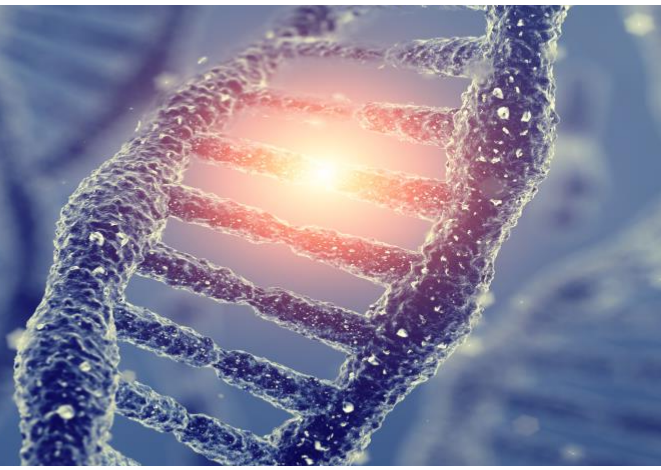
RWE4Decisions REAL WORLD EVIDENCE

Call to Action

RWE4Decisions calls for Multi-Stakeholder EU Learning Network on Real-World Evidence within the European Health Data Space



Real-World Data (RWD) collection and Real-World Evidence (RWE) generation can play a critical role in assessing the value of treatments for patients and healthcare systems, as RWD can fill evidence gaps that might exist in clinical development programmes and bring insights into effectiveness in 'real life' settings.

RWE is essential to support decision-making and is particularly relevant when 'highly innovative technologies', which are potentially transformative (such as immunotherapies and cell & gene therapies), come to market early via expedited regulatory approvals to benefit patients and often only limited evidence from traditional clinical development programmes is possible. This is particularly relevant in oncology and treatment of patients with rare diseases.

The COVID-19 outbreak has highlighted the importance of a digital infrastructure to enable the use of RWD for rapid decision-making in our healthcare and political systems. There has never been more of a need for a "learning healthcare system" that gathers local, real-life evidence to inform complex models about future possibilities.

Payers and HTA bodies need to find new ways to evolve their decision-making processes, collaborating with regulators and other stakeholders to share learnings and best practice on the use of RWE in order to address the uncertainties regarding the value of new technologies across the lifecycle of the technology.

RWE4Decisions calls for the creation of a **multi-stakeholder EU Learning Network on Real-World Evidence**, which is based on a transparent governance mechanism. This Learning Network, designed for Member States to implement evidence-based decision-making, should be supported by EU funding, and:

1. clarify **when, by whom and how** real-world data should be collected in order to generate real-world evidence that **meets the needs of patients and healthcare systems**;
2. be based on a **voluntary mechanism**;
3. be underpinned by **robust methodologies** in alignment with other initiatives.

Policy Asks

To realise the potential of Real-World Evidence within the EU Health Data Space

RWE4Decisions has identified 5 key challenges and related policy asks to enable the cross-border use of real-world evidence by decision-makers.

Challenges	Policy Asks
Fragmentation and duplication in RWE requests Regulator and payer/ HTA requests differ according to the question being asked, the level of risk and other considerations such as the ability to capture other data, availability of other treatments and unmet medical need	**EU and National Policy Makers** • **Develop a framework,** for **cross-country collaboration** on studies underway across different jurisdictions to enable data amalgamation. • **Funding to develop the infrastructure** for cross organisational sharing of RWE generation plans and post-licensing evidence generation and information about RWD (HTA).
Lack of methodological processes For trust in the quality of RWD in order to incorporate it into decision-making	**EU and National and International Policy Makers** • Ensure the European Health Data Space facilitates **data quality and accessibility.** • **Develop evidentiary standards** for RWE that take account of the context and **agree on common core data elements** (in terms of accuracy, completeness and tracability) to ensure validity and consistency across sources. • **Promote comprehensive and internationally aligned harmonized guidance** across bodies (epidemiology society, EUnetHTA, ISPOR, EMA…). Guidance to include how to reconcile differences between RWE data sets, and how RWE can complement Randomised Clinical Trial (RCT) data.
Legal uncertainty regarding interpretation of data protection legislation E.g. GDPR and data access	**EU and National Policy Makers** • Provide a **framework for data security and privacy for individuals,** while offering a clear legal basis for interoperability of health records across different data sources e.g. pre-existing data sets, electronic medical records, health insurance claims databases.
Lack of patient involvement to address their unmet needs	**EU and National Policy Makers** • **Ensure systematic patient involvement in RWD collection** to capture "real-world" experience of patients. • **Monitor level of impact of RWE on availability of highly innovative treatments across Europe** (in terms of speed of access and quality of patient outcomes).
Under-utilisation of digitalized data in healthcare and medical practice	**EU and National Policy Makers** • **Promote the use of digitalized data in healthcare and medical practice.**

Annex 1 - RWE4Decisions Vision

Realising the potential of real-world evidence for decisions

The EU Multi-stakeholder Learning Network should:

Enable multi-stakeholder interaction by involving policy-makers, HTA bodies, payers, regulatory agencies, clinicians, patient groups, industry and academic experts

Be owned by a public institution

Build on and sharing learnings from other initiatives

Be sustainable through long-term funding

Collaboration and **transparency** are key to ensure robust methods of data analysis to support efficient use of RWD and generation of RWE and to inform HTA/payers, regulators and other decision-makers about highly innovative technologies.

