







PARIS, FRANCE I SPRING 2023

# **EU HTA** Regulation **Event**

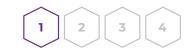
Are you ready for the implementation of the European Union (EU) regulation in 2025?

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# **Table of Contents**

Section 1: Introduction	03
Section 2: Objectives of the New Regulation	04
Section 3: Challenges & Opportunities of the New Regulation	08
Section 4: Additional Information and Acknowledgements	16





# Introduction

#### The New EU HTA Regulation

In December 2021, the European Commission announced the new regulation for health technology evaluation and contracted a consortium of 13 HTA agencies (EUnetHTA21) to replace Joint Actions EUnetHTA, a 20-year voluntary network of national authorities. Regulation (EU) 2021/2282 will be applied starting in January 2025 with oncology treatments and advanced therapy medicinal products (ATMPs) and will be fully implemented in all therapeutic areas by 2030.

#### **Stakeholder Discussion**

On 16 March 2023, Evidera held an in-person event, 'Are you ready for the implementation of the European HTA regulation in 2025?' in Paris, France. Stakeholders from life sciences and HTA bodies came together to discuss the implications and implementation of the new European HTA regulation.

Representatives from various areas of expertise within Evidera were in attendance to garner insight into the perspectives and understanding of manufacturers' and the Haute Autorité de Santé (HAS) — or French National HTA body — on the opportunities and challenges related to this new regulation.

This insights report provides a summary of the presentations and discussions during the event.



# **Objectives of the New Regulation**

Reduce duplication of efforts by national HTA bodies and ensure efficient use of resources.

#### The 5 Main Objectives for Implementation

- Save national HTA bodies and industry from duplicating efforts
  - Make vital and innovative health technologies more widely available to EU patients
- 3 Ensure efficient use of resources
  - 4 Strengthen the quality of the HTA across the EU
- Reassure business and ensure the long-term sustainability of EU HTA cooperation



# New EU HTA Regulation (EU) 2021/2282<sup>1</sup>

The HTAR will also **reduce duplication of efforts** for national HTA authorities and industry, **facilitate business predictability and ensure the long-term sustainability** of EU HTA cooperation.

It aims to **improve the evidence base** for assessing new health technologies [...] and to support EU Member States in taking **timely and evidence-based decisions** on patient access.

The new framework covers **joint clinical assessments**, **joint scientific consultations**, the identification of emerging health technologies, and voluntary cooperation.





### PICO: Population, Intervention, Comparator(s), Outcomes

The PICO framework underpins the Joint Clinical Assessments (JCAs) and will be the basis for the appraisal of evidence submitted by health technology developers (HTDs).

#### JCA and the PICO framework 1

- JCAs constitute a scientific analysis of the relative effects of the health technology assessed on the health outcomes against the chosen parameters which are based on the assessment scope
- The JCA starting point is the formulation of a defined research question, based on policy questions from member health care systems
- The translation of the policy question into a research question via a PICO helps to specify the data requirements and the framework for the assessment

# Population: Patients or population(s) in which the intervention under assessment should be used Intervention: Therapeutic, diagnostic or preventive intervention under assessment (incl. setting) Comparators: Alternative intervention(s) against which the intervention under assessment should be compared Outcomes: Outcomes of interest (if relevant incl. mimimum follow-up time)

1 https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32021R2282



## Mitigating PICO issues & strengthening the JCA dossier

A strategic and well-designed real-world evidence (RWE) plan can provide companies with an opportunity to mitigate PICO issues, limit uncertainty, and strengthen a JCA dossier.





#### RWE can represent a powerful tool to strengthen the JCA dossier

- In some circumstances, RWE generated with sound methodological design can be considered as an **external comparator group for single-arm trials**
- A variety of methodologies (e.g., systematic literature reviews, indirect treatment comparisons, statical analyses) are recommended to justify and supplement the JCA evidence base



#### **Industry needs to START PLANNING NOW to:**

- Determine expected data requirements for the PICO
- Review current evidence development plans for the JCA
- Plan for filling data gaps with new evidence generation and synthesis

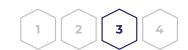




Uncertainties & challenges that remain to realise the key objective of improving timely & consistent patient access to technologies in the EU







