



Schweizerische Eidgenossenschaft
Confédération suisse
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Eidgenössisches Departement des Innern EDI
Bundesamt für Gesundheit BAG
Direktionsbereich Kranken- und Unfallversicherung

HTA-Program

Swiss Federal Office of Public Health

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Section Health Technology Assessment,
Division of Health Care Services



Content

- Legal basis of the program, Principles and Framework
- Overview HTA-Program
- Detail processes of the HTA-Program
- Demarcation
- Work in progress



Swiss Federal Health Insurance Act (KVG/LAMal), Principles and Framework

- **National, mandatory insurance (Health Insurance Law, KVG)**
 - Reimbursement of services in case of illness
 - Comprehensive functional medical care
- **Cantonal supply systems (incl. coordination/ concentration of highly specialized medicine)**
- **Solidarity financing**
 - Insured/premium payers
 - Cantons: Co-financing of hospital in-stay treatments
 - Insured/patients: cost sharing
 - Cantons and confederation: premium reduction



Definition of services catalogue I

- In general form by the legislator, example:
 - Services intended to diagnose and treat an illness and its consequences (Art. 25 KVG)
 - Medical prevention services (Art. 26 KVG)
 - Maternity services (Art. 28 KVG)

- In detail by the Ordinance giver (Federal Department of Home Affairs (FDHA) or Federal Office of Public Health (FOPH) (Art. 33 and 52 KVG)

⇒ ***Uniform Catalogue of services for all insured persons***



Definition of services catalogue II

- Open Service catalogue for non-controversial medical and chiropractic services
 - With the designation of medical and chiropractic services which are not or only to be reimbursed under certain conditions
 - > **No evidence of effect, or evidence of no effect**

- Closed Service Catalogues (positive lists)
 - Pharmaceuticals -> **evidence of effect**
 - Analysis, Medical supplies -> **evidence of effect / no harm**
 - Services prescribed by the a physician (physiotherapy etc)

 - ⇨ **Formal decision only on part of the services**



Definition of services catalogue III

- Frame is given by the law on health insurance
 - Comprehensive, appropriate medical care with
 - Effective, appropriate and cost-effective services
- Application system for the inclusion of new services for the positive lists and in the case of controversial medical/chiropractic services for the open list
- Decision-making bodies (FDHA, FOPH) are based on three consultative federal commissions
 - Relevant stakeholders as permanent members or by invitation
 - ⇒ ***The impulse for development is bottom up***
 - ⇒ ***Legally predetermined and broadly supported process***

