

MDD Advisory Group Meeting

June 2021

Agenda

- > Summary of MDD Model Design and Public Comments 1:00-1:20 pm
- > Discussion 1:20-2:00 pm
 - > Prioritization of subgroups
 - > Incorporating drivers of disparities into the model structure
 - > Additional novel elements of value
- > MCDA Module 2:00-2:10 pm
- > Research Questions to Include in the Model 2:10-2:30 pm
- > Next Steps

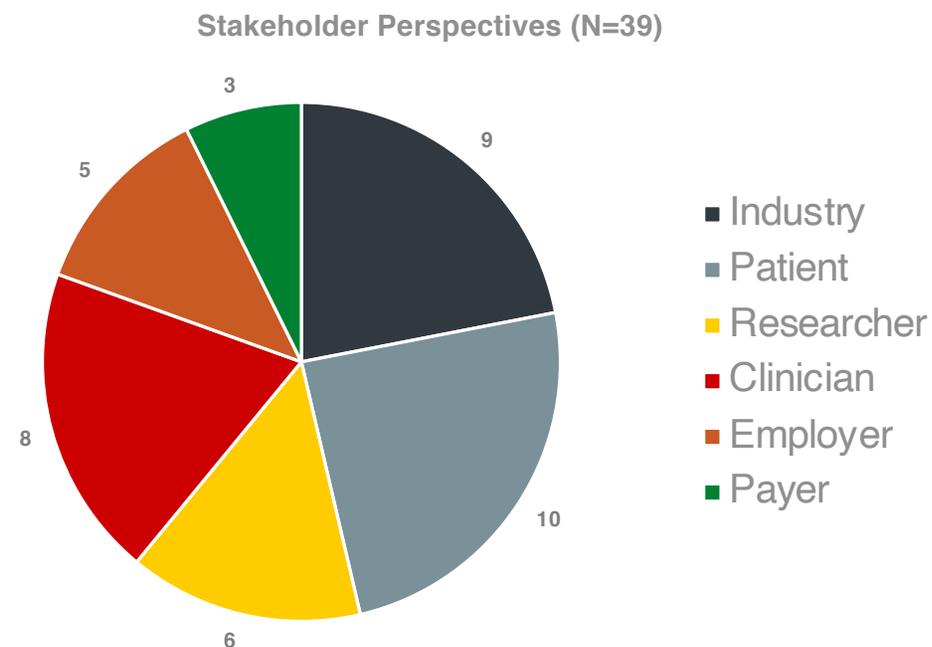
Model Design Quick Recap

Dimension	Specification
Target Population	Treatment-naïve adults (18-64 years), diagnosed with MDD by a healthcare provider
Setting and Location	All settings of care (primary, specialty, and telehealth) in the United States
Study Perspective	Societal as base case, flexibility to customize based on specific stakeholder (e.g., employers)
Model Structure	Individual-level simulation
Comparators	Flexibility to model both treatment sequences and treatments, both pharmaceutical and non-pharmaceutical
Time Horizon	Lifetime horizon, flexibility for users to study interim time points (e.g., 1 year)
Outputs	Flexibility to present a range of different economic and clinical outputs
Key Considerations	Including productivity, adherence, delay in starting active treatments for MDD

MDD Model - Public Comment

> 19 public comments received during the model scope public comment period

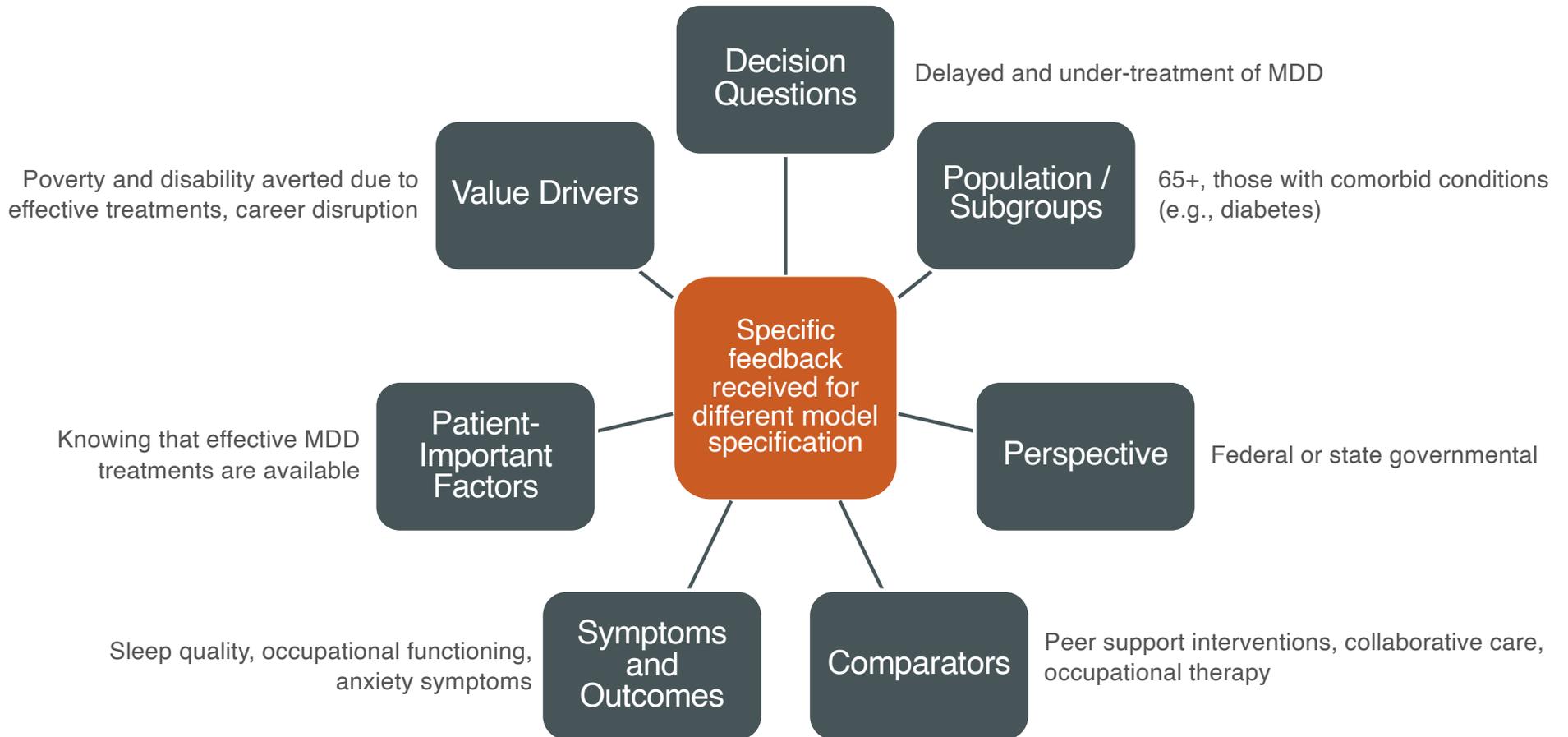
	Advisory Group	Public Comment	Total
Industry	3	6	9
Patient	5	5	10
Researcher	2	4	6
Clinician	5	3	8
Employer	5	--	5
Payer	2	1	3



