

# Developing BCA Reference Case Guidance for Global Health and Development

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**Prepared for:**

Scoping Workshop

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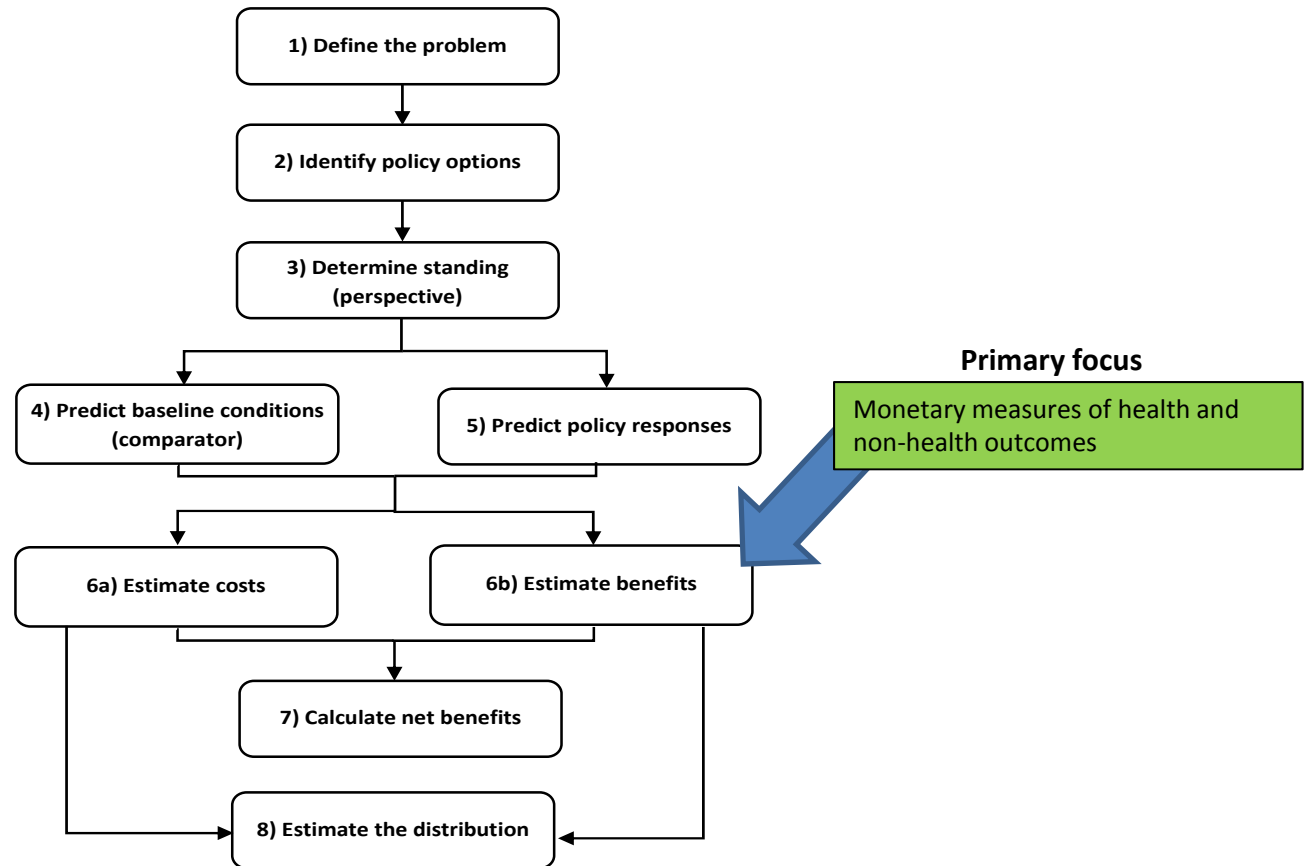
- Goals and Objectives
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- Scoping Work To-Date

# Goals and Objectives

- **Goals:** Increase the comparability of benefit-cost analyses, improve their quality, and expand their use.
  - Focus on improving health and development in low- and middle-income countries.
  - Include policies implemented both within and outside of the health care sector.
- **Objectives:** Expand the iDSI Reference Case to address benefit-cost analysis.
  - Currently includes principles, methodological specifications, and reporting standards applicable to **all** types of economic evaluation.
  - Also addresses the conduct of cost-effectiveness analysis; e.g. effect measures including DALYs averted or QALYs gained.

