Realising the Potential of Real-World Evidence to support payers' decisions

Jo De Cock, CEO-INAMI/RIZIV

22 September 2020

INAMI-RIZIV

RWE4Decisions REAL WORLD EVIDENCE

Foundations for consideration of RWE – INAMI papers

2016	2017	2018	2019/2020
The use of real world data throughout an innovative medicine's lifecycle	Outcomes based pricing and reimbursement of innovative medicines with budgetary limitations	TRUST4RD – Tool for Reducing Uncertainties in the evidence generation for Specialised Treatments for Rare Diseases	Real-world evidence to support Payer/HTA decisions about highly innovative technologies in the EU – actions for stakeholders

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TRUST4RD
Tool for Reducing Uncertainties in the evidence generation for Specialised Treatments for Rare Diseases

Official Journal of

HTAi
HEALTH TECHNOLOGY ASSESSMENT INTERNATIONAL

Why we launched this initiative ?

Although payers still have concerns and stay cautious, there is increasing interest regarding the potential of RWD/RWE to support their decisions about highly innovative technologies for different reasons, such as:

- **reducing uncertainties** at the moment of market launch especially when clinical results are insufficient to respond to payers needs;
- **narrowing the gaps** between projected outcomes and clinical benefits in practice;
- **pressure** as a consequence of the use of fast track access procedures;
- requirements for **outcome oriented managed entry agreements** taking into account patient experience;
- realising the opportunities offered by **digitalization** (“science progresses faster than the “system”)
- **policy initiatives** (e.g. EU Pharmaceutical Strategy: “the regulatory framework may not be fully adjusted for the use of real world data.”; EU Health Data Space) ?

Policy context

Finnish Presidency Council Conclusions 'The Economy of Wellbeing' (October 2019): *"For the purpose of advancing public health, research and innovation, it is essential to* ***make use of the potential of health and social data while fully respecting applicable data protection rules and ethical principles****".*

Croatian Presidency Council Conclusions 'Shaping Europe's Digital Future' (June 2020): *UNDERLINES that the development of a* ***European Health Data Space*** *by the Commission together with the Member States' health authorities holds potential to* ***facilitate the development of effective prevention, diagnosis, treatments and care.*** *It may also ensure more cost-effectiveness and workflow optimisations in health care, thus leading to* ***improved health outcomes for patients, better epidemiological surveillance systems, and longer-term sustainability of health systems****."*

EU Pharma Strategy Roadmap (June 2020): *"Innovative technologies such as Artificial Intelligence (AI) as well as access and analysis of data collected from clinical experience* ***(real world data)*** *are changing the way products are developed and have the potential to transform therapeutic approaches and business models"*

Which answers are needed ?

