CALL GUIDE

The HTA Philippines invites interested Filipino researchers to submit concept papers under the 2023 Health Technology Assessment (HTA) Research Agenda Program *(HTA Research Topics 2023 - Batch 2)*.

The HTA Research Agenda 2023 - batch 2 consists of projects that aim:

(1) to generate evidence for the development of HTA Council recommendations on coverage decisions for DOH and PhilHealth, using current HTA methodologies and,

(2) to develop HTA Methods Guides specific to the assessment of health technologies classified as Medical and Surgical Procedures and Preventive and Promotive Health; assessment of health technologies for orphan and rare diseases; and the use of real world evidence.

HTA Research Agenda 2023 - Batch 2 topics

The following are the research topics to be funded under this Call for Concept Papers:

A. ASSESSMENTS

1. Systematic Review of Clinical Evidence

a. ***Atezolizumab*** **and** ***Lenvatinib*** **for patients with unresectable hepatocellular carcinoma**
b. ***Atezolizumab*** **and** ***Pembrolizumab*** **for patients with non-small cell lung cancer**
c. ***Biphasic Insulin Aspart 30*** **for adults with type 2 diabetes mellitus**
d. ***Ceftazidime/Avibactam*** **and** ***Ceftolozane/Tazobactam*** **for adult hospitalized hospital-acquired pneumonia and ventilator-associated pneumonia**
e. ***Ceftaroline fosamil*** **for community-acquired pneumonia**
f. ***Cilostazol*** **for ischemic symptoms**
g. ***Eltrombopag*** **for refractory thrombocytopenia among those with chronic immune thrombocytopenia**
h. ***Insulin degludec*** **for adults with type 2 diabetes mellitus**
i. ***Kiti-Kiti X*** **for targeting immature stages of mosquitoes (as larvicide)**
j. ***Labetalol HCl*** **for pregnant women with hypertensive disorders**
k. ***Liraglutide*** **for adults with type 2 diabetes mellitus**
l. ***Palbociclib*** **and** ***Ribociclib*** **for Hormone Receptor-positive (HR+)/Human Epidermal Growth Factor Receptor 2-negative (HER2-) advanced/metastatic breast cancer**

m. ***Pazopanib, Sunitinib, and Pembrolizumab + Axitinib*** **for metastatic clear cell renal cell carcinoma**
n. ***Trastuzumab emtansine*** **for Human Epidermal Growth Factor Receptor 2-positive (HER2+) early stage breast cancer**

2. **Focus group discussions and key informant interviews to collect evidence for the clinical, economic, and ethical, social, and health systems impact assessment**
   - **Expansion of the benefit package for *renal replacement therapy (hemodialysis)* to 156 hemodialysis sessions per patient per year**

B. ***METHODS GUIDE DEVELOPMENT***

1. **HTA Methods Guide for assessing health technologies classified as *Medical and Surgical Procedures***
2. **HTA Methods Guide for assessing health technologies classified as *Preventive and Promotive Health***
3. **HTA Methods Guide for assessing *health technologies for orphan and rare diseases***
4. **HTA Methods Guide for the *use of real world evidence in the clinical evaluation of health technologies***

Please refer to the attached Annex C for the details of the research questions.

General Guidelines

1. There shall be two (2) stages in the proposal evaluation. The first is the submission of a concept paper, and the second is the submission of the full proposal. The full proposal is submitted only upon approval of the concept paper.

2. The concept paper should not be more than two (2) pages (Arial font 11, single spacing). Deadline for the submission of the concept paper and other requirements is **02 June 2023.**

3. The concept paper shall be evaluated based on the following criteria:
   a. *Relevance & Sensitivity - Alignment of the research questions and objectives to the research agenda*
   b. *Technical/Scientific - Sound methodology; alignment to the research questions and HTA Methods Guide*
   c. *Data Management - Technical merit on handling and management of data.*
   d. *Financial Feasibility - Alignment of the projected project costs to the allocated budget for the research*

e. *Proponent's / Institutional Capacity - Good track record or CV with proven competence to implement and complete the project within the approved duration and budget.*
f. *Conflict of interest (COI) - No significant COI; following the COI declaration in the HTA Process Guide*

4. The review process will take **2 weeks or less** provided that all the requirements have been submitted. The proponent may need to revise the concept paper on the basis of the recommendations of the reviewers.

5. Proponents of approved concept papers shall be notified to proceed to the submission of the full proposal *(details to be provided).*

Note: These guidelines only refer to the review of concept papers. A separate set of guidelines shall be issued for the processing and approval of the full proposal.

