

Impact of Publication of the French Commission for Economic and Public Health Evaluation (CEESP) Doctrine on the Conclusions of Its Economic Opinions

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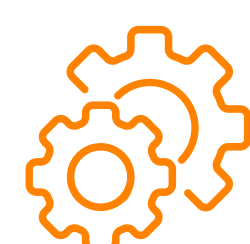
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OBJECTIVES

Describe qualitatively the impact of the CEESP (Commission for Economic and Public Health) doctrine which was published in July 2021, on published economic opinions conclusions in France. This impact is defined in terms of coherence, homogeneity, legibility and relevance of the transmitted messages.



METHODOLOGY

A retrospective descriptive analysis of the CEESP opinions issued 6 months before and after the doctrine publication was conducted based on an analysis grid built on key insights of the doctrine:

- > Assessment of methodological conformity
- > Conclusion structure (main possible conclusions are defined in Figure 1)
- > CEESP's position to guide public-decision making

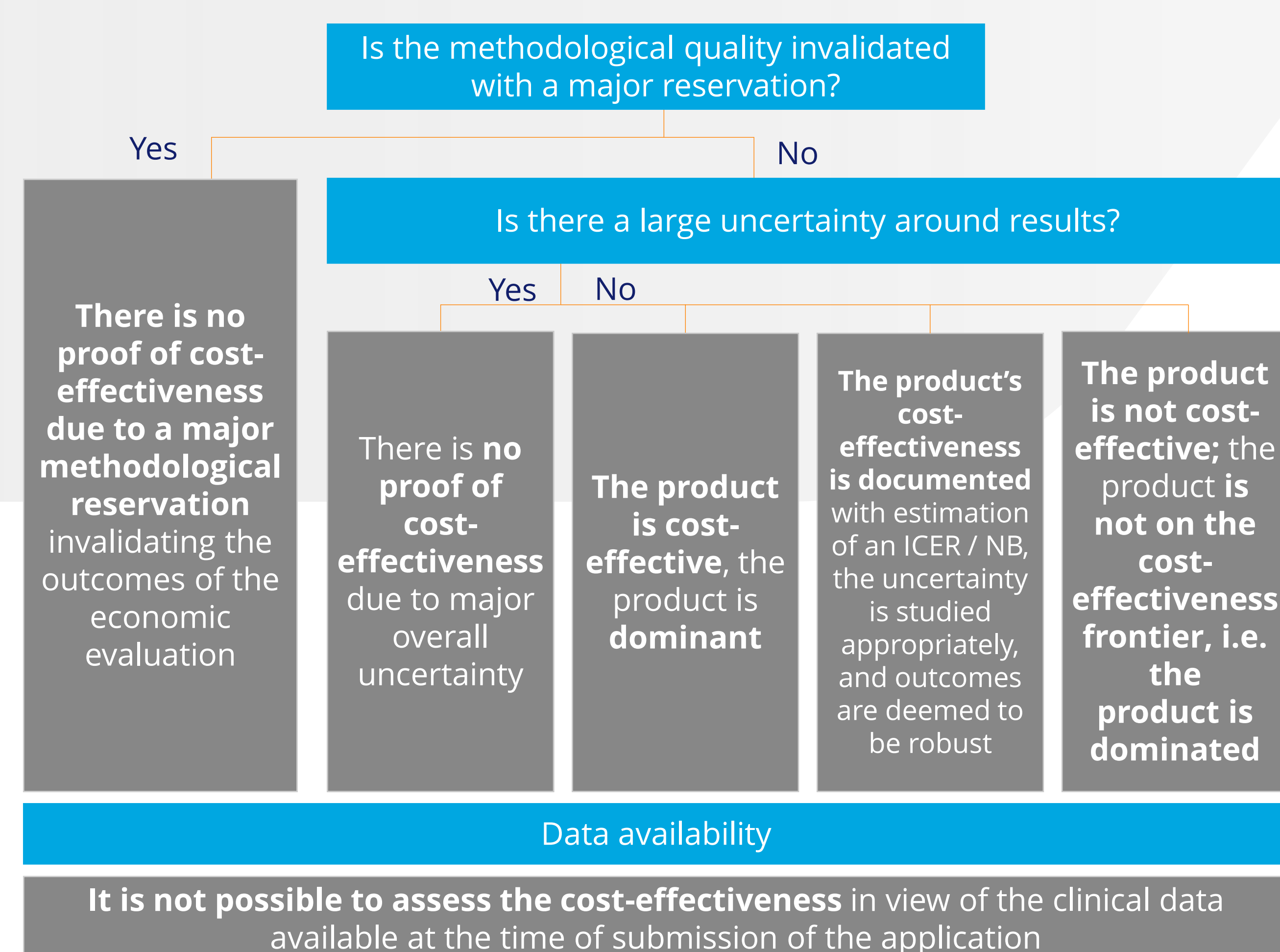


Figure 1. Main stages of CEESP rationale and conclusions



RESULTS

In total, **30 economic opinions** were analyzed (16 published after the doctrine and 14 before). The majority was about drugs, but 4 are concerning medical devices (MD).