Natural history

Long-term safety

Economic modelling

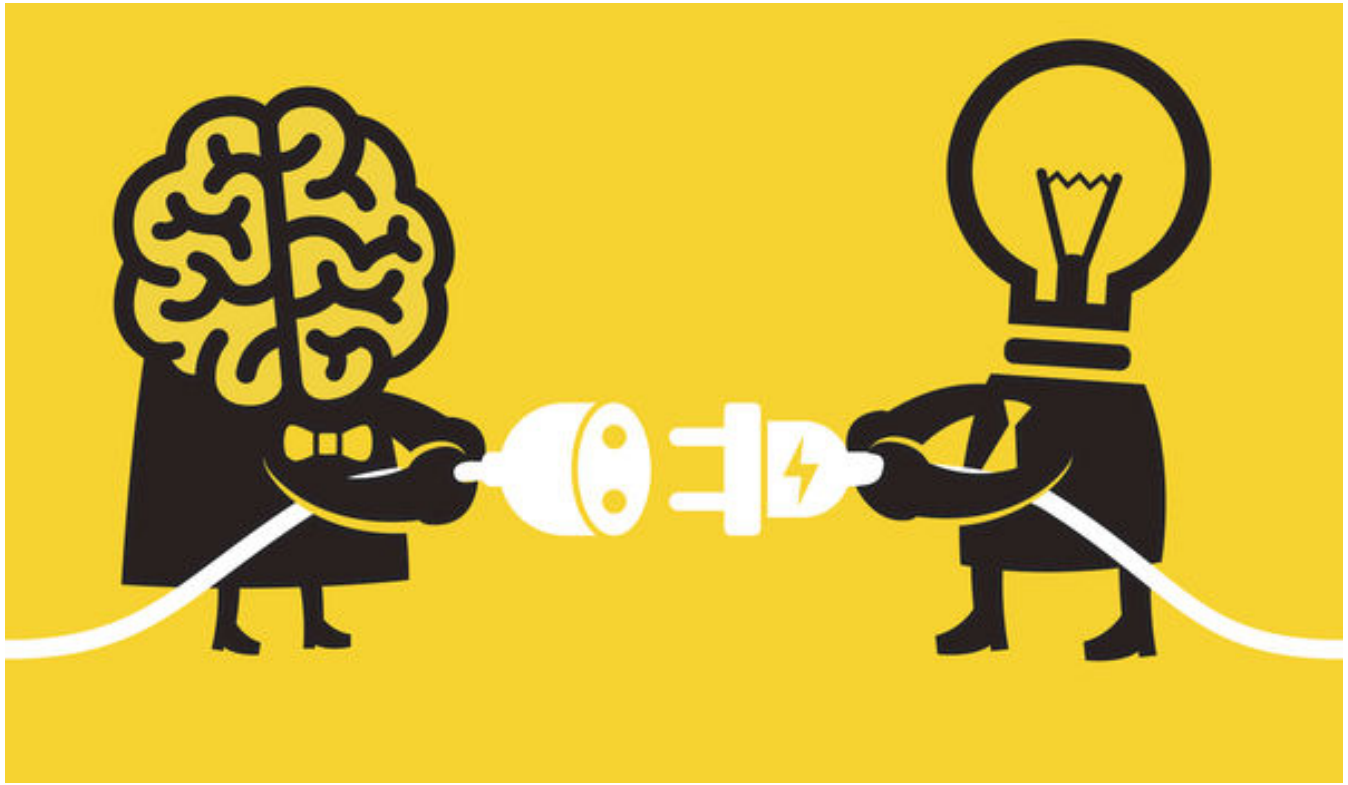
*But can we AGREE **how** RWD might support pricing and reimbursement decisions?*

Benefits outside initial indication

Main evidence of clinical effectiveness

What do we need to make progress ?

Co-creation with different stakeholders !



What do we need to make progress ? Stakeholders views

- **Regulators**: Evidentiary standards that take account of context (population covered, data that are quality assured, agreement on core data sets, validity and consistency of analyses across sources)
- **HTA:** Identify data gaps that may be resolved by real world evidence, development of analytics expertise, capacity, tools and infrastructure to support cross organisational sharing of real world evidence plans and post marketing evidence generation
- **Clinicians:** Patient centered approaches sharing data across Europe (e.g. ERN registries)
- **Patients:** Patient involvement (consent, avoidance of duplication, monitoring of inequalities in access)
- **Manufacturers:** Overcome barriers that hinder data collection use

What do we need to make progress ? Key principles

VISION

Stakeholders agree **what** real-world data (RWD) can be collected for highly innovative technologies
– **when**, **by whom** and **how** –
in order to generate real-world evidence (RWE) that informs decisions by healthcare systems, clinicians and patients

KEY PRINCIPLES

What do we need to make progress ? A practical proposal: a learning network

Example of outputs of a Learning Network on RWE:

Share case studies to develop learnings on how RWE may support HTA/payer decisions (continuing current pilots)

Provide guidance on how patient experts can be supported to co-design RWE studies

Enable multi-stakeholder* iterative dialogues throughout the lifecycle of a technology to discuss evidence generation plans

Enable the attainment of common goals, develop network members' own work, skills and capabilities

In order to deliver on the goals, the Learning Network must be:

- owned by a public institution
- enabling the multi-stakeholder* interaction
- sustainable through long-term funding

**Policy-makers, HTA bodies, payers, regulatory agencies, clinicians, patient groups, industry and academic experts.*

Panel 2

RWE4Decisions REAL WORLD EVIDENCE

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IMPACT HTA

How to Realise a Learning Healthcare System?

How a learning network should involve all stakeholders and role of the "Data Analysis and Real-World Evidence Network"

Karen Facey, University of Edinburgh

IMPACT HTA is funded by an EC H2020 grant: WP10 is Developing an Appraisal Framework for Rare Disease Treatments

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Learning Healthcare System

The English NHS Long Term Plan places **digital development at the heart of steps to improve health and care, and to deliver services in a sustainable way.**

More than merely digitising current ways of working, this requires **data to be used to generate evidence that transforms and improves services.**

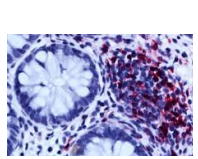
A 'learning health system' continuously analyses data which is collected as part of routine care to monitor outcomes, identify improvements in care, and implement changes on the basis of evidence.

