

OFFICE OF HEALTH ECONOMICS

Annual Charity Report 2024



OHE

2024

OFFICE OF HEALTH ECONOMICS
Annual charity report

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About OHE

Mission

Support better health care policies by providing insightful economic and statistical analyses of critical issues.

The Office of Health Economics (OHE) is a charity with registered charity number 1170829. A senior management team manages OHE, and our governance is the responsibility of the Board of Trustees.

Structure

The Office of Health Economics (OHE) is a charity with registered charity number 1170829. A senior management team manages OHE, and our governance is the responsibility of the Board of Trustees.

The Board of Trustees has three sub-committees with advisory roles:

- Research Committee: Provides advice and guidance to OHE on its research programme
- Policy Committee: Advises OHE on engaging with policymaking and meeting its Charitable Objects
- Management Committee: Assists OHE with its operational and business planning.

The Office of Health Economics wholly owns OHE Consulting Limited, which carries out consulting work for third parties. Its profits fund our research and charity activities.

OHE is an Independent Research Organisation (IRO). This status was awarded in 2020 by UK Research and Innovation (UKRI) which — through the seven Research Councils, Innovate UK and Research England — allocates more than £9 billion in research funding, primarily from the Science Budget of the Department for Business, Energy and Industrial Strategy (BEIS).

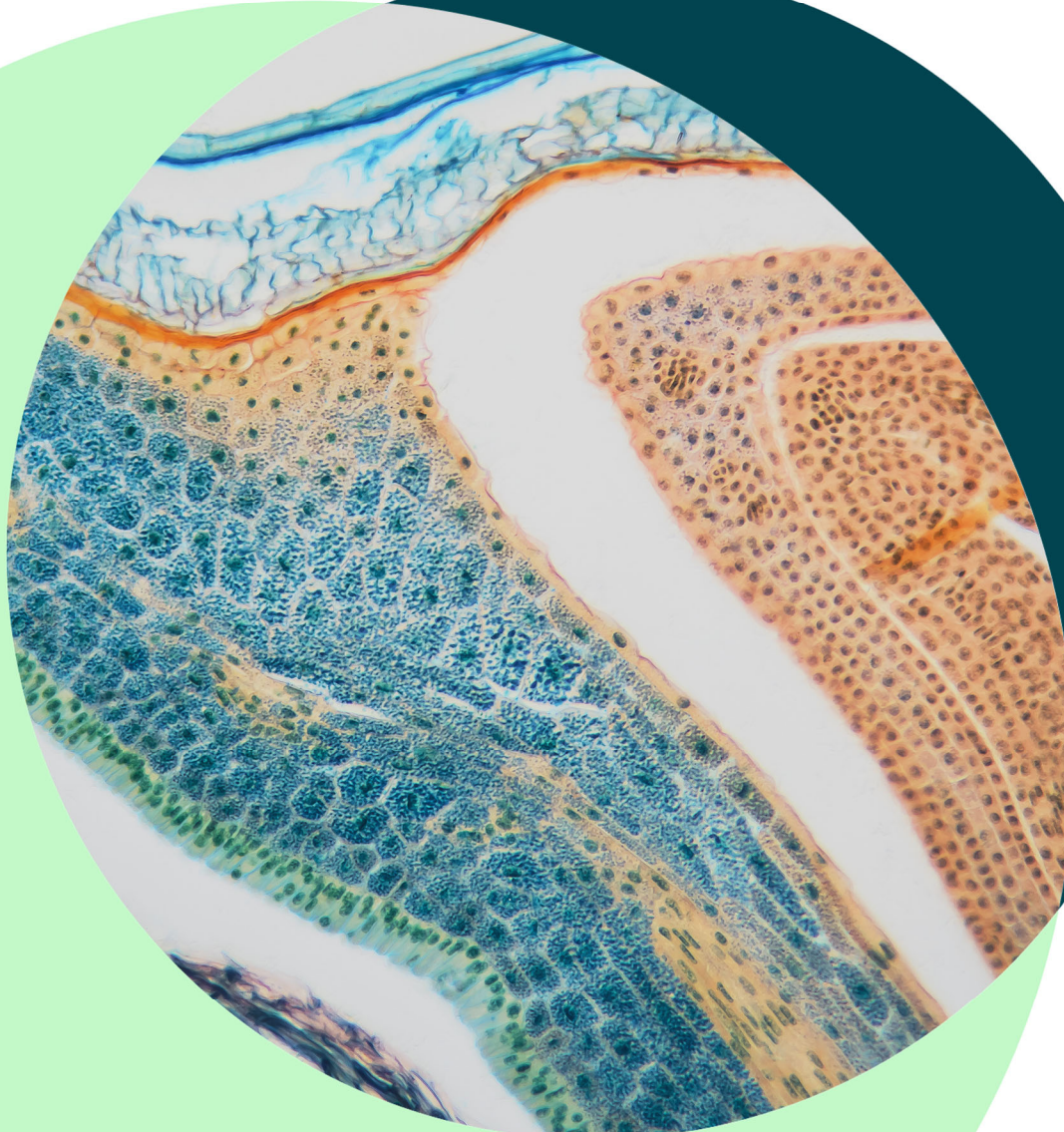
IRO status recognises the high quality of OHE's independent research, on par with the UK's higher education institutions, and makes us eligible to apply for UKRI funding on the same terms to better fulfil our charitable aims.

Priorities

By the end of 2024, the OHE team comprised one Chief Executive Officer; one Deputy Chief Executive Officer; one Chief Research Officer & Head of Education; four Directors; two Associate Directors; six Senior Principal Economists; one Associate Principal Economist; one Principal Economist ;three Senior Economists; one Business Intelligence; eight Economists; three Graduate Economists and four Administrative Support staff, and two MSc student fellows. Also, in 2024, OHE had eleven Honorary Research Fellows.

We emphasise projects that tackle impactful policy and strategic issues with current and future significance. Our work involves stakeholders, clients, and external experts to obtain crucial new policy insights and identify strategies and optimal choices.

Although OHE is based in London, we undertake projects both in the UK and internationally. We work collaboratively with a wide network of academics and other partners worldwide.



Snapshot of the year

Our research and dissemination activity in 2024 was diverse. We continued to work on a broad range of areas and reach a wide range of audiences globally.



RESEARCH



26 peer-reviewed external publications



22 insights authored by OHE



100+ citations for OHE research journal articles



7,529 publication downloads from OHE's website



EVENTS

2700+ delegates reached through online and in-person events

5 profile-raising events including our Annual Lecture

11 webinars, roundtables, and seminars

93 presentations at external conferences



GLOBAL REACH



89 countries reached through Educational content



6,069 Twitter and **12,759 LinkedIn** followers



16 global applications for our second Innovation Policy Prize



130,186 website users



Charitable activities & impact

Each year we deliver on our Charitable Objects and maintain our social purpose, where the charitable objects are:

- Promotion of evidence-based health care policy by carrying our research on the economics of health, health care systems, and the life sciences industry
- Promotion of effective and efficient use of health care resources by advancing the use of economic approaches to support decision-making
- Facilitating decision-making and awareness of health care policy issues by encouraging debate and disseminating relevant health economics research

Promotion of evidence-based health care policy
By researching the economics of health, health care systems, and the life sciences industry



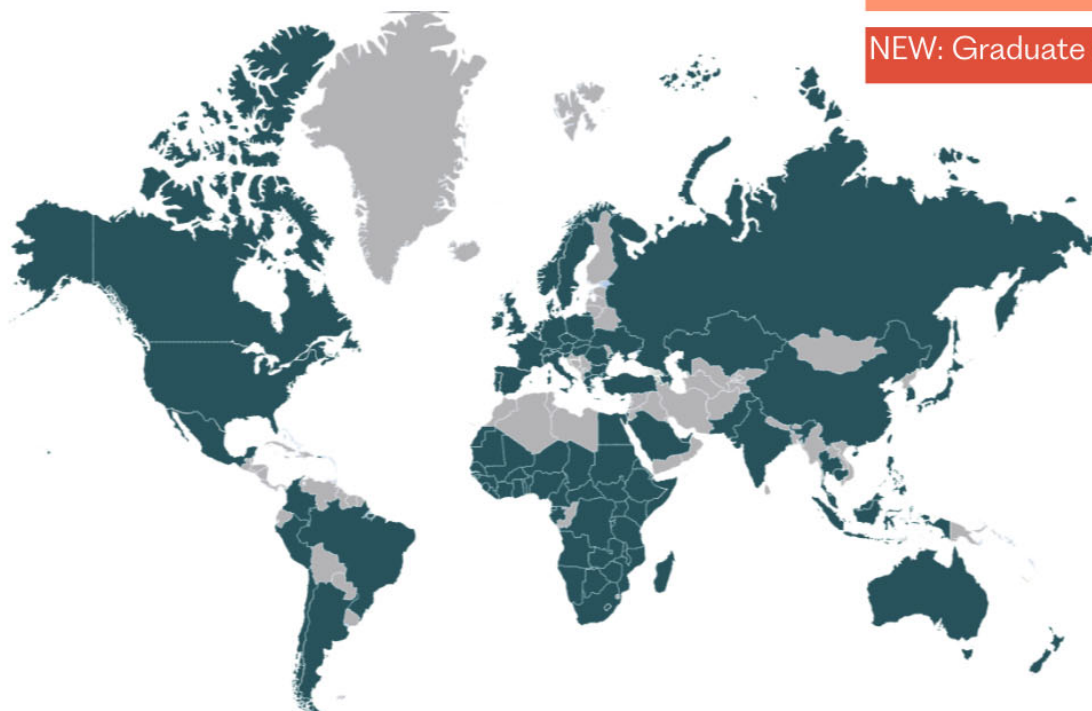
Promotion of effective and efficient use of health care resources

By advancing the use of economic approaches to support decision making



NEW: OHE Academy

NEW: Graduate School



Invited talks in 14 countries to HTA bodies, government representatives

The facilitation of decision making and awareness of health care policy issues
By encouraging debate and dissemination of relevant health economics research

10,050

Delegates reached through our events and presentations



10 lectures to 7 University postgraduate programmes



Sponsors include Astellas, Organon, Health Foundation, HORIZON

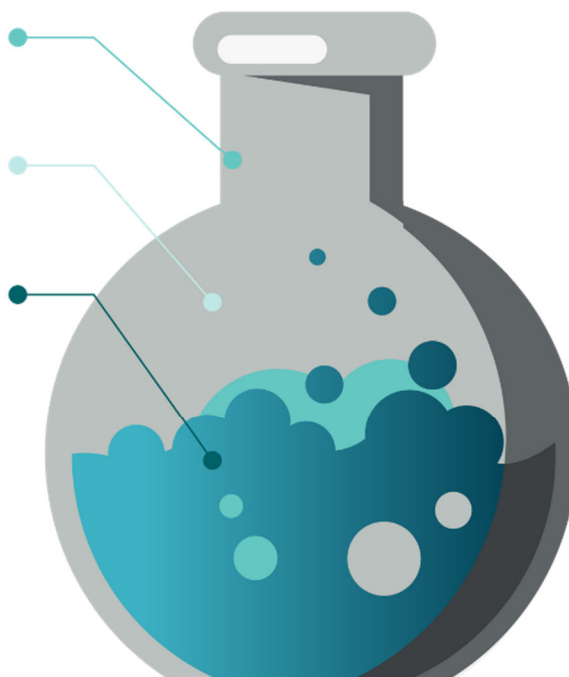


Economist Impact, ISPOR, HTAi, EuIHEA, GSDC, OECD, HESG

93 External Presentations

10 OHE & Sponsored Events

NEW forum engagement e.g. WHO, WEF, and the UN





Strategic Research Themes

In 2024, OHE's research has focused on four interlinked themes that underpin our ambition to shape smarter policies, foster innovation, and improve health every day. Good healthcare policymaking must take a broader perspective of health, ensuring that decisions are both efficient and equitable.

- Our work in climate and health looks at the climate crisis as a pressing health issue.
- Our work in prevention addresses how to transition from a sickness-based model to one rooted in preventative health.
- Our ongoing expertise in health technology assessment (HTA) considers how to balance cost with equitable access to inform robust, evidence-based decision making.
- Our research in innovative pricing and drug development looks at balancing patient access with health-system sustainability, all while incentivising research and innovation into new, life-saving therapies.

Climate & health

We address the complex intersection of climate change and health through research, events, and policy work.

Our flagship ECO-CHICA project, ending December 2025, is developing guidelines bridging environmental and health economic evaluation, while expert panels identify key climate-health challenges and barriers.

Climate & health

The climate crisis affects health in ways that are wide-ranging, unevenly distributed, and difficult to isolate. It poses deep challenges not only for service delivery but for how we define value, whose preferences we measure, and how we account for intergenerational and regional equity. Addressing the intersection of health and climate is therefore a cornerstone of OHE's work, and in 2024 we developed and hosted several Insights and Events addressing this topic.

Our largest project in these areas is [ECO-CHICA](#), funded by the Wellcome Trust and in partnership with London School of Hygiene and Tropical Medicine (LSHTM) and Shouro Dasgupta, from HTM), in collaboration with the Office of Health Economics (OHE) in London, and Dr Shouro Dasgupta from the Euro-Mediterranean Centre on Climate Change (CMCC), is scheduled to conclude in December 2025. It will have developed a set of accessible guidelines to bridge the divide between environmental economic evaluation involving health co-benefits and health economic evaluation involving environmental/sustainability concerns.

We also brought together experts across disciplines to identify [the most pressing challenges and gaps in our understanding of the climate-health crisis](#). The panel discussed the challenge of addressing climate change's impact on healthcare while reducing the sector's own environmental footprint. They focused on key barriers including overlooked mental health effects, the lack of individual agency and resource constraints among healthcare workers, and the need for comprehensive data linking healthcare practices with environmental and health outcomes.

In further outreach, OHE also attended the Global Sustainable Development Congress 2024 in Bangkok to discuss our ongoing work on health and the climate.

We also published several Insights on the intersection of sustainability and health technology assessment (HTA). We explored [potential policy options for HTA to implement](#), rooted in debates about how discounting should be conducted in the face of climate change. We also reflected on [the discussions that took place at ISPOR Europe 2023](#) and how environmental impact is factored into HTA.

Prevention

We prioritised prevention research in 2024 with four publications and our Annual Lecture.

Key research findings included adult vaccines returning up to 19x their investment, cervical cancer's £406 million preventable UK burden, and respiratory infections costing £44 billion in productivity losses - all receiving significant media coverage.

Prevention

With four publications and this year's [Annual Lecture focused on prevention](#) and related topics, OHE has contributed to global dialogue and debate on prevention and prioritised this line of research.

Our most impactful project of 2024 was research commissioned by IFPMA around the socio-economic value of adult immunisation programmes. The research found that based on a benefit-cost analysis of the same vaccines, adult vaccines can return up to 19 times their initial investment to society, when their significant benefits beyond the healthcare system are monetised. This report was covered across a range of high profile media outlets including the [Daily Telegraph](#), [STAT](#) and [Pink Sheet](#), and some high-profile paid-for opportunities including in [Politico](#) and [Economist Impact](#).

We also looked at [the socioeconomic burden of cervical cancer](#), finding the total preventable burden of cervical cancer in the UK is £406 million — based on the difference between socioeconomic costs at the current UK incidence rate and the WHO elimination target of 4 cases per 100,000 women. One of the report co-authors further discussed these findings on [The New Statesman's Politics and Culture podcast](#).

Our [research into the business cost of respiratory infections](#) was published in the winter of 2024, coinciding with the winter flu crisis that led to multiple NHS trusts declaring critical incidents. The research found that short-term respiratory infections are an underestimated drain on employees, businesses, and the economy, costing the UK economy £44 billion in productivity losses. It received media coverage in [European Medical Journal](#) and a range of HR/workplace interest press including [Workplace Wellbeing](#).

Finally, our research into [the impact of plant based diets on healthcare spending](#) was covered widely in the press, with coverage in the [Daily Mail](#), [HSI](#), and [The Independent](#).

Health Technology Assessment

We demonstrated HTA expertise through 3 reports and 4 Insights in 2024, covering patient perspectives, method evolution, and societal preferences.

Our international "Around the World in HTA" series featured Turkey, Thailand, and USA. High-profile NICE commentary generated significant media coverage, while thought leadership included op-eds and future-focused webinars.

Health Technology Assessment

OHE's ongoing expertise in Health Technology Assessment (HTA) is reflected in our publications this year, with 3 new reports and 4 Insights on this topic area.

Our commissioned research this year focused on [the patient perspective in HTA decision making](#) (commissioned and funded by Daiichi-Sankyo), [how HTA methods have evolved over time](#) (commissioned and funded by Merck Sharp & Dohme), and understanding societal preferences for priority by disease severity in England & Wales (commissioned and funded by The Association of the British Pharmaceutical Industry (ABPI)).

We continued our international outlook on HTA developments with our 'Around the World in HTA' series, focusing this year on Turkey, Thailand and the USA. Our coverage on HTA in the US was also covered in [HTAi's newsletter](#), delivered to their network of health care policy-makers, thought innovators, & leading HTA educators.

Our Insights and publications demonstrated our expertise on NICE decision making. Our 2022 Insight on NICE's severity modifier which ranks as the top result on multiple search engines — this led to us being approached for comment on NICE's decision on the breast cancer drug Enhertu by several media outlets, resulting in coverage in [Bloomberg News](#), [The Sun](#), [Mail on Sunday](#) and the [Pharmaceutical Journal](#).

OHE spokespeople continued their thought leadership in this area, with Deputy CEO Lotte Steuten co-authoring an op-ed co-in [Euractiv](#) on the impact of discounting practices on HTA. We also published an Insight commenting on [how environmental impact is factored into HTA](#), based on panel discussions at ISPOR 2023.

We also conducted a webinar with a [series of short interviews exploring what the future of HTA will look like over](#) the coming years, focusing on digital health advancements, cost-effectiveness thresholds and the overall trajectory of HTA and its challenges.

Innovative pricing & drug development

We shaped pharmaceutical policy debates through economic analysis of EU legislation reforms, drug pricing conversations, and stakeholder engagement across UK, US, and Belgian policy processes.

Our work addressed combination therapy pricing, value attribution frameworks, and drug shortages, while gaining recognition from NHS England and media coverage including BBC News.

Innovative pricing & drug development

OHE has played an active role in shaping national and international debates on pharmaceutical policy, pricing, and access. We provided timely economic analysis of major policy developments, including [our Insights on the European Commission's proposals for reformed pharmaceutical legislation](#). We also continued to contribute to conversations around drug pricing, including involvement in Voluntary Scheme for Branded Medicines, Pricing, Access and Growth (VPAG) negotiations in the UK, presentations to the Congressional Budget Office in the US, and evidence informing [two draft bills](#) on drug pricing discussed in the Committee on Health and Equal Opportunities of the Belgian House of Representatives.

OHE publications this year addressed critical challenges, including [frameworks for value-aligned pricing of combination therapies, the industry's perspective on value attribution frameworks, and the economic implications of drug shortages](#). We also convened a dedicated event on [the causes and consequences of drug shortages](#), fostering dialogue across stakeholders.

Our Insights this year examined [European incentives for innovation](#), the potential [impact of new EU pharmaceutical legislation](#), and [pricing models within the NHS](#).

OHE's research and perspectives continued to reach broad audiences through media and stakeholder engagement. Highlights included commentary for [BBC News](#) about the long-term economic impact of the weight-loss drug Wegovy, contributions to [Health Affairs](#) on the U.S. Inflation Reduction Act, and panel participation at ISPOR. Recognition of our work by NHS England and the Department of Health and Social Care underscored its policy relevance.



Project spotlights

Some projects in 2024 were particularly noteworthy in terms of the coverage and attention they received, they included:

- The socio-economic value of adult immunisations
- Latest estimates show that 20 people a day die in unrelieved pain across the UK at the end of their lives

The Socio-economic value of adult immunisations

PROJECT SPOTLIGHT

[The Socio-Economic Value of Adult Immunisation Programmes](#)

Our most impactful project of 2024 was carried out on the socio-economic value of adult immunisation programmes, funded and commissioned by IFPMA.

This project was an excellent example of collaboration between OHE and a funder working closely to play to individual strengths. Extra resources went into a detailed and coordinated dissemination plan which included a social media campaign, a policy toolkit and infographic, and a press release for global distribution. The key takeaways are outlined below.

Key Takeaways:

- Global demographic changes and health challenges are putting ever-greater pressure on healthcare systems and society more broadly. Adult immunisation programmes are a potentially powerful tool for policymakers to ease those pressures.
- This report provides evidence for adult immunisation programmes across ten countries and four vaccines showing that adult immunisation programs offset their costs multiple times through benefits to individuals, the healthcare system, and wider society.
 - Benefit-cost analysis of the same vaccines showed that adult vaccines can return up to 19 times their initial investment to society, when their significant benefits beyond the healthcare system are monetised.
 - This is the equivalent of billions of dollars in net monetary benefits to society, or more concretely, up to \$4637 for one individual's full vaccination course.
- Despite increasing recognition of the broader value of vaccination, substantial evidence gaps remain, leading to underestimation of vaccine value and risking suboptimal policy decisions.
- Governments are recommended to adopt a prevention-first mindset to help ease increasing pressures on health systems and society, with adult immunisation playing a crucial role in enabling us to live longer, healthier, and more productive lives.

The total downloads for this report were well above any other in 2024 at 5059, and it was also hosted on the IFPMA website. Alongside UK national coverage (Daily Telegraph) there was a wide range of international coverage (including STAT and Pink Sheet) and some high-profile paid-for opportunities (Politico and Economist Impact).

Latest estimates show that 20 people a day die in unrelieved pain across the UK at the end of their lives

PROJECT SPOTLIGHT

[Latest estimates show that 20 people a day die in unrelieved pain across the UK at the end of their lives](#)

To help inform the current debate on assisted dying, we updated the findings of our 2019 palliative report with the latest data.

There were heated debates, both in Parliament and in the media, that reflecting how deeply emotive and sensitive an issue this is for people on both sides of the debate. One element missing from the conversation, however, was a clear sense of the current state and scale of palliative care in the UK to inform how we talk about assisted dying.

OHE's original report, commissioned by Dignity in Dying, estimated that even if everyone received the highest possible standards of hospice-level palliative care, 6,394 people in the UK would die each year with unrelieved pain in the last 3 months of their life. That equates to 17 people dying in pain a day.

In the last five years, new data became available which allows us to update our estimate. Our new analysis shows that even with a conservative estimate, **20 people a day die in unrelieved pain across the UK**, assuming they have access to the highest standards of palliative care. In reality, out of 436,022 people with palliative care needs in 2023, **only 4.7% of palliative care patients received this 'gold standard' of care**. Therefore, the number of people in palliative care dying in unrelieved pain is likely to be significantly higher.

Key takeaways:

- A previous OHE report in 2019 estimated that 378,427 people in England needed palliative care a year.
- Our updates show that an estimated 436,022 people in England needed palliative care in 2023.
- Across the UK, an estimated 7,329 people per year — or 20 people a day — die with no pain relief in the last 3 months of their life, even if the highest levels of hospice-level care are available to patients, using conservative assumptions that provide the lowest possible estimate.
- This is a 15% increase between 2019 and 2023 in the number of people dying in completely unrelieved pain, even at the highest standards of palliative care in England.
- Irrespective of the outcome of the upcoming decisions across the UK, investment into funding high-quality end-of-life care should be a crucial component of the conversation around assisted dying in England and Wales.



Internationalisation: OHE's growing global footprint

In 2024, OHE significantly deepened its international engagement, reflecting a strategic commitment to global collaboration and impact. Building on its longstanding reputation for thought leadership in health economics and policy, OHE expanded its reach through a series of high-profile partnerships, events, and projects across key regions including the United States, South America, and the Asia-Pacific (APAC).

This year saw OHE working alongside a diverse array of international stakeholders—from academic institutions and government bodies to industry leaders and NGOs—on initiatives that address pressing global health challenges. Our presence at major international conferences, participation in regional policy dialogues, and contributions to cross-border research projects have not only amplified our voice but also enriched our perspectives.

As we continue to grow our global network, this section highlights the milestones, collaborations, and regional focus areas that are shaping OHE's internationalisation journey. From new strategic alliances to region-specific research priorities, we are proud to share how OHE is helping to shape health policy and economics on a truly global scale.

2024 Global reach



2024 Global Partnerships





Research outputs

We present our publications in three main groups: publications in external peer-reviewed journals; publications on OHE's reports published on our website (peer-reviewed by the OHE reviewing process); books and chapters; and working papers in external institutions.

Publications

External peer-reviewed journal articles, source of funding, journal impact factor, and citations (January to December 2024).

For external peer-reviewed journal articles, we provide information on the sources of financial support, number of citations, SJR indicator and ABS journal ranking.

JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF 1 DEC 2024) ¹	SJR Indicator (2023) ²	ABS JOURNAL RANKING (2021) ³
Saber, W., Bansal, A., Li, L., Scott, B. L., Sangaralingham, L. R., Thao, V., Roth, J. A., Wright, W., Steuten, L. M. G., Pidala, J. A., Mishra, A., Maziarz, R. T., Westervelt, P., McGuirk, J. P., Cutler, C., Nakamura, R., & Ramsey, S. D. (2024). Cost-effectiveness of reduced-intensity allogeneic hematopoietic cell transplantation for older patients with high-risk myelodysplastic syndrome: Analysis of BMT CTN 1102. JCO Oncology Practice, OP2300413. Advance online publication. https://doi.org/10.1200/OP.23.00413	National Heart, Lung, and Blood Institute grant R01HL126589	4	1.601	N/A
Elvidge, J., Hawksworth, C., Avşar, T. S., Zemlenyi, A., Chalkidou, A., Petrou, S., Petykó, Z., Srivastava, D., Chandra, G., Delaye, J., Denniston, A., Gomes, M., Knies, S., Nousios, P., Siirtola, P., Steuten, L., Wang, J., Dawoud, D., & CHEERS-AI Steering Group. (2024). Consolidated health economic evaluation reporting standards for interventions that use artificial intelligence (CHEERS-AI). Value in Health, 27(9), 1196–1205. https://doi.org/10.1016/j.jval.2024.05.006	N/A	8	1.507	N/A
Jofre-Bonet, M., Rossello-Roig, M., & Serra-Sastre, V. (2024). Intimate partner violence and children's health outcomes. SSM - Population Health, 25, 101611. https://doi.org/10.1016/j.ssmph.2024.101611	None	3	1.586	N/A
McElwee, F., Cole, A., Garrison Jr, L. P., & Towse, A. (2024). Federal support should not be a factor in determining pharmaceutical prices under the IRA. Health Affairs Forefront. https://www.healthaffairs.org/content/forefront/federal-support-should-not-factor-determining-pharmaceutical-prices-under-ira	Contract research (PhRMA, via Lou Garrison)	1	N/A	N/A
Paulden, M., Sampson, C., O'Mahony, J. F., Spackman, E., McCabe, C., Round, J., & Snowsill, T. (2024). Decision makers should avoid the Health Years in Total (HYT) approach: A response to Dr Basu. Value in Health. Advance online publication. https://doi.org/10.1016/j.jval.2024.04.006	n/a	1	1.507	N/A
Sampson, C., Parkin, D., & Devlin, N. (2024). Is anchoring at 'dead' a theoretical requirement for health state valuation? Health Economics. Advance online publication. https://doi.org/10.1002/hec.4863	EuroQol Research Foundation	1	1.144	3
Oliver, E., Kourouklis, D., & Jofre-Bonet, M. (2024). Do R&D tax credits impact pharmaceutical innovation? Evidence	Core funded research	0	3.219	4*

from a synthetic control approach. Research Policy, 53(8), 105053. https://doi.org/10.1016/j.respol.2024.105053					
El Banhawi, H., Bell, E., Neri, M., Brassel, S., Chowdhury, S., & Steuten, L. (2024). A structured narrative literature review of the broader value of adult immunisation programmes. Vaccines, 12(8), 852. https://doi.org/10.3390/vaccines12080852	Contract research IFPMA	0	1.201	N/A	
Hayes, H., Meacock, R., Stokes, J., & Sutton, M. (2024). The effect of local hospital waiting times on GP referrals for suspected cancer. PLOS One, 19(5), e0294061. https://doi.org/10.1371/journal.pone.0294061	Core funded research	0	0.839	N/A	
Hayes, H., Stokes, J., Sutton, M., & Meacock, R. (2024). How do hospitals respond to payment unbundling for diagnostic imaging of suspected cancer patients? Health Economics. Advance online publication. https://doi.org/10.1002/hec.4804	Core funded research	0	1.144	3	
Kommandantvold, S. A., Lemenuel-Diot, A., Skedgel, C., Pitman, R., Rouse, P., Zaraket, H., & Blanchet Zumofen, M. H. (2024). A cost-effectiveness analysis of reduced viral transmission with baloxavir marboxil versus oseltamivir or no treatment for seasonal and pandemic influenza management in the United Kingdom. Expert Review of Pharmacoeconomics & Outcomes Research. Advance online publication. https://doi.org/10.1080/14737167.2024.2365421	Internally funded project by Roche	0	0.671	N/A	
Jofre-Bonet, M., Rossello-Roig, M., & Serra-Sastre, V. (2024). Maternal labor supply and children's emotional well-being. Journal of Demographic Economics. Advance online publication. https://doi.org/10.1017/dem.2024.19	Core funded research	0	0.619	N/A	
Mott, D. J., Hitch, J., Nier, S., Pemberton-Whiteley, Z., & Skedgel, C. (2024). Patient preferences for treatment in relapsed/refractory acute leukemia in the United Kingdom: A discrete choice experiment. Patient Preference and Adherence, 18, 1243–1255. https://doi.org/10.2147/PPA.S442530	Research-grant funded	0	N/A	N/A	
Neri, M., Cubi-Molla, P., & Cookson, G. (2024). A multi-dimensional framework of valued output for primary care in England. Applied Health Economics and Health Policy. Advance online publication. https://doi.org/10.1007/s40258-024-00895-z	Research grant (the Health Foundation)	0	0.990	N/A	
Radu, P., Kumar, G., Cole, A., Fameli, A., Guthrie, M., Annemans, L., Geissler, J., Italiano, A., O'Rourke, B., Xoxi, E., & Steuten, L. (2024). Evolving assessment pathways for precision oncology medicines to improve patient access: A tumor-agnostic lens. The Oncologist. Advance online publication. https://doi.org/10.1093/oncolo/oyae060	Contract research EFPIA	0	1.991	N/A	
Skedgel, C., Mott, D. J., Elayan, S., & Cramb, A. (2024). A longer life or a quality death? A discrete choice experiment to estimate the relative importance of different aspects of end-of-life care in the United Kingdom. MDM Policy & Practice, 9(1), 23814683241252425. https://doi.org/10.1177/23814683241252425	NIHR-CLARHC / Core funded research	0	0.696	N/A	
Steuten, L., Lothgren, M., Bruce, A., Campioni, M., & Towse, A. (2024). Proposal for a general outcome-based value	Contract Research	2	1.507	N/A	

attribution framework for combination therapies. Value in Health. Advance online publication. https://doi.org/10.1016/j.jval.2024.07.019					
Henderson, N., Hodgson, S., Mulhern, B. et al. (2024). A qualitative systematic review of the impact of hearing on quality of life. Qual Life Res https://doi.org/10.1007/s11136-024-03851-5	EuroQol Research Foundation	1	1.299	N/A	
Sampson, C., & Cookson, G. (2024). Marginal cost per QALY estimates: What are they good for? Health Policy. Advance online publication. https://doi.org/10.1016/j.healthpol.2024.105036	ABPI	2	1.206	2	
Bourke, S., Skedgel, C., Martí-Gil, Y., et al. (2024). Food for thought: More explicit guidance for inclusion of caregiver perspectives in health technology assessment. International Journal of Technology Assessment in Health Care, 40(1), e77. https://pubmed.ncbi.nlm.nih.gov/39663941/		0	0.846	N/A	
Neri, M., Mewes, J. C., de Almeida, F. A., Stoychev, S., Minarovic, N., Charos, A., Shea, K. M., & Steuten, L. M. G. (2024). Impact of including productivity costs in economic analyses of vaccines for C. difficile infections and infant respiratory syncytial virus, in a UK setting. Cost effectiveness and resource allocation : C/E, 22(1), 34. https://doi.org/10.1186/s12962-024-00533-4		0	0.610	N/A	
Gordon, J., Gheorghe, M., Harrison, C., Miller, R., Dennis, J., Steuten, L., Goldenberg, S., Gandra, S., & Al-Taie, A. (2024). Estimating the Treatment and Prophylactic Economic Value of New Antimicrobials in Managing Antibiotic Resistance and Serious Infections for Common Pathogens in the USA: A Population Modelling Study. Pharmacoeconomics, 42(3), 329–341. https://doi.org/10.1007/s40273-023-01337-9		2	1.517	N/A	

Google Scholar. The number of citations for each article as of October 2024.

SCImago Journal Rank (SJR) indicator (PDF), developed by SCImago from the widely known algorithm Google PageRank™. This indicator shows the visibility of the journals contained in the Scopus® database from 1996. SJR takes into account both the number of citations received by a journal and the prestige of the journal based on where those citations come from. The latest available year of indicators is 2022.

Chartered Association of Business Schools ('ABS'), UK: journal rankings go from 4* (highest) to 1 (lowest). The latest available year of rankings is 2021.

Other external publications (non-peer-reviewed) Core, Grant, or Contract Research funded

1. Henderson, N., & Sampson, C. (2024). The impact of higher uptake of plant-based diets in England: Model-based estimates of health care resource use and health-related quality of life. MedRxiv. doi: <https://doi.org/10.1101/2023.12.26.23300536>
2. Ashton, C. (2024). How health economics is redefining climate-resilient healthcare. World Economic Forum. <https://www.weforum.org/agenda/2024/06/how-health-economics-is-redefining-climate-resilient-healthcare/>
3. Cabling, M.L., Dawney, J., Naper, M., Marciniak Nuqui, Z., Olumogba, F., Kessler, L., Cole, A., Steuten, L., Marjanovic, S. (2024) Advancing the development and use of diagnostic target product profiles for cancer https://www.cancerresearchuk.org/sites/default/files/final_report_31may2024_final.pdf
4. Steuten, L. (2024) The Role of G7 Governments in Global Efforts to Encourage Antimicrobial Development Through a Pull Incentive: Challenges and Collaboration May 2024. https://globalcoalitiononaging.com/wp-content/uploads/2024/05/GCOA_G7Governments_English_FINAL.pdf
5. Barlow J, Havenaar E, Hofer M, 2024, 2024, The UK Biopharmaceutical Sector 2024 (not peer-reviewed) https://www.imperial.ac.uk/media/imperial-college/research-centres-and-groups/centre-for-sectoral-economic-performance/Biopharmaceutical_Sector_2024_Brochure_Nov2024.pdf
6. Pinto, C., Brown, J., Hurt, C., Norton, S., Stumpf, S., Volpato, R., Cubi-Molla, P., Chowdhury, S., McCracken, L., & Bogosian, A. (2024). Acceptability and feasibility randomized controlled trial of a digital psychological support intervention for people with Parkinson's disease: trial protocol. Research Square. Preprint: <https://doi.org/10.21203/rs.3.rs-3773762%2Fv1>

Additionally, OHE published 22 insights or blogs on our website on various topics ranging from three of the series HTAs Around the World to Drug Shortages in the UK and their impact. See Insights - OHE for more detailed information.

Summary of citations over time

Number of citations	2019	2020	2021	2022	2023	2024	Total
10+	19	10	15	12	1	-	57
20+	13	5	6	8	-	-	32
50+	4	3	-	2	-	-	9
100+	-	2	-	2	-	-	4

Top 10 most cited publications since 2019

1. 1,388 Citations

Husereau, D., Drummond, M., Augustovski, F., de Bekker-Grob, E., Briggs, A. H., Carswell, C., et al as part of the CHEERS 2022 ISPOR Good Research Practices Task Force 2022., Consolidated Health Economic Evaluation Reporting Standards 2022 (CHEERS 2022) statement: updated reporting guidance for health economic evaluations. *European Journal of Health Economics*. (Epub ahead of print). DOI: [10.1007/s10198-021-01426-6](https://doi.org/10.1007/s10198-021-01426-6).

2. 278 Citations

Mateo, J., Steuten, L., Aftimos, P., André, F., Davies, M., Garralda, E., Geissler, J., Husereau, D., Martinez-Lopez, I., Normanno, N., Reis-Filho, J., Stefani, S., Thomas, D., Westphalen, B., & Voest, E. 2022. Delivering Precision Oncology to Patients with Cancer. *Nature Medicine*. DOI: [10.1038/s41591-022-01717-2](https://doi.org/10.1038/s41591-022-01717-2)

3. 169 Citations

Fenwick E, Steuten L, Knies S, Ghabri S, Basu A, Murray JF, Koffijberg HE, Strong M, Sanders Schmidler GD, Rothery C. (2020) Value of Information Analysis for Research Decisions-An Introduction: Report 1 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. *Value in Health*, Feb;23(2):139-150. doi: [10.1016/j.jval.2020.01.001](https://doi.org/10.1016/j.jval.2020.01.001). PubMed PMID: 32113617.

4. 112 Citations

Rothery C, Strong M, Koffijberg HE, Basu A, Ghabri S, Knies S, Murray JF, Sanders Schmidler GD, Steuten L, Fenwick E. (2020) Value of Information Analytical Methods: Report 2 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. *Value in Health*. Mar;23(3):277-286. doi:[10.1016/j.jval.2020.01.004](https://doi.org/10.1016/j.jval.2020.01.004). PubMed PMID: 32197720.

5. 104 Citations

Zamora, B., Maignen, F., O'Neill, P., Mestre-Ferrandiz, J. and Garau, M., 2019. Comparing access to orphan medicinal products in Europe. *Orphanet Journal of Rare Diseases*, 14(1), p.95. 10.1186/s13023-019-1078-5.

6. 85 Citations

Berdud M, Drummond M, and Towse A. (2020). Establishing a reasonable price for an orphan drug. Cost Effectiveness and Resource Allocation <https://doi.org/10.1186/s12962-020-00223-x>

7. 84 Citations

Steuten, L., Goulart, B., Meropol, N.J., Pritchard, D. and Ramsey, S.D. 2019. Cost effectiveness of multigene panel sequencing for patients with advanced non-small-cell lung cancer. *Journal of Clinical Oncology*, (3), pp. 1-10. DOI: 10.1200/CCI.19.00002.

8. 76 Citations

Wurcel, V., Cicchetti, A., Garrison, L., Kip, M.M., Koffijberg, H., Kolbe, A., Leeftang, M.M., Merlin, T., Mestre-Ferrandiz, J., Oortwijn, W. and Oosterwijk, C., Tunis, S., Zamora, B. 2019. The Value of Diagnostic Information in Personalised Healthcare: A Comprehensive Concept to Facilitate Bringing This Technology into Healthcare Systems. *Public Health Genomics*, pp.1-8.

9. 69 Citations

Sampson, C.J., Arnold R., Bryan, S., Clarke, P., Ekins, S., Hatswell, A., Hawkins, N., Langham, S., Marshall, D., Sadatsafavi, M., Sullivan, W., Wilson, E.C.F., and Wrightson, T. (2019) Transparency in decision modelling: what, why, who and how? *Pharmacoeconomics*. DOI: [10.1007/s40273-019-00819-z](https://doi.org/10.1007/s40273-019-00819-z).

10. 53 Citations

Mott DJ, Shah KK, Ramos-Goñi JM, Devlin NJ, Rivero-Arias O. (2021) Valuing EQ-5D-Y-3L Health States Using a Discrete Choice Experiment: Do Adult and Adolescent Preferences Differ? *Medical Decision Making*. DOI:10.1177/0272989X21999607

OHE peer-reviewed publications, funding, and number of downloads

PUBLICATION	Sources of financial support	Number of downloads
El Banhawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L., (2024) Socio-Economic Value of Adult Immunisation Programmes. OHE Contract Research. Available from https://www.ohe.org/publications/the-socio-economic-value-of-adult-immunisation-programmes/	Contract funded (International Federation of Pharmaceutical Manufacturers and Associations)	838
Hodgson S., Hayes H., Cubi-Molla P., Garau M. (2024) Inequalities in Dementia: Unveiling the Evidence and Forging a Path Towards Greater Understanding. OHE Contract Research. Available from https://www.ohe.org/publications/inequalities-in-dementia	Contract funded (Alzheimer's Society)	194
Radu P. et. al., 2024 (2024) How Have HTA Agencies Evolved Their Methods Over Time?. OHE Contract Research. Available from https://www.ohe.org/publications/how-have-hta-agencies-evolved-their-methods/	Contract funded (Merck Sharp & Dohme)	207
Kumar G., Bray G., Pan J., Skedgel C., Dunton K., Fonseca Santos F., Genin P., Schroefel G. (2024) Incorporating the Patient Voice in Health Technology Assessment. OHE Contract Research. Available from https://www.ohe.org/publications/patient-voice-in-hta	Contract funded (Daiichi-Sankyo)	143
Napier M., Kourouklis D., Cole A., Cookson G (2024) The Dynamics of Drug Shortages. OHE Contract Research. Available from https://www.ohe.org/publications/the-dynamic-of-drug-shortages	Contract funded (Organon Pharma)	145
Napier M., Sampson C., Cole A., Garau M. (2024) A Framework for Value-aligned Pricing of Combination Therapies. OHE Contract Research. Available from https://www.ohe.org/publications/framework-for-value-aligned-pricing-of-combination-therapies/	Contract funded (Astellas Pharma)	117
Kumar G., Bray G., Steuten L. (2024) Unlocking the Value of Combination Therapies. OHE Contract Research. Available from https://www.ohe.org/publications/unlocking-the-value-of-combination-therapies/	Contract funded (The Association of the British Pharmaceutical Industry)	68
Napier M., Berdud, M. and Cole A. (2024) The Cost of Drug Shortages. OHE Contract Research. Available from https://www.ohe.org/publications/the-cost-of-drug-shortages/	Contract funded (Organon(Organon Pharma)	86
Henderson N, Bray G, Skedgel C (2024) Individual, Health System, and Societal Impacts of Anti-seizure Medicine Use During Pregnancy. OHE Grant-Funded Research. Available from https://www.ohe.org/publications/impacts-anti-seizure-medicine-use-during-pregnancy/	Contract funded (The Association of the British Pharmaceutical Industry)	40
Henderson N, Bray G, Skedgel C (2024) Individual, Health System, and Societal Impacts of Anti-seizure Medicine Use During Pregnancy. OHE Grant-Funded Research. Available from https://www.ohe.org/publications/impacts-anti-seizure-medicine-use-during-pregnancy/	Research funded (Epilepsy Society)	40
Kumar G., Napier M., Neri M., Garau M., (2024) The Socioeconomic Burden Of Cervical Cancer in the UK: What are the benefits of achieving the WHO elimination target?. OHE Contract Research. Available from https://www.ohe.org/publications/socioeconomic-burden-of-cervical-cancer	Contract funded (Merck Sharp & Dohme)	38*

Core funded grant projects

ECONOMICS OF INNOVATION

Project	Summary	Investigators	Update on progress
Option Pricing	The use of real options in relation to pharmaceutical pricing has been promoted by the ISPOR Special Task Force on US Value Assessment Frameworks. How it can be calculated and used by payers in a way that avoids double-counting and rewards/targets investment appropriately is still being thought about. This core research project aims to move that thinking forwards via two invited editorials. The first is for <i>Value in Health</i> and will review a paper to be published. It will focus on whether payers should pay for option value. The second is for <i>Vaccine</i> . It will argue for payers being willing to add an option value to vaccine prices if this enables manufacturing capacity to be switched for use in a pandemic to be maintained.	Adrian Towse	This is now closed. There were two publications: Newall AT, Beutels P, Kis Z, Towse A, Jit M (2024). Placing a value on increased flexible vaccine manufacturing capacity for future pandemics. <i>Vaccine</i> . 2024 Mar 2:S0264-410X(23)00219-0. doi: 10.1016/j.vaccine.2024.02.065. Epub ahead of print. PMID: 36870878; PMCID: PMC9978930. Towse, A. (2022). Real Option Value: Should We Opt In or Out? Commentary. <i>Value in Health</i> Volume 25, Issue 11, 1818 – 1820 DOI: https://doi.org/10.1016/j.jval.2022.09.004
The impact of R&D tax credits on pharmaceutical innovation in the UK	<p>This project studies the impact of the Research and Development Expenditure Credit (RDEC) scheme, designed to increase support for private research and development through tax credits. The use of R&D tax credits is a well-recognised method for providing a fiscal incentive that will reduce the cost of R&D; however, the literature has struggled to properly estimate its effect on true innovation. In general, studies fail to provide estimates on meaningful innovation and focusing on R&D spending means that results are highly subject to varying efficiencies between firms.</p> <p>This research considers the treatment group to be the UK and the treatment itself to be the implementation of the RDEC in 2013. However, the problem with causal inference in this kind of study is that the counterfactual is unobservable and finding another country that can act as a suitable control may not be possible. The Synthetic Control Method (SCM), developed by Abadie and Gardeazabal (2003), will allow us to estimate the treatment effect by comparing outcomes observed in the UK to a weighted convex combination of the same outcome variables measured in other similar countries. By evaluating the effectiveness of the RDEC policy in incentivising innovation, we can help countries such as the UK evaluate its importance and therefore inform essential cost-benefit analysis. Understanding the impact of the RDEC can also help countries like the UK assess its potential use in driving innovation in specific areas of health care that need it, such as genetic research, vaccinations, or other disease areas that face scarcity in therapeutic options.</p>	Edward Oliver, Dimitrios Kourouklis Mireia Jofre-Bonet	It was presented at AHEA 2022 and published in <i>Research Policy</i> in 2024. The project is now closed.
R&D competition & diffusion of innovation in the	"The project seeks publication in a peer-reviewed journal of previous OHE Research work. We assessed the impact of (i) intellectual property protection incentives for R&D, (ii) market	Mikel Berdud, Martina Garau, Margherita Neri,	<u>Published as an OHE Research Paper.</u> Journal write-up has been completed, and the article was rejected from <i>Applied</i>

EU: the case of Hepatitis C	<p>competition, and (iii) other factors, including healthcare policies, on access to Direct Acting Antivirals (DAAs) in Europe.</p> <p>The study combined an economic framework with analyses of market shares and uptake of DAAs and interviews with relevant stakeholders of six European Countries (France, Germany, Italy, Portugal, Spain and the UK) to assess the degree and nature of market competition for DAAs between 2014Q1 and 2017Q2. The theoretical models show that current R&D incentives based on IP protection in the EU can encourage in-patent competition. The uptake analyses showed that competition within the DAA class was intense in European markets soon after the launch of the first-in-class treatment. Evidence from our interviews suggested that in-class competition improved access and uptake and provided bargaining power to country payers. IP incentives for R&D may have encouraged a high degree of in-class competition among DAAs. The in-class competition positively impacted the uptake and adoption of DAAs in the top 5 European countries.</p>	Phill O'Neill, Chris Sampson, Adrian Towse	<i>Health Economics and Health Research</i> . A resubmission is planned.
Setting out the conditions in which risk-sharing schemes improve value for money	<p>Regulators have increasingly emphasised approving potentially important treatments rapidly, notably through accelerated access schemes. As a consequence, there is a challenge for payers. Products are launched with less evidence, creating greater uncertainty about their relative effectiveness and value for money. Previous research focusing on the use of Vol approaches to conditional approval has looked only at the case for only in-research (OIR) or only with research (OWR) and not considered risk sharing as an additional option. The research question is, "when does risk-sharing improve outcomes for patients and the health system — in terms of making cost-effective treatments available when they otherwise would be delayed or not made available at all? Specifically, the results should be robust to situations in which there are differences of opinion between manufacturers and payers around the value of new technology to the health system, which are unbiased (i.e., not negotiation posturing).</p>	Adrian Towse, Liz Fenwick (Open Health)	We have a paper under review at <i>Value in Health</i> Towse A and Fenwick E. It takes two to tango. Setting out the conditions in which performance-based risk sharing arrangements work for both parties. Under review at <i>Value in Health</i> . This is a journal article version of a 2021 OHE research paper Towse, A. and Fenwick, E., 2021. It takes two to tango: when do conditional reimbursement risk-sharing schemes work for both parties? Setting out the conditions in which risk sharing schemes improve value for money.
Pharmaceutical policy and access to innovation in the United Kingdom after Brexit	<p>Brexit was presented as an opportunity to promote innovation by breaking free from the European Union regulatory framework. Since the beginning of 2021 the Medicines and Healthcare products Regulatory Agency (MHRA) has operated as the independent regulatory agency for the United Kingdom.</p> <p>This project aims to update the first published analysis into the regulatory activity of the MHRA post Brexit. The analysis of regulatory activity of the year 2021 found that the MHRA remained reliant on EU regulatory decision-making for novel medicines and there were significant regulatory delays for a small number of novel</p>	Matthias Hofer	Collaboration with Imperial College London Business School didn't progress in 2024. A new collaboration with LSE to be established.

medicines in the UK, the reasons being so far unclear. The updated analysis should cover a longer time frame and also look at access to medicines after MHRA approval.

