS provides advice to the DG Pharmacy to inform national pricing and reimbursement decisions. The HTA reports also provides advice to the 17 health care regional authorities about procurement and selection of medicinal products, as well as to decision makers at healthcare level about the inclusion of the medicinal product into clinical practice (hospitals, prescribers, etc.). HTA is delivered in the form of the so called Therapeutic Positioning Reports. The therapeutic positioning reports are developed and adopted by consensus within the Co-ordination Group for Therapeutic Positioning (GCPT). The GCPT includes representation from AEMPS and the 17 regional health authorities, responsible for the health care budget and provision of health care products. AEMPS performs Therapeutic Positioning Reports for all new products and indications with a positive opinion by the CHMP. AEMPS also does assessments for other medicinal products at the request of pricing and reimbursement authorities and for products that do not follow centralised procedures. HTA apply only to medicinal products. AEMPS produce approximately 50 therapeutic positioning reports each year. The Therapeutic Positioning Reports can be found on the website	To inform national portfolio about pharmaceuticals and MD. To inform regional portfolio number of reports published/year = 25
Health technologies assessed	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems	A. Pharmaceuticals	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Other technologies	NO	Pharmaceuticals Medical technologies Other technologies
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Other technologies	Pharmaceuticals	Pharmaceuticals Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Recommendations on adoption of the technology included in reports	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	YES	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
The institution does re-assessments	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Situations where re-assessments are done	When significant new evidence or circumstances emerge At the request of a decision-maker For other reason(s)	When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker	At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
The institution receives submissions / dossiers from companies or others	NO	NO	NO
HTA work externally contracted / commissioned	NO	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Medical technologies Other technologies	No	Pharmaceuticals Medical technologies Other technologies
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Appendix tables

Table A1 Choice of assessment comparators

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Formal requirement to use comparator(s) that meet the criteria		At national level	No
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	
Medical devices and other non-pharmaceutical technologies			
Formal requirement to use comparator(s) that meet the criteria	no		no
Background of this formal requirement			internal guideline or procedure description

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology		Always	Always
Formal requirement to address some of the topics that are reflected in this domain		National	National Regional
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology		Always	Always
Formal requirement to address some of the topics that are reflected in this domain		National	National Regional
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		Always	Always
Formal requirement to address some of the topics that are reflected in this domain		National	National Regional
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse safety		Always	Always
Formal requirement to address some of the topics that are reflected in this domain		National	National Regional
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include other (non-clinical) domains		Yes	Yes
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Always		Always
Formal requirement to address some of the topics that are reflected in this domain	National		National Regional
Background of this formal requirement	Internal guideline or procedure description Legislation		Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always		Always
Formal requirement to address some of the topics that are reflected in this domain	National		National Regional
Background of this formal requirement	Internal guideline or procedure description Legislation		Internal guideline or procedure description Formal agreement with a decision-maker
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Sometimes (depending on what is assessed)		Always
Formal requirement to address some of the topics that are reflected in this domain	National		National Regional
Background of this formal requirement	Internal guideline or procedure description Legislation		Internal guideline or procedure description
Assessments analyse safety	Sometimes (depending on what is assessed)		Always
Formal requirement to address some of the topics that are reflected in this domain	National		National Regional
Background of this formal requirement	Internal guideline or procedure description Legislation		Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes		Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed
Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Assessments include other (non-clinical) domains		Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation		Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level Regional level Institutional level	National level Regional level
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	Internal guideline or procedure description
Quality Adjusted Life Years (QALYs) applied		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level	National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse patient aspects		Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level	National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse social aspects		Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level	National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments include a separate ethical analysis		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level	National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker	Internal guideline or procedure description
Assessments analyse legal aspects		Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		National level	National level Regional level
Background of this formal requirement		Formal agreement with a decision-maker	Internal guideline or procedure description

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Medical devices and other non-pharmaceutical technologies			
Assessments include other (non-clinical) domains	Yes		Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		National level Regional level
Background of this formal requirement	Legislation		Internal guideline or procedure description
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		National level Regional level
Background of this formal requirement	Legislation		Internal guideline or procedure description Formal agreement with a decision-maker
Assessments analyse patient aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No		National level Regional level
Background of this formal requirement			Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		National level Regional level
Background of this formal requirement	Legislation		Internal guideline or procedure description
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		National level Regional level
Background of this formal requirement	Legislation		Internal guideline or procedure description Formal agreement with a decision-maker
Assessments analyse legal aspects	Sometimes (depending on what is assessed)		Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		National level Regional level
Background of this formal requirement	Legislation		Internal guideline or procedure description
Defined requirements from commissioned work			
Templates for entering structured HTA information			
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates			
Major differences and commonalities			

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment		Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria		National level	no
Background of this formal requirement		Internal guideline or procedure description Formal agreement with a decision-maker	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		Not overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features			Our internal methodological guidelines are based on the EUnetHTA guidelines for REA
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies		Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	no		no
Background of this formal requirement			Internal guideline or procedure description
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping		Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	First four domains of the HTA Core model are covered in the HTA assessment reports according EUnetHTA guidelines, but the selection of assessment elements sometimes is depending of the research question is formulated.		The reason is that our methodological guidelines are based in Core Model

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Key deficiencies in available data considered	Medical Technologies Other technologies	Pharmaceuticals	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	At MOH request when there are uncertainties of safety issues. (one example could be cardiac medical procedures)	AEMPS will always take into account the quality of the study design and the risk of bias.	Our guidelines include the EUnetHTA recommendations about finding gaps of evidence

Appendix tables

Table A6 Evidence search and handling

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Confidential data from manufacturers accepted	Medical Technologies Other technologies	Pharmaceuticals	
If NO, why not?			

