



PhRMA Foundation Value Assessment Research Roundup



October 2020

ANNOUNCEMENTS

PhRMA Foundation Releases 2019 Annual Report

The PhRMA Foundation made strong progress in 2019, including the introduction of new funding programs, as well as the expansion of efforts to improve the effectiveness of value assessment in health care through the Foundation's Value Assessment Initiative.

Read all about it in our [Annual Report](#).

RESEARCH SPOTLIGHT



Centers of Excellence Research Overview

Patient-Driven Values in Healthcare Evaluation (PAVE)

Patient-Driven Values in Healthcare Evaluation (PAVE) is a unique collaboration between the University of Maryland School of Pharmacy, the National Health Council, patient community leaders, and payer and industry leaders. The organization is dedicated to developing and advancing new methods to incorporate the patient perspective into value assessment and value-based decision-making. Through this initiative, PAVE is building a diverse and extensive network of partners to build technical expertise in patient-centered health outcomes research, education, and dissemination.

Video: [Spotlight on PAVE](#)

Research Consortium for Health Care Value Assessment (Value Consortium)

The Research Consortium for Health Care Value Assessment (Value Consortium) — a

partnership between Altarum and VBID Health - promotes the pursuit of value in health care delivery within the U.S. by identifying high- and low-value clinical services, tracking the use of such services, and helping to ensure that consumer and patient preferences are incorporated into the health care decision-making process.

Video: [Spotlight on the Value Consortium](#)

The Center for Pharmaceutical Value (pValue)

Pharmaceutical Value (pValue) – headquartered within the University of Colorado's Anschutz Medical Campus – aims to apply and test novel methods for value assessment that encourages stakeholder engagement and promotes value-based decision making.

Video: [Spotlight on pValue](#)

Center for Enhanced Value Assessment (CEVA)

The Center for Enhanced Value Assessment (CEVA) – headquartered within the Center for the Evaluation of Value and Risk in Health (CEVR) at Tufts Medical Center – aims to explore the incorporation of non-traditional elements of value into cost-effective analyses.

Video: [Spotlight on CEVA](#)

UPCOMING EVENTS

Enhancing Health Care Value in a Pandemic Era

October 8th, 2020

Through the [Research Consortium for Health Care Value Assessment](#), funded by the PhRMA Foundation, Altarum has awarded grants to conduct research intended to support a robust, evidence-based understanding of value in health care across the full spectrum of care, with particular focus on how our health system can use health care dollars wisely in the context and aftermath of Covid-19. Award recipients will present their findings and discuss ways to cut waste in order to better respond to the next public health emergency. Register [here](#).

Coffee Talk on Patient Value with PAVE Center Team

Dates to be Announced

Join PAVE and the National Health Council (NHC) for an interactive, online discussion about value assessment. Researchers will discuss how patient-informed value elements can be used by patient communities to advocate for better care, by payers for cost-effective therapeutic decision-making, and by employers for benefit design negotiations.

The Latest from PAVE:

[Stakeholder-Engaged Derivation of Patient-Informed Value Elements](#)

The Patient

Susan dosReis, Beverly Butler, Juan Caicedo, Annie Kennedy, Yoon Duk Hong, Chengchen Zhang and Julia F. Slejko

Through direct engagement with patients, stakeholders identified 42 patient-informed value elements that were organized into 11 separate categories. In total, 75% of the value elements in the conceptual model were patient derived and distinct from value elements used in existing value frameworks.

[Changes in Cost-effectiveness for Chronic Hepatitis C Virus Pharmacotherapy: The Case for Continuous Cost-effectiveness Analyses](#)

Journal of Managed Care & Specialty Pharmacy

Joseph Mattingly II, Bryan L. Love

The dynamic nature of pharmaceutical innovation alongside improved effectiveness of treatments over time requires iterative cost-effectiveness analyses of healthcare services and interventions for HCV.

[As Value Assessment Evolves, The Patient Voice Must Not be Forgotten](#)

PhRMA Foundation Blog

Eleanor M. Perfetto and Elisabeth M. Oehrlein

As researchers and health economists develop new approaches and methods for value assessment, PAVE and NHC are working directly with patients to ensure their voice remains at the forefront.

[Peer Review and Transparency in Evidence-Source Selection in Value and Health Technology Assessment](#)

Value in Health

Bansri Desai, T. Joseph Mattingly II, et al.

Disparities exist among V/HTA organizations in requirements and guidance related to evidence-source selection. Standardization of evidence selection strategies could improve transparency and quality in value assessment.

[Evolving Methods to Enhance Patient-Centered Value Assessment](#)

Morning Consult

Eleanor Perfetto & Elizabeth Oehrlein

PAVE proposes a “patient-informed societal perspective” framework for value assessment, which involves engaging patients to identify which value elements matter most to them, such as productivity and caregiver burden, and quantitatively incorporating these elements into economic analyses.

