



## WHERE WE STAND: VALUE ASSESSMENT FRAMEWORKS

PIPC is very concerned that payers, physicians and policymakers are increasingly using value frameworks in the private sector – and potentially in the public sector – to guide patient access. Many of these tools do not accurately capture what patients value. In fact, they often conflict with stakeholder efforts to move towards a more patient-centric health care system and advance access to personalized medicine. Well-designed value frameworks have the potential to support informed treatment decision making between patients and providers. The reforms described below can ensure that value frameworks support value that matters to patients.

### Process:

- ***Develop a transparent process through which frameworks are developed, implemented and validated.*** Value frameworks and assessments should be transparent and available to patients to fully understand the assumptions that serve as their foundation. Value framework developers should also be transparent about the feedback they receive from patients and other stakeholders, noting where the framework incorporates the feedback received or their rationale for doing or not doing so.
- ***Meaningfully engage with patient and provider organizations.*** Value framework developers should engage with organizations representing the impacted patient communities and clinical experts in the specific treatment area under consideration in advance of scoping their projects to ensure that both frameworks and assessments are achieving consensus on the assumptions, definitions and underlying questions. Engagement should continue throughout the process of developing and updating value frameworks.

### Standards:

- ***Rely on a range of sound, patient-centered sources of evidence.*** Value assessment frameworks should rely on high-quality, rigorously developed methods of evidence that fully capture value that matters to patients. Value frameworks should also be completely transparent about the evidence on which the assessments are based, as well as the limitations of the evidence. By better articulating the limitations of the data that informs value frameworks, it will be clear where evidence gaps exist to inform future research efforts. For example, PCORI was called upon by Congress to articulate the limits of its research and could provide a useful model for consideration.
- ***Reflect patient-centered outcomes.*** Quantifying value in a way that is useful and meaningful to patients and people with disabilities requires a basic understanding of their values and preferences. Doing so will benefit both patient and payer as they identify and integrate the appropriate patient-centered criteria in assessing the value of treatments for a particular condition.

- **Address costs holistically, including costs that matter to patients.** Value frameworks and assessments should have a holistic perspective on the economic component of value, and include long-term, personal and societal costs, such as risk of disability and the potential need for caregiving. Broader costs should be considered rather than focusing only on short-term costs so that value assessments are relevant to decision-making by patients, people with disabilities and their providers.
- **Support shared decision-making.** Focus efforts on advancing shared decision-making between patients and physicians. Well-informed decisions by patients and consumers are foundational to advancing value in ways that are patient-centered.

Safeguards:

- **Acknowledge diversity and differences among patients, and avoid the “one-size-fits-all” mentality of value.** Value frameworks should ensure that their models and methods account for important differences in patient preferences, characteristics and treatment goals.
- **Preserve protections in the Affordable Care Act against use of comparative or cost effectiveness research to make centralized value judgements.** Value frameworks have the potential to support informed treatment decision-making between patients and their physicians. However, if used inappropriately to make centralized value judgements, value assessments could also limit patient access to necessary medical treatments.