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Relevant hyperlink(s) describing the institution's formal role in HTA	https//www.msssi.gob.es http://www.isciii.es/ISCIII/es/contenidos/fd-el-instituto/fd-organizacion/fd-estructura-directiva/fd-subdireccion-general-investigacion-terapia-celular-medicina-regenerativa/fd-centros-unidades/agencia-evaluacion-tecnologias-sanitarias.shtml http://www.redets.msssi.gob.es/	https://www.aemps.gob.es/medicamentosUsoHumano/informesPublicos/home.htm	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	Royal Decree-Law 16/2012, of April 20, on urgent measures to ensure the sustainability of the National Health System and improve the quality and safety of its benefits. (Official Journal Nr 98 pp 31288) https://www.boe.es/diario_boe/txt.php?id=BOE-A-2012-5403		Real Decreto-ley 16/2012, de 20 de abril, de medidas urgentes para garantizar la sostenibilidad del Sistema Nacional de Salud: artículo 20. https://www.boe.es/diario_boe/txt.php?id=BOE-A-2012-5403 Orden de creación del Consejo de la Red de Agencias de Evaluación de España. Orden SSI/1356/2015, de 2 de julio, por la que se modifican los anexos II, III y VI del Real Decreto 1030/2006, de 15 de septiembre, por el que se establece la cartera de servicios comunes del Sistema Nacional de Salud y el procedimiento para su actualización, y se regulan los estudios de monitorización de técnicas, tecnologías y procedimientos. Ley 10/2013, de 24 de julio, por la que se incorporan al ordenamiento jurídico español las Directivas 2010/84/UE del Parlamento Europeo y del Consejo, de 15 de diciembre de 2010, sobre farmacovigilancia, y 2011/62/UE del Parlamento Europeo y del Consejo, de 8 de junio de 2011, sobre prevención de la entrada de medicamentos falsificados en la cadena de suministro legal, y se modifica la Ley 29/2006, de 26 de julio, de garantías y uso racional de los medicamentos y productos sanitarios. http://www.boe.es/boe/dias/2013/10/11/pdfs/BOE-A-2013-10581.pdf https://www.boe.es/boe/dias/2015/07/08/pdfs/BOE-A-2015-7629.pdf https://www.boe.es/boe/dias/2013/07/25/pdfs/BOE-A-2013-8083.pdf
Relevant hyperlink(s) to guidelines	Guideline for the elaboration and Adaptation of Rapid Health Technology Assessment reports. Puñal-Rioboo J, Baños Alavarez E, Varela Lema L, Castillo Muñoz MA, Atienza Merino G, Ubago Perez R et al on behalf Working Group (Guía para la elaboración y Adaptación de Informes Rápidos de Evaluación de Tecnologías Sanitarias- Satiago de Compostela: Axencia Galega para a Xestion do Conecemento en Saude. Unidad de Asesoramiento Científico-Técnico, Avalia-t Madrid. Ministerio de Sanidad, Servicios Sociales e Igualdad, 2016 http://www.redets.msssi.gob.es		Methodological guideline for the rapid assessment of new pharmaceuticals http://www.aetsa.org/download/publicaciones/Guia-Metodologica-informes-sintesis.pdf - Guideline for the elaboration and adaptation of rapid HTA reports http://avalia-t.sergas.es/DXerais/621/avalia-t201510_GuiaMetodologica.pdf

Appendix tables

Table A8 Contribution to HTA from outside the institution

Spain

Institution	**Health Technology Assessment Agency - Institute of health Carlos III (AETS-ISCIII)**	**Agencia Española de Medicamentos y Productos Sanitarios (AEMPS)**	**Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)**
Submissions / dossiers from companies or others	NO	NO	NO
Written requirements on how submissions should be done	NO	NO	NO
Relevant hyperlink(s)			
Templates for entering structured HTA information			
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution			
Major differences and commonalities of institution templates compared to those developed by EUnetHTA			
HTA work externally contracted / commissioned	NO	NO	NO
Defined requirements from commissioned work			
Templates for entering structured HTA information			
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates			
Major differences and commonalities			
Content of assessment reports from HTA bodies in other countries used	Medical technologies Other technologies	No	Pharmaceuticals Medical technologies Other technologies
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis G. Organisational aspects H. Patients and Social aspects I. Legal aspects J. Conclusions K. Recommendations		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Don't know	
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Don't know	
Medical devices and other non-pharmaceutical technologies			
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,	Don't know	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population,

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)	
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)	
Assessments analyse safety	Always	Sometimes (depending on what is assessed)	
Assessments include other (non-clinical) domains	Yes	Don't know	
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)	Always
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)	Always
Assessments analyse safety	Always	Sometimes (depending on what is assessed)	Always
Assessments include other (non-clinical) domains	Yes	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Assessments include other (non-clinical) domains	Yes	Don't know	
Assessments analyse cost, budget impact or include economic evaluation	Always		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)		
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)		
Assessments analyse patient aspects	Always		
Assessments analyse social aspects	Sometimes (depending on what is assessed)		
Assessments include a separate ethical analysis	Always		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)		
Medical devices and other non-pharmaceutical technologies			
Assessments include other (non-clinical) domains	Yes	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Never
Assessments analyse organisational aspects	Always	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Don't know	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Always	Don't know	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Always	Don't know	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Don't know	Sometimes (depending on what is assessed)

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know	
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies		Medical Technologies Other technologies
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies Other technologies		Medical Technologies Other technologies
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies		Medical Technologies Other technologies
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies		Medical Technologies Other technologies
The GRADE approach in routine use	Yes		Yes
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies		Medical Technologies Other technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies (including all types of medical devices and in vitro diagnostics		Medical Technologies Other technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals	Don't know	Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies		Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies		
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety	Technical characteristics of the technology Efficacy/effectiveness Safety Health problem Current technology use Other evidence (e.g. patient aspects)	Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	We provide HTA reports at Regional level (Canary Islands) and national level (Spanish HTA network "RedETS"). For the regional government, we use to provide 6-8 HTA reports annually focused on drugs and devices. For the Spanish Network (RedETS) we use to deliver 8-10 HTA reports annually, focused on "non-drugs technologies"	HTA reports commissioned by the Spanish Ministry of Health, Social Services and Equality in the frame of the REDETS (Spanish Network of Health Technology Assessment Agencies). HTA reports commissioned by the Catalan Health Department. Approx. 15 reports/year	HTA reports are mandatory by law (diagnostic tests, medical devices, screening, medical interventions and procedures, etc.) to support coverage decision making at the national and regional level. We carry out around 12-15 HTA reports a year destined to support regional and national decision making (reports commissioned to the Spanish HTA network by the Ministry of Health). Some are rapid reports that are not publicly available, others can be accessed on-line free of charge
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Medical technologies	NO	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Medical technologies	Pharmaceuticals Medical technologies Other technologies	Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES		YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Situations where re-assessments are done	At the request of a decision-maker		At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies	Don't know	NO
HTA work externally contracted / commissioned	NO	Medical technologies Other technologies	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies	Don't know	Medical technologies Other technologies
Content of foreign reports used	B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis H. Patients and Social aspects		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Appendix tables

Table A1 Choice of assessment comparators

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Formal requirement to use comparator(s) that meet the criteria	At national level		
Background of this formal requirement	Internal guideline or procedure description		
Medical devices and other non-pharmaceutical technologies			
Formal requirement to use comparator(s) that meet the criteria	at national level		at regional level
Background of this formal requirement	internal guideline or procedure description		formal agreement with a decision-maker

