

develop value propositions, inform HTA assessments, gauge market need and demonstrate where a new technology sits within an established clinical pathway. Although the HTA agencies present at the APF stated that RWD is available in the Asia region, this was not reflected by industry members who had limited awareness and access. Key concerns raised included whether this RWD is available for public use (and what caveats will be placed around its release), the quality of the data, whether it is longitudinal, and if it includes costs.

### CONCLUSIONS:

There is a clear difference in the perspective of RWD between industry and HTA agencies in the Asia region. It is possible that this difference is driven by the apparent lack of publicly available data in the region and industry members comparing the use of RWD in Asia with the use in higher-income countries. This can be improved with clearer definitions, increased dialogue and multi-stakeholder collaboration in the region.

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## OP15 Actions Arising From The 2017 Health Technology Assessment International Asia Policy Forum

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### INTRODUCTION:

Universal health care (UHC) leads to better health, educational outcomes and productivity. However, Asian healthcare systems are experiencing huge pressures and are striving to achieve UHC. With this in mind, the Health Technology Assessment International (HTAi) Asia Policy Forum (APF) tackled, 'Universal Health Care in the Asia Region: Overcoming the Barriers using HTA and Real World Data (RWD)'.

### METHODS:

The HTAi APF convened forty-four senior representatives from HTA agencies and industry from Asia. Through a mixture of keynote presentations and guided group discussions, APF members spent two days grappling with the topic.

### RESULTS:

There were a number of key messages from the APF, plus actions that were identified by APF members. The actions included: (i) A standardized HTA methodology for the prioritization of technologies in the Asia region should be developed to support health care systems; (ii) HTAi need to define what real-world data means in the HTA glossary; (iii) Members of the APF should develop a catalogue of what public and private data is available across countries in the region; (iv) A policy statement that agencies can use with a common approach to the release of data needs to be developed.

### CONCLUSIONS:

HTA and access to RWD were identified as essential tools to be used in achieving the goal of UHC; this goal should indeed be pursued in the Asia region. However, issues such as transparency and accountability of HTA, and trust and collaboration between the public and private sectors are important concerns which need to be addressed in order to progress this goal. The recommendations for actions resulting from this successful APF update on progress towards these identified actions will be presented.

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## OP16 Decision Criteria That Influence Managed Entry Agreements

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### INTRODUCTION:

Managed Entry Agreements (MEAs) enable payers to subsidize access to new medicines while addressing uncertainties. Uncertainties may relate to the criteria for decision-making articulated in decision-making frameworks. The study's aim was to determine if there was any association between the type of MEA and criteria considered during decision-making.

### METHODS:

All medicines with MEAs listed on the Australian national subsidy scheme between 2012-2016 were identified. Data were extracted on the types of MEA and