



Consumers Health  
Forum OF Australia

SUBMISSION

Health Technology  
Assessment  
Review:  
Consultation 1



Consumers Health Forum of Australia (2023)  
*Health Technology Assessment Consultation 1*  
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*Consumers Health Forum of Australia is funded  
by the Australian Government as the peak  
healthcare consumer organisation under the  
Health Peak and Advisory Bodies Programme*

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## Introduction

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Consumers Health Forum (CHF) is the national peak body representing the interests of Australian healthcare consumers and those with an interest in healthcare consumer affairs. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems. At the heart of CHF's policy agenda is consumer-centred care. CHF appreciates the opportunity to provide a submission to the Department of Health and Aged Care (DOHAC) regarding the Health Technology Assessment Review.

The health and safety of many Australians relies on high quality, transparent Health Technology Assessment, and through taxes, out-of-pocket expenses, and life experiences, the cost of all health technologies ultimately falls on the consumer. As such, every consumer deserves the opportunity to understand and contribute to the processes that underlie the approval of, and funding of, new health technologies. Any mandate for change must come from the broader community, and for that to take place, the community must truly understand the issues at hand.

## Effective consultation with consumers

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As the national peak body for health consumers, CHF fully supports the Review's intent to examine policy and methods relating to consumers' views and approaches to increasing transparency in HTA-decision making. The current review process follows the standard DOHAC approach. This process, and in particular, the language used in the Terms of Reference to guide submissions, is too complex and opaque to effectively engage consumers and solicit their views.

While the concurrent HTA reform processes for patient and consumer engagement are welcomed, the Terms of Reference for this Review are not suitable for broad consumer engagement. Ideally such a process would be co-designed with consumers from the ground up and be part of a longer-term investment in community engagement in national medicines policy. Broad community involvement should be fundamental at all stages and not reduced to a complex post-hoc review.

If the Review wants to truly engage with consumers to create a more person-centred approach to HTA, CHF recommends creating a new consultation document which includes plain English explanations and simple, clear questions to extract useful, focussed input from consumers.

## Health as a commodity

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CHF Reducing the economic burden of healthcare is important, but sometimes public health outcomes cannot be measured by their perceived dollar value. Many health outcomes are not directly translatable to financial ones. The impact that timely and affordable treatment can have on lives far outstrips the immediate economic impacts. Access to healthcare, or lack thereof, at critical times can alter the course of individual lives in a drastic way, with far-reaching effects that are impossible to model.

When assessing the impacts of health investment, it is therefore crucial to consider the social return on investment, too. The gestalt effect of the innumerable health impacts that are unaddressed by a purely financial model form a significant basis of what constitutes quality of life. As the field of Public Health continues to evolve and form a more comprehensive view of what “health” means, we too must evolve and strive to meet that. Our health systems, including those that comprise the HTA review process, must keep up with the field, and recognise and incorporate the holistic understanding of what health means.

CHF therefore recommends the Review consider the social return on investment where appropriate, as well as the potential impact that new healthcare costs can have for many consumers. The Review should consider that costs such as co-payments are, for many, a barrier to treatment, and not just an inconvenience. No consumer should ever have to choose between treatment and food. Increasingly this is a choice that many are forced to make. When discussing any change to the system that underlies access to healthcare, the complex relationship between poverty and other kinds of disadvantage and equitable access to health interventions needs to be acknowledged and addressed.

## Questioning HTA Review assumptions

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*“How do these goals fit with the intent of health care in Australia; and are they universally accepted?”*

One stated goal of the HTA review is “reducing time to access... new health technologies as early as possible”. What is not clear, either to consumers or to CHF, is whether the stated delays are inherently harmful, or whether they represent the system working with appropriate checks and balances.

For example, are delays caused by unnecessarily bureaucratic processes? Or manufacturers failing to do their due diligence? While CHF supports timely approval processes and access to new technologies, this must not come at the expense of consumer safety. If reducing the barriers to bringing products to market exposes consumers to unnecessary risk by circumventing effective safety protocols, then CHF, and indeed the Australian public, could not be supportive of such changes.

*“What are the identified risks associated with these goals? And how do we not compromise assessment of patient safety, effectiveness and cost, or advice to Government on subsidy of health technologies?”*

To bolster patient safety, CHF recommends emulating the European Union’s approach to their HTA process (e.g., EUPATI), in which large investment has been put into training patient advocates so that they can work alongside clinicians throughout the entire HTA process. This approach actively makes the system person-centred, as opposed to just using person-centred language. We also note that the Standing Committee on Health, Aged Care and Sport’s 2021 report [\*The New Frontier – Delivering Better health for all Australians\*](#) champions the inclusion of patients at the early stages when evaluating submissions (Recommendation 28), and CHF strongly supports this recommendation.

# Conclusion

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*“Are we as a nation fully committed to medicalisation of treatments for health conditions; and essentially to pharmaceuticals, including Advanced Therapy Medical Products for the treatment and management of health conditions?”*

Health technology assessment processes are complex. But that should not prevent Australians contributing to how they are designed and altered to improve equitable, safe access to medicines and health technologies. It is not sufficient for engagement to be a post-hoc analysis of documentation. The people affected by the processes that are part of the HTA need to be engaged. This engagement must be proactive, inclusive, and formative.

The Terms of Reference for the review make it difficult for a truly comprehensive and representative consumer and community consultation to occur. In particular, the goals of the review, and the assumptions underpinning both the current processes and the review, need to be clearly articulated in the consultation documentation.

The review should shift focus from a “dollars and cents” view of health, to one which integrates all of the costs, with a focus on the social returns that come from world class investment in health funding.

The expectations surrounding these systems must be set by consumers. They are funded by consumers, they are made possible by consumers, and the impacts of the decisions made will fall primarily on consumers. The expectations surrounding such a crucial process cannot be made without consumers at the table.