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	
Background of this formal requirement	Internal guideline or procedure description		
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse safety	Always	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	
Background of this formal requirement	Internal guideline or procedure description		
Assessments include other (non-clinical) domains	Yes	Don't know	
Medical devices and other non-pharmaceutical technologies			
Assessments include a description of the health problem and current use of technology	Always	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	National Regional
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	National Regional
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	National Regional
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Assessments analyse safety	Always	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National Regional	Don't know	National Regional
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Assessments include other (non-clinical) domains	Yes	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Assessments include other (non-clinical) domains	Yes	Don't know	
Assessments analyse cost, budget impact or include economic evaluation	Always		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)		
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse patient aspects	Always		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse social aspects	Sometimes (depending on what is assessed)		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		
Assessments include a separate ethical analysis	Always		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)		
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		
Background of this formal requirement	Internal guideline or procedure description		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Medical devices and other non-pharmaceutical technologies			**Medical devices and other non-pharmaceutical technologies**
Assessments include other (non-clinical) domains	Yes	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level	Don't know	National level Regional level
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)	Never
Assessments analyse organisational aspects	Always	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level	Don't know	National level Regional level
Background of this formal requirement	Internal guideline or procedure description		Formal agreement with a decision-maker
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Don't know	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		No
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse social aspects	Always	Don't know	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		No
Background of this formal requirement	Internal guideline or procedure description		
Assessments include a separate ethical analysis	Always	Don't know	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level Regional level		No
Background of this formal requirement	Internal guideline or procedure description		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Don't know	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National level		No
Background of this formal requirement	Internal guideline or procedure description		
Defined requirements from commissioned work		Don't know	
Templates for entering structured HTA information		Don't know	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates			
Major differences and commonalities			

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Pharmaceuticals			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	
Formal requirements to use data that meet the criteria	National level	Don't know	
Background of this formal requirement	Internal guideline or procedure description		
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know	
Explanation of how methodology requirements compare to HTA Core Model REA features	Most if not all procedures are the same. So, we did not have any problems at all in adopting EUnetHTA methodological recommendations.		
Medical devices and other non-pharmaceutical technologies			
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies
Formal requirements to use data that meet the criteria	National level	Don't know	no
Background of this formal requirement	Internal guideline or procedure description		
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Don't know	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Methods for REA are mostly the same, almost identical, consequently we did not have problems to adopt the EUnetHTA Core Model as reference standard for REA.		Our guideline is based on the EUnetHTA model for rapid relative assessment

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Don't know	Medical Technologies Other technologies
Examples of key deficiencies	-		quality of the data, key uncertainties with regards to patient selection, appropriate use of technology, etc.

Appendix tables

Table A6 Evidence search and handling

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies		
If NO, why not?			

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Relevant hyperlink(s) describing the institution's formal role in HTA		http://www.redets.msssi.gob.es/	http://www.xunta.gal/dog/Publicados/2007/20071211/Anuncio4E092_gl.html http://avalia-t.sergas.es/Paxinas/web.aspx?tipo=paxlct&idTax=12029)
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	http://www.gobiernodecanarias.org/boc/2014/251/002.html https://www.boe.es/buscar/doc.php?id=BOE-A-2013-10581		
Relevant hyperlink(s) to guidelines	Guía para la elaboración y adaptación de informes rápidos de evaluación de tecnologías sanitarias Seleccionar en el formulario. Agencia: AVALIA-T; Año de publicación: 2016 Guía para la evaluación económica aplicada a las tecnologías sanitarias Seleccionar en el formulario. Agencia: SESCS; Año de publicación: 2008 http://www.redets.msssi.gob.es/productos/buscarProductos.do?metodo=avanzada http://avalia-t.sergas.es/DXerais/621/avalia-t201510_GuiaMetodologica.pdf http://avalia-t.sergas.es/DXerais/621/avalia-t201510_GuiaMetodologica.pdf http://www.redets.msssi.gob.es/productos/buscarProductos.do?metodo=avanzada http://www3.gobiernodecanarias.org/sanidad/scs/contenidoGenerico.jsp?idDocument=4dd413bf-222a-11e0-964e-f5f3323ccc4d&idCarpeta=993a9b1d-7aed-11e4-a62a-758e414b4260	http://avalia-t.sergas.es/DXerais/621/avalia-t201510_GuiaMetodologica.pdf	http://avalia-t.sergas.es/Paxinas/web.aspx?tipo=paxtxt&idLista=4&idContido=621&migtab=621&idTax=12034

Appendix tables

Table A8 Contribution to HTA from outside the institution

Spain

Institution	**Servicio de Evaluación del Servicio Canario de Salud (SESCS)**	**Agència de Qualitat i Avaluació Sanitàries de Catalunya (AQuAS)**	**Galician Health Knowledge Agency (Avalia-t, ACIS)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies	Don't know	NO
Written requirements on how submissions should be done	NO		NO
Relevant hyperlink(s)			
Templates for entering structured HTA information	Medical technologies		
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO		
Major differences and commonalities of institution templates compared to those developed by EUnetHTA			
HTA work externally contracted / commissioned	NO	Medical technologies Other technologies	NO
Defined requirements from commissioned work		Don't know	
Templates for entering structured HTA information		Don't know	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates			
Major differences and commonalities			
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies	Don't know	Medical technologies Other technologies
Nature of content of foreign reports used	B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis H. Patients and Social aspects		A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness F. Ethical analysis G. Organisational aspects H. Patients and Social aspects

Sweden

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other Technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Other criteria
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies	Pharmaceuticals Medical devices Surgical and Medical Procedures Other technologies
Criteria for choice of comparator(s) in assessments	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Europe-wide agreed reference comparator The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Assessments include a separate ethical analysis	Always	Never
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Always
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Always	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Always

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Don't know
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Don't know

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies	NO
Plan for finding information when there is no published data	NO	NO
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies	NO
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies	
The GRADE approach in routine use	Yes	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	NO	Pharmaceuticals Medical Technologies
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Sources of evidence on the technology	A. scientific journal publications D. register data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted		All technologies
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)	Don't know

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	SBU's assessments are intended to support key decisions in Health and Medical care and they are used by decision-making authorities such as the National Board of Health and Welfare (NBHW), the Medical Products Agency (MPA) and the Dental and Pharmaceutical Benefits Agency (TLV). Some assessments are directly commissioned by the government (Ministry of Health and Social Affairs). Approx. 25 reports per year.	For Pharmaceuticals and consumable medical devices that are part of the high-cost benefit scheme MAH submits a reimbursement application to TLV. TLV assesses the application and presents a report to the Decision board. (74 decisions on new Pharmaceuticals and 51 on new consumables were taken in 2015.) Furthermore, TLV is commissioned to assess chosen hospital drugs (approx. 10 reports/year) and medtech Products (approx. 3 reports/year).
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems J. Other: Any intervention within the Social Services	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals Medical technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Recommendations on adoption of the technology included in reports	NO	Pharmaceuticals Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment		YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies
Situations where re-assessments are done	When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker	When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker When receiving a new submission for a manufacturer For other reason(s)

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
The institution receives submissions / dossiers from companies or others	NO	Pharmaceuticals Medical technologies
HTA work externally contracted / commissioned	Don't know	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies	NO
Content of foreign reports used	A. Health Problem and Current Use of the Technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis H. Patients and Social aspects J. Conclusions	

Appendix tables

Table A1 Choice of assessment comparators

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	No	
Background of this formal requirement		
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	no	no
Background of this formal requirement		

