

## EARLY DIALOGUES INVOLVING HTA BODIES

# Call for expression of interest to the attention of developers of medicinal products *Version 25-Jan-2017*

## EUNETHTA

EUnetHTA was established to create an effective and sustainable network for Health Technology Assessment (HTA) across Europe – we work together to help develop reliable, timely, transparent and transferable information to contribute to HTAs in European countries.

EUnetHTA supports collaboration between European HTA organisations and brings added value to the European, national and regional levels by:

- Facilitating efficient use of resources available for HTA;
- Creating a sustainable system of HTA knowledge sharing;
- Promoting good practice in HTA methods and processes.

The **EUnetHTA Joint Action 3** (JA3) will last four years (2016-2020) and will build on the lessons, success and products of the earlier EUnetHTA Joint Actions. The EUnetHTA collaboration has grown to 79 organisations from 28 countries. One of the main outcomes of JA3 will be to build a sustainable network for HTA collaboration in Europe, in cooperation with the European Commission.

Within JA3, **Work Package 5** (WP5) is dedicated to the improvement of evidence generation, with a lifecycle approach: **Strand A** will be on the conduct of **Early Dialogues**, **Strand B** will be dedicated to **Post-Launch evidence generation**. The present call is relevant to WP5, Strand A.

WP5 is coordinated by a lead partner, HAS (Haute Autorité de Santé, France) and a co-lead partner, G-BA (Gemeinsamer Bundesausschuss, Germany).

## EUNETHTA EARLY DIALOGUES (EDs)

### Background

Reimbursement decisions are a national/regional responsibility. When receiving recommendations from HTA bodies, national authorities apply national/regional policies, legal requirements and specificities relevant to the organisation of their healthcare systems.



However, current practices show that while there may be some differences in the methodology of HTA (for example the acceptability of some comparisons and comparators); the information needed to conduct **relative effectiveness assessment** is often quite similar across HTA bodies. It is also postulated that it may be useful for the sponsor of the technology to be aware of possible differences in evidence requirements from distinct HTA bodies.

### **Interaction with regulators: Parallel Early Dialogues / Scientific Advice with the EMA<sup>1</sup>**

In addition to the possibility to have an early dialogue with multiple HTA bodies, EUnetHTA will, in cooperation with the EMA, propose parallel EDs involving both HTA bodies and regulators. Companies will have the possibility to choose the procedure that would be most adapted to their needs.

Prospective and timely advice may allow the sponsor to integrate specific HTA and regulatory needs into the development plan and therefore fulfil the evidence requirements of both regulators and HTA bodies and facilitate patients' access to appropriately evaluated new products.

### **Objectives of the EUnetHTA EDs:**

- Support developers of medical technologies by providing a collaborative approach between a wide range of European HTA agencies on their product development plans.
- Supply prospective and timely advice, before the start of pivotal clinical trials, in order to improve the quality and appropriateness of the data produced by the developers that may ultimately lead to well-informed regulatory, HTA and reimbursement decisions in a timely manner.
- Optimize the interaction with regulators for medicinal products, through parallel EMA-EUnetHTA multi-stakeholder EDs (including products selected for the Pilot Project on Adaptive pathways).
- Build upon the outcomes of the pilot EDs performed in the frame of EUnetHTA JA2 and the SEED (Shaping European Early Dialogues) project, and parallel EMA HTA advices, reinforce structural organisation to facilitate the exchange of different perspectives, learning, efficiency, and consistency throughout EDs.
- Establish a financially sustainable structure for EDs starting in Y3 of the JA, taking into consideration the need to make these EDs accessible for all companies, including SMEs/start-ups.
- Provide shared learning on methods and processes amongst partners, including regulators and encourage more European HTA bodies to open dialogues with developers early on by integrating new partners into a number of EDs.
- Incorporate patient engagement in EDs on a regular basis.
- Link EDs as part of adaptive pathways pilots to subsequent activities on additional data collection, patient registries and managed entry arrangements for the same compounds.

### **General aspects of the conduct of EDs in JA3**

EDs will remain **confidential** and are **not binding** for either of the parties involved. Secure systems will be used for exchange of documents between company and ED coordinator, as well as coordinator and HTABs.

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<sup>1</sup> Parallel EDs involving EMA will be launched in the next future. The present call is limited to Multi-HTA EDs.

The aim of the EUnetHTA JA3 concerning EDs is to establish a high-throughput, financially sustainable process for EDs by HTA agencies at the European level. To pursue this aim, structures that are conducive to increasing the number of EDs carried out, as well as to learning among participating partners, need to be put into place.

Regarding medicinal products, important experience has been gathered in the EUnetHTA JA2 and the SEED project. With a view to harness and build on this experience, EUnetHTA is establishing a **Standing Committee (SC) for EDs**. The SC aims at being a robust and stable working party. It will be constituted by HTA partners with a substantial experience in ED, high level of participation in JA3 EDs, and sufficient resources in terms of staff and level of expertise. Overall, for each ED the participating HTABs will constitute an **ED committee**, made of members of the Standing Committee joined by other HTABs (on the basis of their availability and area of expertise). This aims to ensure the constant quality of multi-HTA EDs while providing sufficient flexibility to allow for participation of additional HTABs from across Europe. This will allow the participation of agencies of various sizes in the process, while ensuring that all contributors have the necessary level of expertise and comply with the JA3 procedures.

