About CADTH

CADTH is an independent, not-for-profit organization responsible for providing Canada’s health care decision-makers with objective evidence to help make informed decisions about the clinical effectiveness, cost-effectiveness, and optimal use of drugs, medical devices, diagnostics, and procedures. CADTH accomplishes this by acting as a major producer of evidence, advice, recommendations, and tools that promote the optimal use of health technologies; taking into consideration the local context in which decisions are made. CADTH also plays a key role as a broker by fostering evidence generation and adoption across Canada.

CADTH is accountable to the federal, provincial, and territorial (F/P/T) Conference of Deputy Ministers of Health through the CADTH Board of Directors. Core funding is provided through financial contributions from Canada’s F/P/T governments (except Quebec).

SETTING DIRECTION

Early in 2015, CADTH adopted a new strategic plan, entitled *Informing Choices in a New Era of Health Care in Canada*, encompassing the time period from 2015 to 2018. This three-year strategic plan will build on CADTH’s reputation as a key resource to health care decision-makers in Canada. The plan sets out the following vision and mission statements, which guide the activities of the organization:

**Vision**

*Health technology assessment informs every health technology decision.*

**Mission**

*To enhance the health of Canadians by promoting the optimal use of health technologies.*

The strategic plan describes the refinements, enhancements and new approaches CADTH will undertake to *deliver value* to health decision-makers, *expand the reach* of the organization, and *set the standard* for evidence generation and analysis. Designed to be responsive to the evolving health care environment, the strategic plan was informed by an environmental scan and a series of focus groups with customers to reflect the context in which health decisions are made and the evolving needs of the constituency CADTH serves.

PRIORITY INITIATIVES FOR 2015-2016

Much progress has been made toward integrating evidence into the health care system. This business plan identifies priority initiatives for the 2015-2016 fiscal year — initiatives that position CADTH to press forward in achieving the three strategic goals and associated objectives articulated in *Informing Choices in a New Era of Health Care in Canada*.

Following a period during which the attention of the organization has been focused on critical initiatives related to the drug portfolio, this year, particular emphasis has been placed on enhancements to work related to medical devices.

**Priority Initiative 1:** Revive and renew the assessment programs for medical devices, diagnostics, and procedures.
The products and services offered by the organization are most valuable when they are provided in a timely manner and address topics that are relevant to health decision-makers. This year, CADTH will adopt a more comprehensive approach to topic identification for medical device projects at all stages of the technology lifecycle — from pre-market to obsolescence. This will involve refining many aspects of the medical device assessment process, with particular emphasis placed on enhancements to horizon scanning, stakeholder engagement, and topic prioritization.

Priority Initiative 2: Implement phase 2 of the transfer of the pan-Canadian Oncology Drug Review (pCODR) to CADTH, including the introduction of industry application fees for pCODR applications.

In November 2013, the Conference of Deputy Ministers of Health approved the transfer of the pCODR to CADTH. They directed that the transfer occur in two phases:
- Phase 1: Commencing on April 1, 2014 — pCODR people, processes, and expertise remain intact as a program under the governance of CADTH.
- Phase 2: Commencing on April 1, 2015 — align the CADTH pCODR and Common Drug Review (CDR) evaluation criteria, while building upon the best practices of both programs.

To support implementation of this phase, CADTH has created a steering committee with representation from F/P/T drug plans and cancer agencies. Key areas of alignment will include the expert committee recommendation framework, the review processes, stakeholder engagement in the review processes, and administrative efficiencies of the two programs. CADTH is committed to continuing to engage its stakeholders and the broader cancer community throughout this transition period. Phase 2 of the transfer also includes the introduction of industry applications fees for pCODR submissions commencing on April 1, 2015.

Priority Initiative 3: Enhance patient engagement.

Substantial effort has been devoted to involving patients and incorporating patient evidence in the drug review processes during the past several years. CADTH has begun to identify and implement ways to both deepen and expand this involvement across a range of organizational activities.