VALUE, AFFORDABILITY, AND DECISION-MAKING

Project	Investigators	Update on progress
ICER pricing, bargaining, and Cost-Effectiveness Thresholds (CETs)	The project seeks publication in a peer-review journal of previous OHE consulting work for Roche. A novel supply and demand model of pharmaceutical markets is presented to analyse the relationship between the value of the CET and the distribution of new medicines' health and economic value between consumers (payers) and developers (life science industry). The model incorporates a bargaining process and bargaining power distributed between the payer and the developers, which impacts the distribution of the health and economic value of new medicines between the two parties. One of the paper's key findings is that, with a sufficiently large payer's bargaining power, an efficient CET value could be higher than the supply-side CET used for decision making. This result has important policy implications. For example, if market access for innovative medicines is based in HTA using CETs defined by the health system opportunity costs, there would be circumstances under which some cost-effective (in the long run) medicines would not be granted. This would result in reimbursement, and incentives for investing in future innovation would be undermined. This would produce inefficient resource allocation in the present, leading to not optimal innovation production in the future.	Mikel Berdud, Adrian Towse Completed. Peer review publication: Berdud, M., Ferraro, J., & Towse, A. (2024). A theory on ICER pricing and optimal levels of cost-effectiveness thresholds: a bargaining approach. <i>Frontiers in Health Services</i> , 3.
Value of life and health	This paper follows up on a research project with Amgen and will be submitted for publication in 2021. Government departments regularly monetise the value of a life for the purposes of informing resource allocation. In many countries, guidance documents set out the manner in which economic evaluation should be conducted, often specifying the precise values to be used for different impacts. However, we find different values of life and health are used in analyses by departments despite commonality in outcomes, giving rise to potential inconsistencies in decision-making and considering trade-offs within a broader public sector spending budget. Our research intends to provide some evidence to better inform the political process and raise a number of important issues on assessing the value of public expenditure across different sectors. Our targeted literature review aimed to identify thresholds, explicitly or implicitly, as observed in government-related publications, which we understand to represent the government's willingness to pay for health gain.	Patricia Cubi-Molla, Martina Garau, David Mott, Nadine Henderson The paper received a reject and resubmit from <i>Cost Effectiveness and Resource Allocation</i> , resubmitted in November 2024.

Defining Affordability	The objectives of this project are to Identify how 'affordability' in healthcare has been defined, described and implemented in the theoretical and empirical literature and in the UK policy debate. Propose a unified definition of affordability across different levels of healthcare decision-making and Identify possible ways to improve efficiency and consistency in how health systems handle affordability concerns.	Gayathri Kumar, Patricia Cubi-Molla, Martina Garau, Gayathri Kumar, Matthew Napier, Phill O'Neill, Chris Sampson, George Bray	paused.
ISPOR Task Force: Antimicrobial resistance (AMR)	The objective is to describe and further develop emerging good practices for value assessment of antimicrobials, including (but not limited to) in the context of a global pull incentive. The guide will improve estimations of the significant and multifaceted wider value offered by new antimicrobials, beyond that which has routinely been captured in value assessment to date. In doing so, the guide will also be relevant to other technologies to tackle AMR, such as diagnostics, which face several of the same challenges and offer a similar value profile to new antibiotics. ¹ It will provide overarching recommendations on the approach(es) that should be taken and the criteria that should be considered when designing and conducting value assessment of new antibiotics and related technologies. ² It will also explore the implications of full quantitative assessment versus more pragmatic scoring approaches, as have been proposed in some jurisdictions (NHS England, 2024). Appropriate value assessment, as supported by the proposed guide to emerging good practices, will in turn support the implementation of effective pull incentives for the development of much-needed new antibiotics.	Grace Hampson	The proposal was submitted to ISPOR and suggestions for revisions were received
Around the world in HTAs blog series	In this Insights series, Around the World in HTAs, we shed light on HTA around the world. A general overview of the health system in the country is given, followed by how health technologies are assessed. Then some of the main challenges of the system are introduced and next steps for the future are discussed. Each blog involves a collaboration with an external author/s	Gayathri Kumar, Patricia Cubi-Molla, Martina Garau, Gayathri Kumar, Matthew Napier, Phill O'Neill, Chris Sampson, George Bray	In 2024, 3 additional HTAs Around the World blogs were published.

POLICY, ORGANISATION, AND INCENTIVES IN HEALTH SYSTEMS

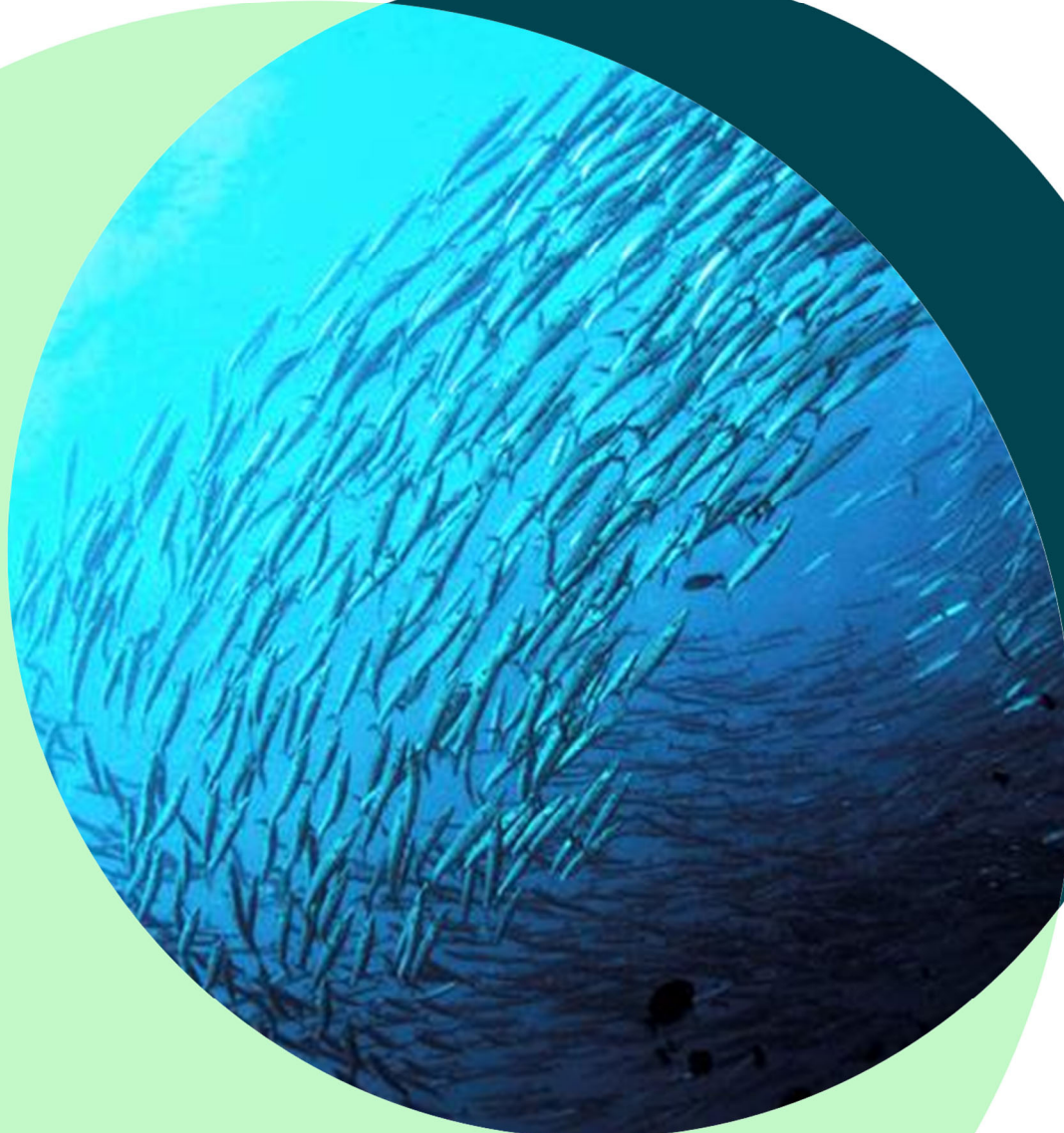
Project	Summary	Investigators	Update on progress
Primary Care Valued Output	This project aims to revise and resubmit a manuscript summarising the development of a framework to measure the valued output of primary care in England. This manuscript represents the second contribution of the Health Foundation-funded Efficiency Research Programme grant.	Margherita Neri, Patricia Cubi-Molla, Graham Cookson	Published on <i>Applied Health Economics and Health Policy</i> , 2024.
The Effect of Distance on Accident and Emergency Department Demand (new 2022)	When individuals choose to attend a hospital accident and emergency department (AED), they must incur both the time and financial costs of travel, which are both likely to increase with distance. The aim of this research is to quantify the relationship between travel distance and emergency department demand using area-level regression analysis. This research will also explore the extent to which the role distance travelled plays in the decision to attend an AED is dependent on the severity of the individual's condition. This work builds upon research conducted by Sian Besley for her MSc Health Economics dissertation and the findings of this project will be submitted to a health economics journal.	Sian Besley	Sian is awaiting final analysis results tables from her external co-authors. Once the final tables are available these will be added to the manuscript draft which is near completion.
GP demand response to waiting times for suspected cancer patients	Reducing waiting times is a priority in many public health systems. Efforts of healthcare providers to shorten waiting times may be negated if they simultaneously induce increases in demand. The existing health economics literature on the demand response to waiting times focuses on elective or non-urgent care. This study adds to this literature by exploring this relationship for urgent diagnosis of suspected cancer. Early detection of cancer is a key policy concern in the UK.	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	The paper is now published in the <i>European Journal of Health Economics</i>
The effects of payment unbundling on the utilisation of diagnostic imaging scans for suspected cancer patients	The overall aim of this study is to examine whether changes in the way that a hospital is reimbursed for diagnostic testing affects utilisation of tests for suspected cancer patients. This study examines a policy reform to the way that hospitals were reimbursed for diagnostic imaging scans, wherein a fee-for-service element was separated from the DRG-based system for hospital reimbursement for outpatient scans, also known as payment unbundling. This paper examines whether payment unbundling affected provider utilisation of scans, and conducts further analysis to ascertain whether the recorded effects represent a real change in the delivery of scans or a change in recording of scans.	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	Published in <i>Health Economics</i>
The effect of local hospital waiting times on GP referrals for suspected cancer	Reducing waiting times is a major policy objective in publicly-funded healthcare systems. However, reductions in waiting times can produce a demand response, which may offset increases in capacity. We used annual counts of referrals from all 6,667 general practices to all 185 hospital Trusts in England between April 2012 and March 2018. Using a practice-level measure of local hospital	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	Published in <i>PLOS ONE</i>

waiting times based on breaches of the two-week maximum waiting time target, we examined the relationship between waiting times and urgent GP referrals for suspected cancer. To identify the sources of variation (between practices or over time) that may drive this relationship, we estimated this using three regression models: pooled linear regression, a between-practice estimator, and a within-practice estimator.

Labour productivity and efficiency of general practices in England	This paper provides new evidence on labour productivity determinants and efficiency variables of general practices. The analysis used a longitudinal dataset of general practice-level, quarterly observations between 2018 and 2021, on a sample of 316 general practices in England. We estimated a general practice production model using stochastic frontier analysis to evaluate the marginal productivities of general practitioners (GPs) and nurses with respect to the volume of face-to-face, remote and total consultations delivered; the substitution and complementarity between these roles; and the technical efficiency of general practices. The aim of this project is to complete a manuscript for submission to The European Journal of Health Economics.	Margherita Neri, Graham Cookson, (Eugenio Zucchelli, Universita autonoma de Madrid, Bruce Hollingsworth, University of Lancaster)	Updating the paper for resubmission
Development of a synthetic index of primary care output in England: a feasibility study	In this project we explore potential methodologies for and the feasibility of creating a synthetic index aggregating the indicators of valued output, developed as part of an OHE research grant funded by the Health Foundation on primary care efficiency. This index will capture the outcome produced by primary care, with the aim of making the framework developed in our project available for actual use by researchers or policymakers. The aim of this project is to complete a manuscript for submission to Applied Health Economics and Health Policy.	Patricia Cubi-Molla Margherita Neri Graham Cookson	Completing the paper for journal submission
Socioeconomic and demographic determinants of the double burden of malnutrition among mother-child pairs in Nigeria: overweight mothers and stunted children	Nigeria has historically had a high burden of chronic undernutrition, but overweight and obesity rates are increasing. This phenomenon, called the double burden of malnutrition (DBM), is increasingly observed in low- and middle-income countries. At the household level the DBM can manifest as mother-child DBM (MCDBM). This study aims to address the research gaps by exploring the distribution of and risk factors for household-level DBM in Nigeria at the national level. Specifically, study objectives are to: (1) estimate the prevalence of MCDBM and its' components (child stunting and maternal overweight/obesity); (2) describe the percentage distribution of MCDBM and its' components according to socioeconomic and demographic factors; and (3) investigate the socioeconomic and demographic determinants of MCDBM in Nigeria.	Hania El Banhawi, (Neha Batura, University College London, Rolando Leiva-Granados, University College London)	Imputing missing data for robustness and revising text for journal submission

MEASURING AND VALUING OUTCOMES

Project	Summary	Investigators	Update on progress
Assessing the quality of life of carers of patients with cystic fibrosis manuscript	This project's aim is to (modify and) publish the WIP manuscript for the CF Carer QOL project completed in 2020, contributing to the (sparse) evidence base of carer QOL for CF carers in the UK.	David Mott, Sulayman Chowdhury	The manuscript has been submitted to Quality of Life Research, still under review, decision to be made very soon early 2025



Engagement & dissemination

The OHE run an array of educational virtual and face to face events with the new addition of hybrid events this year.

These events include specialised webinars, workshops, parliamentary launches, and an annual lecture. This section provides an update on all the OHE events held over 2024:

Events

Webinars

1. On January 31st, OHE streamed the 2023 Insights and Reflections webinar live to 373 registrants. The webinar explored which OHE research trends had the biggest impact in the previous year and discussed which emerging issues were identified for 2024. Key themes were prevention, sustainability, innovative outcome measures and key policy reforms.
2. 'The Future of NICE in a changing HTA Landscape' webinar took place on March 27 and featured a series of short interviews capturing the most pressing issues and advancements in HTA. There were 491 registrations.
3. On the 4th of September OHE led a webinar titled 'Green Healthcare: Are We Asking the Right Questions', which had 197 registrations. The webinar explored the pressing need for the healthcare sector to address its impact on climate change whilst balancing ever-growing financial constraints.

Sponsored Webinars

1. OHE led a Takeda sponsored webinar titled 'Efficiency and Labour Productivity of Primary Care in England' on April 23rd. The webinar provided an outlook on the labour productivity and efficiency patterns of general practices in England and proposed how to improve measurement of efficiency. There were 253 registrations.
2. Organon commissioned a webinar titled 'Drug Shortages: What are the causes, consequences and pathways to a solution?' on the 24th of September. The panel discussed the range of international government policy measures to secure sustainable and resilient medicine supply. There were 284 registrations.

Roundtables

1. On the 19th of July, OHE led an advisory board on the macroeconomic benefits of Covid-19 vaccines. There were 12 attendees.
2. On the 8th of August, OHE ran a roundtable in Brazil to gather country- specific insights to analyse and communicate the benefits of optimal HIV prevention in Brazil for government decision making. There were 20 participants.
3. On the 28th November 2024, OHE convened an expert group comprised of HTA experts from Asian-Pacific countries and subject matter experts on the broader value of medicines for the ongoing BRAVER project. The meeting was virtual and had 24 participants in total. The BRAVER project aims to identify opportunities and recommendations for the inclusion of broader value elements, including societal perspective, into HTA guidelines and decision making within the Asia-Pacific region. The expected outcomes include a whitepaper report by OHE to be published in Q1 2025.

OHE external events

1. On the 23rd January, OHE highlighted their recommendations from the report: 'The Individual, Health System, and Societal Impacts of Anti-Seizure Medicine Use During Pregnancy' in parliament. The report launch was convened alongside the Epilepsy Society and was supported by Caroline Nokes. Cross-party MPs (including the Minister for Disabled People), patient advocates, academics, media and industry convened in the House of Commons' Pavilion.
2. On the 24th of January, OHE attended a parliamentary event to coincide with Cervical Cancer Prevention Week. OHE presented the findings from the report: 'The Socioeconomic Burden of

Cervical Cancer in the UK: what are the benefits of achieving the WHO elimination target?'. OHE shared the platform with the Secretary of State for Health.

3. On June 12th, OHE attended the Global Sustainable Development Congress, convened by The Times Higher Education in Thailand. OHE led a panel titled 'Charting a Healthy Future: Health, climate, and the SDGs'. There were 75 live attendees.
4. "On the 8th of July, OHE spoke at a parliamentary event in Ireland, showcasing the findings from the report, 'The Value of Adult Vaccination in Ireland'".
5. 2024 Annual Lecture: On the 8th of October, OHE brought Professor Andrew J Scott to the stage to give a talk titled 'The Preventive Health Revolution: Live Longer, Live Better'. The lecture re-evaluated prominent perceptions of ageing and argues for the need to focus on a longevity society. 180 registrants attended the event, held at the prestigious One Birdcage Walk Lecture Hall. The lecture was followed by a drinks and networking reception in the Marble Gallery.
6. On 18th November in Barcelona, OHE participated in a roundtable convened by AstraZeneca. The Access to Innovative Medicines in Cancer (AIMC) initiative roundtable was on 'Improving Timely Access to Cancer Therapies: Addressing Uncertainty in Value Assessments'.

Brown-bag lunch seminars

Finally, we also hosted four different brown-bag lunch seminars:

1. The relative value of health gains by age)- Ashwini De Silva
2. C Health Inequalities: Under-treated Conditions and Unwarranted Treatment Variations - Collete Whitelegg
3. Severity Priority Setting in Norway - Dr Mathias Barra
4. The role of gamification in combatting vaccine hesitancy and misinformation: evidence from a randomised controlled trial. - Sayuri Rentschler.

Presentations

Presentation Detail

- 1** Date: January 11, 2024
Presenter: Mireia Jofre-Bonet
Event: HESG Winter 2024
Location: Exeter
Presentation title: How Does Unexpected Demand Affect Queue Prioritisation In Emergency Care?
What was your presentation about? I discussed a paper that analyses how unexpected demand shifts in Emergency Departments in England affect prioritisation of patients and how these changes might affect differently protected characteristics of patients (age, biological sex at birth, etc.). The study uses the Hospital Episodes Survey on patients visiting Emergency Departments between April 2017 and March 2018.
How many people were in the audience: 30
Authors: I. Francetic, R. Meacock, L. Siciliani, and M. Sutton

- 2** Date: 12th January 2024
Presenter: Chris Sampson
Event: HESG winter 2024
Location: Exeter
Presentation title: Discussion of 'Mobilising health economics research: priorities for action' by Rebecca Kandiyali
What was your presentation about? NA
How many people were in the audience (approx. number): 60
Authors: NA

- 3** Date: 21st January 2024
Presenter: Amanda Cole
Event: Podcast
What was your presentation about?
In this podcast episode produced by The Evidence Base*, Amanda Cole, Emily Reuben OBE, Karen Facey and Matt Hickey discussed the growing need for managed-access agreements in the assessment and reimbursement of pharmaceuticals. Amanda shared insights from research conducted in collaboration with RAND Europe for Cancer Research UK (CRUK) on outcome-based payment, which aims to align payment with patient value, address decision uncertainty, and allow payment only when the medicine works as intended.

- 4** Date: 23rd January 2024
Presenter Nadine Henderson
Event What is the cost of a disability? (Epilepsy Society)
Location Thames Pavilion, Houses of Parliament, Westminster
Presentation Title Overview of OHE report "Individual, Health System, and Societal Impacts of Anti-seizure Medicines Use During Pregnancy"
What was your presentation about?
Prevention remains at the heart of our mission as we navigate through these critical issues. The insights presented at this event highlighted the multifaceted benefits of proactively addressing health challenges.
How many people were in the audience: 50
Nadine Henderson, George Bray, Chris Skedgel

- 5** Date: 24th January 2024
Presenter: Gayathri Kumar
Event: Parliamentary event hosted by MSD and Evoke Incisive; sponsored by Jess Phillips MP and opening speech by Victoria Atkins MP, Secretary of State for Health

Location: Houses of Parliament

Presentation title: The socioeconomic benefits of eliminating cervical cancer in the UK

What was your presentation about? Key findings from the OHE report on the socioeconomic benefits of eliminating cervical cancer in the UK. The presentation outlined OHE's research approach, the headline results and recommendations for accelerating the path to elimination.

How many people were in the audience (approx. number): 50

Authors: Gayathri Kumar, Matthew Napier, Margherita Neri, Martina Garau

6

Date: 31st January 2024

Presenter: Margherita Neri

Event: Team Meeting of the Health Foundation REAL centre

Location: online

Presentation title: Efficiency and Labour Productivity of Primary Care in England

What was your presentation about? Presentation on the findings of an econometric analysis about the labour productivity and efficiency of general practices in England.

How many people were in the audience (approx. number): 25

Authors: Margherita Neri, Graham Cookson, Eugenio Zucchelli, Bruce Hollingsworth

7

Date: 12th February 2024

Presenter: Amanda Cole

Event: Guest Lecture for UCL's MBA in Health programme

Location: UCL, Marshgate East Campus

Presentation title: Adapting how we pay for innovative medicines in the life sciences industry.

What was the presentation about: Presentation on why we may need to change the way we pay, to adapt to the promise and challenge of new innovation in treatments. The presentation focused on two examples - the cancer drugs fund / innovative medicines fund and outcome-based payment - and described the role of real-world data in these envisioned solutions.

How many people were in the audience (approx. number): 40

Authors: Amanda Cole

8

Date: 16th February 2024

Presenter: Lotte Steuten,

Event Roundtable: Virtual presentation

Presentation title "Discounting Practices in Public Decision-Making: Is the system fit For purpose?"

What was the presentation about?

The Case of cost-effectiveness analyses of Gene Therapies for Inherited Eye Disease Topic: discounting and gene therapies

How many people were in the audience (approx. number): 100

Authors: Lotte Steuten

9

Presenter Sian Besley,

Date: 17th February 2024

Event: International Conference on Duchenne and Becker Muscular Dystrophy

Location: Rome, Italy

Presentation title: The Race to Improve Assessment of Gene Therapies and Facilitate Patient Access

What was your presentation about? Our poster aimed to inform patients, their families, clinicians and other researchers about the challenges of HTA of gene therapies and provided our recommendations for overcoming these challenges. The poster also demonstrated whether 9 European countries, Australia and Canada were achieving these recommendations and discussed examples of best practice.

How many people were in the audience (approx. number):

Authors: Sian Besley, Nadine Henderson, Matthew Napier, Amanda Cole and Grace Hampson (OHE) Lauren Diamond, Safiyya Gassman, David Fortier, Ruth Kim (Pfizer, Inc).

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- 10** Presenter Graham Cookson
Date: 21st February
Event: Economist Thought Leadership Working Group/DLA Piper
Location: Washington
Presentation title: Evidence: Market Size and Investment in R&D, Working Group
What was your presentation about
Graham was invited by DLA Piper to join alongside a group of economists whose work already does, or has the potential to, affect drug pricing policy in the U.S. The February meeting was a continuation of the October 2023 webinar focusing on the
the Inflation Reduction Act "Maximum Fair Price" provision and evidence that could be used to inform future changes to the law or new proposals to expand price controls. The working group discussed a draft report that they had co-authored and discussed need areas of research and possible grant programs to apply to
How many people were in the audience (approx. number 50)
-
- 11** Presenter: Graham Cookson
Event Date: 21st February 2024
Location: Washington
Event We Work For Health CBO Roundtable Discussion
What was the event about
We Work For Health (WWFH) convened a roundtable discussion in response to the Congressional Budget Office (CBO) post from December 2023. The roundtable explored the impacts of policy decisions have on the biopharmaceutical industry as well as ultimate patient outcomes and discussed opportunities to help inform CBO as they review future policies under consideration.
How many people were in the audience (approx. number 50)
-
- 12** Presenter: Graham Cookson
Event Date: 27th February
Location London
Event: Association of British Insurers Annual Conference
Presentation title: "Invested in people and planet - Investing in healthy lives."
Graham joined as a speaker at the Association of British Insurers Annual Conference. The panel discussed how Healthy life expectancy has increased, but not as much as life expectancy. The talk explored the socio-economic factors, behavioural aspects, and their complex interactions leading to health inequalities. Graham focused on the changes in healthy life expectancy and health inequality. The presentation focused on the benefits of investing in prevention-based research based on OHE's 'Reimagining Prevention for a Healthier, More Prosperous Society' research.
How many people were in the audience (200)
-
- 13** Date: 2nd March 2024
Presenter: Mireia Jofre-Bonet
Event: Warwick Women in Economics Society Conference - International Women's Day
Location: University of Warwick
Presentation title: Reflections on a career in Health Economics
What was your presentation about? About my career in economics as a woman and introduction to health economics
How many people were in the audience (approx. number) 75
Authors: Mireia Jofre-Bonet
-
- 14** Presenter: Lotte Steuten
Date: 12th March 2024
Event: World Evidence, Pricing and Access Congress
Location: Amsterdam
Presentation title: 'Novel payment models: is this where HTA and VBHC "meet in the middle"?'
The session will cover the importance of implementing novel payment models to balance value, affordability and innovation of care. Lotte will address the key challenges associated with implementing these models in practice and highlight how a shift towards value-based healthcare can help overcome these challenges.
How many people were in the audience (30)
-

- 15 Presenter: Martina Garau
Date: 13th March 2024
Event: World Evidence, Pricing and Access Congress
Location: Amsterdam

Presentation title: NICE enough? Do NICE decision outcomes impact international HTA decision-making?
What was your presentation about: a study showing how NICE guidance and its supporting evidence have an impact on HTA decision-making in countries beyond the UK.
How many people were in the audience (30)
Authors: Henderson N., Brassel S., O'Neill P., Allen R., Largeron N., Garau M.
-
- 16 Date: 14th March 2024
Presenter: Mikel Berdud
Event: Lecture at MSc Health Economics programme at City, University of London
Location: City university of London, London, UK
Presentation title: Economics of Pharmaceutical Markets
What was your presentation about? About the R&D of new medicines' process and cost, market failures characterising the pharmaceutical markets, mechanisms to fix market failures and incentives for innovation.
How many people were in the audience (20)
Authors: Mikel Berdud
-
- 17 Presenter: Graham Cookson
Date: 20th March 2024
Location: Washington

Event: Paths to Progress: Understanding Policy's Broad Impact on US Leadership in Biopharma
Presentation title: We Work For Health Paths to Progress: Understanding Policy's Broader Impact on US Leadership in BioPharma
Graham was invited to join a moderated discussion in Washington exploring the impact policy decisions have on biopharmaceutical industry and opportunities to help inform the congressional budget office (CBO) as it reviews future legislation. Speakers include Douh Holtz-Eakin (President of American Action Forum) and former CBO Director; Duane Schulthess (CEO of vital Transformation); Ken Thorpe (Professor and the Department of Health Policy and Management at Emory University)

How many people were in the audience (approx. number 50)
-
- 18 Date: 21st March 2024
Presenters: Amanda Cole, Matthis Hofer, Helen Hayes, George Bray, Sulayman Chowdhury
Event: University of Southern California Doctoral Student Delegation visit to OHE
Location: OHE offices, London
Presentation title: Introduction to OHE; Reimagining Prevention; Combating AMR; The Carer Qaly Trap; Discounting: what can we learn from environmental economics?
What was your presentation about? A showcase of our work to a delegation of 12 USC doctoral students and faculty members from the program Regulatory Sciences in Europe and the Americas.
How many people were in the audience (approx. number) 12
Authors: as above.
-
- 19 Date: 27th March 2024
Presenter: Charlotte Ashton
Event: Clinton Health Initiative Climate x Health Seminar Location: Online
Presentation title: Change Initiative: Environmental Sustainability and the Global Healthcare Lifecycle
Presentation focused on the Initiative and our new membership of the Clinton Health Initiative Group
How many people were in the audience (approx. number): 75
-
- 20 Date 16th April 2024
Presenter: Martina Garau
Location Brussels
Event Economist Impact's 2nd Cell & Gene Therapy Summit
Presentation Title
The talk was around the need for innovative payment models to ensure access to CGTs

How many people were in the audience (approx. number): around 80

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- 21** Date 16th April 2024
 Presenter: Martina Garau
 Location Brussels
 Event Economist Impact's 2nd Cell & Gene Therapy Summit
 Presentation Title 'From theory to practice: the market impact of HTA legislation'
 Martina moderated the session and provided an introduction on explain key concepts (such as JCA and PICO) and set up the access problem that many ATMPs face in Europe (i.e. wide variation in access among countries and evidence availability at launch vs HTA agencies' evidence requirements).
 How many people were in the audience:(approx. number) 80
-
- 22** Date: 16th April 2024
 Presenter: Nadine Henderson
 Event: Cell & Gene Collective's Patient Voice Summit
 Location: Broadway House, Westminster, London
 "Panel 2: Improving data collection to ensure cell and gene therapies deliver for patients"
 Discussed the necessity of capturing long-term patient-relevant data, the involvement of patient organisation in developing standardised disease registries and the importance of collaboration and education in data collection
 How many people were in the audience: (approx. number) 50
-
- 23** Date: 19th April 2024
 Presenter: Simon Brassel
 Event: Economics of Longevity: Challenges and Opportunities
 Location: Washington D.C.. UN Foundation
 Presentation title: Socio-economic value of adult immunisation programs
 What was your presentation about? I presented the results from our related project as a contribution to High-level event alongside the G20 Finance Minister's Meeting and World Bank Group and IMF Spring Meetings in Washington DC, USA.
 How many people were in the audience (approx. number)15
 Authors: El Bahawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L.
-
- 24** Date: 22nd April 2024
 Presenter: Grace Hampson
 Event World Federation of Hemophilia (WFH) Congress
 Presentation : New Horizons: The Value of Continued Innovation in Hemophilia
 Grace lead the discussion at Pfizer's satellite symposium on 'New Horizons: The value of continued innovation in hemophilia' panel.
 Speakers: moderated by Grace Hampson, Meryem Nimour, Daniel-Anibal García Diego, Cedric HERMANS MD PhD FRCP (Lon,Edin), Lou Garrison and Malcolm Qualie
 This session focused on the recent progress, identifying remaining unmet needs, and exploring the next steps for innovation in this critical space.
 How many people were in the audience (approx. number) 50
-
- 25** Date: 22nd April 2024
 Presenter: Mikel Berdud
 Event: II HI-PRIX Consortium Meeting
 Location: Hamburg, Germany
 Presentation title: Impact of innovative payment schemes on long-term competition in health technology markets, in particular the pharmaceutical market
 What was your presentation about? About research methodology for a project assessing the impact of Innovative Payment Models on Long-term competition in pharmaceutical markets
 How many people were in the audience (approx. number 30)
 Authors: Mikel Berdud, Amanda Cole, Mireia Jofre-Bonet
-
- 26** Date: 23rd April 2024
 Presenter: Mikel Berdud
 Event: II HI-PRIX Consortium Meeting
-

Location: Hamburg, Germany
Presentation title: Mapping of payment and pricing schemes for health innovation in the EU: implementation, barriers and enablers
What was your presentation about? Preliminary results of research on the costs and benefits, and the barriers and enablers for Innovative Payment Models implementation
How many people were in the audience (approx. number) 30
Authors: Mikel Berdud, Amanda Cole, Mireia Jofre-Bonet

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- 27 Date: 24th April 2024
Presenter — Lotte Steuten
Event: NHS Confederation —The Economic Benefit of Vaccines
Presentation Title: Are Vaccinations the shot in the arm the economy and health service need?
Tune in to the discussion on the broader impact of vaccinations beyond public health on the latest episode of Hosted by Matthew Taylor, this episode features Prof. Lotte Steuten, PhD and Christopher Thomas from the IPPR.
Find out more about the economic and societal benefits of vaccinations, including return on investment, elective recovery, presenteeism, and more.
How many people were in the audience (unknown)
-
- 28 Date: 30th April 2024
Presenter: Chris Sampson
Event: NICE Technical Forum
Location: Online
Presentation title: The future of the QALY: replacement or revision?
What was your presentation about?
The Quality-Adjusted Life Year (QALY) metric, pivotal in health care decision-making, faces increasing scrutiny due to methodological criticisms and anti-rationing lobbying efforts. This Technical Forum will first explore various proposed alternatives to the QALY, such as Health Years in Total (HYT) and the Equal Value of Life Years Gained (evLYG). We will assess the suitability of these metrics as replacements for the QALY. Second, the session will address an important flaw in current approaches to the estimation of QALYs—specifically, the challenges in valuing 'dead' states—and argue for a fundamental revision to the interpretation of QALYs. The discussion will underscore the irreplaceability of QALYs, while advocating for continuous methodological revisions to the estimation of QALYs, refinement of their interpretation, and clarity on their role in decision-making.
How many people were in the audience (approx. number)70
Authors: Chris Sampson
-
- 29 Date: 1st May 2024
Presenter: Patricia Cubi-Molla
Event: Lecture as part of the module "Pharma and Economic Evaluation", for MSc in Health Management (City University of London)
Location: online
Presentation title: Measuring Health Outcomes
What was your presentation about? Basic introduction to health outcome measurement as part of the HTA in England
How many people were in the audience (approx. number): 55
Authors: Patricia Cubi-Molla. Module leader: Charitini Stavropoulou
-
- 30 Date: 6th May 2024
Presenter: Tori Dawer (Mireia Jofre-Bonet, Alistair McGuire, Josh Roth, Sean Sullivan)
Event: ISPOR USA 2024
Location: Atlanta
Presentation title: A Targeted Literature Review to Identify the Dimensions of Sustainable Global Biosimilars Markets
What was your presentation about? How the entry of biosimilars in the USA pharmaceutical market have affected prices of both biosimilars and originator products
How many people were in the audience (approx. number 35)
Authors: Tori Dawer (Mireia Jofre-Bonet, Alistair McGuire, Josh Roth, Sean Sullivan)
-
- 31 Date: 7th May 2024
Presenter: Amanda Cole
Event: ISPOR International 2024
Location: Atlanta
Presentation title: Value Assessment and Reimbursement of Early Treatment for Prevention of Chronic Progressive Diseases: Are Traditional Approaches Up to the Task?
What was your presentation about? I described the challenges from a reimbursement perspective, drawing on examples from Alzheimer's and gene therapies, and demonstrating the role for innovative and outcome-based payment models to address uncertainty and manage budget impact.
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Issue Panel presenters: Will Herring, Amanda Cole, Chuck Phelps, Boshen Jiao.
How many people were in the audience (approx. number) 1,000

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- 32 Date: 7th May 2024
Presenter: Amanda Cole
Event: ISPOR International 2024
Location: Atlanta
Presentation title: How Elastic is Biopharmaceutical Innovation With Respect to Expected Reward? What Is Missing From Existing Literature on Elasticity of Innovation?
What was your presentation about? I present a select set of existing empirical estimates of the elasticity of innovation from the literature and described the strengths and weaknesses of the Congressional Budget Office (CBO) forecasts of the impact of policies that curb biopharmaceutical revenue (e.g. the Inflation Reduction Act) on innovation.
Issue Panel presenters: Gunnar Esiason, Amanda Cole, Darius Lakdawalla, Peter Kolchinsky
How many people were in the audience (approx. number) 1,000
-
- 33 Date: 7th May 2024
Presenter: Matthias Hofer
Event: ISPOR International 2024
Location: Atlanta
Presentation title:
What was the presentation about: During the podium session starting at 13:45 EDT on 7 May, Matthias Hofer presented the analysis of the novel antimicrobial subscription scheme in the UK and shared the answers to question 'Are proposals for a scheme to stimulate investment in critically needed new antimicrobials fit for purpose?'.
How many people were in the audience? (approx. number) 60-70
-
- 34 Date: 15th May 2024
Presenter Nadine Henderson
Event Title: Gesundheit Österreich GmbH / Austrian National Public Health Institute webinar: Greener Pharmaceuticals.
Presentation title: "The role of pharmaceuticals in achieving net zero: greener pharmaceuticals in the UK"
An overview of greener pharmaceuticals and health system from the UK perspective, presenting parts of the "Supporting the Era of Green Pharmaceuticals" OHE Report.
How many people were in the audience (approx. number) 50
-
- 35 Date: 24th May 2024
Presenter Chris Skedgel
Location : ,Philippine International Convention Center, Manila
Event: ASPIRE24, 23-26 May
Presentation Title: Unlocking the Value of Fertility Medicines Using Health Economic Studies' panel
Chris will take part in the company symposium 1 by Merck discussing 'Unlocking the Value of Fertility Medicines Using Health Economic Studies'.
He will describe how "value" is assessed in fertility treatment and provide an overview of the evidence around the relative value of different therapies.
Speakers: chaired by Romerico Torres, David Humphreys and Michael Costello
How many people were in the audience (approx. number) 300
-
- 36 Date 30th May 2024
Presenter Lotte Steuten
Location: Geneva
Event Title: Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset
Presentation title: Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset
OHE has published a report on the Socio-economic Value of Adult Immunization recently. This report discusses the role of adult vaccination programs in health and societal challenges while aligning with global agendas like the UN Sustainable Development Goals and the WHO Immunisation Agenda 2030 (IA2030).
During the 'Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset' Lotte will provide an overview of the project, the objectives, and discuss the results, and recommendations.
Speakers: moderated by Lise Pedersen, Lotte Steuten, Stefania Maggi, Agnes Soares, Tania Cernuschi, Jane Barratt, and Christi G. Kelsey
How many people were in the audience (approx. number) 50
-
- 37 Date: 10th June 2024
Presenter: Charlotte Ashton
Location: Bangkok, Thailand
Event Title: Global Sustainable Development Congress
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Presentation Title: 'Delivering sustainable healthcare through effective collaboration and impactful outreach'
What was your presentation about? My presentation focused on measuring the success and impact of programmes on the overall health and well-being of communities, from baseline surveys through to health indicators and tracking changes in specific health metrics e.g. vaccination rates. I also looked at how it is essential to tailor programmes to address specific health needs across localities e.g. the EVIA programme and its effectiveness in sub-Saharan Africa.
How many people were in the audience (approx. number) 150

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- 38 Date: 11th June 2024
Presenter: Charlotte Ashton
Location: Bangkok, Thailand
Event Title: Global Sustainable Development Congress
Presentation title 'Sustainable, resilient healthcare: What have we achieved so far?'
What was the presentation about:
My presentation explored the measures that are being used to improve access to healthcare, from HTS to value-based pricing. I also looked at the barriers to sustainable healthcare access which included economic constraints, regulatory challenges and inequitable resource allocation, drawing on lessons from existing healthcare interventions and cross-sector partnerships including the Access to Medicines Index and our own Change Initiative.
How many people were in the audience (approx. number) 50
-
- 39 Date: 12th June 2024
Presenter: Grace Hampson
Location: Bangkok, Thailand
Event Title: Global Sustainable Development Congress
Presentation title: Rethinking research and innovation for equitable healthcare
How many people were in the audience (approx. number) 50
-
- 40 Date: 12th June 2024
Presenters: Charlotte Ashton and Grace Hampson
Location Bangkok, Thailand
Event Title: Global Sustainable Development Congress
Presentation title: 'Charting a healthy future: Health, climate and the SDGs'
What was your presentation about?
During the presentation Grace and Charlotte shared their thoughts on 'Charting a healthy future: Health, climate and the SDGs' discussion.
How many people were in the audience (approx. number) 50
-
- 41 Date: 13th June 2024
Presenter Grace Hampson
Location: Bangkok, Thailand
Event Title: Global Sustainable Development Congress
Presentation title: 'The health workforce crisis: Ensuring a resilient workforce for resilient healthcare systems'
What was your presentation about?
Grace shared her research on how we can ensure a resilient workforce to provide a resilient healthcare system
How many people were in the audience (approx. number) 50
-
- 42 Date: 12th June 2024
Presenter: Graham Cookson
Location Congressional Budget Office Washington
Event: Drug Innovation Modelling
Presentation title Modelling innovation in pharmaceutical markets.
Graham was invited to give a presentation to a mix of PhD economists and masters of public policy people at the CBO in Washington.
How many people were in the audience (approx. number) 50
-
- 43 Date: 15 June 2024
Presenter: Martina Garau
Event: HTAi Workshop Characterizing why Rare Diseases Create Evidence Generation Challenges for HTA
Location: Seville
Presentation title: Economic modelling in rare diseases: insights from the literature and a survey.
What was your presentation about? Insights from a literature review as part of the Rare Disease Interest Group (RDIG) and the launch of a survey to HTAi members
How many people were in the audience (approx. number) 40
Authors: Farzana Malik and Martina Garau
-
- 44 Date: 15-19 June 2024
Presenter: Martina Garau
-

Event: HTAi virtual poster
Location: Virtual / Seville
Presentation title: Comparison of Health Technology Assessment Methodologies across Australia, Canada, New Zealand and the UK: Implications for Future HTA Collaborations
What was your presentation about? Comparing method guides of a selection of HTA agencies to explore implications of international collaborations
How many people were in the audience (approx. number) unknown
Authors: Nadine Henderson, Claud Theakston, Simon Brassel, Martina Garau (OHE), Rachel Allen, Nathalie Largeron, Kinga Malottki Yuti Patel Kirsten Garces Megan Coombes, Vanessa Xavier (Sanofi)

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- 45 Date: 15-19 June 2024
Presenter: Martina Garau
Event: HTAi pre-recorded panel sessions
Location: Virtual / Seville
Presentation title: Economic Modelling For Rare Diseases: What Are The Challenges And How Can The HTA Community Overcome Them?
What was your presentation about? Exploring challenges and solutions of economic methods in rare diseases with a panel bringing different perspectives (HTA, industry, health economists)
How many people were in the audience (approx. number) unknown
Authors: Farzana Malik, Saskia Knies, Jameel Nazir, Andrew Briggs, Martina Garau
-
- 46 Date: 16 June 2024
Presenter: Martina Garau
Event: HTAi Workshop Unlocking Rare Diseases Economic Modelling: Health Technology Assessment Implications, Methodological Standpoints, and Multi-Perspective Solutions for Current Challenges
Location: Seville
Economic modelling in rare diseases: insights from the literature and a survey.
What was your presentation about? Insights from a literature review as part of the Rare Disease Interest Group (RDIG) and the launch of a survey to HTAi members
How many people were in the audience (approx. number) 40
Authors: Farzana Malik and Martina Garau
-
- 47 Date: 15-19 June 2024
Presenter: Martina Garau
Event: HTAi pre-recorded panel sessions
Location: Virtual / Seville
Presentation title: Innovation For Alzheimer's Disease: How To Prepare For New Disease-Modifying Treatments Value Assessments?
What was your presentation about? Exploring challenges related to value assessment and provisions of Alzheimer's treatments, bringing the HTA and the patient perspectives.
How many people were in the audience/online? (approx. number) unknown
Authors: Martina Garau, Jackie Glatter, Angela Bradshaw, Meindert Boysen
-
- 48 Date: 5th July 2024
Presenter: Chris Sampson
Event: Health Economists' Study Group
Location: University of Warwick
Presentation title: Discussion of 'Productivity and efficiency: measuring different things gives different results' by Daniel Howdon
What was your presentation about? NA
How many people were in the audience (approx. number) 40
Authors: NA
-
- 49 Date: 9th July 2024
Presenter: Sian Hodgson
Event: HSRUK Conference
Location: Oxford
Presentation title: Inequalities in Dementia in England, Wales and Northern Ireland: Unveiling the Evidence and Forging a Path Towards Greater Understanding.
What was your presentation about? This poster was presented during a poster walkthrough session. The presentation and poster summarised the findings of the OHE report, providing a summary of our key literature findings and case studies that assessed whether it is possible to measure inequalities in dementia.
How many people were in the audience/online? (approx. number) 15
Authors: Sian Hodgson, Helen Hayes, Patricia Cubi-Molla, Martina Garau
-

-
- 50 Date: 9th July 2024
Presenter: Margherita Neri
Event: HSR UK Conference 2024
Location: Oxford
Presentation title: Efficiency and productivity of general practices in England
What was your presentation about? Results of an empirical analysis of efficiency across general practices in England and of the determinants of productivity
How many people were in the audience (approx. number) 40
Authors: Margherita Neri, Bruce Hollingsworth, Eugenio Zucchelli, Graham Cookson
-
- 51 Date: 10 July 2024
Presenter: Lotte Steuten
Event: Ambrosetti Roundtable "The value of prevention for economic growth and the sustainability of healthcare, social care and welfare systems"
Location: Brussels (I attended virtually)
Title: Value of Adult Vaccination
What was the presentation about: Socioeconomic value of adult vaccination
How many people were in the audience (approx. number) 150
Authors: Lotte Steuten, Simon Brassel
-
- 52 Date: 26 July 2024
Presenter: Martina Garau
Event: Cell and Gene Collective Commission: Session 1
Location: Virtual
Title: Value assessment of Cell & Gene Therapies: international practice and possible next steps in England.
What was the presentation about: Value assessment of Cell & Gene Therapies
Audience: closed meeting
Authors: NR
-
- 53 Date: 4 September 2024
Grace Hampson
Event: CER/WifOR hybrid discussion on 'EU fiscal policy: Is health a no-brainer public investment?'
Brussels
EU fiscal policy: Is health a no-brainer public investment
How many people were in the audience (approx. number) 40
-
- 54 Date: 11th September 2024
Presenter: Patricia Cubi-Molla
Event: Opening lecture - Inauguration of MSc/PhD in Quantitative Economics
Location: University of Alicante
Presentation title: "Health Economics for non-economist decision-makers"
What was your presentation about? How to bridge the evidence produced by health economic researchers ('idealism') with the practical realities faced by stakeholders involved in real-world applications ('pragmatism')
How many people were in the audience (approx. number) 60
Authors: Patricia Cubi-Molla
-
- 55 Date: 12th September 2024
Presenter: Chris Sampson
Event: IHEA Mental Health Economics SIG webinar - 'Quantifying mental health: research on measurement in mental health economics'
Location: Online
Presentation title: NA - I was just chairing the webinar
What was your presentation about?
How many people were in the audience (approx. number) 35
Authors: NA
-
- 56 Date: 16th September 2024
Presenter: Mikel Berdud
Event: IX Expert Program on Health Policy and Pharmacoeconomics
Location: Mallorca, Spain
Presentation title: "Prices and pharmaceuticals: is transparency good or bad for population health?"
What was your presentation about? Based on the results of the OHE research paper "The Future of Global Health Procurement: Issues around Pricing Transparency" I discussed whether the price transparency can contribute to improve population health and reflected on some policy recommendations separately for innovative medicines and generics/biosimilars. Themes I touched were: if transparency is a good in itself, how transparency of prices relates to the risk
-

of collusion, separating price transparency from process transparency, price transparency and bargaining power, differential pricing, value-based pricing and competition.