Who may apply for the grant?

Filipinos with at least a Master's Degree in a relevant field, have proven research competence / track record, and employed in universities/colleges, research agencies/institutions, hospitals, and other health related agencies are eligible to apply for the research grant.

How to apply?

The interested researchers shall submit the following requirements to **hta@doh.gov.ph**:

1. **Concept paper** [Annex A; Link to downloadable template]
2. **COI declaration** of the primary investigator [Annex B; Link to template]
3. **Cover Letter** to the HTA Division - DOST addressed to:
   ANNE JULIENNE G. MARFORI, RPh, MSc
   Chief, HTA Division
   Department of Science and Technology

Deadline of submission of the above requirements: 02 June 2023

Any concerns or questions?

For any questions, comments or concerns, please email us at **hta@doh.gov.ph**:

ANNEX A - Template of Concept Paper

Title:
Authors:
Affiliations:

I. **BACKGROUND:**

II. **OBJECTIVES:**

III. **METHODOLOGY:**

IV. **ESTIMATED BUDGET**

V. **DURATION OF PROJECT IMPLEMENTATION**

ANNEX B - COI Declaration Form

DECLARATION OF CONFLICT OF INTEREST

1. CURRENT FINANCIAL INTERESTS

To the best of your knowledge, do 1) you or any of your relative within the fourth (4th) civil degree, by affinity or consanguinity, 2) organization in which you serve as an officer, director, trustee, general partner, or employee and/or 3) entity with whom you are negotiating or have any arrangement concerning prospective employment have any current involvement or financial link with any policy determining activity of the office/agency/advisory body/committee:

a. **INVESTMENTS** *(e.g. stocks, bonds, retirement plans, trust, partnerships, sector funds, etc.)* □ **NONE** (If "none", skip to Item b.)

ESTABLISHMENT	TYPE OF INVESTMENT	OWNER (self, spouse, etc.)	NUMBER OF SHARES	CURRENT VALUE	CHECK PERCENTAGE NET WORTH		
					LESS THAN 5%	5-15%	MORE THAN 15%

b. EMPLOYMENT *(Full or Part Time) (Current or Under Negotiation)* □ **NONE** (If "none", skip to Item c.)

ESTABLISHMENT	RELATIONSHIP	POSITION IN FIRM	DATE EMPLOYMENT OR NEGOTIATIONS BEGAN

c. CONSULTANT/ADVISOR *(Current or Under Negotiation)* □ **NONE** (If "none", skip to Item d.)

ESTABLISHMENT	TOPIC/ISSUE	AMOUNT RECEIVED	DATE FROM	DATE TO	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES

d. CONTRACTS/GRANTS (Current or Under Negotiation) □ **NONE** (If "none", skip to Item e.)

TYPE OF AGREEMENT (contract, grant)	PRODUCT UNDER STUDY AND INDICATIONS	AMOUNT OF REMUNERATION TO		TIME PERIOD	SPONSOR*	YOUR ROLE**	AWARDEE	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES
		INSTITU-TION	YOU					
								□ YES □ NO
								□ YES □ NO
								□ YES □ NO
								□ YES □ NO

* Government, Establishment, Institution, Individual
** Site Investigator, Principal Investigator, Co-Investigator, Employee, Partner, No Involvement, or Other

IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL PAGES

1. CURRENT FINANCIAL INTERESTS (Continued)

e. INTELLECTUAL PROPERTY (PATENTS/ROYALTIES/TRADEMARKS) □ **NONE** (If "none", skip to Item f.)

FOR	ESTABLISHMENT	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES	IF "YES", EXPLAIN BELOW AND INDICATE INCOME RECEIVED
		□ YES □ NO	
		□ YES □ NO	
		□ YES □ NO	

f. EXPERT WITNESS *(Last 12 Months or under negotiation)* □ **NONE** (If "none", skip to Item g.)
I appeared for or against the following listed establishment(s) and issue(s)

FIRM AND ISSUE	AMOUNT RECEIVED	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES	IF "YES", EXPLAIN BELOW AND INDICATE INCOME RECEIVED
		□ YES □ NO	
		□ YES □ NO	
		□ YES □ NO	

g. SPEAKING/WRITING *(Last 12 Months or under negotiation)* □ **NONE** (If "none", skip to Item 2.)

