

The National System for Introduction of New Health Technologies within the Specialist Health Service

Nasjonalt system for

INNFORING AV NYE METODER

i spesialisthelsetjenesten

Eva G. Friberg

NSFS, Roskilde, 26.08.2015



Background

- Varying or lacking practice for evaluation of methods before they were introduced or out-sourced within the specialist health service
- Different processes for decision-making
- Introduced in 2013
- NRPA full-part member in August 2014



Main goals

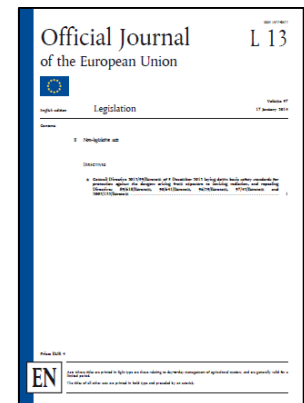
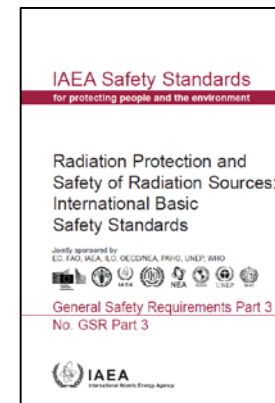
- Ensure that patients get fast and equal access to new methods showing a **safe** and evidence based **clinical effect**
- Avoid introduction of unsafe and non-effective methods
- Standardized process for evaluation of effect, safety and costs
- Predictable and transparent process with stakeholder involvement
- Tool for decision-making and prioritizing in health care

Motivation to become a part of the system

Justification

- Level 1: Use of radiation in medicine - OK
- Level 2: Generic justification (RP regulation §37)

«The justification of new methods and applications in medical use of radiation shall be evaluated on a general basis before such methods and applications become available for general use. Existing areas for use and methods shall be reassessed when new information emerges about their justification.»



Supported by IAEA/EU-BSS

- Level 3: Individual justification



Overall system

- Evaluation of methods as part of an overall system for introducing new methods
- Four different processes



- All steps and involved authorities/institutions/stakeholders are coordinated

Broad definition of method

Include all actions to:

- Prevent
- Diagnose
- Treat
- Rehabilitation
- Organizing of health services

• Examples of methods:

- Medical equipment
- Procedures (diagnostic, medical, surgical, etc.)
- Pharmaceuticals



Alerts of new methods

Alert of
methods

- Part of national system in 2014 and implementation-phase in 2015
- **Purpose:** To assure the identification of new methods and make a prioritizing for evaluation of methods
- Evaluates:
 - Available clinical data
 - On-going clinical studies
 - Cost impact on society
 - Premises for effective implementation

Steps in the alert function:

- Identification of methods
- Level 1 filtration
 - Most important methods
- Production of alert
- Level 2 filtration
 - Methods actual for the Hospital Trusts
- Evaluation of method

Publication of alerts: www.mednytt.no

Evaluation of methods

Evaluation of
methods

- Follows international principles of health technology assessment and are performed at three levels

Mini-HTA

- **Local** evaluation of a method (equipment, procedure, organization)
- Carried out in the Hospital Trusts (HT) in a limited format by experts
- Carried out in dialogue with support functions