How many people were in the audience (approx. number) 60

Authors: Mikel Berdud

-
- 57** Date: 16th September 2024
 Keynote Speaker: Mireia Jofre-Bonet
 Event: IX Expert Program on Health Policy and Pharmacoeconomics
 Location: Mallorca, Spain
 Title: "The challenges for the pharmaceutical sector of providing healthcare systems under financial strain?"
 What was your presentation about? This summarized the challenges that the pharmaceutical sector is facing due to the extreme financial pressures that most health systems are experiencing due to pandemic shock in 2020-21, sociodemographic changes, and other causes.
 How many people were in the audience (approx. number) 60
 Authors: Mireia Jofre-Bonet
-
- 58** Date: 18th September 2024
 Presenter: NA (our paper was discussed by someone else)
 Event: EuroQol Plenary
 Location: Noordwijk, Netherlands
 Presentation title: Mary Shelley's Frankenstein: a metaphor for EuroQol instrument development and use
 What was your presentation about? A discussion of the risks associated with the success of the EQ-5D and its adaptation and application in different contexts.
 How many people were in the audience (approx. number) 50
 Authors: Paula Lorgelly and Chris Sampson
-
- 59** Date: 19th September 2024
 Presenter: Chris Skedgel
 Event FT Live - "Improving ALM Care"
 Location: Online
 Presentation title: Discussing cost drivers in acute myeloid leukaemia
 What was your presentation about? This Financial Times Digital Dialogue, held in partnership with Daiichi Sankyo Europe, brought together AML patient advocates and carers, physicians, health system representatives and other leading AML experts to discuss what needs to be done to improve patient care in AML, and the actions that can be taken to reduce the economic burden of the disease while improving outcomes for patients, families and caregivers. (approx. number) 200 registered; 84 online
-
- 60** Date: 26 July 2024
 Presenter: Martina Garau
 Event: Cell and Gene Collective Commission: Session 1
 Location: Virtual
 Title: Value assessment of Cell & Gene Therapies: international practice and possible next steps in England.
 What was the presentation about: Value assessment of Cell & Gene Therapies
 Audience: closed meeting
 Authors: NR
-
- 61** Date: 4 September 2024
 Grace Hampson
 Event: CER/WifOR hybrid discussion on 'EU fiscal policy: Is health a no-brainer public investment?'
 Brussels
 EU fiscal policy: Is health a no-brainer public investment
 How many people were in the audience (approx. number) 40
-
- 62** Date: 11th September 2024
 Presenter: Patricia Cubi-Molla
 Event: Opening lecture - Inauguration of MSc/PhD in Quantitative Economics
 Location: University of Alicante
 Presentation title: "Health Economics for non-economist decision-makers"
 What was your presentation about? How to bridge the evidence produced by health economic researchers ('idealism') with the practical realities faced by stakeholders involved in real-world applications ('pragmatism')
 How many people were in the audience (approx. number) 60
 Authors: Patricia Cubi-Molla
-
- 63** Date: 12th September 2024
 Presenter: Chris Sampson
-

Event: IHEA Mental Health Economics SIG webinar - 'Quantifying mental health: research on measurement in mental health economics'

Location: Online

Presentation title: NA - I was just chairing the webinar

What was your presentation about?

How many people were in the audience (approx. number) 35

Authors: NA

-
- 64** Date: 16th September 2024
 Presenter: Mikel Berdud
 Event: IX Expert Program on Health Policy and Pharmacoeconomics
 Location: Mallorca, Spain
 Presentation title: "Prices and pharmaceuticals: is transparency good or bad for population health?"
 What was your presentation about? Based on the results of the OHE research paper "The Future of Global Health Procurement: Issues around Pricing Transparency" I discussed whether the price transparency can contribute to improve population health and reflected on some policy recommendations separately for innovative medicines and generics/biosimilars. Themes I touched were: if transparency is a good in itself, how transparency of prices relates to the risk of collusion, separating price transparency from process transparency, price transparency and bargaining power, differential pricing, value-based pricing and competition.
 How many people were in the audience (approx. number) 60
 Authors: Mikel Berdud
-
- 65** Date: 16th September 2024
 Keynote Speaker: Mireia Jofre-Bonet
 Event: IX Expert Program on Health Policy and Pharmacoeconomics
 Location: Mallorca, Spain
 Title: "The challenges for the pharmaceutical sector of providing healthcare systems under financial strain?"
 What was your presentation about? This summarized the challenges that the pharmaceutical sector is facing due to the extreme financial pressures that most health systems are experiencing due to pandemic shock in 2020-21, sociodemographic changes, and other causes.
 How many people were in the audience (approx. number) 60
 Authors: Mireia Jofre-Bonet
-
- 66** Date: 18th September 2024
 Presenter: NA (our paper was discussed by someone else)
 Event: EuroQol Plenary
 Location: Noordwijk, Netherlands
 Presentation title: Mary Shelley's Frankenstein: a metaphor for EuroQol instrument development and use
 What was your presentation about? A discussion of the risks associated with the success of the EQ-5D and its adaptation and application in different contexts.
 How many people were in the audience (approx. number) 150
 Authors: Paula Lorgelly and Chris Sampson
-
- 67** Date: 19th September 2024
 Presenter: Chris Skedgel
 Event FT Live - "Improving ALM Care"
 Location: Online
 Presentation title: Discussing cost drivers in acute myeloid leukaemia
 What was your presentation about? This Financial Times Digital Dialogue, held in partnership with Daiichi Sankyo Europe, brought together AML patient advocates and carers, physicians, health system representatives and other leading AML experts to discuss what needs to be done to improve patient care in AML, and the actions that can be taken to reduce the economic burden of the disease while improving outcomes for patients, families and caregivers. How many people were in the audience (approx. number) 200 registered; 84 online
-
- 68** Date: 30th September 2024
 Presenter: Amanda Cole
 Event: Cell & Gene Collective Commission on Tomorrow's Science, Today's NHS: Briefing for Evidence Session 2 — Reimbursement
 Location: Virtual
 Presentation title: Expert Witness statement and response to commissioners' questions.
 What was your presentation about? Reimbursement - to consider optimal innovative finance models that, in the context of the Voluntary Pricing and Growth Scheme (VPAG), can support the NHS to pay for and allow timely access to CGTs.
 How many people were in the audience (approx. number) 12 (other expert witnesses, Commissioners, and the Cell & Gene
-

	Collective secretariat) Authors: Amanda Cole
69	<p>Date: 3rd October 2024 Presenter: Chris Sampson Event: CEVR Health Policy Seminar Location: Boston, MA Presentation title: The future of the QALY: replacement or revision What was your presentation about? The shortcomings of proposed alternatives to the QALY and the importance of improving QALY estimation. How many people were in the audience (approx. number) 20 in person, 30 online Authors: Chris Sampson</p>
70	<p>Date 17th October 204 Presenter: Simon Brassel Event: Tagesspiegel Impfgipfel 2024 Location: Berlin, Germany Presentation title: Der sozioökonomische Nutzen von (Erwachsenen) impfprogrammen. What was your presentation about? I gave a presentation laying out the broader value elements on immunisation programs, before reporting on our IFMPA funded work on the socioeconomic value of adult immunisation and providing policy recommendations to policymakers present. I then joined a panel discussion with representatives of academia, pharmaceutical industry and payers. How many people were in the audience/online? : (approx. number) 40-50 in in the room, plus unknown number in a live stream plus later audience as the video is published on their platform. Authors: El Banhawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L.,</p>
71	<p>Date: 29th October 2024 Presenter: Margherita Neri Event: PROTECT-EUROPE Masterclass 8 - The Economic Case for HPV Vaccination: Securing Health, Saving Lives Location: online Presentation title: The socioeconomic benefits of eliminating cervical cancer in the UK What was your presentation about? Presentation on socioeconomic burden of cervical cancer in the UK and the benefits of achieving the WHO elimination target How many people were in the audience (approx. number) 35 Authors: Gayathri Kumar, Matthew Napier, Margherita Neri, Martina Garau</p>
72	<p>Date 7th November 2024 Presenter: Lotte Steuten Event HTAi Asia Pacific Location: Seoul, S-Korea Title: Going Braver: Towards a societal perspective in HTA Topic: societal perspective in HTA Lotte Steuten presented at The Asia Policy Forum which is a leadership meeting for senior representatives from public and private sector organizations using HTA from the Asia Pacific region. . How many people were in the audience (approx. number) Audience: 50 Authors: Matthias Hofer, Claude Theakston, Martina Garau, Lotte Steuten</p>
73	<p>Date 12th November 2024 Presenter: Chris Sampson Event: NCCN 2024 Global Academy for Excellence & Leadership in Oncology Location: Online Presentation title: Module II: The Role of Health Technology Assessment (HTA) and other Value Considerations What was your presentation about? Discussion of HTA processes globally How many people were in the audience (approx. number) 65 Authors: NA</p>
74	<p>Date: 13th November 2024 Presenter: Mireia Jofre-Bonet Event: Lecture at St George's City, University of London Location: London Presentation title: The Pharmaceutical Market and Drug Pricing. Regulation, Market Dynamics, and Ethical Considerations What was your presentation about? Landscape of the Pharmaceutical Market and Drug Pricing. How many people were in the audience (approx. number) 25 Authors: n/a</p>
75	<p>Date: 17th November 2024</p>

Presenter: Lotte Steuten
 Event: ISPOR Short Course Programme
 Location: Barcelona, Spain

Title: Concepts and Approaches to Early-Stage Health Technology Assessment".

Lotte co led a short course to demystify the objectives of early-stage health technology assessment and the methods of translational health economics. Students in the course gained a thorough understanding of available methods for early-stage technology assessment, the specific challenges and solutions, and a clear sense of how to implement this in the complexity of health technology development, funding, regulation, pricing, and reimbursement. The course utilised real-world examples and students had the opportunity to strategize about the creation of a research plan for their purposes.

Faculty: Lotte Steuten, PhD, Office of Health Economics, London, LON, UK William Canestaro, PhD, MSc, Washington Research Foundation, Seattle, WA, USA; Erik Landaas, PhD, MPH, W. L. Gore & Associates, Inc., Flagstaff, AZ, USA

How many people were in the audience (approx. number) 35

Authors: Lotte

76

Date 18th November

Presenter: Chris Skedgel

Event: ISPOR Europe 2024

Location: Barcelona

Presentation title Should Health Technology Assessment Include the Bereavement Effect on Health-Related Quality of Life? What Difference Could It Make to Decisions About Life-Extending Treatments?

Chris Skedgel moderated an issues panel

How many people were in the audience (approx. number) - unknown

77

Date 18th November 2024

Presenter: Chris Skedgel

Event: ISPOR Europe 2024

Location: Barcelona

Presentation title Putting Breast Cancer into a Societal Perspective: How Can We Account for Its Full Impact in HTA?

Chris Skedgel moderated an issues panel

How many people were in the audience (approx. number) unknown

78

Date: 18th November 2024

Presenter: Grace Hampson

Event: ISPOR Europe 2024

Location: Barcelona

Presentation title: Balancing Budgets and Breakthroughs: Does Budget Impact Analysis Systematically Disadvantage Gene Therapies?

What was your presentation about? Budget impact analysis for gene therapies

How many people were in the audience: (approx. number) 300

Authors: Grace Hampson, Nadine Henderson, Paul Oyalo

79

Date: 18th November 2024

Presenter: Lotte Steuten

Event: ISPOR Conference

Location: Barcelona, Spain

Title: Broader Value Elements: Methods to Quantify Each and Their Relevance for European Markets

Topic: Broader value elements

How many people were in the audience (approx. number) 150

Authors: Lotte

80

Date: 19th November 2024

Presenter: Lotte Steuten

Event: ISPOR Conference

Location: Barcelona, Spain

Title: From Research to Policy to Patients: Measuring the Impact of Health Economics and Outcomes Research

Lotte Steuten participated in the ISPOR Forum, "From Research to Policy to Patients: Measuring the Impact of Health Economics and Outcomes Research (HEOR)."

VIEW: Jan Hansen (Genentech) moderated this session and set the context by explaining global shifts in HEOR organization and investment. Rob Abbott (ISPOR) presented the importance of measuring HEOR's impact in the context of ISPOR's Strategic Plan 2030. Laura Pizzi (ISPOR) discussed the impact measures that ISPOR currently uses, and opportunities to improve them and Lotte Steuten (OHE) discussed ways to measure the impact of HEOR on methods guidelines, healthcare policies and patients, using the example of an analysis with BMJ Impact Analytics that tracked the trajectory and use of HEOR research in real-time. James Chambers (Tufts University) discussed the impact of HEOR on coverage decisions using data from the Tufts Medical Center Specialty Drug Evidence and Coverage (SPEC) Database.

Drawing on these examples, panellists will debate the approaches to HEOR impact measurement, including the role of data-driven methods and AI-tools, and establish a call to action for the use of these measures as well as development of new measures.

Moderator: Jan E. Hansen, PhD, US Medical Affairs, Genentech, South San Francisco, CA, USA

Speakers: Rob Abbott, -, CEO & Executive Director, ISPOR, Lawrenceville, NJ, USA; Laura Pizzi, PharmD, MPH, Chief Science Officer, ISPOR, Lawrence Township, NJ, USA; Lotte Steuten, PhD, Office of Health Economics, London, LON, UK; James Chambers, PhD, MPharm, Center for the Evaluation of Value and Risk in Health, Institute for Clinical Research and Health Policy Studies, Tufts Medical Center, Boston, MA, USA

How many people were in the audience (approx. number) 150

Authors: Lotte

81	<p>Date: 19th November 2024</p> <p>Presenter: Simon Brassel</p> <p>Event: Politico Health Care Summit</p> <p>Location: Brussels</p> <p>Presentation title: Panellist on Panel discussing Health Care Systems resiliency and the health workforce</p> <p>What was your presentation about? n/a</p> <p>How many people were in the audience (approx. number) 448 audience / 53k+ views</p> <p>Authors: n/a</p>
82	<p>Date 19th November 2024</p> <p>Presenter: Chris Skedgel and Helen Hayes</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title Is NICE Too Severe With Severity? Exploring How Well Its Severity Modifier Aligns With UK Preferences, Helen Hayes & Chris Skedgel — poster</p> <p>How many people were in the audience (approx. number) unknown</p>
83	<p>Date: 19th November 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title: [Issue Panel] Are There More Optimal Approaches to Managing Pricing and Reimbursement of Multi-Indication Medicines to Better Facilitate Patient Access?</p> <p>I provided an overview of the challenges and solutions from a broad, international perspective, highlighting the views of different stakeholders and solutions implemented.</p> <p>How many people were in the audience (approx. number) 800</p> <p>Panellists: Jens Grueger; Amanda Cole, Claudio Jommi; Julien Patris</p>
84	<p>Date: 19th November 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title: [Issue Panel] Challenges and Opportunities for Modelling the Impact of Cell and Gene Therapies in the Context of Evolving Regulatory Environments</p> <p>I moderated the session presented the background and context of evolving regulatory pathways that may influence and present challenges as well as opportunities for CGT modelling and uptake.</p> <p>How many people were in the audience (approx. number) 250</p> <p>Panellists: Amanda Cole, Varun Ektare, Salah Ghabri, Indranil Bagchi</p>
85	<p>Date: 19th November 2024</p> <p>Presenter: Grace Hampson</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title: Lessons From Climate Change Models: What Can Health Economists Learn From Environmental Economists' Modelling Methodologies?</p> <p>What was your presentation about? Environmental impacts in HTA</p> <p>How many people were in the audience (approx. number) 250</p> <p>Authors: Grace Hampson</p>
86	<p>Date: 20th November 2024</p> <p>Presenter: Grace Hampson</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p>

	<p>Presentation title: Taking the Greener Pill: A Case Study for Incorporating Carbon Footprint in Health Technology Assessment</p> <p>What was your presentation about? Environmental impacts in HTA</p> <p>How many people were in the audience (approx. number) 100</p> <p>Authors: Grace Hampson</p>
87	<p>Date: 20th November 2024</p> <p>Presenter: Lotte</p> <p>Event: AZ Side Event to ISPOR</p> <p>Location: Barcelona, Spain</p> <p>Title: HTA in 2030: what have we solved, what are the new challenges?</p> <p>Topic: HTA</p> <p>How many people were in the audience (approx. number) 100</p> <p>Authors: Lotte Steuten</p>
88	<p>Date: 21st November 2025</p> <p>Presenter: Lotte</p> <p>Event: Pfizer Side Event to ISPOR</p> <p>Location: Barcelona, Spain</p> <p>Title: Economic value of vaccines: summary of OHE's research for Pfizer</p> <p>Topic: Economic value of vaccines</p> <p>How many people were in the audience (approx. number) 120</p> <p>Author: Lotte Steuten</p>
89	<p>Date: 3rd December 2024</p> <p>Presenter: Grace Hampson</p> <p>Event: Global AMR Concerns</p> <p>Location: Brussels, Germany</p> <p>Title: From UN Declaration to EU Action</p> <p>Topic: POIHS - featuring keynote speaker Prof Dame Sally Davies. The event includes a panel discussion with Malin Grape, Grace Hampson, and Aleksandra Opalska. https://womenat.com/w-at-ls-global-amr-concerns</p> <p>How many people were in the audience (approx. number) unknown</p> <p>Authors: Grace Hampson</p>
90	<p>Date: 04th December 2024</p> <p>Presenter: Lotte Steuten</p> <p>Event: Annual Business at OECD Health Forum</p> <p>Location: Paris</p> <p>Presentation title: Socio-economic value of adult vaccination</p> <p>What was your presentation about? Socio-economic value of adult vaccination</p> <p>How many people were in the audience (approx. number) 100</p> <p>Authors: Chowdhury S, El Banhawi H, Bell E, Neri M, Brassel S, Steuten L.</p>
91	<p>Date: 6th December 2024</p> <p>Presenter: Patricia Cubi-Molla</p> <p>Event: Guest lecture for module "Introduction to Economic Evaluation" for MSd Health Economics and MSc Economic Evaluation in Health Care at City St George's, University of London</p> <p>Location: City St George's, University of London</p> <p>Presentation title: On HTA reforms, severity modifiers, and resource allocation</p> <p>What was your presentation about? Part 1 was on HTA reforms: An international comparison and drivers for changes. Part 2 was on Severity modifiers: NICE HTA methods guidelines: key points and discussion on modifiers. Part 3 presented Resource Allocation in Public Sector Programmes: Does the Value of a Life Differ Between Governmental Departments?</p> <p>How many people were in the audience (approx. number) 5</p> <p>Authors: Patricia Cubi-Molla</p>
92	<p>Date: 17th December 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: All Party Parliamentary Group (APPG) on Genetic, Rare and Undiagnosed Conditions</p> <p>Location: Portculis House, Westminster</p> <p>Presentation title: [no title]</p> <p>What was your presentation about? I presented my personal and professional views on the most pressing need for change in the support of rare disease patients: better access to diagnosis, better coordinated care, better data sharing, and better opportunities to contribute to research. The objective was to increase awareness in parliament among MPs and peers of these issues, to support a long-term strategy for the UK.</p> <p>How many people were in the audience (approx. number) 30</p>

Authors: Amanda Cole

93

Date: 18th December 2024

Presenter: Amanda Cole

Event: AstraZeneca Value Strategy Pathway Key Opinion Leader event

Location: Virtual

Presentation title: Indication-based pricing: research and progress

What was your presentation about? Summarising our research on IBP, its implementation, and current policy discussions in the UK. Presenting to AstraZeneca leads in Italy and key opinion leaders from academia, payer, regulatory, modelling experts and hospital pharmacists.

How many people were in the audience (approx. number) 20

Authors: Amanda Cole

Advisory Roles

The number of advisory roles held by OHE staff members has continued to grow, reflecting their strong influence on policy and their recognized contributions to the research and policy community. This impact aligns with OHE's charitable objective of steering health policy and decision-making in health economics and creating capacity by transferring health economics research capacity to students and other individuals at different stages of their careers.

OHE staff membership of advisory panels, boards and committees

Advisory Panels

Health Foundation

- Member of the Steering Committee for NHS Workforce Retention Project — Graham Cookson

HTAi

- Working Group on early HTA — Amanda Cole

ISPOR

- Co-Chair ISPOR Special Taskforce on Value-Based Healthcare — Lotte Steuten
- Member of the ISPOR Health Science Policy Council (Policy Outlook Committee) — Amanda Cole

NHS England

- Primary Care Transformation Programme: Quantitative Working Group — Graham Cookson

NIHR

- Steering Committee Member for NIHR/HS&DR Project No. 8/17/1934 — Graham Cookson
- Steering Committee for the LOGiC — Long term Outcomes for Gender Identity in Children Study — funded by NIHR. Sites: Portman-NHS; UCL; U. Liverpool, U. Cambridge, UCLH — Mireia Jofre-Bonet
- Steering Committee for ADVANCE — National Addiction Centre Institute of Psychiatry, Psychology and Neuroscience — King's College London — Mireia Jofre-Bonet
- Steering Committee for the Supporting Wellbeing Through PEer-Befriending (SUPERB) Trial — City, University of London, and UCLH, Kings College — Mireia Jofre-Bonet
- Member of the Institute 4 Innovation (i4i) & Office of Life Sciences Real World Evidence Programme Committee — Lotte Steuten

Scientific Committee of the European Health Economic Association (EuHEA)

- Member of the Scientific Committee of the European Health Economic Association (EuHEA) meeting 2024 — Mireia Jofre-Bonet

Interest Groups/Task Forces

AES

- Evaluation of Health Policies and Health Care Services (EvalAES) Member — Patricia Cubí-Molla

Clinton Foundation Global Initiative

- Climate x Health Committee — Charlotte Ashton

IMPACT-HTA

- Scientific Experts and Methodologists Group (SEM) Delphi Panel Member of the IMPACT-HTA (WP7) project “Improved methods and actionable tools for enhancing HTA” — Martina Garau

EuroQol

- Member of the Valuation Working Group — David Mott
— Chris Sampson

iHEA

- Member of the ‘health systems’ efficiency’ interest group — Margherita Neri
- Mental Health Economics Special Interest Group — Chris Sampson (Lead Convenor)

ISPOR

- Member of the ‘Value of Information’ Task Force — Lotte Steuten
- Statistical Methods in Health Economics and Outcomes Research Special Interest Group Member — Graham Cookson
- Oncology Special Interest Group Member — Graham Cookson
- Rare Disease Special Interest Group Member — Graham Cookson
- Health Preference Research Group Member — David Mott
- Digital Health Special Interest Group Member — Simon Brassel, Chris Sampson
- Global Access to Medical Innovation Special Interest Group (GAMI SIG) — Amanda Cole

Editorial Roles

Applied Health Economics and Health Policy Journal

- Editorial Board Member — Lotte Steuten
- Member of the Editorial Board — Patricia Cubi-Molla

Pharmacoeconomics

- Editorial Board Member — Chris Skedgel

PLOS One

- Editorial Board Member — Mireia Jofre-Bonet

Grant Panel Advisory Groups

NICE

- Expert Advisers Panel for the Centre for Guidelines — Mireia Jofre-Bonet

NIHR

- Invention for Innovation (i4i) Product Development Awards Committee B (Member) — Chris Sampson

UKRI/ESRC/MRC

- ESRC/UKRI Peer Review College — Mireia Jofre-Bonet
- ESRC/UKRI Peer Review College (member) — Chris Sampson

Spanish Health Economics Association (AES)

- Panel for the research grant “Becas de investigacion en Economia de la Salud”, awarded by the Spanish Health Economics Association (AES), funder: Novartis — Patricia Cubi-Molla

“la Caixa” Foundation

- Peer Review of Grants by “la Caixa” Foundation, Spain — Mireia Jofre-Bonet

Visiting Positions for OHE Staff

City, University of London

- Honorary Visiting Professor, Department of Economics — Lotte Steuten
- Honorary Visiting Professor, Department of Economics — Graham Cookson
- Honorary Visiting Professor, Department of Economics — Mireia Jofre-Bonet
- Honorary Senior Research Fellow in the Department of Economics in the School of Policy & Global Affairs at City, University of London — Patricia Cubi-Molla

Fred Hutch Cancer Research Center, University of Washington

- Affiliate Investigator — Lotte Steuten

Imperial College Business School

- Centre for Health Economics & Policy and Innovation Visiting Researcher — Matthias Hofer

Medical University of Vienna

- Visiting Scientist — Chris Skedgel

Public University of Navarra

- Visiting Researcher — Mikel Berdud

University College London (UCL)

- Honorary Professor of Practice — Amanda Cole

University of East Anglia

- Honorary Senior Fellow — Chris Skedgel

University of Surrey

- Visiting Professor — Graham Cookson

Centre de Recerca en Economia de la Salut (CRES), Universitat Pompeu Fabra, Barcelona, Spain

- Senior Associate Researcher — Mireia Jofre-Bonet

Memberships

Many OHE researchers are also members of associations such as **ISPOR, IHEA, HESG, AES, EuroQoL**, and **iHTA**.

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Financial Review

In 2024, OHE remained an organisation undertaking research and related activities according to its charitable objects and status of independent research organisation.

OHE owns the sole share in OHE Consulting Limited with the purpose of enabling OHE to:

- employ a larger staff team than would be possible using research income alone
- allow staff to gain knowledge, skills and experience undertaking consulting projects that can be carried across into research and research-related projects
- most importantly, invest the profits generated from consultancy work as Gift Aided to OHE, to fund OHE's activities in 2024.

Financial Performance in 2024

The financial statements of OHE comply with the Charities Act 2011, the Companies Act 2006, the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts following The Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) ("Charities SORP FRS 102").

OHE's consolidated turnover (i.e., combining both OHE and OHE Consulting Limited) in 2024 was **£5.24m**. The expenditure totalled **£4.8m**, leaving a net income of £474,894. Of the £4.8m expenditure, staff costs in 2024 amounted to **£3.37m**, i.e., 70%. The consolidated accounts for OHE are included as an Annex to this report

Sources of Funding

The sources of funding for OHE are summarised below. The financial reports attached provide more details about OHE income and expenditure.

The consolidated income of **£5.28m** comprises:

	£000
Donations — research grants	205
Income from charitable (research) activities*	856
Interest	16.7
Total research income	1,078
OHE Consulting Income	4,204
Total Income	5,282

Donations are from the ABPI and are for two distinct purposes:

	£000
Support for core research activities	150
Grant towards financing of support activities	443
Total	593

*Income from charitable (research) activities came from several sources. Major research projects and funders included: HORIZON European Commission Grants, Wellcome Trust, and EuroQol Research Foundation.



Grants

The number and amount of live research grant funded projects in 2024 is higher than last year and amounts to £.5 million. See below:

The pipeline and the research grant applications lost show that the year 2024 has been a very active year for collaboration with other European institutions applying to European HORIZON research grant calls. Although so far, the research funded grants won in 2024 amount £0.9 million.

2024 Research Grants Activity

PROJECTS WON IN 2024

FUNDER	Project Title	Theme	Year won	Project Budget
IFPMA	5607d — Extension of Socio-economic value of adult vaccination flu abstract	VADM	Apr-2024	£2598
AMICUS THERAPEUTICS	5853 - Diversity of supply for rare disease medicines	Eol	Oct-24	£84,513
HIGH FLOW THERAPY UK	5562 - High Flow Therapy Post AECOPD	VADM	Oct-24	£71,158
CML ADVOCATES NETWORK	5747 - CML patient preference study	MVO	Jul-24	£377,578
WORKGROUP OF EUROPEAN CANCER PATIENT ADVOCACY NETWORKS (WECAN)	5780 - WECAN Patient Experience Data Course	MVO	Jan-24	£859
EUROPEAN COMMISSION	5743 — EU HORIZON Predict FTD	VADM	Aug-24	£282,119
WELLCOME TRUST	5824 - Guidance on eval of health effects of climate change	VADM	Oct-24	£115,471
TOTAL				£934,296

**by the end of 2024, we were told that we had one additional grant, NIHR, on Decarbonising the NHS that will kick start in 2025.*

PROJECTS WON PRIOR TO 2024 AND STILL LIVE

FUNDER	Project Title	Theme	Year won	Project Budget
ACUTE LEUKEMIA ADVOCATES NETWORK	5362a - Patient preferences for leukaemia treatments: UK R/R phases 5-6	MVO	14-Jun-23	£73,788
	5362b - Patient preferences for leukaemia treatments: US/EU4 R/R all phases	MVO	04-Jan-23	£105,116
	5362c - Patient preferences for leukaemia treatments: UK/US/EU4 1L all phases	MVO	06-Nov-23	£210,477
	5627 - Acute leukaemia carer preference study	MVO	06-Nov-23	£149,876
EUROQOL RESEARCH FOUNDATION	5437 - Estimating an EQ-5D-Y-3L value set in the United Kingdom	MVO	19-Jul-23	£7,650
	5479 - Bolt-on conceptual	MVO	14-Sep-23	£32,599
EUROPEAN COMMISSION	5443 - EU HORIZON HI-PRIX Project	Eol	01-Mar-23	£354,263
EUROQOL RESEARCH FOUNDATION	EE60 EQ-5D Bolt -Development	VADM	01-Jan-18	£57,700
HEALTH FOUNDATION	5402 Efficiency and Labour Productivity in Primary Care	POIHS	01-Apr-21	£410,325
EUROQOL RESEARCH FOUNDATION	5487 Exploring the use of the OPUF tool for valuing EQ-5D-Y-3L	MVO	14-Mar-22	£63,310
	5133 Development and testing of a hearing bolt-on	MVO	01-Apr-21	£77,456

PROJECTS WON PRIOR TO 2024 AND CLOSED IN 2024

FUNDER	Project Title	Theme	Year won	Project Budget
PARKINSON'S UK	5378 - PWP mindfulness app	VADM	15/11/2021	£15,318
CANCER RESEARCH (UK)	5617 Oncology TPPs	Eol	13/02/2023	£66,406
CURTA, INC	5690 - Biosimilar Market Dynamics: A Review and Simulation Model	Eol	03/04/2023	£25,237
TOTAL				£106,961
GRANT TOTAL LIVE				£2,583,817

2024 Pipeline and Lost Grant Funded Projects

PROJECTS IN THE PIPELINE (AS OF DECEMBER 2024)

FUNDER	Project Title	Value	Probability %	Proj. Adj. Value
NATIONAL INSTITUTE FOR HEALTH RESEARCH (NIHR)	5869 - NIHR Global LMICs Partnership AIIG	£500,000	15	£75,000
NATIONAL INSTITUTE FOR HEALTH RESEARCH (NIHR)	5870 - NIHR Global LMICs Partnership AMPATH	£476,713	15	£71,506
EUROPEAN COMMISSION	5863 — EU HORIZON TEN4CARE	£294,790	25	£73,697
WELLCOME TRUST	5799 - Climate Impact Award	£250,000	20	£50,000
THE FLEMING INITIATIVE	5837 - AMR Strategic Policy TFI	£150,000	50	£75,000
ACUTE LEUKEMIA ADVOCATES NETWORK	5840 - Creating Opportunities to Hear the Patient Voice	£89,994	40	£35,997
INNOVATE UK	5852 - Value of pharmacogenomics to the UK	£79,931	75	£59,948
NATIONAL INSTITUTES OF HEALTH	5755 - ModEx	£10,000	5	£10,000
PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE	5791 - US impact of vegan diets	£136,821	100	£136,821
EUROQOL RESEARCH FOUNDATION	5764 - OPUF bolt-on valuation	£5,000	100	£5,000
	5725 - Cognition bolt-on Hong Kong	£2,254.	100	£2,254
TOTAL		£1,995,503		£595,223

PROJECTS SUBMITTED AND LOST IN 2024 SO FAR

FUNDER	Project Title	Theme	Value
PARKINSON'S UK	5378a - PwP Mindfulness app - dissemination	VADM	£7,000
SCIENCE FOR AFRICA	5788 - EPSILON Science for Africa	POIHS	£299,000
SCOTTISH CONSORTIUM UKRI	5792 - Decarbonising H&SC	POIHS	£190,000
EUROQOL RESEARCH FOUNDATION	5133b - Sign language extension of Development and testing of a hearing bolt-on	MVO	£36,629
EUROPEAN COMMISSION	5678 - AI4Kidney	VADM	£150,000
NATIONAL INSTITUTE FOR HEALTH RESEARCH (NIHR)	5708 - NIHR i4i application	VADM	£81,870
EUROPEAN COMMISSION	5726 - BIONICS	EoI	£250,000
NATIONAL INSTITUTE FOR HEALTH RESEARCH (NIHR)	5740 - Memory Tracks evaluation	VADM	£50,000
	5757 - NIHR Global LMICs Partnership	POIHS	£2,930,000
EUROQOL RESEARCH FOUNDATION	5763 - Development and Evaluation of a Refined Version of the OPUF Approach (OPUF 2.0)	MVO	£6,440
BILL & MELINDA GATES FOUNDATION	5773 - Bill & Melinda Gates Advance Women's Health Innovation	POIHS	£150,000

**NATIONAL INSTITUTE FOR HEALTH
RESEARCH (NIHR)**

THE HEALTH FOUNDATION

**NATIONAL INSTITUTE FOR HEALTH
RESEARCH (NIHR)**

EUROPEAN UNION

**NATIONAL INSTITUTE FOR HEALTH
RESEARCH (NIHR)**

EUROQOL RESEARCH FOUNDATION

TOTAL

5803 - Case study economic analyses	VADM	£49,880
5825 Productivity in healthcare	POIHS	£72,824
5827 - Spark i4i bid	VADM	£133,947
5842 - Increasing Vaccinations Low Uptake	POIHS	£152,244
5843 - Biomarkers for Polyps	POIHS	£35,000
5846 - EU HORIZON HEROSCAN	VADM	£307,925
5857 - Bilateral versus unilateral cochlear implants in adults	VADM	£50,000
5133b - Sign language extension of Development and testing of a hearing bolt-on	MVO	£36,629
5809 - Cognition and corona in Norway	MVO	£21,501
TOTAL		£5,010,889



Structure, Governance & Management

Structure, Governance & Management

Trustees and Directors

By the end of 2024 :

Anita Charlesworth , The Health Foundation, Chair
Richard Torbett , (APBI) Trustee
Werner Brouwer , ESHPM (OHE) Trustee (appointed 31st March 2022)
Patrick Holmes , Pfizer (ABPI) Trustee (appointed 31st January 2022)
Paul Catchpole , (ABPI) Trustee (appointed 4th October 2023)
Thomas Allvin, EFPIA (appointed 23rd February 2023)
Margaret Kyle , Mines ParisTech (OHE) (resigned 31st December 2024)

Trustees and Directors

By the end of 2023 :

Anita Charlesworth , The Health Foundation Chair
Richard Torbett , (APBI) Trustee
Werner Brouwer , ESHPM (OHE) Trustee (appointed 31st March 2022)
Patrick Holmes , Pfizer (ABPI) Trustee (appointed 31st January 2022)
Margaret Kyle , Mines ParisTech (OHE) (appointed 14th January 2022)
Paul Catchpole , (ABPI) Trustee (appointed 4th October 2023)
Thomas Allvin, EFPIA (appointed 23rd February 2023)
Other:
Susan Rienow , Pfizer (ABPI) (resigned 4th October 2023)

Registered Office

2nd Floor Goldings House,
Hay's Galleria, 2 Hay's Lane,
London, SE1 2HB
Charity number: 1170829
Company number: 09848965

Auditor

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Statutory Auditor & Chartered Accountants
2 City Place
Beehive Ring Road
Gatwick
West Sussex RH6 0PA
Bankers National Westminster Bank Plc
PO Box 113
Cavell House
2A Charing Cross Road, London

Senior Management

Chief Executive Officer
Prof Graham Cookson
Deputy Chief Executive Officer
Prof Lotte Steuten
Chief Research Officer and Head of
Education
Prof Mireia Jofre-Bonet

Directors

Charlotte Ashton
Martina Garau
Chris Skedgel
Tim Watson

Associate Directors:

Amanda Cole
Grace Hampson

OHE Committee Structure

BOARD OF DIRECTORS	Remit	Formal role of overseeing the business, relying on existing mechanisms of governance and accountability
	Membership	Anita Charlesworth (Chair), Richard Torbett, Paul Catchpole, Margaret Kyle, Werner Brouwer, Patrick Holmes, Thomas Allvin, Ryan Hollingsworth (Secretariat)
EDITORIAL PANEL	Remit	Acts as a guarantor of the quality of OHE's publications output Assures the OHE Research Board of Directors that OHE's publication quality is in line with its charitable objectives and strategic purpose
	Membership	Martin Buxton, Martin Chalkley, Anita Charlesworth, Tony Culyer, Mike Drummond, Nick Mays, Richard Norman, Pedro Pita Barros, Julie Ratcliffe, Peter Zweifel
RESEARCH COMMITTEE	Remit	<ul style="list-style-type: none"> Oversees OHE's research Ensures the quality and independence of OHE's research programme Assures the OHE Research Board of Directors that OHE's research output is meeting its charitable objects and strategic purpose
	Membership (6+)	Margaret Kyle (Chair) , Tony Culyer, Patricia Danzon, Mike Drummond, Hareth Al-Janabi, Donna Rowen, Katherine Payne, Luigi Siciliani, Pedro Pita-Barros Matthias Hofer (Secretariat)
	Board of Directors are invited to attend as observers	Anita Charlesworth (Chair), Richard Torbett, Paul Catchpole, Margaret Kyle, Werner Brouwer, Patrick Holmes, Thomas Allvin, Ryan Hollingsworth (Secretariat)
POLICY COMMITTEE	Remit	Helps OHE to: <ul style="list-style-type: none"> inform a policy agenda identify areas of policymaking where OHE research can help and inform decision-making engage with the right people, in the right manner and at the right time improve OHE's policy engagement work to ensure that maximum impact of its research
	Membership (6+)	Anita Charlesworth (Health Foundation; Chair), Elliot Dunster, Tom Easterling, Dr Koonal Shah, Daniel Ollendorf, Jamie Munroe , Siva Anandaciva, Chris Henshall Helen Hayes (Secretariat)
	Board of Directors are invited to attend as observers	Anita Charlesworth (Chair), Richard Torbett, Paul Catchpole, Margaret Kyle , Werner Brouwer , Patrick Holmes, Thomas Allvin, Ryan Hollingsworth (Secretariat)

Appendices

Review of OHE's research programme in 2024

Executive summary

These papers summarise OHE's research activity in 2024.

OHE's research activity in 2024 was extensive and diverse. By the end of the year, ongoing research grant-funded projects had a total value of approximately £2.6 million, similar to 2023. The total value of new research grants awarded in 2024 was £0.9 million, with an additional £0.6 million in probability-adjusted funding in the pipeline. We continue to benefit from our success in securing the EU HORIZON HI-PRIX project and have been approached by various consortia. In 2024, we secured an additional HORIZON grant worth £0.28 million for developing a biomarker-based predictive tool for dementia. Furthermore, we obtained a Wellcome Trust grant in collaboration with LSTM and the Euro-Mediterranean Center on Climate Change (CMCC) to develop guidance on the economic evaluation of health impacts of climate change. Alongside these grant successes, we made significant efforts to secure major new contract research work, resulting in a portfolio of new contracts worth £3.5 million. Additionally, the probability-adjusted pipeline for contract research proposals under submission or preparation at the end of the year exceeded £1.4 million.

Research Outputs: Our research activities resulted in 39 publications in 2024, compared to 37 in 2023: 22 peer-reviewed journal articles, 6 non-peer-reviewed publications, and 14 OHE peer-reviewed publications. We continued to publish work funded through our core research grant, with core-funded research projects leading to 5 peer-reviewed publications in 2024, compared to 3 in 2023, alongside several additional submissions by year-end.

In terms of impact, we tracked citations for OHE journal articles published since 2019. As expected, citation counts increased with publication age. Between 2019 and 2023, we published 120 articles with at least 10 citations, of which: 9 articles received more than 50 citations; and 4 articles received more than 100 citations. Older publications naturally accrued a higher number of citations over time.

Engagement and Dissemination: OHE convened a significant number of research events in 2024: 9 roundtables; 4 brown-bag lunchtime seminars; 5 webinars; 2 workshops; and 2 externally focused events. Notably, four of our webinars were funded, representing a valuable opportunity to diversify OHE's research income while expanding our audience reach. On average, our webinars attracted 412 attendees, with the audience predominantly comprising industry and academia. OHE colleagues delivered 93 external presentations in 2024, a significant increase from 68 in 2023.

Following OHE's full website relaunch in 2023, minor disruptions and changes in analytics initially led to a slight decline in website visitors and downloads. However, 2024 saw an increase in both metrics. Our social media presence also expanded, particularly on LinkedIn, where our subscriber base grew by over 30%, from 9,000 to more than 12,749.

Impact Highlights: Beyond citations and research output metrics, OHE had a **strong impact in 2024**, particularly in five key areas:

- Pharmaceutical regulation reform – Our work on the IRA Reduction Act in the US will significantly influence the global pharmaceutical R&D landscape.
- Health Technology Assessment (HTA) – High-profile projects, including 'NICE enough' and 'Around the world in HTAs', contributed to the debate on HTA bodies.
- Sustainability research – OHE led important work on healthcare sustainability.
- Antimicrobial Resistance (AMR) – We produced three reports as part of the NICE/NHS England AMR Pilot.
- Dietary and public health research – A major Vegan Society-funded study assessed the impact of increased plant-based diet adoption in England, providing model-based estimates of healthcare resource use and health-related quality of life.

Conclusion: Overall, 2024 was a successful year for OHE's research, both in externally funded projects and core-funded initiatives. However, we remain committed to continuous improvement. While our performance in securing research grants has improved, further progress is needed to increase success rates. The Research Committee's guidance has been and will continue to be instrumental in achieving this goal.

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Research Programme Output

In the following sections, we provide a list and some insights into 2024's research outputs, including research funded grant projects, publications, core-funded projects and OHE organised events. In the appendix, we also provide a summary of the contract research projects as they have contributed to our research output.

Research grants and projects

The number and amount of live research grant funded projects in 2024 is higher than last year and amounts to £.5 million. See below:
The pipeline and the research grant applications lost show that the year 2024 has been a very active year for collaboration with other European institutions applying to European HORIZON research grant calls. Although so far, the research funded grants won in 2024 amount £0.9 million.

2024 Live Research Grant Funded Projects

Projects won in 2024				
Funder	Project Title	Theme	Year won	Project Budget
IFPMA	5607d – Extension of Socio-economic value of adult vaccination flu abstract	VADM	Apr-2024	£2598
Amicus Therapeutics	5853 - Diversity of supply for rare disease medicines	Eol	Oct-24	£84,513
High Flow Therapy UK	5562 - High Flow Therapy Post AECOPD	VADM	Oct-24	£71,158
CML Advocates Network	5747 - CML patient preference study	MVO	Jul-24	£377,578
Workgroup of European Cancer Patient Advocacy Networks (WECAN)	5780 - WECAN Patient Experience Data Course	MVO	Jan-24	£859
European Commission	5743 – EU HORIZON Predict FTD	VADM	Aug-24	£282,119
Wellcome Trust	5824 - Guidance on eval of health effects of climate change	VADM	Oct-24	£115,471
Total*				£934,296

*by the end of 2024, we were told that we had one additional grant, NIHR, on Decarbonising the NHS that will kick start in 2025.