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	Don't know
Background of this formal requirement		
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional
Background of this formal requirement		Internal guideline or procedure description
Assessments include a description of technical characteristics of the technology	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Regional
Background of this formal requirement		Internal guideline or procedure description
Assessments include other (non-clinical) domains	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	Don't know
Background of this formal requirement		
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments include a separate ethical analysis	Always	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At national level
Background of this formal requirement		Internal guideline or procedure description Legislation

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At national level At regional level
Background of this formal requirement		Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At regional level At institutional level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At national level At regional level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At national level At regional level
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments include a separate ethical analysis	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	At national level At regional level At institutional level
Background of this formal requirement		Internal guideline or procedure description
Assessments analyse legal aspects	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At national level
Background of this formal requirement		Internal guideline or procedure description Legislation
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	no	no
Background of this formal requirement		
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features		
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	no	no
Background of this formal requirement		
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Don't know	Don't know
Explanation of how methodology requirements compare to HTA Core Model REA features		

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Examples of key deficiencies	Quality assessment always performed of included studies. If assessed as low quality - it will not be included in the analysis or used as a basis for the conclusions.	e.g. the data does not reflect the relevant patient population

Appendix tables

Table A6 Evidence search and handling

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Confidential data from manufacturers accepted		All technologies
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Relevant hyperlink(s) describing the institution's formal role in HTA		
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		
Relevant hyperlink(s) to guidelines	http://www.sbu.se/sv/var-metod/ (In Swedish) http://www.sbu.se/en/method/ (In English) Also other guiding documents such as our guide for the project process and guiding documents and templates and process descriptions for other products.	http://tlv.se/In-English/medicines-new/apply-for-a-price-or-reimbursement/ http://tlv.se/lakemedel/ansok-om-pris-eller-subvention/

Appendix tables

Table A8 Contribution to HTA from outside the institution

Sweden

Institution	**The Swedish Agency for Health Technology Assessment and Assessment of Social Services (SBU)**	**Dental and Pharmaceutical Benefits Agency (TLV)**
Submissions / dossiers from companies or others	NO	Pharmaceuticals Medical technologies
Written requirements on how submissions should be done	Don't know	Pharmaceuticals Medical technologies
Relevant hyperlink(s)		http://tlv.se/In-English/medicines-new/apply-for-a-price-or-reimbursement/ http://tlv.se/lakemedel/ansok-om-pris-eller-subvention/
Templates for entering structured HTA information		NO
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution		
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		
HTA work externally contracted / commissioned	Don't know	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies	NO
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation F. Ethical analysis H. Patients and Social aspects J. Conclusions	

United Kingdom

Issues in HTA research methodology

Table 1 Choice of assessment comparators

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	
Criteria for choice of comparator(s) in assessments	Other criteria	
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other technologies
Criteria for choice of comparator(s) in assessments	Other criteria	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	
Assessments include a description of technical characteristics of the technology	Always	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Assessments analyse safety	Always	
Assessments include other (non-clinical) domains	Yes	
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Always	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	
Assessments include a separate ethical analysis	Never	
Assessments analyse legal aspects	Never	
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Never
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Assessments include a separate ethical analysis	Never	Never
Assessments analyse legal aspects	Never	Never

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	Mostly overlapping

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	NO
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies	
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies	
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies	
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies	
The GRADE approach in routine use	No	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies	
Standard forms or tables available for evidence analysis and synthesis	Other technologies	
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	NO
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals Medical Technologies Other technologies
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies	Pharmaceuticals Medical Technologies Other technologies
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	NO
Transferability issues considered	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
Summary of findings section included in reports	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies

Issues in HTA research methodology

Table 6 Evidence search and handling

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies	
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)	Efficacy/effectiveness Safety Other evidence (e.g. patient aspects)

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	For each of our advice and guidance production programmes: MedTech innovation briefings approximately 36 per year Medical technologies evaluations pathways guidance approximately 7 per year Diagnostics assessment programme approximately 6 per year Interventional procedures programme approximately 35 per year Technology appraisals programme approximately 50 per year Highly specialised technologies programme approximately 3 per year Evidence summaries of new technologies 15-20 per year We also have programmes producing guidance and advice in clinical guidelines, public health and social care	Scottish Health Technologies Group (SHTG) have an open topic referral process for NHS Scotland. We undertake approx. 25 rapid HTA reviews per year. These are accompanied by SHTG Advice Statements that have 'required to consider status' for NHS Scotland decision makers. They are not mandatory.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions	B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures F. IT Systems, e-Health and m-health Technologies G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies	Medical technologies Other technologies

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Recommendations on adoption of the technology included in reports	NO	Medical Technologies Other technologies
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment		Medical Technologies
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Medical Technologies Other technologies
Situations where re-assessments are done	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges For other reason(s)	According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies	Medical technologies Other technologies
HTA work externally contracted / commissioned	NO	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	NO	Medical technologies Other technologies
Content of foreign reports used		B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation

Appendix tables

Table A1 Choice of assessment comparators

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	at national level	no
Background of this formal requirement	internal guideline or procedure description	

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a description of technical characteristics of the technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description Legislation	
Assessments analyse safety	Always	
Formal requirement to address some of the topics that are reflected in this domain	National	
Background of this formal requirement	Internal guideline or procedure description	
Assessments include other (non-clinical) domains	Yes	
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description Legislation	
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description Legislation	
Assessments include other (non-clinical) domains	Yes	Yes

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Always	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description Legislation	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a separate ethical analysis	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level	No
Background of this formal requirement	Internal guideline or procedure description	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a separate ethical analysis	Never	Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects	Never	Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	
Formal requirements to use data that meet the criteria	National level	
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	
Explanation of how methodology requirements compare to HTA Core Model REA features	The description of the technology and description of the health condition are introductory sections and no methodology is defined or expected in order provide this information in a NICE submission or assessment. In addition, there is no methodological requirements for the identification and assessment of information about organisational, patient and social aspects. For the clinical and safety sections, there is no requirement in TA for the company to carry out a systematic review of the technology, as long as the company sign a form to indicate that all data have been released. Systematic identification and assessment of the comparator interventions is still required. The methods of identifying safety data are more detailed and comprehensive in the EUnetHTA documents than are required in a NICE submission or assessment. The methods of identifying and assessing clinical data in EUnetHTA assessments use different sources and tools to those used by NICE, but the steps undertaken are similar. NICE has more methodology and guidance on making indirect comparisons, network meta-analysis, extrapolation of outcomes (so that these can then be used in economic evaluation) and developing de novo economic models than the HTA CORE model. NICE doesn't have screening within its remit, so the sections on methodology specific to screening are not relevant to NICE.	
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level	no
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Please see response to pharmaceuticals: a similar set of issues apply: The description of the technology and description of the health condition are introductory sections and no methodology is defined or expected in order provide this information in a NICE submission or assessment. In addition, there is no methodological requirements for the identification and assessment of information about organisational, patient and social aspects. For the clinical and safety sections, there is no requirement in TA for the company to carry out a systematic review of the technology, as long as the company sign a form to indicate that all data have been released. Systematic identification and assessment of the comparator interventions is still required. The methods of identifying safety data are more detailed and comprehensive in the EUnetHTA documents than are required in a NICE submission or assessment. The methods of identifying and assessing clinical data in EUnetHTA assessments use different sources and tools to those used by NICE, but the steps undertaken are similar. NICE has more methodology and guidance on making indirect comparisons, network meta-analysis, extrapolation of outcomes (so that these can then be used in economic evaluation) and developing de novo economic models than the HTA CORE model. NICE doesn't have screening within its remit, so the sections on methodology specific to screening are not relevant to NICE.	Different in that we always assess cost effectiveness unlike in REA model.