Fast-HTA

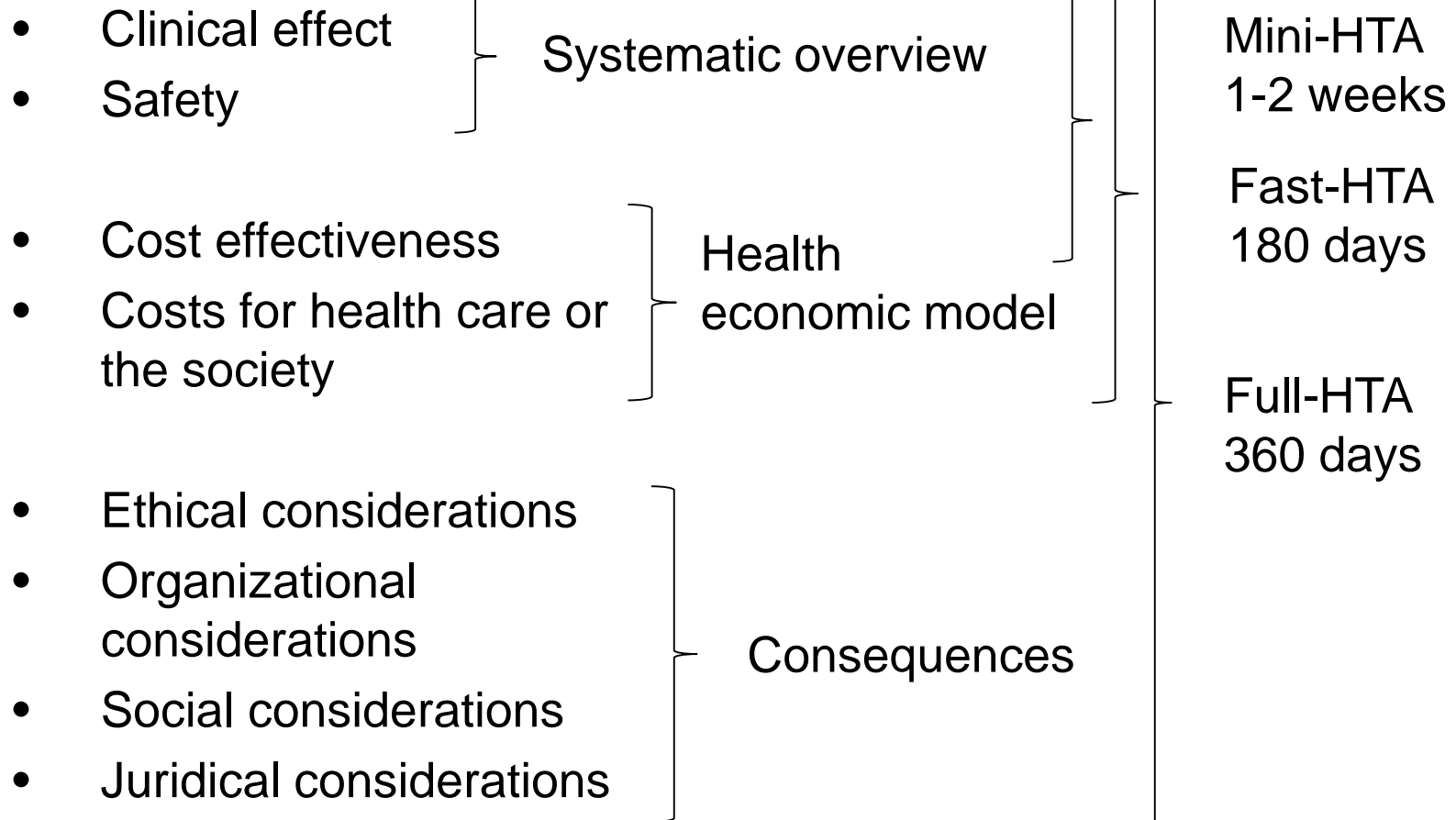
- **National** evaluation of a method (equipment, procedure, organization)
- Carried out by Norwegian Medicines Agency for pharmaceuticals
- Other methods carried out by Norwegian Knowledge Centre for the Health Services (NOKC)
- NRPA assist on medical use of radiation
- Vendors provide necessary information (template)

Full-HTA

- Comprehensive **national** evaluation of alternative methods against each other within a treatment area (comparative effectiveness)
- Carries out by NOKC who provide necessary information
- NRPA assist on medical use of radiation

Topics to be evaluated

Evaluation of
methods



Methods to be evaluated at a national level

- Methods involving **screening**
- Methods involving **high specialised medical treatment** and should be established at a national level
- Methods involving **pharmaceuticals**
- When **social economic** or **health economic** evaluations of the method is required

Prioritizing and decision-making

Prioritizing
Decision-
making

Prioritizing and decision-making are placed at the **RHTs**

- For local evaluations (Mini-HTA):
 - The RHTs are responsible for its own evaluation and implementation of new methods
 - The system recommend all RHTs to evaluate Mini-HTA performed by other RHTs
- Two important fora for national evaluations (Fast and Full-HTA):
 - **RHT Order-Forum** for the ordering of evaluation of new methods
 - **Tasks:** Regional meetings, evaluate received proposal for method evaluations (non, Fast-HTA, Full-HTA), order evaluation of methods, submit final method evaluation to RHT Decision-Forum
 - **RHT Decision-Forum** for the implementation of new methods
 - **Tasks:** Regional meetings, decide implementation of new method or out-phasing of old methods on national level, agreement of all four RHTs