Projects won prior to 2024 and still live				
Funder	Project Title	Theme	Year won	Project Budget
Acute Leukemia Advocates Network	5362a - Patient preferences for leukaemia treatments: UK R/R phases 5-6	MVO	14-Jun-23	£73,788
Acute Leukemia Advocates Network	5362b - Patient preferences for leukaemia treatments: US/EU4 R/R all phases	MVO	04-Jan-23	£105,116
Acute Leukemia Advocates Network	5362c - Patient preferences for leukaemia treatments: UK/US/EU4 1L all phases	MVO	06-Nov-23	£210,477
Acute Leukemia Advocates Network	5627 - Acute leukaemia carer preference study	MVO	06-Nov-23	£149,876
EuroQol Research Foundation	5437 - Estimating an EQ-5D-Y-3L value set in the United Kingdom	MVO	19-Jul-23	£7,650
EuroQol Research Foundation	5479 - Bolt-on conceptual	MVO	14-Sep-23	£32,599
European Commission	5443 - EU HORIZON HI-PRIX Project	Eol	01-Mar-23	£354,263
EuroQol Research Foundation	EE60 EQ-5D Bolt -Development	VADM	01-Jan-18	£57,700
Health Foundation	5402 Efficiency and Labour Productivity in Primary Care	POIHS	01-Apr-21	£410,325
EuroQol Research Foundation	5487 Exploring the use of the OPUF tool for valuing EQ-5D-Y-3L	MVO	14-Mar-22	£63,310
EuroQol Research Foundation	5133 Development and testing of a hearing bolt-on	MVO	01-Apr-21	£77,456
Total				£1,542,560

Projects won prior to 2024 closed in 2024				
Funder	Project Title	Theme	Year won	Project Budget
Parkinson's UK	5378 - PWP mindfulness app	VADM	15/11/2021	£15,318
Cancer Research (UK)	5617 Oncology TPPs	Eol	13/02/2023	£66,406
Curta, Inc	5690 - Biosimilar Market Dynamics: A Review and Simulation Model	Eol	03/04/2023	£25,237
Total				£106,961
Grant Total Live				£2,583,817

2024 Pipeline and Lost Grant Funded Projects

Projects in the Pipeline (as of December 2024)				
Funder	Project Title	Value	Probability %	Proj. Adj. Value
National Institute for Health Research (NIHR)	5869 - NIHR Global LMICs Partnership AIIG	£500,000	15	£75,000
National Institute for Health Research (NIHR)	5870 - NIHR Global LMICs Partnership AMPATH	£476,713	15	£71,506
European Commission	5863 – EU HORIZON TEN4CARE	£294,790	25	£73,697
Wellcome Trust	5799 - Climate Impact Award	£250,000	20	£50,000
The Fleming Initiative	5837 - AMR Strategic Policy TFI	£150,000	50	£75,000
Acute Leukemia Advocates Network	5840 - Creating Opportunities to Hear the Patient Voice	£89,994	40	£35,997
Innovate UK	5852 - Value of pharmacogenomics to the UK	£79,931	75	£59,948
National Institutes of Health	5755 - ModEx	£10,000	5	£10,000
Physicians Committee for Responsible Medicine	5791 - US impact of vegan diets	£136,821	100	£136,821
EuroQol Research Foundation	5764 - OPUF bolt-on valuation	£5,000	100	£5,000
EuroQol Research Foundation	5725 - Cognition bolt-on Hong Kong	£2,254	100	£2,254
		£1,995,503		£595,223

Projects submitted and lost in 2024 so far			
Funder	Project Title	Theme	Value
Parkinson's UK	5378a - PwP Mindfulness app - dissemination	VADM	£7,000
Science for Africa	5788 - EPSILON Science for Africa	POIHS	£299,000
Scottish Consortium UKRI	5792 - Decarbonising H&SC	POIHS	£190,000
EuroQol Research Foundation	5133b - Sign language extension of Development and testing of a hearing bolt-on	MVO	£36,629
European Commission	5678 - AI4Kidney	VADM	£150,000
National Institute for Health Research (NIHR)	5708 - NIHR i4i application	VADM	£81,870
European Commission	5726 - BIONICS	EoI	£250,000
National Institute for Health Research (NIHR)	5740 - Memory Tracks evaluation	VADM	£50,000
National Institute for Health Research (NIHR)	5757 - NIHR Global LMICs Partnership	POIHS	£2,930,000
EuroQol Research Foundation	5763 - Development and Evaluation of a Refined Version of the OPUF Approach (OPUF 2.0)	MVO	£6,440
Bill & Melinda Gates Foundation	5773 - Bill & Melinda Gates Advance Women's Health Innovation	POIHS	£150,000
National Institute for Health Research (NIHR)	5803 - Case study economic analyses	VADM	£49,880
The Health Foundation	5825 Productivity in healthcare	POIHS	£72,824
National Institute for Health Research (NIHR)	5827 - Spark i4i bid	VADM	£133,947
National Institute for Health Research (NIHR)	5842 - Increasing Vaccinations Low Uptake	POIHS	£152,244
National Institute for Health Research (NIHR)	5843 - Biomarkers for Polyps	POIHS	£35,000
European Union	5846 - EU HORIZON HEROSCAN	VADM	£307,925
National Institute for Health Research (NIHR)	5857 - Bilateral versus unilateral cochlear implants in adults	VADM	£50,000
EuroQol Research Foundation	5133b - Sign language extension of Development and testing of a hearing bolt-on	MVO	£36,629
EuroQol Research Foundation	5809 - Cognition and corona in Norway	MVO	£21,501
Total			£5,010,889

Publications

We present our publications in three main groups: publications in external peer-reviewed journals; publications on OHE's website (peer-reviewed by the OHE reviewing process); OHE reports; books and chapters; and working papers in external institutions.

EXTERNAL PEER-REVIEWED JOURNAL ARTICLES, SOURCE OF FUNDING, JOURNAL IMPACT FACTOR, AND CITATIONS (JANUARY TO DECEMBER 2024)

For external peer-reviewed journal articles, we provide information on the sources of financial support, number of citations, SJR indicator and ABS journal ranking.

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF 1 DEC 2024) ¹	SJR INDICATOR (2023) ²	ABS JOURNAL RANKING (2021) ³
1	Saber, W., Bansal, A., Li, L., Scott, B. L., Sangaralingham, L. R., Thao, V., Roth, J. A., Wright, W., Steuten, L. M. G., Pidala, J. A., Mishra, A., Maziarz, R. T., Westervelt, P., McGuirk, J. P., Cutler, C., Nakamura, R., & Ramsey, S. D. (2024). Cost-effectiveness of reduced-intensity allogeneic hematopoietic cell transplantation for older patients with high-risk myelodysplastic syndrome: Analysis of BMT CTN 1102. <i>JCO Oncology Practice</i> , OP2300413. Advance online publication. https://doi.org/10.1200/OP.23.00413	National Heart, Lung, and Blood Institute grant R01HL126589	4	1.601	N/A
2	Elvidge, J., Hawsworth, C., Avşar, T. S., Zemlenyi, A., Chalkidou, A., Petrou, S., Petykó, Z., Srivastava, D., Chandra, G., Delays, J., Denniston, A., Gomes, M., Knies, S., Nousios, P., Siirtola, P., Steuten, L., Wang, J., Dawoud, D., & CHEERS-AI Steering Group. (2024). Consolidated health economic evaluation reporting standards for interventions that use artificial intelligence (CHEERS-AI). <i>Value in Health</i> , 27(9), 1196–1205. https://doi.org/10.1016/j.jval.2024.05.006	N/A	8	1.507	N/A
3	Jofre-Bonet, M., Rossello-Roig, M., & Serra-Sastre, V. (2024). Intimate partner violence and children's health outcomes. <i>SSM - Population Health</i> , 25, 101611. https://doi.org/10.1016/j.ssmph.2024.101611	None	3	1.586	N/A

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF 1 DEC 2024) ¹	SJR INDICATOR (2023) ²	ABS JOURNAL RANKING (2021) ³
4	McElwee, F., Cole, A., Garrison Jr, L. P., & Towse, A. (2024). Federal support should not be a factor in determining pharmaceutical prices under the IRA. <i>Health Affairs Forefront</i> . https://www.healthaffairs.org/content/forefront/federal-support-should-not-factor-determining-pharmaceutical-prices-under-ira	Contract research (PhRMA, via Lou Garrison)	1	N/A	N/A
5	Paulden, M., Sampson, C., O'Mahony, J. F., Spackman, E., McCabe, C., Round, J., & Snowsill, T. (2024). Decision makers should avoid the Health Years in Total (HYT) approach: A response to Dr Basu. <i>Value in Health</i> . Advance online publication. https://doi.org/10.1016/j.jval.2024.04.006	n/a	1	1.507	N/A
6	Sampson, C., Parkin, D., & Devlin, N. (2024). Is anchoring at 'dead' a theoretical requirement for health state valuation? <i>Health Economics</i> . Advance online publication. https://doi.org/10.1002/hec.4863	EuroQol Research Foundation	1	1.144	3
7	Oliver, E., Kourouklis, D., & Jofre-Bonet, M. (2024). Do R&D tax credits impact pharmaceutical innovation? Evidence from a synthetic control approach. <i>Research Policy</i> , 53(8), 105053. https://doi.org/10.1016/j.respol.2024.105053	Core funded research	0	3.219	4*
8	El Banhawi, H., Bell, E., Neri, M., Brassel, S., Chowdhury, S., & Steuten, L. (2024). A structured narrative literature review of the broader value of adult immunisation programmes. <i>Vaccines</i> , 12(8), 852. https://doi.org/10.3390/vaccines12080852	Contract research IFPMA	0	1.201	N/A
9	Hayes, H., Meacock, R., Stokes, J., & Sutton, M. (2024). The effect of local hospital waiting times on GP referrals for suspected cancer. <i>PLOS One</i> , 19(5), e0294061. https://doi.org/10.1371/journal.pone.0294061	Core funded research	0	0.839	N/A
10	Hayes, H., Stokes, J., Sutton, M., & Meacock, R. (2024). How do hospitals respond to payment unbundling for diagnostic imaging of suspected cancer patients? <i>Health Economics</i> . Advance online publication. https://doi.org/10.1002/hec.4804	Core funded research	0	1.144	3

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF 1 DEC 2024) ¹	SJR INDICATOR (2023) ²	ABS JOURNAL RANKING (2021) ³
11	Kommandantvold, S. A., Lemenuel-Diot, A., Skedgel, C., Pitman, R., Rouse, P., Zaraket, H., & Blanchet Zumofen, M. H. (2024). A cost-effectiveness analysis of reduced viral transmission with baloxavir marboxil versus oseltamivir or no treatment for seasonal and pandemic influenza management in the United Kingdom. <i>Expert Review of Pharmacoeconomics & Outcomes Research</i> . Advance online publication. https://doi.org/10.1080/14737167.2024.2365421	Internally funded project by Roche	0	0.671	N/A
12	Jofre-Bonet, M., Rossello-Roig, M., & Serra-Sastre, V. (2024). Maternal labor supply and children's emotional well-being. <i>Journal of Demographic Economics</i> . Advance online publication. https://doi.org/10.1017/dem.2024.19	Core funded research	0	0.619	N/A
13	Mott, D. J., Hitch, J., Nier, S., Pemberton-Whiteley, Z., & Skedgel, C. (2024). Patient preferences for treatment in relapsed/refractory acute leukemia in the United Kingdom: A discrete choice experiment. <i>Patient Preference and Adherence</i> , 18, 1243–1255. https://doi.org/10.2147/PPA.S442530	Research-grant funded	0	N/A	N/A
14	Neri, M., Cubi-Molla, P., & Cookson, G. (2024). A multi-dimensional framework of valued output for primary care in England. <i>Applied Health Economics and Health Policy</i> . Advance online publication. https://doi.org/10.1007/s40258-024-00895-z	Research grant (the Health Foundation)	0	0.990	N/A
15	Radu, P., Kumar, G., Cole, A., Fameli, A., Guthrie, M., Annemans, L., Geissler, J., Italiano, A., O'Rourke, B., Xoxi, E., & Steuten, L. (2024). Evolving assessment pathways for precision oncology medicines to improve patient access: A tumor-agnostic lens. <i>The Oncologist</i> . Advance online publication. https://doi.org/10.1093/oncolo/oyae060	Contract research EFPIA	0	1.991	N/A
16	Skedgel, C., Mott, D. J., Elayan, S., & Cramb, A. (2024). A longer life or a quality death? A discrete choice experiment to estimate the relative importance of different aspects of end-of-life care in the United Kingdom. <i>MDM Policy & Practice</i> , 9(1), 23814683241252425. https://doi.org/10.1177/23814683241252425	NIHR-CLARHC / Core funded research	0	0.696	N/A
17	Steuten, L., Lothgren, M., Bruce, A., Campioni, M., & Towse, A. (2024). Proposal for a general outcome-based value attribution framework for combination therapies. <i>Value in Health</i> . Advance online publication. https://doi.org/10.1016/j.jval.2024.07.019	Contract Research	2	1.507	N/A

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF 1 DEC 2024) ¹	SJR INDICATOR (2023) ²	ABS JOURNAL RANKING (2021) ³
18	Henderson, N., Hodgson, S., Mulhern, B. et al. (2024). A qualitative systematic review of the impact of hearing on quality of life. <i>Qual Life Res</i> https://doi.org/10.1007/s11136-024-03851-5	EuroQol Research Foundation	1	1.299	N/A
19	Sampson, C., & Cookson, G. (2024). Marginal cost per QALY estimates: What are they good for? <i>Health Policy</i> . Advance online publication. https://doi.org/10.1016/j.healthpol.2024.105036	ABPI	2	1.206	2
20	Bourke, S., Skedgel, C., Martí-Gil, Y., et al. (2024). Food for thought: More explicit guidance for inclusion of caregiver perspectives in health technology assessment. <i>International Journal of Technology Assessment in Health Care</i> , 40(1), e77. https://doi.org/10.1016/j.ijta.2024.100007		0	0.846	N/A
21	Neri, M., Mewes, J. C., de Almeida, F. A., Stoychev, S., Minarovic, N., Charos, A., Shea, K. M., & Steuten, L. M. G. (2024). Impact of including productivity costs in economic analyses of vaccines for C. difficile infections and infant respiratory syncytial virus, in a UK setting. <i>Cost effectiveness and resource allocation</i> : C/E, 22(1), 34. https://doi.org/10.1186/s12962-024-00533-4		0	0.610	N/A
22	Gordon, J., Gheorghe, M., Harrison, C., Miller, R., Dennis, J., Steuten, L., Goldenberg, S., Gandra, S., & Al-Taie, A. (2024). Estimating the Treatment and Prophylactic Economic Value of New Antimicrobials in Managing Antibiotic Resistance and Serious Infections for Common Pathogens in the USA: A Population Modelling Study. <i>PharmacoEconomics</i> , 42(3), 329–341. https://doi.org/10.1007/s40273-023-01337-9		2	1.517	N/A

1. Google Scholar. The number of citations for each article as of October 2024

2. SCImago Journal Rank (SJR) indicator (PDF), developed by SCImago from the widely known algorithm Google PageRank™. This indicator shows the visibility of the journals contained in the Scopus® database from 1996. SJR takes into account both the number of citations received by a journal and the prestige of the journal based on where those citations come from. The latest available year of indicators is 2022.

3. Chartered Association of Business Schools ('ABS'), UK: journal rankings go from 4* (highest) to 1 (lowest). The latest available year of rankings is 2021.

Other external publications (non-peer-reviewed) Core, Grant, or Contract Research funded

1. Henderson, N., & Sampson, C. (2024). The impact of higher uptake of plant-based diets in England: Model-based estimates of health care resource use and health-related quality of life. MedRxiv. doi: <https://doi.org/10.1101/2023.12.26.23300536>
2. Ashton, C. (2024). How health economics is redefining climate-resilient healthcare. World Economic Forum. <https://www.weforum.org/agenda/2024/06/how-health-economics-is-redefining-climate-resilient-healthcare/>
3. Cabling, M.L., Dawney, J., Naper, M., Marciniak Nuqui, Z., Olumogba, F., Kessler, L., Cole, A., Steuten, L., Marjanovic, S. (2004) Advancing the development and use of diagnostic target product profiles for cancer https://www.cancerresearchuk.org/sites/default/files/final_report_31may2024_final.pdf
4. Steuten, L. (2024) The Role of G7 Governments in Global Efforts to Encourage Antimicrobial Development Through a Pull Incentive: Challenges and Collaboration May 2024. https://globalcoalitiononaging.com/wp-content/uploads/2024/05/GCOA_G7Governments_English_FINAL.pdf
5. Barlow J, Havenaar E, Hofer M, 2024, 2024, The UK Biopharmaceutical Sector 2024 (not peer-reviewed) https://www.imperial.ac.uk/media/imperial-college/research-centres-and-groups/centre-for-sectoral-economic-performance/Biopharmaceutical_Sector_2024_Brochure_Nov2024.pdf
6. Pinto, C., Brown, J., Hurt, C., Norton, S., Stumpf, S., Volpato, R., Cubi-Molla, P., Chowdhury, S., McCracken, L., & Bogosian, A. (2024). Acceptability and feasibility randomized controlled trial of a digital psychological support intervention for people with Parkinson's disease: trial protocol. *Research Square*. Preprint: <https://doi.org/10.21203/rs.3.rs-3773762%2Fv1>

Additionally, OHE published 22 insights or blogs on our website on various topics ranging from three of the series HTAs Around the World to Drug Shortages in the UK and their impact. See [Insights - OHE](#) for more detailed information.

Summary of Citations over time

Number of citations	Publication Year						Total
	2019	2020	2021	2022	2023	2024	
10+	19	10	15	12	1	-	57
20+	13	5	6	8	-	-	32
50+	4	3	-	2	-	-	9
100+	-	2	-	2	-	-	4

(See appendix for a list of all OHE publications and citations, 2019-2024).

Top 10 Most Cited Publications since 2019

- 1,388 Citations

Husereau, D., **Drummond, M.**, Augustovski, F., de Bekker-Grob, E., Briggs, A. H., Carswell, C., et al as part of the CHEERS 2022 ISPOR Good Research Practices Task Force 2022., Consolidated Health Economic Evaluation Reporting Standards 2022 (CHEERS 2022) statement: updated reporting guidance for health economic evaluations. *European Journal of Health Economics*. (Epub ahead of print). DOI: **10.1007/s10198-021-01426-6**.

- 278 Citations

Mateo, J., **Steuten, L.**, Aftimos, P., André, F., Davies, M., Garralda, E., Geissler, J., Husereau, D., Martinez-Lopez, I., Normanno, N., Reis-Filho, J., Stefani, S., Thomas, D., Westphalen, B., & Voest, E. 2022. Delivering Precision Oncology to Patients with Cancer. *Nature Medicine*. DOI: **10.1038/s41591-022-01717-2**

- 169 Citations

- Fenwick E, **Steuten L**, Knies S, Ghabri S, Basu A, Murray JF, Koffijberg HE, Strong M, Sanders Schmidler GD, Rothery C. (2020) Value of Information Analysis for Research Decisions-An Introduction: Report 1 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. *Value in Health*, Feb;23(2):139-150. doi: [10.1016/j.jval.2020.01.001](https://doi.org/10.1016/j.jval.2020.01.001). PubMed PMID: **32113617**.
4. 112 Citations
Rothery C, Strong M, Koffijberg HE, Basu A, Ghabri S, Knies S, Murray JF, Sanders Schmidler GD, **Steuten L**, Fenwick E. (2020) Value of Information Analytical Methods: Report 2 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. *Value in Health*. Mar;23(3):277-286. doi:[10.1016/j.jval.2020.01.004](https://doi.org/10.1016/j.jval.2020.01.004). PubMed PMID: 32197720.
 5. 104 Citations
Zamora, B., Maignen, F., O'Neill, P., Mestre-Ferrandiz, J. and **Garau, M.**. 2019. Comparing access to orphan medicinal products in Europe. *Orphanet Journal of Rare Diseases*, 14(1), p.95. [10.1186/s13023-019-1078-5](https://doi.org/10.1186/s13023-019-1078-5).
 6. 85 Citations
Berdud M, Drummond M, and **Towse A.** (2020). Establishing a reasonable price for an orphan drug. *Cost Effectiveness and Resource Allocation* <https://doi.org/10.1186/s12962-020-00223-x>
 7. 84 Citations
Steuten, L., Goulart, B., Meropol, N.J., Pritchard, D. and Ramsey, S.D. 2019. Cost effectiveness of multigene panel sequencing for patients with advanced non-small-cell lung cancer. *Journal of Clinical Oncology*, (3), pp. 1-10. DOI: 10.1200/CCI.19.00002.
 8. 76 Citations
Wurcel, V., Cicchetti, A., Garrison, L., Kip, M.M., Koffijberg, H., Kolbe, A., Leeftang, M.M., Merlin, T., Mestre-Ferrandiz, J., Oortwijn, W. and Oosterwijk, C., Tunis, S., **Zamora, B.** 2019. The Value of Diagnostic Information in Personalised Healthcare: A Comprehensive Concept to Facilitate Bringing This Technology into Healthcare Systems. *Public Health Genomics*, pp.1-8.
 9. 69 Citations
Sampson, C.J., Arnold R., Bryan, S., Clarke, P., Ekins, S., Hatswell, A., Hawkins, N., Langham, S., Marshall, D., Sadatsafavi, M., Sullivan, W., Wilson, E.C.F., and Wrightson, T. (2019) Transparency in decision modelling: what, why, who and how? *PharmacoEconomics*. DOI: [10.1007/s40273-019-00819-z](https://doi.org/10.1007/s40273-019-00819-z).
 10. 53 Citations

Mott DJ, Shah KK, Ramos-Goñi JM, **Devlin NJ**, Rivero-Arias O. (2021) Valuing EQ-5D-Y-3L Health States Using a Discrete Choice Experiment: Do Adult and Adolescent Preferences Differ? Medical Decision Making. DOI:10.1177/0272989X21999607

OHE Publications (Peer-Reviewed), Funding, and Number of Downloads

No.	Publication	Sources of financial support	Number of downloads
1	El Banhawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L., (2024) Socio-Economic Value of Adult Immunisation Programmes. OHE Contract Research. Available from https://www.ohe.org/publications/the-socio-economic-value-of-adult-immunisation-programmes/	Contract funded (International Federation of Pharmaceutical Manufacturers and Associations)	838
2	Hodgson S., Hayes H., Cubi-Molla P., Garau M. (2024) Inequalities in Dementia: Unveiling the Evidence and Forging a Path Towards Greater Understanding. OHE Contract Research. Available from https://www.ohe.org/publications/inequalities-in-dementia	Contract funded (Alzheimer's Society)	194
3	Radu P. et. al., 2024 (2024) How Have HTA Agencies Evolved Their Methods Over Time?. OHE Contract Research. Available from https://www.ohe.org/publications/how-have-hta-agencies-evolved-their-methods/	Contract funded (Merck Sharp & Dohme)	207
4	Kumar G, Bray G, Pan J, Skedgel C, Dunton K, Fonseca Santos F, Genin P, Schroefel G. (2024) Incorporating the Patient Voice in Health Technology Assessment. OHE Contract Research. Available from https://www.ohe.org/publications/patient-voice-in-hta	Contract funded (Daiichi-Sankyo)	143
5	Napier M., Kourouklis D., Cole A., Cookson G (2024) The Dynamics of Drug Shortages. OHE Contract Research. Available from https://www.ohe.org/publications/the-dynamic-of-drug-shortages	Contract funded (Organon Pharma)	145
6	Napier M., Sampson C., Cole A., Garau M. (2024) A Framework for Value-aligned Pricing of Combination Therapies. OHE Contract Research. Available from https://www.ohe.org/publications/framework-for-value-aligned-pricing-of-combination-therapies/	Contract funded (Astellas Pharma)	117
7	Kumar G., Bray G., Steuten L. (2024) Unlocking the Value of Combination Therapies. OHE Contract Research. Available from https://www.ohe.org/publications/unlocking-the-value-of-combination-therapies/	Contract funded (The Association of the British Pharmaceutical Industry)	68
8	Napier M., Berdud, M. and Cole A. (2024) The Cost of Drug Shortages. OHE Contract Research. Available from https://www.ohe.org/publications/the-cost-of-drug-shortages/	Contract funded (Organon Pharma)	86
9	Henderson N, Bray G, Skedgel C (2024) Individual, Health System, and Societal Impacts of Anti-seizure Medicine Use During Pregnancy. OHE Grant-Funded Research. Available from https://www.ohe.org/publications/impacts-anti-seizure-medicine-use-during-pregnancy/	Contract funded (The Association of the British Pharmaceutical Industry)	40
10	Henderson N, Bray G, Skedgel C (2024) Individual, Health System, and Societal Impacts of Anti-seizure Medicine Use During Pregnancy. OHE Grant-Funded Research. Available from https://www.ohe.org/publications/impacts-anti-seizure-medicine-use-during-pregnancy/	Research funded (Epilepsy Society)	40
11	Kumar G., Napier M., Neri M., Garau M., (2024) The Socioeconomic Burden Of Cervical Cancer in the UK: What are the benefits of achieving the WHO elimination target?. OHE Contract Research. Available from https://www.ohe.org/publications/socioeconomic-burden-of-cervical-cancer	Contract funded (Merck Sharp & Dohme)	38*

* there has been a glitch on the website around this report we discovered late

Core-funded projects

Economics of innovation

Project	Summary	Investigators	Update on progress
Option Pricing	The use of real options in relation to pharmaceutical pricing has been promoted by the ISPOR Special Task Force on US Value Assessment Frameworks. How it can be calculated and used by payers in a way that avoids double-counting and rewards/targets investment appropriately is still being thought about. This core research project aims to move that thinking forwards via two invited editorials. The first is for <i>Value in Health</i> and will review a paper to be published. It will focus on whether payers should pay for option value. The second is for <i>Vaccine</i> . It will argue for payers being willing to add an option value to vaccine prices if this enables manufacturing capacity to be switched for use in a pandemic to be maintained.	Adrian Towse	This is now closed . There were two publications: Newall AT, Beutels P, Kis Z, Towse A, Jit M (2024). Placing a value on increased flexible vaccine manufacturing capacity for future pandemics. <i>Vaccine</i> . 2024 Mar 2:S0264-410X(23)00219-0. doi: 10.1016/j.vaccine.2024.02.065. Epub ahead of print. PMID: 36870878; PMCID: PMC9978930. Towse, A. (2022). Real Option Value: Should We Opt In or Out? Commentary. <i>Value in Health</i> Volume 25, Issue 11, 1818 – 1820 DOI: https://doi.org/10.1016/j.jval.2022.09.004
The impact of R&D tax credits on pharmaceutical innovation in the UK	This project studies the impact of the Research and Development Expenditure Credit (RDEC) scheme, designed to increase support for private research and development through tax credits. The use of R&D tax credits is a well-recognised method for providing a fiscal incentive that will reduce the cost of R&D; however, the literature has struggled to properly estimate its effect on true innovation. In general, studies fail to provide estimates on meaningful innovation and focusing on R&D spending means that results are highly subject to varying efficiencies between firms. This research considers the treatment group to be the UK and the treatment itself to be the implementation of the RDEC in 2013. However, the problem with causal inference in this kind of study is that the counterfactual is unobservable and finding another country that can act as a suitable control may not be possible. The Synthetic Control Method (SCM), developed by Abadie and Gardeazabal (2003), will allow us to estimate the treatment effect by comparing outcomes observed in the UK to a weighted convex combination of the same outcome variables measured in other similar countries. By evaluating the effectiveness of the RDEC policy in incentivising innovation, we can help countries such as the UK evaluate its importance and therefore inform essential cost-benefit analysis. Understanding the impact of the RDEC can also help countries like the UK assess its potential use in driving innovation in specific areas	Edward Oliver, Dimitrios Kourouklis Mireia Jofre-Bonet	It was presented at AHEA 2022 and published in <i>Research Policy</i> in 2024. The project is now closed.

	of health care that need it, such as genetic research, vaccinations, or other disease areas that face scarcity in therapeutic options.		
R&D competition & diffusion of innovation in the EU: the case of Hepatitis C	"The project seeks publication in a peer-reviewed journal of previous OHE Research work. We assessed the impact of (i) intellectual property protection incentives for R&D, (ii) market competition, and (iii) other factors, including healthcare policies, on access to Direct Acting Antivirals (DAAs) in Europe. The study combined an economic framework with analyses of market shares and uptake of DAAs and interviews with relevant stakeholders of six European Countries (France, Germany, Italy, Portugal, Spain and the UK) to assess the degree and nature of market competition for DAAs between 2014Q1 and 2017Q2. The theoretical models show that current R&D incentives based on IP protection in the EU can encourage in-patent competition. The uptake analyses showed that competition within the DAA class was intense in European markets soon after the launch of the first-in-class treatment. Evidence from our interviews suggested that in-class competition improved access and uptake and provided bargaining power to country payers. IP incentives for R&D may have encouraged a high degree of in-class competition among DAAs. The in-class competition positively impacted the uptake and adoption of DAAs in the top 5 European countries.	Mikel Berdud, Martina Garau, Margherita Neri, Phill O'Neill, Chris Sampson, Adrian Towse	Published as an OHE Research Paper . Journal write-up has been completed and the article was rejected from <i>Applied Health Economics and Health Research</i> . A resubmission is planned.
Setting out the conditions in which risk-sharing schemes improve value for money	Regulators have increasingly emphasised approving potentially important treatments rapidly, notably through accelerated access schemes. As a consequence, there is a challenge for payers. Products are launched with less evidence, creating greater uncertainty about their relative effectiveness and value for money. Previous research focusing on the use of Vol approaches to conditional approval has looked only at the case for only in-research (OIR) or only with research (OWR) and not considered risk sharing as an additional option. The research question is, "when does risk-sharing improve outcomes for patients and the health system –in terms of making cost-effective treatments available when they otherwise would be delayed or not made available at all? Specifically, the results should be robust to situations in which there are differences of opinion between manufacturers and payers around the value of new technology to the health system, which are unbiased (i.e., not negotiation posturing).	Adrian Towse, Liz Fenwick (Open Health)	We have a paper under review at <i>Value in Health</i> Towse A and Fenwick E. It takes two to tango. Setting out the conditions in which performance-based risk sharing arrangements work for both parties. Under review at <i>Value in Health</i> . This is a journal article version of a 2021 OHE research paper Towse, A. and Fenwick, E., 2021. It takes two to tango: when do conditional reimbursement risk-sharing schemes work for both parties? Setting out the conditions in which risk sharing schemes improve value for money.
Pharmaceutical policy and access to innovation in the United Kingdom after Brexit	Brexit was presented as an opportunity to promote innovation by breaking free from the European Union regulatory framework. Since the beginning of 2021 the Medicines and Healthcare products Regulatory Agency (MHRA) has operated as the independent regulatory agency for the United Kingdom.	Matthias Hofer	Collaboration with Imperial College London Business School didn't progress in 2024. A new

	<p>This project aims to update the first published analysis into the regulatory activity of the MHRA post Brexit. The analysis of regulatory activity of the year 2021 found that the MHRA remained reliant on EU regulatory decision-making for novel medicines and there were significant regulatory delays for a small number of novel medicines in the UK, the reasons being so far unclear. The updated analysis should cover a longer time frame and also look at access to medicines after MHRA approval.</p>		<p>collaboration with LSE to be established.</p>
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Value, affordability, and decision-making

Project		Investigators	Update on progress
ICER pricing, bargaining, and Cost-Effectiveness Thresholds (CETs)	<p>The project seeks publication in a peer-review journal of previous OHE consulting work for Roche. A novel supply and demand model of pharmaceutical markets is presented to analyse the relationship between the value of the CET and the distribution of new medicines' health and economic value between consumers (payers) and developers (life science industry). The model incorporates a bargaining process and bargaining power distributed between the payer and the developers, which impacts the distribution of the health and economic value of new medicines between the two parties.</p> <p>One of the paper's key findings is that, with a sufficiently large payer's bargaining power, an efficient CET value could be higher than the supply-side CET used for decision making. This result has important policy implications. For example, if market access for innovative medicines is based in HTA using CETs defined by the health system opportunity costs, there would be circumstances under which some cost-effective (in the long run) medicines would not be granted. This would result in reimbursement, and incentives for investing in future innovation would be undermined. This would produce inefficient resource allocation in the present, leading to not optimal innovation production in the future.</p>	Mikel Berdud, Adrian Towse	Completed. Peer review publication: Berdud, M., Ferraro, J., & Towse, A. (2024). A theory on ICER pricing and optimal levels of cost-effectiveness thresholds: a bargaining approach. <i>Frontiers in Health Services</i> , 3.
Value of life and health	<p>This paper follows up on a research project with Amgen and will be submitted for publication in 2021. Government departments regularly monetise the value of a life for the purposes of informing resource allocation. In many countries, guidance documents set out the manner in which economic evaluation should be conducted, often specifying the precise values to be used for different impacts. However, we find different values of life and health are used in analyses by departments despite commonality in outcomes, giving rise to potential inconsistencies in decision-making and considering trade-offs within a broader public sector spending budget. Our research intends to provide some evidence to better inform the political process and raise a number of important issues on assessing the value of public expenditure across different sectors. Our targeted literature review aimed to identify thresholds, explicitly or implicitly, as observed in government-related publications, which we understand to represent the government's willingness to pay for health gain.</p>	Patricia Cubi-Molla, Martina Garau, David Mott, Nadine Henderson	The paper received a reject and resubmit from <i>Cost Effectiveness and Resource Allocation</i> , resubmitted in November 2024.
Defining Affordability	<p>The objectives of this project are to Identify how 'affordability' in healthcare has been defined, described and implemented in the theoretical and empirical literature and in the UK policy debate. Propose a unified definition of affordability across different levels of healthcare decision-making and Identify possible ways to improve efficiency and consistency in how health systems handle affordability concerns.</p>	Gayathri Kumar, Patricia Cubi-Molla, Martina Garau, Gayathri Kumar, Matthew Napier, Phill O'Neill, Chris Sampson, George Bray	paused.
ISPOR Task Force: Antimicrobial resistance (AMR)	<p>The objective is to describe and further develop emerging good practices for value assessment of antimicrobials, including (but not limited to) in the context of a global pull incentive. The guide will improve estimations of the significant and multifaceted wider value offered by new antimicrobials, beyond that which has routinely been captured in value assessment to date. In doing so, the guide will also be relevant to other technologies to tackle AMR, such as diagnostics, which face several of the</p>	Grace Hampson	The proposal was submitted to ISPOR and suggestions for revisions were received

	same challenges and offer a similar value profile to new antibiotics.1 It will provide overarching recommendations on the approach(es) that should be taken and the criteria that should be considered when designing and conducting value assessment of new antibiotics and related technologies.2 It will also explore the implications of full quantitative assessment versus more pragmatic scoring approaches, as have been proposed in some jurisdictions (NHS England, 2024). Appropriate value assessment, as supported by the proposed guide to emerging good practices, will in turn support the implementation of effective pull incentives for the development of much-needed new antibiotics.		
Around the world in HTAs blog series	In this Insights series, Around the World in HTAs, we shed light on HTA around the world. A general overview of the health system in the country is given, followed by how health technologies are assessed. Then some of the main challenges of the system are introduced and next steps for the future are discussed. Each blog involves a collaboration with an external author/s	Gayathri Kumar, Patricia Cubi-Molla, Martina Garau, Gayathri Kumar, Matthew Napier, Phill O'Neill, Chris Sampson, George Bray	In 2024, 3 additional HTAs Around the World blogs were published.

Policy, organisation, and incentives in health systems

Project	Summary	Investigators	Update on progress
Primary Care Valued Output	This project aims to revise and resubmit a manuscript summarising the development of a framework to measure the valued output of primary care in England. This manuscript represents the second contribution of the Health Foundation-funded Efficiency Research Programme grant.	Margherita Neri, Patricia Cubi-Molla, Graham Cookson	Published on <i>Applied Health Economics and Health Policy</i> , 2024.
The Effect of Distance on Accident and Emergency Department Demand (new 2022)	When individuals choose to attend a hospital accident and emergency department (AED), they must incur both the time and financial costs of travel, which are both likely to increase with distance. The aim of this research is to quantify the relationship between travel distance and emergency department demand using area-level regression analysis. This research will also explore the extent to which the role distance travelled plays in the decision to attend an AED is dependent on the severity of the individual's condition. This work builds upon research conducted by Sian Besley for her MSc Health Economics dissertation and the findings of this project will be submitted to a health economics journal.	Sian Besley	Sian is awaiting final analysis results tables from her external co-authors. Once the final tables are available these will be added to the manuscript draft which is near completion.
GP demand response to waiting times for suspected cancer patients	Reducing waiting times is a priority in many public health systems. Efforts of healthcare providers to shorten waiting times may be negated if they simultaneously induce increases in demand. The existing health economics literature on the demand response to waiting times focuses on elective or non-urgent care. This study adds to this literature by exploring this relationship for urgent diagnosis of suspected cancer. Early detection of cancer is a key policy concern in the UK.	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	The paper is now published in the <i>European Journal of Health Economics</i>
The effects of payment unbundling on the utilisation of diagnostic imaging scans for suspected cancer patients	The overall aim of this study is to examine whether changes in the way that a hospital is reimbursed for diagnostic testing affects utilisation of tests for suspected cancer patients. This study examines a policy reform to the way that hospitals were reimbursed for diagnostic imaging scans, wherein a fee-for-service element was separated from the DRG-based system for hospital reimbursement for outpatient scans, also known as payment unbundling. This paper examines whether payment unbundling affected provider utilisation of scans, and conducts further analysis to ascertain whether the recorded effects represent a real change in the delivery of scans or a change in recording of scans.	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	Published in <i>Health Economics</i>

The effect of local hospital waiting times on GP referrals for suspected cancer	Reducing waiting times is a major policy objective in publicly-funded healthcare systems. However, reductions in waiting times can produce a demand response, which may offset increases in capacity. We used annual counts of referrals from all 6,667 general practices to all 185 hospital Trusts in England between April 2012 and March 2018. Using a practice-level measure of local hospital waiting times based on breaches of the two-week maximum waiting time target, we examined the relationship between waiting times and urgent GP referrals for suspected cancer. To identify the sources of variation (between practices or over time) that may drive this relationship, we estimated this using three regression models: pooled linear regression, a between-practice estimator, and a within-practice estimator.	Helen Hayes, (Rachel Meacock, University of Manchester Jonathan Stokes, University of Glasgow Matt Sutton, University of Manchester)	Published in <i>PLOS ONE</i>
Labour productivity and efficiency of general practices in England	This paper provides new evidence on labour productivity determinants and efficiency variables of general practices. The analysis used a longitudinal dataset of general practice-level, quarterly observations between 2018 and 2021, on a sample of 316 general practices in England. We estimated a general practice production model using stochastic frontier analysis to evaluate the marginal productivities of general practitioners (GPs) and nurses with respect to the volume of face-to-face, remote and total consultations delivered; the substitution and complementarity between these roles; and the technical efficiency of general practices. The aim of this project is to complete a manuscript for submission to The European Journal of Health Economics.	Margherita Neri, Graham Cookson, (Eugenio Zucchelli, Università autonoma de Madrid, Bruce Hollingsworth, University of Lancaster)	Updating the paper for resubmission
Development of a synthetic index of primary care output in England: a feasibility study	In this project we explore potential methodologies for and the feasibility of creating a synthetic index aggregating the indicators of valued output, developed as part of an OHE research grant funded by the Health Foundation on primary care efficiency. This index will capture the outcome produced by primary care, with the aim of making the framework developed in our project available for actual use by researchers or policymakers. The aim of this project is to complete a manuscript for submission to Applied Health Economics and Health Policy.	Patricia Cubi-Molla Margherita Neri Graham Cookson	Completing the paper for journal submission
Socioeconomic and demographic determinants of the double burden of malnutrition among mother-child pairs in Nigeria: overweight mothers and stunted children	Nigeria has historically had a high burden of chronic undernutrition, but overweight and obesity rates are increasing. This phenomenon, called the double burden of malnutrition (DBM), is increasingly observed in low- and middle- income countries. At the household level the DBM can manifest as mother-child DBM (MCDBM). This study aims to address the research gaps by exploring the distribution of and risk factors for household-level DBM in Nigeria at the national level. Specifically, study objectives are to: (1) estimate the prevalence of MCDBM and its' components (child stunting and maternal overweight/obesity); (2) describe the percentage distribution of MCDBM and its' components according to socioeconomic and demographic factors; and (3) investigate the socioeconomic and demographic determinants of MCDBM in Nigeria.	Hania El Banhawi, (Neha Batura, University College London, Rolando Leiva-Granados, University College London)	Imputing missing data for robustness and revising text for journal submission

Measuring and valuing outcomes

Project	Summary	Investigators	Update on progress
Assessing the quality of life of carers of patients with cystic fibrosis manuscript	This project's aim is to (modify and) publish the WIP manuscript for the CF Carer QOL project completed in 2020, contributing to the (sparse) evidence base of carer QOL for CF carers in the UK.	David Mott, Sulayman Chowdhury	The manuscript has been submitted to <i>Quality of Life Research</i> , still under review, decision to be made very soon early 2025

OHE events

The OHE run an array of educational virtual and face to face events with the new addition of hybrid events this year. These events include specialised webinars, workshops, parliamentary launches, and an annual lecture. This section provides an update on all of the OHE events held over 2024:

Webinars

1. On January 31st, OHE streamed the 2023 Insights and Reflections webinar live to 373 registrants. The webinar explored which OHE research trends had the biggest impact in the previous year and discussed which emerging issues were identified for 2024. Key themes were prevention, sustainability, innovative outcome measures and key policy reforms.
2. 'The Future of NICE in a changing HTA Landscape' webinar took place on March 27 and featured a series of short interviews capturing the most pressing issues and advancements in HTA. There were 491 registrations.
3. On the 4th of September OHE led a webinar titled 'Green Healthcare: Are We Asking the Right Questions', which had 197 registrations. The webinar explored the pressing need for the healthcare sector to address its impact on climate change whilst balancing ever-growing financial constraints.

Sponsored Webinars

4. OHE led a Takeda sponsored webinar titled 'Efficiency and Labour Productivity of Primary Care in England' on April 23rd. The webinar provided an outlook on the labour productivity and efficiency patterns of general practices in England and proposed how to improve measurement of efficiency. There were 253 registrations.
1. Organon commissioned a webinar titled 'Drug Shortages: What are the causes, consequences and pathways to a solution?' on the 24th of September. The panel discussed the range of international government policy measures to secure sustainable and resilient medicine supply. There were 284 registrations.

Roundtables

1. On the 19th of July, OHE led an advisory board on the macroeconomic benefits of Covid-19 vaccines. There were 12 attendees.
2. On the 8th of August, OHE ran a roundtable in Brazil to gather country- specific insights to analyse and communicate the benefits of optimal HIV prevention in Brazil for government decision making. There were 20 participants.
3. On the 28th November 2024, OHE convened an expert group comprised of HTA experts from Asian-Pacific countries and subject matter experts on the broader value of medicines for the ongoing BRAVER project. The meeting was virtual and had 24 participants in total. The BRAVER project aims to identify opportunities

and recommendations for the inclusion of broader value elements, including societal perspective, into HTA guidelines and decision making within the Asia-Pacific region. The expected outcomes include a whitepaper report by OHE to be published in Q1 2025.

OHE external events

4. On the 23rd January, OHE highlighted their recommendations from the report: 'The Individual, Health System, and Societal Impacts of Anti-Seizure Medicine Use During Pregnancy' in parliament. The report launch was convened alongside the Epilepsy Society and was supported by Caroline Nokes. Cross-party MPs (including the Minister for Disabled People), patient advocates, academics, media and industry convened in the House of Commons' Pavilion.
5. On the 24th of January, OHE attended a parliamentary event to coincide with Cervical Cancer Prevention Week. OHE presented the findings from the report: 'The Socioeconomic Burden of Cervical Cancer in the UK: what are the benefits of achieving the WHO elimination target?'. OHE shared the platform with the Secretary of State for Health.
6. On June 12th, OHE attended the Global Sustainable Development Congress, convened by The Times Higher Education in Thailand. OHE led a panel titled 'Charting a Healthy Future: Health, climate, and the SDGs'. There were 75 live attendees.
7. "On the 8th of July, OHE spoke at a parliamentary event in Ireland, showcasing the findings from the report, 'The Value of Adult Vaccination in Ireland'".
8. 2024 Annual Lecture: On the 8th October, OHE brought Professor Andrew J Scott to the stage to give a talk titled 'The Preventive Health Revolution: Live Longer, Live Better'. The lecture re-evaluated prominent perceptions of ageing and argues for the need to focus on a longevity society. 180 registrants attended the event, held at the prestigious One Birdcage Walk Lecture Hall. The lecture was followed by a drinks and networking reception in the Marble Gallery.
9. On 18th November in Barcelona, OHE participated in a roundtable convened by AstraZeneca. The Access to Innovative Medicines in Cancer (AIMC) initiative roundtable was on 'Improving Timely Access to Cancer Therapies: Addressing Uncertainty in Value Assessments'.

Brown-bag lunch seminars

Finally, we also hosted four different brown-bag lunch seminars:

1. The relative value of health gains by age)- Ashwini De Silva
2. C Health Inequalities: Under-treated Conditions and Unwarranted Treatment Variations - Collete Whitelegg
3. Severity Priority Setting in Norway - Dr Mathias Barra

4. The role of gamification in combatting vaccine hesitancy and misinformation: evidence from a randomised controlled trial. - Sayuri Rentschler.

External impact (beyond scientific citations)

In this section we aim to provide an idea of the impact of OHE research that goes beyond the number of publications and/or scientific citations. We first present a selection of impactful outputs by other metrics, and, we illustrate some of this impact with some summary statistics of the downloads and visits to our website, as well as a list of our advisory roles and external presentations.

Selection of Impactful Research Outputs

In 2024, OHE's research was impactful across many important topics. The following is a selection of the most notable, based on level of activity, digital channel metrics and broader coverage.

1. **Healthy vegan diets** – The year started strongly with a great example of a small project with a big impact. Research commissioned by the Vegan Society, and timed to coincide with Veganuary, resulted in mainstream UK coverage in the [Daily Mail](#), extensive social media engagement and a [reaction piece](#) in the Health Service Journal.

As the year has progressed, the results have been quoted in several national media articles ([Independent](#) and [Independent](#)), indicating that it has already become a key element of the evidence base for making decisions around health and a vegan diet.

The [accompanying Insight](#) was the most visited of 2024 with 1,395 views.

2. **Adult immunisation** – Our most impactful project of 2024 was undoubtedly the research commissioned by IFPMA around the socio-economic value of adult immunisation programmes. This was a fantastic example of collaboration between OHE and a funder working closely to play to individual strengths. The total downloads were well above any other report in 2024 (see graphs below) and it was also hosted on the IFPMA website where it was downloaded 358 times.

Alongside UK national coverage ([Daily Telegraph](#)) there was a wide range of international coverage (inc [STAT](#) and [Pink Sheet](#)) and some high-profile paid-for opportunities ([Politico](#)). This was partly due to IFPMA mobilising the national organisations and their media relationships but also OHE's own relationships.

The success of the report resulted in a follow-on project in Ireland which included an event in the Irish parliament and [media coverage](#).

3. Leader in HTA

- Our MSD-funded research on how HTA agencies in 14 countries have changed over time was our second most downloaded new report and was also popular on our social media channels.
- Our efforts to celebrate NICE's 25th anniversary were popular on our social channels as a complement to the webinar we held.
- Due to an Insight on the website about severity modifiers, we were approached by multiple journalists to comment on the Enhertu NICE decision. We were able to use this as an opportunity to explain the complex mechanism behind the decision to a broad audience in [The Sun](#) and [Mail on Sunday](#).

Notable mentions:

- **Doctors' spending power** – some core-funded research contributed to a piece of [award-winning](#) journalism [in the BMJ](#) that also resulted in national coverage ([The Guardian](#)).
- **NHS productivity puzzle** – our Health Foundation funded research on efficiency in primary care provided the source for an [opinion piece in the Health Service Journal](#).
- **AMR** – due to our prominent work in this area we were approached for multiple articles on the topic ([PharmaPhorum](#) and The Raconteur supplement of The Times).

