

A decorative banner at the top of the slide features a close-up photograph of various medical supplies, including several blue and clear syringes and vials, some containing orange and blue liquids. The image has a torn-edge effect along its bottom boundary.

Welcome to HTA Review Implementation Advisory Group's draft Roadmap consultation

October 2025

Disclaimer: The material contained in this presentation is provided to support public consultation and engagement. It does not represent the official policy or position of the Australian Government or the Department of Health, Disability and Ageing. Input received through this consultation process will inform the deliberations of the Health Technology Assessment Review Implementation Advisory Group and contribute to the development of advice for Government consideration.



- Published in September 2024, the HTA Review was established to examine Australia's approach to assessing health technologies for government funding, and to deliver a report and recommendations to the Australian Government.
- The HTA Review involved substantial engagement with stakeholders to identify features that were working effectively and those that are potentially acting as barriers to access.
- The Review made 50 recommendations to improve Australia's Health Technology Assessment (HTA) arrangements. Recommendations focused on reforming HTA policy and methods to provide stakeholders and decisionmakers with tools and processes to
 - address inequities in access to affordable medicines
 - reduce wait times for access to affordable medications
 - improve transparency and engagement
 - invest in HTA capability to make it adaptable and futureproof.



- Following the Review, in January 2025 the Government established an Implementation Advisory Group (IAG) for a period of one year to develop a roadmap to advise on implementing the Government's response to the recommendations.

Member	Role on the IAG
Professor Andrew Wilson	Chair
Dr Richard Mitchell	Clinical Representative
Dr Lorraine Anderson	Clinical/Indigenous Representative
Ms Nicole Millis	Consumer Representative
Ms Kirsten Pilatti	Consumer Representative
Ms Elizabeth de Somer	Industry Representative
Ms Anne Harris	Industry Representative
Professor Emily Lancsar	Health Economist/Commonwealth
Mr Duncan McIntyre	Commonwealth
Dr Olivia Hibbitt	Jurisdictional Representative



- The Minister for Health, Disability and Ageing's priorities for the IAG include:
 1. More equitable access for patients
 2. Process changes to support more streamlined HTA
 3. Improved stakeholder engagement in HTA.
- The IAG analysed each recommendation from the HTA Review, using a consistent framework.
- The following two slides detail the framework for recommendations analysis, and for analysing implementation value, utilised by the Implementation Advisory Group in developing the Roadmap.

Roadmap Development – analytical framework for recommendation analysis

Analytical element	Key questions to consider
SCOPE	Are the actions required to implement this recommendation clear? Are there any ambiguities that need clarification? Are both the objectives and the outcomes for the recommendation captured?
VALUE/IMPACT	What are the anticipated benefits/value/impact of the actions, assessed against: patient outcomes, timely access, equity, system efficiency and Australian market attractiveness?
DEPENDENCIES/ SEQUENCING	How does this link with the Enhance HTA report recommendations and/or New Frontier report? How does this recommendation integrate with other work underway and with other recommendations? Are there any dependencies or prerequisites that need to be considered?
IMPLEMENTATION COMPLEXITY	What are the potential risks associated with implementing this recommendation? Anticipated difficulty with implementation?
WHO	Who is involved/required to deliver the implementation? Who is impacted by the recommendation? What are the views of consumers, and other stakeholders, including industry and clinicians. In what ways will stakeholders be impacted?
COST	Estimated costs to implement? If new funding is required where could the funding potentially come from?
RESOURCES	What human, financial and technological resources are needed to implement this recommendation?
IMPLEMENTATION TIMING	Can this recommendation be implemented in the short term, medium term, or long term?
MEASUREMENT	Once implemented how will we know it has been successful? Are there any expected key performance indicators/success factors?

Roadmap Development Process – Values Framework

Criteria	LOW	MEDIUM	HIGH
Patient outcomes Considers the impact of the recommendation on patients' health and wellbeing.	Minimal improvement in health outcomes.	Moderate improvement in health outcomes, such as better management of symptoms or modest enhancement of quality of life; or significantly improved outcomes for a moderately sized patient population.	Significant and measurable improvement in patient health, including reduced morbidity/mortality, enhanced quality of life, or other substantial clinical benefits. A large patient population likely experiences improved outcomes.
Timely access Considers the impact of the recommendation on expected timeframes to listing for subsidised patient access.	Minimal impact on the time taken for patients to access new medicines.	Streamlines processes or removes minor barriers, resulting in moderate improvements in the time to access.	Potentially significant improvements in access by reducing the number of days between registration and reimbursement or encouraging the consideration of health technologies that would otherwise not have been brought forward.
Equity Considers the recommendation's ability to address disparities and improve access for underserved populations.	Limited impact on reducing inequities; benefits are concentrated among already well-served populations.	Some contribution to addressing inequities, such as targeted interventions for specific underserved groups.	Substantial reduction in inequities through improved access, outcomes, and inclusion of underserved or high-need populations.
System efficiency Considers how well the recommendation optimises resource use and improves healthcare processes.	Minimal noticeable improvement in resource allocation or operational efficiency; may even increase system burden.	Some improvements in efficiency, such as reduced wait times or better utilisation of resources, but with limited scalability.	Major enhancements to system efficiency, including cost-effectiveness, streamlined workflows, or significant reductions in resource waste. Also positions HTA processes to respond to rapid advances in medical science and the increasing complexity and diversity of new health technologies.
Australian market attractiveness Considers whether the recommendation supports the goal of maintaining Australia as a first-choice destination.	Minimal impact on Australia's attractiveness as a country to launch new health technologies.	Somewhat improves Australia's attractiveness as a first launch country.	Positions Australia as a country where new health technologies are launched early.



