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सत्यमेव जयते
Department of Health Research
Ministry of Health and Family Welfare
Government of India



International Symposium on Health Technology Assessment: ISHTA 2022

“Affordability, Availability and Accessibility of Healthcare Technologies through Evidence generated by HTA for Universal Health Coverage”

**Organised by
Department of Health Research
Ministry of Health and Family Welfare
Government of India**

***Date: 10th November, 2022 Thursday
Organised with WHO India, Center for Global Development***

Introduction

India being a signatory and participating state of Sustainable Development Goals (SDGs) has started taking measures to attain the targets laid out within the SDG framework and achieving the Universal Health Coverage (UHC). National Health Policy (NHP) has been laid in India and one of the objectives and commitments of the NHP -2017 is the development of institutional framework and capacity for Health Technology Assessment (HTA) and adoption.

2. HTA is a multidisciplinary process that assess health technologies i.e., drugs, devices, healthcare programmes etc. for their safety, efficacy, cost-effectiveness and equity issues. It analyzes the medical, social, ethical, and economic implications of development, diffusion, and use of health technology in a robust and transparent manner. HTA methods are evolving and their applications are increasingly diverse such as priority setting in healthcare, efficient resource allocation across different health schemes, designing health benefit packages, strategic purchasing during procurements, informing the standard treatment guidelines etc. Altogether, HTA helps the policymakers for evidence-informed health decision-making and policy formulations in healthcare.

3. International use of HTA for priority setting: The resolution on Health intervention and Technology Assessment in support of Universal Health Coverage by the World Health Assembly in 2014 called on the World Health Organization to develop global guidance on methods and processes for HTA. HTA is now widely used to inform healthcare resource allocation in several countries in Europe, Scandinavia, Asia, and Australia. These countries which have made considerable progress towards universal health coverage utilize HTA for technology choosing and informing contents of health benefits packages. Notable examples are:

- i. The Universal Health Coverage programme of Thailand,
- ii. The National Health Service (NHS) in the UK with the support of National Institute for Health and Care Excellence (NICE),
- iii. Essential medicines list in countries, like Indonesia

- iv. Medical devices and technology appraisal by Canadian Agency for Drugs and Technologies in Health (CADTH) in Canada and
- v. Assessment of the safety and efficacy of therapeutic goods in Australia through the Australian Register of Therapeutic Goods.

AIM

ISHTA 2021 was conducted with an aim of discussing global best practices in HTA, for development of a sustainable model of evidence based decision making through HTA institutionalisation in the country for Universal Health Coverage. International HTA organisations such as Centre for Global Development and iDSI, The NICE, UK, The George Institute, Australia, HITAP, Thailand and WHO International shared the lessons through their journey of establishing an HTA system in their respective countries. These international HTA systems shared examples on how HTA is used for healthcare priority setting. The work conducted by HTAIn was also showcased in the symposium.

Continuing from the theme of ISHTA 2021, HTAIn DHR is organising ISHTA 2022 with the theme of “*Availability, Affordability and Accessibility through HTA for Universal Health Coverage*” and following objectives:

OBJECTIVES

- Bring various HTA stakeholders, such as Academia, Researchers, Policy Makers, Industry, etc. on a single platform to share their views on importance of HTA for accessibility, availability and affordability of health technologies as a step towards Universal Health Coverage.
- Initiate a dialogue about policy areas of demand for HTA in India.
- Understand perspectives of key stakeholders of HTA for evidence-informed decision making.
- Showcase the work done by HTAIn since ISHTA 2021 and share experiences of user departments (Central/ State Govt.) who have actively engaged with HTAIn and used HTA to make decisions (local experience).
- Host first ever HTA marketplace in the country, providing participants with a knowledge/product sharing platform.
- **Estimated participation- 300 (In-Person mode)**

HTA Marketplace to be inaugurated

The marketplace will be showcasing all the Health Technologies such as drugs, devices, programmes, procedures etc. for which HTA has been done by Health Technology Assessment in India (HTAIn). The concept of such a marketplace will be first of its kind in the world to showcase the technologies evaluated by HTAIn. It will be a step towards strengthening of the Government of India initiative for “*Atmanirbhar Bharat*” and “*Make in India*”. It will also strengthen the Export of Indigenous technologies and products and reduce import dependence for the Country. It will also be a stepping path to the National Agenda of “*Heal in India*” providing quality, affordable, accessible care for Patients. About 42 Technologies assessed and evaluated by HTAIn will be displayed in the Market Place.

The sessions in the ISHTA-2022 Agenda are as follows

- i. **Session 1:** Inaugural Session: *Inauguration of the Symposium and the Market Place*
- ii. **Session 2:** Affordability of Healthcare services: Sharing of International, National/ Sub-national experience, Industry, Academicians, International.
- iii. **Session 3:** Lessons for Health Decision making and opportunities for International Cooperation.
- iv. **Session 4:** Accessibility to Healthcare Technologies: Policymakers interaction for identifying the Challenges and needs

Target Audience of ISHTA-2022 are as follows:

National Audience:

- i. Union Health Secretaries including Ministry of AYUSH, Department of Chemicals & Fertilizers, Department of Commerce & Industry, Department of Finance, Department of Pharmaceuticals, Department of Science and Technology, Department of Biotechnology and Department of MSME etc.
- ii. Principal Secretaries/ Additional Secretaries/ Health Secretaries from the States and Union Territories.
- iii. Mission Directors of NHM (Central/ States) and Technocrats.
- iv. CEOs of State Health Agencies (AB-PMJAY), NHA and SHAs
- v. State Procurement Agencies
- vi. Directors/Representatives/PIs/Scientists of ICMR institutes, DHR-Resource Centres/ PIs for DIAMoNDS etc.
- vii. HTA Nodal Officers appointed by States
- viii. Industry Representatives and Hospital Associations
- ix. Patient organizations
- x. National Researchers and wider Health Communities via YouTube, Doordarshan, MyGov.in and other Social Media Platforms.

International Audience:

- i. Representatives from EU, SEARO, NICE (UK), WHO etc.
- ii. International Researchers, Policy Makers and Wider health communities through telecast via YouTube, DD, My Gov.in and social media

