

## Health Technology Assessment in the Asia Pacific Region

Content for this article was contributed by the EVERSANA Asia Pacific team

Health technology assessment (HTA) is the systematic evaluation of the properties and effects of a health technology, addressing the direct and intended effects of the technology as well as its indirect and unintended consequences. In many countries, it is a primary evaluation tool for making pricing and access decisions, providing a platform for understanding economic trade-offs.

HTA varies considerably across APAC and depends on country-specific factors, such as the proportion of public investment in health, political support, access to quality health information and technology infrastructure. With the rising cost of healthcare, HTA can be a useful tool to inform decision-making about universal healthcare (UHC) and promote an equitable, efficient and high-quality health system.

HTA adoption has been slow in Asia due to disjointed research efforts; lack of awareness; and country-specific epidemiological, clinical and health economics data. It is also less important where government is not a principal payer. However, APAC countries have recently realized the necessity of providing value for money to patients while safeguarding accessibility of care. Several Asian countries are implementing HTA to measure the clinical and economic value of healthcare technologies. HTA offers the opportunity for governments, industry, providers and consumers to work together to ensure that medical technology is provided to the right patient, at the right time, at the right price.

The largest MedTech markets in APAC are Australia and Japan, while China and India are the fastest growing. Healthcare investment will grow by 11%, with U.S. \$2 trillion dedicated to universal healthcare in APAC by 2030. This growth is due to aging

populations, increased incidence of chronic diseases, establishment of universal healthcare systems, enhanced reimbursement mechanisms, and increased government focus on developing healthcare infrastructure.

APAC market access evolved with the formation of an Asian HTA network in the 1990s. In 2011, HTAsiaLink (a network of Asian HTA agencies) was formed to strengthen collaboration and encourage joint research. The International Society for Pharmacoeconomics and Outcomes Research (ISPOR) also promotes HTA worldwide and spreads awareness of HTA to inform and guide healthcare policies and practices in Asia.

For successfully implementing full-scale HTA in APAC, it is important to address three main challenges with tailored solutions:

- Lack of need and demand for HTA: Design a tailored and transparent mechanism for using HTA.
- Lack of infrastructure and technical capacity to cope with the HTA demand: Focus on building existing capacity in HTA public goods and networks, and improve rather than reinvent.
- Inadequate involvement of a broad range of stakeholders, including public authorities, healthcare providers, payers, academics, industry, citizens and patients, media: Improve HTA understanding among the public and stakeholders involved in the HTA process.



There is no universal approach to building HTA. It must be adapted to existing local coverage, reimbursement and pricing schemes. Tables 1 provides a summary of HTA in APAC.

Table 1: HTA overview for APAC

Sr. No	Country	HTA Body	Time for Subsidized Access
1	Australia	The Pharmaceutical Benefits Advisory Committee (PBAC), The Medical Services Advisory Committee (MSAC), The Therapeutic Goods Administration	72 weeks
2	South Korea	Health Insurance Review and Assessment Agency (HIRA)	84 weeks
3	Taiwan	Centre for Drug Evaluation (CDE), National Health Insurance Association (NHIA)	110 weeks
4	Thailand	Thailand Food and Drug Administration (TFDA), Health Intervention and Technology Assessment Program (HITAP)	104 weeks
5	Japan	Central Social Insurance Medical Council (Chuikyo)	60 weeks
6	India	Health Technology Assessment–India (HTAIn)	-
7	Malaysia	Malaysian Health Technology Assessment Section (MaHTAS)	101 weeks
8	Philippines	The Department of Health's Health Technology Assessment Unit (HTAU)	72 weeks
9	Singapore	Agency for Care Effectiveness (ACE)	38 weeks
10	China	China National Health Development Research Center (CNHDRC)	260 weeks





