

**Guidelines & Economist Network International (GENI) Satellite Session:**  
*Implementing Economic Evidence through Clinical Practice Guidelines (CPGs) and Regulation  
Internationally: Tackling the International Financial Crisis*

*IHEA 09 Beijing, China Monday 13 July 2009:  
12.30pm to 2pm*

Organiser: Dr Kathryn Antioch, Deputy Chair GENI, Health Economics and Funding Reforms, National Health and Medical Research Council (NHMRC) National Health Committee, Monash University

## INTRODUCTION

The influence of economic evidence is increasing through Health Technology Assessment (HTA) world-wide. However, much of health practice and procedures are not subjected to HTAs, limiting the impact of economic evidence. Clinical Practice Guidelines (CPGs) provide opportunities for economists to promote cost effective health care. However, the use of economic evidence in CPGs, and the subsequent integration of evidence into clinical practice is limited given resistance from the professions, paucity of economic evidence & lack of policy commitment. The Guidelines and Economists Network International (GENI) was spearheaded at the European Health Economists Conference in 2006 to address these issues. The IHEA 2007 Organised Session “*Implementing Economic Evidence through CPGs: International Experience*” subsequently considered implementation initiatives in the UK, The Netherlands and Australia. Further, the Denmark 2007 IHEA GENI satellite session provided a broad international overview and assisted in synthesizing methodological issues and developing key priorities for GENI’s Masterplan, with input from a broad range of stakeholders including economists, governments, the WHO, World Bank and OECD. Further decision making was achieved by a meeting of the GENI Board in Denmark, 2007, which was also attended by a representative of the World Bank.

The GENI Satellite session at the 7th European Conference of Health Economists in Rome, 2008 expedited international developments by considering the progress on implementing the GENI Master plan and enabled participation by a broad range of countries, especially European. We facilitated our collaboration with other economists, WHO, OECD and the World Bank and thereby had progress towards achieving GENI’s key aims and objectives. Since that conference the International Financial Crisis (IFC) has become a key issue for stakeholders world-wide and given GENI’s imperative to stimulate cost effectiveness in health services, its importance world-wide has increased.

The 2009 GENI Satellite Session at the IHEA Congress in China considers GENI’s vision and the emerging challenges of health systems and international financial crisis. It effectively builds upon the 2009 IHEA Organised Session ‘*Implementing Economic Evidence and Addressing the International Financial Crisis (IFC) through Clinical Practice Guidelines and Regulation: International Experience*’ that covers initiatives in Australia, USA and New Zealand, providing an opportunity to stimulate discussion on reform insights for GENI. The GENI Satellite Session discusses GENI’s vision and progress, ToR and Master Plan, World Bank and WHO initiatives and developments in UK, Netherlands, Australia, USA and New Zealand. Importantly, it will expedite the implementation of GENI’s Masterplan by identifying future strategies, action priorities and international collaborative opportunities with organizations such as the Asia Pacific Economic Co-operation (APEC), G20 and the Gates Foundation.

Terms of Reference for GENI are:

To facilitate the effective integration of CPGs, economic & clinical evidence into national decision making and clinical practice in the health sector, especially hospitals & primary care by:

1. Stimulating collaboration between economists, hospitals and primary care world-wide in translating CPGs, economic and clinical evidence into clinical practice.
2. Achieving participation world-wide by Health Economic Associations, Governments, guideline development agencies, WHO, World Bank, United Nations, OECD, Medical and Surgical Associations, universities, Foundations and National Hospital Associations (\*).
3. Facilitating health economists to achieve leadership roles in health care organizations to undertake the above activities, applying appropriate technical and clinical governance approaches to localizing CPGs and the evidence into clinical protocols & pathways.

4. Facilitating efficiencies to achieve the above goals by:
  - Identifying key medical and surgical priority areas worldwide for GENI's work program & with regard to funding opportunities to support such work.
  - Encouraging collaboration world-wide in the compilation and proliferation of health economic and clinical evidence & its methodological grading (\*\*)
  - Stimulating the use and development of appraisal of CPGs eg Appraisal of Guidelines for Research and Evaluation.
  - Obtaining agreement on cost effectiveness thresholds for CEA, applying the societal perspective where possible.
5. Forging linkages with bodies that set the standards for appropriate treatment under different conditions that may link to contracts or regulatory processes eg insurers or national government funding systems.
6. Determining mechanisms whereby CPGs and localized quality instruments such as protocols and pathways can be used:
  - by national insurance paying health care providers per individual product and to determine appropriate treatment scenarios related to DRGs, Diagnostic Cost Groups (DCGs) and DBCs (The Netherlands).
7. Identifying and stimulating the financing of deliberations 1) to 6) above through, inter alia, the stakeholders in #2.

