


NATIONAL HTA FROM HOSPITAL PROVIDER POINT OF VIEW

- The problems/limitations:
 - 1. Miss-match on assessment priorities**
 1. More drugs than medical equipments
 2. Big ticket technologies versus medium and small technologies
 3. Lack of information on very innovative technologies
 - 2. Miss-match in HTA content needs**
 1. Weights given to assessment criteria differ
 2. Generalist impact approach *versus* fit for purpose approach
 - 3. Disinvestment: Uncovered Need**

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- The needed trends towards change:
 1. More “pragmatic” involvement of hospital managers and clinicians in HTA priority setting
 2. Better “local tailored” early assessments of health technologies  More Hospital-based HTA programs
 3. Evolve the science of HTA for very innovative technologies (i.e. personalize medicine, orphan drugs, “patient delocalization technologies”)
 4. Give stratified HTA results (show different organizational and BIA scenarios fitted to local needs)
 5. Comprehensive, systematic and specific disinvestment information

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