



**Pan American
Health
Organization**



REGIONAL OFFICE FOR THE

**World Health
Organization**
Americas

WORKSHOP: HEALTH TECHNOLOGY ASSESSMENT AND PRIORITY SETTING FOR UNIVERSAL HEALTH COVERAGE

Washington D.C., June 2014

Health Technology Assessment and Priority Setting for Universal Health Coverage

Washington D.C., June 13th, 2014

Universal health coverage (UHC) means that all people and communities have equitable access to the comprehensive¹, legally guaranteed quality services that they need, throughout the life course, and without financial hardship. Universal health coverage reinforces the need to define and implement policies and interventions with an intersectoral approach to act on the social determinants of health, and to foster the commitment of society as a whole in order to promote health and well-being, placing emphasis on groups in conditions of poverty and vulnerability (1).

One of the present challenges is to build integrated, equitable, efficient and quality health care systems. Given a context of limited resources, it is imperative that coverage decision making be evidence based, and includes ethical, intercultural and gender analysis within a multidisciplinary approach. These decisions have to be made explicit by defining the comprehensive, universal package of legally guaranteed services² that addresses the different health needs of people and communities (3).

While adequate financing is necessary, it does not guarantee Universal Health Coverage (4). Achieving Universal Health Coverage requires effective management of health technology within health systems. Health technology assessment (HTA) and priority setting are essential in deciding which interventions and technologies will be provided, when, to whom and at what cost, in order to ensure adequate resource allocation (5).

HTA is the systematic evaluation of properties, effects, and/or impacts of health care technology and includes medical, social, ethical, and economic dimensions (6). Health technologies must be understood in a broad manner, as the application of knowledge and skills structured in the form of devices, medicines, vaccines, procedures and systems developed to solve problems and improve the quality of life (7). The main purpose of HTA is to inform decision-making in the health sector to achieve the best health outcomes, at the regional, national or local level (6).

¹ Promotion, prevention, care and rehabilitation; care comprising diagnosis, treatment and short, middle and long term treatment.

² A package of universal integrated services is a catalog in which a set of rights that the health system is committed to providing -in terms of services, technologies or pairs of needs-treatment - is included and described explicitly, along with a certain model of funding, to enable a community to have access, regardless of their financial and employment situation (2).

HTA-based processes for priority setting and incorporating health technologies contribute to universal health coverage through: improvements in the quality of health care; assessment of true therapeutic innovation; increased efficiency in health expenditures; expansion of access to technologies that are effective, safe, cost-effective, and form part of the right to health; and the rational use of health technologies (6).

In recent years, significant achievements in HTA have been obtained through regional cooperation. The Health Technology Assessment Network of the Americas (RedETSA), officially launched in June 2011, encourage regional knowledge exchange and facilitate capacity-building in HTA through the development of common methodologies and priority setting. At the sub-regional level, considerable advances have been achieved by MERCOSUR, the Andean Community of Nations (CAN), and CARICOM integration mechanisms. Nonetheless, despite this progress, most countries in the Region need to strengthen HTA decision-making processes and incorporation of technologies into health systems to advance towards UHC.

The workshop aims to foster debate on the need for HTA and priority setting as essential tools, as part of the progressive realization of Universal Health Coverage. Additionally, participants will discuss the challenges and share lessons learned.

Objectives:

- 1 –To discuss the role of Health Technology Assessment (HTA) and Priority Setting for Universal Health Coverage;
- 2 - To identify countries' needs to improve coverage decision-making processes;
- 3 - To identify gaps and obstacles in HTA as a tool for coverage decision-making;
- 4 - To define priority actions to ensure that HTA and technology incorporation contribute to advance towards UHC.

Draft Agenda:

<u>8:00</u>	Breakfast
<u>8:30</u>	Registration
<u>9:00</u>	Opening: Dr. Carissa Etienne (Director, PAHO)
<u>8:15</u>	Objectives
<u>9:30 - 10:30</u>	Panel: Health Technology Assessment and priority setting for universal health coverage. • Moderator: Amalia Del Riego • Speakers: - o Dr. James Fitzgerald (Director, Health Systems and Services, PAHO): Universal Health Coverage - o Dr. Amanda Glassman (Director, Global Health Policy, CGD): Priority Setting - o Dr. David Banta (Professor, University of Maastricht): Health Technology Assessment (HTA)
<u>10:30 - 12:30</u>	Discussion
<u>12:30-14:00</u>	Lunch
<u>14:00-15:30</u>	Debate on specific proposals for the implementation of actions in the areas of HTA and Priority Setting to advance towards Universal Health Coverage.
<u>15:30-16:00</u>	Coffee-break
<u>16:00</u>	Plenary: presentation of proposals
<u>17:00</u>	Conclusions
<u>17:30</u>	Closing

Participants:

Agência Nacional de Vigilância Sanitária (ANVISA) – Brasil

Agency for Health Care Research and Quality (AHRQ) - USA

Caja Costarricense de Seguro Social (CCSS) – Costa Rica

Center for Global Development (CGD) - USA

Centro Nacional de Excelencia Tecnológica en Salud (CENETEC) - México

Comissão Nacional de Incorporação de Tecnologias no Sistema Único de Saúde (CONITEC)-Brasil

Escuela Andaluza de Salud Pública

European Network for Health Technology Assessment (EUnetHTA)

Health Technology Assessment international (HTAi)

HTAsiaLink

Institut National d'Excellence en Santé et en Services Sociaux (INESSS) - Canada

Institute of Medicine - USA

Institute of Population Health/University of Ottawa - Canada

Instituto de Efectividad Clínica y Sanitaria (IECS) - Argentina

Instituto de Engenharia Biomédica/Universidade Federal de Santa Catarina (IEB/UFSC) – Brasil

Instituto de Evaluación Tecnológica en Salud (IETS) – Colombia

Instituto de Salud Pública (ISP) - Chile

Instituto Nacional de Cardiologia (INC) – Brasil

Instituto Nacional de Salud (INS) - Perú

Inter-American Development Bank (IDB)

International Information Network on New and Emerging Health Technologies (EuroScan)

International Network of Agencies for Health Technology Assessment (INAHTA)

London School of Economics (LSE)

Ministerio de Salud de Argentina - Unidad Coordinadora, Evaluadora y Ejecutora de Tecnologías Sanitarias (UCEETS)

Ministério da Saúde do Brasil

Ministerio de Salud de Bolivia

Ministerio de Salud de Chile

Ministerio de Salud de Costa Rica

Ministerio de Salud de El Salvador

Ministerio de Salud del Perú

Ministerio de Salud Pública de Cuba

Ministerio de Salud Pública de Ecuador

Ministerio de Salud Pública de Uruguay

Ministerio de Salud Pública y Bienestar Social de Paraguay

Ministerio de Salud y Protección Social de Colombia

National Institute for Health and Care Excellence (NICE)

Pan American Health Organization (PAHO)

Red de Evaluación de Tecnologías en Salud de las Américas (RedETSA)

United States Agency for International Development (USAID)

World Bank (WB)

World Bank Institute (WBI)

World Health Organization (WHO)

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