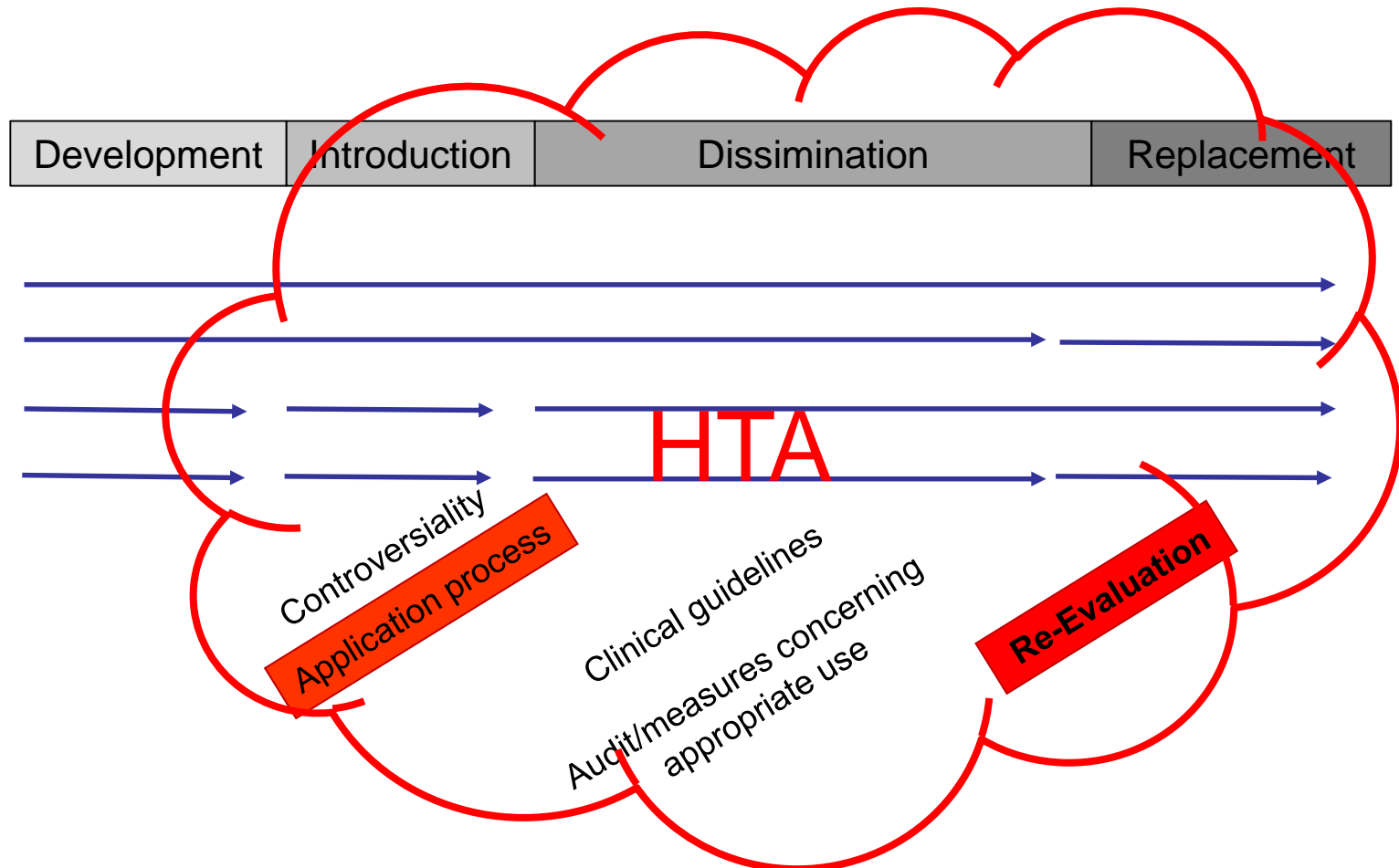


Performance requirements

- Effectiveness
 - Assessment: **Effectiveness and Safety / Harms**
 - Clinically reproduced results for the benefit and risks
 - Study results are applicable to Switzerland
- Appropriateness
 - Assessment: Patient **Relevanz**, Social-, Ethical- and Legal requirements are given
- Economic efficiency (cost-effectiveness)
 - Assessment: **Benefits and Costs** taking into account the cost consequence (budget impact).