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Key deficiencies in available data considered	Pharmaceuticals Medical Technologies Other technologies	No
Examples of key deficiencies	In addition to formal assessment of internal validity, for technology appraisals companies are guided to include in their submission: A brief statement on the internal validity of the studies included in the clinical evidence base. In addition, the methods guide for TA provides the following guidance: The relevance of RCT evidence to the appraisal depends on both the external and internal validity of each trial. Internal validity is assessed according to the design and conduct of a trial and includes blinding (when appropriate), the method of randomisation and concealment of allocation, and the completeness of follow-up. Other important considerations are the size and power of the trial, the selection and measurement of outcomes and analysis by intention to treat. In technology appraisals, internal validity is also assessed in relation to the assumptions that are made about clinical outcomes included in the economic modelling for example extrapolation of effects. A similar set of considerations about internal validity will be made by other programmes	

Appendix tables

Table A6 Evidence search and handling

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Confidential data from manufacturers accepted	Pharmaceuticals Medical Technologies	
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Relevant hyperlink(s) describing the institution's formal role in HTA	https://www.nice.org.uk/about/what-we-do	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced	2015 No. 259 NATIONAL HEALTH SERVICE, ENGLAND http://www.legislation.gov.uk/uksi/2013/259/pdfs/uksi_20130259_en.pdf	
Relevant hyperlink(s) to guidelines	Technology Appraisals : methods and process guides https://www.nice.org.uk/process/pmg19/chapter/1-acknowledgements https://www.nice.org.uk/process/pmg9/chapter/foreword Highly specialised technologies interim methods and process statements https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-highly-specialised-technologies-guidance/Highly-Specialised-Technologies-Interim-methods-and-process-statements.pdf Technology appraisals and highly specialised technologies appeal process https://www.nice.org.uk/process/pmg18/chapter/foreword Evidence summaries of new medicines integrated process statement https://www.nice.org.uk/process/pmg11/chapter/1-introduction Medtech Innovation Briefings interim process and methods statemen https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-advice/Medtech-innovation-briefings/MIB-interim-process-methods-statement.pdf Medical technologies evaluation programme process guide https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-medical-technologies/Medical-technologies-evaluation-programme-process-guide.pdf https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-medical-technologies/Medical-technologies-evaluation-programme-methods-guide.pdf Diagnostics assessment programme manual https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-diagnostics-guidance/Diagnostics-assessment-programme-manual.pdf Interventional procedures programme manual https://www.nice.org.uk/process/pmg28/resources/interventional-procedures-programme-manual-pdf-72286722137797	http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg/about_the_group/policies_and_procedures.aspx

Appendix tables

Table A8 Contribution to HTA from outside the institution

United Kingdom

Institution	**National Institute for Health and Care Excellence (NICE)**	**Healthcare Improvement Scotland (SHTG)**
Submissions / dossiers from companies or others	Pharmaceuticals Medical technologies Other technologies	Medical technologies Other technologies
Written requirements on how submissions should be done	Pharmaceuticals Medical technologies	Medical technologies Other technologies
Relevant hyperlink(s)	Technology appraisals: https://www.nice.org.uk/process/pmg24/chapter/instructions-for-companies https://www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/nice-technology-appraisal-guidance Medical Technologies Evaluation Programme: https://www.nice.org.uk/About/What-we-do/Our-Programmes/NICE-guidance/NICE-medical-technologies-guidance/process-timeline	http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg/shtg_publications/imto.aspx Note: we accept submissions only for our IMTO reviews of innovative technologies.Our main rapid review HTA process involved review of literature.
Templates for entering structured HTA information	Pharmaceuticals Medical technologies	Medical technologies Other technologies
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Pharmaceuticals Medical technologies	Pharmaceuticals Medical technologies
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	The evidence submission template tool created by EUnetHTA is a collection of national evidence requirements, therefore the content broadly overlaps with the NICE submission templates for STA, HST and MTEP. Since the EUnetHTA submission template was completed, the NICE submission templates for STA have moved away from a question and answer structure and now provide general sections for company responses with a user guide to guide the information that should be included in each section. This change was made at the request of the national Industry body and means the structure of the NICE documents no longer look like the EUnetHTA evidence submission template, though the content remains similar. The section about the description of the health condition and use of the technology overlaps, but NICE doesn't request information about reimbursement and use in other countries as this isn't relevant to our decision-making. In addition, the STA submission template asks fewer specific questions than are included in the submission templates. The sections on the description of the technology broadly overlaps and clinical effectiveness broadly overlaps, but the level of information in the former and range of outcomes in the latter is more detailed in the EUnetHTA submission template (and in the HTA CORE model REA). As NICE do not consider safety except in so far as it may affect economic modelling, the safety section is in more detail than NICE would normally expect receive. For all our programmes that use submission templates the submission from the Industry must include economic information e.g. review of existing studies, economic modelling and budget impact that are not reflected in the EUnetHTA evidence submission template. In addition, our MTEP submission template includes information about the characteristics of diagnostic technologies that is not covered in the EUnetHTA template.	HIS/SHTG were involved in the JA2 medical device submissions working group with NICE. Our IMTO submission template is largely based on a summary of this template.
HTA work externally contracted / commissioned	NO	NO
Defined requirements from commissioned work		
Templates for entering structured HTA information		
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	NO	Medical technologies Other technologies
Nature of content of foreign reports used		B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness E. Costs and economic evaluation

Issues in HTA research methodology

Table 1 Choice of assessment comparators

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals Providing advice	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice Other Technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population	Other criteria
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators		
Criteria for choice of comparator(s) in assessments		

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Sometimes (depending on what is assessed)	Always
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology		
Assessments include a description of technical characteristics of the technology		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		
Assessments analyse safety		
Assessments include other (non-clinical) domains		

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Assessments analyse legal aspects	D) Never	Sometimes (depending on what is assessed)
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains		
Assessments analyse cost, budget impact or include economic evaluation		
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		
Assessments analyse patient aspects		
Assessments analyse social aspects		
Assessments include a separate ethical analysis		
Assessments analyse legal aspects		