### **SESSION DESCRIPTION**

The agenda for the session is outlined below

**FACULTY** *GENI's Board members:* GENI Chair Prof M. Drummond (York University, NICE, UK); GENI Deputy Chair & International Co-ordinator Dr K. Antioch (NHMRC, Monash University, Australia); Prof L. Niessen ( John Hopkins University, USA, Erasmus University, The Netherlands) Dr Maureen Lewis (World Bank, USA); Dr. Hindrick Vondeling (Denmark) Dr Ulf Perrson (Sweden); Dr W. Lawrence (Agency for Health Care Research & Quality USA);

**CONTACT:** Dr K. Antioch, National Health & Medical Research Council, Monash University, Health Economics and Funding Reforms (HEFR) [kantioch@yahoo.com.au](mailto:kantioch@yahoo.com.au) Ph 0400-446-132. **Session Chair:** Professor Jeff Richardson, Monash University, Australia

*(\*) UK, England, Scotland, The Netherlands, Australia, New Zealand, Canada, USA, Singapore, Hungary, Poland, Japan, Hong Kong, China, France, Sweden, Switzerland, Germany, Norway, Thailand and Middle East.  
 (\*\*)Currently mechanisms to grade clinical evidence for CPGs can vary between countries, eg NHMRC (Australia), NICE (UK), SIGN (Scotland) and The Netherlands all use different 'Levels of Evidence' and 'Grades of Recommendations'.*

## GENI Satellite Session Program

**Session Chair:** *Professor Jeff Richardson, Foundation Director, Centre for Economics, Department of Business and Economics, Monash University (Australia)*

- 15 mins. GENI Progress update, International Financial Crisis (IFC) & GENI's Master Plan  
*Dr Kathryn Antioch, Monash University, National Health and Medical Research Council (NHMRC), Health Economics and Funding Reforms (HE&FR), Deputy Chair; GENI (Australia)*
- 15 mins Improving, Affording and Measuring Health Care Performance in Developing and Transition Countries in Financial Crises and Under Health Reforms  
*Dr Maureen Lewis, World Bank, Board member GENI (USA)*
- 15 mins Current WHO initiatives related to GENI's Vision and the International Financial Crisis  
*Dr Tessa Tan Torres, World Health Organisation (WHO)*
- 10 mins Practice guidelines as key elements in defining the health basket in The Netherlands  
*Professor Louis Niessen John Hopkins (USA), Erasmus University (The Netherlands), Board member; GENI*
- 10 mins *Economic analysis in guidelines by the National Institute for Clinical Excellence (NICE) & UK health and GENI initiatives addressing the International Financial Crisis*  
*UK speaker to be advised.*
- 10 min. *Organised Session: Recap of key findings (3 mins per speaker):*  
  
Integrating economic and clinical evidence, guidelines and equity into national regulation and financing: Reforms for 2009 National Health Care Agreements (NHCA) and the International Financial Crisis'  
*Dr. Kathryn Antioch Monash University, NHMRC, HE&FR, Deputy Chair; GENI (Australia)*  
  
Guidelines and Economics: past, present, and future options in the USA and implications of the International Financial Crisis  
*Professor L. Niessen John Hopkins (USA), Erasmus University (The Netherlands), Board member GENI*  
  
What are the barriers in New Zealand to including an economic component into evidence-based best practice guidelines?  
*Dr Guy Scott Massey University, Board member GENI (New Zealand)*
- 10 min. Implementing GENI's Masterplan and the IFC:  
Future strategies, action priorities and international collaboration.  
*Dr Kathryn Antioch Monash University, NHMRC, HE&FR, Deputy Chair; GENI (Australia)*
- 5 min Session Summation  
*Prof Jeff Richardson, Monash University (Australia)*