# **Challenges & Opportunities** of the New Regulation

What opportunities and challenges for pharmaceutical companies might arise from the implementation of centralized European HTA? **Objectives Uncertainties/Challenges** Joint Scientific Consultations (JSCs) provide Limited early engagement & no requirement consolidated & non-binding confidential advice for a consolidated advice engagment Lack of consensus on appropriate methods still exist & methodological guidelines not sufficiently flexible Alignment of HTA across the EU for novel or pragmatic state-of-the-art methods Quality of HTA across the EU Applicability of the JCA at the national level Due to the overlap of European Medicines Agency Ensure efficient use of resource (EMA) & EU HTA deadlines, there may be challenges in competing for internal resources within a company Risk of longer time to access in some Reduce duplication for HTA markets since there are still national processes submissions & inequity in patient access for pricing & reimbursement



# What will be the role of patients in this

# new EU HTA perspective?

FUnetHTA and the FMA are including patient experts as part of the JSC procedure



Knowns

Companies are not able to bring their own patient experts into JSC meetings



Patient experts will be involved as part of the JCA procedure



Definition of patient "expert" as part of the guidance for interaction with patients and other experts



The level of engagement permitted by the current guidance on interaction with experts



Unknowns

Practicalities for meaningful patient involvement considering the tight timelines for JCA



What the actual guidance for interaction starting in 2025 will be (current deliverable only covers pilots)



## **Uncertainties Regarding Timelines**



#### **Challenges**

- Timelines dedicated to PICO scoping are still unknown; ability to respect and meet timelines from a resourcing perspective may be difficult, especially for small and mid-size pharmaceutical companies
- Uncertainties remain regarding the impact of the EUnetHTA assessment on the expected launch sequence in Europe



#### **Opportunities**

- Prioritize PICOs regarding their impact rather than developing a long list of PICOs to ensure the ability to meet timelines on the most crucial PICOs
- Conduct early scientific advice
  - Conducting national HTA/parallel EMA-EUnetHTA early scientific advice can be beneficial to discuss pivotal study design early in the development process (note: possible discrepancies between the insights from the formal advice and from the scoping session might occur)
  - Informal scientific advice, including key local stakeholders, should be conducted if formal advice is not possible



## **PICOs Scoping**



#### **Challenges**

- PICOs scoping will be conducted based on letter of intent which may differ from final EMA dossier
- Access to EMA dossier might lead to additional uncertainties raised by EUnetHTA affiliates and therefore increased number of PICOs



#### **Opportunities**

#### **Manufacturers**

- Engage discussions with EUnetHTA as soon as possible
- Identify differences between EMA dossier and letter of intent to best prepare potential questions raised by EUnetHTA affiliates

#### **EUnetHTA**

New European HTA regulation represents an opportunity for the EU to more quickly adapt data requirements for market access of the latest therapeutic innovations

- Separate from JSC, non-product-specific approaches should be discussed to accept new outcomes in specific diseases
- Separate from JSC, scientific debates will take place in order to identify new ways to collect RWF and new outcomes



## **Local Adaptations & Internal Organization**



#### **Challenges**

- JCA is unlikely to include value judgement on clinical efficacy and safety (although inclusion is perceived favorably by a few member states); this may lead to further delays due to local adaptation, especially in specific European markets with well established national HTA assessment methods
- Discrepancies still remain between European member states regarding methodological requirements
- Possible delays in the launch sequence due to mandatory national adaptations and additional issues raised at the national level
- No information on the future local HTA dossier templates (e.g., HAS dossier) has been provided



#### **Opportunities**

- Gather relevant country perspectives from global and country teams to provide input at key governance points to R&D for Phase II/III study design
- Global teams are expected to develop the dossier with support from key European markets' affiliates in order to anticipate further national adaptation needs and save time
- Further discussion between manufacturing companies and national HTA bodies, such as HAS, would be welcome to best prepare affiliates on the future national process starting from 2025



## Lack of Involvement by HTDs



#### **Challenges**

- The opportunity of a hearing to directly communicate with the EUnetHTA is absent from the process, reducing potential insights that could optimize planning
- Limited number of consultation slots and absence of assistance to HTDs throughout the process could lead to mistakes and inefficiencies that could delay access to medicines
- Final decision-making stakeholders, i.e., payers, are not consulted during the process. Lack of transparency and national price negotiations could lead to delayed access at the national level