FIRM	TOPIC/ISSUE	AMOUNT RECEIVED		DATES	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES
		HONORAR-IUM	TRAVEL		
					□ YES □ NO
					□ YES □ NO
					□ YES □ NO

2. PAST FINANCIAL INTERESTS
a. To the best of your knowledge, do 1) you or any of your relative within the fourth (4^{th}) civil degree, by affinity or consanguinity**,** 2) organization in which you serve as an officer, director, trustee, general partner, or employee have any past involvement with any policy determining activity of the office/agency/advisory body/committee:

□ **YES** □ **NO** □ **NOT TO MY KNOWLEDGE**

b. If "Yes." describe involvement.

FIRM/PRODUCT	FINANCIAL INVOLVEMENT (e.g. contract/consultant)	ROLE	DATES	RELATED TO LISTED PRODUCTS/ INDICATIONS/ ISSUES
				□ YES □ NO
				□ YES □ NO

				□ YES □ NO
				□ YES □ NO

IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL PAGES

3. OTHER INVOLVEMENTS (Other Kinds of Relationships) □ **NONE** (If "none", skip to Item 4.)

Using the list of products/firms/issues, identify anything that would give an "appearance" of a conflict which has not been disclosed above (e.g. involvement in a lawsuit, researcher initiated study, gift of research materials, etc.).

_____

_____

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4. CERTIFICATION STATEMENT

I, _____ designated as _____ of the _____

(First Name, MI, Family Name) *(Position/Designation, when applicable)* *(Name of Agency, Office, Bureau, Service, Hospital, or Unit)*

do hereby declare on my honor that the above information is true and complete, to the best of my knowledge. If there are any changes, I will promptly notify you. This includes any change that occurs before or during the meeting or work itself and through the period up to the publication of the final results or completion of the activity concerned.

My response contains ____ pages.

NAME AND SIGNATURE OF DECLARANT	**DATE**

CONFIDENTIALITY STATEMENT

The primary use of this information is for review of the Public Health Ethics Committee (PHEC) to determine compliance with applicable conflict of interest with laws and regulations.

This confidential report will not be disclosed to any requesting person, unless authorized by law.

Falsification of information or failure to file or report of information required to be reported is subject to disciplinary action by the DOH.

FOR PHEC USE ONLY

NAME AND SIGNATURE OF REVIEWING OFFICIAL	**DATE**

COMMENTS OF REVIEWING OFFICIAL

IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL PAGES

ANNEX C - KEY DETAILS ON THE RESEARCH TOPICS

A. ASSESSMENTS

No	Topic	Draft Research Question				Recommended Project Duration	Budget allocation
		Population	Intervention	Comparator	Outcome		
Systematic Review of Clinical Evidence							
1	Atezolizumab and Lenvatinib	Patients with unresectable hepatocellular carcinoma who had not previously received systemic treatment (first-line therapy)	- Lenvatinib - Atezolizumab in combination with bevacizumab	Sorafenib Tosylate	CLINICAL: Efficacy: - Overall survival - Progression-free survival - Time to progression - Overall response rate - Objective response rate - Duration of response - QALY Safety: - Adverse events	Clinical: Up to 4 months	Php 300,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems	EE+ELSHI: Up to 6 months	Php 550,000.00

					support acceptability of healthcare workers)		
2	Atezolizumab and Pembrolizumab	Patients with non-small cell lung cancer	Atezolizumab (Tecentriq) Pembrolizumab (Keytruda) 100mg IV	- Cisplatin plus pemetrexed - Cisplatin plus gemcitabine - Carboplatin plus pemetrexed - Carboplatin plus gemcitabine - Carboplatin plus paclitaxel	CLINICAL: - Progression free survival - Overall survival - Objective response rate and duration of response - Adverse events - Patient-reported outcomes (symptoms and health-related quality of life)	Clinical: Up to 4 months	Php 300,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
3	Biphasic Insulin Aspart 30	Adults with type 2 diabetes mellitus (18 and above yo)	Biphasic Insulin Aspart 30 100 IU/mL suspension for injection in pre-filled pen	PNF-listed: - Biphasic Isophane Human Insulin 70/30	CLINICAL: Efficacy: - Glycemic control (i.e. HbA1c reduction and Fasting Plasma Glucose reduction) Safety - Rate of Nocturnal hypoglycemia - Rate of Severe Hypoglycemia	Clinical: Up to 4 months	Php 200,000.00