- The IAG has provided an interim report to the Minister. This report identified key focus areas and priority implementation actions, consistent with the priority areas raised by the Minister.

More equitable access for patients		More streamlined HTA		Improved stakeholder engagement
 Improved access and equity	 Greater transparency and engagement	 Modernised assessment pathways	 Better data and evidence	 Building HTA workforce capacity and capability
• Embedded First Nations perspectives • Enhanced paediatric access • Proactive identification and earlier access to new technologies	• Stakeholder engagement framework • Improving clarity of HTA processes • Joint government-industry performance metrics	• Streamlined assessment • Proportionate vaccine pathways • Proportionate medicine pathways	• Revising guidelines and supporting information • Data collection and access	• Enhanced HTA evaluation expertise • Sustained workforce plan



- Following the development of the Interim Report to the Minister, the IAG has developed a HTA reform Roadmap for consideration, outlining the timing and outcomes of proposed initiatives.
- The Roadmap consists of a series of initiatives the IAG recommends be undertaken. Implementing the Roadmap would deliver on the intent and recommendations of the HTA Review

FOCUS AREA	INITIATIVES	EARLY ACTIONS ANNOUNCED	Year 1		Year 2		Year 3
 Access and equity	Embedded First Nations perspectives (rec 1)	Bi-annual stakeholder meetings – specific issues related to medicines for First Nations people	First Nations Advisory Committee established	FNAC work programme finalised			
	Proactive identification of new technologies (rec 47)		Horizon scanning processes mapped, designed and integrated into HTA processes				NHMRC HIO-A grant outcomes reviewed
	Addressing HUCN (recs 44, 45, 46)	Rapid research into HUCN and HATV	HUCN defined	HUCN identification mechanisms established		HUCN submission incentives identified	
	Funding and pricing mechanisms (recs 16, 20, 42)		Current funding mechanisms published	Research conducted on higher pricing usage			New funding framework developed Bridging fund need assessed
	Enhanced paediatric access (rec 2)		PBAC and MSAC guideline review of age agnostic approach				
 Modernised assessment pathways	Streamlined assessment (recs 3, 4, 5, 6, 14)	Consultation on trialling new ways to streamline assessment of medicines	Submission decision tree developed		Changes to PBAC committee assessed and implemented		
			Expanded role of PBAC trialled		Expanded PBAC role implemented		
	Proportionate medicine pathways (recs 7, 8, 9, 41)		Streamlined pathways for submissions piloted		Streamlined approach implemented		
			New facilitated pathway for HATV piloted		New facilitated pathway for HATV implemented		Expansion of new facilitated pathway for all therapies claiming clinical benefit
	Proportionate vaccine pathways (recs 11, 12)		Proportionate pathway for vaccine submissions developed		New processes for proactive vaccine assessment developed and implemented		
	Strengthen cross-governmental HTA co-funding processes (rec 13)		National approaches supported and progressed through HTGC and supporting NHRA Negotiations		Outstanding gaps from NHRA assessed	HTA improvements scoped and implemented	
	AMR related improvements (rec 21)		Support provided for AMR framework		AMR pathway developed and implemented		
 Greater transparency and engagement	Pathway transparency (rec 19, 38)		MEA guidance updated	Therapies targetting biomarkers guidelines updated	MEA key information agreed and published		
	Stakeholder engagement (recs 24, 25)	Stakeholder Engagement framework developed			Consumer identified decision making guidance developed	Consumer support and training implemented	
	Improving clarity of HTA processes (recs 17, 22, 26, 32, 39, 40)		Plain language capability developed				
			PICO usage guidelines updated	Mechanisms for PICO transparency developed			
		Rolling review of the PBAC Guidelines prioritising comparator selection and discount rate	Current pricing processes made available				
 Better data and evidence			Explicit qualitative values framework developed		Guidelines review completed for enhanced consumer input	Pricing policy framework published	
	Joint government – industry performance metrics (rec 15)		Joint performance metrics implemented				Timeliness of access to therapies reviewed
	Data collection and access (recs 27, 28, 29, 30, 31)		Current datasets and RWE associated work programmes mapped		HTA/RWD + Evidence Roadmap developed		
					RWD usage guidelines updated		
 Workforce capacity and capability	Revising guidelines and supporting information (recs 10, 33, 34, 35, 36, 37)				Guideline review completed for assessing consumer evidence, non randomised and observational evidence and assessing end points		Disease-specific modelling investigated
	Post review framework (rec 18)				Post-review framework developed		
	Sustained workforce plan (rec 49, 50)		Sustained HTA sector workforce and enabling technology plan developed				Workforce initiatives implemented across sector
	Visible progress and improvements (rec 48)		HTA improvement reporting processes reviewed		Additional mechanisms to increase transparency implemented		

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- A decorative banner at the top of the slide features a collage of medical supplies. On the left, a stethoscope is visible. In the center, there are several syringes and a small container of pills. On the right, more syringes and a container of blue pills are shown. The banner has a torn paper edge effect.
- Are there other initiatives consistent with the recommendations of the HTA review that should be incorporated into the Roadmap?
 - Are the implementation timeframes outlined in the Roadmap appropriate and feasible?
 - Are there any significant risks or interdependencies in the Roadmap that should be taken into consideration?

A short survey with these questions will be shared with all webinar participants following this presentation.