Before the publication, 10 opinions (71%) were related to a first assessment of the drug/MD and after publication, a majority (69%) was related to an extension of indication. Globally, onco-hematology and rare diseases were the main therapeutical areas concerned by the opinions.



CONCLUSION

Six months after the doctrine publication intended to bring clarity and consistency, CEESP opinions seem to be more legible, which should bring more insights for price negotiations. However, evaluation of methodological quality and coherence of conclusions across opinions can still be improved.

Assessment of the methodological conformity

- > Fewer major methodological reservations were issued after the doctrine publication compared to before (19% versus 43%).
- > While efficiency **analysis scope** revision by the CEESP could lead to a reservation before the doctrine, this was no longer the case after.
- > Besides, **some inconsistencies in the doctrine application can still be highlighted**:
 - 25% of opinions post-doctrine with a reservation were **not related to a specific methodologic element**.
 - 19% of opinions with a reservation **did not seem consistent with the impact** of the methodological choice.

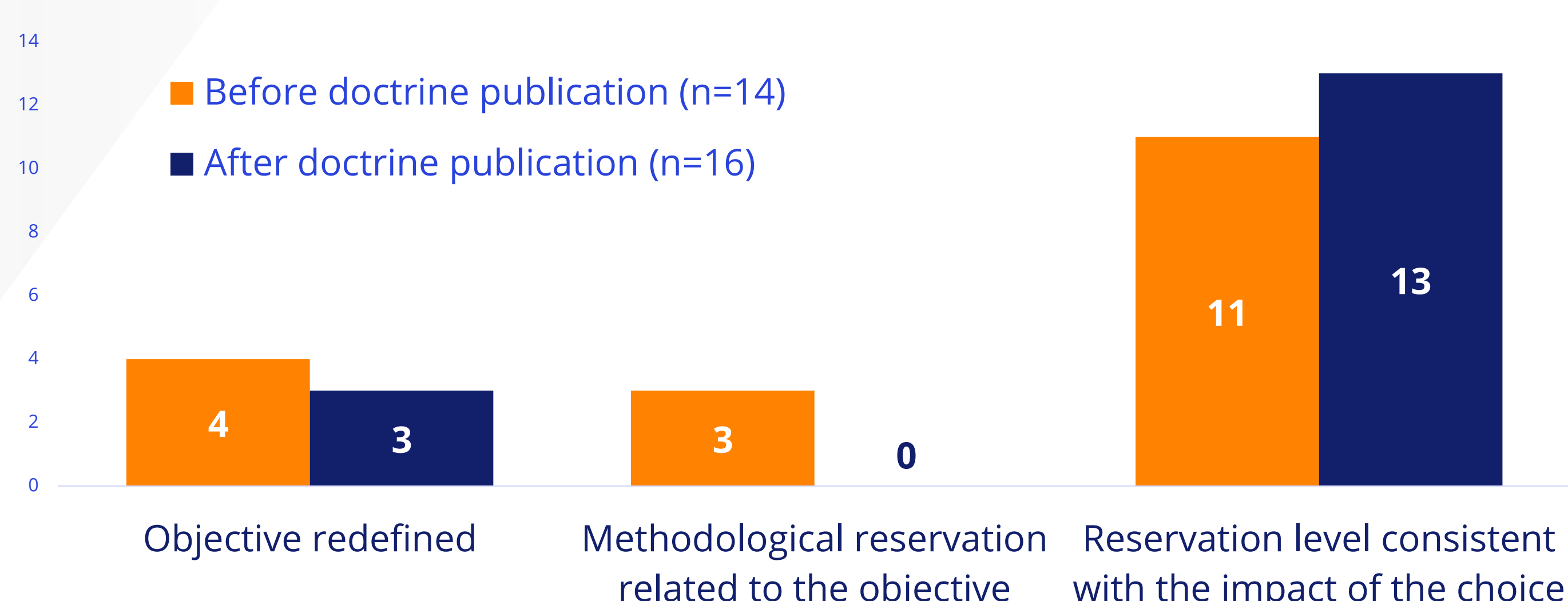


Figure 2. Elements on methodological conformity assessed by CEESP

Conclusion structure

- > Thanks to the framework of different possible **conclusions type set in the doctrine (Figure 1)**, these are more predictable and understandable, especially when efficiency cannot be demonstrated (Figure 3).
- > However, among the 17 opinions without major reservations or major uncertainty, **efficiency conditions are not clearly described** (Figure 4), but **key drivers of the results were more frequently described** after the doctrine publication (64% versus 50%): price decrease, population transposability, efficiency hypotheses.

