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.

HTA Review Background

- 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.

IAG Membership

- 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

Roadmap development process

- 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

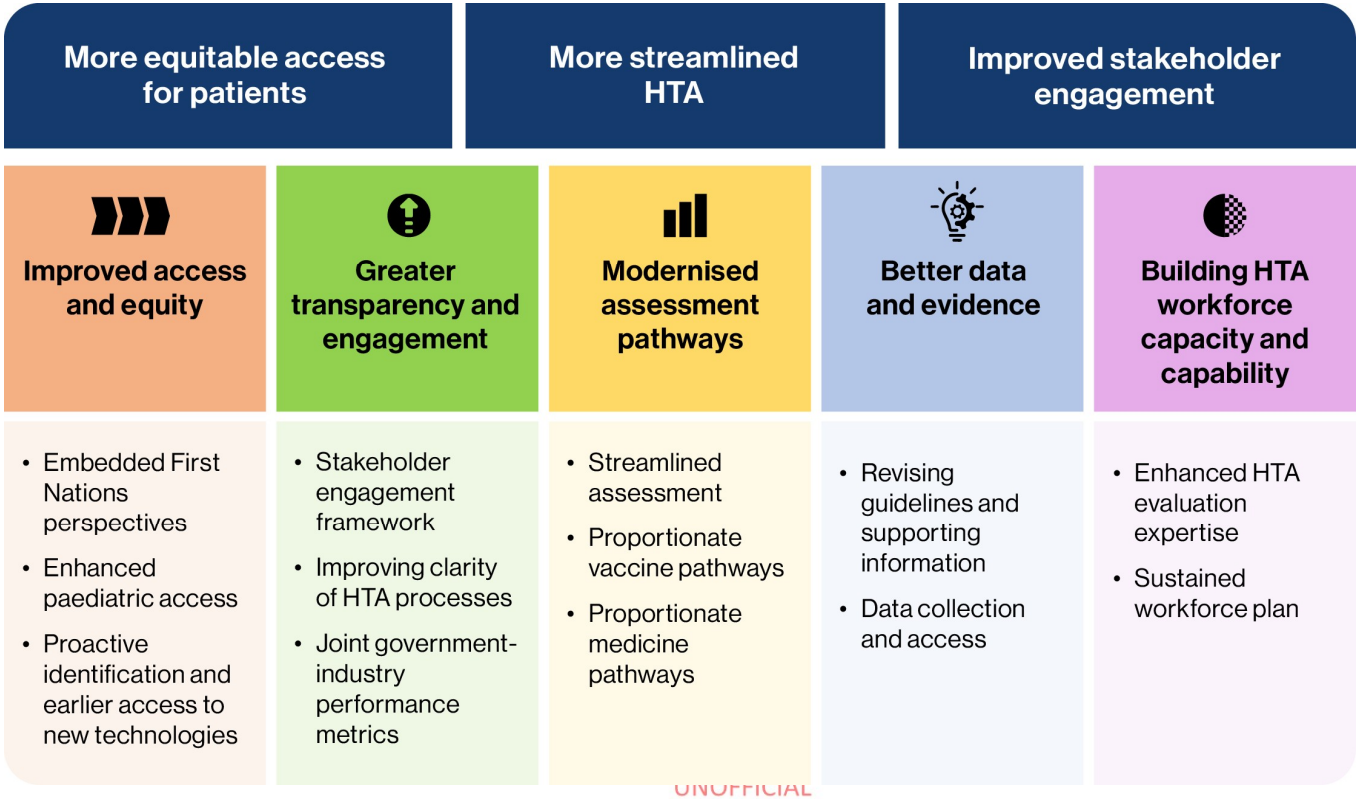
Analytical element	Key questions to consider
SCOPE	Are the actions required to implement this recommendation clear? Are there any ambiguities that need clarification? Are both the objectives and the outcomes for the recommendation captured?
VALUE/IMPACT	What are the anticipated benefits/value/impact 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 heath 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.