Life cycle of services, use of HTA



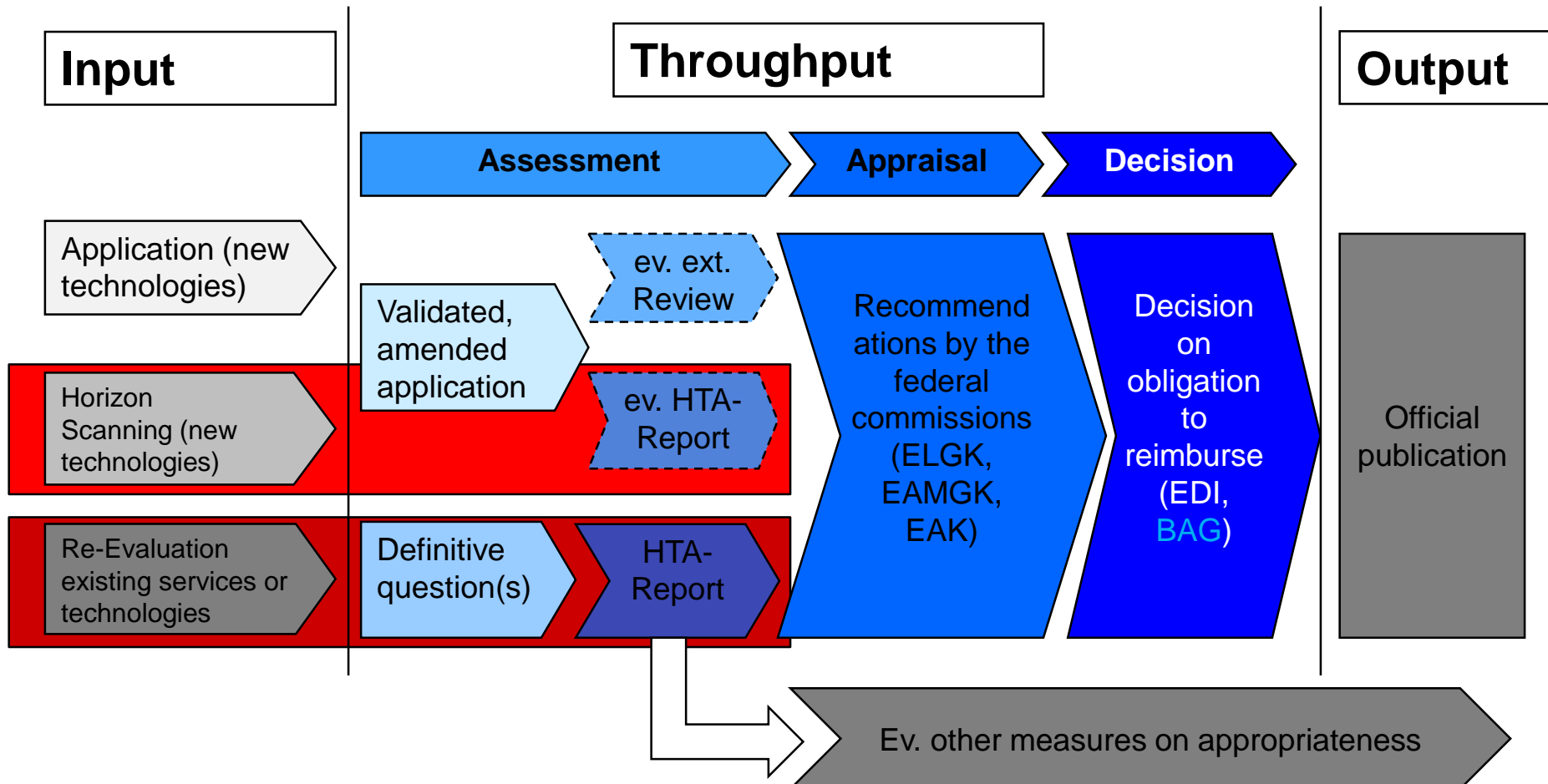


Aim of the HTA-Program of the FOPH

- Review of compulsory health insurances (CHI) covered services with the aim of removing obsolete services from the service catalogue or restricting the indications ("disinvestment") that are subject to **obligatory** reimbursement
- Process of systematic evaluation of medical procedures and technologies related to the health care of the population
- Presentation of the scientific evidence on efficacy (efficacy, effectiveness), security, cost-effectiveness/benefits as well as legal, social (incl. equal access) and ethical aspects regarding health services
- Transparency and support by the review of the EAE criteria



Overview of the processes





Process Re-Evaluation CHI services with HTA

Topic finding

- Topic input by interested parties or SFOPH (plausibility check SFOPH)
- **Stakeholder**¹ consultation for prioritization of topics
- Prioritization and recommendation by federal commissions
- Decision HTA-topics by Federal Department of Home Affairs

Scoping 6-9 months

- Pre-Scoping: Preanalysis and limitation/focussing of the question(s) (SFOPH)
- Tendering and contracting (SFOPH)
- Scoping: Concretization of the question(s) and development of the methodology (contractors)
- Consultation **Scientific Reviewers** and **Stakeholders**² Scoping report (SFOPH)
- Publication final Scope Report (SFOPH)

HTA

Assessment 6-12 months

- Production HTA-report (contractor)
- Consultation **Scientific Reviewers** and **Stakeholders**² HTA report (SFOPH)
- Publication final HTA-Report

