

PP123 Fair Drug Pricing: Review Of Literature And Models

Olena Wagner (pnhukraine@gmail.com) and Samia Hurst

Introduction. Constantly rising costs of pharmaceuticals and biologics spurred a debate in recent years leading to increasingly persistent public calls to overhaul the existing system of pricing and distributing health technologies. The COVID-19 pandemic exposed the controversies of the current model of access to health commodities in all evidence when the existing discrepancy between the global supply and the global demand in health technology can be viewed as an illustration of a conflict between the neoliberal free market ideal of health innovation genesis and ownership and the original democratic principles of what would now be called sustainable human development.

Methods. Presented here is an integrative literature review of over 265 publications in peer-reviewed journals on Pubmed and Web of Science, academic and “grey” literature, mainly publicism, published in English. We reviewed and analyzed included literature for the purposes of identifying leading ideas with regards to ethical frameworks for evaluating or referencing value for pricing health commodities.

Results. Seven drug pricing models were analyzed in terms of them satisfying the three most common criteria of price adequacy – its fairness (viewed from the point of view of main schools of ethical thought), accountability-for-reasonableness (including transparency of decisions, relevance, existing mechanisms of revisions and governance to ensure compliance), and price functionality. One of the central ideas under controversy is value, its relative character for different contexts due to the high weight of the willingness-to-pay in the value-based health technology assessment (HTA) decisions and the relative value of money, and the attempts to quantify value in a universal way for institutions, patients, and originators.

Conclusions. While the review scored the pricing models on their “public fairness” with volume-based rather than value-based pricing models leading the rating, the main conclusion of the review is that the main meaningful divide is between value creation and value extraction when pricing health innovation.

PP124 The Importance Of Flexible PPI Approaches: Case Study On Flash Glucose Monitoring

Alice Evans (alice.evans8@wales.nhs.uk),

Jenni Washington and David Jarron

Introduction. Health Technology Wales (HTW) review guidance 3 years after publication to establish if reassessment is warranted because, for example, new evidence has become available. Since the publication of guidance on flash glucose monitoring (FGM) in 2018, HTW introduced a patient and public involvement (PPI) process

with novel approaches to flexible engagement. This enabled HTW to include three streams of patient evidence into the review of FGM devices.

Methods. HTW’s Patient and Public Involvement Standing Group (PPISG) considered appropriate methods of engagement using the HTW Patient and Public Involvement Mechanism Tool. This tool considers the nature of the health technology, the presence of appropriate patient organizations and questions that can be put to patients, as well as other approaches for obtaining patient evidence.

Results. HTW contacted Diabetes Cymru and met with them to discuss contributing to the appraisal of FGM devices. Diabetes Cymru produced a patient submission summarizing the experiences of their patient network, with particular focus on the expansion of the technology to closed-loop insulin systems. Diabetes Cymru later attended HTW’s Appraisal Panel committee and gave a presentation. Additionally, HTW conducted a patient evidence literature review. This review summarized published qualitative studies on a range of perspectives, including carer perspectives, family perspectives, children and adolescences perspectives as well as considerations from specific environments, such as schools, workplaces, homes, care homes and communities. In addition to new clinical and cost effectiveness evidence, this PPI input was used to formulate new guidance recommending more widespread adoption of FGM.

Conclusions. The introduction of flexible approaches to PPI enabled HTW to gain patient evidence from multiple sources. This ensured greater patient representation and a more detailed understanding of the role of FGM devices across different patient communities. This added considerable richness to the patient evidence, which is vital to understand the everyday impacts of FGM and its use amongst patients. Combining flexible PPI with the new clinical and cost effectiveness evidence resulted in a change in the original guidance recommendation.

PP125 Economic Evaluation Of Molecular Diagnostics – A Review And Future Directions

Janet Bouttell (Janet.Bouttell@glasgow.ac.uk),

Robert Heggie, Karin Oien, Amy Romaniuk,

Harper VanSteenhouse and Stephan von Delft

Introduction. It has been suggested that health economists need to adapt their methods in order to meet the challenges of evaluating molecular diagnostics. The aim of this review is to categorize and critically examine the challenges and methodological developments identified from the literature and to suggest how such challenges may be addressed.

Methods. We identified challenges and suggested methodological improvements using a systematic rapid review of the literature. We categorized challenges into those common to all economic evaluations, those common to all diagnostic technologies and those relevant to molecular diagnostics. We assessed whether development in the methods of economic evaluation or alternative action was required.