					- Incidence of Major Cardiovascular Events		
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
4	Ceftazidime/Avibactam and Ceftolozane/Tazobactam	Adult hospitalized patients with hospital-acquired pneumonia and/or ventilator-associated pneumonia	Ceftazidime/avibactam (Zavicefta) 2g/500mg powder concentrate solution for IV infusion as third-line option Ceftolozane/Tazobactam as second-line option	Colistin + Meropenem	CLINICAL: Efficacy: - Response achieved at the end of treatment period - Clinical cure achieved at first follow-up visit - Recurrence of the infection observed at the second follow up visit - Increased risk of mortality among patients who have inappropriate empiric treatment or pathogens resistant to the empiric treatment - Time spent in the ICU Safety: - Adverse events	Clinical: Up to 4 months	Php 300,000.00
					ECONOMIC:	EE+ELSHI: Up	Php 550,000.00

					- Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	to 6 months	
5	Ceftaroline fosamil	Adults, adolescents and children over the age of 2 months with community-acquired pneumonia (CAP)	Ceftaroline fosamil 600 mg powder for concentrate for solution for injection	- Ceftriaxone (2g q24hr) - Co-amoxiclav (1g q12 hr)	CLINICAL: - Clinical cure rates - Length of stay in the hospital - Adverse events, serious adverse events, deaths and discontinuations because of adverse events	Clinical: Up to 4 months	Php 200,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems	EE+ELSHI: Up to 6 months	Php 550,000.00

					support acceptability of healthcare workers)		
6	Cilostazol for ischemic symptoms, including ulceration, pain, and coldness of the extremities, in chronic arterial occlusion; prevention of recurrence of cerebral infarction (excluding cardiogenic cerebral embolism)	Noncardioembolic ischemic stroke patients and transient ischemic attack patients requiring anti-platelet maintenance medication	Cilostazol	Clopidogrel	CLINICAL: - Cerebrovascular events - Bleeding events - Ischaemic stroke - Stroke - Myocardial infarction - Death - Haemorrhagic stroke - Intracranial arterial stenosis - Neurological deterioration	Clinical: Up to 4 months	Php 200,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
7	Eltrombopag	Refractory thrombocytopenia among those with chronic immune thrombocytopenia	Eltrombopag, alone or in combination	Standard of care or placebo	CLINICAL: Efficacy: - Reducing all-cause mortality - Increasing platelet counts to at least 50,000/μL - Reducing patient-important outcomes,	Clinical: Up to 4 months	Php 200,000.00

					including bleeding episodes, splenectomy, use of ITP medications - Improving quality of life Safety: - Adverse events, including severe adverse events such as thromboembolism and hepatotoxicity		
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
8	Insulin degludec	Adults with Type 2 diabetes mellitus (18 and above yo)	Insulin degludec 100 IU/mL pre-filled pen	PNF-listed LAIs: - Isophane Human Insulin/NPH Insulin - Insulin Glargine U100	CLINICAL: Efficacy: - Glycemic control (i.e. HbA1c reduction and Fasting Plasma Glucose reduction) Safety - Rate of Nocturnal hypoglycemia - Rate of Severe Hypoglycemia - Incidence of Major Cardiovascular Events	Clinical: Up to 4 months	Php 200,000.00

					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
9	Kiti Kiti X	Filipino households for targeting immature stages of mosquitoes (as larvicide)	Kiti Kiti X	- Fumigation - DOH 4-S strategy (Previously utilized larvicides by DOH programs, ref: direct communication from program) - Temephos - Pyriproxyfen - Novaluron - Diflubenzuron (did not pass COBAC procurement)	CLINICAL: Efficacy: - Population level Reduction in Dengue cases - Population level reduction in mortality due to dengue Safety: - Any harmful effects noted from the intervention	Clinical: Up to 4 months	Php 200,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies)	EE+ELSHI: Up to 6 months	Php 550,000.00

					- Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)		
10	Labetalol HCl	Pregnant women with hypertensive disorders	Labetalol HCl 5mg/mL (100mg/20 mL) solution for IV injection/infusion	- Nicardipine HCl - Hydralazine	CLINICAL: - Eclampsia - Preeclampsia - Cerebrovascular and cardiovascular events - BP lowering - Adverse events	Clinical: Up to 4 months	Php 200,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
11	Liraglutide	Adults with Type 2 diabetes mellitus (18 and above yo)	Liraglutide 6mg/mL solution for injection in pre-filled pen	PNF listed anti-diabetics: - Metformin - Gliclazide - Insulins - Insulin	CLINICAL: - Reductions in HbA1c, weight, hypoglycemia, and blood pressure	Clinical: Up to 4 months	Php 200,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio	EE+ELSHI: Up to 6 months	Php 550,000.00