#### **Opportunities**

- Consider national Early Access Program request simultaneously with the EUnetHTA JCA
  - This could be beneficial in identifying insights regarding any challenges or opportunities for improvement related to a product's clinical data package that could be incorporated into a future EU evaluation



# Key issues identified for successful implementation & main opportunities for manufacturers

# The main challenges for implementing EU HTA Regulation <sup>1</sup>

- Lack of willingness to engage with Health Technology Developers
  - 2 Lack of pragmatism in the methodology
- 3 Potential for very high number of PICOs
  - 4 Lack of clarity on stakeholder engagement
- 5 Potential lack of confidentiality
  - Delayed assessment/access due to resources constraint/national specificities
- Absence of involvement from the United Kingdom (UK)

## The main opportunities for manufacturers

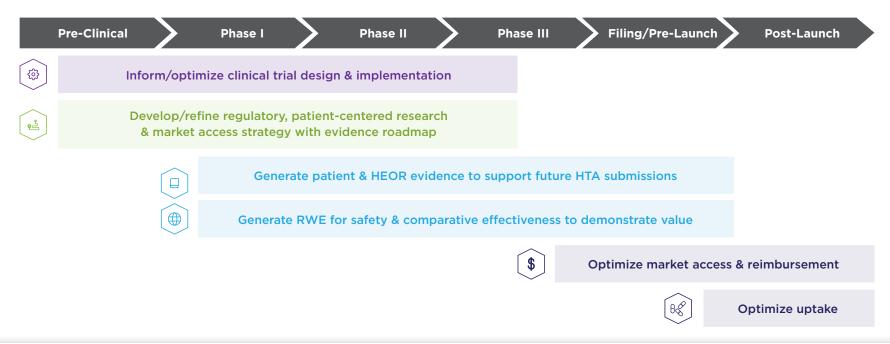
- Anticipate the PICO scoping in current clinical development strategy
  - Encourage patient engagement to identify appropriate PICOs
- Perform informal/formal scientific advice as early as possible
  - Encourage collaboration between internal and external stakeholders, both at global and national level
- Apply for Innovative Licensing and Access
  Pathway (ILAP) to dispose of enhanced regulatory and market access input



<sup>1</sup> https://ec.europa.eu/commission/presscorner/detail/en/ip\_21\_6771; Accessed December 28, 2022.

## **Evidera, a PPD Business**

Providing consulting and scientific advisory solutions across the life cycle.



Enhancing Clinical Study Design	Strategic Consulting	Generating Evidence	Optimizing Access & Uptake
<ul> <li>Integrated scientific advice</li> <li>Patient burden</li> <li>Implementation science</li> <li>Exit interviews</li> <li>Patient engagement</li> <li>Clinical trial &amp; disease simulation</li> </ul>	<ul> <li>Regulatory strategy</li> <li>Development consulting</li> <li>Integrated evidence generation plans</li> <li>Global pricing and access strategy</li> <li>Global HTA strategy</li> <li>Patient-centered research strategy</li> </ul>	<ul> <li>Evidence synthesis</li> <li>Health economic modeling</li> <li>Health utilities studies</li> <li>Technology validation studies</li> <li>Preference elicitation</li> <li>RWE &amp; data analytics</li> <li>Clinical outcome assessment/ patient-reported outcome instrument development</li> </ul>	<ul> <li>Dossiers &amp; submission support</li> <li>Manuscripts &amp; publications</li> <li>Professional review support</li> <li>REMS documents, protocol, study reports</li> <li>Standard/global response letters</li> <li>Product FAQs</li> <li>Local access strategy</li> </ul>

Abbreviations: HEOR: Health Economics and Outcomes Research; COA: Clinical Outcomes Assessment; PRO: Patient-reported Outcomes



# Thank you!

We greatly appreciate the contributions of time and perspectives provided by our industry and HTA body experts.



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Please note the final information included in this report reflects a summary of the meeting discussions and is not intended to reflect specific opinions of all participants.









# Interested in learning more?

Don't hesitate to contact our experts.

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