Value in Hepatitis C Virus Treatment: A Patient-Centered Cost-Effectiveness Analysis.

Pharmacoeconomics

T. Joseph Mattingly, II, Julia Slejko, Eberechukwu Onukwugha, Eleanor M. Perfetto, et al.

Formally engaging patients through Delphi panel methods to evaluate hepatitis C virus (HCV) therapy led to incorporation of a novel value element and emphasis on taking the societal perspective. Results show that HCV treatments are cost-effective and cost-saving from a health sector and societal perspective, respectively.

What Matters Most for Treatment Decisions in Hepatitis C: Effectiveness, Costs, and Altruism

The Patient

Joseph Mattingly II, Julia F. Slejko, Eleanor M. Perfetto, et al.

Researchers found variability in preferences among patients diagnosed with Hepatitis C. Treatment effectiveness (100% agreement), longer life (88%), fear of complications (84%), financial issues (80%), quality of life (100%) and impact on society (80%) were considered important factors to patients when seeking treatment.

The Future of Patient-Driven Healthcare Evaluation: The Patient-Informed Reference Case

Value in Health

Julia F. Slejko, T. Joseph Mattingly II, C. Daniel Mullins, Eleanor M. Perfetto, Susan dosReis

The growing emphasis on the patient perspective suggests a need to better incorporate the patient in value assessment. A patient-informed societal reference case can improve end-user decision making, assist in deriving patient preferences/value elements, and pave the way for patient-informed cost-effectiveness analyses.

Using PCORI to Advance Patient-Centered Values

Fierce Healthcare

Joseph Mattingly II, R. Brett McQueen

PCORI is in a unique position to expand upon and enhance its CER-PCOR platform to further development of the patient-centered, comparative effectiveness data needed for researchers to conduct sound, patient-centered value assessment.

Making the Patient Voice Matter In Value Assessment

Managed Care Magazine

Susan dosReis

Listening to and incorporating the patient voice in value assessment can improve end-user understanding of how treatments are valued differently across subpopulations, and can help ensure patients receive treatments that are right for them.

Putting Our Guard Down: Engaging Multiple Stakeholders to Define Value in Healthcare

Health Affairs Blog

Joseph Mattingly II, Julia F. Slejko, Eleanor M. Perfetto, Susan dosReis

Efforts to improve methods of cost-effectiveness should adapt more patient-centered approaches similar to those of PAVE researchers, who work with patient groups from the inception of a research question and follow a 10-Step Framework to ensure active and continual patient engagement.

The Latest from Value Consortium:

How Can COVID-19 Refocus Our Health Care System Towards Value and Crisis Preparedness?

PhRMA Foundation Blog

Beth Beaudin-Seiler, A. Mark Fendrick, George Miller, Paul Hughes-Cromwick

A silver-lining to the COVID-19 pandemic has been the opportunity to reduce low-value care through the decline in unnecessary elective procedures. The Value Consortium is working with expert researchers to explore ways in which the system can learn from lessons of the pandemic to reduce spending on low-value care services and shift towards a value-driven health care system prepared for crises.

The Time to Reduce Low-Value Care is Now

VC Concept Paper

A key component of addressing affordability and rising health care spending in the U.S. includes a multi-stakeholder approach to reduce the utilization of low- and no-value health care services and interventions.

Research Brief: Estimating State-Level Prevalence of Low-Value Care Services Among the Privately Insured, 2015.

VC Concept Paper

Commercial payers spent \$5.5 billion on 20 low-value care services in 2015.

Finding Meaning in Analytics: The Low-Value Care Visualizer

VC Demonstration Brief

The Value Consortium Low Value Care Visualizer offers an easy-to-read online interactive platform for reporting state spending on low value care. Using an example of Virginia, the Visualizer shows that 41% of members received at least one or more low value services with the top costliest low-value care services including pre-surgery baseline laboratory studies, eye imaging tests, and electrocardiograms in low risk patients.

Why Estimating Low-Value Care at a State Level is Valuable

VC Concept Paper

Researchers found substantial variance (9%-20%) among states in the prevalence of low-value services, suggesting further efforts to track and monitor wasteful spending are needed and can help decision makers better allocate resources towards higher-value services.

An Employer-Based Health Care Waste Indicator Tool: Prospects, Potential and Problems

VC Concept Paper

The development of an employer-based waste calculator can assist in monitoring and tracking the use of low-value care, and can play a substantial role in helping health care decision makers reduce and control unnecessary healthcare spending in the U.S.