Key Principles

A Learning Network needs to:

Be premised on open governance, reciprocity and legitimacy through comprehensive membership

Enable knowledge sharing and dialogue, and operate based on 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

Building on current initiatives…

As developments in e-health and analytics move rapidly, it is important that stakeholder learn from each other as experience and understanding increases. Building on current initiatives, this network could use the European Commission's Open Innovation 2.0 approach, where all stakeholders work together to enable cross-fertilization of ideas to develop innovation beyond the scope of what one organization or initiative can do alone.

The EU Multi-stakeholder Learning Network on RWE should connect with:

- **GetReal Initiative:** the planning of a foundation enabling multi-stakeholder collaboration for the sharing of new methods of RWE collection to be adopted earlier in pharmaceutical R&D and the healthcare decision-making process.
- IMI **Health Outcomes Observatories (H2O)** setting up a platform that allows individual patients to measure their outcomes in a standardised manner creating transparency of health outcomes.
- IMI **Big Data for Better Outcomes projects (BD4BO)** whose mission is to improve health outcomes and healthcare systems in Europe by maximising the potential of Big Data.
- **RARE IMPACT** which aims to identify and validate the challenges to patients' access to gene and cell therapies for people with rare diseases in Europe.
- IMI **HARMONY** which aims to improve the care of patients with hematologic cancer and shows the challenges and opportunities of using big data and eHealth services in healthcare systems.
- RWD initiatives within stakeholder groups such as **#DataSavesLives** and **PIONEER.**
- European Commission initiatives such as the **eHealth Digital Service Infrastructure**, the Beating Cancer Plan, the EU Pharmaceutical Strategy and the review of the OMP Regulation.
- **HMA-EMA Joint Big Data Task Force** proposed DARWIN (***D***ata ***A***nalysis and ***R***eal ***W***orld ***I***nterrogation ***N***etwork) and EU Big Data 'Stakeholder Implementation Forum' to launch a 'Big Data learnings initiative' where submissions that include Big Data are tracked and outcomes reviewed, with learnings fed into reflection papers and guidelines.[1]
- The **ISPOR Real-World Evidence Special Interest Group** increases awareness, understanding and implementation of RWE with all stakeholders to improve decision making benefiting patients.
- The **US FDA's Sentinel program** provides guidance on the relevance and reliability of RWD and the design and analysis of effectiveness studies to inform regulatory decisions.

[1] RWE4Decisions welcomes the establishment of a 'Big Data Stakeholder Implementation Forum' and believes that the set up of DARWIN for public institutions to share data across countries should enable the future establishment of a sub-group to include data from all stakeholders, including industry.

Annex 2 - Examples of outputs of a multi-stakeholder EU Learning Network on RWE

- Case studies to develop learnings on how RWE may support decision-making by HTA authorities and payers (continuing current pilots).
- A process for multi-stakeholder* iterative dialogues throughout the lifecycle of a technology to discuss evidence generation plans and the potential for RWE. *Stakeholders include HTA bodies, payers, regulators, industry, patients, clinicians.
- Examples of registries that have been developed to take account of the needs of regulators, payer/HTAs and manufacturers (Working with the European Joint Programme on Rare Diseases (EJPRD) and European Organisation for Research and Treatment of Cancer (EORTC)).
- Common EU core data sets ; internationally aligned guidance on how to reconcile differences between RWE data sets, and how RWE can complement Randomised Clinical Trial (RCT) data.
- A public portal registering RWE studies that may be used in decision-making.
- Guidance on how patient level data can be shared to create a robust data platform (IMI Health Outcomes Observatories (H2O), HARMONY, Data Saves Lives, PIONEER).
- Guidance on how patient experts can be supported to co-design RWE studies.
- A range of communication tools to address public misgivings about use of secondary data in research.
- A process for dynamic informed consent.

About the RWE4Decisions initiative

RWE4Decisions is a loose multi-stakeholder group, which has developed stakeholder actions that will better enable the use of real-world evidence in HTA/payer decisions about highly innovative technologies. The work has been commissioned by the Belgian National Institute of Health and Disability Insurance (INAMI-RIZIV) and contributors include the European Medicines Agency (EMA), HTA authorities (including the Finnish Medicines Agency (FIMEA), the Belgian Healthcare Knowledge Center (KCE), the UK's National Institute for Health and Care Excellence (NICE), the Dutch National Health Care Institute (ZIN), the Norwegian Medicines Agency (NoMA) and the Irish National Centre for Pharmacoeconomics (NCPE), clinicians and patient representatives (European Cancer Patient Coalition, European Patients' Forum, EURORDIS – Rare Diseases Europe, European CanCer Organisation), researchers (the European Organisation for Research and Treatment of Cancer (EORTC), industry and academics (Dr Karen Facey, University Edinburgh and Professor Lieven Annemans, University of Ghent). FIPRA has facilitated the multi-stakeholder discussions with sponsorship by the European Confederation of Pharmaceutical Entrepreneurs (EUCOPE), Astra Zeneca, Gilead, Novartis, Roche and Takeda.