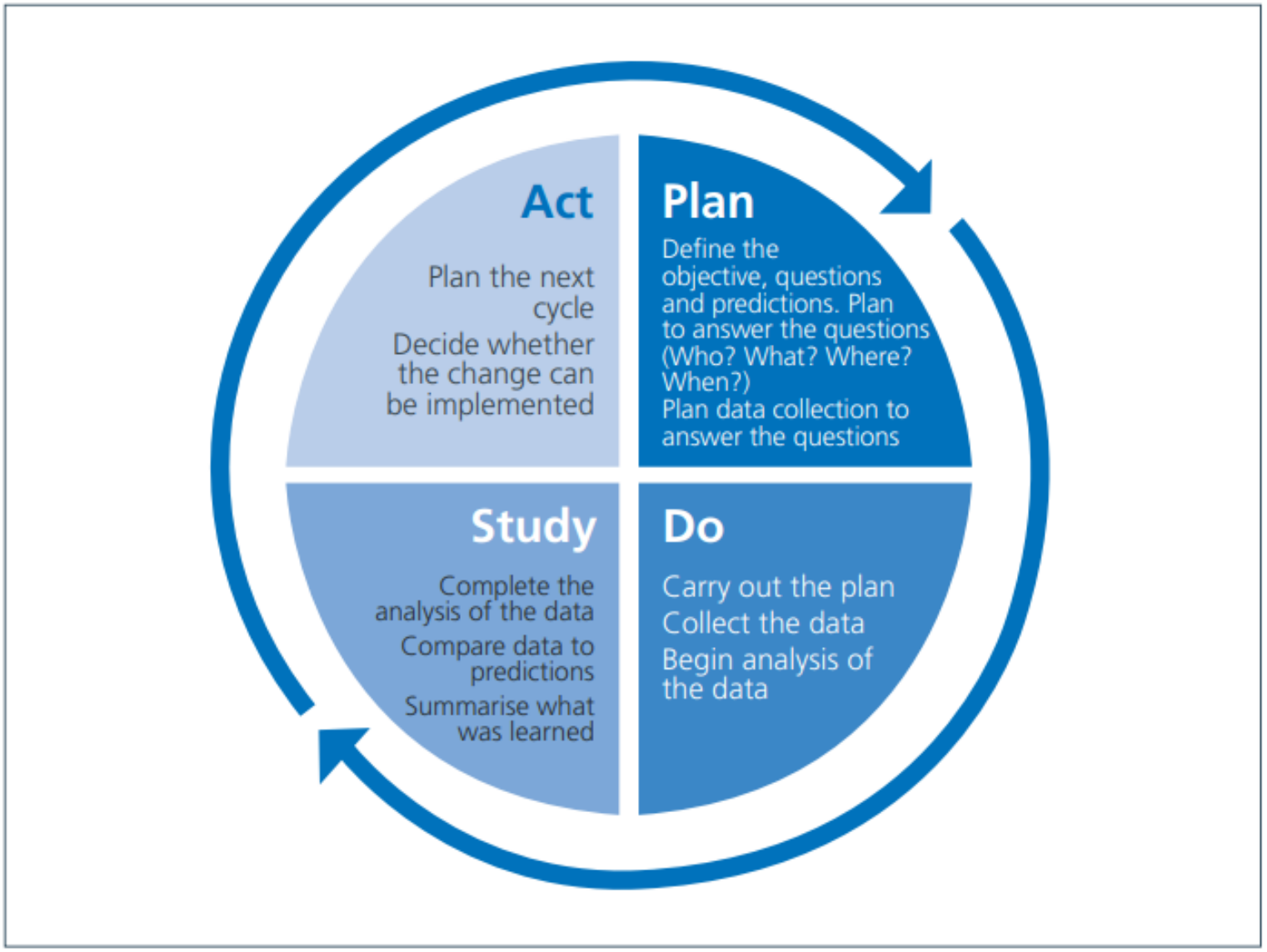
https://www.nuffieldtrust.org.uk/research/what-can-the-nhs-learn-from-learning-health-systems

Scotland's data assets

Rich national data and tissue assets, linked via CHI

World class health and informatics research capability




Act
Plan the next cycle
Decide whether the change can be implemented
Plan
Define the objective, questions and predictions. Plan to answer the questions (Who? What? Where? When?)
Plan data collection to answer the questions
Study
Complete the analysis of the data
Compare data to predictions
Summarise what was learned
Do
Carry out the plan
Collect the data
Begin analysis of the data

Highly Innovative Technologies

Curative!