Appraisal/ Decision

- Appraisal and recommendations by the federal commissions
- Decision Federal Department of Home Affairs / SFOPH
- Publication of decision / change in Health Insurance Law



Topic selection criteria

Exclusion criteria

- **Not covered by CHIS**
- Existing HTA report or HTA report in production*
- Questions on disease-related treatment guidelines, analysis of supply structures
- Existence EAE evaluation of a service and recommendation by federal commissions within the last 3 years

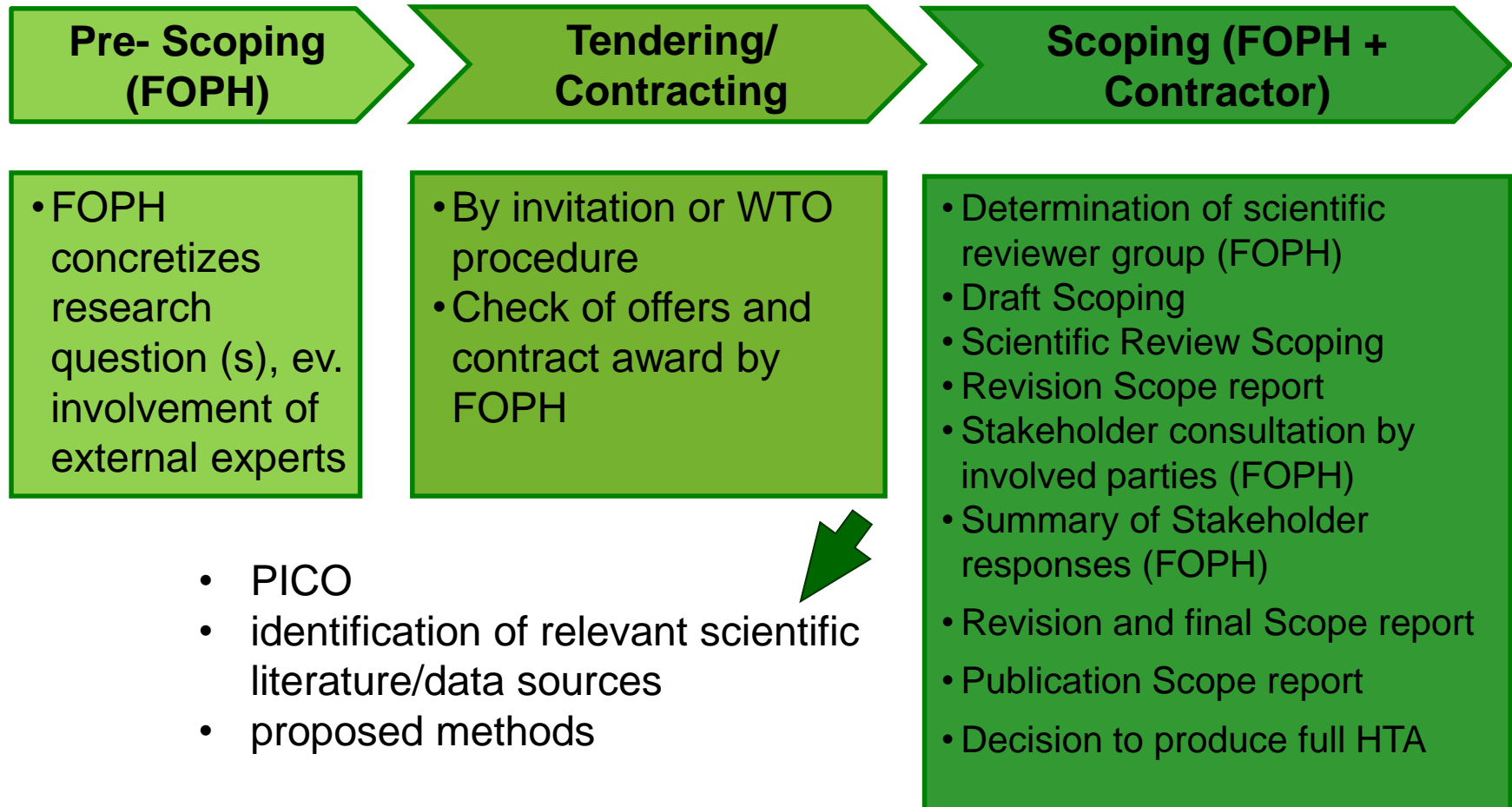
* Adaptation report for Switzerland possible

