



National Health Council

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Patient-Centered Value Model Rubric Released

National Health Council Shares Guidance for Assessing the Value of New Treatments

Washington, DC (March 28, 2016) – Understanding and defining the value of health care treatments and interventions has become a national priority. To help incorporate the patient perspective in the debate over value, the National Health Council (NHC) released a Patient-Centered Value Model Rubric.

Value models (also known as frameworks) have emerged as the latest tools to help health care stakeholders assess the value of new treatments. Yet, it is not apparent that individual patients or patient advocacy organizations were engaged throughout the creation of these frameworks.

These models have been described as intended to support physicians and payers in assessing the value of treatments. However, patient perspectives on value can differ significantly from these audiences, often integrating considerations beyond clinical outcomes and cost, such as a treatment’s ability to help patients achieve personal goals.

“To have true utility, value models must incorporate these other value-influencing factors, and the only way to achieve this is by having robust processes in place to incorporate the patient voice,” the NHC’s rubric states. “Such action is particularly important if physicians and payers look to value models to inform decisions that can affect the treatment options available to a patient.”

The purpose of the Patient-Centered Value Model Rubric is to provide a tool that the patient community, physicians, health systems, and payers can use to evaluate the patient centeredness of value models and to guide value model developers on the meaningful incorporation of patient engagement throughout their processes.

The rubric addresses

1. **Patient Partnership**, involving patients in every step of the value model development and dissemination process
2. **Transparency to Patients**, disclosing assumptions and inputs to patients in an understandable way and in a timely fashion
3. **Inclusiveness of Patient**, reflecting perspectives drawn from a broad range of stakeholders, including the patient community.
4. **Diversity of Patients/Populations**, accounting for differences across patient subpopulations, trajectory of disease, and stage of a patient’s life.

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5. **Outcomes Patients Care About**, including outcomes that patients have identified as important and consistent with their goals, aspirations, and experiences.
6. **Patient-Centered Data Sources**, including data sources that reflect the outcomes most important to patients and capture their experiences to the extent possible.

Resources:

- For a copy of the rubric: <http://www.nationalhealthcouncil.org/sites/default/files/Value-Rubric.pdf>
- To listen to a webinar discussing the rubric: <https://nhcouncil.adobeconnect.com/p2tfj2nr9e4/>
- For more information about the National Health Council: www.nationalhealthcouncil.org

About the National Health Council:

Founded in 1920, the NHC is the only organization that brings together all segments of the health community to provide a united voice for the more than 133 million people with chronic diseases and disabilities and their family caregivers. Made up of more than 100 national health-related organizations and businesses, the NHC's core membership includes the nation's leading patient advocacy organizations, which control its governance and policy-making process. Other members include professional and membership associations, nonprofit organizations with an interest in health, and representatives from the pharmaceutical, generic drug, insurance, medical device, and biotechnology industries.

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