



Building a Pragmatic Road: An ISPOR Development Workshop on Moving the QALY Forward

November 7-8, 2007
Philadelphia, Pennsylvania, USA

“Building a Pragmatic Road Forward: An ISPOR Consensus Development Workshop on the Future of the QALY” is intended to develop a thought-leader–driven research agenda concerning the quality-adjusted life-year. (Participation is via invitation only.)

Thought leaders have been debating the QALY’s methodology, assumptions, and ultimate user value over the past several years. At the ISPOR 10th Annual International Meeting Plenary Session held May 2005, Daniel Kahneman PhD presented on the "[Determinants of Health Economic Decisions in Actual Practice: The Role of Behavioral Economics](#)" and the role of an experience-based utility. A summary of his presentation is: [Determinants of Health Economic Decision in Actual Practice: The Role of Behavioral Economics](#). An Issues Panel at ISPOR 11th Annual International Meeting held May 2006 (“[Will the QALY Survive?](#)”) sparked extensive interest, and participants called for the development of a research agenda.

This QALY Consensus Development Workshop was partly developed in response to this call for a research agenda. Participants in this Consensus Workshop include the three Issue Panelists (Daniel Kahneman, the Eugene Higgins Professor of Psychology and Professor of Public Affairs at Princeton University; Dennis G. Fryback, Professor of Population Health Sciences at the University of Wisconsin-Madison; and Alistair McGuire, Chair in Health Economics, London School of Economics) and the moderator (Michael Drummond, Professor of Health Economics at the University of York and Past President of ISPOR), as well as other key thought leaders on utility measurements and health care decision-makers representatives.

Participants debated 1) alternative paradigms and measures; 2) assumptions underlying the QALY; 3) potential value of current systems; and 4) decision-maker needs. Suggestions will be aimed at serving as a catalyst for healthcare professionals who use the QALY as well as those interested in combining it with other measures and in exploring new paradigms.

Group Presenters

- Diana Brixner RPh, PhD, University of Utah
- Norman Daniels PhD, Harvard School of Public Health
- Paul Dolan DPhil, Imperial College, London
- Michael Drummond DPhil, University of York
- Marthe Gold MD, MPH, City University of New York Medical School
- Daniel Kahneman PhD, Princeton University
- Mark Scott Kamlet PhD, Heinz School of Public Policy and Management, Carnegie Mellon University
- Paul Kind MSc, M.Phil., University of York
- Jennifer Elston Lafata PhD, Center for Health Service Research, Henry Ford Health System, Detroit, Michigan
- Joseph Lipscomb PhD, Emory University
- Alistair McGuire PhD, London School of Economics
- Karl Matuszewski MS, PharmD, University HealthSystem Consortium
- Erik Nord PhD, Norwegian Institute of Public Health
- Dennis Raisch RPh, PhD, VA Cooperative Studies Program, Clinical Research Pharmacy, Albuquerque, NM
- Dennis Revicki PhD, MEDTAP at United BioSource Corp.
- George Torrance PhD, Professor Emeritus, McMaster University, Canada
- Milton C. Weinstein PhD, Harvard School of Public Health

Participants (*participated in teleconferences prior to Workshop*)

- Karl Claxton MSc, PhD, University of York
- Dennis G. Fryback PhD, University of Wisconsin-Madison

Attendees

- Diana Brixner RPh, PhD, University of Utah,
- Martin L. Brown PhD, National Cancer Institute
- Steven Clouser PhD, National Cancer Institute
- Norman Daniels PhD, Harvard School of Public Health
- Paul Dolan DPhil, Imperial College, London
- Michael Drummond DPhil, University of York
- Marthe Gold MD, MPH, City University of New York Medical School
- Daniel Kahneman PhD, Princeton University
- Mark Scott Kamlet PhD, Heinz School of Public Policy and Management, Carnegie Mellon University
- Paul Kind MSc, MPhil, University of York
- Jennifer Elston Lafata PhD, Center for Health Service Research, Henry Ford Health System
- William Lawrence MD, DrPH, Agency for Healthcare Research and Quality
- Joseph Lipscomb PhD, Emory University
- Andreas Maetzel PhD, MD, MSc, Amgen (Europe) GmbH
- Alistair McGuire PhD, London School of Economics

- Karl Matuszewski MS, PharmD, University HealthSystem Consortium
- Erik Nord PhD Norwegian Institute of Public Health
- Dennis Raisch RPh, PhD, VA Cooperative Studies Program, Clinical Research Pharmacy, Albuquerque, NM
- Bryce Reeve PhD, National Cancer Institute
- Dennis Revicki PhD, MEDTAP at United BioSource Corp.
- James A. Shuttinga PhD, Office of the Director, National Institutes of Health.
- George Torrance PhD, Professor Emeritus, McMaster University
- Milton C. Weinstein PhD, Harvard School of Public Health

WORKING GROUP OBJECTIVES

Working Group A: The QALY: Developing an Experience-Based Measure

Behavioral economics, which can provide a measurements of patients' direct experience rather than extrapolating from choices made, as the current QALY methodology does, might be a useful method in assessing healthcare interventions. The working objectives of Group A include: 1) Identifying needed areas of research in behavioral psychology that might augment the QALY; 2) Delineating needed areas of research in behavioral economics or behavioral psychology that might replace the QALY; 3) Discussing potential tools (measurements) utilizing behavioral economics and behavioral psychology

Working Group B: Defining and Refining the QALY: Analyzing Assumptions and Implications

The axioms and assumptions underlying the current QALY arise from different fields and different perspectives, and the respective axioms, assumptions, and limitations therefore need to be examined.

The working objectives of Group B include: 1) Discussing the decision analytic prescriptive basis of current QALYs: the axioms, assumptions, and limitations; 2) Identifying how the patient perspective can be used to inform the societal perspective; 3) Comparing and contrasting the person trade-off approach versus the traditional veil of ignorance approach.

Working Group C: Retaining the QALY and Maximizing Additional Methods

The QALY can be used pragmatically as an index to aggregate outcomes across individuals within society, but a broader set of data and methods should be developed as well.

The working objectives of Group C include: 1) Identifying strategies and barriers in eliciting patients' experiences and formulating them in a healthcare measurement; 2) Discussing strategies and barriers in the observation of people's health experience and its integration into community deliberative processes; 3) Determining how to facilitate more routine use of other healthcare indices in healthcare and population settings.

Working Group D: Toward Decision-Makers' Needs: The QALY's User Value

Decision-makers must be able to compare different health outcomes. Does the QALY help or hinder the comparisons, and how might user value for the QALY be enhanced?

The working objectives of Group D include: 1) Identifying how to optimize public deliberative processes for valuing health; 2) Discussing barriers in decision-makers' adoption and use of the QALY, with a view toward strategizing improvement of the measure or improvement of decision-makers' understanding; 3) Formulating what the user wants and to develop a guide to

decision-maker identification of issues for outcomes researchers.

WORK PRODUCTS

A. *Value in Health* Special Issue "[Building a Pragmatic Road: Moving the QALY Forward](#)"

B. [Building a Bridge over Troubled QALYs: Developing Consensus](#)

Third Plenary Session, ISPOR 14th Annual International Meeting (May 2009)

» slide presentation: "[Building a Bridge over Troubled QALYs: Developing Consensus](#)"

Funding for this conference is made possible in part by grant 1R13 HS016841-01 from the Agency for Healthcare Research and Quality (AHRQ). The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S.

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