Website, Insights & Social Media

We have continued to have substantial activity on our website and our social media channels are growing. We have achieved the following reach as in 2024:

- Number of research insights (previously termed blogs) published on website: 22 (plus 15 bulletins and 6 news updates, compared to 5 updates in the same period of 2023)
- Number of publication downloads: 7,529 (compared to 6,132 in the same period of 2023)
- Number of website visits: 115,220 (compared to 89,104 in the same period of 2023)
- Mailing list subscribers: 11,339 (compared to 9,533 in 2023)
- LinkedIn Followers: 12,749 (compared to 9,926 in 2023)
- Twitter followers: 6,069 (compared to 5,843 in 2023)

Our analytics are more conservative, as repeat views of the same page are now measured as a single 'visit', and users are also able to opt-out of monitoring of their visits and downloads for privacy reasons. Our website analytics also demonstrate the geographic reach of our website. We have over 42,144 users in 170 countries.

This year we continue the work to refine our mailing strategy, by removing duplicates, addresses sending bounce backs, and individuals who had not interacted with our last 15 emails. Furthermore, working on a more sustainable email strategy to drive engagement. Our total mailing list grown from 9,533 to 11,339. Our monthly newsletter operates on an 'opt in' basis and we circulate it to 5,355 people.

OHE Website Users

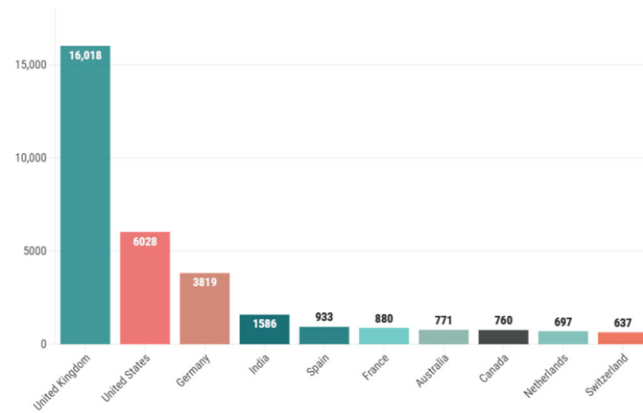


FIGURE 1 TOP 10 LOCATIONS FOR OHE WEBSITE USERS

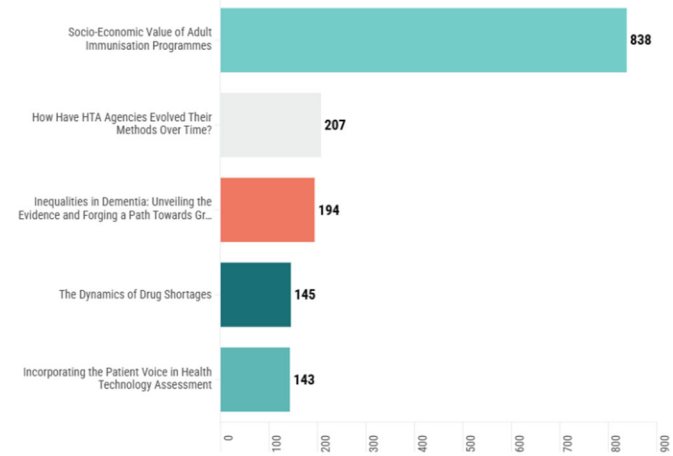


FIGURE 2: TOP 5 DOWNLOADS OF 2024 OHE REPORTS IN THE YEAR 2024.

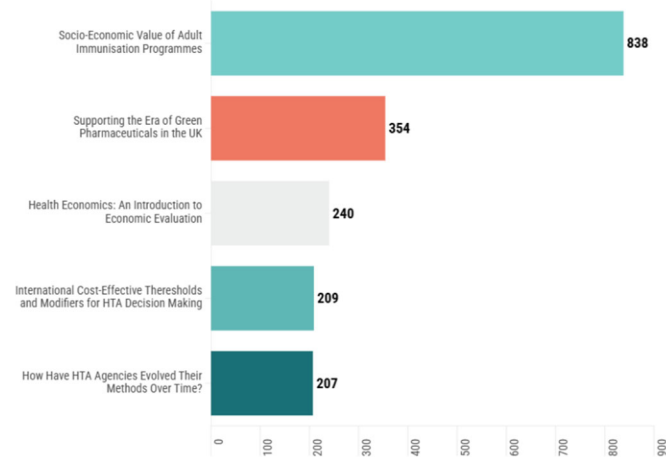


FIGURE 3: TOP 5 DOWNLOADS OF ALL OHE REPORTS IN THE YEAR 2024.

When looking at the top downloads in 2024, highest interest and impact is observed in OHE publications on adult vaccination and dementia, the evolvement of health technology assessment (HTA), the impact of patient voices, drug shortages and the improvement of the supply chain, green healthcare and sustainability and cost-effective thresholds and modifiers for HTA on the international level.

Advisory roles

The number of advisory roles held by OHE staff members has continued to grow, reflecting their strong influence on policy and their recognized contributions to the research and policy community. This impact aligns with OHE's charitable objective of steering health policy and decision-making in health economics and creating capacity by transferring health economics research capacity to students and other individuals at different stages of their careers.

OHE STAFF MEMBERSHIP OF ADVISORY PANELS, BOARDS AND COMMITTEES

Advisory Panels

Health Foundation

- Member of the Steering Committee for NHS Workforce Retention Project – Graham Cookson

HTAi

- Working Group on early HTA – Amanda Cole

ISPOR

- Co-Chair ISPOR Special Taskforce on Value-Based Healthcare – Lotte Steuten
- Member of the ISPOR Health Science Policy Council (Policy Outlook Committee) – Amanda Cole

NHS England

- Primary Care Transformation Programme: Quantitative Working Group – Graham Cookson

NIHR

- Steering Committee Member for NIHR/HS&DR Project No. 8/17/1934 – Graham Cookson
- Steering Committee for the LOGiC – Long term Outcomes for Gender Identity in Children Study – funded by NIHR. Sites: Portman-NHS; UCL; U. Liverpool, U. Cambridge, UCLH – Mireia Jofre-Bonet
- Steering Committee for ADVANCE – National Addiction Centre Institute of Psychiatry, Psychology and Neuroscience – King's College London – Mireia Jofre-Bonet
- Steering Committee for the Supporting Wellbeing Through PEeR-Befriending (SUPERB) Trial – City, University of London, and UCLH, Kings College – Mireia Jofre-Bonet
- Member of the Institute 4 Innovation (i4i) & Office of Life Sciences Real World Evidence Programme Committee – Lotte Steuten

Scientific Committee of the European Health Economic Association (EuHEA)

- Member of the Scientific Committee of the European Health Economic Association (EuHEA) meeting 2024 – Mireia Jofre-Bonet

Interest Groups/Task Forces

AES

- Evaluation of Health Policies and Health Care Services (EvaluAES) Member – Patricia Cubí-Molla

Clinton Foundation Global Initiative

- Climate x Health Committee – Charlotte Ashton

IMPACT-HTA

- Scientific Experts and Methodologists Group (SEM) Delphi Panel Member of the IMPACT-HTA (WP7) project “Improved methods and actionable tools for enhancing HTA” – Martina Garau

EuroQol

- Member of the Valuation Working Group – David Mott
– Chris Sampson

iHEA

- Member of the ‘health systems’ efficiency’ interest group – Margherita Neri
- Mental Health Economics Special Interest Group – Chris Sampson (Lead Convenor)

ISPOR

- Member of the ‘Value of Information’ Task Force – Lotte Steuten
- Statistical Methods in Health Economics and Outcomes Research Special Interest Group Member – Graham Cookson
- Oncology Special Interest Group Member – Graham Cookson
- Rare Disease Special Interest Group Member – Graham Cookson
- Health Preference Research Group Member – David Mott
- Digital Health Special Interest Group Member – Simon Brassel, Chris Sampson
- Global Access to Medical Innovation Special Interest Group (GAMI SIG) – Amanda Cole

Editorial Roles

Applied Health Economics and Health Policy Journal

- Editorial Board Member – Lotte Steuten
- Member of the Editorial Board – Patricia Cubi-Molla

PharmacoEconomics

- Editorial Board Member – Chris Skedgel

PLOS One

- Editorial Board Member – Mireia Jofre-Bonet

Grant Panel Advisory Groups

NICE

- Expert Advisers Panel for the Centre for Guidelines – Mireia Jofre-Bonet

NIHR

- Invention for Innovation (i4i) Product Development Awards Committee B (Member) – Chris Sampson

UKRI/ESRC/MRC

- ESRC/UKRI Peer Review College – Mireia Jofre-Bonet
- ESRC/UKRI Peer Review College (member) – Chris Sampson

Spanish Health Economics Association (AES)

- Panel for the research grant “Becas de investigacion en Economia de la Salud”, awarded by the Spanish Health Economics Association (AES), funder: Novartis – Patricia Cubi-Molla

“la Caixa” Foundation

- Peer Review of Grants by “la Caixa” Foundation, Spain – Mireia Jofre-Bonet

Visiting Positions for OHE Staff**City, University of London**

- Honorary Visiting Professor, Department of Economics – Lotte Steuten
- Honorary Visiting Professor, Department of Economics – Graham Cookson
- Honorary Visiting Professor, Department of Economics – Mireia Jofre-Bonet
- Honorary Senior Research Fellow in the Department of Economics in the School of Policy & Global Affairs at City, University of London – Patricia Cubí-Molla

Fred Hutch Cancer Research Center, University of Washington

- Affiliate Investigator – Lotte Steuten

Imperial College Business School

- Centre for Health Economics & Policy and Innovation Visiting Researcher – Matthias Hofer

Medical University of Vienna

- Visiting Scientist – Chris Skedgel

Public University of Navarra

- Visiting Researcher – Mikel Berdud

University College London (UCL)

- Honorary Professor of Practice – Amanda Cole

University of East Anglia

- Honorary Senior Fellow – Chris Skedgel

University of Surrey

- Visiting Professor – Graham Cookson

Centre de Recerca en Economia de la Salut (CRES), Universitat Pompeu Fabra, Barcelona, Spain

- Senior Associate Researcher – Mireia Jofre-Bonet

Memberships: Many OHE researchers are also members of associations such as **ISPOR, IHEA, HESG, AES, EuroQoL**, and **iHTA**.

External presentations

	Presentation Detail
1	<p>Date: January 11, 2024 Presenter: Mireia Jofre-Bonet Event: HESG Winter 2024 Location: Exeter Presentation title: How Does Unexpected Demand Affect Queue Prioritisation In Emergency Care? What was your presentation about? I discussed a paper that analyses how unexpected demand shifts in Emergency Departments in England affect prioritisation of patients and how these changes might affect differently protected characteristics of patients (age, biological sex at birth, etc.). The study uses the Hospital Episodes Survey on patients visiting Emergency Departments between April 2017 and March 2018. How many people were in the audience: 30 Authors: I. Francetic, R. Meacock, L. Siciliani, and M. Sutton</p>
2	<p>Date: 12th January 2024 Presenter: Chris Sampson Event: HESG winter 2024 Location: Exeter Presentation title: Discussion of 'Mobilising health economics research: priorities for action' by Rebecca Kandiyali What was your presentation about? NA How many people were in the audience (approx number): 60 Authors: NA</p>
3	<p>Date: 21st January 2024 Presenter: Amanda Cole Event: Podcast What was your presentation about? In this podcast episode produced by The Evidence Base®, Amanda Cole, Emily Reuben OBE, Karen Facey and Matt Hickey discussed the growing need for managed-access agreements in the assessment and reimbursement of pharmaceuticals. Amanda shared insights from research conducted in collaboration with RAND Europe for Cancer Research UK (CRUK) on outcome-based payment, which aims to align payment with patient value, address decision uncertainty, and allow payment only when the medicine works as intended.</p>
4	<p>Date: 23rd January 2024 Presenter Nadine Henderson</p>

	<p>Event What is the cost of a disability? (Epilepsy Society) Location Thames Pavilion, Houses of Parliament, Westminster Presentation Title Overview of OHE report "Individual, Health System, and Societal Impacts of Anti-seizure Medicines Use During Pregnancy" What was your presentation about? Prevention remains at the heart of our mission as we navigate through these critical issues. The insights presented at this event highlighted the multifaceted benefits of proactively addressing health challenges. How many people were in the audience: 50 Nadine Henderson, George Bray, Chris Skedgel</p>
5	<p>Date: 24th January 2024 Presenter: Gayathri Kumar Event: Parliamentary event hosted by MSD and Evoke Incisive; sponsored by Jess Phillips MP and opening speech by Victoria Atkins MP, Secretary of State for Health Location: Houses of Parliament Presentation title: The socioeconomic benefits of eliminating cervical cancer in the UK What was your presentation about? Key findings from the OHE report on the socioeconomic benefits of eliminating cervical cancer in the UK. The presentation outlined OHE's research approach, the headline results and recommendations for accelerating the path to elimination. How many people were in the audience (approx number): 50 Authors: Gayathri Kumar, Matthew Napier, Margherita Neri, Martina Garau</p>
6	<p>Date: 31st January 2024 Presenter: Margherita Neri Event: Team Meeting of the Health Foundation REAL centre Location: online Presentation title: Efficiency and Labour Productivity of Primary Care in England What was your presentation about? Presentation on the findings of an econometric analysis about the labour productivity and efficiency of general practices in England. How many people were in the audience (approx number)25 Authors: Margherita Neri, Graham Cookson, Eugenio Zucchelli, Bruce Hollingsworth</p>
7	<p>Date: 12th February 2024 Presenter: Amanda Cole Event: Guest Lecture for UCL's MBA in Health programme Location: UCL, Marshgate East Campus Presentation title: Adapting how we pay for innovative medicines in the life sciences industry. What was the presentation about: Presentation on why we may need to change the way we pay, to adapt to the promise and challenge of new innovation in treatments. The presentation focused on two examples - the cancer drugs fund / innovative medicines fund and outcome-based payment - and described the role of real-world data in these envisioned solutions.</p>

	How many people were in the audience (approx number 40) Authors: Amanda Cole
8	Date 16 th February 2024 Presenter: Lotte Steuten, Event Roundtable: Virtual presentation Presentation title "Discounting Practices in Public Decision-Making: Is the system fit For purpose?" What was the presentation about? The Case of cost-effectiveness analyses of Gene Therapies for Inherited Eye Disease Topic: discounting and gene therapies How many people were in the audience (approx number)100 Authors: Lotte Steuten
9	Presenter Sian Besley, Date: 17th February 2024 Event: International Conference on Duchenne and Becker Muscular Dystrophy Location: Rome, Italy Presentation title: The Race to Improve Assessment of Gene Therapies and Facilitate Patient Access What was your presentation about? Our poster aimed to inform patients, their families, clinicians and other researchers about the challenges of HTA of gene therapies and provided our recommendations for overcoming these challenges. The poster also demonstrated whether 9 European countries, Australia and Canada were achieving these recommendations and discussed examples of best practice. How many people were in the audience (approx number) Authors: Sian Besley, Nadine Henderson, Matthew Napier, Amanda Cole and Grace Hampson (OHE) Lauren Diamond, Safiyya Gassman, David Fortier, Ruth Kim (Pfizer, Inc).
10	Presenter Graham Cookson Date: 21 st February Event: Economist Thought Leadership Working Group/DLA Piper Location: Washington Presentation title: Evidence: Market Size and Investment in R&D, Working Group What was your presentation about Graham was invited by DLA Piper to join alongside a group of economists whose work already does, or has the potential to, affect drug pricing policy in the U.S. The February meeting was a continuation of the October 2023 webinar focusing on the the Inflation Reduction Act "Maximum Fair Price" provision and evidence that could be used to inform future changes to the law or new proposals to expand price controls. The working group discussed a draft report that they had co-authored and discussed need areas of research and possible grant programs to apply to How many people were in the audience (50)
11	Presenter: Graham Cookson Event Date: 21 st February 2024

	<p>Location: Washington</p> <p>Event We Work For Health CBO Roundtable Discussion</p> <p>What was the event about</p> <p>We Work For Health (WWFH) convened a roundtable discussion in response to the Congressional Budget Office (CBO) post from December 2023. The roundtable explored the impacts of policy decisions have on the biopharmaceutical industry as well as ultimate patient outcomes and discuss opportunities to help inform CBO as they review future policies under consideration.</p> <p>How many people were in the audience (50)</p>
12	<p>Presenter: Graham Cookson</p> <p>Event Date: 27th February</p> <p>Location London</p> <p>Event: Association of British Insurers Annual Conference</p> <p>Presentation title: "Invested in people and planet - Investing in healthy lives."</p> <p>Graham joined as a speaker at the Association of British Insurers Annual Conference. The panel discussed how Healthy life expectancy has increased, but not as much as life expectancy. The talk explored the socio-economic factors, behavioural aspects, and their complex interactions leading to health inequalities. Graham focused on the changes in healthy life expectancy and health inequality. The presentation focused on the benefits of investing in prevention-based research based on on OHE's 'Reimagining Prevention, for a Healthier, More Prosperous Society' research.</p> <p>How many people were in the audience (200)</p>
13	<p>Date: 2nd March 2024</p> <p>Presenter: Mireia Jofre-Bonet</p> <p>Event: Warwick Women in Economics Society Conference - International Women's Day</p> <p>Location: University of Warwick</p> <p>Presentation title: Reflections on a career in Health Economics</p> <p>What was your presentation about? About my career in economics as a woman and introduction to health economics</p> <p>How many people were in the audience (approx. number) 75</p> <p>Authors: Mireia Jofre-Bonet</p>
14	<p>Presenter: Lotte Steuten</p> <p>Date: 12th March 2024</p> <p>Event: World Evidence, Pricing and Access Congress</p> <p>Location: Amsterdam</p> <p>Presentation title: 'Novel payment models: is this where HTA and VBHC "meet in the middle"?</p> <p>The session will cover the importance of implementing novel payment models to balance value, affordability and innovation of care. Lotte will address the key challenges associated with implementing these models in practice and highlight how a shift towards value-based healthcare can help overcome these challenges.</p> <p>How many people were in the audience (30)</p>

15	<p>Presenter: Martina Garau Date: 13th March 2024 Event: World Evidence, Pricing and Access Congress Location: Amsterdam Presentation title: NICE enough? Do NICE decision outcomes impact international HTA decision-making? What was your presentation about: a study showing how NICE guidance and its supporting evidence have an impact on HTA decision-making in countries beyond the UK. How many people were in the audience (30) Authors: Henderson N., Brassel S., O'Neill P., Allen R., Largeron N., Garau M.</p>
16	<p>Date: 14th March 2024 Presenter: Mikel Berdud Event: Lecture at MsC Health Economics programme at City, University of London Location: City university of London, London, UK Presentation title: Economics of Pharmaceutical Markets What was your presentation about? About the R&D of new medicines' process and cost, market failures characterising the pharmaceutical markets, mechanisms to fix market failures and incentives for innovation. How many people were in the audience (20) Authors: Mikel Berdud</p>
17	<p>Presenter: Graham Cookson Date: 20th March 2024 Location: Washington Event: Paths to Progress: Understanding Policy's Broad Impact on US Leadership in Biopharma Presentation title: We Work For Health Paths to Progress: Understanding Policy's Broader Impact on US Leadership in BioPharma Graham was invited to join a moderated discussion in Washington exploring the impact policy decisions have on biopharmaceutical industry and opportunities to help inform the congressional budget office (CBO) as it reviews future legislation. Speakers include Douh Holtz-Eakin (President of American Action Forum) and former CBO Director; Duane Schulthess (CEO of vital Transformation); Ken Thorpe (Professor and the Department of Health Policy and Management at Emory University) How many people were in the audience (approx number 50)</p>
18	<p>Date: 21st March 2024 Presenters: Amanda Cole, Matthis Hofer, Helen Hayes, George Bray, Sulayman Chowdhury Event: University of Southern California Doctoral Student Delegation visit to OHE Location: OHE offices, London Presentation title: Introduction to OHE; Reimagining Prevention; Combating AMR; The Carer Qaly Trap; Discounting: what can we learn from environmental economics?</p>

	<p>What was your presentation about? A showcase of our work to a delegation of 12 USC doctoral student and faculty members from the program Regulatory Sciences in Europe and the Americas.</p> <p>How many people were in the audience (approx number) 12</p> <p>Authors: as above.</p>
19	<p>Date: 27th March 2024</p> <p>Presenter: Charlotte Ashton</p> <p>Event: Clinton Health Initiative Climate x Health Seminar Location: Online</p> <p>Presentation title: Change Initiative: Environmental Sustainability and the Global Healthcare Lifecycle</p> <p>Presentation focused on the Initiative and our new membership of the Clinton Health Initiative Group</p> <p>How many people were in the audience (approx number): 75</p>
20	<p>Date 16th April 2024</p> <p>Presenter: Martina Garau</p> <p>Location Brussels</p> <p>Event <u>Economist Impact</u>'s 2nd Cell & Gene Therapy Summit</p> <p>Presentation Title</p> <p>The talk was around the need for innovative payment models to ensure access to CGTs</p> <p>How many people were in the audience (approx number): around 80</p>
21	<p>Date 16th April 2024</p> <p>Presenter: Martina Garau</p> <p>Location Brussels</p> <p>Event <u>Economist Impact</u>'s 2nd Cell & Gene Therapy Summit</p> <p>Presentation Title 'From theory to practice: the market impact of HTA legislation'</p> <p>Martina moderated the session and provided an introduction on explain key concepts (such as JCA and PICO) and set up the access problem that many ATMPs face in Europe (i.e. wide variation in access among countries and evidence availability at launch vs HTA agencies' evidence requirements).</p> <p>Audience: <u>around 80</u></p>

22	<p>Date: 16th April 2024 Presenter: Nadine Henderson Event: Cell & Gene Collective's Patient Voice Summit Location: Broadway House, Westminster, London "Panel 2: Improving data collection to ensure cell and gene therapies deliver for patients" Discussed the necessity of capturing long-term patient-relevant data, the involvement of patient organisation in developing standardised disease registries and the importance of collaboration and education in data collection How many people were in the audience: 50 N/A</p>
23	<p>Date: 19th April 2024 Presenter: Simon Brassel Event: Economics of Longevity: Challenges and Opportunities Location: Washington D.C.. UN Foundation Presentation title: Socio-economic value of adult immunisation programs What was your presentation about? I presented the results from our related project as a contribution to High-level event alongside the G20 Finance Minister's Meeting and World Bank Group and IMF Spring Meetings in Washington DC, USA. How many people were in the audience (approx number)15 Authors: El Banhawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L.</p>
24	<p><u>Date: 22nd April 2024</u> <u>Presenter: Grace Hampson</u> Event World Federation of Hemophilia (WFH) Congress <u>Presentation : New Horizons: The Value of Continued Innovation in Hemophilia</u> <u>Grace lead the discussion at Pfizer's satellite symposium on 'New Horizons: The value of continued innovation in hemophilia' panel.</u> <u>Speakers: moderated by Grace Hampson, Meryem Nimour, Daniel-Aníbal García Diego, Cedric HERMANS MD PhD FRCP (Lon.Edin), Lou Garrison and Malcolm Qualie</u> <u>This session focused on the recent progress, identifying remaining unmet needs, and exploring the next steps for innovation in this critical space.</u> <u>How many people were in the audience (approx number)50</u></p>
25	<p>Date: 22nd April 2024 Presenter: Mikel Berdud Event: II HI-PRIX Consortium Meeting Location: Hamburg, Germany Presentation title: Impact of innovative payment schemes on long-term competition in health technology markets, in particular the pharmaceutical market</p>

	<p>What was your presentation about? About research methodology for a project assessing the impact of Innovative Payment Models on Long-term competition in Pharmaceutical markets</p> <p>How many people were in the audience (30)</p> <p>Authors: Mikel Berdud, Amanda Cole, Mireia Jofre-Bonet</p>
26	<p>Date: 23rd April 2024</p> <p>Presenter: Mikel Berdud</p> <p>Event: II HI-PRIX Consortium Meeting</p> <p>Location: Hamburg, Germany</p> <p>Presentation title: Mapping of payment and pricing schemes for health innovation in the EU: implementation, barriers and enablers</p> <p>What was your presentation about? Preliminary results of a research on the costs and benefits, and the barriers and enablers for Innovative Payment Models implementation</p> <p>How many people were in the audience (30)</p> <p>Authors: Mikel Berdud, Amanda Cole, Mireia Jofre-Bonet</p>
27	<p>Date: 24th April 2024</p> <p>Presenter – Lotte Steuten</p> <p>Event: NHS Confederation –The Economic Benefit of Vaccines</p> <p>Presentation Title: Are Vaccinations the shot in the arm the economy and health service need?</p> <p>Tune in to the discussion on the broader impact of vaccinations beyond public health on the latest episode of Hosted by Matthew Taylor, this episode features Prof. Lotte Steuten, PhD and Christopher Thomas from the IPPR.</p> <p>Find out more about the economic and societal benefits of vaccinations, including return on investment, elective recovery, presenteeism, and more.</p> <p>How many people were in the audience (unknown)</p>
28	<p>Date: 30th April 2024</p> <p>Presenter: Chris Sampson</p> <p>Event: NICE Technical Forum</p> <p>Location: Online</p> <p>Presentation title: The future of the QALY: replacement or revision?</p> <p>What was your presentation about?</p> <p>The Quality-Adjusted Life Year (QALY) metric, pivotal in health care decision-making, faces increasing scrutiny due to methodological criticisms and anti-rationing lobbying efforts. This Technical Forum will first explore various proposed alternatives to the QALY, such as Health Years in Total (HYT) and the Equal Value of Life Years Gained (evLYG). We will assess the suitability of these metrics as replacements for the QALY. Second, the session will address an important flaw in current approaches to the estimation of QALYs—specifically, the challenges in valuing 'dead' states—and argue for a fundamental revision to the interpretation of QALYs. The discussion will underscore the irreplaceability of QALYs, while advocating for continuous methodological revisions to the estimation of QALYs, refinement of their interpretation, and clarity on their role in decision-making.</p> <p>How many people were in the audience (approx number): 70</p>

	Authors: Chris Sampson
29	<p>Date: 1st May 2024 Presenter: Patricia Cubi-Molla Event: Lecture as part of the module "Pharma and Economic Evaluation", for MSc in Health Management (City University of London) Location: online Presentation title: Measuring Health Outcomes What was your presentation about? Basic introduction to health outcome measurement as part of the HTA in England How many people were in the audience (approx number): 55 Authors: Patricia Cubi-Molla. Module leader: Charitini Stavropoulou</p>
30	<p>Date: 6th May 2024 Presenter: Tori Dawer (Mireia Jofre-Bonet, Alistair McGuire, Josh Roth, Sean Sullivan) Event: ISPOR USA 2024 Location: Atlanta Presentation title: A Targeted Literature Review to Identify the Dimensions of Sustainable Global Biosimilars Markets What was your presentation about? How the entry of biosimilars in the USA pharmaceutical market have affected prices of both biosimilars and originator products How many people were in the audience 35 Authors: Tori Dawer (Mireia Jofre-Bonet, Alistair McGuire, Josh Roth, Sean Sullivan)</p>
31	<p>Date: 7th May 2024 Presenter: Amanda Cole Event: ISPOR International 2024 Location: Atlanta Presentation title: Value Assessment and Reimbursement of Early Treatment for Prevention of Chronic Progressive Diseases: Are Traditional Approaches Up to the Task? What was your presentation about? I described the challenges from a reimbursement perspective, drawing on examples from Alzheimer's and gene therapies, and demonstrating the role for innovative and outcome-based payment models to address uncertainty and manage budget impact. Issue Panel presenters: Will Herring, Amanda Cole, Chuck Phelps, Boshen Jiao. How many people were in the audience (approx number) 1,000</p>
32	<p>Date: 7th May 2024 Presenter: Amanda Cole Event: ISPOR International 2024 Location: Atlanta</p>

	<p>Presentation title: How Elastic is Biopharmaceutical Innovation With Respect to Expected Reward? What Is Missing From Existing Literature on Elasticity of Innovation?</p> <p>What was your presentation about? I present a select set of existing empirical estimates of the elasticity of innovation from the literature and described the strengths and weaknesses of the Congressional Budget Office (CBO) forecasts of the impact of policies that curb biopharmaceutical revenue (e.g. the Inflation Reduction Act) on innovation.</p> <p>Issue Panel presenters: Gunnar Esiason, Amanda Cole, Darius Lakdawalla, Peter Kolchinsky</p> <p>How many people were in the audience (approx number) 1,000</p>
33	<p>Date: 7th May 2024</p> <p>Presenter: Matthias Hofer</p> <p>Event: ISPOR International 2024</p> <p>Location: Atlanta</p> <p>Presentation title:</p> <p>What was the presentation about: During the podium session starting at 13:45 EDT on 7 May, Matthias Hofer presented the analysis of the novel antimicrobial subscription scheme in the UK and shared the answers to question 'Are proposals for a scheme to stimulate investment in critically needed new antimicrobials fit for purpose?'</p> <p>How many people were in the audience? (60-70)</p>
34	<p>Date: 15th May 2024</p> <p>Presenter Nadine Henderson</p> <p>Event Title: Gesundheit Österreich GmbH / Austrian National Public Health Institute webinar: Greener Pharmaceuticals.</p> <p>Presentation title: "The role of pharmaceuticals in achieving net zero: greener pharmaceuticals in the UK"</p> <p>An overview of greener pharmaceuticals and health system from the UK perspective, presenting parts of the "Supporting the Era of Green Pharmaceuticals" OHE Report.</p> <p>How many people were in the audience: 50</p>
35	<p>Date: 24th May 2024</p> <p>Presenter Chris Skedgel</p> <p>Location : ,Philippine International Convention Center, Manila</p> <p>Event: ASPIRE24, 23-26 May</p> <p>Presentation Title: Unlocking the Value of Fertility Medicines Using Health Economic Studies' panel</p> <p>Chris will take part in the company symposium 1 by Merck discussing 'Unlocking the Value of Fertility Medicines Using Health Economic Studies'.</p> <p>He will describe how "value" is assessed in fertility treatment and provide an overview of the evidence around the relative value of different therapies.</p> <p>Speakers: chaired by <u>Romerico Torres</u>, David Humphreys and Michael Costello</p> <p>How many people were in the audience (approx number) 300</p>

36	<p>Date 30th May 2024 Presenter Lotte Steuten Location: Geneva</p> <p>Event Title: Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset</p> <p>Presentation title: Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset'</p> <p>OHE has published a report on the Socio-economic Value of Adult Immunization recently. This report discusses the role of adult vaccination programs in health and societal challenges while aligning with global agendas like the UN Sustainable Development Goals and the WHO Immunisation Agenda 2030 (IA2030).</p> <p>During the 'Demonstrating the full societal value of adult immunization: The importance of adopting a prevention-first mindset' Lotte will provide an overview of the project, the objectives, and discuss the results, and recommendations.</p> <p>Speakers: moderated by Lise Pedersen, Lotte Steuten, Stefania Maggi, Agnes Soares, Tania Cernuschi, Jane Barratt, and Christi G. Kelsey</p> <p>How many people were in the audience (50)</p>
37	<p>Date: 10th June 2024 Presenter: Charlotte Ashton Location: Bangkok, Thailand</p> <p>Event Title: Global Sustainable Development Congress</p> <p>Presentation Title: 'Delivering sustainable healthcare through effective collaboration and impactful outreach'</p> <p>What was your presentation about? My presentation focused on measuring the success and impact of programmes on the overall health and well-being of communities, from baseline surveys through to health indicators and tracking changes in specific health metrics e.g. vaccination rates. I also looked at how it is essential to tailor programmes to address specific health needs across localities e.g. the EVIA programme and its effectiveness in sub-Saharan Africa.</p> <p>Approx. 150 N/A</p>
38	<p>Date: 11th June 2024 Presenter: Charlotte Ashton Location: Bangkok, Thailand</p> <p>Event Title: Global Sustainable Development Congress</p> <p>Presentation title 'Sustainable, resilient healthcare: What have we achieved so far?'</p> <p>What was the presentation about:</p> <p>My presentation explored the measures that are being used to improve access to healthcare, from HTS to value-based pricing. I also looked at the barriers to sustainable healthcare access which included economic constraints, regulatory challenges and inequitable resource allocation, drawing on lessons from existing healthcare interventions and cross-sector partnerships including the Access to Medicines Index and our own Change Initiative.</p> <p>Approx. 50 N/A</p>

39	<p>Date: 12th June 2024 Presenter: Grace Hampson Location: Bangkok, Thailand Event Title: Global Sustainable Development Congress Presentation title: Rethinking research and innovation for equitable healthcare Approx 50</p>
40	<p>Date: 12th June 2024 Presenters: Charlotte Ashton and Grace Hampson Location Bangkok, Thailand Event Title: Global Sustainable Development Congress Presentation title: 'Charting a healthy future: Health, climate and the SDGs' What was your presentation about? During the presentation Grace and Charlotte shared their thoughts on 'Charting a healthy future: Health, climate and the SDGs' discussion.' Approx. 50 N/A</p>
41	<p>Date: 13th June 2024 Presenter Grace Hampson Location: Bangkok, Thailand Event Title: Global Sustainable Development Congress Presentation title: 'The health workforce crisis: Ensuring a resilient workforce for resilient healthcare systems' What was your presentation about? Grace shared her research on how we can ensure a resilient workforce to provide a resilient healthcare system Audience 50</p>
42	<p>Date: 12th June 2024 Presenter: Graham Cookson Location Congressional Budget Office Washington Event: Drug Innovation Modelling Presentation title Modelling innovation in pharmaceutical markets. Graham was invited to give a presentation to a mix of PhD economists and masters of public policy people at the CBO in Washington. Audience 50</p>
43	<p>Date: 15 June 2024 Presenter: Martina Garau Event: HTAi Workshop Characterizing why Rare Diseases Create Evidence Generation Challenges for HTA Location: Seville</p>

	<p>Presentation title: Economic modelling in rare diseases: insights from the literature and a survey.</p> <p>What was your presentation about? Insights from a literature review as part of the Rare Disease Interest Group (RDIG) and the launch of a survey to HTAi members</p> <p>How many people were in the audience/online?: around 40 people</p> <p>Authors: Farzana Malik and Martina Garau</p>
44	<p>Date: 15-19 June 2024</p> <p>Presenter: Martina Garau</p> <p>Event: HTAi virtual poster</p> <p>Location: Virtual / Seville</p> <p>Presentation title: Comparison of Health Technology Assessment Methodologies across Australia, Canada, New Zealand and the UK: Implications for Future HTA Collaborations</p> <p>What was your presentation about? Comparing method guides of a selection of HTA agencies to explore implications of international collaborations</p> <p>How many people were in the audience/online? : unknown</p> <p>Authors: Nadine Henderson, Claud Theakston, Simon Brassel, Martina Garau (OHE), Rachel Allen, Nathalie Largeron, Kinga Malottki Yuti Patel Kirsten Garces Megan Coombes, Vanessa Xavier (Sanofi)</p>
45	<p>Date: 15-19 June 2024</p> <p>Presenter: Martina Garau</p> <p>Event: HTAi pre-recorded panel sessions</p> <p>Location: Virtual / Seville</p> <p>Presentation title: Economic Modelling For Rare Diseases: What Are The Challenges And How Can The HTA Community Overcome Them?</p> <p>What was your presentation about? Exploring challenges and solutions of economic methods in rare diseases with a panel bringing different perspectives (HTA, industry, health economists)</p> <p>How many people were in the audience/online?: unknown</p> <p>Authors: Farzana Malik, Saskia Knies, Jameel Nazir, Andrew Briggs, Martina Garau</p>
46	<p>Date: 16 June 2024</p> <p>Presenter: Martina Garau</p> <p>Event: HTAi Workshop Unlocking Rare Diseases Economic Modelling: Health Technology Assessment Implications, Methodological Standpoints, and Multi-Perspective Solutions for Current Challenges</p> <p>Location: Seville</p> <p>Economic modelling in rare diseases: insights from the literature and a survey.</p> <p>What was your presentation about? Insights from a literature review as part of the Rare Disease Interest Group (RDIG) and the launch of a survey to HTAi members</p> <p>How many people were in the audience/online?: around 40 people</p> <p>Authors: Farzana Malik and Martina Garau</p>

47	<p>Date: 15-19 June 2024 Presenter: Martina Garau Event: HTAi pre-recorded panel sessions Location: Virtual / Seville Presentation title: Innovation For Alzheimer's Disease: How To Prepare For New Disease-Modifying Treatments Value Assessments? What was your presentation about? Exploring challenges related to value assessment and provisions of Alzheimer's treatments, bringing the HTA and the patient perspectives. How many people were in the audience/online?: unknown Authors: Martina Garau, Jackie Glatter, Angela Bradshaw, Meindert Boysen</p>
48	<p>Date: 5th July 2024 Presenter: Chris Sampson Event: Health Economists' Study Group Location: University of Warwick Presentation title: Discussion of 'Productivity and efficiency: measuring different things gives different results' by Daniel Howdon What was your presentation about? NA How many people were in the audience/online?: 40 Authors: NA</p>
49	<p>Date: 9th July 2024 Presenter: Sian Hodgson Event: HSRUK Conference Location: Oxford Presentation title: Inequalities in Dementia in England, Wales and Northern Ireland: Unveiling the Evidence and Forging a Path Towards Greater Understanding. What was your presentation about? This poster was presented during a poster walkthrough session. The presentation and poster summarised the findings of the OHE report, providing a summary of our key literature findings and case studies that assessed whether it is possible to measure inequalities in dementia. How many people were in the audience/online? (approx. number) 15 Authors: Sian Hodgson, Helen Hayes, Patricia Cubi-Molla, Martina Garau</p>
57	<p>Date: 9th July 2024 Presenter: Margherita Neri Event: HSR UK Conference 2024 Location: Oxford Presentation title: Efficiency and productivity of general practices in England</p>

	<p>What was your presentation about? Results of an empirical analysis of efficiency across general practices in England and of the determinants of productivity</p> <p>How many people were in the audience/online? : 40</p> <p>Authors: Margherita Neri, Bruce Hollingsworth, Eugenio Zucchelli, Graham Cookson</p>
59	<p>Date: 10 July 2024</p> <p>Presenter: Lotte Steuten</p> <p>Event: Ambrosetti Roundtable “The value of prevention for economic growth and the sustainability of healthcare, social care and welfare systems”</p> <p>Location: Brussels (I attended virtually)</p> <p>Title: Value of Adult Vaccination</p> <p>What was the presentation about: Socioeconomic value of adult vaccination</p> <p>Audience: 150</p> <p>Authors: Lotte Steuten, Simon Brassel</p>
60	<p>Date: 26 July 2024</p> <p>Presenter: Martina Garau</p> <p>Event: Cell and Gene Collective Commission: Session 1</p> <p>Location: Virtual</p> <p>Title: Value assessment of Cell & Gene Therapies: international practice and possible next steps in England.</p> <p>What was the presentation about: Value assessment of Cell & Gene Therapies</p> <p>Audience: closed meeting</p> <p>Authors: NR</p>
61	<p>Date: 4 September 2024</p> <p>Grace Hampson</p> <p>Event: CER/WifOR hybrid discussion on 'EU fiscal policy: Is health a no-brainer public investment?'</p> <p>Brussels</p> <p>EU fiscal policy: Is health a no-brainer public investment</p> <p>~40</p>
62	<p>Date: 11th September 2024</p> <p>Presenter: Patricia Cubi-Molla</p> <p>Event: Opening lecture - Inauguration of MSc/PhD in Quantitative Economics</p> <p>Location: University of Alicante</p> <p>Presentation title: "Health Economics for non-economist decision-makers"</p> <p>What was your presentation about? How to bridge the evidence produced by health economic researchers ('idealism') with the practical realities faced by stakeholders involved in real-world applications ('pragmatism')</p> <p>How many people were in the audience/online: 60</p> <p>Authors: Patricia Cubi-Molla</p>

63	<p>Date: 12th September 2024 Presenter: Chris Sampson Event: IHEA Mental Health Economics SIG webinar - 'Quantifying mental health: research on measurement in mental health economics' Location: Online Presentation title: NA - I was just chairing the webinar What was your presentation about? How many people were in the audience/online?: 35 Authors: NA</p>
64	<p>Date: 16th September 2024 Presenter: Mikel Berdud Event: IX Expert Program on Health Policy and Pharmacoeconomics Location: Mallorca, Spain Presentation title: " Prices and pharmaceuticals: is transparency good or bad for population health?" What was your presentation about? Based on the results of the OHE research paper "The Future of Global Health Procurement: Issues around Pricing Transparency" I discussed whether the price transparency can contribute to improve population health and reflected on some policy recommendations separately for innovative medicines and generics/biosimilars. Themes I touched were: if transparency is a good in itself, how transparency of prices relates to the risk of collusion, separating price transparency from process transparency, price transparency and bargaining power, differential pricing, value-based pricing and competition. How many people were in the audience/online?: 60 Authors: Mikel Berdud</p>
65	<p>Date: 16th September 2024 Keynote Speaker: Mireia Jofre-Bonet Event: IX Expert Program on Health Policy and Pharmacoeconomics Location: Mallorca, Spain Title: " The challenges for the pharmaceutical sector of providing healthcare systems under financial strain?" What was your presentation about? This summarized the challenges that the pharmaceutical sector is facing due to the extreme financial pressures that most health systems are experiencing due to pandemic shock in 2020-21, sociodemographic changes, and other causes. How many people were in the audience/online?: 60 Authors: Mireia Jofre-Bonet</p>
66	<p>Date: 18th September 2024 Presenter: NA (our paper was discussed by someone else) Event: EuroQol Plenary Location: Noordwijk, Netherlands Presentation title: Mary Shelley's Frankenstein: a metaphor for EuroQol instrument development and use</p>

	<p>What was your presentation about? A discussion of the risks associated with the success of the EQ-5D and its adaptation and application in different contexts.</p> <p>How many people were in the audience/online? : 150</p> <p>Authors: Paula Lorgelly and Chris Sampson</p>
67	<p>Date: 19th September 2024</p> <p>Presenter: Chris Skedgel</p> <p>Event FT Live - "Improving ALM Care"</p> <p>Location: Online</p> <p>Presentation title: Discussing cost drivers in acute myeloid leukaemia</p> <p>What was your presentation about? This Financial Times Digital Dialogue, held in partnership with Daiichi Sankyo Europe, brought together AML patient advocates and carers, physicians, health system representatives and other leading AML experts to discuss what needs to be done to improve patient care in AML, and the actions that can be taken to reduce the economic burden of the disease while improving outcomes for patients, families and caregivers.</p> <p>200 registered; 84 online</p>
68	<p>Date: 30th September 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: Cell & Gene Collective Commission on Tomorrow's Science, Today's NHS: Briefing for Evidence Session 2 – Reimbursement</p> <p>Location: Virtual</p> <p>Presentation title: Expert Witness statement and response to commissioners' questions.</p> <p>What was your presentation about? Reimbursement - to consider optimal innovative finance models that, in the context of the Voluntary Pricing and Growth Scheme (VPAG), can support the NHS to pay for and allow timely access to CGTs.</p> <p>How many people were in the audience/online? : 12 (other expert witnesses, Commissioners, and the Cell & Gene Collective secretariat)</p> <p>Authors: Amanda Cole</p>
69	<p>Date: 3rd October 2024</p> <p>Presenter: Chris Sampson</p> <p>Event: CEVR Health Policy Seminar</p> <p>Location: Boston, MA</p> <p>Presentation title: The future of the QALY: replacement or revision</p> <p>What was your presentation about? The shortcomings of proposed alternatives to the QALY and the importance of improving QALY estimation.</p> <p>How many people were in the audience/online? : 20 in person, 30 online</p> <p>Authors: Chris Sampson</p>
70	<p>Date 17th October 204</p> <p>Presenter: Simon Brassel</p> <p>Event: Tagesspiegel Impfgipfel 2024</p>

	<p>Location: Berlin, Germany</p> <p>Presentation title: Der sozioökonomische Nutzen von (Erwachsenen)impfprogrammen.</p> <p>What was your presentation about? I gave an impuls presentation laying out the broader value elements on immunisation programs, before reporting on our IFMPA funded work on the socioeconomic value of adult immunisation and providing policy recommendations to policymakers present. I then joined a panel discussion with representatives of academia, pharmaceutical industry and payers.</p> <p>How many people were in the audience/online? : (approx. number) 40-50 in in the room, plus unknown number in a live stream plus later audience as the video is published on their platform.</p> <p>Authors: El Banhawi H., Chowdhury S., Neri M., Radu P., Besley S., Bell E., Brassel S., Steuten L.,</p>
71	<p>Date: 29th October 2024</p> <p>Presenter: Margherita Neri</p> <p>Event: PROTECT-EUROPE Masterclass 8 - The Economic Case for HPV Vaccination: Securing Health, Saving Lives</p> <p>Location: online</p> <p>Presentation title: The socioeconomic benefits of eliminating cervical cancer in the UK</p> <p>What was your presentation about? Presentation on socioeconomic burden of cervical cancer in the UK and the benefits of achieving the WHO elimination target</p> <p>How many people were in the audience/online?: 35</p> <p>Authors: Gayathri Kumar, Matthew Napier, Margherita Neri, Martina Garau</p>
72	<p>Date 7th November 2024</p> <p>Presenter: Lotte Steuten</p> <p>Event HTAi Asia Pacific</p> <p>Location: Seoul, S-Korea</p> <p>Title: Going Braver: Towards a societal perspective in HTA</p> <p>Topic: societal perspective in HTA</p> <p>Lotte Steuten presented at the The Asia Policy Forum which is a leadership meeting for senior representatives from public and private sector organizations using HTA from the Asia Pacific region. .</p> <p>Audience: 50 Authors: Matthias Hofer, Claude Theakston, Martina Garau, Lotte Steuten</p>
73	<p>Date 12th November 2024</p> <p>Presenter: Chris Sampson</p> <p>Event: NCCN 2024 Global Academy for Excellence & Leadership in Oncology</p> <p>Location: Online</p>

	<p>Presentation title: Module II: The Role of Health Technology Assessment (HTA) and other Value Considerations</p> <p>What was your presentation about? Discussion of HTA processes globally</p> <p>How many people were in the audience/online? : 65</p> <p>Authors: NA</p>
74	<p>Date: 13th November 2024</p> <p>Presenter: Mireia Jofre-Bonet</p> <p>Event: Lecture at St George's City, University of London</p> <p>Location: London</p> <p>Presentation title: The Pharmaceutical Market and Drug Pricing. Regulation, Market Dynamics, and Ethical Considerations</p> <p>What was your presentation about? Landscape of the Pharmaceutical Market and Drug Pricing.</p> <p>How many people were in the audience/online? : (approx. number) 25</p> <p>Authors: n/a</p>
76	<p>Date: 17th November 2024</p> <p>Presenter: Lotte Steuten</p> <p>Event: ISPOR Short Course Programme</p> <p>Location: Barcelona, Spain</p> <p>Title: Concepts and Approaches to Early-Stage Health Technology Assessment".</p> <p>Lotte co led a short course to demystify the objectives of early-stage health technology assessment and the methods of translational health economics. Students in the course gained a thorough understanding of available methods for early-stage technology assessment, the specific challenges and solutions, and a clear sense of how to implement this in the complexity of health technology development, funding, regulation, pricing, and reimbursement. The course utilised real-world examples and students had the opportunity to strategize about the creation of a research plan for their purposes.</p> <p>Faculty: Lotte Steuten, PhD, Office of Health Economics, London, LON, UK William Canestaro, PhD, MSc, Washington Research Foundation, Seattle, WA, USA; Erik Landaas, PhD, MPH, W. L. Gore & Associates, Inc., Flagstaff, AZ, USA</p> <p>Audience: 35</p> <p>Authors: Lotte</p>
77	<p>Date 18th November</p> <p>Presenter: Chris Skedgel</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title Should Health Technology Assessment Include the Bereavement Effect on Health-Related Quality of Life? What Difference Could It Make to Decisions About Life-Extending Treatments?,</p>