Public Comment – General Feedback

- > Recognized and highlighted the importance to address the following issues:
 - > Patient-centeredness
 - > Patient heterogeneity
 - > Health inequities
- > Applauded IVI's effort to engage in multi-stakeholder engagement to improve stakeholders' view of holistic understanding of value assessment
 - > Particularly bringing patients and employers into the ongoing conversation

Public Comment – Examples of Specific Feedback



Discussion

Subgroup – Prioritization

- > Some subgroups to be included in Version 1.0 of the model
- > Below are other subgroups that we plan to explore in the future versions of the model:
 - > those with a psychiatric comorbidity (e.g., anxiety disorders)
 - > those with a non-psychiatric comorbidity (e.g., diabetes)
 - > those with suicide attempts
 - > those who were previously hospitalized

Discussion

- > *Any important subgroups missing here?*
- > *Any subgroups that should be prioritized in the first version of the model?*

Subgroup – Drivers of Disparities

- > Some drivers of disparities across subgroups (defined by race/ethnicity, sex, geographic area of residence, urban/rural, and other socioeconomic factors such as education), from public comments received:
 - > Differential screening / diagnosis
 - > Treatment in different settings (e.g., primary care)
 - > Likelihood of initiating pharmacologic treatments after being prescribed by the provider
 - > Likelihood to initiate psychotherapy (e.g., due to lack of providers in the region)
 - > Likelihood to progress to additional therapies when the initial therapy failed

Discussion (intent is to ensure holistic structural considerations)

- > *Any other drivers we should consider that might affect the model specification?*
- > *Any interventions based on social determinants of health (e.g., housing/employment support) that we can explore as a use case?*

Additional Novel Elements of Value

- > Below are three additional novel elements of value we plan to evaluate during the protocol development stage:
 - > Caregiver/Family impacts/burden
 - Financial
 - Health/Quality of Life-related
 - > Availability of effective MDD treatments now and/or in the future
 - > Educational/Career disruption

Discussion

- > *Any comments on these novel elements of value?*
- > *Additional elements to include?*

Multi-Criteria Decision Analysis (MCDA)

- > Alternative decision-analytic approach to inform HTA
- > Allows decision-makers to consider a broader set of value elements than are considered in traditional economic modeling

Specify decision problem, decision-maker, and alternatives

Select criteria

Define measurement of each criterion

Prioritize or weight the different criteria

Score and rank alternatives

MCDA Module Development Plan

- > Explore and test methods for MCDA, and facilitate use and field testing
- > Convening a group of experts to guide the development of the module

Next steps include:

1. Define decision-making perspectives and specific decision questions
2. Determine set of attributes for inclusion
3. Identify gaps in evidence on attributes and potential strategies to address them

Let us know if you would like to join us in shaping this module!

Key Research Questions

Below are some questions that different stakeholders might want to explore using the model:

- > What is the societal burden of untreated or under-treated* MDD?
- > What is the total productivity gain from improved* treatments/sequences of treatments for MDD?
- > What is the impact of lack of access to psychotherapy on patients' long-term economic and clinical outcomes?
- > What are the impacts on caregivers and family members of people with MDD?
- > How do key model outcomes vary for certain subgroups (e.g., those with prior treatment experience) compared with the overall population?

Discussion:

- > *Any novel methodologies you want us to explore?*
- > *Any questions here that should be prioritized?*

** To be defined during protocol development.*

MDD Model - Next Steps & Timeline



**Synthesize Feedback
Launch MCDA Working Group**
(End of May)



**Engagement with
Multi-Stakeholder Advisory Group**
(Early June)



**Finalize Model Scope
Initiate Model Protocol**
(End of June)



Model Scope

Public Comment Period:
April 12 – May 14, 2021



Model Protocol

Mid-2021



Model Public Release

Early 2022



Use Case Development and Model
Updates

Ongoing



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