Decision-Maker Perspectives on Valuing Health Outcomes for Policy Decisions

Innovation – paying for what works



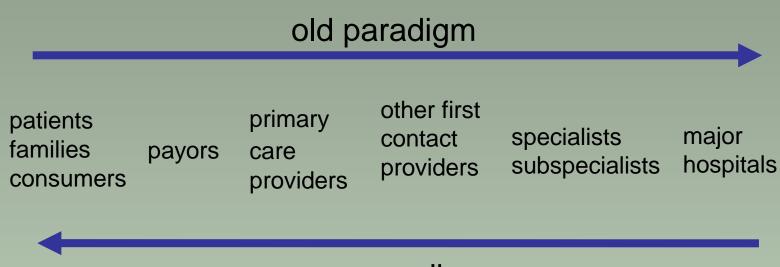


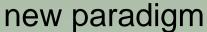
Edmonton, December 2, 2008

Stuart MacLeod, MD, PhD, FRCPC Vice President, Research Coordination and Academic Development Provincial Health Services Authority, Vancouver



The shifting power spectrum in health decision-making







Addressing innovation Valuing health outcomes

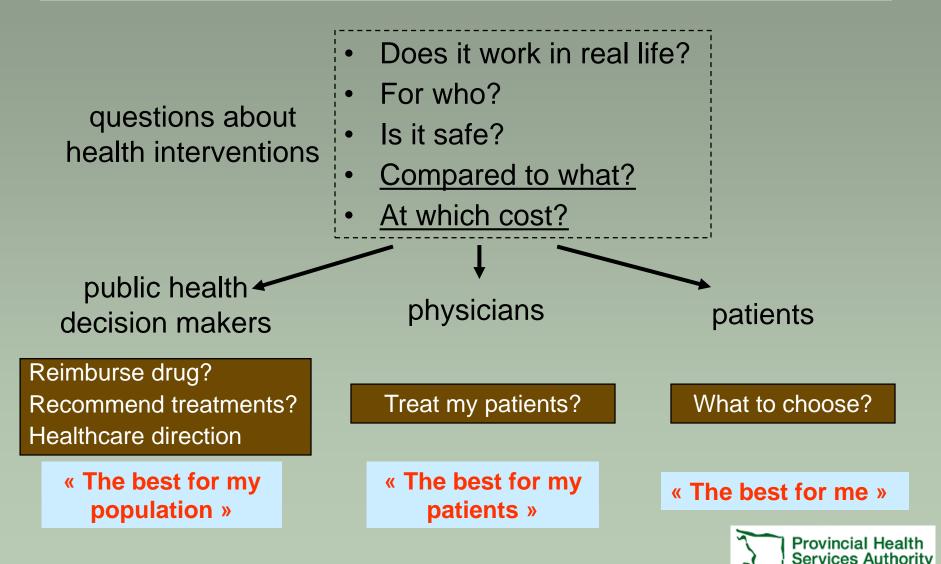
Are values of decision-makers different from societal values?

....from health professional values?

....finding a balanced view



Applied health research & evaluation for decision makers



Decision basis: a deliberative process that considers context

- central focus on comparative effectiveness
- evidence-based vs evidence-informed
- reduced reliance on RCTs
- examine observational studies that go beyond RCTs
- composite outcomes
- acceptance of colloquial evidence (Lomas et al)
- use of EPOC approach (Cochrane Effective Practice and Organization of Care Group)





The wolf shall also dwell with the lamb, and the leopard shall lie down with the kid; and the calf and the young lion and the fatling together.

Isaiah 11:6

....science is also a source of power that walks close to government and that the state wants to harness. But if science allows itself to go that way, the beliefs of the twentieth century will fall to pieces in cynicism. We shall be left without belief, because no beliefs can be built up in this century that are not based on science as the recognition of the uniqueness of man....

J Bronowski, The Ascent of Man



Alternative perspectives on outcomes of value

- patients
- community researchers
- clinicians
- academic researchers
- health (authority) system decision-makers
- payors including government decision-makers

Ultimately public-private views must align in a true partnership.

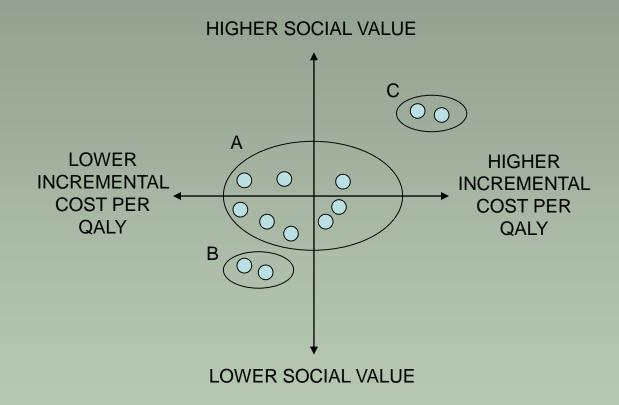


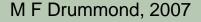
Valuing health outcomes: factors warranting consideration alongside cost effectiveness

- lack of, or inadequacy of, alternative treatments
- seriousness of the condition (rights of rescue)
- affordability from the patient perspective
- financial implications for government
- equity objectives
- social values
- overall impact of innovation



The relationship between social value and incremental cost per quality-adjusted life-year (QALY)







Research to inform policy decisions

- frame question carefully
- use PICOT* format for study design
- manage study scope
- design intervention to fit study objectives
- expand the range of outcomes to be considered

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* PICOT =

Population
Intervention
Comparison
Outcome
Timeframe
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What could be nicer than NICE?

- NICE is the closest anyone has yet come to fulfilling the economist's dream of how priority setting in health care should be conducted.
- It is transparent, evidence-based, seeks to balance efficacy and equity, and uses a cost-per-QALY benchmark as the focus for its decision-making.
- Experience has taught me that it is not uncommon for an economists-dream-come-true to be seen as a nightmare by everyone else.

Alan Williams, OHE Annual Lecture 2004



"A turbulent political, intellectual and cultural environment" Alan Williams 2004

Clashes

- medicine
- statistics
- economics
- finance
- philosophy
- political ideology
- public administration

individual vs population perspective

optimization vs bounded rationality perspectives

best is the enemy of better





Daniels and Sabin 1997

There are four elements of legitimacy and fairness in public decisionmaking:

- stakeholder involvement
- publicity (transparency, dissemination)
- revision or appeal
- leadership, including accountability for reasonableness



The challenge of comparative effectiveness: Appropriate valuation of outcomes by decision-makers

climbing a Wall of Fear

- inertia may be safer
- high cost of innovation
- interplay of values and evidence
- divergence in social values
- ambiguity re 'effectiveness'
- lack of consensus on methods
- constraints on access to data





lf

you're

not

the

lead

dog