# Goals and Objectives

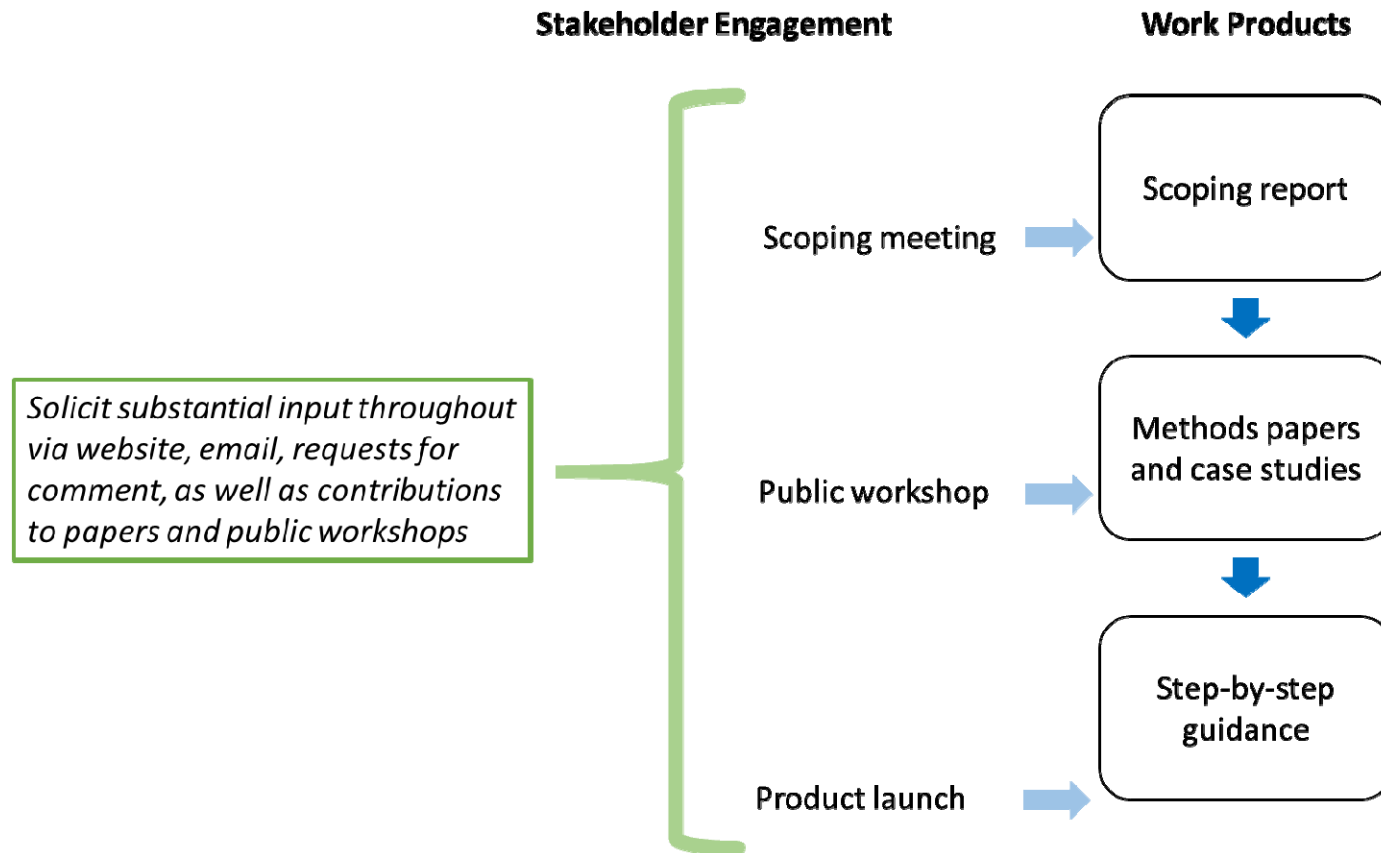
## Basic Analytic Components



# Goals and Objectives

- Primary focus is monetary valuation of health and nonhealth outcomes.
- Companion project (University of York, Karl Claxton) is addressing discounting.
- Also will adapt other principles, methodological specifications, and reporting requirements as needed to accommodate benefit-cost analysis.

