



Title The use of Economic Evaluations in NHS Decision-

Making: A Review and Empirical Investigation

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Aim

To determine the extent to which health economic information is used in health policy decision-making in the UK, and to consider factors associated with the utilization of such research findings.

Conclusions and results

This study suggests that research is needed into structures, processes, and mechanisms by which technology coverage decisions can and should be made in healthcare. Further development of resource centers may be useful to provide independent published analyses to support local decision-makers. Improved methods of economic analyses and their presentation, which take account of the concerns of their users, are needed. Finally, the findings point to the need for further assessment of the feasibility and value of a formal process to clarify the objectives that we seek from investments in health care. The systematic review showed few previous systematic reviews of evidence in the area. At the local level in the NHS, it was exceptional for economic evaluation to inform technology coverage decisions. Local decision-making focused primarily on evidence of clinical benefit and cost implications. While information on implementation was frequently requested, cost-effectiveness information was rarely accessed. Several features of the decision-making environment appeared to militate against emphasis on cost-effectiveness analysis. Constraints on the capacity to generate access and interpret information led to a minor role for costeffectiveness analysis in local decision-making. At the national UK policy level, economic analysis was found to be highly integrated into NICE's technology appraisal program. Attitudes toward economic evaluation varied between committee members with some significant disagreement, and extraneous factors diluted the economic analysis available to the committee. There was strong evidence of an ordinal approach to consideration of clinical and cost-effectiveness information. Some interviewees considered the key role of a cost-effectiveness analysis to be the provision of a framework for decisionmaking. Interviewees indicated that NICE makes use of some form of cost-effectiveness threshold, but expressed concern about its basis and its use in decision-making. Frustrations with the appraisal process were expressed. Committee members raised concerns about lack of understanding of the economic analysis, but felt that a single measure of benefit, eg, quality-adjusted life-years, was useful in comparing disparate health interventions and in providing a benchmark for later decisions.

Recommendations

See Executive Summary link at www.hta.ac.uk/project/1562.asp.

Methods

See Executive Summary link at www.hta.ac.uk/project/1562.asp.

Further research/reviews required

Research is needed on: 1) healthcare organizational forms addressing the alternative structures, processes, and mechanisms by which technology coverage decisions can and should be made; 2) development of resource centers to provide information on high-quality independent published analyses and support decision-makers with local re-analysis and interpretation of findings; 3) development of improved methods of economic analysis that address concerns raised by practitioners and users of such analyses in this research; 4) design of more accessible forms of presentation of economic analyses; 5) feasibility and value derived from a formal discussion and deliberation process concerning the objectives that we seek from investments in healthcare.