



PARTNERSHIP FORUM

Health Technology Assessment and Value Assessment Frameworks to Inform Coverage Reimbursement



EXECUTIVE SUMMARY

In the transition from paying for volume to paying for value in health care, health technology assessment (HTA) and value assessment frameworks can serve as resources for determining the value of pharmaceuticals and other health interventions.

To advance these principles and improve value assessments and their application to formulary decision-making to best optimize patient care, AMCP held a multistakeholder Partnership Forum in Arlington, Virginia, on Aug. 30 and 31, 2022. Forum participants were asked to: 1) outline principles for how value should be rewarded in a system of constrained resources, 2) explore the evolution of value frameworks to guide coverage and reimbursement decisions, and 3) identify education and managed care tools to aid the application of value assessment findings.

THEMES THAT EMERGED FROM THE PARTICIPANT DISCUSSION INCLUDED THAT:

Definitions of value vary by stakeholder perspective.

- Value should be informed by a core set of elements based on clinical outcomes, patient-reported outcomes, safety, and high-quality real-world data.
- Value assessment methods need to be transparent and reproducible.
- Increased data collection and evidence enable more informed decisions regarding treatment value among various subpopulations of patients.
- The value of a given product may change over time as new information becomes available; value assessment results are dynamic and should be updated.

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WATCH FOR FOLLOW-UP

This Partnership Forum provided a valuable opportunity to gain expert insights on how to drive value assessment forward. AMCP's next steps will be to:

- **Publish a proceedings document** describing the findings and recommendations from the forum in an upcoming issue of AMCP's *Journal of Managed Care + Specialty Pharmacy (JMCP)* and disseminate it widely to decision-makers around the country.
- **Host a forthcoming webinar** to report these findings and recommendations.
- **Continue to engage stakeholders** on this topic and share lessons on Nov. 9, 2022, [AMCP Summit: Perspectives on Value-Based Arrangements & Assessments](#).

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High-value products should be rewarded.

- To reward high-value products, payers can improve access and lower patient out-of-pocket costs; in contrast, products with low value should have fewer incentives.
- Rewarding value can drive further innovation. An unintended consequence of these incentives may alter the products ultimately developed.

Value assessments are just one part of payer coverage and reimbursement decisions.

- Decision-makers use value assessments in several ways. These assessments are often used as a supplement to the initial clinical evaluation.
- Value assessments are used to expand or focus patient access.
- Many decision-makers expressed the need for additional value assessment results and a willingness to consider those produced by multiple trusted sources to augment internal activities.
- Value is not synonymous with affordability but can serve as a tool to address health care costs by establishing a fair price.

New inputs to value assessment frameworks need time for uptake.

- There is a desire to better incorporate social determinants of health and the patient perspective, for instance. However, it takes time and funding to build data collection infrastructure, develop sound evidence, and expand staff capabilities and capacity.

Stakeholder education is a key opportunity.

- Raising awareness of current applications of the value assessment process for payer decision-making is needed.
- Education regarding ongoing efforts to advance and improve frameworks can increase trust and confidence in the results.



The benefit is that people from different perspectives are all in the same room, talking about a shared value framework to better determine fair pricing for medications and products.”

— Pat Gleason, PharmD
Assistant Vice President, Prime Therapeutics

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