# Project Components



Next? More outreach, technical assistance, primary research, illustrative case studies, enhancements to guidance...?

# Project Components

## (1) Scoping report

- Draft now available for review and comment.
- Discusses:
  - General framework
  - Relationship to iDSI Reference Case
  - Conceptual foundations
  - Methods for estimating monetary values
  - Existing guidance and current practices
  - Barriers, challenges and opportunities

# Project Components

## (2) Methods Papers and Case Studies

- Topics to be determined by results of scoping phase.
- Methods papers may address, for example:
  - valuing reduced mortality risks,
  - valuing reduced morbidity (disability) risks,
  - valuing (selected) non-health outcomes,
  - discounting future impacts (*companion project*),
  - other?
- Case studies will demonstrate the effects of the different choices discussed in the methods papers, focusing on BMGF priority areas.
  - Include converting cost-effectiveness analyses to benefit-cost analyses, to illustrate implications of each approach.
- Will discuss in November workshop at Harvard University.



# Project Components

## **(3) Reference Case Guidance**

- Step-by-step guidelines for implementing the benefit-cost analysis reference case, building on the methods papers and including illustrations from the case studies.
- Guidelines will include principles, methodological specifications, and reporting standards that expand the scope of the iDSI reference case.
- Guidelines will be freely available online and designed to be easily updated as new research becomes available and methods are further developed.

# Project Components

## **(3) Reference Case Guidance (cont.)**

- Initial guidance will likely recommend best practices based on currently available data and valuation research, with appropriate recognition of uncertainty.
- It will also identify priorities for future research as well as future guidance development and implementation.

# Project Team

## Leadership Team

- **Lisa A. Robinson** (Principal Investigator), Harvard Center for Health Decision Science and Center for Risk Analysis
- **James K. Hammitt** (Co-Principal Investigator), Harvard Center for Health Decision Science and Center for Risk Analysis
- **Dean Jamison**, University of California – San Francisco
- **David de Ferranti**, Results for Development Institute

# Project Team

## Advisory Group (as of May 11, 2017)

- Michele Cecchini (OECD)
- Kalipso Chalkidou (Imperial College London/iDSI)
- Maureen Cropper (University of Maryland)
- Anil Deolalikar (University of California – Riverside)
- David Evans (The World Bank)
- Federico Guanais (IADB)
- Soonman Kwon (AsDB)
- Jeremy Lauer (WHO)
- Dale Whittington (University of North Carolina)
- Brad Wong (Copenhagen Consensus Center)

## Ex Officio

- David Wilson (Bill and Melinda Gates Foundation, Program Officer)
- Tommy Wilkinson (PRICELESS SA, iDSI Reference Case Team)
- Karl Claxton (University of York, Principal Investigator, BMGF discounting project)

# Scoping Work To-Date

## Key Findings

### Current Practices

- Existing guidance addresses high income countries, often regulations.
- Analyses use varying approaches that are not necessarily consistent with basic principles or existing guidance.

### Challenges to be Addressed

- Normative concerns
- Technical capacity
- Generally-accepted guidance.

Online stakeholder survey results to-date (n = 64) reinforce these points; doing good analysis is very challenging but promotes improved decision-making.

# Scoping Work To-Date

## Conclusions and Implications

- General agreement on basic framework.
- Valuing mortality risk reductions:
  - More research is needed in low- and middle-income countries; determine how to best evaluate and apply the existing research in the interim.
- Valuing morbidity risk reductions:
  - More research is needed in low-, middle-, and high-income countries; determine how to best develop and apply proxies in the interim.
- Valuing non-health outcomes:
  - Outcomes diverse; methods depend on the outcome of interest and the extent to which market or nonmarket valuation is appropriate.

# Scoping Work To-Date

## Conclusions and Implications (cont.)

Discounting:

- Three percent commonly used; better define the appropriate basis as well as estimates for both intra-generational and inter-generational effects.

Addressing the distribution of impacts:

- General agreement that the distribution of costs and benefits should be described for consideration by decision-makers; few analyses provide this information.