Priorisation criteria

- **Importance of the topic** -> Frequency, severity, budget relevance
- **Need for action**-> Lack of effectiveness/efficacy, safety and/or cost-effectiveness. Overuse, underuse or misuse.
- **Possible benefits of a regulatory measures** -> Improve quality of care, cost saving
- **Feasibility of improvement measures**
-> **regulatory capability**

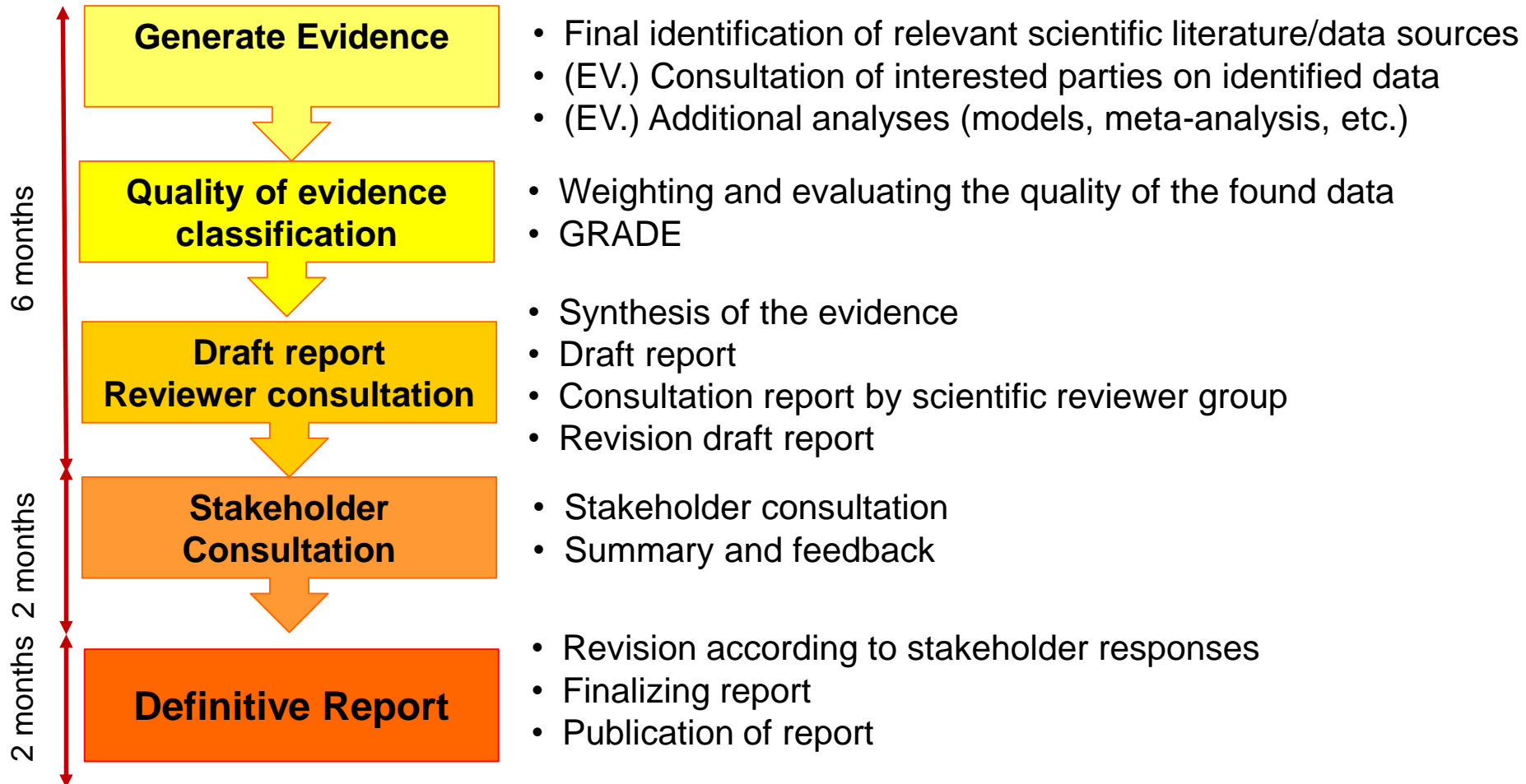


Detail process Scoping / Contracting





Detail process Assessment





Appraisal and Decision

- **Appraisal** according to EAE criteria (operationalisation manual)
- **Appraisal** by the federal commissions
- Federal commissions -> Recommendation to FDHA
- **Decision** Insurance obligation by FDHA/FOPH (medical services/pharmaceuticals)
- Adaptation of compulsory health insured services regulation and annexes



HTA versus EAE Review

- HTA Report (Facts) ≠ EAE rating and weighting (Appraisal)
- HTA report is designed to support an EAE appraisal and increase transparency
- **FOPH** leads the process of producing HTA reports
- **FOPH** does not make the EAE appraisal on the basis of HTA reports. **Appraisal is in the responsibility of the federal commissions** and final decision making the FDHA (or FOPH in case of pharmaceuticals)



Work in Progress

- Update processes
 - Priorization of thopics new approach
 - Intensive topic searches
 - Templates for Scope, Assessment, Contracts etc
 - Tighten deadlines and processess
 - Update pool of reviewers and contractors



Work in progress

Thema	Eingabe /Endscheid	Start	Abschluss	Typ
