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Appropriate eFfective eFficient Oncology Reimbursement Decisions

Study protocol

Goals of the Study

To address challenges with the use of several types of evidence (with focus on economics) in recommendations made by the pan Canadian Oncology Drug Review (pCODR).

Study Rationale

Ongoing challenges with the production and use of economic evidence in the context of formulary committees are documented in the literature. pCODR, a national oncology formulary committee, has recently joined the Common Drug Review of CADTH. This transition is scheduled in two phases, and the results of this research will support discussions of the second phase (April 2015).

A MIXED METHODS STUDY

**METHOD 1
QUALITATIVE INTERVIEWS**

Participants: Current and past members of oncology formulary committees, who have participated in the preference elicitation experiment.

Data collection: Respondents will discuss the process of decision making, where decision refers to their individual decision in favour or against the funding of an oncology therapy (not the final funding decision). Their challenge is the review of varied types of evidence (clinical, economic, ethical, patient perspectives) with varying degrees of quality, and come to one recommendation. There is no transparent explicated process for the balancing of all information. Respondents will discuss the role that each type of evidence plays, the challenges encountered. Special focus is on economic evidence.

**METHOD 2
PREFERENCE ELICITATION**

Participants: Current and past members of oncology formulary committees (e.g. pCODR and Provincial counterparts).

Data collection: The Binary Choice technique and the Best Worst Scaling technique require respondents to indicate choices around oncology drug funding in hypothetical scenarios.

Characteristic	Value	My recommendation <input type="checkbox"/> FUND THE DRUG <input type="checkbox"/> DO NOT FUND THE DRUG
Clinical Benefit (months, overall survival)	6	
Quality of clinical study	poor	
Cost Effectiveness (\$ per QALY)	50,000	
Quality of economic model	good	
Budget impact	low	

	Clinical benefit	Quality of clinical study	Cost effectiveness	Quality of economics	Budget impact
This characteristics is THE most likely to support acceptance	6 month OS	Poor	\$ 50K/QALY	Good	Low
THE most likely to support rejection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**METHOD 3
ROUNDTABLE**

Participants: Current and past members of oncology formulary committees, and broader network (policy and decision makers, researchers, administrators).

Data collection: Participants will review the results of qualitative interviews and the preference elicitation. During the roundtable, respondents will be able to discuss the findings to date. The purpose is to engage decision makers in the development of solutions to identified challenges, and in the development of transparent guidelines for the use of economic, clinical, and other evidence in the review of cancer therapies.

- OUTPUT**
- A description of decision process by individual committee members, with focus on how evidence types are balanced, and how economic evidence is used.
 - A catalogue of challenges and potential solutions.

- OUTPUT**
- A set of estimated weights as assigned by committee members to types of evidence and their characteristics.
 - An estimation of how each characteristic affects the probability of recommending a cancer drug (by individual committee members).

- OUTPUT**
- A set of guidelines for the use and weighing of multiple types of evidence in oncology formulary decision.
 - A set of recommendations for the production and use of economic evidence in drug funding decisions.