This year, CADTH will:
- implement a permanent process to solicit patient input on therapeutic review projects, following completion of the pilot phase
- explore options to engage patients in the assessment of medical devices, diagnostics, and procedures
- further develop the role and composition of the CADTH Patient Liaison Forum
- continue to evolve the transparency and patient engagement processes involved in CADTH drug review programs.
**Priority Initiative 4:** Expand efforts to increase the capacity of decision-makers to understand and use evidence, particularly for medical devices, diagnostics, and procedures.

Recognizing that decisions about health technologies are made at various time points and levels throughout the health care system, CADTH has placed increasing emphasis on expanding its reach in order to effectively incorporate evidence. The CADTH Knowledge Mobilization and Liaison Officer team is attuned to the learning needs of the users of CADTH products and services and other sources of evidence-based information and is adept at leveraging opportunities to reach this audience. This year, CADTH will focus on expanding existing approaches to student education and exposure to evidence-informed decision-making; leveraging partnerships with other pan-Canadian health organizations to reach decision-makers using a variety of platforms; and introducing new device-oriented workshops and e-learning modules.

**Priority Initiative 5:** Facilitate the generation of high-quality evidence.

CADTH has built its reputation on the scientific credibility of its work and is a valued contributor to the evidence community. As such, CADTH strives to enhance the pan-Canadian capacity to conduct quality analyses of clinical and economic evidence through collaborative efforts. This year, CADTH will pursue opportunities to establish common Canadian methods standards and report templates in collaboration with partner organizations. This will include enhancing existing and developing (new) economic and clinical methods guidelines for conducting health technology assessment (HTA). In support of this, CADTH will continue to participate in HTA methods groups at the national and international levels.

In January 2015, CADTH launched a new Scientific Advice program with the aim of providing advice about clinical trial design and other evidence requirements during the early phases of pharmaceutical development. This year, CADTH will conduct a number of Scientific Advice sessions during the pilot phase of the program, and will evaluate and refine the program as needed. Ideally the program will contribute to the generation of higher-quality evidence required for HTA and will ultimately lead to better informed decision-making at the policy and practice levels.
CADTH PRODUCTION TARGETS

To support its mission, CADTH delivers a defined suite of products and services in accordance with customer needs and priorities. The production targets for 2015-2016 are listed in the table below. A detailed description of CADTH products and services is provided at the end of this document. Given that priorities evolve over time, actual demand for the various products will influence actual output across the product lines.

<table>
<thead>
<tr>
<th>Product Line</th>
<th>Projected Production Capacity</th>
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<tbody>
<tr>
<td>Formulary Reviews and Listing Recommendations</td>
<td>CDR applications (submissions and resubmissions) 40 to 45&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td>Drug plan Requests for Advice 2 to 4</td>
</tr>
<tr>
<td></td>
<td>pCODR applications 20 to 25&lt;sup&gt;b&lt;/sup&gt;</td>
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<tr>
<td>Health Technology Management Products</td>
<td>Rapid Response 250 to 300</td>
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<tr>
<td></td>
<td>HTAs of blood products 1 to 2</td>
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<td></td>
<td>HTAs of products without recommendations 5 to 8</td>
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<tr>
<td></td>
<td>Optimal Use (products with recommendations from a CADTH expert committee) 4 to 6</td>
</tr>
<tr>
<td></td>
<td>Optimal Use — drug therapeutic class reviews 4 to 8</td>
</tr>
<tr>
<td>Environmental Scans</td>
<td>5 to 8</td>
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<tr>
<td>Horizon Scans</td>
<td>10 to 15</td>
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CDR = CADTH Common Drug Review; HTA = health technology assessment; pCODR = CADTH pan-Canadian Oncology Drug Review.

<sup>a</sup> May include one non-industry application.

<sup>b</sup> May include up to four non-industry applications.

FINANCIAL PLAN

Supplementary to core funding, provided by CADTH corporate members, revenue will be generated through industry application fees. CADTH will achieve a balanced budget through the continued efficient and effective use of internal and external resources. Annual operating costs continue to rise as a result of inflation, and efforts to achieve efficiencies and cost savings remain a priority for CADTH management.