"Transformative"

- Complex delivery
- Who to treat? (For how long?)
- Real world and long term effectiveness?

Rare diseases

- Small populations (85% <1/million)
- Severe, life threatening, childhood onset
- Disease not well understood
  - Diagnosis, natural history, best management
  - Outcomes that matter to patients

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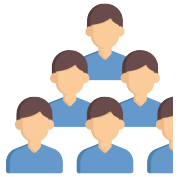

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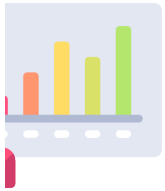

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International Journal of Technology Assessment in Health Care

cambridge.org/thc

Policy

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Real-world evidence to support Payer/HTA decisions about highly innovative technologies in the EU—actions for stakeholders

Karen M. Facey[1], Piia Rannanheimo[2], Laura Batchelor[3], Marine Borchardt[3] and Jo de Cock[4]

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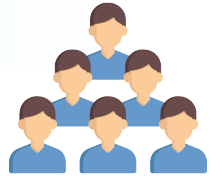
Objectives. There are divergent views on the potential of real-world data (RWD) to inform decisions made by regulators, health technology assessment (HTA) bodies, payers, clinicians, and patients. This RWE4Decisions initiative explored the particularly challenging setting of highly innovative technologies, which require Payers/HTAs to make decisions on a small evidence base with major uncertainties. The aim was to go beyond strategic intent to consider actions that each stakeholder could take to improve use of RWD in this setting.
Results. Case studies of recent Payer/HTA decisions about highly innovative technologies were considered in light of recent international initiatives about RWD. This showed a lack of clarity about the Payer/HTA questions that could be answered by RWD and how the quality of real-world evidence (RWE) could be assessed. All stakeholders worked together to create a vision whereby stakeholders agree what RWD can be collected for highly innovative technologies based on principles of collaboration and transparency. For each stakeholder group, recommended actions to support the generation, analysis, and interpretation of RWD to inform decision making were developed. For HTA bodies, this includes cross border HTA/regulatory collaboration to agree RWD requirements over the technology life cycle to inform initial recommendations and reassessment, data analytics methods development for HTA, and promotion of transparency in RWE studies.
Recommendations. Stakeholders need to collaborate on demonstration projects to consider how RWE can be developed to inform healthcare decisions and contribute to a learning network that can develop systems to support a learning health system and improve patient outcomes through best use of RWD.

RWE4Decisions REAL WORLD EVIDENCE

To European or multi-country HTA or payer collaboratives (1/2)



- Collaborate with academia to better understand the potential of new statistical, econometric and modelling approaches to develop robust RWE for use in Payer/HTA decisions.
- Encourage industry to engage in multi-stakeholder dialogues to discuss evidence generation plans including RWD collection.
- Use joint processes (multi-HTA and with regulators) to document evidence gaps and key uncertainties in the clinical (and economic) evidence and identify which areas might be addressed by patient-relevant RWE.
- Document the regulatory post-licensing evidence generation (PLEG) obligations and the additional Payer/HTA PLEG needs. Establish what PLEG is needed on national, regional, and European level.

To European or multi-country HTA or payer collaboratives (2/2)

- For individual HTAs, agree the core dataset that is required for HTA reappraisal, within a reasonable timeframe, so that common data collection protocols can be agreed across countries and joint analyses performed.
- Engage with the clinical community (particularly ERNs) to avoid conflicting or duplicative data collection.
- Develop methods guides to show how RWE will be critically assessed and how the validity and applicability of RWD/RWE from another country/health setting will be determined.
- Encourage the development of a public portal registering RWE studies that may be used in decision-making and when fully established only accept studies previously registered and reported on the portal.