	Chris Skedgel moderated an issues panel
78	<p>Date 18th November 2024 Presenter: Chris Skedgel Event: ISPOR Europe 2024 Location: Barcelona Presentation title Putting Breast Cancer into a Societal Perspective: How Can We Account for Its Full Impact in HTA? Chris Skedgel moderated an issues panel</p>
79	<p>Date: 18th November 2024 Presenter: Grace Hampson Event: ISPOR Europe 2024 Location: Barcelona Presentation title: Balancing Budgets and Breakthroughs: Does Budget Impact Analysis Systematically Disadvantage Gene Therapies? What was your presentation about? Budget impact analysis for gene therapies How many people were in the audience/online? : (approx. number) 300 Authors: Grace Hampson, Nadine Henderson, Paul Oyalo</p>
79	<p>Date: 18th November 2024 Presenter: Lotte Steuten /Event: ISPOR Conference Location: Barcelona, Spain Title: Broader Value Elements: Methods to Quantify Each and Their Relevance for European Markets Topic: Broader value elements Audience: 150 Authors: Lotte</p>
80	<p>Date: 19th November 2024 Presenter: Lotte Steuten Event: ISPOR Conference Location: Barcelona, Spain Title: From Research to Policy to Patients: Measuring the Impact of Health Economics and Outcomes Research Lotte Steuten participated in the ISPOR Forum, "From Research to Policy to Patients: Measuring the Impact of Health Economics and Outcomes Research (HEOR)." OVERVIEW: Jan Hansen (Genentech) moderated this session and set the context by explaining global shifts in HEOR organization and investment. Rob Abbott (ISPOR) presented the importance of measuring HEOR's impact in the context of ISPOR's Strategic Plan 2030. Laura Pizzi (ISPOR) discussed the impact measures that ISPOR currently uses, and opportunities to improve them and Lotte Steuten (OHE) discussed ways to measure the impact of HEOR on methods guidelines, healthcare policies and patients, using the example of an analysis with BMJ Impact Analytics that tracked the trajectory and use</p>

	<p>of HEOR research in real-time. James Chambers (Tufts University) discussed the impact of HEOR on coverage decisions using data from the Tufts Medical Center Specialty Drug Evidence and Coverage (SPEC) Database. Drawing on these examples, panellists will debate the approaches to HEOR impact measurement, including the role of data-driven methods and AI-tools, and establish a call to action for the use of these measures as well as development of new measures.</p> <p>Moderator: Jan E. Hansen, PhD, US Medical Affairs, Genentech, South San Francisco, CA, USA</p> <p>Speakers: Rob Abbott, -, CEO & Executive Director, ISPOR, Lawrenceville, NJ, USA; Laura Pizzi, PharmD, MPH, Chief Science Officer, ISPOR, Lawrence Township, NJ, USA; Lotte Steuten, PhD, Office of Health Economics, London, LON, UK; James Chambers, PhD, MPharm, Center for the Evaluation of Value and Risk in Health, Institute for Clinical Research and Health Policy Studies, Tufts Medical Center, Boston, MA, USA</p> <p>Audience: 150</p> <p>Authors: Lotte</p>
81	<p>Date: 19th November 2024</p> <p>Presenter: Simon Brassel</p> <p>Event: Politico Health Care Summit</p> <p>Location: Brussels</p> <p>Presentation title: Panellist on Panel discussing Health Care Systems resiliency and the health workforce</p> <p>What was your presentation about? n/a</p> <p>How many people were in the audience/online? : (approx. number) 448 audience / 53k+ views</p> <p>Authors: n/a</p>
82	<p>Date 19th November 2024</p> <p>Presenter: Chris Skedgel and Helen Hayes</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title Is NICE Too Severe With Severity? Exploring How Well Its Severity Modifier Aligns With UK Preferences, Helen Hayes & Chris Skedgel – poster</p>
83	<p>Date: 19th November 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: ISPOR Europe 2024</p> <p>Location: Barcelona</p> <p>Presentation title: [Issue Panel] Are There More Optimal Approaches to Managing Pricing and Reimbursement of Multi-Indication Medicines to Better Facilitate Patient Access?</p> <p>I provided an overview of the challenges and solutions from a broad, international perspective, highlighting the views of different stakeholders and solutions implemented.</p> <p>Audience: around 800</p> <p>Panelists: Jens Grueger; Amanda Cole, Claudio Jommi; Julien Patris</p>

84	<p>Date: 19th November 2024 Presenter: Amanda Cole Event: ISPOR Europe 2024 Location: Barcelona Presentation title: [Issue Panel] Challenges and Opportunities for Modeling the Impact of Cell and Gene Therapies in the Context of Evolving Regulatory Environments I moderated the session presented the background and context of evolving regulatory pathways that may influence and present challenges as well as opportunities for CGT modelling and uptake. Audience: around 250 Panelists: Amanda Cole, Varun Ektare, Salah Ghabri, Indranil Bagchi</p>
85	<p>Date: 19th November 2024 Presenter: Grace Hampson Event: ISPOR Europe 2024 Location: Barcelona Presentation title: Lessons From Climate Change Models: What Can Health Economists Learn From Environmental Economists' Modelling Methodologies? What was your presentation about? Environmental impacts in HTA How many people were in the audience/online? : (approx. number) 250 Authors: Grace Hampson</p>
86	<p>Date: 20th November 2024 Presenter: Grace Hampson Event: ISPOR Europe 2024 Location: Barcelona Presentation title: Taking the Greener Pill: A Case Study for Incorporating Carbon Footprint in Health Technology Assessment What was your presentation about? Environmental impacts in HTA How many people were in the audience/online? : (approx. number) 100 Authors: Grace Hampson</p>
87	<p>Date: Nov 20 Presenter: Lotte Event: AZ Side Event to ISPOR Location: Barcelona, Spain Title: HTA in 2030: what have we solved, what are the new challenges? Topic: HTA</p>

	<p>Audience: 100</p> <p>Authors: Lotte Steuten</p>
88	<p>Date: Nov 21</p> <p>Presenter: Lotte</p> <p>Event: Pfizer Side Event to ISPOR</p> <p>Location: Barcelona, Spain</p> <p>Title: Economic value of vaccines: summary of OHE's research for Pfizer</p> <p>Topic: Economic value of vaccines</p> <p>Audience: 120</p> <p>Author: Lotte Steuten</p>
89	<p>Date: 3rd December 2024</p> <p>Presenter: Grace Hampson</p> <p>Event: Global AMR Concerns</p> <p>Location: Brussels, Germany</p> <p>Title: From UN Declaration to EU Action</p> <p>Topic: POIHS - featuring keynote speaker Prof Dame Sally Davies. The event includes a panel discussion with Malin Grape, Grace Hampson, and Aleksandra Opalska. https://womenat.com/w-at-ls-global-amr-concerns</p> <p>Audience: N/A</p> <p>Authors: Grace Hampson</p>
90	<p>Date: 04 Dec 2024</p> <p>Presenter: Lotte Steuten</p> <p>Event: Annual Business at OECD Health Forum</p> <p>Location: Paris</p> <p>Presentation title: Socio-economic value of adult vaccination</p> <p>What was your presentation about? Socio-economic value of adult vaccination</p> <p>How many people were in the audience/online? : 100</p> <p>Authors: Chowdhury S, El Banhawi H, Bell E, Neri M, Brassel S, Steuten L.</p>
91	<p>Date: 6th December 2024</p> <p>Presenter: Patricia Cubi-Molla</p> <p>Event: Guest lecture for module "Introduction to Economic Evaluation" for MSd Health Economics and MSc Economic Evaluation in Health Care at City St George's, University of London</p> <p>Location: City St George's, University of London</p> <p>Presentation title: On HTA reforms, severity modifiers, and resource allocation</p>

	<p>What was your presentation about? Part 1 was on HTA reforms: An international comparison and drivers for changes. Part 2 was on Severity modifiers: NICE HTA methods guidelines: key points and discussion on modifiers. Part 3 presented Resource Allocation in Public Sector Programmes: Does the Value of a Life Differ Between Governmental Departments?</p> <p>How many people were in the audience/online? : 5</p> <p>Authors: Patricia Cubi-Molla</p>
92	<p>Date: 17th December 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: All Party Parliamentary Group (APPG) on Genetic, Rare and Undiagnosed Conditions</p> <p>Location: Portculis House, Westminster</p> <p>Presentation title: [no title]</p> <p>What was your presentation about? I presented my personal and professional views on the most pressing need for change in the support of rare disease patients: better access to diagnosis, better coordinated care, better data sharing, and better opportunities to contribute to research. The objective was to increase awareness in parliament among MPs and peers of these issues, to support a long-term strategy for the UK.</p> <p>How many people were in the audience/online? : 30</p> <p>Authors: Amanda Cole</p>
93	<p>Date: 18th December 2024</p> <p>Presenter: Amanda Cole</p> <p>Event: AstraZeneca Value Strategy Pathway Key Opinion Leader event</p> <p>Location: Virtual</p> <p>Presentation title: Indication-based pricing: research and progress</p> <p>What was your presentation about? Summarising our research on IBP, its implementation, and current policy discussions in the UK. Presenting to AstraZeneca leads in Italy and key opinion leaders from academia, payer, regulatory, modelling experts and hospital pharmacists.</p> <p>How many people were in the audience/online? : 20</p> <p>Authors: Amanda Cole</p>

Appendix

Citations over time – pre-2024

NO.	JOURNAL REFERENCE	Sources of financial support	NUMBER OF CITATIONS (AS OF 1 OCT 2024)1	SJR Indicator (2023)2	ABS JOURNAL RANKING (2021)3
2023					
1	Laliotis, I., Shaikh, M., Stavropoulou, C. and Kourouklis, D., 2023. Retirement and Household Expenditure in Turbulent Times. <i>Journal of Family and Economic Issues</i> . https://link.springer.com/article/10.1007/s10834-022-09884-7 DOI: 10.1007/s10834-022-09884-7	Unfunded	0	0.722	2
2	Di Fusco, M.; Mendes, D.; Steuten, L.; Bloom, D.E.; Drummond, M.; Hauck, K.; Pearson-Stuttard, J.; Power, R.; Salisbury, D.; Towse, A.; Roiz, J.; Szabo, G.; Yang, J.; Marczell, K. The Societal Value of Vaccines: Expert-Based Conceptual Framework and Methods Using COVID-19 Vaccines as a Case Study. <i>Vaccines</i> 2023, 11, 234. https://doi.org/10.3390/vaccines11020234 https://www.mdpi.com/2076-393X/11/2/234	Unfunded	7	1.201	N/A
3	Zamora, B. and Towse, A., 2023. The Cost-Per-QALY Threshold In England: Addressing Structural Uncertainty In The Estimates. <i>Frontiers in Health Services</i> . https://www.frontiersin.org/articles/10.3389/frhs.2022.936774 DOI: 10.3389/frhs.2022.936774	ABPI	2	N/A	N/A
4	Yaman, F., Cubí-Mollá, P. and Ungureanu, S., 2023. Which Decision Theory Describes Life Satisfaction Best? Evidence from Annual Panel Data. <i>Journal of Happiness Studies</i> https://link.springer.com/article/10.1007/s10902-023-00627-5 DOI: 10.1007/s10902-023-00627-5	Core funded	4	1.480	1
5	Skedgel, C., Cubí-Molla, P., Mott, D., Gameiro, S., Boivin, J., Al-Janabi, H., Brazier, J., Markert, M., Andersson, F. L., Jofre-Bonet, M., 2023. Unmet Parenthood Goals, Health-Related Quality of Life and Apparent Irrationality: Understanding the Value of Treatments for Infertility. <i>PharmacoEconomics – Open</i> . https://link.springer.com/article/10.1007/s41669-023-00402-5 DOI: 10.1007/s41669-023-00402-5	Ferring P21B	3	0.658	2
6	Banal-Estañol, A., Jofre-Bonet, M., Lor, G., Maynou, L., Tumminello, M., Vassallo, P., Performance-based research funding: Evidence from the largest natural experiment worldwide, <i>Research Policy</i> , Volume 52, Issue 6, 2023, 104780, ISSN 0048-7333, https://doi.org/10.1016/j.respol.2023.104780 .	Unfunded	11	3.219	4*

NO.	JOURNAL REFERENCE	Sources of financial support	NUMBER OF CITATIONS (AS OF 1 OCT 2024)1	SJR Indicator (2023)2	ABS JOURNAL RANKING (2021)3
7	Berdud, M., Wallin-Bernhardsson, N., Zamora, B., Lindgren, P., & Towse, A. (2023). The Allocation of the Economic Value of Second-Generation Antipsychotics Over the Product Life Cycle: The Case of Risperidone in Sweden and the United Kingdom. <i>Value in Health</i> , 26(3), 328-335. https://www.sciencedirect.com/science/article/abs/pii/S1098301523000402 DOI: 10.1016/j.jval.2022.11.022	Contract funded (Johnson & Johnson)	3	1.507	N/A
8	Newall AT, Beutels P, Kis Z, Towse A, Jit M (2023). Placing a value on increased flexible vaccine manufacturing capacity for future pandemics. <i>Vaccine</i> . 2023 Mar 2:S0264-410X(23)00219-0. doi: 10.1016/j.vaccine.2023.02.065. Epub ahead of print. PMID: 36870878; PMCID: PMC9978930. https://www.sciencedirect.com/science/article/pii/S0264410X23002190?via%3Dihub doi: 10.1016/j.vaccine.2023.02.065 PMID: 36870878		4	1.342	N/A
9	Jofre-Bonet M, Kamara J, Mesnard A (2023) Corruption and informal sector households' participation in health insurance in Sierra Leone. <i>PLoS ONE</i> 18(4): e0281724. https://doi.org/10.1371/journal.pone.0281724	Unfunded	6	0.839	N/A
10	Ramsey, S. D., Bansal, A., Li, L., O'Donnell, P. V., Fuchs, E. J., Brunstein, C. G., Eapen, M., Thao, V., Roth, J. A., & Steuten, L. (2023). Cost-Effectiveness of Unrelated Umbilical Cord Blood vs. HLA Haploidentical Related Bone Marrow Transplant: Evidence from BMT CTN 1101. <i>Transplantation and cellular therapy</i> , S2666-6367(23)01257-5. https://www.sciencedirect.com/science/article/abs/pii/S2666636723012575?via%3Dihub https://doi.org/10.1016/j.jtct.2023.04.017 PMID: 37120135	Grant funded (NIH National Heart, Lung, and Blood Institute)	2	1.602	N/A
11	Neri, M., Brassel, S., Schirmacher, H., Mendes, D., Vyse, A., Steuten, L. and Hamson, E., 2023. Vaccine-Preventable Hospitalisations from Seasonal Respiratory Diseases: What Is Their True Value?. <i>Vaccines</i> , 11(5), p.945. https://www.mdpi.com/2076-393X/11/5/945 DOI: 10.3390/vaccines11050945	Contract funded (Pfizer)	2	1.201	N/A
12	Shafrin J., Lakdawalla D., Doshi J.A., Garrison L.P., Malani A., Neumann P.J., Phelps C.E., Towse A., and Willke R.J. (2023). A Strategy For Value-Based Drug Pricing Under The Inflation Reduction Act. <i>Health Affairs Forefront</i> , May 4, 2023. DOI: 10.1377/forefront.20230503.153705 https://www.healthaffairs.org/content/forefront/strategy-value-based-drug-pricing-under-inflation-reduction-act 10.1377/forefront.20230503.153705	Core funded	8	N/A	N/A
13	Firth, I., Hitch, J., Henderson, N. and Cookson, G., Moving towards a More Environmentally Sustainable Pharmaceutical Industry: Recommendations for Industry and the Transition to Green HTA. <i>Expert Review of Pharmacoeconomics & Outcomes Research</i> . https://www.tandfonline.com/doi/full/10.1080/14737167.2023.2214730 DOI: 10.1080/14737167.2023.2214730 PubMed PMID: 37191398	Core funded	2	0.671	N/A
14	Garrison L.P. and Towse A. The IRA's Request For Product-Specific R&D Cost Information: Short-Sighted And Irrelevant. <i>Health Affairs Forefront</i> , June 5, 2023. DOI: 10.1377/forefront.20230602.550273. Available at https://www.healthaffairs.org/content/forefront/ira-s-request-product-specific-r-d-cost-information-short-sighted-and-irrelevantDOI:10.1377/forefront.20230602.550273	Core funded	4	N/A	N/A
15	Neri M, Brassel S, Akerjord S, Charos A, Schley K, Steuten L, Recognising the broader value of meningococcal vaccination: a matter of evidence, ability or willingness?, <i>Value in Health</i> (2023), doi: https://doi.org/10.1016/j.jval.2023.06.011 .	Contract funded (Pfizer)	1	1.507	N/A

NO.	JOURNAL REFERENCE	Sources of financial support	NUMBER OF CITATIONS (AS OF 1 OCT 2024) ¹	SJR Indicator (2023) ²	ABS JOURNAL RANKING (2021) ³
16	Hafidz F and Sampson C (2023) Editorial: Insights in cost and resource allocation: 2022. Front. Health Serv. 3:1254318. doi: 10.3389/frhs.2023.1254318	Unfunded	0	N/A	N/A
17	Berdud M, Ferraro J, Towse A. 2023. A theory on ICER pricing and optimal levels of cost-effectiveness thresholds: a bargaining approach. Frontiers in Health Services Volume 3	Core Funded	8	N/A	N/A
18	Mott, D. J., Schirrmacher, H., Al-Janabi, H., Guest, S., Pennington, B., Scheuer, N., Shah, K. K., & Skedgel, C. (2023). Modelling Spillover Effects on Informal Carers: The Carer QALY Trap. Pharmacoeconomics. https://doi.org/10.1007/s40273-023-01316-0 https://link.springer.com/article/10.1007/s40273-023-01316-0 DOI: 10.1007/s40273-023-01316-0 PMID: 37659032	Grant Funded	4	1.517	2
19	Brassel, S., Al Taie, A. and Steuten, L., 2023. Value assessment of antimicrobials using the STEDI framework–How steady is the outcome?. Health Policy, 136, p.104892. https://www.sciencedirect.com/science/article/pii/S016885102300177X https://doi.org/10.1016/j.healthpol.2023.104892 PMID: 37632993	Contract Funded (Pfizer)	3	1.206	2
20	Hayes, H., Meacock, R., Stokes, J. and Sutton, M., 2023. How do family doctors respond to reduced waiting times for cancer diagnosis in secondary care?. The European Journal of Health Economics, pp.1-16. https://link.springer.com/article/10.1007/s10198-023-01626-2 https://doi.org/10.1007/s10198-023-01626-2	Core funded	1	1.080	2
21	Jakubczyk, M., Schneider, P., Lipman S.A., and Sampson, C., 2023. This dead or that dead: framing effects in the evaluation of health states. Value in Health. https://www.valueinhealthjournal.com/article/S1098-3015(23)06155-7/fulltext 10.1016/j.jval.2023.10.009 PMID 37913922	Grant funded research (EuroQol Research Foundation)	2	1.507	N/A
22	Harding S, Alshukri A, Appelbe D, Broadbent D, Burgess P, Byrne P,... Sampson, C. et al. Individualised variable-interval risk-based screening in diabetic retinopathy: the ISDR research programme including RCT. Programme Grants Appl Res 2023;11(6) https://www.journalslibrary.nihr.ac.uk/pgfar/HRFA3155 (I'm in the 'et al.') DOI: 10.3310/HRFA3155 PubMed PMID: 37943975	n/a old project	0	N/A	N/A
23	Gordon, J., Gheorghe, M., Harrison, C. et al. Estimating the Treatment and Prophylactic Economic Value of New Antimicrobials in Managing Antibiotic Resistance and Serious Infections for Common Pathogens in the USA: A Population Modelling Study. Pharmacoeconomics (2023). https://doi.org/10.1007/s40273-023-01337-9	Core funded	0	1.517	2
24	Paulden, M., Sampson, C., O'Mahony, J.F., Spackman, E., McCabe, C., Round, J. and Snowsill, T. 2023. Logical inconsistencies in the health years in total and equal value of life years gained. Value in Health. https://doi.org/10.1016/j.jval.2023.11.009	Unfunded	2	1.507	N/A
25	Hampson, G and Steuten, L. 2023. Netflix and pill: is there a role for volume delinked subscription-style payments beyond antimicrobials? Expert Review of Pharmacoeconomics & Outcomes Research, DOI: 10.1080/14737167.2023.2271171	Unfunded	2	0.671	N/A
26	Sampson, C., Leech, A., and Garcia-Lorenzo, B. 2023. Opportunity costs in health care: cost-effectiveness thresholds and beyond. Frontiers in Health Services https://doi.org/10.3389/frhs.2023.1293592	Unfunded	2	N/A	N/A

NO.	JOURNAL REFERENCE	Sources of financial support	NUMBER OF CITATIONS (AS OF 1 OCT 2024)1	SJR Indicator (2023)2	ABS JOURNAL RANKING (2021)3
27	Wahlberg K, Winblad B, Cole A, Herring WL, Ramsberg J, et al. People get ready! A new generation of Alzheimer's therapies may require new ways to deliver and pay for healthcare. J Intern Med. 2023; 00: 1–1	Grant funded (paid for my travel to attend and contribute to workshop). Think Tank; Innovative Payment Models in Alzheimer's Disease, Stockholm, Sweden. The Swedish Innovation Agency (Vinnova), grant number 2021-02680.	8	2.895	N/A
28	Cubi-Molla, P., Mott, D., Henderson, Nadine., Zamora, Bernarda & Grobler, Mendel & Garau, Martina. (2023). Resource allocation in public sector programmes: does the value of a life differ between governmental departments?. Cost Effectiveness and Resource Allocation. 21. 10.1186/s12962-023-00500-5.		8	0.610	N/A

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF OCT 24) ¹	SJR INDICATOR (2022) ²	ABS JOURNAL RANKING (2021) ³
2022					
1	Bell, E., Brassel, S., Oliver, E., Schirmacher, H., Arnetorp, S., Berg, K., Darroch-Thompson, D., Pohja-Hutchison, P., Mungall, B., Carroll, S., Postma, M. and Steuten, L. , 2022. Estimates of the Global Burden of COVID-19 and the Value of Broad and Equitable Access to COVID-19 Vaccines. <i>Vaccines</i> . DOI: 10.3390/vaccines10081320	Contract Funded (AstraZeneca)	16	1.201	N/A
2	Bell, E., Neri, M., & Steuten, L. 2022. Towards a Broader Assessment of Value in Vaccines: The BRAVE Way Forward. <i>Applied Health Economics and health policy</i> . DOI: 10.1007/s40258-021-00683	Funded Research (Pfizer)	31	0.990	N/A
3	Brassel, S., Neri, M., Schirmacher, H., Steuten, L. , 2022. The Value of Vaccines in Maintaining Health System Capacity in England. <i>Value in Health</i> . DOI: 10.1016/j.jval.2022.06.018	Consulting (ABPI)	6	1.507	N/A
4	El-Shal, A., Cubi-Molla, P. and Jofre-Bonet, M. , 2022. Discontinuation of performance-based financing in primary health care: impact on family planning and maternal and child health. <i>International Journal of Health Economics and Management</i> . DOI: 10.1007/s10754-022-09333-w	Unfunded	5	0.541	2
5	Fernandes, S., Pinto, M., Barros, L., Lopes Moreira, M.E., Velho Barreto de Araújo, T., Maciel Lyra, T., Valongueiro, S., Jofre-Bonet, M. , Kuper, H. 2022. The economic burden of Congenital Zika Syndrome in Brazil: overview at 5 and 10 years. <i>BMJ Global Health</i> . DOI: 10.1136/bmjgh-2022-008784	Unfunded	4	2.449	N/A
6	Hernandez-Villafuerte, K., Zamora, B. , Feng, Y. Towse, A. et al. 2022. Estimating health system opportunity costs: the role of non-linearities and inefficiency. <i>Cost Effectiveness and Resource Allocation</i> . DOI: 10.1186/s12962-022-00391	ABPI	4	0.61	N/A
7	Horgan, D., Borisch, B., Cattaneo, I., Caulfield, M., Chiti, A., Chomienne, C., Cole, A. , et al., 2022. Factors Affecting Citizen Trust and Public Engagement Relating to the Generation and Use of Real-World Evidence in Healthcare. <i>International Journal of Environmental Research and Public Health</i> . DOI: 10.3390/ijerph19031674		8	0.808	N/A
8	Husereau, D., Drummond, M. , Augustovski, F., de Bekker-Grob, E., Briggs, A. H., Carswell, C., et al as part of the CHEERS 2022 ISPOR Good Research Practices Task Force 2022., Consolidated Health Economic Evaluation Reporting Standards 2022 (CHEERS 2022) statement: updated reporting guidance for health economic evaluations. <i>European Journal of Health Economics</i> . (Epub ahead of print). DOI: 10.1007/s10198-021-01426-6 .	Unfunded	1163	1.080	2
9	Husereau, D.; Steuten, L. ; Muthu, V.; Thomas, D.M.; Spinner, D.S.; Ivany, C.; Mengel, M.; Sheffield, B.; Yip, S.; Jacobs, P.; Sullivan, T. 2022. Effective and Efficient Delivery of Genome-Based Testing- What Conditions Are Necessary for Health System Readiness? <i>Healthcare</i> 2022. DOI: 10.3390/healthcare10102086	Amgen Canada, Inc.; AstraZeneca Canada Inc.; Eli Lilly Canada, Inc.; GSK Canada Inc.; Hoffmann-La Roche Canada, Inc. (Diagnostics Division); Janssen (J&J) Canada Inc.; Pfizer Canada Inc.; Thermo Fisher Scientific (Canada)	5	0.863	N/A
10	Kourouklis, D., Berdud, M., Jofre-Bonet, M. and Towse, A. , 2022. Alternative funding models for medical innovation: the role of product development partnerships in product innovation for infectious diseases. <i>Applied Economics Letters</i> . DOI: 10.1080/13504851.2022.2095335	Core research grant	8	0.376	1
11	Kourouklis, D. and Gandjour, A., 2022. Pharmaceutical Spending and Early-Stage Innovation in EU countries. <i>Industry and Innovation</i> . DOI: 10.1080/13662716.2021.2021864	Unfunded	4	1.262	3
12	Kourouklis, D., Sampson, C., Berdud, M. and Skedgel, C. 2022. Building Cost-Effectiveness Thresholds for the Future. <i>Value & Outcomes Spotlight</i> . DOI: 10.1007/s10198-021-01426-6	Contract Funded (ABPI)	2	N/A	N/A

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF OCT 24) ¹	SJR INDICATOR (2022) ²	ABS JOURNAL RANKING (2021) ³
13	Kreimeier, S., Mott, D. , Ludwig, K., Greiner, W., & IMPACT HTA HRQoL Group. 2022. EQ-5D-Y Value Set for Germany. <i>PharmacoEconomics</i> . DOI: 10.1007/s40273-022-01143-9	Funded research (EuroQol)	28	1.517	2
14	Mateo, J., Steuten, L. , Aftimos, P., André, F., Davies, M., Garralda, E., Geissler, J., Husereau, D., Martinez-Lopez, I., Normanno, N., Reis-Filho, J., Stefani, S., Thomas, D., Westphalen, B., & Voest, E. 2022. Delivering Precision Oncology to Patients with Cancer. <i>Nature Medicine</i> . DOI: 10.1038/s41591-022-01717-2	Unfunded	245	19.045	N/A
15	Mott, D. J. , Devlin, N. J., Kreimeier, S., Norman, R., Shah, K. K., & Rivero-Arias, O. 2022. Analytical Considerations When Anchoring Discrete Choice Experiment Values Using Composite Time Trade-Off Data: The Case of EQ-5D-Y-3L. <i>PharmacoEconomics</i> . DOI: 10.1007/s40273-022-01214-x	Funded research (EuroQol)	6	1.517	2
16	Mott, D. , Ternent, L., & Vale, L. 2022. Do preferences differ based on respondent experience of a health issue and its treatment? A case study using a public health intervention. <i>The European Journal of Health Economics</i> . DOI: 10.1007/s10198-022-01482-	Funded research (Health Foundation)	5	1.080	2
17	Mulhern, B.J., Sampson, C. , Haywood, P., Addo, R., Page, K., Mott, D. , Shah, K., Janssen, M.F. and Herdman, M. , 2022. Criteria for Developing, Assessing and Selecting Candidate EQ-5D Bolt-Ons. <i>Quality of Life Research</i> . DOI: 10.1007/s11136-022-03138-7	Funded research (EuroQol)	11	1.299	N/A
18	Pouwels, X.G.L.V., Sampson, C.J. , and Arnold, R.J.G., 2022. Opportunities and Barriers to the Development and Use of Open Source Health Economic Models: A Survey. <i>Value in Health</i> . DOI: 10.1016/j.jval.2021.10.001	Unfunded	21	1.507	N/A
19	Ramos-Goñi, J. M., Estévez-Carrillo, A., Rivero-Arias, O., Rowen, D., Mott, D. , Shah, K., & Oppe, M. 2022. Does Changing the Age of a Child to be Considered in 3-Level Version of EQ-5D-Y Discrete Choice Experiment-Based Valuation Studies Affect Health Preferences? <i>Value in Health</i> . DOI: 10.1016/j.jval.2022.03.001	Funded research (EuroQol)	11	1.507	N/A
20	Rodes-Sanchez, M. , Spencer, J., Tantri, A., Mitrovich, R., Rachev, B., Sharma, I., Towse, A. , Steuten, L. 2022. Working Towards a Sustainable, Healthy Market for Vaccines: A Framework to Support Evidence-Based Policymaking. <i>Vaccine</i> 2022. DOI: 10.1016/j.vaccine.2022.05.054	Contract Funded (Merck Sharp & Dohme)	0	1.342	N/A
21	Sampson, C. , Zamora, B., Watson, S., Cairns, J., Chalkidou, K., Cubi-Molla, P. , Devlin, N., García-Lorenzo, B., Hughes, D.A., Leech, A.A. and Towse, A., 2022. Supply-Side Cost-Effectiveness Thresholds: Questions for Evidence-Based Policy. <i>Applied Health Economics and Health Policy</i> . DOI: 10.1007/s40258-022-00730-3	Contract Funded (ABPI)	21	0.990	N/A
22	Sampson, C. NICE and the EQ-5D-5L: Ten Years Trouble. <i>PharmacoEconomics Open</i> 6, 5–8 (2022). https://doi.org/10.1007/s41669-021-00315-1	Unfunded	0	0.658	2
23	Skedgel, C. , Henderson, N. , Towse, A. , Mott, D. , & Green, C. 2022. Considering Severity in Health Technology Assessment: Can We Do Better? <i>Value in Health</i> . DOI: 10.1016/j.jval.2022.03.001	Contract Funded (Biogen)	24	1.507	N/A
24	Towse, A. 2022. Real Option Value: Should We Opt in or out? Commentary. <i>Value in Health</i> . DOI: 10.1016/j.jval.2022.09.004	Core research grant	2	1.507	N/A
25	Towse, A. and Silverman Bonfield, R. 2022. An Ambitious USG Advanced Commitment for Subscription-Based Purchasing of Novel Antimicrobials and Its Expected Return on Investment. <i>CGD Policy Paper 277</i> . Washington, DC: Center for Global Development. https://www.cgdev.org/publication/ambitious-usg-advanced-commitment-subscription-based-purchasing-novel-antimicrobials	Unfunded	7	N/A	N/A
26	Treibich, C., Bell, E. , Blanc, E., Lepine, A., 2022. From a drought to HIV: An analysis of the effect of droughts on transactional sex and sexually transmitted infections in Malawi. <i>SSM - Population Health</i> . DOI: 10.1016/j.ssmph.2022.101221	Unfunded	8	1.586	N/A

NO.	JOURNAL REFERENCE	SOURCES OF FINANCIAL SUPPORT	NUMBER OF CITATIONS (AS OF OCT 24) ¹	SJR INDICATOR (2022) ²	ABS JOURNAL RANKING (2021) ³
27	Vass, C., Boeri, M., Karim, S., Marshall, D., Craig, B., Ho, K.-A., Mott, D. , Ngorsuraches, S., Badawy, S. M., Mühlbacher, A., Gonzalez, J. M., & Heidenreich, S. 2022. Accounting for Preference Heterogeneity in Discrete-Choice Experiments: An ISPOR Special Interest Group Report. <i>Value in Health</i> . DOI: 10.1016/j.jval.2022.01.012	Core research grant	43	1.507	N/A
28	Yaman, F., Cubi-Molla, P. and Plagnol, A.C., 2022. Why do immigrants become less happy? Explanations for the decrease in life satisfaction of immigrants in Germany over time. <i>Migration Studies</i> . DOI: 10.1093/migration/mnac034	Unfunded	11	0.732	N/A

JOURNAL REFERENCE		NUMBER OF CITATIONS (AS OF OCT 23) ¹	SJR INDICATOR (2022) ²	ABS JOURNAL RANKING (2021) ³
2021				
1	Bogossian, A, Hurt, C.S, Hindle, J.V, McCracken, L.M, Vasconcelos e Sa, D.A., Axell, S, Tapper, K, Stevens, J, Hirani, P.S, Salhab, M, Ye, W. and Cubi-Molla, P. (2021) Acceptability and Feasibility of a Mindfulness Intervention Delivered via Videoconferencing for People With Parkinson's. <i>Journal of Geriatric Psychiatry and Neurology</i> . DOI: 10.1177/08919887209881901	28	1.014	N/A
2	El-Shal, A, Cubi-Molla, P. and Jofre-Bonet, M. (2021) Accreditation as a quality-improving policy tool: family planning, maternal health, and child health in Egypt. <i>The European Journal of Health Economics</i> . DOI: 10.1007/s10198-020-01240-6	11	1.080	2
3	Sampson, C, Zhang, K. , Parkin, D. and Hampson, G. (2021b) Exclusive human milk diet for very preterm babies in England: protocol for a cost-effectiveness and budget impact analysis. <i>F1000Research</i> . DOI: 10.12688/f1000research.22450.1	2	N/A	N/A
4	Kourouklis, D., 2021. Public subsidies for R&D and public sector pharmaceutical innovation. <i>Applied Economics</i> , 53(32), pp.3759–3777. DOI: 10.1080/00036846.2021.1885614 .	15	0.590	2
5	Latimer,N.R., Towse, A. , and Henshall, C (2021) Not cost-effective at zero price: valuing and paying for combination therapies in cancer, <i>Expert Review of Pharmacoeconomics & Outcomes Research</i> DOI: 10.1080/14737167.2021.1879644	11	0.671	N/A
6	Sampson C, Firth I, Towse A. (2021) Health Opportunity Costs and Expert Elicitation: A Comment on Soares et al.: <i>Medical Decision Making</i> . DOI: 10.1177/0272989x20987211	2	1.165	N/A
7	Skedgel C, Ralphs E, Finn E, et al. (2021) Is the public supportive and willing to pay for a national assistive reproductive therapies programme? Results from a multi-country survey. <i>BMJ Open</i> , 11:e044986. DOI: 10.1136/bmjopen-2020-044986	8	0.971	N/A
8	Mott DJ, Shah KK, Ramos-Goñi JM, Devlin NJ, Rivero-Arias O. (2021) Valuing EQ-5D-Y-3L Health States Using a Discrete Choice Experiment: Do Adult and Adolescent Preferences Differ? <i>Medical Decision Making</i> . DOI: 10.1177/0272989X21999607	49	1.165	N/A
9	Zamora B., Garrison L.P., Unuigbo A., and Towse A. (2021). Reconciling ACEA and MCDA: is there a way forward for measuring cost-effectiveness in the USS healthcare setting? <i>Cost Effectiveness and Resource Allocation</i> . DOI: 10.1186/s12962-021-00266-8	8	0.61	N/A
10	Pearson S.D., Towse A. , Lowe M., Segel C.S., and Henshall C. (2021) Cornerstones of 'fair' drug coverage: appropriate cost sharing and utilisation management policies for pharmaceuticals. <i>Journal of Comparative Effectiveness Research</i> . DOI: 10.2217/cer-2021-0027	13	0.579	N/A
11	Brassel, S, Neri, M, O'Neill, P. and Steuten, L. (2021) Realising the Broader Value of Vaccines in the UK. <i>Vaccine: X</i> , p.100096. DOI: 10.1016/j.jvacx.2021.100096	19	0.682	N/A
12	Jofre-Bonet, M. (2021) Invited Tribune: COVID-19 and vaccines: Learning by Doing- Estudios sobre la Economía Española, 2021/04 Aspectos Económicos de la crisis del COVID-19. Boletín de Seguimiento no. 10. Fundación de Estudios de Economía Aplicada (FEDEA). https://documentos.fedea.net/pubs/eee/eee2021-14.pdf	N/A	N/A	N/A
13	Jofre-Bonet, M. (2021) About economic research that does not involve money. <i>Societat Catalana d'Economia - 5centims.cat</i> . https://www.5centims.cat/sobre-la-recerca-economica-que-no-va-de-diners/	N/A	N/A	N/A
14	Latimer N, Pollard P, Towse A, Henshall C, Sansom L, Ward R, Bruce A, and Deakin C. (2021) Challenges in valuing and paying for combination regimens in oncology: reporting the perspectives of a multistakeholder, international workshop. <i>BMC Health Services Research</i> 21:412. DOI: 10.1186/s12913-021-06425-0	23	1.029	3
15	Towse A., Chalkidou K., Firth I., Kettler H., and Silverman R. (2021) How Should the World Pay for a Coronavirus Disease (COVID-19) Vaccine? <i>Value in Health</i> . DOI: https://doi.org/10.1016/j.jval.2020.12.008	22	1.507	N/A
16	Mott, D.J., Leslie, I., Shah, K., Rowell, J. & Scheuer, N. (2021) Impact of Including Carer Information in Time Trade-Off Tasks: Results from a Pilot Study. <i>Pharmacoeconomics - open</i> . DOI: 10.1007/s41669-021-00270-x	1	0.658	2
17	Zhang K, Kumar G, Skedgel C. (2021) Towards a New Understanding of Unmet Medical Need. <i>Applied Health Economics and Health Policy</i> . DOI: 10.1007/s40258-021-00655-3	11	0.990	N/A

18	Cubi-Molla P , Buxton M, Devlin N. (2021) Allocating Public Spending Efficiently: Is There a Need for a Better Mechanism to Inform Decisions in the UK and Elsewhere? <i>Applied Health Economics and Health Policy</i> . Jun 9:1-0. DOI: 10.1007/s40258-021-00648-2	21	0.990	N/A
19	Neri, M., Cubi-Molla, P. & Cookson, G. (2021) Approaches to Measuring Efficiency in Primary Care: A Systematic Literature Review. <i>Applied Health Economics and Health Policy</i> . DOI: 10.1007/s40258-021-00669-x	13	0.99	N/A
20	El-Shal, A., Cubi-Molla, P. and Jofre-Bonet, M. (2021) Are user fees in health care always evil? Evidence from family planning, maternal, and child health services. <i>Economic Analysis and Policy</i> . DOI: 10.1016/j.eap.2021.08.009	7	1.597	1
21	Bell, E., Neri, M. and Steuten, L. (2021) Towards a Broader Assessment of Value in Vaccines: The BRAVE Way Forward. <i>Applied Health Economics and Health Policy</i> . 23:1–13. DOI: 10.1007/s40258-021-00683-z .	31	0.990	N/A
22	Payne, H., Robinson, A., Rappe, B., Hilman, S., De Giorgi, U., Joniau, S., Bordonaro, R., Mallick, S., Dourthe, L.-M., Flores, M. M., Gumà, J., Baron, B., Duran, A., Pranzo, A., Serikoff, A., Mott, D.J. , Herdman, M., Pavesi, M., & De Santis, M. (2021) A European, prospective, observational study of enzalutamide in patients with metastatic castration-resistant prostate cancer: PREMISE. <i>International Journal of Cancer</i> . DOI: 10.1002/ijc.33845	15	2.131	N/A
23	Flood, C., Behn, N., Marshall, J., Simpson, A., Northcott, S., Thomas, S., Goldsmith, K., McVicker, S., Jofre-Bonet, M. and Hilari, K., 2021. A pilot economic evaluation of a feasibility trial for Supporting wellbeing through PEer-Befriending (SUPERB) for post-stroke aphasia. <i>Clinical Rehabilitation</i> . DOI: 10.1177/02692155211063554	1	0.949	N/A
24	Bajre MK, Towse A , Stainthorpe A, Hart J., 2021. Results from an Early Economic Evaluation of the use of A Novel Point of Care Device for Diagnosis of Suspected Acute Coronary Syndrome Patient Within an Emergency Department in the National Health Service in England. <i>Cardiology and Cardiovascular Medicine</i> . DOI: 10.26502/fccm.92920228	0	N/A	N/A
25	Sampson, C, Bell, E., Cole, A. , Miller, C.B., Marriott, T., Williams, M. and Rose, J., 2021. Digital cognitive behavioural therapy for insomnia and primary care costs in England: an interrupted time series analysis. <i>BJGP Open</i> . DOI: 10.3399/BJGPO.2021.0146	12	N/A	N/A
26	Skedgel, C. , Ralphs, E., Finn, E., Markert, M., Samuelson, C. & Whitty, J. 2021. How Do People with Experience of Infertility Value Different Aspects of Assistive Reproductive Therapy? <i>The Patient – Patient Centred Outcomes Research</i> . DOI: 10.1007/s40271-021-00563-7	7	N/A	N/A
27	Skedgel, C. 2021. Dramatic Innovations in the Treatment of Spinal Muscular Atrophy, But Many Unknowns Remain. <i>Pharmacoeconomics</i> . DOI: 10.1007/s40273-021-01119-1 .	0	1.517	2
2020				
1	Fenwick E, Steuten L , Knies S, Ghabri S, Basu A, Murray JF, Koffijberg HE, Strong M, Sanders Schmidler GD, Rothery C. (2020) Value of Information Analysis for Research Decisions-An Introduction: Report 1 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. <i>Value in Health</i> , Feb;23(2):139-150. doi: 10.1016/j.jval.2020.01.001 . PubMed PMID: 32113617.	154	1.507	N/A
2	Garrison, L., Zamora, B. , Li, M., and Towse, A. (2020). Augmenting Cost-Effectiveness Analysis for Uncertainty: The Implications for Value Assessment—Rationale and Empirical Support. <i>Journal of Managed Care & Specialty Pharmacy</i> , 26(4), pp.400-406.	28	0.766	N/A
3	Herdman, M. , Kerr, C., Pavesi, M., Garside, J., Lloyd, A., Cubi-Molla, P. and Devlin, N., (2020). Testing the validity and responsiveness of a new cancer-specific health utility measure (FACT-8D) in relapsed/refractory mantle cell lymphoma, and comparison to EQ-5D-5L. <i>Journal of Patient-Reported Outcomes</i> , 4(1), pp.1-12.	16	N/A	N/A
4	Hilari, Katerina, Nicholas Behn, Jane Marshall, Alan Simpson, Shirley Thomas, Sarah Northcott, Chris Flood, Mireia Jofre-Bonet , et al. (2020) Adjustment with Aphasia after Stroke: Study Protocol for a Pilot Feasibility Randomised Controlled Trial for Supporting Wellbeing through PEer Befriending (SUPERB). <i>Pilot and Feasibility Studies</i> 5, no. 1: 14. https://doi.org/10.1186/s40814-019-0397-6 .	35	0.568	N/A
5	J Costa-Font, M Jofre-Bonet . (2020). Is the Intergenerational Transmission of Overweight 'Gender Assortative'? <i>Economics & Human Biology</i> , 100907.	11	0.916	2
6	Lorgelly, P., Pollard, J., Cubi-Molla, P., Cole, A. , Sim, D. and Sussex, J., (2020). Outcome-Based Payment Schemes: What Outcomes Do Patients with Cancer Value? <i>The Patient-Patient-Centered Outcomes Research</i> , pp.1-12.	16	N/A	N/A
7	Mott, D.J. , Chami, N. & Tervonen, T. (2020) Reporting Quality of Marginal Rates of Substitution in Discrete Choice Experiments That Elicit Patient Preferences. <i>Value in Health</i> . 23 (8), 979–984.	20	1.507	N/A