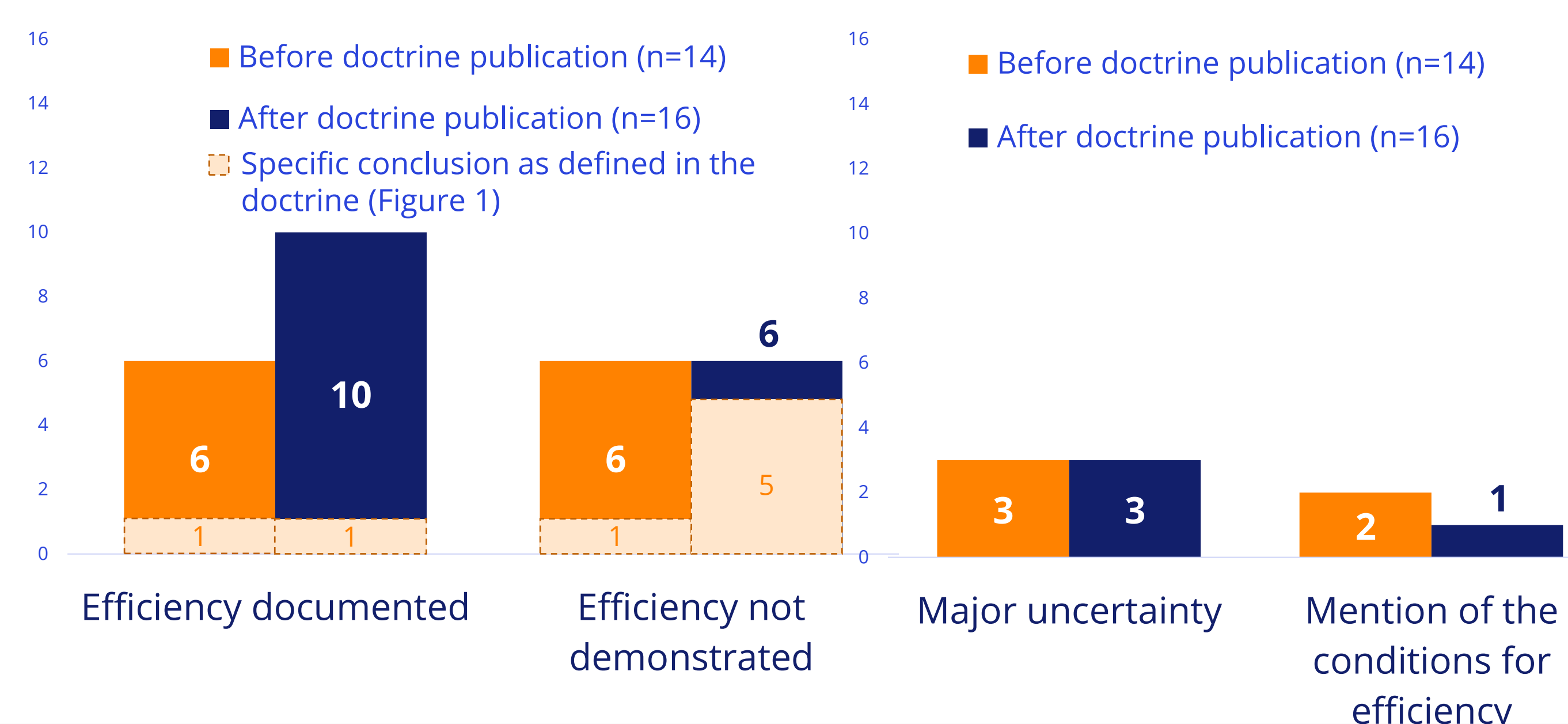


Figure 3. Conclusions type set in the doctrine Figure 4. Elements on the conclusion structuration in the opinions

CEESP's position to guide public-decision making

- > Since the doctrine publication, CEESP interpretations regarding ICER levels are more detailed and the information on the impact of treatment price on ICERs is frequently reported (69% versus 40%).



REFERENCES

Doctrine of the Commission for Economic and Public Health Evaluation - CEESP evaluation principles for healthcare products for pricing purposes – July 2021.

NB: net benefit ; MD: medical device