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Learning by Doing

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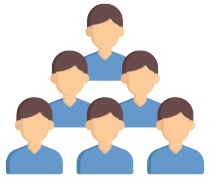
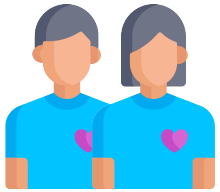


Payers/HTA bodies (European & national)



Patient groups

Multi-stakeholder workshop to provide advice to companies on real-world evidence generation plans

Pharmaceutical Industry

Registry-holders

Clinicians

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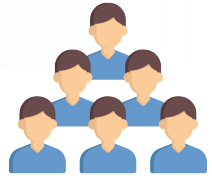
To European or multi-country HTA or payer collaboratives (1/2)



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To Pharmaceutical Industry

- Create a RWE generation plan early in development, which addresses essential data elements for HTA not covered in the clinical trial program and that might be studied in a real-world setting.
- **Discuss the RWE generation plan at various stages throughout the technology life cycle including regulators, payers, HTA bodies, clinicians and patients whenever possible.**
- **Ensure the study (protocol) and statistical analysis plans for RWE studies that are answering major HTA questions are available to HTA bodies to provide transparency about the methods used to obtain and analyse data.**
- Support the development of a public portal that provides details about the design and results of major RWE studies (ala RCT registries), particularly hypothesis evaluating treatment effect (HETE) studies.
- **Use reliable data collection methods for RWD,** including ehealth and digital tools and develop best practices as digital approaches evolve.
- Drive non-competitive, multi-company and multi-stakeholder collaborations about the development of robust RWE for diseases treated by highly innovative technologies.
- Enact recommendations from the ISPOR and RWE Transparency Partnership.

RWE4Decisions Transparency

- Use clear processes for managing conflicts of interest among stakeholders
- Clarify what questions RWD may be able to address in regulatory and Payer/HTA decisions
- Publish methods for critical assessment of RWE
- Share information about RWD studies underway across different jurisdictions to enable data amalgamation

RWE4Decisions Transparency

- Use clear processes for managing conflicts of interest among stakeholders
  - ***Even "light touch processes" or "demonstration projects" need to be carefully managed when confidential information from drug development is involved***

- Clarify what questions RWD may be able to address in regulatory and Payer/HTA decisions
  - ***Challenges faced by industry***
  - ***Clarify decision-maker requirements (agreements and diversity)***

- *Publish methods for critical assessment of RWE*
- *Share information about RWD studies underway across different jurisdictions to enable data amalgamation*

RWE4Decisions Collaboration

- Iterative dialogues should involve all stakeholders throughout the lifecycle of a technology to discuss plans for evidence generation and the potential for RWE to resolve important decision uncertainties
  - ***Who should organise the dialogues?***
  - ***What questions and stakeholders at what point?***

- RWE generation is a shared responsibility & should be pre-specified & planned with all stakeholders
  - ***How do we identify what really matters to each stakeholder?***
  - ***How can we agree a common core dataset for an international data collection initiative and support appropriate data access across borders?***
  - ***Who pays, who owns, who can analyse?***

RWE4Decisions Collaboration

Each stakeholder needs to take responsibility
for aspects they can influence
and work collaboratively with other stakeholders
to achieve the common goal
of developing RWE that can inform (Payer/HTA)
healthcare decisions and improve patient care

Other EU/International RWD initiatives

DARWIN

EU Big Data 'Stakeholder Implementation Forum'

Can we create a multi-stakeholder Learning Network on RWE?

The Learning Network needs to:

- be premised on open governance, reciprocity and legitimacy through comprehensive membership
- enable knowledge sharing and dialogue, and operate on the basis of shared responsibilities and clear roles
- be able to develop actions, to reach goals efficiently and be able to question goals and practices to develop new learning methods
- enable the attainment of common goals, develop network members' own work, skill and capabilities

In order to deliver on the goals, the Learning Network must be:

- owned by a public institution
- enabling the multi-stakeholder interaction
- sustainable through long-term funding

Concluding session

REAL WORLD EVIDENCE
RWE4Decisions

The Way Forward

1. Do participants agree on the usefulness of **a multi-stakeholder approach** with regard to RWE, which is **based on the principle "learning by doing"** and underpinned by **robust methodologies** ?
2. Can a **Learning Network on RWE** be part of (or supported by) the EU Strategy for Data & the EU Pharmaceutical Strategy based on a voluntary cooperation mechanism between member states ?
3. What steps should be taken to ensure the necessary **sustainability** of the initiative and for obtaining sufficient **political endorsement**?
4. How could an **alignment be realised with other RWE initiatives** in order to join forces and avoid duplication ?