8	Mott, D.J., Hampson, G., Llewelyn, M.J., Mestre-Ferrandiz, J. & Hopkins, M.M. (2020) Authors' Reply to Hays: 'A Multinational European Study of Patient Preferences for Novel Diagnostics to Manage Antimicrobial Resistance'. <i>Applied Health Economics and Health Policy</i> . 18 (3), 459–460.	0	0.990	N/A
9	Rothery C, Strong M, Koffijberg HE, Basu A, Ghabri S, Knies S, Murray JF, Sanders Schmidler GD, Steuten L , Fenwick E. (2020) Value of Information Analytical Methods: Report 2 of the ISPOR Value of Information Analysis Emerging Good Practices Task Force. <i>Value in Health</i> . Mar;23(3):277-286. doi:10.1016/j.jval.2020.01.004. PubMed PMID: 32197720.	105	1.507	N/A
10	Shaikh, M., Del Giudice, P. and Kourouklis, D. , (2020). Revisiting the Relationship Between Price Regulation and Pharmaceutical R&D Investment. <i>Applied Health Economics and Health Policy</i> . 10.1007/s40258-020-00601-9.	18	0.990	N/A
11	DeVolder, R., Serra-Sastre, V. and Zamora, B. , (2020). Examining the variation across acute trusts in patient delayed discharge. <i>Health Policy</i> .	7	1.206	2
12	Chalkidou K, Towse A , Silverman R, Garau M , Ramakrishnan G. (2020). Market-driven, value-based, advance commitment (MVAC): accelerating the development of a pathbreaking universal drug regimen to end TB. <i>BMJ Global Health</i> ; 5: e002061.	7	2.449	N/A
13	Berdud M , Drummond M, and Towse A . (2020). Establishing a reasonable price for an orphan drug. <i>Cost Effectiveness and Resource Allocation</i> https://doi.org/10.1186/s12962-020-00223-x	80	0.61	N/A
14	Costa-Font, J., Jofre-Bonet, M. , J. Legrand (2020) Vertical Transmission of Overweight: Evidence from a sample of English Adoptees, forthcoming <i>Food Policy</i> .	4	2.116	3
2019				
1	Broadbent, D., Sampson, C.J. , Wang, A., Howard, L., Williams, A., Howlin, S., Appelbe, D. , Mott, T. , Cheyne, C., Rahni, M., Kelly, J., Collins, J., García-Fiñana, M., Stratton, I., James, M., and Harding, S. 2019. Individualised Screening for Diabetic Retinopathy: the ISDR study. Rationale, design and methodology for a randomised controlled trial comparing annual and personalised variable-interval risk-based screening. <i>BMJ Open</i> . 9(e025788). DOI: 10.1136/bmjopen-2018-025788 .	27	0.971	N/A
2	Cubi-Molla, P., Shah, K. , Garside, J., Herdman, M. and Devlin, N., 2019. A note on the relationship between age and health-related quality of life assessment. <i>Quality of Life Research</i> , 28(5), pp.1201-1205. DOI: 10.1007/s11136-018-2071-5.	11	1.299	N/A
3	Drummond, M. and Towse, A. , 2019. Is rate of return pricing a useful approach when value-based pricing is not appropriate? <i>A. Eur J Health Econ</i> (2019) 20: 945. https://doi.org/10.1007/s10198-019-01032-7 .	30	1.080	2
4	Li, A., Manohar, P.M., Garcia, D.A., Lyman, G.H. and Steuten, L.M. 2019. Cost effectiveness analysis of direct oral anticoagulant (DOAC) versus dalteparin for the treatment of cancer associated thrombosis (CAT) in the United States. <i>Thrombosis Research</i> , (180), pp. 37-24. DOI: https://doi.org/10.1016/j.thromres.2019.05.012 .	27	1.098	N/A
5	Lopez-Picado, A., Barrachina, B., Remon, M. and Errea, M. , 2019. Cost benefit analysis of the use of tranexamic acid in total replacement hip surgery. <i>Journal of Clinical Anesthesia</i> . Vol. 57 (in progress. November 2019), pp. 124-128.	20	1.082	N/A
6	Mewes, J.C., Pulia, M.S., Mansour, M.K., Broyles, M.R., Nguyen, B. and Steuten, L. , 2019. The cost impact of PCT-guided antibiotic stewardship versus usual care for hospitalised patients with suspected sepsis or lower respiratory tract infections in the US: A health economic model analysis. <i>PLOS ONE</i> . DOI: https://doi.org/10.1371/journal.pone.0214222 .	43	0.839	N/A
7	Murad, Z., Stavropoulou, C., and Cookson, G. 2019. Incentives and gender in a multi-task setting: An experimental study with real-effort tasks, <i>PLOS ONE</i> , 14(3), e0213080. DOI: https://doi.org/10.1371/journal.pone.0213080 .	13	0.885	N/A
8	Sanchez-Iriso, E., Errea, M. , Cabases, J.M., 2019. Valuing Health using EQ-5D: The impact of chronic diseases on the stock of health. <i>Health Economics</i> . DOI: https://doi.org/10.1002/hec.3952	9	2.440	3
9	Sampson, C.J. , Arnold R, Bryan, S., Clarke, P., Ekins, S., Hatswell, A., Hawkins, N., Langham, S., Marshall, D., Sadatsafavi, M., Sullivan, W., Wilson, E.C.F., and Wrightson, T. (2019) Transparency in decision modelling: what, why, who and how? <i>Pharmacoeconomics</i> . DOI: 10.1007/s40273-019-00819-z .	63	1.517	2

10	Steuten, L. , Garmo, V., Phatak, H., Sullivan, S.D., Ngheim, P. and Ramsey, S.D. 2019. Treatment patterns, overall survival, and total healthcare costs of advanced Merkle cell carcinoma in the USA. <i>Applied Health Economics and Health Policy</i> , pp. 1-8. DOI: https://doi.org/10.1007/s40258-019-00492-5 .	11	0.990	N/A
11	Steuten, L. , Goulart, B., Meropol, N.J., Pritchard, D. and Ramsey, S.D. 2019. Cost effectiveness of multigene panel sequencing for patients with advanced non-small-cell lung cancer. <i>Journal of Clinical Oncology</i> , (3), pp. 1-10. DOI: 10.1200/CCI.19.00002.	77	10.639	N/A
12	Zamora, B. , Gurupira, M., Rhodés Sánchez, M. , Feng, Y., Hernandez-Villafuerte, K., Brown, J. and Shah, K., 2019. The value of international volunteers experience to the NHS. <i>Globalization and Health</i> , 15(31). DOI: https://doi.org/10.1186/s12992-019-0473-y .	13	2.668	N/A
13	Zamora, B. , Maignen, F., O'Neill, P. , Mestre-Ferrandiz, J. and Garau, M. , 2019. Comparing access to orphan medicinal products in Europe. <i>Orphanet Journal of Rare Diseases</i> , 14(1), pp.95.	99	1.182	N/A
14	Davillas, A. and Pudney, S. (2019) Biomarkers as precursors of disability. <i>Economics & Human Biology</i> Available online 10 September 2019, 100814. https://www.sciencedirect.com/science/article/pii/S1570677X18300959?via%3Dihub	18	0.916	2
15	Wurcel, V., Cicchetti, A., Garrison, L., Kip, M.M., Koffijberg, H., Kolbe, A., Leeftang, M.M., Merlin, T., Mestre-Ferrandiz, J., Oortwijn, W. and Oosterwijk, C., Tunis, S., Zamora, B. 2019. The Value of Diagnostic Information in Personalised Healthcare: A Comprehensive Concept to Facilitate Bringing This Technology into Healthcare Systems. <i>Public Health Genomics</i> , pp.1-8.	69	0.349	N/A
16	Mott, D.J. , Hampson, G. , Llewelyn, M., Mestre-Ferrandiz, J. and Hopkins, M.M. A Multinational European Study of Patient Preferences for Novel Diagnostics to Manage Antimicrobial Resistance. <i>Applied Health Economics and Health Policy</i> . doi: 10.1007/s40258-019-00516-0	8	0.990	N/A
17	Hilari, K., Behn, N., Marshall, J., Simpson, A., Thomas, S., Northcott, S., Flood, C., McVicker, S., Jofre-Bonet, M. , Moss, B., James, K. and Goldsmith, K., 2019. Adjustment with aphasia after stroke: study protocol for a pilot feasibility randomised controlled trial for Supporting wellbeing through PEer Befriending (SUPERB). <i>Pilot and Feasibility Studies</i> , 5(1), p.14.	35	0.568	N/A
18	Kuper, H., Lyra, T.M., Moreira, M.E.L., de Albuquerque, M. do S.V., de Araújo, T.V.B., Fernandes, S., Jofre-Bonet, M. , Larson, H., Lopes de Melo, A.P., Mendes, C.H.F., Moreira, M.C.N., do Nascimento, M.A.F., Penn-Kekana, L., Pimentel, C., Pinto, M., Simas, C. and Valongueiro, S., 2019. Social and economic impacts of congenital Zika syndrome in Brazil: Study protocol and rationale for a mixed-methods study. <i>Wellcome Open Research</i> , 3, p.127	40	1.104	N/A
21	Carrieri, V., Davillas, A. , Jones, A.M. (2019). A latent class approach to inequity in health using biomarker data. Health, Econometrics and Data Group (HEDG) Working Papers 19/22, HEDG, c/o Department of Economics, University of York.	31	N/A	N/A
22	Garrison L and Towse A. (2019) A Strategy to Support Efficient Development and Use of Innovations in Personalized Medicine and Precision Medicine. <i>Journal of Managed Care and Speciality Pharmacy</i> . 2019;25(10):1082-87	27	0.766	N/A
23	Pearson SD, Segel C, Cole A. , Henshall C, and Towse A. 2019. Policy perspectives on alternative models for pharmaceutical rebates: a report from the Institute for Clinical and Economic Review Policy Summit. <i>Journal of Comparative Effectiveness Research</i> 10.2217/cer-2019-0094 C	4	0.579	N/A
23	Towse A. , and Fenwick E. (2019) Uncertainty and Cures: Discontinuation, Irreversibility, and Outcomes-Based Payments: What Is Different About a One-Off Treatment? <i>Value in Health</i> . 2019; 22(6):677–683.	40	1.507	N/A

1 Google Scholar. The number of citations for each article as of October 2024

2 SCImago Journal Rank (SJR) indicator (PDF), developed by SCImago from the widely known algorithm Google PageRank™. This indicator shows the visibility of the journals contained in the Scopus® database from 1996. SJR takes into account both the number of citations received by a journal and the prestige of the journal based on where those citations come from. The latest available year of indicators is 2022.

3 Chartered Association of Business Schools ('ABS'), UK: journal rankings go from 4* (highest) to 1 (lowest). The latest available year of rankings is 2021.

Contract research projects that were won in 2024 (live and closed)

Project Funder	Project Title	Research Theme	Project Status	Year Won	Project Budget
The London School of Economics and Political Science (LSE)	5813 - LSE Market Access Academy (2024)	VADM	Closed	12-Apr-24	£1,500
The London School of Economics and Political Science (LSE)	5813a - Extension of LSE Market Access Academy June 2024	VADM	Closed	16-Jul-24	£1,500
The London School of Economics and Political Science (LSE)	5813b - Extension LSE MAA sept 2024	VADM	Closed	02-Sep-24	£750
Astrazeneca UK Limited	5815 - Patient Voice event	MVO	Closed	22-May-24	£2,500
GSK	5779a - Extension of Value of Vaccination Ireland	VADM	Closed	15-Mar-24	£2,832
GSK	5779c - Extension of Value of Vaccination Ireland	VADM	Closed	27-Jun-24	£8,263
M&F Health Communications	5500 - Burden of CSU	VADM	Closed	04-Apr-24	£29,750
Merck PTE Ltd	5409d - HTA reforms - OHE report	VADM	Closed	06-Feb-24	£20,746
Merck PTE Ltd	5776 - Health economics of infertility	MVO	Closed	05-Apr-24	£5,399
Pfizer Inc	5456f - Extension of HTA for GTx	VADM	Closed	05-Feb-24	£3,777
Pfizer	5485a Extension of Broad Value Meningitis Vx	VADM	Closed	26-Nov-24	£48,396
Pfizer Inc	5769a - Extension of Value of innovation	EoI	Closed	15-Oct-24	£9,976
The Janssen Pharmaceutical Companies of Johnson & Johnson	5702a - Extension of Discounting Panel - ISPOR 2023	VADM	Closed	16-Feb-24	£1,458
IFPMA	5607d Extension of Socio-economic value of adult vaccination Flu Abstract	VADM	Closed	10-Apr-24	£2,598
Evoke incisive health	5704a - Extension of SE benefits of eliminating cervical cancer in the UK	POIHS	Closed	19-Jan-24	£2,226
Total won in 2024 and closed					£141,671

Astellas Pharma US Inc	5784 - Combination-based pricing	VADM	Live	09-Feb-24	£78,137
Astrazeneca UK Limited	5785a - Extension of APACE collaboration	VADM	Live	24-Jun-24	£71,071
Astrazeneca UK Limited	5807- Broader value of breast cancer treatment	MVO	Live	03-Jun-24	£91,416

Astrazeneca UK Limited	5855 - Tumour Agnostic Treatment Access	VADM	Live	14-Oct-24	£62,694
BioLife Plasma Services LP	5758a - Circular economy WP2+3	VADM	Live	28-May-24	£267,305
Biomerieux	5849 - STEDI for AMR Diagnostics	VADM	Live	10-Dec-24	£127,163
Chiesi	5841 - economic model pMDI	VADM	Live	05-Sep-24	£106,191
Daiichi Sankyo	5864 - Severity Modifier Roundtable	VADM	Live	20-Sep-24	£3,259
Grunenthal Pharma	5591d - Extension of Patient preferences in OA pain (2x Abstract/Posters)	MVO	Live	25-Jul-24	£14,375
GSK	5672b - Extension of Extension of Vacci-Nation: the Value of Vaccines to the NHS	VADM	Live	15-Jan-24	£3,621
GSK	5777 - Vaccination Landscape	POIHS	Live	25-Jan-24	£82,457
GSK	5777a - Extension of Vaccination Landscape	POIHS	Live	09-May-24	£7,793
GSK	5839 - value of long-acting therapies	VADM	Live	18-Sep-24	£77,145
GSK	5839a - Extension of value of long-acting therapies	VADM	Live	30-Oct-24	£9,202
IFPMA	5607c - Extension of Socio-economic value of adult vaccination	VADM	Live	22-Jan-24	£25,457
Janssen Asia Pacific	5812b Extension of Going Braver - APAC	VADM	Live	27-Sep-24	£32,413
MSD Asia-Pacific	5812 - Going BRAVER - APAC	VADM	Live	23-Jul-24	£44,705
MSD Switzerland	5785 - APACE collaboration	VADM	Live	24-Jun-24	£71,071
Organon & Co.	5646c - Dissemination - The dynamics of drug shortages	Eol	Live	18-Jun-24	£49,904
Pfizer Limited	5865 - Employer costs from respiratory infections	POIHS	Live	24-Oct-24	£70,654
PhRMA	5822 The Innovation Ecosystem	EOI	Live	22-May-24	£104,000
PhRMA	5876 - CBO 2025 Critique	EOI	Live	11-Dec-24	£10,325
Pfizer Limited	5834 - Eliciting STEDI decision weights	MVO	Live	24-Oct-24	£68,683
Pfizer Inc	5823a - Pfizer Vaccines Summit Barcelona 2024	POIHS	Live	12-Dec-24	£5947
Pfizer Inc	5833 - AIR OA - Alliance in RSV	VADM	Live	02-Jul-24	£11,920
Pfizer Inc	5829a - BRAVO-Vax (Sweden)	VADM	Live	18-Nov-24	£51,943
Pfizer Inc	5769b - Reporting extension of Value of innovation	EOI	Live	21-Nov-24	£29,998
Roche Singapore Pte. Ltd	5812a - Extension of Going BRAVER - APAC	VADM	Live	19-Aug-24	£51,830

Sanofi Pasteur SA	5868 - HRQoL in E. Coli Sepsis	MVO	Live	26-Nov-24	£106,306
Sanofi UK	5632c - Extension of Extension of International Collaborations in HTA	VADM	Live	15-Mar-24	£4,370
Sanofi UK	5858 - Commonwealth collaboration in HTA - 2024 update	VADM	Live	15-Oct-24	£48,296
The Janssen Pharmaceutical Companies of Johnson & Johnson	5820 - BIA for GTx	VADM	Live	27-Jun-24	£110,349
The Janssen Pharmaceutical Companies of Johnson & Johnson	5820a - Roundtable Extension of BIA for GTx	VADM	Live	05-Sep-24	£71,445
UCB	5729a - Extension of Value frameworks	VADM	Live	06-Mar-24	£21,163
ViiV Healthcare	5698d - Extension of HIV Fiscal Health Modeling	VADM	Live	08-Jan-24	£4,792
ViiV Healthcare	5698f - Extension of HIV Fiscal Health Modeling	VADM	Live	03-Oct-24	£24,911
ViiV Healthcare	5783 - Ending HIV (Phase A)	POIHS	Live	11-Apr-24	£126,568
ViiV Healthcare	5783a - Ending HIV (Phase B)	POIHS	Live	18-Sep-24	£107,991
ViiV Healthcare	5783c - Ending HIV (Phase A Extension)	POIHS	Live	25-Jul-24	£47,235
ViiV Healthcare	5783d - Ending HIV (Phase A Extra Interviews)	POIHS	Live	24-Oct-24	£20,640
Alzheimer's Society	5671b - Inequalities in dementia: amplification	POIHS	Live	29-Feb-24	£14,202
Cell and Gene Therapy Catapult	5819 - Macro benefits of CGT	VADM	Live	04-Jul-24	£296,850
Pfizer	5816 - Combo-Vx FHM	POIHS	Live	24-Jun-24	£201,570
Pfizer	5823 - Immunisation Budgets	POIHS	Live	04-Jul-24	£178,125
Pfizer Inc	5829 - BRAVO-Vax	VADM	Live	02-Aug-24	£366,379
UCB	5729c - Extension of Value frameworks	VADM	Live	30-Oct-24	£139,110
Total won in 2024 and still live in 2024					£3,520,981
Total won in 2024 (live or closed)					£3,662,652

Amgen AU	5610a - Extension of Combi Rx Roundtable and VSL	VADM	Live	01-Apr-23	£35,000
Compass Pathways	5707a - Extension of Consultancy Compass	VADM	Live	16-May-23	£468
Grunenthal Pharma	5591 - Patient preferences in OA pain	MVO	Live	23-Feb-23	£330,582
GSK	5672a - Extension of Vacci-Nation: the Value of Vaccines to the NHS	VADM	Live	30-Nov-23	£4,900

GSK	5733 - Pharmacy-based vaccination in England	POIHS	Live	08-Dec-23	£60,131
Moderna	5746 - COVID-19 Macroeconomics	VADM	Live	02-Nov-23	£360,551
Moderna	5746a - Extension of COVID-19 Macroeconomics	VADM	Live	29-Nov-24	£39,257
Roche Pharma (Schweiz) AG	5701 - cCDP endpoint in MS	MVO	Live	07-Aug-23	£192,315
Sanofi UK	5403f - Extension of Extension of Impact of NICE decisions	VADM	Live	17-May-23	£5,844
UCB	5729 - Value frameworks	VADM	Live	18-Oct-23	£124,162
ViiV Healthcare	5698 - HIV Fiscal Health Modeling	VADM	Live	22-Jul-23	£351,221
ViiV Healthcare	5698a - Extension of HIV Fiscal Health Modeling	VADM	Live	10-Oct-23	£2,366
Alzheimer's Research UK	5625 - Dementia research investment case	Eol	Live	26-Jan-23	£53,419
Clifford Chance	5589e - Extension of Further Extension of Playdoh - Additional Trial Time	VADM	Live	04-Dec-23	£4,253
Big Health	5715 - Sleepio and Daylight employer analyses	VADM	Live	06-Nov-23	£59,703
Ondine Biomedical Inc	5508b - Extension of Steriwave UK report (stakeholder engagement)	VADM	Live	09-Oct-22	£31,485
PhRMA	5616a Inflation reduction Act Effects	Eol	Live	17-Dec-23	£20,000
Total won prior to 2024 still live					£1,675,657

Project Funder	Project Title	Research Theme	Project Status	Year Won	Project value
Amgen AU	5610 - Combi Rx Roundtable and VSL	VADM	Closed	17-Oct-22	£75,041
Astrazeneca UK Limited	5760 - Updating the AZ VBA narrative	Eol	Closed	18-Oct-23	£78,945
BioLife Plasma Services LP	5758 - Circular economy	POIHS	Closed	30-Dec-23	£110,778
Chiesi	5768 - Sustainability roundup ISPOR	POIHS	Closed	29-Nov-23	£12,752
Daiichi Sankyo	5420a - Extension of Priority roadmap & PVD	VADM	Closed	11-Sep-23	£9,591
Global Health Economics, LLC	5771 - Support for PHRMA work on IRA	Eol	Closed	23-Nov-23	£20,000
GSK	5405a - White Paper Extension of Early Global Value Proposition ABx	VADM	Closed	08-Dec-22	£19,856
GSK	5405c - Early Global Value Proposition ABx - Market Access Primer - Enhancements	VADM	Closed	17-Sep-23	£43,175
GSK	5779 - Value of Vaccination Ireland	VADM	Closed	20-Dec-23	£58,595
Merck PTE Ltd	5409b - Mapping HTA changes dissemination activities	VADM	Closed	13-Apr-23	£60,261
Merck PTE Ltd	5409c - Mapping HTA changes - Phase 2 - MER interviews	VADM	Closed	13-Apr-23	£27,733
Novartis, Inc	5761 - Taiwan HTA workshop - Amanda	Eol	Closed	09-Nov-23	£4,000
Ondine Biomedical Inc	5508a - Extension of Steriwave UK report	VADM	Closed	31-Aug-22	£15,000
Organon & Co.	5646b - Estimating the cost of drug shortages	Eol	Live	17-Oct-23	£138,716
Organon & Co.	5646a - Dynamics of drug shortages dissemination	Eol	Closed	04-Sep-23	£34,306
Pfizer Inc	5384 - Educational Course Vaccine Economics	VADM	Closed	04-Jan-22	£255,429
Pfizer Inc	5552 - COVID-19 MASTERS	MVO	Closed	28-Apr-22	£10,747
Pfizer Inc	5769 - Value of innovation	Eol	Live	29-Nov-23	£138,970
PhRMA	5616 Inflation reduction Act Effects	Eol ,	Live	26-Feb-23	£341,949
Reneo Pharmaceuticals	5781 - Reneo Ad Board	VADM	Closed	04-Dec-23	£1,689
Roche Diagnostic	5466b - Extension of Diagnostics for AMR	VADM	Closed	28-Mar-23	£15,000
Roche Pharma (Schweiz) AG	5556a - Extension of Role of Caregivers in HTA decision making	MVO	Closed	01-Dec-22	£16,096
Roche Pharma (Schweiz) AG	5731 - Case studies of RWE in EUnetHTA	VADM	Closed	16-Oct-23	£39,994
Roche Products Limited	5488 - Exploring issues in the modelling of carer quality of life	MVO	Closed	15-Dec-21	£143,226
Roche Products Limited ,	5641 - Innovative Payment models - system readiness	EOI	Closed	, 18-May-23	,£95,438
Sanofi	5632 - International Collaborations in HTA	VADM	Closed	05-Jun-23	£27,915
Sanofi	5632b - Extension of International Collaborations in HTA	VADM	Closed	04-Oct-23	£23,842
Takeda	5502b - Extension of Value of NGS in Lung cancer (dissemination)	VADM	Closed	30-Mar-23	£33,451

The Janssen Pharmaceutical Companies of Johnson & Johnson	5702 - Discounting Panel - ISPOR 2023	VADM	Closed	10-Sep-23	£61,696
The Janssen Pharmaceutical Companies of Johnson & Johnson	5766 - SE-Asia Speaking Tour	VADM	Closed	06-Nov-23	£10,720
Clifford Chance	5589d - Further Extension of Playdoh - Trial Processes	VADM	Closed	01-Dec-23	£96,633
Pfizer Limited	5095h - Extension of Impact of vaccines on productivity and health service pressure	VADM	Closed	29-Apr-22	£24,314
IFPMA	5607 Socio-economic value of adult vaccination	VADM	Closed	01-Nov-24	£467,373
Total won prior to 2024 but live for part of 2024 but now closed					£2,417,793

Project Funder	Project Title	Research Theme	Project Status	Year Won	Project value
Amgen AU	5610 - Combi Rx Roundtable and VSL	VADM	Closed	17-Oct-22	£75,041
Astrazeneca UK Limited	5760 - Updating the AZ VBA narrative	Eol	Closed	18-Oct-23	£78,945
BioLife Plasma Services LP	5758 - Circular economy	POIHS	Closed	30-Dec-23	£110,778
Chiesi	5768 - Sustainability roundup ISPOR	POIHS	Closed	29-Nov-23	£12,752
Daiichi Sankyo	5420a - Extension of Priority roadmap & PVD	VADM	Closed	11-Sep-23	£9,591
Global Health Economics, LLC	5771 - Support for PHRMA work on IRA	Eol	Closed	23-Nov-23	£20,000
GSK	5405a - White Paper Extension of Early Global Value Proposition ABx	VADM	Closed	08-Dec-22	£19,856
GSK	5405c - Early Global Value Proposition ABx - Market Access Primer - Enhancements	VADM	Closed	17-Sep-23	£43,175
Total won prior to 2024 now closed					£370,138

Contract research potential projects pipeline

Project Funder	Project Name	Theme	Budget
Alzheimer's Society	5671c - Extension of Inequalities in dementia	POIHS	£35,577
Astrazeneca UK Limited	5862 - Implementation of IBP	Eol	£131,400
Brunswick group	5851 - Early cancer care impact	VADM	£120,820
Gilead Sciences Europe Ltd	5838 - CGT HTA Learnings Paper	VADM	£157,000
Gilead Sciences Europe Ltd	5727 - Gilead - HIV innovation spillovers and the IRA	EOI	£112,996
Grunenthal Pharma	5591c - Extension of Patient preferences in OA pain (Manuscript)	MVO	£34,207
Grunenthal Pharma	5591a - Extension of Patient preferences in OA pain (EU4 Launch)	MVO	£115,202
Grunenthal Pharma	5591b - Extension of Patient preferences in OA pain (US Launch)	MVO	£27,760
Grunenthal Pharma	5591c - Extension of Patient preferences in OA pain (Manuscript)	MVO	£34,207
GSK	5672d - Publication of Vacci-Nation: the Value of Vaccines to the NHS	VADM	£32,872
GSK	5733a - Extension of Pharmacy-based vaccination in England	POIHS	£17,514
GSK	5777b - Extension of Vaccination Landscape	POIHS	£9,987
GSK	5847 - GSK - Novel Access Models for Anti-infectives	EOI	£199,588
Guardant	5631a - Extension of UK Diagnostic Test Market Access	VADM	£61,011
Moderna	5746 - COVID-19 Macroeconomics	VADM	£36,661
Novartis Pharma Schweiz AG	5804 - Introduction to Utilities	MVO	£32,701
Organon	5873 - Evidencing the policy features of sustainable markets for biosimilars	EOI	£193,619
Organon	5646d - Extension of Dissemination - The dynamics of drug shortages	EOI	£31,650
Pfizer	5866 - International access policy landscape analysis	Eol	£129,772
Pfizer Inc	5829 - BRAVO-Vax	VADM	£58,395
Pharmaceutical Research and Manufacturers of America	5822a - Extension of The Innovation Ecosystem	Eol	£31,042
Roche Products Limited	5705 - Valuing carer QALYs	MVO	£219,443
Shionogi Inc.	5647a - Extension of Antifungal Pull	Eol	£11,885
The Janssen Pharmaceutical Companies of J&J	5766a - Extension of SE-Asia Speaking Tour	VADM	£20,838
Vertex Pharmaceuticals (Europe) Ltd	5828 - Value of pain management interventions	VADM	£0
ViiV Healthcare	5698c - Extension of HIV Fiscal Health Modeling	VADM	£31,319
ViiV Healthcare	5698e - Extension additional expert meetings Chile HIV Fiscal Health Modeling	VADM	£42,852
Potential project pipeline total			£1,930,318

About us

With over 60 years of expertise, the Office of Health Economics (OHE) is the world's oldest independent health economics research organisation. Every day we work to improve health care through pioneering and innovative research, analysis, and education.

As a global thought leader and publisher in the economics of health, health care, and life sciences, we partner with Universities, Government, health systems and the pharmaceutical industry to research and respond to global health challenges.

As a government-recognised Independent Research Organisation and not-for-profit, our international reputation for the quality and independence of our research is at the forefront of all we do. OHE provides independent and pioneering resources, research and analyses in health economics, health policy and health statistics. Our work informs decision-making about health care and pharmaceutical issues at a global level.

All of our work is available for free online at www.ohe.org.

ohe.org

The Office of Health Economics A Company Limited by Guarantee of Registered No.09848965
OHE Consulting Ltd Registered Company No.09853113
OHE is a Charity Registration No.1170829
Registered Office 2nd Floor Goldings House, Hay's Galleria, 2 Hay's Lane, London, SE1 2HB



Registered number: 09848965
Charity number: 1170829

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

REFERENCE AND ADMINISTRATIVE DETAILS OF THE COMPANY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 DECEMBER 2024

Trustees	Ms A R Charlesworth, Trustee Dr R D Torbett, Trustee Mr W P Holmes, Trustee Ms M K Kyle, Trustee (resigned 31 December 2024) Mr W B F Brouwer, Trustee Mr P Catchpole, Trustee Mr T E Allvin, Trustee (appointed 23 February 2024)
Company registered number	09848965
Charity registered number	1170829
Registered office	2nd Floor Goldings House Hay's Galleria 2 Hay's Lane London SE1 2HB
Company secretary	R Hollingsworth
Chief executive officer	Prof G Cookson
Independent auditors	BDO LLP Statutory Auditor & Chartered Accountants 2 City Place Beehive Ring Road Gatwick West Sussex RH6 0PA

THE OFFICE OF HEALTH ECONOMICS
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THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2024

The Trustees, who are also directors for the purposes of company law, present their report together with the audited consolidated financial statements of the group and the company, 'The Office of Health Economics' ("OHE", "the charitable company", "the charity" or "the company") (charity number 1170829) (registered in England and Wales), and its subsidiary undertaking OHE Consulting Limited (registered in England and Wales) (collectively "the group") for year ended 31 December 2024.

The Trustees confirm that the Annual Report and financial statements of the company comply with the current statutory requirements, the requirements of the company's governing document and the provisions of the Statement of Recommended Practice (SORP), applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued in October 2019.

As stated in Note 19 to the financial statements the ultimate parent company of OHE is considered to be the Association of the British Pharmaceutical Industry ("the ABPI"). The registered address of the ABPI is 2nd Floor Goldings House, Hay's Galleria, 2 Hay's Lane, London, SE1 2HB. The ABPI provides a research grant to OHE to enable it to independently progress its charitable purpose and objectives as summarised below.

The financial statements comply with the Charities Act 2011, the Companies Act 2006, the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued in October 2019 ("Charities SORP FRS 102").

Objectives and activities

The Office of Health Economics' objectives are to advance the education of the public in general/health care payers/policy makers, particularly patients and healthcare professionals, on the subject of health economics and healthcare policy.

Activities in furtherance of this include, in particular, but not exclusively:

- the promotion of evidence based health care policy, by carrying out research on the economics of health, health care systems and the life sciences industry;
- the promotion of effective and efficient use of health care resources, by advancing the use of economic approaches to support decision making; and
- the facilitation of decision making and awareness of health care policy issues, by encouraging debate and dissemination of relevant health economics research.

The term "health economics" means the application of economic theory, models and empirical techniques to the analysis of decisions making by people, health care providers and governments with respect to health and health care.

In planning the activities of the charity, the Trustees have had regard to the Charity Commission's guidance on public benefit. They consider the information which follows in this annual report, about the company's aims, activities and achievements in the areas of interest that the company supports demonstrates the benefit to its beneficiaries and through them to the public.

THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Achievements and performance

OHE has once again undertaken an ambitious programme of original research, generating findings published in high quality peer reviewed journals, and via its own publication series, on the economics of health technology appraisal, the economics of health care systems and the economics of the life sciences industry. OHE's work has direct relevance to policy, and evidence from our research programme informs health care decision making and health care policy. OHE also contributes directly to the development and promotion of excellence in the field of health economics via our seminars, lectures, leadership roles in professional societies, and other academic activities. OHE's consulting arm has produced authoritative analyses for our clients and a financial surplus from which it contributes to the financial sustainability of OHE as a research charity.

The company and group have continued to perform successfully this year. Internal and external funding has continued to be provided to finance a wide range of research projects and consultancy advice provided to the life sciences industry, public sector organisations and the ABPI.

The key performance indicators are external research funding targets, consultancy income targets and operating expenditure targets. In 2024, research funding was 117% of target and consultancy income was 105% of target. Operating expenditure in 2024 was 97% of the budget target. Overall, the company made a net operating loss, before receipt of Gift Aid from OHE Consulting Limited, as it made significant investments in charitable work, including the development of Third Edition of The Health Economics Dictionary which required significant staff input and constrained the organisation's capacity to deliver against the full consultancy target for the year.

Financial review

a. Going concern

After making appropriate enquiries, and getting confirmation of on going support from ABPI (Note 18), the Trustees have a reasonable expectation that the company has adequate resources to continue in operational existence for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing the financial statements.

The Trustees are aware that the operational and financial implications of the conflict between Ukraine and Russia as well as the Gaza war, have been considered by the Governance Committee of OHE's ultimate parent company the ABPI. The Governance Committee have concluded that the ABPI has sufficient financial reserves, income and expenditure controls to avoid any liquidity issues for at least 12 months from the approval of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Financial review (continued)

b. Reserves policy

The Trustees have examined the charitable company's requirement for resources in light of the main risks to the company and have no outstanding commitments or cash demand which are not adequately covered by existing resources.

The group's reserves policy continues to ensure that the company has adequate cash and reserves to meet current and future needs, and this is reviewed annually as part of the budget process. The charity reserves was £1,567,558 (2023 - £1,092,664) as at the year ended 31 December 2024. The Trustees have agreed with the ABPI that the research grant will in principle be a fixed amount each year, to help enable OHE to record an operating profit each year and build its own financial reserves.

The group's reserves target is 6 months of payroll expenditure. For 2025, that would be a target of £1,856,000. the group continue to work towards this by preparing a budget that delivers a 5% surplus to steadily increase the total reserves which the Trustees and Executive Management Team believe is sustainable. This has been possible over the past several years with the exception of 2023. We suggest that generating a surplus which is too significant would not be inline with delivering on our Charitable Objects.

The policy will seek to balance the goal of sustainability with the needs to be efficient as a not-for-profit organisation. Research funding and consultancy contracts are always agreed before making any expenditure commitments.

c. Work programmes and funding

The company's current work programme is supported by research grants and consultancy revenues from a wide range of UK and international sources including the ABPI and other commercial clients, as well as the Health Foundation, European Commission, and a number of charitable and other organisations.

d. Results for the year

OHE Consulting Limited, the company's wholly owned subsidiary, made an operating profit of £1,614,938 (2023 - £676,952) and made a gift aid payment for this amount to its parent company, the OHE.

The company made an operating loss of £1,194,790 (2023 - £807,403) prior to the gift aid payment received from OHE Consulting Limited, and therefore overall the group realised a profit for 2024 of £474,894 (2023 - loss of £130,451).

e. Fundraising

Section 162a of the Charities Act 2011 requires charities to make a statement regarding fundraising activities. Although we do not undertake fundraising from the general public, the legislation defines fundraising as "soliciting or otherwise procuring money or other property for charitable purposes." Such amounts receivable would be presented in our accounts as "voluntary income" and includes legacies and grants.

THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Structure, governance and management

a. Constitution and legal structure

The company is registered as a charitable company limited by guarantee (charity number 1170829) and was set up by a Memorandum of Association on 29 October 2015.

The company has a wholly owned subsidiary, OHE Consulting Limited, a company limited by shares. This company provides health economic consultancy services to the life sciences industry. The legal structure enables the research activities of the charitable company to be kept separate to the commercial consultancy activity. Both companies share the same directors and key management personnel.

b. Methods of appointment or election of Trustees

The management of the company is the responsibility of the Trustees who are elected and co opted under the terms of the Memorandum of Association.

The ABPI, as the sole member of the charity, has the sole right to appoint Trustees to the Board of the charity.

c. Policies adopted for the induction and training of Trustees

As part of their training, Trustees are provided a comprehensive 'operating' manual, which includes the charitable company's Memorandum of Association and Charity Commission guidance on trustee responsibility. All Trustees are aware of their legal duties and obligations in respect of the management of the charitable company, including in relation to the protection of its assets.

d. Pay policy for key management personnel

Two Trustees (2023: Two) received fees for services during the period. Details of Trustees' fees, expenses and related party transactions are disclosed in Note 8 to the financial statements.

The company uses benchmark data from other research and consultancy organisations to help set pay and remuneration for key staff. Annual pay reviews are then linked to performance against agreed objectives, inflation rates and market trends.

THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Structure, governance and management (continued)

e. Organisational structure and decision-making policies

The company is governed by the Board of Trustees. The Trustees of the company during the period were as follows:

Ms A Charlesworth, Trustee
Mr R D Torbett, Trustee
Mr W P Holmes, Trustee
Ms K Kyle, Trustee (resigned 31 December 2024)
Mr W B F Brouwer, Trustee
Mr P Catchpole, Trustee
Mr T E Allvin, Trustee (appointed 23 February 2024)

In addition to the Board of Trustees, the company is managed by the Executive Management Team, and advised by an Editorial Committee, a Research Committee and a Policy Committee. Each Committee is Chaired by a Trustee and provides regular reports to the entire Board.

The Executive Management Team during the period were as follows:

Prof G Cookson (Chief Executive)
Prof L Steuten (Deputy Chief Executive)
Prof M Jofre Bonet (Chief Research Officer and Head of Education)

The ultimate parent undertaking and controlling party is considered to be the Association of the British Pharmaceutical Industry ("the ABPI"), registered in England and Wales, 09826787, by virtue of it being the sole member of the company. Transactions with other related parties are disclosed in Note 18.

As per the company Articles, the ABPI is entitled to appoint a majority of the Trustees (4/7), one of which is the Chief Executive of the ABPI.

f. Risk management

The Trustees have assessed the major risks to which the company is exposed, in particular those related to the operations and finances of the company, and are satisfied that systems and procedures are in place to manage the exposure to the major risks.

The principal risks facing the company and group are a reduction in research funding or consultancy income together with the loss of key staff. Funding and income wins and proposals are closely monitored against budget expectations by the Executive Management Team and if necessary cost savings are identified to cover any income shortfall. A competitive remuneration package, development through work experience and succession planning are used to attract and retain high calibre staff.

Plans for future periods

OHE will continue to develop its programme of original research, supported by a wide range of research funders in the UK and internationally. OHE will continue to expand the focus of our work beyond the UK, and to focus effort on maximising the impact of our research on improving health care decision making both in the UK and further afield. In its role as a newly established charity, OHE will be developing evidence based policy positions, which it will advocate by engaging with a wide range of stakeholders via events, media commentaries, and publications.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Statement of Trustees' responsibilities

The Trustees (who are also directors of OHE for the purposes of company law) are responsible for preparing the Trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). Company law requires the Trustees to prepare financial statements for each financial period. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and group for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP (FRS 102);
- make judgements and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Group will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Group and the company's transactions and disclose with reasonable accuracy at any time the financial position of the Group and the company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Group and the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of information to auditors

Each of the persons who are Trustees at the time when this Trustees' Report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charitable group's auditors are unaware; and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charitable group's auditors are aware of that information.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Auditors

The auditors, BDO LLP, will be proposed for reappointment in accordance with section 485 of the Companies Act 2006. BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127). The registered office is 2 City Place, Beehive Ring Road, Gatwick, West Sussex, RH6 0PA.


This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2016 relating to small companies.

This report was approved by the Trustees, and signed on their behalf by:

Signed by:

D9B57AAF63424FB...
Trustee

Date: 24-Jun-2025 | 11:05 BST

DocuSigned by:

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Trustee

Date: 23-Jun-2025 | 12:00 BST

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS

Opinion

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the Parent Charitable Company's affairs as at 31 December 2024 and of the Group's incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

We have audited the financial statements of The Office of Health Economics ("the Parent Charitable Company") and its subsidiaries ("the Group") for the year ended 31 December 2024 which comprise the consolidated statement of financial activities (incorporating income and expenditure account), the consolidated and charity balance sheets, the consolidated statement of cash flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remain independent of the Group and the Parent Charitable Company in accordance with the ethical requirements relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group and the Parent Charitable Company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Other information

The Trustees are responsible for the other information. The other information comprises the information included in the Trustees' Report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Other Companies Act 2006 reporting

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Report, which includes the Directors' Report prepared for the purposes of Company Law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Directors' Report, which is included in the Trustees' Report, has been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Group and the Parent Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion;

- adequate accounting records have not been kept by the Parent Charitable Company, or returns adequate for our audit have not been received from branches not visited by us; or
- the Parent Charitable Company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the directors' report and from the requirement to prepare a strategic report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Responsibilities of Trustees

As explained more fully in the Statement of Trustees' responsibilities, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the Group's and the Parent Charitable Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the Group or the Parent Charitable Company or to cease operations, or have no realistic alternative but to do so.

Auditors' responsibilities for the audit of the financial statements

We have been appointed as auditor under the Companies Act 2006 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Extent to which the audit was capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Non-compliance with laws and regulations

Based on:

- Our understanding of the Group and the sector in which it operates;
- Discussion with management and those charged with governance; and
- Obtaining and understanding of the Group's policies and procedures regarding compliance with laws and regulations

we considered the significant laws and regulations to be UK Companies Act, Charities Act 2011, and relevant UK tax legislation.

The Group is also subject to laws and regulations where the consequence of non-compliance could have a material effect on the amount or disclosures in the financial statements, for example through the imposition of fines or litigations. We identified such laws and regulations to be employment law, data protection and health and safety legislation.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Our procedures in respect of the above included:

- Review of minutes of meetings of those charged with governance for any instances of non-compliance with laws and regulations;
- Review of financial statement disclosures and agreeing to supporting documentation; and
- Review of legal expenditure accounts to understand the nature of expenditure incurred.

Fraud

We assessed the susceptibility of the financial statements to material misstatement, including fraud. Our risk assessment procedures included:

- Enquiry with management and those charged with governance regarding any known or suspected instances of fraud;
- Obtaining an understanding of the Group's policies and procedures relating to:
 - Detecting and responding to the risks of fraud; and
 - Internal controls established to mitigate risks related to fraud.
- Review of minutes of meeting of those charged with governance for any known or suspected instances of fraud;
- Discussion amongst the engagement team as to how and where fraud might occur in the financial statements; and
- Performing analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;

Based on our risk assessment, we considered the areas most susceptible to fraud to be posting of inappropriate journal entries and management bias in income recognition.

Our procedures in respect of the above included:

- Testing a sample of journal entries throughout the year, which met a defined risk criteria, by agreeing to supporting documentation;
- Testing an additional unpredictable sample of journals throughout the year, outside of the defined risk criteria, by agreeing to supporting documentation; and
- Assessing significant judgements made by management for bias, including management's assessment of the stage of completion related to consultancy and research income.

We also communicated relevant identified laws and regulations and potential fraud risks to all engagement team members and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

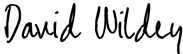
A further description of our responsibilities for the audit of the financial statements is located at the Financial Reporting Council's ("FRC's") website at: <https://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Use of our report

This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Charitable Company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charitable Company and the Charitable Company's members as a body, for our audit work, for this report, or for the opinions we have formed.

DocuSigned by:

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David Wildey (Statutory Auditor)

For and on behalf of BDO LLP, Statutory Auditor
Gatwick, UK

Date: 24 June 2025

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

**CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND
EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 DECEMBER 2024**

		Unrestricted funds 2024	Total funds 2024	Total funds 2023
	Note			
Income from:				
Donations and research grant		205,484	205,484	211,216
Charitable activities		855,987	855,987	697,957
Other trading activities		4,204,016	4,204,016	3,545,831
Interest receivable		16,745	16,745	9,405
Total income		5,282,232	5,282,232	4,464,409
Expenditure on:				
Costs of other trading activities	4	2,609,887	2,609,887	2,876,291
Charitable activities	4	2,197,451	2,197,451	1,718,569
Total expenditure		4,807,338	4,807,338	4,594,860
Net movement in funds		474,894	474,894	(130,451)
Reconciliation of funds:				
Total funds brought forward		1,092,664	1,092,664	1,223,115
Net movement in funds		474,894	474,894	(130,451)
Total funds carried forward		1,567,558	1,567,558	1,092,664

The Consolidated Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 18 to 32 form part of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

CONSOLIDATED BALANCE SHEET
AS AT 31 DECEMBER 2024

	Note	2024	2023
Fixed assets			
Tangible assets	9	17,220	33,115
		<u>17,220</u>	<u>33,115</u>
Current assets			
Debtors	10	2,724,920	1,879,379
Cash at bank and in hand		694,601	659,393
		<u>3,419,521</u>	<u>2,538,772</u>
Creditors: amounts falling due within one year	11	(1,869,183)	(1,479,223)
Net current assets		<u>1,550,338</u>	<u>1,059,549</u>
Total assets less current liabilities		<u>1,567,558</u>	<u>1,092,664</u>
Net assets excluding pension asset		<u>1,567,558</u>	<u>1,092,664</u>
Total net assets		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>
Charity funds			
Restricted funds		-	-
Unrestricted funds		1,567,558	1,092,664
Total funds		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements were approved and authorised for issue by the Trustees on and signed on their behalf by:

Signed by:

D9B57AAF63424FB...

Trustee

Date: 24-Jun-2025 | 11:05 BST

DocuSigned by:

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Trustee

Date: 23-Jun-2025 | 12:00 BST

The notes on pages 18 to 32 form part of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

COMPANY BALANCE SHEET
AS AT 31 DECEMBER 2024

		2024	2023
	Note		
Fixed assets			
Tangible assets	9	17,220	33,115
Investments		1	1
		<u>17,221</u>	<u>33,116</u>
Current assets			
Debtors	10	2,067,875	1,715,883
Cash at bank and in hand		305,491	130,616
		<u>2,373,366</u>	<u>1,846,499</u>
Creditors: amounts falling due within one year	11	(823,029)	(786,951)
Net current assets		<u>1,550,337</u>	<u>1,059,548</u>
Total net assets less current liabilities		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>
Charity funds			
Unrestricted funds		<u>1,567,558</u>	<u>1,092,664</u>
Total funds		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

COMPANY BALANCE SHEET (CONTINUED)
AS AT 31 DECEMBER 2024


The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The Company has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of Comprehensive Income in these financial statements.

The profit after tax after gift aid of the parent Company for the year was £474,894 (2023 - loss after tax after gift aid £130,451).


The financial statements were approved and authorised for issue by the Trustees on and signed on their behalf by:

Signed by:

D9B57AAF63424FB...

Trustee

Date: 24-Jun-2025 | 11:05 BST

The notes on pages 18 to 32 form part of these financial statements.

DocuSigned by:

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Trustee

Date: 23-Jun-2025 | 12:00 BST

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2024

	2024	2023
Cash flows from/(used in) operating activities		
Net cash generated from/(used in) operating activities (note 14)	18,463	(371,764)
Cash flows from/(used in) investing activities		
Purchase of tangible fixed assets	-	(15,895)
Net cash provided by/(used in) investing activities	-	(15,895)
Cash flows from financing activities		
Interest received	16,745	9,405
Net cash provided by financing activities	16,745	9,405
Change in cash and cash equivalents in the year	35,208	(378,254)
Cash and cash equivalents at the beginning of the year	659,393	1,037,647
Cash and cash equivalents at the end of the year	694,601	659,393

The notes on pages 18 to 32 form part of these financial statements

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies

1.1 Basis of preparation of financial statements

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The Office of Health Economics ("the company") meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

The Statement of Financial Activities (SOFA) and Balance Sheet consolidate the financial statements of the company and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

The company has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of Financial Activities in these financial statements.

The net income and expenditure for the period dealt with in the accounts of the parent company, after receipt of gift aid, was a net income of £474,894 (2023 - *net expenditure of £130,451*).

In considering whether it continues to be appropriate to prepare financial statements on a going concern basis the Trustees have considered the ongoing support from the ABPI, the evaluation of the conflicts around the world, inflation and interest rate rises, and concludes that the ABPI has sufficient financial reserves, income and expenditure controls to avoid any liquidity issues for at least 12 months from the approval of these financial statements. The ABPI has confirmed its support and provided a letter confirming this.