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment		
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals	Pharmaceuticals
Plan for information retrieval	Pharmaceuticals	Pharmaceuticals
Plan for finding information when there is no published data	NO	Pharmaceuticals
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals	Pharmaceuticals
Formal tools or algorithms for evidence grading applied	NO	Pharmaceuticals
The GRADE approach in routine use		No
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	NO	Pharmaceuticals
Standard forms or tables available for evidence analysis and synthesis		Pharmaceuticals
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals	Pharmaceuticals
Key deficiencies in available data considered	Pharmaceuticals	Pharmaceuticals
Transferability issues considered	Pharmaceuticals	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals	NO

Issues in HTA research methodology

Table 6 Evidence search and handling

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data F. manufacturer data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data F. manufacturer data
Confidential data from manufacturers accepted	Pharmaceuticals	Pharmaceuticals
Evidence where systematic search strategies are applied	Efficacy/effectiveness	Efficacy/effectiveness Safety

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	SMC has a remit to advise Health Boards across NHS Scotland and their Area Drug and Therapeutics Committees (ADTCs) about the status of all newly licensed medicines, all new formulations of existing medicines and all new indications for established medicines. Number of full assessments/year: 75 full assessments	Medicines are funded by NHS Wales following guidance from two sources, the National Institute for Health and Care Excellence (NICE) and the All Wales Medicines Strategy Group (AWMSG). The All Wales Medicines Strategy Group (AWMSG) was established in 2002, as a statutory advisory Welsh Assembly-sponsored public body under the 1977 NHS Act, to provide advice on medicines management and prescribing to the Welsh Government's Minister for Health and Social Services in an effective, efficient and transparent manner. AWTTC provides professional secretariat, pharmaceutical, clinical and health economic support to AWMSG and its subgroups. AWTTC assess the majority of newly licensed medicines that will not be considered by NICE within 12 months of licence. Annually, approximately 44 technology appraisals are undertaken by AWMSG. AWTTC provides the HTA reports and of the 44 approximately 29 are for full submissions and 15 are limited submissions. An overview of the appraisal process and requirements for full and limited submissions is provided on the AWMSG website
Health technologies assessed	A. Pharmaceuticals	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	NO	NO
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals	NO
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	YES	
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	Pharmaceuticals	NO
The institution does re-assessments	NO	Pharmaceuticals
Situations where re-assessments are done		According to formal requirement to do re-assessments at intervals When significant new evidence or circumstances emerge At the request of a decision-maker When receiving a new submission for a manufacturer

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
The institution receives submissions / dossiers from companies or others	Pharmaceuticals	Pharmaceuticals
HTA work externally contracted / commissioned	NO	Pharmaceuticals
Technologies where content of assessment reports from HTA bodies in other countries is used	NO	Pharmaceuticals
Content of foreign reports used		E. Costs and economic evaluation K. Recommendations L. Other kind of information

Appendix tables

Table A1 Choice of assessment comparators

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	At national level	
Background of this formal requirement	Internal guideline or procedure description	
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria		
Background of this formal requirement		

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a description of technical characteristics of the technology	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	National	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description	Formal agreement with a decision-maker
Assessments analyse safety	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	National	National
Background of this formal requirement	Internal guideline or procedure description	Formal agreement with a decision-maker
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse safety		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include other (non-clinical) domains		

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	At national level	At national level
Background of this formal requirement	Internal guideline or procedure description	C) Formal agreement with a decision-maker
Quality Adjusted Life Years (QALYs) applied	Always	Sometimes (depending on what is assessed)
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse patient aspects	Always	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments analyse social aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	At national level	No
Background of this formal requirement	Internal guideline or procedure description	
Assessments include a separate ethical analysis	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Assessments analyse legal aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed
United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains		
Assessments analyse cost, budget impact or include economic evaluation		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied		
Assessments analyse organisational aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse patient aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse social aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments analyse legal aspects		
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Defined requirements from commissioned work		Pharmaceuticals
Templates for entering structured HTA information		Pharmaceuticals
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		NO
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion	Randomised controlled studies Non-randomized prospective studies Other kinds of observational studies Expert opinion
Formal requirements to use data that meet the criteria	National level	no
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Mostly overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	The first four domains of the HTA core model generally overlap with our clinical assessment. Differences are as follows: 1. Description and technical characteristics of technology (TEC): we include limited detail on technical characteristics of the medicine 2. Health problem and current use of the technology (CUR): this is included in our assessment but not in a separate section, rather throughout the document where issues are relevant 3. Clinical Effectiveness (EFF): we have a separate section for comparative efficacy. The clinical effectiveness section of our assessment summarises the limitations of the comparative efficacy data in terms of population under consideration, and assesses generalizability. 4. Safety (SAF): we report on key safety issues from the pivotal efficacy studies only. with some medicines safety issues may also be highlighted in clinical effectiveness section when relevant.	There is general guidance for the assessment. There are specific criteria (policies) for appraising life-extending, end-of-life medicines and, orphan, ultra-orphan medicines and medicines developed for rare diseases http://www.awmsg.org/industry_alldocs.html
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment		
Formal requirements to use data that meet the criteria		
Background of this formal requirement		
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)		
Explanation of how methodology requirements compare to HTA Core Model REA features		

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Key deficiencies in available data considered	Pharmaceuticals	Pharmaceuticals
Examples of key deficiencies	Limitations of data in population under consideration, issues with generalizability.	Long term data Active (relevant) comparator for NHS Wales Characteristic of the population (compared to NHS Wales) Specific policies (e.g. orphan/ultra-orphan medicines) to recognise and take into account where the evidence base is likely weaker for certain technologies

Appendix tables

Table A6 Evidence search and handling

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Confidential data from manufacturers accepted	Pharmaceuticals	Pharmaceuticals
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Relevant hyperlink(s) describing the institution's formal role in HTA	http://www.scottishmedicines.org.uk/files/submissionprocess/Working_with_SMC_July_2014.pdf	http://www.awmsg.org/industry_form_a.htmllll
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		
Relevant hyperlink(s) to guidelines		

Appendix tables

Table A8 Contribution to HTA from outside the institution

United Kingdom

Institution	**Scottish Medicines Consortium (SMC)**	**All Wales Therapeutics and Toxicology Centre (AWTTC)**
Submissions / dossiers from companies or others	Pharmaceuticals	Pharmaceuticals
Written requirements on how submissions should be done	Pharmaceuticals	Pharmaceuticals
Relevant hyperlink(s)	http://www.scottishmedicines.org.uk/Submission_Process/Submission_guidance_and_forms/Templates-Guidance-for-Submission_New Product Assessment Form	All appraisal documents http://www.awmsg.org/industry_alldocs.html Full submission (Form B) guidance notes http://www.awmsg.org/docs/awmsg/appraisaldocs/inforandforms/Form%20B%20guidance%20notes.pdf Limited submission (Form C) guidance notes http://www.awmsg.org/docs/awmsg/appraisaldocs/inforandforms/Form%20C%20guidance%20notes.pdf
Templates for entering structured HTA information	Pharmaceuticals	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	NO	NO
Major differences and commonalities of institution templates compared to those developed by EUnetHTA		
HTA work externally contracted / commissioned	NO	Pharmaceuticals
Defined requirements from commissioned work		Pharmaceuticals
Templates for entering structured HTA information		Pharmaceuticals
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates		NO
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	NO	Pharmaceuticals
Nature of content of foreign reports used		E. Costs and economic evaluation K. Recommendations L. Other kind of information