Interim Report

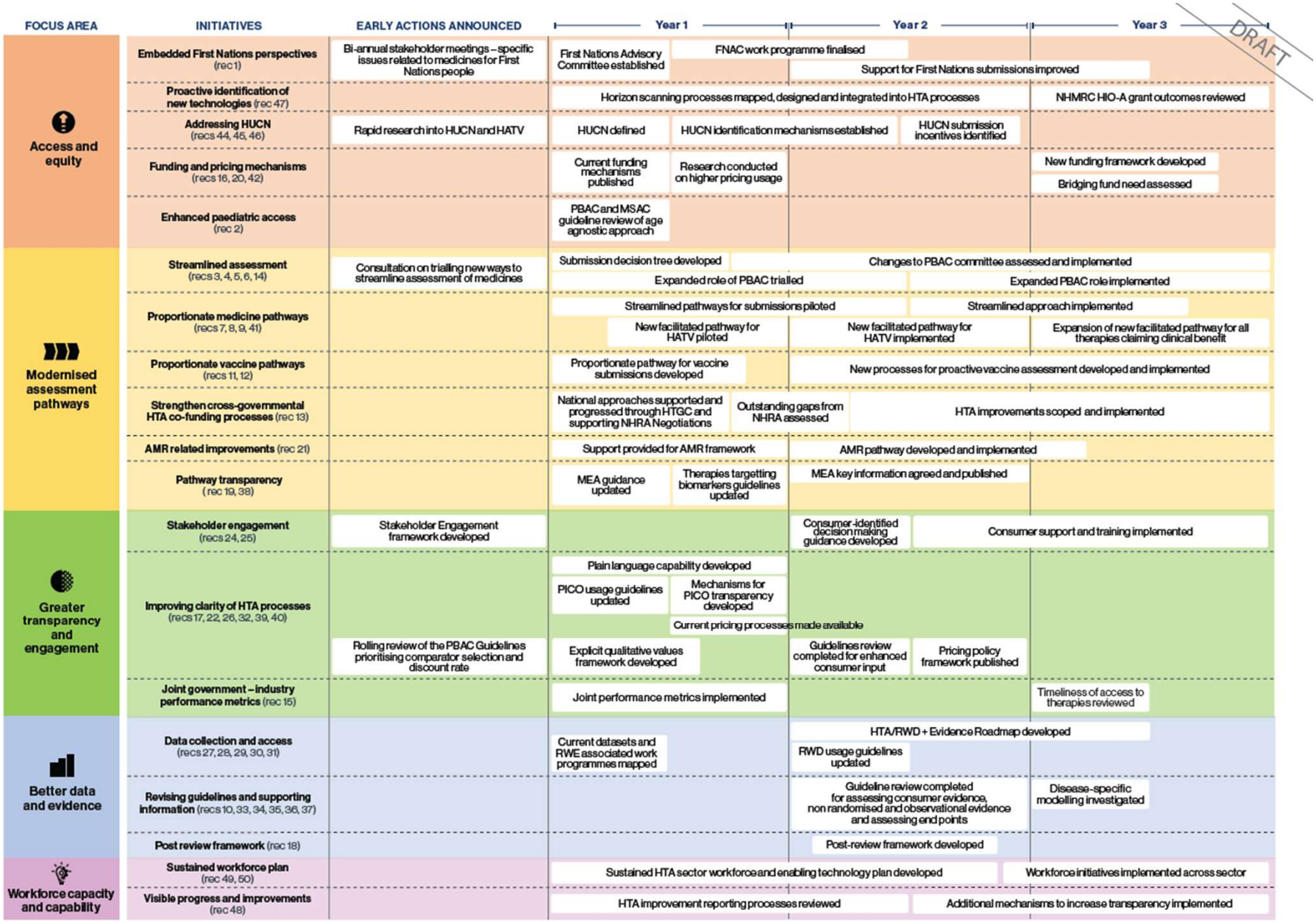
- The IAG has provided an interim report to the Minister. This report identified key focus areas and priority implementation actions, consistent with the priority areas raised by the Minister.



Implementation Roadmap

- 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
DRAFT
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
Support for First Nations submissions improved
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
Pathway transparency (rec 19, 38)
MEA guidance updated
Therapies targetting biomarkers guidelines updated
MEA key information agreed and published
Greater transparency and engagement
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
Current pricing processes made available
Rolling review of the PBAC Guidelines prioritising comparator selection and discount rate
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
Better data and evidence
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
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
Workforce capacity and capability
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

Questions for consideration

- 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.