There is no indication that a material uncertainty exists that may cast significant doubt on the company's ability to continue as a going concern. We have come to this conclusion following a review of the liabilities and cash flow over the next 12-18 months.

1.2 Company Status

The company is a company limited by guarantee. The members of the company are the Trustees named on page 5. In the event of the company being wound up, the liability in respect of the guarantee is limited to £10 per member of the company.

1.3 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Group and which have not been designated for other purposes.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.4 Income

All income is recognised once the company has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Consultancy and research project income is included to the extent that it has been earned in the period by reference to appropriate project milestones or project completion. Payments received in advance for consultancy projects are included in Creditors (Deferred Income) to the extent that these have not been earned in the period. Project income yet to be invoiced has been accrued within Debtors (Accrued Income).

1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Group's objectives, as well as any associated support costs.

Support costs are those costs incurred directly in support of expenditure on the objects of the company and include project management carried out at Headquarters. Governance costs are those incurred in connection with administration of the company and compliance with constitutional and statutory requirements.

Costs of generating funds are costs incurred in attracting voluntary income, and those incurred in trading activities that raise funds.

Charitable activities and Governance costs are costs incurred on the company's educational operations, including support costs and costs relating to the governance of the company apportioned to charitable activities.

1.6 Tangible fixed assets and depreciation

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.6 Tangible fixed assets and depreciation (continued)

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Tangible fixed assets are carried at cost, net of depreciation and any provision for impairment. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

IT Software	-	33% straight line
-------------	---	-------------------

1.7 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

1.8 Cash and Cash Equivalents

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.9 Liabilities and provisions

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the company anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

1.10 Financial instruments

The company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments.

Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.11 Foreign currencies

The company's and group's functional and presentational currency is Pounds Sterling.

Monetary assets and liabilities denominated in foreign currencies are translated into sterling at rates of exchange ruling at the reporting date.

Transactions in foreign currencies are translated into sterling at the rate ruling on the date of the transaction.

Exchange gains and losses are recognised in the Consolidated Statement of Financial Activities incorporating the income and expenditure account.

1.12 Pensions

Another group entity operates a defined contribution pension scheme and the pension charge represents the amounts which have been recharged by another group entity in respect of the staff pensions payable to the funds in respect of the year.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

2. Critical accounting estimates and areas of judgment

Estimates and judgments are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions:

The company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Critical areas of judgement:

(a) Impairment of trade and other debtors

The company makes a judgement of the recoverable value of trade and other debtors. When assessing impairment of trade and other debtors, management considers factors including the credit rating of the debtor, ageing profile of the debtors and historical experience. See Note 11 for the net carrying amount of debtors.

(b) Accrued and deferred income

The group reviews the amount of any income generated but not invoiced to customers at the year end, or vice versa, based on the extent of services provided and what is expected to be invoiced after the period end, or already been invoiced before the period end.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

3. Analysis of expenditure by activities

	Activities undertaken directly 2024	Support costs 2024	Total funds 2024
Unrestricted			
Direct charitable expenditure	1,989,101	-	1,989,101
Support costs - governance	-	114,027	114,027
Support costs - general	-	94,323	94,323
Total 2024	1,989,101	208,350	2,197,451

	Activities undertaken directly 2023	Support costs 2023	Total funds 2023
Unrestricted			
Direct charitable expenditure	1,612,284	-	1,612,284
Support costs - governance	-	31,110	31,110
Support costs - general	-	75,175	75,175
Total 2023	1,612,284	106,285	1,718,569

Included within Direct charitable expenditure are staff costs totalling £1,225,077 (2023 - £961,939). A further £2,145,635 (2023 - £2,226,206) of staff costs are included within OHE Consulting Limited trading activities within Note 4. An analysis of total staff costs of £3,370,712 (2023 - £3,188,145), is provided in Note 6.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

3. Analysis of expenditure by activities (continued)

Analysis of support costs

	Governance 2024	General 2024	Total funds 2024
Legal and professional related costs	84,554	-	84,554
Accountancy related costs	29,473	-	29,473
Human resources related costs	-	26,582	26,582
Facilities related costs	-	3,767	3,767
IT related costs	-	21,035	21,035
Other office support related costs	-	42,939	42,939
Total 2024	114,027	94,323	208,350

	Governance 2023	General 2023	Total funds 2023
Legal and professional related costs	7,619	-	7,619
Accountancy related costs	23,491	-	23,491
Human resources related costs	-	21,184	21,184
Facilities related costs	-	3,003	3,003
IT related costs	-	16,765	16,765
Other office support related costs	-	34,223	34,223
Total 2023	31,110	75,175	106,285

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

4. Analysis of expenditure by expenditure type

	Other costs 2024	<i>Other costs 2023</i>
	£	<i>£</i>
OHE Consulting trading activities	2,609,887	<i>2,876,291</i>
Direct charitable expenditure	1,989,101	<i>1,612,284</i>
General support costs	94,323	<i>75,175</i>
Charitable activities	2,083,424	<i>1,687,459</i>
 Expenditure on governance	 114,027	 <i>31,110</i>
	<u>2,197,451</u>	<i><u>1,718,569</u></i>
 Total Expenditure	 <u>4,807,338</u>	 <i><u>4,594,860</u></i>

5. Auditors' remuneration

	2024	<i>2023</i>
Fees payable to the company's auditor and its associates in respect of:		
Audit-related assurance services	<u>10,000</u>	<i><u>9,000</u></i>

6. Staff costs

Staff costs, including key management personnel (see Note 7), were as follows:

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Wages and salaries	2,845,429	<i>2,693,492</i>	1,034,880	<i>811,280</i>
Social security costs	332,758	<i>317,736</i>	129,120	<i>93,346</i>
Contribution to defined contribution pension schemes (Note 17)	192,525	<i>176,917</i>	61,077	<i>57,313</i>
	<u>3,370,712</u>	<i><u>3,188,145</u></i>	<u>1,225,077</u>	<i><u>961,939</u></i>

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

6. Staff costs (continued)

The average number of persons employed by the company during the year was as follows:

	Group 2024 No.	Group 2023 No.	Company 2024 No.	Company 2023 No.
Key management personnel	3	3	3	3
Administrative staff	33	33	33	33
	<u>36</u>	<u>36</u>	<u>36</u>	<u>36</u>

The number of higher paid employees was:

	Group 2024 No.	Group 2023 No.
In the band £60,001 - £70,000	2	5
In the band £70,001 - £80,000	3	6
In the band £80,001 - £90,000	4	2
In the band £90,001 - £100,000	3	1
In the bank £100,001 - £110,000	1	2
In the band £110,001 - £120,000	1	-
In the band £120,001 - £130,000	1	-
In the band £140,001 - £150,000	1	1
In the band £160,001 - £170,000	1	-
In the band £220,001 - £230,000	-	1
In the band £240,001 - £250,000	1	-
In the band £350,001 - £360,000	1	1

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

7. Key management personnel

	2024	2023
Wages and salaries	771,027	719,995
Social security costs	106,402	93,199
Cost of defined contribution scheme (Note 17)	19,721	25,270
	<u>897,150</u>	<u>838,464</u>

In addition to the Board of Trustees, there were 3 (2023 - 3) key management personnel, 2 (2023 - 2) of which accrued benefits under another group entity's defined contribution pension scheme during the period.

8. Trustees' fees

	2024	2023
Fees for services provided (see below)	26,470	26,555
Reimbursed travel expenses paid to 1 trustee	269	-
	<u>26,739</u>	<u>26,555</u>

The highest paid Trustee received remuneration of £NIL (2023 - £NIL).

A Charlesworth, Trustee, received fees for services provided during the period of £13,606 (2023 - £14,065).

M Kyle, Trustee, received fees for services provided during the period of £12,864 (2023 - £12,490).

The fees paid to the two Trustees noted above during the period related to the provision of consultancy and advisory services in respect of direct charitable activities. This directly contributed to the company achieving its' objectives.

The services provided by the Trustees relates to advice in respect of specialist areas within health economics and healthcare policy and hence it would have proven difficult to obtain these services from a third party.

No Trustees received fees for being Trustees and no other remuneration or expenses were paid to the Trustees during the period.

The above payments were made in line with the authority contained within the Charity's memorandum and articles of association.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024**

9. Tangible fixed assets

Group and Company

	IT software
Cost or valuation	
At 1 January 2024	47,685
At 31 December 2024	47,685
Depreciation	
At 1 January 2024	14,570
Charge for the year	15,895
At 31 December 2024	30,465
Net book value	
At 31 December 2024	17,220
At 31 December 2023	33,115

10. Debtors

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Due within one year				
Trade debtors	2,010,319	1,220,246	185,788	60,386
Amounts owed by group undertakings	-	-	1,597,341	1,315,578
Other debtors	54,249	-	54,249	-
Prepayments and accrued income	660,352	659,133	230,497	339,919
	2,724,920	1,879,379	2,067,875	1,715,883

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

11. Creditors: Amounts falling due within one year

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Trade creditors	61,287	32,821	47,657	30,393
Amounts owed to group undertakings	578,890	591,930	517,369	577,359
Other taxation and social security	4,678	-	4,678	-
Other creditors	43,000	-	2,310	-
Accruals and deferred income	1,181,328	854,472	251,015	179,199
	1,869,183	1,479,223	823,029	786,951
	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Deferred income at the beginning of the year	581,655	594,710	57,369	244,756
Resources deferred during the year	880,844	581,655	111,904	57,369
Amounts released from previous periods	(581,655)	(594,710)	(57,369)	(244,756)
Deferred income at the end of the year	880,844	581,655	111,904	57,369

12. Financial instruments

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Financial assets				
Financial assets measured at fair value through income and expenditure	694,601	659,393	305,491	130,616
Financial assets measured at amortised cost	2,012,754	1,820,128	1,785,564	1,656,632
	2,707,355	2,479,521	2,091,055	1,787,248
	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Financial liabilities				
Financial liabilities measured at cost less impairment	988,339	897,568	711,125	729,582

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

12. Financial instruments (continued)

Financial assets measured at fair value through income and expenditure comprise of cash and cash equivalents.

Financial assets measured at amortised cost comprise of debtors falling due within one year, excluding prepayments.

Financial liabilities measured at cost less impairment comprise of creditors falling due within one year, excluding deferred income.

13. Reconciliation of net movement in funds to net cash flow from/(used in) operating activities

	Group 2024	<i>Group 2023</i>
Net surplus/(deficit) for the year (as per Statement of Financial Activities)	474,894	<i>(130,451)</i>
Adjustments for:		
Depreciation charges	15,895	<i>14,570</i>
Increase in debtors	(845,541)	<i>(334,374)</i>
Increase in creditors	389,960	<i>87,896</i>
Interest received	(16,745)	<i>(9,405)</i>
Net cash provided by/(used in) operating activities	18,463	<i>(371,764)</i>

14. Cash and cash equivalents

	Group 2024	<i>Group 2023</i>
Cash at bank and in hand	694,601	<i>659,393</i>
Total cash and cash equivalents	694,601	<i>659,393</i>

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

15. Analysis of changes in net debt (Group)

	At 1 January 2024	Cash flows	At 31 December 2024
Cash at bank and in hand	659,393	35,208	694,601
	<u>659,393</u>	<u>35,208</u>	<u>694,601</u>

16. Pension commitments

The ultimate parent entity operates a defined benefit contribution pension scheme. The pensions cost charge represents contributions which were payable to the fund, and were recharged by another group entity for staff undertaking work on behalf of the OHE Group, and amounted to £192,525 (2023 - £176,917) for the group and £61,077 (2023 - £57,313) for the company.

17. Related party transactions

During the period two Trustees received fees for services totalling £26,470 (2023 - £26,555) (refer to Note 8 for details). At the balance sheet date, no amount (2023 - £Nil) of this was outstanding.

During the period the company received research grants totalling £150,000 (2023 - £200,000) from the ABPI.

During the period, the group and company incurred support costs totalling £443,280 and £208,350 respectively (2023 - £368,280 and £106,285), which were recharged by the ABPI (refer to Note 19 below).

During the current and comparative period, the company received a transfer of profits from OHE Consulting Limited, which were transferred via Gift Aid (refer to Note 19 below).

18. Ultimate parent undertaking and controlling party

The ultimate parent undertaking and controlling party is considered to be the Association of the British Pharmaceutical Industry Limited ("the ABPI"), registered in England and Wales, 09826787, by virtue of it being the sole member of the company. The Association represents innovative research based biopharmaceutical companies, large, medium and small, leading an exciting era of bioscience in the UK. This company prepares consolidated financial statements. These are available to the public and may be obtained from 2nd Floor Goldings House, Hay's Galleria, 2 Hay's Lane, London, SE1 2HB.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

19. Principal subsidiaries

The following was a subsidiary undertaking of the company:

Name	Country of Incorporation	Principal activity	Holding
OHE Consulting Limited	United Kingdom	Provision of policy and strategic expertise on healthcare and related matters.	100%

During the period, OHE Consulting Limited, registered company number 09853113, generated income totalling £4,204,016 (2023 - £3,545,831), and incurred expenditure totalling £2,602,333 (2023 - £2,876,291), plus interest received of £13,255 (2023 - £7,412), generating profits for the period of £1,614,938 (2023 - £676,952). OHE Consulting Limited elected to transfer its profits, by Gift Aid, to the company leaving aggregated assets in OHE Consulting Limited of £1 at the period end.

20. Post balance sheet events

There have been no significant events affecting the group since the year-end.

Registered number: 09848965
Charity number: 1170829

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

REFERENCE AND ADMINISTRATIVE DETAILS OF THE COMPANY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 DECEMBER 2024

Trustees	Ms A R Charlesworth, Trustee Dr R D Torbett, Trustee Mr W P Holmes, Trustee Ms M K Kyle, Trustee (resigned 31 December 2024) Mr W B F Brouwer, Trustee Mr P Catchpole, Trustee Mr T E Allvin, Trustee (appointed 23 February 2024)
Company registered number	09848965
Charity registered number	1170829
Registered office	2nd Floor Goldings House Hay's Galleria 2 Hay's Lane London SE1 2HB
Company secretary	R Hollingsworth
Chief executive officer	Prof G Cookson
Independent auditors	BDO LLP Statutory Auditor & Chartered Accountants 2 City Place Beehive Ring Road Gatwick West Sussex RH6 0PA

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

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THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2024

The Trustees, who are also directors for the purposes of company law, present their report together with the audited consolidated financial statements of the group and the company, 'The Office of Health Economics' ("OHE", "the charitable company", "the charity" or "the company") (charity number 1170829) (registered in England and Wales), and its subsidiary undertaking OHE Consulting Limited (registered in England and Wales) (collectively "the group") for year ended 31 December 2024.

The Trustees confirm that the Annual Report and financial statements of the company comply with the current statutory requirements, the requirements of the company's governing document and the provisions of the Statement of Recommended Practice (SORP), applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued in October 2019.

As stated in Note 19 to the financial statements the ultimate parent company of OHE is considered to be the Association of the British Pharmaceutical Industry ("the ABPI"). The registered address of the ABPI is 2nd Floor Goldings House, Hay's Galleria, 2 Hay's Lane, London, SE1 2HB. The ABPI provides a research grant to OHE to enable it to independently progress its charitable purpose and objectives as summarised below.

The financial statements comply with the Charities Act 2011, the Companies Act 2006, the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued in October 2019 ("Charities SORP FRS 102").

Objectives and activities

The Office of Health Economics' objectives are to advance the education of the public in general/health care payers/policy makers, particularly patients and healthcare professionals, on the subject of health economics and healthcare policy.

Activities in furtherance of this include, in particular, but not exclusively:

- the promotion of evidence based health care policy, by carrying out research on the economics of health, health care systems and the life sciences industry;
- the promotion of effective and efficient use of health care resources, by advancing the use of economic approaches to support decision making; and
- the facilitation of decision making and awareness of health care policy issues, by encouraging debate and dissemination of relevant health economics research.

The term "health economics" means the application of economic theory, models and empirical techniques to the analysis of decisions making by people, health care providers and governments with respect to health and health care.

In planning the activities of the charity, the Trustees have had regard to the Charity Commission's guidance on public benefit. They consider the information which follows in this annual report, about the company's aims, activities and achievements in the areas of interest that the company supports demonstrates the benefit to its beneficiaries and through them to the public.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Achievements and performance

OHE has once again undertaken an ambitious programme of original research, generating findings published in high quality peer reviewed journals, and via its own publication series, on the economics of health technology appraisal, the economics of health care systems and the economics of the life sciences industry. OHE's work has direct relevance to policy, and evidence from our research programme informs health care decision making and health care policy. OHE also contributes directly to the development and promotion of excellence in the field of health economics via our seminars, lectures, leadership roles in professional societies, and other academic activities. OHE's consulting arm has produced authoritative analyses for our clients and a financial surplus from which it contributes to the financial sustainability of OHE as a research charity.

The company and group have continued to perform successfully this year. Internal and external funding has continued to be provided to finance a wide range of research projects and consultancy advice provided to the life sciences industry, public sector organisations and the ABPI.

The key performance indicators are external research funding targets, consultancy income targets and operating expenditure targets. In 2024, research funding was 117% of target and consultancy income was 105% of target. Operating expenditure in 2024 was 97% of the budget target. Overall, the company made a net operating loss, before receipt of Gift Aid from OHE Consulting Limited, as it made significant investments in charitable work, including the development of Third Edition of The Health Economics Dictionary which required significant staff input and constrained the organisation's capacity to deliver against the full consultancy target for the year.

Financial review

a. Going concern

After making appropriate enquiries, and getting confirmation of on going support from ABPI (Note 18), the Trustees have a reasonable expectation that the company has adequate resources to continue in operational existence for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing the financial statements.

The Trustees are aware that the operational and financial implications of the conflict between Ukraine and Russia as well as the Gaza war, have been considered by the Governance Committee of OHE's ultimate parent company the ABPI. The Governance Committee have concluded that the ABPI has sufficient financial reserves, income and expenditure controls to avoid any liquidity issues for at least 12 months from the approval of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Financial review (continued)

b. Reserves policy

The Trustees have examined the charitable company's requirement for resources in light of the main risks to the company and have no outstanding commitments or cash demand which are not adequately covered by existing resources.

The group's reserves policy continues to ensure that the company has adequate cash and reserves to meet current and future needs, and this is reviewed annually as part of the budget process. The charity reserves was £1,567,558 (2023 - £1,092,664) as at the year ended 31 December 2024. The Trustees have agreed with the ABPI that the research grant will in principle be a fixed amount each year, to help enable OHE to record an operating profit each year and build its own financial reserves.

The group's reserves target is 6 months of payroll expenditure. For 2025, that would be a target of £1,856,000. the group continue to work towards this by preparing a budget that delivers a 5% surplus to steadily increase the total reserves which the Trustees and Executive Management Team believe is sustainable. This has been possible over the past several years with the exception of 2023. We suggest that generating a surplus which is too significant would not be inline with delivering on our Charitable Objects.

The policy will seek to balance the goal of sustainability with the needs to be efficient as a not-for-profit organisation. Research funding and consultancy contracts are always agreed before making any expenditure commitments.

c. Work programmes and funding

The company's current work programme is supported by research grants and consultancy revenues from a wide range of UK and international sources including the ABPI and other commercial clients, as well as the Health Foundation, European Commission, and a number of charitable and other organisations.

d. Results for the year

OHE Consulting Limited, the company's wholly owned subsidiary, made an operating profit of £1,614,938 (2023 - £676,952) and made a gift aid payment for this amount to its parent company, the OHE.

The company made an operating loss of £1,194,790 (2023 - £807,403) prior to the gift aid payment received from OHE Consulting Limited, and therefore overall the group realised a profit for 2024 of £474,894 (2023 - loss of £130,451).

e. Fundraising

Section 162a of the Charities Act 2011 requires charities to make a statement regarding fundraising activities. Although we do not undertake fundraising from the general public, the legislation defines fundraising as "soliciting or otherwise procuring money or other property for charitable purposes." Such amounts receivable would be presented in our accounts as "voluntary income" and includes legacies and grants.

THE OFFICE OF HEALTH ECONOMICS
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TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Structure, governance and management

a. Constitution and legal structure

The company is registered as a charitable company limited by guarantee (charity number 1170829) and was set up by a Memorandum of Association on 29 October 2015.

The company has a wholly owned subsidiary, OHE Consulting Limited, a company limited by shares. This company provides health economic consultancy services to the life sciences industry. The legal structure enables the research activities of the charitable company to be kept separate to the commercial consultancy activity. Both companies share the same directors and key management personnel.

b. Methods of appointment or election of Trustees

The management of the company is the responsibility of the Trustees who are elected and co opted under the terms of the Memorandum of Association.

The ABPI, as the sole member of the charity, has the sole right to appoint Trustees to the Board of the charity.

c. Policies adopted for the induction and training of Trustees

As part of their training, Trustees are provided a comprehensive 'operating' manual, which includes the charitable company's Memorandum of Association and Charity Commission guidance on trustee responsibility. All Trustees are aware of their legal duties and obligations in respect of the management of the charitable company, including in relation to the protection of its assets.

d. Pay policy for key management personnel

Two Trustees (2023: Two) received fees for services during the period. Details of Trustees' fees, expenses and related party transactions are disclosed in Note 8 to the financial statements.

The company uses benchmark data from other research and consultancy organisations to help set pay and remuneration for key staff. Annual pay reviews are then linked to performance against agreed objectives, inflation rates and market trends.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Structure, governance and management (continued)

e. Organisational structure and decision-making policies

The company is governed by the Board of Trustees. The Trustees of the company during the period were as follows:

Ms A Charlesworth, Trustee
Mr R D Torbett, Trustee
Mr W P Holmes, Trustee
Ms K Kyle, Trustee (resigned 31 December 2024)
Mr W B F Brouwer, Trustee
Mr P Catchpole, Trustee
Mr T E Allvin, Trustee (appointed 23 February 2024)

In addition to the Board of Trustees, the company is managed by the Executive Management Team, and advised by an Editorial Committee, a Research Committee and a Policy Committee. Each Committee is Chaired by a Trustee and provides regular reports to the entire Board.

The Executive Management Team during the period were as follows:

Prof G Cookson (Chief Executive)
Prof L Steuten (Deputy Chief Executive)
Prof M Jofre Bonet (Chief Research Officer and Head of Education)

The ultimate parent undertaking and controlling party is considered to be the Association of the British Pharmaceutical Industry ("the ABPI"), registered in England and Wales, 09826787, by virtue of it being the sole member of the company. Transactions with other related parties are disclosed in Note 18.

As per the company Articles, the ABPI is entitled to appoint a majority of the Trustees (4/7), one of which is the Chief Executive of the ABPI.

f. Risk management

The Trustees have assessed the major risks to which the company is exposed, in particular those related to the operations and finances of the company, and are satisfied that systems and procedures are in place to manage the exposure to the major risks.

The principal risks facing the company and group are a reduction in research funding or consultancy income together with the loss of key staff. Funding and income wins and proposals are closely monitored against budget expectations by the Executive Management Team and if necessary cost savings are identified to cover any income shortfall. A competitive remuneration package, development through work experience and succession planning are used to attract and retain high calibre staff.

Plans for future periods

OHE will continue to develop its programme of original research, supported by a wide range of research funders in the UK and internationally. OHE will continue to expand the focus of our work beyond the UK, and to focus effort on maximising the impact of our research on improving health care decision making both in the UK and further afield. In its role as a newly established charity, OHE will be developing evidence based policy positions, which it will advocate by engaging with a wide range of stakeholders via events, media commentaries, and publications.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Statement of Trustees' responsibilities

The Trustees (who are also directors of OHE for the purposes of company law) are responsible for preparing the Trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). Company law requires the Trustees to prepare financial statements for each financial period. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and group for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP (FRS 102);
- make judgements and accounting estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards (FRS 102) have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Group will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Group and the company's transactions and disclose with reasonable accuracy at any time the financial position of the Group and the company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the Group and the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of information to auditors

Each of the persons who are Trustees at the time when this Trustees' Report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charitable group's auditors are unaware; and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any relevant audit information and to establish that the charitable group's auditors are aware of that information.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

TRUSTEES' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2024

Auditors

The auditors, BDO LLP, will be proposed for reappointment in accordance with section 485 of the Companies Act 2006. BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127). The registered office is 2 City Place, Beehive Ring Road, Gatwick, West Sussex, RH6 0PA.


This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2016 relating to small companies.

This report was approved by the Trustees, and signed on their behalf by:

Signed by:

D9B57AAF63424FB...
Trustee

Date: 24-Jun-2025 | 11:05 BST

DocuSigned by:

2BCBD26D7D714C7...
Trustee

Date: 23-Jun-2025 | 12:00 BST

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS

Opinion

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the Parent Charitable Company's affairs as at 31 December 2024 and of the Group's incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

We have audited the financial statements of The Office of Health Economics ("the Parent Charitable Company") and its subsidiaries ("the Group") for the year ended 31 December 2024 which comprise the consolidated statement of financial activities (incorporating income and expenditure account), the consolidated and charity balance sheets, the consolidated statement of cash flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We remain independent of the Group and the Parent Charitable Company in accordance with the ethical requirements relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group and the Parent Charitable Company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Other information

The Trustees are responsible for the other information. The other information comprises the information included in the Trustees' Report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Other Companies Act 2006 reporting

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Report, which includes the Directors' Report prepared for the purposes of Company Law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Directors' Report, which is included in the Trustees' Report, has been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Group and the Parent Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion;

- adequate accounting records have not been kept by the Parent Charitable Company, or returns adequate for our audit have not been received from branches not visited by us; or
- the Parent Charitable Company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the directors' report and from the requirement to prepare a strategic report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Responsibilities of Trustees

As explained more fully in the Statement of Trustees' responsibilities, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the Group's and the Parent Charitable Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the Group or the Parent Charitable Company or to cease operations, or have no realistic alternative but to do so.

Auditors' responsibilities for the audit of the financial statements

We have been appointed as auditor under the Companies Act 2006 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Extent to which the audit was capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Non-compliance with laws and regulations

Based on:

- Our understanding of the Group and the sector in which it operates;
- Discussion with management and those charged with governance; and
- Obtaining and understanding of the Group's policies and procedures regarding compliance with laws and regulations

we considered the significant laws and regulations to be UK Companies Act, Charities Act 2011, and relevant UK tax legislation.

The Group is also subject to laws and regulations where the consequence of non-compliance could have a material effect on the amount or disclosures in the financial statements, for example through the imposition of fines or litigations. We identified such laws and regulations to be employment law, data protection and health and safety legislation.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Our procedures in respect of the above included:

- Review of minutes of meetings of those charged with governance for any instances of non-compliance with laws and regulations;
- Review of financial statement disclosures and agreeing to supporting documentation; and
- Review of legal expenditure accounts to understand the nature of expenditure incurred.

Fraud

We assessed the susceptibility of the financial statements to material misstatement, including fraud. Our risk assessment procedures included:

- Enquiry with management and those charged with governance regarding any known or suspected instances of fraud;
- Obtaining an understanding of the Group's policies and procedures relating to:
 - Detecting and responding to the risks of fraud; and
 - Internal controls established to mitigate risks related to fraud.
- Review of minutes of meeting of those charged with governance for any known or suspected instances of fraud;
- Discussion amongst the engagement team as to how and where fraud might occur in the financial statements; and
- Performing analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;

Based on our risk assessment, we considered the areas most susceptible to fraud to be posting of inappropriate journal entries and management bias in income recognition.

Our procedures in respect of the above included:

- Testing a sample of journal entries throughout the year, which met a defined risk criteria, by agreeing to supporting documentation;
- Testing an additional unpredictable sample of journals throughout the year, outside of the defined risk criteria, by agreeing to supporting documentation; and
- Assessing significant judgements made by management for bias, including management's assessment of the stage of completion related to consultancy and research income.

We also communicated relevant identified laws and regulations and potential fraud risks to all engagement team members and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

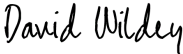
A further description of our responsibilities for the audit of the financial statements is located at the Financial Reporting Council's ("FRC's") website at: <https://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE OFFICE OF HEALTH ECONOMICS
(CONTINUED)

Use of our report

This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Charitable Company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Charitable Company and the Charitable Company's members as a body, for our audit work, for this report, or for the opinions we have formed.

DocuSigned by:

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David Wildey (Statutory Auditor)

For and on behalf of BDO LLP, Statutory Auditor
Gatwick, UK

Date: 24 June 2025

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

**CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND
EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 DECEMBER 2024**

		Unrestricted funds 2024	Total funds 2024	Total funds 2023
	Note			
Income from:				
Donations and research grant		205,484	205,484	211,216
Charitable activities		855,987	855,987	697,957
Other trading activities		4,204,016	4,204,016	3,545,831
Interest receivable		16,745	16,745	9,405
Total income		5,282,232	5,282,232	4,464,409
Expenditure on:				
Costs of other trading activities	4	2,609,887	2,609,887	2,876,291
Charitable activities	4	2,197,451	2,197,451	1,718,569
Total expenditure		4,807,338	4,807,338	4,594,860
Net movement in funds		474,894	474,894	(130,451)
Reconciliation of funds:				
Total funds brought forward		1,092,664	1,092,664	1,223,115
Net movement in funds		474,894	474,894	(130,451)
Total funds carried forward		1,567,558	1,567,558	1,092,664

The Consolidated Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 18 to 32 form part of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

CONSOLIDATED BALANCE SHEET
AS AT 31 DECEMBER 2024

	Note	2024	2023
Fixed assets			
Tangible assets	9	17,220	33,115
		<u>17,220</u>	<u>33,115</u>
Current assets			
Debtors	10	2,724,920	1,879,379
Cash at bank and in hand		694,601	659,393
		<u>3,419,521</u>	<u>2,538,772</u>
Creditors: amounts falling due within one year	11	(1,869,183)	(1,479,223)
Net current assets		<u>1,550,338</u>	<u>1,059,549</u>
Total assets less current liabilities		<u>1,567,558</u>	<u>1,092,664</u>
Net assets excluding pension asset		<u>1,567,558</u>	<u>1,092,664</u>
Total net assets		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>
Charity funds			
Restricted funds		-	-
Unrestricted funds		1,567,558	1,092,664
Total funds		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

The financial statements were approved and authorised for issue by the Trustees on and signed on their behalf by:

Signed by:

D9B57AAF63424FB...

Trustee

Date: 24-Jun-2025 | 11:05 BST

DocuSigned by:

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Trustee

Date: 23-Jun-2025 | 12:00 BST

The notes on pages 18 to 32 form part of these financial statements.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

COMPANY BALANCE SHEET
AS AT 31 DECEMBER 2024

		2024	2023
	Note		
Fixed assets			
Tangible assets	9	17,220	33,115
Investments		1	1
		<u>17,221</u>	<u>33,116</u>
Current assets			
Debtors	10	2,067,875	1,715,883
Cash at bank and in hand		305,491	130,616
		<u>2,373,366</u>	<u>1,846,499</u>
Creditors: amounts falling due within one year	11	(823,029)	(786,951)
Net current assets		<u>1,550,337</u>	<u>1,059,548</u>
Total net assets less current liabilities		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>
Charity funds			
Unrestricted funds		<u>1,567,558</u>	<u>1,092,664</u>
Total funds		<u><u>1,567,558</u></u>	<u><u>1,092,664</u></u>

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)
REGISTERED NUMBER: 09848965

COMPANY BALANCE SHEET (CONTINUED)
AS AT 31 DECEMBER 2024

The Trustees acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and preparation of financial statements.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The Company has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of Comprehensive Income in these financial statements.

The profit after tax after gift aid of the parent Company for the year was £474,894 (2023 - loss after tax after gift aid £130,451).

The financial statements were approved and authorised for issue by the Trustees on and signed on their behalf by:


Signed by:

D9B57AAF63424FB...

Trustee

Date: 24-Jun-2025 | 11:05 BST

The notes on pages 18 to 32 form part of these financial statements.

DocuSigned by:

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Trustee

Date: 23-Jun-2025 | 12:00 BST

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2024

	2024	2023
Cash flows from/(used in) operating activities		
Net cash generated from/(used in) operating activities (note 14)	18,463	(371,764)
Cash flows from/(used in) investing activities		
Purchase of tangible fixed assets	-	(15,895)
Net cash provided by/(used in) investing activities	-	(15,895)
Cash flows from financing activities		
Interest received	16,745	9,405
Net cash provided by financing activities	16,745	9,405
Change in cash and cash equivalents in the year	35,208	(378,254)
Cash and cash equivalents at the beginning of the year	659,393	1,037,647
Cash and cash equivalents at the end of the year	694,601	659,393

The notes on pages 18 to 32 form part of these financial statements

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies

1.1 Basis of preparation of financial statements

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The Office of Health Economics ("the company") meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

The Statement of Financial Activities (SOFA) and Balance Sheet consolidate the financial statements of the company and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

The company has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of Financial Activities in these financial statements.

The net income and expenditure for the period dealt with in the accounts of the parent company, after receipt of gift aid, was a net income of £474,894 (2023 - *net expenditure of £130,451*).

In considering whether it continues to be appropriate to prepare financial statements on a going concern basis the Trustees have considered the ongoing support from the ABPI, the evaluation of the conflicts around the world, inflation and interest rate rises, and concludes that the ABPI has sufficient financial reserves, income and expenditure controls to avoid any liquidity issues for at least 12 months from the approval of these financial statements. The ABPI has confirmed its support and provided a letter confirming this.

There is no indication that a material uncertainty exists that may cast significant doubt on the company's ability to continue as a going concern. We have come to this conclusion following a review of the liabilities and cash flow over the next 12-18 months.

1.2 Company Status

The company is a company limited by guarantee. The members of the company are the Trustees named on page 5. In the event of the company being wound up, the liability in respect of the guarantee is limited to £10 per member of the company.

1.3 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the Group and which have not been designated for other purposes.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.4 Income

All income is recognised once the company has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Consultancy and research project income is included to the extent that it has been earned in the period by reference to appropriate project milestones or project completion. Payments received in advance for consultancy projects are included in Creditors (Deferred Income) to the extent that these have not been earned in the period. Project income yet to be invoiced has been accrued within Debtors (Accrued Income).

1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Group's objectives, as well as any associated support costs.

Support costs are those costs incurred directly in support of expenditure on the objects of the company and include project management carried out at Headquarters. Governance costs are those incurred in connection with administration of the company and compliance with constitutional and statutory requirements.

Costs of generating funds are costs incurred in attracting voluntary income, and those incurred in trading activities that raise funds.

Charitable activities and Governance costs are costs incurred on the company's educational operations, including support costs and costs relating to the governance of the company apportioned to charitable activities.

1.6 Tangible fixed assets and depreciation

Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.6 Tangible fixed assets and depreciation (continued)

Depreciation is charged so as to allocate the cost of tangible fixed assets less their residual value over their estimated useful lives, using the straight-line method.

Tangible fixed assets are carried at cost, net of depreciation and any provision for impairment. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

IT Software	-	33% straight line
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1.7 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

1.8 Cash and Cash Equivalents

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.9 Liabilities and provisions

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably.

Liabilities are recognised at the amount that the company anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

1.10 Financial instruments

The company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments.

Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

1. Accounting policies (continued)

1.11 Foreign currencies

The company's and group's functional and presentational currency is Pounds Sterling.

Monetary assets and liabilities denominated in foreign currencies are translated into sterling at rates of exchange ruling at the reporting date.

Transactions in foreign currencies are translated into sterling at the rate ruling on the date of the transaction.

Exchange gains and losses are recognised in the Consolidated Statement of Financial Activities incorporating the income and expenditure account.

1.12 Pensions

Another group entity operates a defined contribution pension scheme and the pension charge represents the amounts which have been recharged by another group entity in respect of the staff pensions payable to the funds in respect of the year.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

2. Critical accounting estimates and areas of judgment

Estimates and judgments are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions:

The company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Critical areas of judgement:

(a) Impairment of trade and other debtors

The company makes a judgement of the recoverable value of trade and other debtors. When assessing impairment of trade and other debtors, management considers factors including the credit rating of the debtor, ageing profile of the debtors and historical experience. See Note 11 for the net carrying amount of debtors.

(b) Accrued and deferred income

The group reviews the amount of any income generated but not invoiced to customers at the year end, or vice versa, based on the extent of services provided and what is expected to be invoiced after the period end, or already been invoiced before the period end.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

3. Analysis of expenditure by activities

	Activities undertaken directly 2024	Support costs 2024	Total funds 2024
Unrestricted			
Direct charitable expenditure	1,989,101	-	1,989,101
Support costs - governance	-	114,027	114,027
Support costs - general	-	94,323	94,323
Total 2024	1,989,101	208,350	2,197,451

	Activities undertaken directly 2023	Support costs 2023	Total funds 2023
Unrestricted			
Direct charitable expenditure	1,612,284	-	1,612,284
Support costs - governance	-	31,110	31,110
Support costs - general	-	75,175	75,175
Total 2023	1,612,284	106,285	1,718,569

Included within Direct charitable expenditure are staff costs totalling £1,225,077 (2023 - £961,939). A further £2,145,635 (2023 - £2,226,206) of staff costs are included within OHE Consulting Limited trading activities within Note 4. An analysis of total staff costs of £3,370,712 (2023 - £3,188,145), is provided in Note 6.

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

3. Analysis of expenditure by activities (continued)

Analysis of support costs

	Governance 2024	General 2024	Total funds 2024
Legal and professional related costs	84,554	-	84,554
Accountancy related costs	29,473	-	29,473
Human resources related costs	-	26,582	26,582
Facilities related costs	-	3,767	3,767
IT related costs	-	21,035	21,035
Other office support related costs	-	42,939	42,939
Total 2024	114,027	94,323	208,350

	Governance 2023	General 2023	Total funds 2023
Legal and professional related costs	7,619	-	7,619
Accountancy related costs	23,491	-	23,491
Human resources related costs	-	21,184	21,184
Facilities related costs	-	3,003	3,003
IT related costs	-	16,765	16,765
Other office support related costs	-	34,223	34,223
Total 2023	31,110	75,175	106,285

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

4. Analysis of expenditure by expenditure type

	Other costs 2024	<i>Other costs 2023</i>
	£	£
OHE Consulting trading activities	2,609,887	<i>2,876,291</i>
Direct charitable expenditure	1,989,101	<i>1,612,284</i>
General support costs	94,323	<i>75,175</i>
Charitable activities	2,083,424	<i>1,687,459</i>
 Expenditure on governance	 114,027	 <i>31,110</i>
	<u>2,197,451</u>	<i><u>1,718,569</u></i>
 Total Expenditure	 <u>4,807,338</u>	 <i><u>4,594,860</u></i>

5. Auditors' remuneration

	2024	<i>2023</i>
Fees payable to the company's auditor and its associates in respect of:		
Audit-related assurance services	<u>10,000</u>	<i><u>9,000</u></i>

6. Staff costs

Staff costs, including key management personnel (see Note 7), were as follows:

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Wages and salaries	2,845,429	<i>2,693,492</i>	1,034,880	<i>811,280</i>
Social security costs	332,758	<i>317,736</i>	129,120	<i>93,346</i>
Contribution to defined contribution pension schemes (Note 17)	192,525	<i>176,917</i>	61,077	<i>57,313</i>
	<u>3,370,712</u>	<i><u>3,188,145</u></i>	<u>1,225,077</u>	<i><u>961,939</u></i>

THE OFFICE OF HEALTH ECONOMICS
(A Company Limited by Guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2024

6. Staff costs (continued)

The average number of persons employed by the company during the year was as follows:

	Group 2024 No.	Group 2023 No.	Company 2024 No.	Company 2023 No.
Key management personnel	3	3	3	3
Administrative staff	33	33	33	33
	<u>36</u>	<u>36</u>	<u>36</u>	<u>36</u>

The number of higher paid employees was:

	Group 2024 No.	Group 2023 No.
In the band £60,001 - £70,000	2	5
In the band £70,001 - £80,000	3	6
In the band £80,001 - £90,000	4	2
In the band £90,001 - £100,000	3	1
In the bank £100,001 - £110,000	1	2
In the band £110,001 - £120,000	1	-
In the band £120,001 - £130,000	1	-
In the band £140,001 - £150,000	1	1
In the band £160,001 - £170,000	1	-
In the band £220,001 - £230,000	-	1
In the band £240,001 - £250,000	1	-
In the band £350,001 - £360,000	1	1

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7. Key management personnel

	2024	2023
Wages and salaries	771,027	719,995
Social security costs	106,402	93,199
Cost of defined contribution scheme (Note 17)	19,721	25,270
	<u>897,150</u>	<u>838,464</u>

In addition to the Board of Trustees, there were 3 (2023 - 3) key management personnel, 2 (2023 - 2) of which accrued benefits under another group entity's defined contribution pension scheme during the period.

8. Trustees' fees

	2024	2023
Fees for services provided (see below)	26,470	26,555
Reimbursed travel expenses paid to 1 trustee	269	-
	<u>26,739</u>	<u>26,555</u>

The highest paid Trustee received remuneration of £NIL (2023 - £NIL).

A Charlesworth, Trustee, received fees for services provided during the period of £13,606 (2023 - £14,065).

M Kyle, Trustee, received fees for services provided during the period of £12,864 (2023 - £12,490).

The fees paid to the two Trustees noted above during the period related to the provision of consultancy and advisory services in respect of direct charitable activities. This directly contributed to the company achieving its' objectives.

The services provided by the Trustees relates to advice in respect of specialist areas within health economics and healthcare policy and hence it would have proven difficult to obtain these services from a third party.

No Trustees received fees for being Trustees and no other remuneration or expenses were paid to the Trustees during the period.

The above payments were made in line with the authority contained within the Charity's memorandum and articles of association.

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9. Tangible fixed assets

Group and Company

	IT software
Cost or valuation	
At 1 January 2024	47,685
At 31 December 2024	47,685
Depreciation	
At 1 January 2024	14,570
Charge for the year	15,895
At 31 December 2024	30,465
Net book value	
At 31 December 2024	17,220
At 31 December 2023	33,115

10. Debtors

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Due within one year				
Trade debtors	2,010,319	1,220,246	185,788	60,386
Amounts owed by group undertakings	-	-	1,597,341	1,315,578
Other debtors	54,249	-	54,249	-
Prepayments and accrued income	660,352	659,133	230,497	339,919
	2,724,920	1,879,379	2,067,875	1,715,883

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11. Creditors: Amounts falling due within one year

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Trade creditors	61,287	32,821	47,657	30,393
Amounts owed to group undertakings	578,890	591,930	517,369	577,359
Other taxation and social security	4,678	-	4,678	-
Other creditors	43,000	-	2,310	-
Accruals and deferred income	1,181,328	854,472	251,015	179,199
	1,869,183	1,479,223	823,029	786,951
	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Deferred income at the beginning of the year	581,655	594,710	57,369	244,756
Resources deferred during the year	880,844	581,655	111,904	57,369
Amounts released from previous periods	(581,655)	(594,710)	(57,369)	(244,756)
Deferred income at the end of the year	880,844	581,655	111,904	57,369

12. Financial instruments

	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Financial assets				
Financial assets measured at fair value through income and expenditure	694,601	659,393	305,491	130,616
Financial assets measured at amortised cost	2,012,754	1,820,128	1,785,564	1,656,632
	2,707,355	2,479,521	2,091,055	1,787,248
	Group 2024	<i>Group 2023</i>	Company 2024	<i>Company 2023</i>
Financial liabilities				
Financial liabilities measured at cost less impairment	988,339	897,568	711,125	729,582

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12. Financial instruments (continued)

Financial assets measured at fair value through income and expenditure comprise of cash and cash equivalents.

Financial assets measured at amortised cost comprise of debtors falling due within one year, excluding prepayments.

Financial liabilities measured at cost less impairment comprise of creditors falling due within one year, excluding deferred income.

13. Reconciliation of net movement in funds to net cash flow from/(used in) operating activities

	Group 2024	<i>Group 2023</i>
Net surplus/(deficit) for the year (as per Statement of Financial Activities)	474,894	<i>(130,451)</i>
Adjustments for:		
Depreciation charges	15,895	<i>14,570</i>
Increase in debtors	(845,541)	<i>(334,374)</i>
Increase in creditors	389,960	<i>87,896</i>
Interest received	(16,745)	<i>(9,405)</i>
Net cash provided by/(used in) operating activities	18,463	<i>(371,764)</i>

14. Cash and cash equivalents

	Group 2024	<i>Group 2023</i>
Cash at bank and in hand	694,601	<i>659,393</i>
Total cash and cash equivalents	694,601	<i>659,393</i>

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15. Analysis of changes in net debt (Group)

	At 1 January 2024	Cash flows	At 31 December 2024
Cash at bank and in hand	659,393	35,208	694,601
	<u>659,393</u>	<u>35,208</u>	<u>694,601</u>

16. Pension commitments

The ultimate parent entity operates a defined benefit contribution pension scheme. The pensions cost charge represents contributions which were payable to the fund, and were recharged by another group entity for staff undertaking work on behalf of the OHE Group, and amounted to £192,525 (2023 - £176,917) for the group and £61,077 (2023 - £57,313) for the company.

17. Related party transactions

During the period two Trustees received fees for services totalling £26,470 (2023 - £26,555) (refer to Note 8 for details). At the balance sheet date, no amount (2023 - £Nil) of this was outstanding.

During the period the company received research grants totalling £150,000 (2023 - £200,000) from the ABPI.

During the period, the group and company incurred support costs totalling £443,280 and £208,350 respectively (2023 - £368,280 and £106,285), which were recharged by the ABPI (refer to Note 19 below).

During the current and comparative period, the company received a transfer of profits from OHE Consulting Limited, which were transferred via Gift Aid (refer to Note 19 below).

18. Ultimate parent undertaking and controlling party

The ultimate parent undertaking and controlling party is considered to be the Association of the British Pharmaceutical Industry Limited ("the ABPI"), registered in England and Wales, 09826787, by virtue of it being the sole member of the company. The Association represents innovative research based biopharmaceutical companies, large, medium and small, leading an exciting era of bioscience in the UK. This company prepares consolidated financial statements. These are available to the public and may be obtained from 2nd Floor Goldings House, Hay's Galleria, 2 Hay's Lane, London, SE1 2HB.

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19. Principal subsidiaries

The following was a subsidiary undertaking of the company:

Name	Country of Incorporation	Principal activity	Holding
OHE Consulting Limited	United Kingdom	Provision of policy and strategic expertise on healthcare and related matters.	100%

During the period, OHE Consulting Limited, registered company number 09853113, generated income totalling £4,204,016 (2023 - £3,545,831), and incurred expenditure totalling £2,602,333 (2023 - £2,876,291), plus interest received of £13,255 (2023 - £7,412), generating profits for the period of £1,614,938 (2023 - £676,952). OHE Consulting Limited elected to transfer its profits, by Gift Aid, to the company leaving aggregated assets in OHE Consulting Limited of £1 at the period end.

20. Post balance sheet events

There have been no significant events affecting the group since the year-end.