				glargine	(if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)		
12	Palbociclib and Ribociclib	Patients with HR+/HER2-advanced/metastatic breast cancer	Pre-menopausal *First-line treatment:* ribociclib in combination with letrozole Post-menopausal *First-line treatment:* - Palbociclib in combination with an aromatase inhibitor - ribociclib in combination with fulvestrant	- Pre-menopausal: letrozole, anastrozole, and tamoxifen - Post-menopausal: fulvestrant	CLINICAL: - Overall survival - Progression free survival - Response rate - Adverse effects of treatment - Health related quality of life	Clinical: Up to 4 months	Php 300,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare	EE+ELSHI: Up to 6 months	Php 550,000.00

					workers)		
13	Pazopanib, Sunitinib, and Pembrolizumab + Axitinib	Metastatic clear cell renal cell carcinoma	- Pazopanib - Sunitinib - Pembrolizumab plus Axitinib		CLINICAL: Efficacy: - Progression free survival - Overall survival - Objective overall response rate - Quality of life Safety: - All adverse events - Diarrhea - Fatigue - Nausea - Hypertension - Drug-induced transaminase elevation	Clinical: Up to 4 months	Php 400,000.00
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00
15	Trastuzumab emtansine	Adult HER2+ early breast cancer patients with	Trastuzumab emtansine as a single agent (100	Trastuzumab	CLINICAL: Primary endpoints: - Invasive disease-free survival (iDFS):	Clinical: Up to 4 months	Php 200,000.00

		pathologically documented residual invasive disease in either the breast or axillary lymph nodes following completion of preoperative therapy	mg)		Time from randomization to the first occurrence of one of the following events - Ipsilateral invasive breast tumor recurrence - Ipsilateral local-regional invasive BC recurrence - Distant recurrence - Contralateral invasive breast cancer, - Death attributable to any cause Secondary endpoints: - iDFS–SPNBC - Disease-free survival (DFS) - Overall Survival (OS) - Patient Reported Outcomes (PRO) - European Organization for Research and Treatment of Cancer (EORTC) Quality of Life Questionnaire QLQ-C30/QLQ-BR23, EuroQol EQ-5d Questionnaire		
					ECONOMIC: - Incremental Cost-effectiveness Ratio (if CEA/CUA) - Incremental Cost (if CMA) - Budget Impact ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Ethical aspect (equity) - Legal aspect (global commitment, local laws and policies) - Social aspect (acceptability, equity) - Health systems aspect (feasibility, impact to practice, human resource needs, infrastructure needs, systems support acceptability of healthcare workers)	EE+ELSHI: Up to 6 months	Php 550,000.00

Focus group discussions and key informant interviews to collect evidence for the clinical, economic, and ethical, social, and health systems impact assessment							
1	Expansion of the benefit package for renal replacement therapy (hemodialysis) to 156 hemodialysis sessions per patient per year	- Stage 5 chronic kidney disease (CKD) patients waiting for renal transplantation - Stage 5 CKD patients who cannot continue with PD - Stage 5 CKD patients with transplant rejection	156 sessions of hemodialysis per year (low flux)	90 and 144 sessions of hemodialysis per year (low flux)	CLINICAL: - Quality of life of patients ECONOMIC: - Financial risk protection experienced by patients ETHICAL, LEGAL, SOCIAL, HEALTH SYSTEMS: - Improvement in access and utilization - Increase in facilities - Patient and healthcare provider preference (attitude, behavior) - Impact to other benefit packages - Impact to healthcare worker behavior with respect to PSN guidelines	Up to 6 months	Php 2,000,000.00

B. METHODS GUIDE DEVELOPMENT

No	Topic	Suggested Methodology	Project Duration	Budget
1	HTA Methods Guide for assessing health technologies for orphan and rare diseases	● Literature review of methodologies or HTA methods guide from other settings ● Critical appraisal of the applicability of methodologies to the Philippine setting ● Consultation with experts on the proposed methods	4 months	Php 1,500,000.00
2	HTA Methods Guide for the use of real world evidence in the clinical evaluation of health technologies		4 months	Php 1,500,000.00
3	HTA Methods Guide for assessing health technologies classified as Preventive and Promotive Health		4 months	Php 1,500,000.00

4	HTA Methods Guide for assessing health technologies classified as Medical and Surgical Procedures		4 months	Php 1,500,000.00