Norway

Issues in HTA research methodology

Table 1 Choice of assessment comparators

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Technologies considered potentially relevant comparators	Pharmaceuticals	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it The comparator is supported by evidence on its efficacy and safety profile for the respective clinical indication/population
Medical devices and other non-pharmaceutical technologies		
Technologies considered potentially relevant comparators	Pharmaceuticals Medical devices Surgical and Medical Procedures Other Therapeutic Technologies Providing advice	
Criteria for choice of comparator(s) in assessments	The comparator technology(ies) likely to be replaced by the assessed technology if proven inferior to it	

Issues in HTA research methodology

Table 2 Scope of assessments - clinical domains addressed

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Assessments include a description of technical characteristics of the technology	Always	Always
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Assessments analyse safety	Always	Always
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	
Assessments include a description of technical characteristics of the technology	Always	
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Assessments analyse safety	Always	
Assessments include other (non-clinical) domains	Yes	

Issues in HTA research methodology

Table 3 Scope of assessments - non-clinical domains addressed

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Assessments analyse patient aspects	Don't know	Always
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Assessments analyse legal aspects	Never	Never
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Assessments analyse social aspects	Never	
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	
Assessments analyse legal aspects	Never	

Issues in HTA research methodology

Table 4 Study designs considered relevant as sources of evidence

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	Mostly overlapping
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies,	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	

Issues in HTA research methodology

Table 5 Specific methodology issues in assessment and synthesis of evidence

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Assessments include a plan for methodologies to be applied	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Plan for information retrieval	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Plan for finding information when there is no published data	Pharmaceuticals Medical Technologies	Pharmaceuticals
Predefined description of how the assessment of the available evidence will be done	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Formal tools or algorithms for evidence grading applied	Pharmaceuticals Medical Technologies Other technologies	NO
The GRADE approach in routine use	Yes	
Plan for how evidence will be synthesised (e.g. evidence tables, meta-analysis, qualitative synthesis)	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Standard forms or tables available for evidence analysis and synthesis	Pharmaceuticals Medical Technologies Other technologies	NO
Surrogate endpoints may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies	Pharmaceuticals
Composite endpoints may be used when estimating effectiveness or risk	Don't know	Pharmaceuticals
Patient Reported Outcomes (PROs) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Health-Related Quality of Life measures (HRQoL) may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Indirect comparisons may be used when estimating effectiveness or risk	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Network meta-analysis may be used in estimations in indirect comparisons	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Relevant patient or population sub-groups considered	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Key deficiencies in available data considered	Don't know	Pharmaceuticals
Transferability issues considered	Don't know	Pharmaceuticals
Summary of findings section included in reports	Pharmaceuticals Medical Technologies	Pharmaceuticals

Issues in HTA research methodology

Table 6 Evidence search and handling

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Sources of evidence on the technology	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data	A. scientific journal publications B. grey literature (e.g. published reports) C. unpublished data D. register data E. administrative data F. manufacturer data
Confidential data from manufacturers accepted		Pharmaceuticals
Evidence where systematic search strategies are applied	Efficacy/effectiveness Safety	Efficacy/effectiveness Safety Current technology use

Formal context where HTA methodology is applied

Table 7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Norway		
Institution	**Norwegian Institute of Public Health (NIPH) health**	**Norwegian Medicines Agency (NoMA)**
Circumstances where HTA reports are provided - Relevant hyperlink(s) in Appendix Table A7	We are one of the actors in The National System for Managed Introduction of New Health Technologies within the Specialist Health Service in Norway. We deliver about 5-10 full health technology assessments and 5-10 single Technology assessments per year (rough estimate).	HTA unit at NOMA provides HTA reports to support decision making process at the national level for hospital trusts. In addition, we perform HTA for all drugs which are assessed for general reimbursement in out-patient setting. NOMA has the responsibility as a decision-maker for all drugs assessed for general reimbursement.
Health technologies assessed	A. Pharmaceuticals B. Therapeutic Medical Devices C. Diagnostic and Monitoring Medical Devices D. In Vitro Diagnostic Technologies E. Surgical and Medical Procedures G. Other Therapeutic Technologies H. Population Level Health Interventions I. Service Delivery Systems	A. Pharmaceuticals
Legal requirements defining how the scientific and technical content of HTA reports should be produced - Relevant hyperlink(s) to legal text(s) expressing this requirement in Appendix Table A7	Don't know	Pharmaceuticals
Guidelines for the production of HTA reports / information - Relevant hyperlink(s) to guidelines in Appendix Table A7	Pharmaceuticals Medical technologies Other technologies	Pharmaceuticals

Formal context where HTA methodology is applied

Table 8 Recommendations in reports and their relation to decision-making

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Recommendations on adoption of the technology included in reports	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Recommendations formally inform / support a defined decision maker with authority to decide on e.g. reimbursement / payment	NO	YES
Explicit distinction made between the scientific / technical assessment of the evidence and the appraisal / decision	NO	Pharmaceuticals
The institution does re-assessments	Pharmaceuticals Medical Technologies Other technologies	Pharmaceuticals
Situations where re-assessments are done	At the request of a decision-maker	When significant new evidence or circumstances emerge When a new relevant comparator emerges At the request of a decision-maker

Formal context where HTA methodology is applied

Table 9 Contribution to HTA from outside the institution

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
The institution receives submissions / dossiers from companies or others	Medical technologies	Pharmaceuticals
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies	NO
Technologies where content of assessment reports from HTA bodies in other countries is used	Pharmaceuticals Medical technologies Other technologies	NO
Content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness	

Appendix tables

Table A1 Choice of assessment comparators

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Formal requirement to use comparator(s) that meet the criteria	No	At national level
Background of this formal requirement		Internal guideline or procedure description Legislation Formal agreement with a decision-maker
Medical devices and other non-pharmaceutical technologies		
Formal requirement to use comparator(s) that meet the criteria	no	
Background of this formal requirement		