MEASURING SUCCESS

The priority initiatives described in this plan are intended to support and enhance the ongoing activities undertaken by CADTH in delivering its mandate. Each year, CADTH reports on its achievements against the objectives set out in the Annual Business Plan established for the previous fiscal year. This form of process evaluation serves as a mechanism for understanding if and how CADTH accomplished its stated goals for the year.
CADTH has also adopted a comprehensive Impact and Evaluation Framework that allows for the collection of both qualitative and quantitative data throughout the year. The output from the framework is intended, in part, to inform the planning process as it identifies successes, challenges, strengths, and weaknesses. This information serves as an indicator of the extent to which CADTH has been able to exert influence and effect change in support of its value proposition.

PRODUCTS AND SERVICES

In support of its mandate as an HTA organization, CADTH provides a standard set of core products and services to participating F/P/T ministries of health and their constituents. This information is used to inform decisions about the optimal use of pharmaceuticals, medical devices, diagnostics, and procedures. The CADTH suite of HTA products and services includes:

1. Formulary Reviews and Listing Recommendations
   a. The CADTH Common Drug Review
      The CADTH CDR is a pan-Canadian process for conducting objective, rigorous reviews of the clinical, cost-effectiveness, and patient evidence for drugs, and providing formulary listing recommendations to the publicly funded drug plans in Canada (except Quebec). The drug plans use this information to support their coverage decisions. CDR has been an operational program at CADTH since late 2003.
   
   b. The CADTH Pan-Canadian Oncology Drug Review
      The pCODR group assesses cancer drugs and makes recommendations to the provinces and territories (except Quebec) to guide their drug-funding decisions. Established in 2010 by the provincial and territorial ministries of health, pCODR is designed to bring consistency and clarity to the assessment of new cancer drugs by looking at both clinical evidence and cost-effectiveness. pCODR is the permanent successor to the interim Joint Oncology Drug Review, which has provided evidence-based recommendations for cancer treatments since early 2007 and has demonstrated the value that a pan-Canadian collaborative platform can provide to cancer care decision-making. On April 1, 2014, pCODR became a program within CADTH.

2. Health Technology Management Products
   a. Rapid Response Service
      The Rapid Response Service provides Canadian health care decision-makers with evidence-based information tailored to their requirements. The reports respond directly to urgent jurisdictional needs for information that will inform policy and practice decisions.

   b. Health Technology Assessment Reports
      The evidence produced within this product line is disseminated through various products and services that can vary in scope and complexity. The assessments provide a full analysis of the clinical and economic aspects of a technology, and may include other factors that examine the broader impact of the technology on patient health and the health care system. HTA reports can involve assessments of new technologies or reassessments of existing technologies. The report will provide conclusions, but will not include recommendations from a CADTH expert committee.
c. **Optimal Use Projects**
Optimal use projects involve systematic reviews of the clinical evidence, cost-effectiveness analyses, and development of recommendations and guidance. The reviews are carried out in collaboration with a committee or panel comprising subject matter experts, public representatives, and other stakeholders from across Canada. Optimal use projects are intended to encourage appropriate coverage, prescribing, and utilization of drugs and other health technologies.

3. **Environmental Scans**
To better understand the national and international landscape, CADTH conducts environmental scans of health care practices, processes, and protocols inside and outside of Canada. Environmental scans inform decision-makers about the use of health technologies in other jurisdictions, and help guide topic selection for some CADTH projects.

4. **Horizon Scans**
Horizon scanning products alert decision-makers to new and emerging health technologies that are likely to have an impact on the delivery of health care in Canada. This early information supports effective planning for the introduction of new technologies within the health care system. To fully leverage this service, CADTH sponsors the Canadian Network for Environmental Scanning in Health (CNESH) — a national network of organizations involved in horizon scanning.

5. **Knowledge Mobilization and Implementation Support**
CADTH has adopted an integrated knowledge mobilization and implementation support approach that is applied throughout the product development life cycle and facilitates two-way communication between staff, decision-makers, patients, and partners. A number of tailored products and tools are developed to support decision-makers, and move the evidence into action. These products and tools provide CADTH customers with the information they need, when they need it, and in a way that they can successfully use it to inform decisions about the management of health technologies.