

## OP40 An Initiative To Identify The Long-Term Effects Of COVID-19: Turkish Ministry Of Health (MoH) COVID-19 Follow-Up Centers

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**Introduction:** During COVID-19 pandemic Follow-up Centers were established by Turkish Ministry of Health (MoH) to detect possible complications in recovered COVID-19 patients at an early stage and make necessary interventions on time. It was aimed to reveal the short, medium and long-term effects of the disease by monitoring regularly. The Follow-up Center algorithms were designed by 10 clinicians of different branches with the support from United Nations Development Programme (UNDP). The follow-ups were made for one year in two pilot centers by using the health information systems infrastructure. In the dissemination process, Follow-Up centers were established initially in 24 and subsequently in 81 provinces.

**Methods:** In this study, the establishment, dissemination, operation and patient follow-up process of the COVID-19 Follow-up Centers were examined. The one-year (between 1 December 2021 and 1 December 2022) data obtained were analyzed. The patient follow-up;

- was made at 0, 1, 3, 6 and 12 months for the first year,
- planned to be made twice in the second year and the following years if needed.

In the first year, people who received 3 follow-ups by using the forms and scales in the integrated information system modules were assumed to be followed up regularly.

**Results:** Among the one-year data obtained from the COVID-19 follow-up centers, the total number of follow-ups, the distribution of follow-ups by date, gender and age groups and symptoms according to time were examined. In the first year; 11,288 people were included in the follow-ups and 18,328 follow-ups were made; 2,462 people were followed-up regularly. The followed up people consisted of 51.8% women; 48.3% of them were men. The incidence of symptoms decreased from 1,198 people in the first follow-up and to 180 people in the third follow-up.

**Conclusions:** The establishment of Follow-up Centers is considered to be an important initiative to generate systematic data on the long-term effects of COVID-19. It was concluded that conducting studies using two-year data obtained from the follow-up centers, especially for complications, would be beneficial for management of the COVID-19 pandemic and in preparation for similar pandemics.

## OP43 Translating Cell And Gene Therapy HTA Into Practice – Building The Plane As We Fly It

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**Introduction:** Assessing, funding, and implementing cell and gene therapies are usually based on limited evidence. This requires health technology assessment (HTA) agencies to develop new methodologies; payers to accept risk-based funding; industry to consider the right evidence and price; hospitals to consider if they have the necessary requirements; patients to consider their risk appetite for gene therapies; and health departments to consider all the above. Ensuring timely patient access to these therapies is challenging in Australia's federated health system. To ensure stakeholders are aligned, all must come to the table and share their respective insights, experiences, and expertise to support planning, decision-making, funding, and commissioning of these therapies. It is time to develop a new consultative and decision-making paradigm to expedite HTAs, funding, commissioning, and timely patient access for cell and gene therapies.

**Methods:** Australian federal, state, and territory government representatives agreed to develop a framework that clarifies processes around information sharing, HTA, funding, commissioning, and monitoring of highly specialized therapies and services (including cell and gene therapies). A draft national framework was developed that addresses assessment, funding, and implementation of high cost, highly specialized therapies and services (e.g. bone marrow transplants). However, it is unclear whether non-government stakeholders have been consulted.

**Results:** The framework for assessing, funding, and implementing high cost, highly specialized therapies and services across Australia's public hospital system is pending endorsement by each of the jurisdictional governments. High-level in nature, the framework's primary audiences are industry and public hospitals. While not all processes are in place, the framework is forward-looking. A detailed implementation plan is warranted to better inform the roles and requirements of each stakeholder.

**Conclusions:** The framework allows stakeholders to better understand government processes regarding assessment, funding, and implementation of high-cost therapies and services, thereby fostering a collaborative environment that supports timely patient access. Articulating process details in a follow-up implementation plan is essential to gain the trust of, and input from, industry, clinicians, and patient representatives.

## OP44 Exploring The Disconnect In Relevant Outcomes For Health Technology Assessment-Related Economic Evaluation Relative To Care Commissioning: Implications For Resource Allocation

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