Appendix tables

Table A2 Scope of assessments - clinical domains addressed

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Assessments include a description of the health problem and current use of technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	No	National Local
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments include a description of technical characteristics of the technology	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	Don't know	National Local
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	Don't know	National Regional Local
Background of this formal requirement		Internal guideline or procedure description Legislation Formal agreement with a decision-maker
Assessments analyse safety	Always	Always
Formal requirement to address some of the topics that are reflected in this domain	Don't know	National Local
Background of this formal requirement		Internal guideline or procedure description Legislation Formal agreement with a decision-maker
Assessments include other (non-clinical) domains	Yes	Yes
Medical devices and other non-pharmaceutical technologies		
Assessments include a description of the health problem and current use of technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments include a description of technical characteristics of the technology	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse clinical effectiveness / efficacy (added therapeutic value)	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse safety	Always	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments include other (non-clinical) domains	Yes	

Appendix tables

Table A3 (1) Scope of assessments - non-clinical domains addressed

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Assessments include other (non-clinical) domains	Yes	Yes
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	Always
Formal requirement to address some of the topics that are reflected in this domain	No	At national level
Background of this formal requirement		Internal guideline or procedure description Legislation
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	Always
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain	No	No
Background of this formal requirement		
Assessments analyse patient aspects	Don't know	Always
Formal requirement to address some of the topics that are reflected in this domain		At national level
Background of this formal requirement		Internal guideline or procedure description Legislation
Assessments analyse social aspects	Never	Sometimes (depending on what is assessed)
Formal requirement to address some of the topics that are reflected in this domain		No
Background of this formal requirement		
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	Never
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse legal aspects	Never	Never
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		

Appendix tables

Table A3 (2) Scope of assessments - non-clinical domains addressed

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Medical devices and other non-pharmaceutical technologies		
Assessments include other (non-clinical) domains	Yes	
Assessments analyse cost, budget impact or include economic evaluation	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Quality Adjusted Life Years (QALYs) applied	Sometimes (depending on what is assessed)	
Assessments analyse organisational aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse patient aspects	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse social aspects	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Assessments include a separate ethical analysis	Sometimes (depending on what is assessed)	
Formal requirement to address some of the topics that are reflected in this domain	No	
Background of this formal requirement		
Assessments analyse legal aspects	Never	
Formal requirement to address some of the topics that are reflected in this domain		
Background of this formal requirement		
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	Pharmaceuticals Medical technologies Other technologies	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	NO	
Major differences and commonalities		

Appendix tables

Table A4 Study designs considered relevant as sources of evidence

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Pharmaceuticals		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies	Randomised controlled studies Non-randomized prospective studies
Formal requirements to use data that meet the criteria	Institutional level	National level
Background of this formal requirement	Internal guideline or procedure description	Internal guideline or procedure description Legislation
Methodology requirements for the clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	Mostly overlapping
Explanation of how methodology requirements compare to HTA Core Model REA features	Our assessments include a background section with a description of the technology, current use and the disease. We define PICO and assess the evidence for relevant outcomes. We follow Cochrane methodology	NOMA uses a template which is quite similar to HTA Core Model but it is less comprehensive. There are no regulations considering presentation of the clinical date in the submission. The description text in the Domains Technology and Health problem are expected to be much Shorter. Only information which is directly relevant for the indication in question should be submitted. The information should be limited to relevant population or even to a subgroup of patients if relevant. The Chapter Technology (pharmaceutical) should contain only a brief description of the pharmaceutical since all relevant information about the Technology is included in ERAR. NOMA is primary interested in Norwegian epidemiology data and clinical practice considering other treatment alternatives. NOMA has a requirement that the severity of the disease has to be assessed based on survival expectancy and prognosis, this is not required by EUnetHTA. The utilisation of the pharmaceutical in Norway is of interest.
Medical devices and other non-pharmaceutical technologies		
Sources of evidence included as relevant clinical evidence for the clinical assessment	Randomised controlled studies Non-randomized prospective studies,	
Formal requirements to use data that meet the criteria	Institutional level	
Background of this formal requirement	Internal guideline or procedure description	
Methodology requirements for clinical assessment compared to the HTA Core Model for Relative Effectiveness Assessment (REA)	Somewhat overlapping	
Explanation of how methodology requirements compare to HTA Core Model REA features	Our assessments include a background section with a description of the technology, current use and the disease. We define PICO and assess the evidence for relevant outcomes. We follow Cochrane methodology	

Appendix tables

Table A5 Specific methodology issues in assessment and synthesis of evidence

Norway		
Institution	**Norwegian Institute of Public Health (NIPH) health**	**Norwegian Medicines Agency (NoMA)**
Key deficiencies in available data considered	Don't know	Pharmaceuticals
Examples of key deficiencies		Examples of key deficiencies: poor transferability of the results to the Norwegian setting, use of surrogate endpoint or composite endpoint with uncertain correlation to survival outcomes or quality of life. Cross-over problems. Short follow-up and use of interim results.

Appendix tables

Table A6 Evidence search and handling

Norway		
Institution	**Norwegian Institute of Public Health (NIPH) health**	**Norwegian Medicines Agency (NoMA)**
Confidential data from manufacturers accepted		Pharmaceuticals
If NO, why not?		

Appendix tables

Table A7 Description of the institution in relation to decision making, technologies assessed, legal requirements and guidelines

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Relevant hyperlink(s) describing the institution's formal role in HTA	https://nyemetoder.no/english	
Relevant hyperlink(s) to legal text(s) expressing requirement that define how the scientific and technical content of HTA reports should be produced		https://legemiddelverket.no/english/price-and-reimbursement/application-for-reimbursement
Relevant hyperlink(s) to guidelines	http://www.kunnskapssenteret.no/verktoy/slik-oppsummerer-vi-forskning	www.noma.no www.legemiddelverket.no

Appendix tables

Table A8 Contribution to HTA from outside the institution

Norway		
Institution	**Norwegian Institute of Public Health (NIPH)**	**Norwegian Medicines Agency (NoMA)**
Submissions / dossiers from companies or others	Medical technologies	Pharmaceuticals
Written requirements on how submissions should be done	NO	Pharmaceuticals
Relevant hyperlink(s)		www.noma.no
Templates for entering structured HTA information	Medical technologies	Pharmaceuticals
Similarities and differences between templates and the EUnetHTA Evidence Submission Templates for Pharmaceuticals and Medical Devices clarified by the institution	Medical technologies	Pharmaceuticals
Major differences and commonalities of institution templates compared to those developed by EUnetHTA	One major difference is that we include economic evaluation.	Less comprehensive.
HTA work externally contracted / commissioned	Pharmaceuticals Medical technologies Other technologies	NO
Defined requirements from commissioned work	Pharmaceuticals Medical technologies Other technologies	
Templates for entering structured HTA information	Pharmaceuticals Medical technologies Other technologies	
Similarities and differences between your templates for commissioned work and the EUnetHTA Evidence Submission Templates	4) NO	
Major differences and commonalities		
Content of assessment reports from HTA bodies in other countries used	Pharmaceuticals Medical technologies Other technologies	
Nature of content of foreign reports used	A. Health Problem and Current Use of the Technology B. Description and technical characteristics of the technology C. Safety D. Clinical Effectiveness	

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