

SUMMARY OF THE STAKEHOLDER CONSULTATION MEETING FOR HEALTH TECHNOLOGY ASSESSMENT (HTA) PROCESS GUIDELINE AND FOLLOW-UP DISCUSSION ON THE PROGRESS OF HTA GUIDELINES IN VIETNAM

24th-25th January 2018, Hanoi, Vietnam

HITAP International Unit (HIU)

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Introduction

Vietnam has decided to incorporate Health Technology Assessment (HTA) evidence to support reimbursement decisions for medicines and has recognised the need for standard guidelines for both the process and the methodological aspects of HTA. The Health Strategy and Policy Institute (HSPI), Ministry of Health (MOH), Vietnam, which is the main organization responsible for the development of the HTA methodological guideline, is the focal point on health technology assessment as assigned by the Ministry of Health of Vietnam, whereas the Department of Health Insurance under the Ministry of Health is in charge of the development of the process guideline.

During 2014-2018, HSPI, with support from the Health Intervention and Technology Assessment Program (HITAP) under the auspices of the International Decision Support Initiative (iDSI), developed a HTA process manual for internal purposes, which was then used as the starting point for the Department of Health Insurance's process guideline. HSPI conducted a stakeholder consultation on 24th January 2018 at the Ministry of Public Health to share the progress on its development and provide stakeholders an opportunity to give feedback. The meeting was chaired by Prof. Pham Le Tuan and was participated by representatives from the Department of Health Insurance, the Director of the National Assembly Commission for Social Affairs, and directors of hospitals in Vietnam.

HSPI has gathered academic experts who are experienced in conducting HTA to form a technical team to develop the methodological guideline. The technical team has been developing the draft guideline since September 2017 and the work is currently ongoing. On 25th January 2018, HSPI convened the technical team to discuss the progress of the guidelines' development. The agenda of the visit is provided in Annex 1.

Summary of proceedings

Stakeholder consultation meeting for the HTA process guideline

The meeting on 24 January, 2018 started with opening remarks by the Vice Health Minister Prof. Pham Le Tuan, who was the chair. He noted that Vietnam has made efforts to ensure the success of the universal health coverage (UHC) initiative. HTA is considered as a useful tool for achieving this mission by promoting the efficient use of healthcare resources. He also noted the significant progress in developing HTA in Vietnam with the support from iDSI. One of the outcomes of this fruitful collaborations has been the development of the process guideline in Vietnam for which this meeting had been called. Stakeholders were welcomed to raise issues, ask questions and give feedback to the draft of the guideline.

Afterwards, Dr. Yot Teerawattananon, Founding Leader and Senior Researcher at HITAP, shared experiences on the importance of HTA for UHC and how HTA is used in Thailand. He also pointed to the variation in needs of countries in using HTA. One of the key messages was that, in Thailand, not

only HITAP, but also academic institutes produce HTA studies to serve the demand for evidence by national decision-makers and academic interests. The process and methods guidelines can ensure that the quality of evidence can be maintained and help standardize the methodology and approach of studies produced by different entities. In addition, the guidelines can be used as a learning material to guide researchers on how to conduct HTAs.

Dr. Nguyen Khanh Phuong from HSPI then presented about the progress of the process guideline that HSPI has developed together with the Hanoi School of Public Health with support from iDSI. The technical team reviewed Thailand's process guideline to refine and adapt to the context of Vietnam. The principles underpinning the HTA process in Vietnam are participatory, transparency and methodology rigor among others. The process outlined in the guideline lists five steps, namely, topic selection, scoping, assessment, dissemination, and translation to policy. The following criteria will be used for topic selection:

1. Magnitude of the problem
2. Seriousness or severity of disease
3. Effectiveness of the interventions
4. Equity/inequity consideration
5. Economic impact on household
6. Feasibility/availability/appropriateness of providing the interventions
7. Political will in providing the interventions
8. Drug or technology supply

Different groups of stakeholders, including policy makers, health service delivery agency, representative of health service users (e.g. consumer association), HTA agencies including universities, etc. should be invited to participate in the HTA process to provide inputs.

