HEOR Tool

# Classifying the technology

## What is the name of the new technology?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## This technology addresses which disease state and/or indication?

\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Which specific restrictions has your pharmaceutical and therapeutics (P&T) committee or other decision making body implemented for this technology and indication?

Choose an item.

Other (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## The medical intention of the proposed technology is:

Choose an item.

Other (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## What covered benefits are currently available for use in this disease state or indication? (check as many as apply)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Coverage status | | |
|  | Covered by plan | Not covered | Does not exist |
| Benefit type |  |  |  |
| Medication |  |  |  |
| *Traditional* | ☐ | ☐ | ☐ |
| *Specialty* | ☐ | ☐ | ☐ |
| Diagnostic |  |  |  |
| *Laboratory* | ☐ | ☐ | ☐ |
| *Imaging* | ☐ | ☐ | ☐ |
| *Specialty* | ☐ | ☐ | ☐ |
| *Nuclear* | ☐ | ☐ | ☐ |
| *Genetic* | ☐ | ☐ | ☐ |
| Device | ☐ | ☐ | ☐ |
| Procedure |  |  |  |
| *Inpatient* | ☐ | ☐ | ☐ |
| *Outpatient* | ☐ | ☐ | ☐ |
| Behavioral intervention |  |  |  |
| *Well care* | ☐ | ☐ | ☐ |
| *Mental heath* | ☐ | ☐ | ☐ |
| *Substance abuse* | ☐ | ☐ | ☐ |
| Other |  |  |  |
| *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | ☐ | ☐ | ☐ |
| *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | ☐ | ☐ | ☐ |

# Evidence base

## What are the health outcomes measurements for the technology and indication? (check all that apply)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Beneficial—intended outcomes | | |
|  | Short term | Long term | No evidence |
| Survival—reduced mortality | ☐ | ☐ | ☐ |
| Frequency of health-related events—reduced burden of disease as measured by medical outcomes | ☐ | ☐ | ☐ |
| Patient-reported outcomes—reduced burden of disease as measured by patient experience | ☐ | ☐ | ☐ |
| Proxy measures of health—reduced burden of disease as measured by proxies such as laboratory test values | ☐ | ☐ | ☐ |
|  | Side effects—negative unintended outcomes | | |
|  | Short term | Long term | No evidence |
| Survival—increased mortality | ☐ | ☐ | ☐ |
| Frequency of health-related events—increased burden of disease as measured by medical outcomes | ☐ | ☐ | ☐ |
| Patient-reported outcomes—increased burden of disease as measured by patient experience | ☐ | ☐ | ☐ |
| Proxy measures of health—increased burden of disease as measured by proxies such as laboratory test values | ☐ | ☐ | ☐ |

## What type of health outcomes evidence is available?

### ☐ Randomized clinical trial (against placebo vs. active comparator?)

### ☐ Retrospective observational study

### ☐ Prospective observational study

### ☐ Clinical guidelines, FDA guidance or other regulatory data

### ☐ Registry data

### ☐ Predictive modeling

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## How is the health outcomes evidence externally validated for this indication of the technology?

### ☐ Peer-reviewed publication

### ☐ Outside consultant

### ☐ Academic consultant

### ☐ Government source (i.e. FDA)

### ☐ Publicly available data

### ☐ No external validation

## What type of cost evidence (price of the product and associated therapy) is available for this indication?

### ☐ Randomized clinical trial

### ☐ Claims data

### ☐ Registry data

### ☐ Internal data

### ☐ Predictive modeling

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## How is the cost evidence externally validated for this indication?

### ☐ Peer-reviewed publication

### ☐ Outside consultant

### ☐ Academic consultant

### ☐ Government source (i.e. Medicare)

### ☐ Publicly available data

### ☐ No external validation

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## What type of cost-effectiveness evidence is available for this indication?

### ☐ Randomized clinical trial

### ☐ Observational trial

### ☐ Predictive model - static

### ☐ Predictive model - interactive program

### ☐ Systematic review

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## How is the cost-effectiveness evidence externally validated?

### ☐ Peer-reviewed publication

### ☐ Outside consultant

### ☐ Academic consultant

### ☐ Government source (i.e. NICE)

### ☐ No external validation

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Can you assess the current utilization rate of the technology in your health plan? Can you assess utilization for the indication considered in this tool?

## Can you assess the current cost of the technology in your health plan? Can you assess cost for the indication considered in this tool?

## Can you assess the outcomes of the technology in your health plan?

## Were all therapies in the indication considered by the P&T committee or other decision making body of the health plan?

Choose an item.

## Considering the methodology or methodologies used to justify this technology, how would you assess the quality of the evidence for the indication?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |
| Low quality | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | High quality |

## Considering the sample size(s) used in studies to justify this technology, how would you assess the quality of the evidence assessed?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |
| Low quality | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | High quality |

## Considering the health outcome(s) demonstrated in studies of this technology, how well do the outcome(s) support the value of the technology?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |
| Weakly supports | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | Strongly supports |

## Considering the entire evidence base, how does the overall quality of the research support the contention that the technology should be covered by your health plan?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |
| Weakly supports | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | Strongly supports |

## If you answered any of questions 0-2.15 as less than 4, comment on what additional evidence you would request in order to assess the technology and indication considered.

# Applying the evidence

## What stakeholders are affected by this technology in the indication considered?

### ☐ Employers

### ☐ Government

### ☐ Society

### ☐ Insurers

### ☐ Individual out of pocket cost

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## What does the proposed technology contribute to stakeholders?

### ☐ Cost savings

### ☐ Improves member health

### ☐ Improves competitive position with other health plans

### ☐ Allows for better negotiating power with providers/other vendors

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## How might the technology adversely affect stakeholders?

### ☐ Cost increases

### ☐ Side effects

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## What is your perspective in evaluating this technology?

### ☐ Employer sponsored health plan

### ☐ Employer--other benefits

### ☐ Private health plan

### ☐ Government health benefits

### ☐ Individual out of pocket costs

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## What specific populations would be affected by the proposed technology?

### ☐ Children (<18 years)

### ☐ Adults (18-64 years)

### ☐ Older adults (≥65 years)

### ☐ Males

### ☐ Females

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Can you estimate what percent of your health plan’s population would be affected by the proposed technology and indication?

Choose an item.

## What types of costs are associated with the proposed technology?

### ☐ One time

### ☐ Ongoing

### ☐ Population based (i.e. PMPM)

### ☐ Price differs by payer

### ☐ Other: \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Can you estimate the PMPM cost of this technology at your health plan? How does this estimate compare to the cost evaluation provided by the manufacturer (from economic models or other supported evidence)?

## Are there spillovers for existing benefits?

### ☐ Cost offsets (new drug reduces medical costs such as NOACs)

### ☐ Cost increases (cost of side effects, other increased utilization)

### ☐ New insured population

### ☐ Adverse selection

### ☐ Moral hazard

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## How would the proposed technology be added to the health plan?

### ☐ Add to an existing class of covered benefit (i.e. prescription drug formulary, in patient hospitalization)

### ☐ Change existing copay, coinsurance, and/or deductible

### ☐ Change existing benefit design

### ☐ Add a new type of benefit

### ☐ New beneficiary (i.e. add a new covered population)

### ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Feedback loop to assess performance

## How can I tell if the technology is working as expected?

## When do I get interim data on costs and outcomes for my plan?

## How are claims processed for this technology in my plan?