Efforts to Measure Value in Health Care: Greater Balance is Needed

VC Concept Paper

Researchers found that more than half of CEAs in the Tufts's CEA Registry address pharmaceutical products. The over-emphasis on pharmaceuticals means that other clinical services, such as surgical interventions and medical devices are neglected in comparison. Attempts to measure and improve value in health care should recognize the need to ensure balance in addressing all aspects of medical care.

A Framework for Addressing Low-Value Care

VC Concept Paper

Researchers have proposed a framework for defining and prioritizing efforts to reduce the use of low-value clinical services, which utilizes four guiding principles: strongly backed by clinical evidence, low in heterogeneity of value across patients, easy to measure using claims data, and non-controversial.

The "Top 5" Low- and High-Value Services: Trends in Health Care Spending Among the Privately Insured, 2014-2016

VC Research Brief

Spending growth for a privately insured population from 2014 to 2016 on five common low-value services relative to five high-value services suggests there may be incremental improvements in transitioning overall spending from low to high-value care but more progress is needed.

Improving Health by Reducing Low-Value Care

VC Concept Paper

Reducing low-value care represents an opportunity for states to improve health system efficiency, protect patients from unnecessary and potentially harmful services, and increase budgetary flexibility to ensure patient have access to other high-value and evidence-based treatments.

Optimizing Health Care Resource Allocation: The Research Consortium For Health Care Value Assessment

Health Affairs

The Research Consortium's quick strike projects will help optimize the use of health care resources across a variety of stakeholders, support the measurement of value, identify areas in which low-value care can be reduced, and assist in tracking progress toward a more efficient health care system.

Value Consortium in the Media:

More Than \$5.5 Billion Wasted on Low-Value Healthcare, Says Survey

Dot Med

Where Are Patients More Likely to Receive Low-value Health Services?

Benefits Pro

Michigan Ranks Near Bottom in Use of Health Services Proven to be Low-Value

Crain's Detroit Business Journal

[Commercial Insurers Spent at Least \\$184M on Low-value Imaging in One Year Alone](#)
Radiology Business

[Low-value Services' Prevalence Varies Across Regions](#)
Modern Healthcare

[Why High-Value Care Adoption Is Stagnant](#)
Managed Healthcare Executive

[Spending on low-value services slowed from 2014 to 2016](#)
Modern Healthcare

[Slow Progress in Reducing Spending on Low-Value Services](#)
AJMC

[Primary Care Physicians Influence LVC Spending, Studies Show](#)
Health Payer Intelligence

The Latest from pValue:

[Using PCORI to Advance Patient-Centered Values](#)
Fierce Healthcare
Joseph Mattingly II, R. Brett McQueen

PCORI is in a unique position to expand upon and enhance its CER-PCOR platform to further development of the patient-centered, comparative effectiveness data needed for researchers to conduct sound, patient-centered value assessment.

[Complementing Coverage and Reimbursement Decisions with Multi-Criteria Decision Analysis](#)
American Journal of Managed Care
Brett McQueen, Melanie D. Whittington, Zoltan Kalo, Roger Longman, and Jonathan D. Campbell

Multi-criteria decision analysis (MCDA) can improve transparency in health care decision making, and can account for non-traditional elements of value, such as equity or severity of disease, which are often excluded in traditional value assessment.

The Latest from CEVA:

[Measuring “Fearonomic Effects” in Valuing Therapies: An Application to COVID-19 in China](#)
Value in Health
Siyu Ma, David D. Kim, Joshua T. Cohen, and Peter J. Neumann

A qualitative framework is presented to conceptualize the direct and indirect economic effects caused by fear of contagion in a pandemic and help policymakers understand the broader economic and societal consequences when assessing treatments and vaccines.

Perspective and Costing in Cost-Effectiveness Analysis, 1974–2018

Pharmacoeconomics

David D. Kim, Madison C. Silver, Natalia Kunst, Joshua T. Cohen, Daniel A. Ollendorf and Peter J. Neumann

A review of cost-effectiveness literature reports that the societal sector perspective was used only 25% of the time and when used the authors did not apply it as broadly as intended. Moving forward, consistent use of the impact inventory and reporting of disaggregate outcomes are recommended.

Value Assessment Research Should Consider Societal Consequences.

PhRMA Foundation Blog

David D. Kim and Peter J. Neumann

In economic evaluation, an impact inventory listing the intervention's health and non-health consequences can help standardize data collection in HTA, and allow end users to make more informed decisions regarding pricing and coverage.

Analyzing the Cost Effectiveness of Policy Responses for COVID-19: The Importance of Capturing Social Consequences

Medical Decision Making

David D. Kim and Peter J. Neumann

Cost-effectiveness analyses of healthcare interventions and services for COVID-19 are necessary, but it is critical to examine both the health care sector and societal perspectives in an effort to ensure all relevant consequences are being considered.



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