   Could this lead to a concrete proposal in the short term ?

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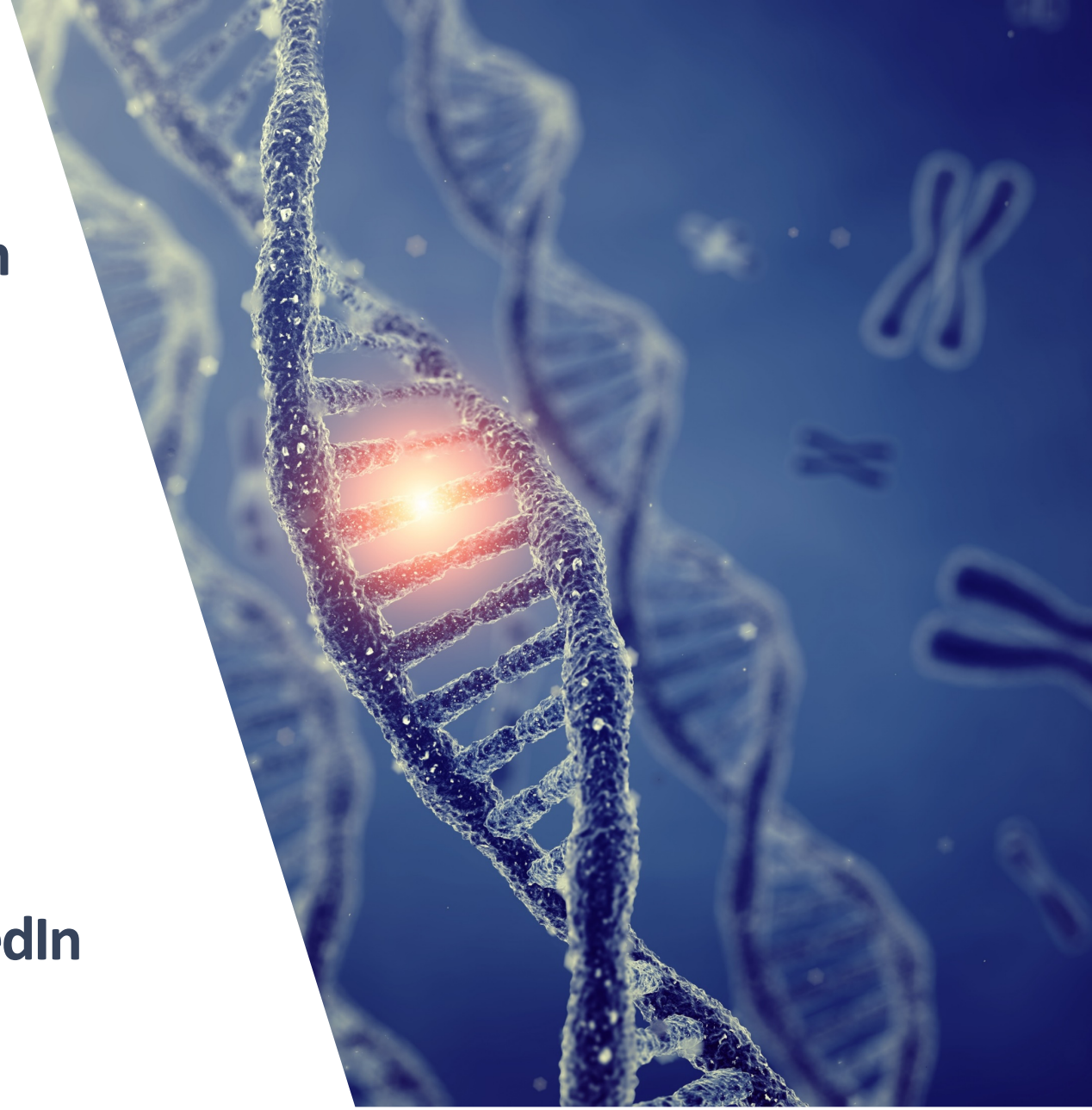

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eu2020.de

Register for our upcoming hybrid event

10 November 2020 14.00 - 18.00 CET

Health Innovation - the European Health Data Space and Real-World Evidence

Hosted under the Associated Programme of the German EU-Presidency 2020

www.rwe4decisions.com

Real-world evidence to support payer/HTA decisions in the EU