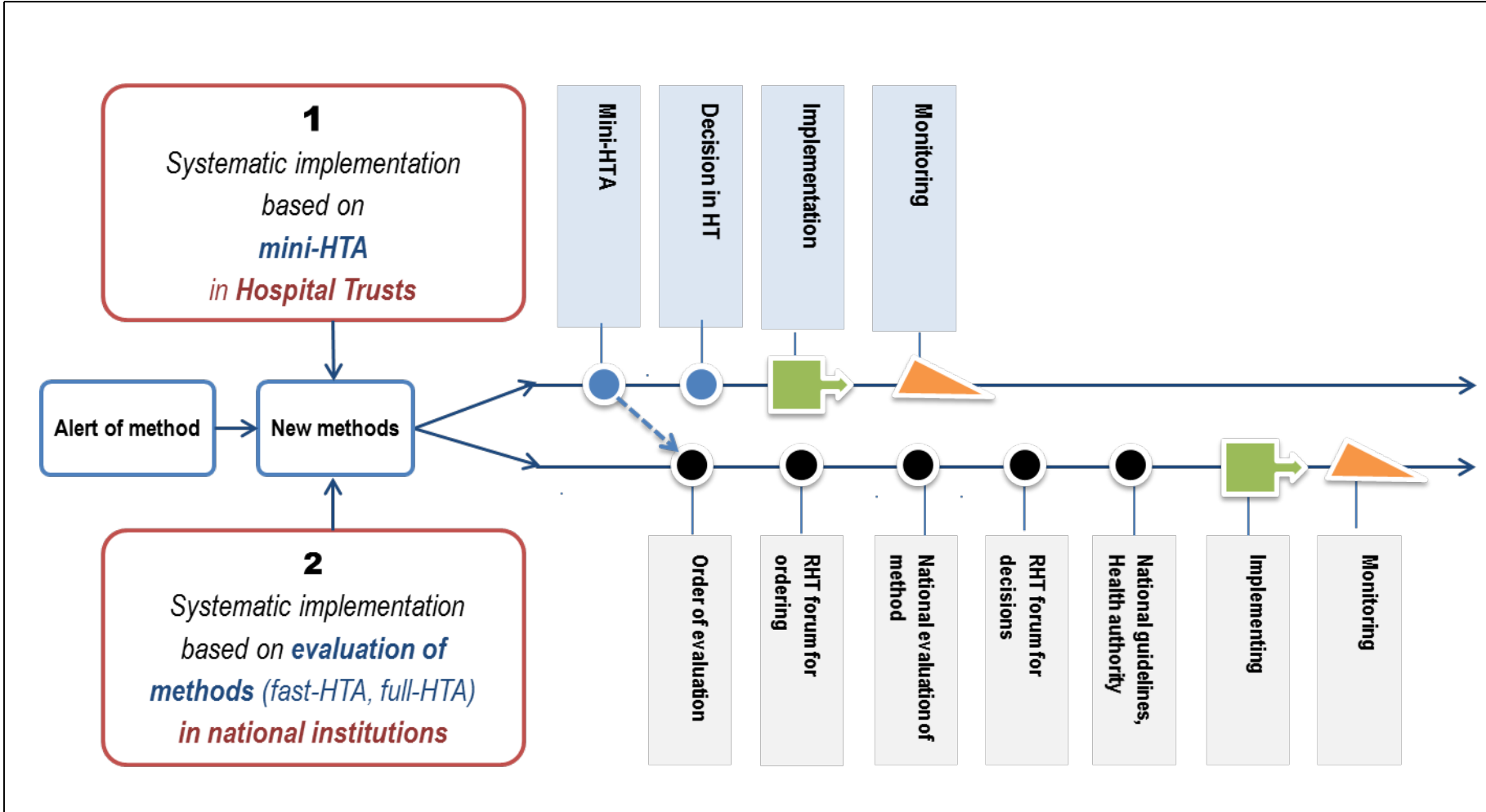
Implementation

Implementation

- **Specialist Health Service** shall be performed in compliance with the decisions taken locally at the RHTs or nationally by RHT Decision-Forum
- Decisions taken by the RHT Decision-Forum are coordinated with the development of **national guidelines** by the Health Authority



Overview of the system



NRPA's role in the system



- Ensure that **radiation protection issues** for patient and staff are evaluated and taken into account in the total risk-benefit evaluation of the method in all three levels of evaluation (mini, fast, full)
 - Important to involve **medical physicists** and **radiation protection experts/officers** at HTs for Mini-HTA
- Full member of the system ensure that NRPA are **properly involved in all processes** related to the introduction of new methods
 - Aptitude assessment of proposed methods for evaluation
 - Participate in national evaluation of methods
 - Observer in RHTs Ordering-Forum and RHTs Decision-forum
- NRPA get a **national overview of local mini-HTA** performed on the different HTs for equipment, radio-pharmaceuticals and procedures within medical exposure
- **Ongoing work:** Development of forms to include RP, identify role and responsibilities with other parties of the system

Identified challenges



- RP regulation cover **all** use of radiation
 - Primary- and Specialist Health Services
 - Public and private sector
- National system cover only Specialist Health Services
- System most in use for pharmaceuticals
- Difficult to define new methods for medical equipment
- Difficult to get vendors to provide necessary information

Summary and conclusions

- Overall transparent system for the introducing of new methods within the specialist health service
 - Four processes: Alert of methods, evaluation of methods, prioritizing and decision-making, implementation
- Evaluation of methods
 - Mini-HTA local at HTs
 - Fast-HTA national, information provided by vendors (180 days)
 - Full-HTA, national, information provided by NOKC (360 days)
- NRPA full member since August 2014
 - Generic justification implemented in national system for evaluation of new methods
- For more information: <https://nyemetoder.no/>

Mini-HTA (local evaluation)

- A task for the Regional Hospital Trusts (RHT)
 - Ensure for available local competence at Hospital Trusts (HTs)
 - Assist HTs with research librarian and economic analysis
- NOKC responsible for the Mini-HTA system
 - Framework, form and evaluation
- National database - www.minimetodevurdering.no