### The two types of EDs

Companies have the possibility to request the following types of EDs

- **multi-HTA EDs:** HTA bodies only (no participation of regulators);
- **EMA-EUnetHTA multi-stakeholder EDs:** in parallel between regulators (EMA) and HTA bodies.

The choice between the HTA-only and parallel with EMA is up to the company and should be specified at the time the letter of intent is submitted.

**At the time of publication of this call, procedures and practical aspects of EMA-EUnetHTA multistakeholder EDs are being finalised, so the present call is open only to Multi-HTA EDs (without involvement of regulators, EMA being invited as an observer).**

## CRITERIA FOR THE SELECTION OF THE PRODUCTS

- All interested sponsors of medicinal products can respond to this call
- The request must be for an advice prospective in nature, i.e. requested *before* the start of pivotal clinical trials, mainly before the phase III for medicinal products
- For pharmaceuticals: new drugs, as well as existing drugs with a new indication are eligible for an ED. Generic drugs are not eligible for an ED. Only one indication per drug per ED will be discussed; requests for multiple indications within one ED are not accepted.
- Priority will be given to products intended to treat severe conditions for which there is no satisfactory treatment currently available.
- Already available clinical data should be presented.

## HOW TO APPLY?

The request for benefiting of a EUnetHTA ED must be made in the form of a **letter of intent**. (See below: **General aspects of the procedure, Step1**). Upon receipt, the letter of intent will be analysed by the EUnetHTA coordinating team (to ensure all required information has been provided) and transmitted to the members of the SC for decision on the eligibility of the product for a EUnetHTA ED.

It is expected that the number of candidates will be greater than the number of planned EUnetHTA EDs, notably during the first two years of the project. Once all available time slots are attributed, additional applications may be considered for a 'reserve' list. In case a new possibility for a EUnetHTA ED occurs (for instance due to cancellation of a planned ED), this possibility will be offered primarily to the products included in this 'reserve' list.

## PRACTICAL INFORMATION

### Meeting venues for multi-HTA EDs

Multi-HTA ED meetings will take place either at HAS (Saint-Denis, France) or G-BA (Berlin, Germany). The meetings are expected to last 3 hours.

### Fees

The participation of HTA bodies in the EDs is currently covered by EUnetHTA JA3 budget and no fees are due for HTA bodies operating in the frame of the EUnetHTA Joint Action.

Future funding sources: to achieve the quality and sustainability of EDs the funding mechanism of these EDs will be adapted, likely by being based on a fee-for-service approach. Mechanisms for the future funding of EDs will be evaluated and decided during the first two years of JA3.

### Number of EDs

The total number of EDs (Multi HTA or Parallel) planned is as follows: 5 EDs for the first year, 8-10 for the second year.

## GENERAL ASPECTS OF THE PROCEDURE

Companies shall ensure that they provide adequate and timely background information, respect timelines and answer to any questions they may receive related to the ED.

### Step 1- Letter of Intent

- To benefit from a Multi-HTA ED, healthcare product developers must send a Letter of Intent in an electronic format, to the EUnetHTA coordinating team at the following address: [early-dialogues@eunetha.eu](mailto:early-dialogues@eunetha.eu).

A template is provided by EUnetHTA for multi-HTA ED that indicates all the information needed in this document. The use of this template is mandatory.

Letters of intent should be sent as soon as possible and at least 4 months before the aimed time frame for a face-to-face meeting.

### Step 2 – Decision taken by EUnetHTA

For a EUnetHTA multi-HTA ED, the EUnetHTA coordinator will send a reply to the letter of intent indicating the decision reached by EUnetHTA partners and indicating the reason for negative responses.

### Step 3 – Submission of the Briefing Book by the company

Once a technology has been selected, the company shall submit a complete file, (otherwise referred to as the briefing book).

The briefing book must be submitted using the template available on EUnetHTA website and should include the following information:

- Table of contents
- Lists of figures, tables, abbreviations
- Summary: section containing background information on the disease/population to be treated with all relevant information (epidemiology, natural history of the disease, treatments and evolution on treatment), on the technology, on the development, on the regulatory status and explaining the rationale for seeking advice
- Questions and company's position: the questions should pertain to relative effectiveness, economic and other aspects of the development of the proposed technology. The number of questions submitted should take into consideration the time allocated for the process and in particular the duration of the face to face meeting. The wording of questions should be clear and concise. Each question should be followed by a corresponding, separate Company's position including a comprehensive justification of the chosen approach. All key information about the topic should be sufficiently discussed, so that the Company position can function as a 'stand-alone' argument. In general, 1 to 3 pages for each Company position is recommended. Cross-references to the relevant parts of the briefing book or annexes can be included if additional detail is needed to support the argument.
- Background documentation: this section should give a comprehensive scientific overview of the product development program (clinical data obtained up to now, as well as rationale and proposal for the confirmatory clinical trial), providing relevant systematic information in sufficient detail, together with a critical discussion.
- List of key references
- Key references, i.e. study protocols (final, draft or outline/ synopsis), study reports (final/draft/synopses), previous scientific advice received, relevant therapeutic guidelines and relevant literature references

### Other steps

The following steps are described in the procedure for multi-HTA EDs.

**The letter of intent, and any request for additional information should be sent to the EUnetHTA coordinating unit at the following address: [early-dialogues@eunetha.eu](mailto:early-dialogues@eunetha.eu)**