In the discussion following the presentation, a question was raised on whether there would be a legal framework for HTA which could involve setting up independent council which would be responsible for HTA work and would require government budget for funding HTA studies. Prof. Pham Le Tuan responded that there was no plan to establish a separate council for managing the HTA process. HTA is being applied to the policy on health insurance, and the current focal point for HTA in Vietnam is HSPI. However, approval from the National Council on Health Insurance on the topics selected for assessment may be required. This is to be further discussed. There was also a concern from a participant about who should be involved in which stage of the HTA process. Some suggested that it's crucial to have professionals such as clinicians and pharmacists to be part of the working group that will be responsible for this work. Importantly, conflict of interest policies and practices should be stated in the process guideline. In addition, efforts on capacity building on HTA should be sustained. Finally, Prof. Pham Le Tuan appreciated and were thankful to iDSI about the support to HTA development in Vietnam. He concluded that he foresees the usefulness of incorporating HTA into the decision-making process which would save the government's budget on healthcare. Therefore, he expects the MOH to implement the HTA process in Vietnam quickly.

Follow-up discussion on the progress of HTA process and methodological guidelines

On 25th January 2018, representatives from HITAP, Dr. Yot Teerawattananon, Waranya Rattanavipapong, and Benjarin Santatiwongchai, were invited to attend the meeting on the progress of HTA process and methodological guidelines at HSPI on 25th January 2018. The technical team namely, HSPI, Hanoi School of Public health, Hanoi University of Pharmacy, and Vietnam National University Ho Chi Minh City gathered together to discuss the draft of guidelines and next steps.

HITAP reviewed the draft methodological guideline and gave suggestions for its revision. In addition to Thailand's HTA methods guideline, the iDSI reference case was suggested as another reference guide for developing the guideline. Another comment was about the rearrangement of some chapters. For example, it was recommended to have a separate the chapter on social and ethical implications. HITAP advised on adding chapters on costing, outcomes measures, and policy use of HTA. HITAP also suggested publishing the guidelines or some parts of the guidelines on the F1000Research platform to increase the accessibility to the guidelines.

The technical team raised concern that the progress on both, the methodological and process guidelines, was behind schedule. HITAP proposed that the technical team visit HITAP, Thailand, to refine the draft methodological guideline. Further, the National Council on Health Insurance Council members were invited to visit Thailand to meet with the representatives from the Subcommittees for the National List of Essential Medicines Development and the Benefits Package Development to understand the importance and the use of HTA methodological and process guidelines in decision making process in Thailand. The visit for the technical team and Council members was tentatively scheduled for April 2018.

Next steps

HSPI will circulate the draft of the HTA process guideline to wider stakeholders for additional feedback. HSPI will revise it according to the comments received and share the updated version with iDSI for inputs. Once the guideline is finalised, HSPI will hand it over to the Department of Health Insurance, who will be the main user and implementer of the guideline. On the methodological guidelines, the technical team will revise the draft outline and share the same with iDSI for comments. In addition, HSPI will arrange of the study visit to Thailand for the Council members and the technical team.

Annex 1: Agenda

Workshop and Meeting to follow-up on HTA guidelines development 24-25 January 2018

24 January 2018 (HTA process guidelines stakeholder consultation meeting)

Morning (9:00 onwards)	Preparation for the stakeholder consultation meeting for HTA process guidelines
Afternoon	Stakeholder consultation meeting for HTA process guidelines

25 January 2018 (Workshop to follow-up on HTA methodological guidelines)

9:00 – 9:15	Introduction
9:15 – 10:00	Discussion on the outline of the guidelines and progress of each component of the guidelines
10:00 – 11:30	Issues encountered and troubleshoot
11:30 – 12:00	Next steps