



Health Technology Assessment Policy and Methods Review Reference Committee

Communique – 6 October 2023 meeting

The Health Technology Assessment (HTA) Policy and Methods Review (Review) Reference Committee (Committee) met by video conference on 6 October 2023.

The Committee held discussions with representatives of the Leukaemia Foundation, Rare Cancers Australia, the Breast Cancer Network Australia, Alfred Health and Precision Haematology and Epworth Healthcare and Peter MacCallum Cancer Centre. Support staff from the Review Secretariat in the Department and the probity advisor attended.

What did the Committee discuss?

Deep dive into the patients right to try

The Committee had a briefing and discussion with several representatives of patients with cancer. Discussion was held around opportunities for greater collaboration, use of existing medicines for new therapeutic purposes (re-purposing), use of real-world data to speed up access and more effective horizon scanning and focus on what is on the horizon. Specific examples of funding models from Switzerland and the UK were referenced about access to rare cancer medicines. The small size of the Australian market was especially noted.

The Committee received an explanation about programs (including through funding by the Medical Research Future Fund or a managed access scheme – which must be justified/awarded) that exist for trialling a vast range of medicines/therapies across the country (and globally), and the opportunity to use these as a source for real-world data to support HTA. It was noted that awareness of these programs and clinical trials is often not suitably broad among clinicians and patients.

The small size of the Australian market was recognised as a “root cause” of access issues in Australia, and the options of collaboration with other jurisdictions in HTA (in the identification of value and benefits from medicines or therapies versus pricing) were explored but noted as inherently challenging (especially for therapies for rare diseases).

The Committee discussed the opportunity for research into better quality of life measures, and better clinical and consumer input into determination of value in HTA (some work led by Ms Watson, Deputy Chair, PBAC). It was noted that global consistency in this regard will be important as pharmaceutical companies typically operate globally.

The Committee heard representations regarding the value of PBAC or clinicians having the opportunity to drive medicines into the HTA process (not only relying on pharmaceutical companies).

Deep Dive with Professor John Zalcberg AO: Potential alternative initiatives for medicines access

The Committee received a presentation from Professor John Zalcberg AO regarding access to medicines relating to life-threatening conditions, in particular cancers, and the importance

of focus on, and responsibility to, patients (including focus on the appropriate use of taxpayers' money). It was expressed that the balance is more in favour of a focusing on taxpayers' funds/cost-effectiveness and total cost rather than on the individual patients in need. Professor Zalcberg AO represented the opportunity to separate access from negotiation on pricing. Professor Zalcberg AO also represented the opportunity to consider medicines that have been provisionally/fast-tracked endorsed by regulators in larger jurisdictions (including the USA) for patient access (given the urgent and evident need and demand for patient groups, which also represents an opportunity for data collection for HTA purposes).

The Committee discussed handling situations where medicines may be funded for early access (before price negotiation) and the challenges and consequences for stopping funding (especially for long-term therapies).

The Committee acknowledged the issue of access for patients with cancer (and life-threatening disease) and reaffirmed that it was a focus for the Committee.

Transparency Workshop: Reference Committee's initial consideration of issues and options around transparency

The Committee had an extensive discussion on the meaning of transparency in general and in the context of the HTA Review (including the distinction between transparency of decision-making and community of decisions). Matters discussed included increasing public confidence in processes, improving stakeholder capability, literacy and understanding, avoiding challenges to decisions, and providing increased data to the scientific and global communities (including for managed access to medicines). The Committee agreed it would develop potential options for improving transparency as part of this Review. The Committee also discussed:

- strengths of the Australian system, including the ability and willingness of the Government and PBAC to discuss HTA considerations
- the opportunities and challenges of open meetings in HTA
- procedural strengths in the operation of PBAC related to transparency.

The Committee discussed the utility of Public Summary Documents as a contributor of transparency, and whether other tools may be more effective (for both health-literate, and non-health-literate people). In this regard, the Committee agreed that there were improvements available in communicating PBAC advice. A specific opportunity related to the balance between the use of "plain language" and detail that is necessary to appreciate the significance and context of advice.

The Committee asked for further advice from the Department's Consumer Evidence and Engagement Unit and improved public consultation analysis regarding expectations of transparency.

Deep Dive with Professor Miles Prince AM: Opportunities for a policy think tank for cancer immunotherapy and targeted therapies

Professor Miles Prince AM presented his proposal to address the challenges of targeted, high-cost health technologies (in particular immunotherapies) not being approved or translated into new treatments. He noted this is often due to ad hoc, small scale and variation (in some cases low quality) in evaluation (across a wide range of applications) impacting data available for HTA and the ability to focus horizon scanning. It was noted that the issue

may be exacerbated by more significant proliferation of treatments and indications. Professor Prince AM proposed the concept of a “centre for precision medicine and rare disease” to focus on this area and a think tank or policy institute to support effective horizon scanning for complex health technologies (including engagement with pharmaceutical companies). Such an entity could provide advice and data to HTA bodies and policy makers (across a treatment spectrum and for individual indications or applications).

There was considerable discussion on the structure and independence (and source of funding) of such a body (within Government, research bodies or healthcare providers, etc.) and possibilities for where such an entity should focus. This discussion was undertaken in an environment of diverse bodies engaged in the cancer and genomics area, as well as existing sources of advice for PBAC (such as the Medical Oncology Group of Australia). It was agreed that any situation of such a body would have its pros and cons.

The Committee considered that some focus in this area was necessary in its report as the issue is not straightforward, and requires a solution.

One area of agreement amongst the Committee was the need for greater collaboration between the pharmaceutical companies, the policymakers, the research bodies and HTA bodies in horizon scanning. The Committee affirmed it would be making recommendations regarding horizon scanning.

The Committee also affirmed that it would be making recommendations about the time to make a recommendation through the Medical Services Advisory Committee.

Meeting close, and next meeting

The Committee noted the next meeting will be held on 17 October 2023.