Health Technology Assessment Updates

Josh Morse, HTA Program Director
WA – Health Care Authority
November 22, 2019

Today’s agenda:

1. Whole exome sequencing (WES)
2. Hip surgery procedures for treatment of femoroacetabular impingement syndrome (FAIS)
Meeting reminders

- This meeting is being recorded
- A transcript of proceedings will be made available on HTA website: [www.hca.wa.gov/hta/meetings-and-materials](http://www.hca.wa.gov/hta/meetings-and-materials)
- When participating in discussions:
  - State your name; and
  - Use the microphone
- To provide public comment during today’s meeting:
  - Sign-up at the table outside this meeting room

HTA program background

- The Health Technology Assessment (HTA) program is administered under the Washington State Health Care Authority (HCA)
- 2006 legislation designed HTA program to use evidence reports and a panel of clinicians to make coverage decisions for certain medical procedures and tests based on evidence of:
  - Safety
  - Efficacy/ Effectiveness
  - Cost-effectiveness
HTA program background

Multiple state agencies participate to identify topics and implement policy decisions:

- Health Care Authority
  - Uniform Medical Plan
  - Medicaid
- Labor and Industries
- Department of Corrections

Agencies implement determinations of the HTA program within their existing statutory framework.

HTA purpose

Ensure medical treatments, devices and services paid for with state health care dollars are safe and proven to work.

- Provide resources for state agencies purchasing health care
- Develop scientific, evidence-based reports on medical devices, procedures, and tests.
- Facilitate an independent clinical committee of health care practitioners who determine which medical devices, procedures, or tests meet safety, efficacy, and cost tests.
HTA review process

1. Nominate → Review → Public input → Prioritize
2. HCA Director selects technology
3. Key questions → Work plan → Drafts → Comments → Finalize
4. Technology assessment center (TAC) produces evidence report
5. Review report → Public meeting
6. Health Technology Clinical Committee makes coverage determination
7. Agencies implement decision

2019 committee calendar

- January 17, 2020
  Cell-free DNA prenatal screening for chromosomal aneuploidies
- March 20, 2020
  Stem-cell therapy for musculoskeletal conditions
- May 15, 2020
  Tinnitus – re-review
  Vagal nerve stimulation for epilepsy and depression
- July 10, 2020
  Webinar
- September 18, 2020 – Committee retreat
- November 20, 2020 - TBD
To participate...

- Visit the HTA website: [www.hca.wa.gov/hta](http://www.hca.wa.gov/hta)
- Sign up to receive HTA program notifications via email
- Provide comment on:
  - Proposed topics
  - Key questions
  - Draft & final reports
  - Draft decisions
- Attend HTCC public meetings/present comments directly to the clinical committee.
- Nominate health technologies for review.

Thank you

More Information: [www.hca.wa.gov/hta](http://www.hca.wa.gov/hta)

Email: shtap@hca.wa.gov
Draft HTCC Minutes

Members present: John Bramhall, MD, PhD, Gregory Brown, MD, PhD; Janna Friedly, MD; Chris Hearne, BSN, DNP, MPH; Austin Mc Millin, DC; Laurie Mischley, ND, MPH, PhD; Sheila Rege, MD MPH; Seth Schwartz, MD, MPH; Mika Sinanan, MD, PhD; Kevin Walsh, MD; Tony Yen, MD.

HTCC Formal Action

1. Call to order: Dr. Brown, chair, called the meeting to order; members present constituted a quorum.

2. May 17 meeting minutes: Draft minutes reviewed. Motion made and seconded to approve minutes as written.

   Action: Eleven committee members approved the May 17, 2019 meeting minutes.

3. Proton beam therapy - re-review draft findings and decision: Chair referred members to the draft findings and decision and called for further discussion. Two public comments were received on the draft decision. The first asked for reconsideration of the age cohort for pediatric patients; coverage of pediatric cancers that reoccur in adulthood; and coverage of typical pediatric cancers that occur in young adults. The second comment requested clarification of adult cancer coverage, primary, metastatic, or both.

   The committee considered the recommendations. Changes were made to clarify the intent of the determination: under “Limitations of coverage”, the term “primary” was added before the word “cancers” (twice) and to avoid redundancy, the word “primary” was deleted from in front of “hepatocellular carcinomas”. Motion made and seconded to accept the findings and decision, as amended.

   Action: Eleven committee members voted to approve the proton beam therapy findings and decision.

4. Meeting adjourned.

Draft