Kniearthroskopien	2015 (Pilot)	Herbst 2015	2019	Full HTA
Eisensubstitution bei Eisenmangel ohne Anämie	2015 (Pilot)	Herbst 2016	2019/2020	Full HTA
Wirbelsäuleneingriffe mit verschiedenen Implantaten	2015 (Pilot)	Sommer 2015	2017	Systematic review
Blutzuckerselbstmessung bei nicht insulinpflichtigem Diabetes mellitus Typ 2	2015/2016	2017	2019	Full HTA
Chondroitin bei chronisch degenerativen Erkrankungen von Knie, Hüft und Fingergelenk (Gonararthrose, Coxarthrose, Fingergelenkarthrose)	2015/2016	2018	2019	Full HTA
Osteosynthesematerialentfernung	2015/2016	2018	2019	Scope



Work in progress

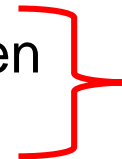
Thema	Eingabe /Endscheidung	Start	Abschluss	Typ
Mono- und Kombinationstherapien mit Olmesartan	2016/2017	2018	2019	Full HTA
Protonenpumpen-Hemmer (PPI) bei Patienten mit nicht-erosiver Refluxerkrankung	2016/2017	2018	2019	Full HTA
Vitamin D-Tests	2016/2017	2018	2019	Full HTA
Cholesterin-Senker	2017/2018	2019	2020	Full HTA°
Ezetimib in der Behandlung der primären Hypercholesterinämie	2015/2018	2019	2020	Full HTA°
Vertebroplastie und Kyphoplastie bei osteoporotischen Wirbelkörperfrakturen	2017/2018	2019	2020	Full HTA°
Chirurgische Eingriffe beim Impingementsyndrom der Schulter	2017/2018	2019	2020	Full HTA°



Thema	Eingabe /Endscheid	Start	Abschluss	Typ
Glitazone bei Diabetes Typ 2	2017/2018	2019	2020	KB
Glinide bei Diabetes Typ 2	2017/2018	2019	2020	KB
Duale Plättchenhemmung nach koronarer Implantation von medikamentenbeschichteten Stents	2015/2018	2019	2020	KB

Themen 2018 (November) ➤ 6 vorgeschlagen

Themen 2019 (April) ➤ 4 vorschlagen



Überlapp 2018/2019

