HTAi 2019 Annual Meeting Cologne
Abstract Submission Guidelines

HTA beyond 2020: Ready for the New Decade?

Researchers, agencies, policy makers, industry, academia, health service providers and patients/consumers meet to build international cooperation and to face new challenges together.

Health Technology Assessment international (HTAi) is the global scientific and professional society for everyone who produces, uses or encounters Health Technology Assessment (HTA) to support optimal policy and decision making. Its mission is to support the growth of the HTA community by providing a neutral, global forum for the exchange of information, methods and expertise. With members from over 60 countries and across six continents, HTAi is a thriving global network.

Our members regularly participate in Annual Meetings, Policy Fora and Interest Groups. HTAi also provides access to a variety of resources including the International Journal of Technology Assessment in Health Care (IJTAHC).

HTAi supports national and regional initiatives for countries embarking on implementing HTA programs and works to connect members with common interests.

The Board of Directors governs HTAi and is supported by an Executive Committee, several Advisory Committees and a Secretariat.

Held each year in June, the HTAi Annual Meeting is a key international gathering for sharing latest research, advancing discussions in policy and methods, and building global networks.

2019 Annual Meeting: Overall Scientific Theme and Program

HTA beyond 2020: Ready for the New Decade?
One year ahead of the end of several prominent HTA strategies and projects, the course will (and has to) be set for future development of HTA worldwide in 2020 and beyond. Therefore, the preliminary results will fuel the debate about the future of HTA.

Besides many important strategies and projects dealing with HTA, there are some prominent ones such as HTAi's own strategy paper, accompanied by Horizon 2020, the main research program of the EU Commission, and the EUnetHTA Joint Action 3 project, the proposal of the EU-Commission for a regulation on HTA in Europe after 2020. Other key scientific programs like IC-Permed, the international consortium for personalized medicine, will be more important than ever. The discussion about subsequent strategies, projects, developments and changes as a result of these projects will be starting in 2019.

The HTAi Annual Meeting provides an ideal presentation and discussion platform for opportunities, emerging challenges and possible threats. Trends for harmonization and standardization are confronted by progressive digitalization, disruptive innovations and the questioning of established evidence requirements. The European proposal for "HTA after 2020" might stand exemplarily for the important international strategic efforts to strengthen HTA for the new decade. Furthermore, globalization takes place and HTA becomes much more important for emerging markets. 2019 is the perfect time to tie this "varicolored bouquet" of important HTA developments together, looking into the future and asking: **HTA beyond 2020: Ready for a New Decade?**

The overarching topic "HTA beyond 2020" is characterized by three plenary sessions:

Plenary 1: HTA Beyond 2020:
One Size Fits All? Will joint international assessments improve or hinder HTA?
Plenary 2: HTA Beyond 2020: The Era of Digitalization?
Plenary 3: HTA Beyond 2020: Need for *Smart* Capability Building?

The Annual Meeting in Cologne will provide an opportunity to consider the following themes and topics in workshops, panels, oral presentations, vignettes and posters:

1) HTA beyond 2020: One Size Fits All?
Will joint international assessments improve or hinder HTA?
In HTA models, the conflict between the consensus that study methodology and HTA evaluations should apply regardless of context and the importance of context-dependent HTA decisions is evident in discussions of the new phase of international HTA collaboration in the EU. Those in favour of joint cross-country assessments based on joint methodologies and requirements argue that such collaborations have potential to increase availability of HTA reports as well as high-quality "real world" data. Opponents, however, are concerned that usefulness for decision-makers at various levels will decrease as the context-specificity is reduced and/or lost.

For more details on Plenary 1, please follow this LINK.

2) HTA beyond 2020: The Era of Digitalisation?

Digitalization offers many new treatment, diagnostic, and research options as well as tools like smart medical devices, mobile apps, and telehealth. It is not clear yet whether new digital health interventions can and should be assessed by using 'conventional' HTA methodology. On the other hand, HTA could directly benefit from digitalization, since the availability of digital data might allow for faster and more detailed research and evaluation. Even HTA processes themselves could be digitized and automated. In summary, there are many opportunities but also challenges for HTA arising from digitalization.

For more details on Plenary 2, please follow this LINK.

3) HTA beyond 2020: Need of Smart Capability Building?

As the year 2020 approaches, HTA capabilities may be required to adapt and change to meet evolving stakeholder expectations, data and evidence availability, and biomedical and healthcare service innovations. New capabilities required to produce effective HTA may include, for example, new methodology development, capacity building, and horizon scanning, among others. Given that healthcare systems are already resource constrained, developing additional HTA capabilities will require the HTA community and institutions to implement smart capability building. In summary, critical success factors and best practices will be instrumental to guide smart capability building for HTA beyond 2020.

For more details on Plenary 3, please follow this LINK.

Abstract Submissions

When submitting abstracts, applicants will be asked to select topic areas from the list below to identify the one that most closely matches the theme of their abstract. Reviewers will identify their area of expertise based on this same list of topics — this ensures that knowledgeable reviewers assess all abstracts.

As the conference focuses on "HTA beyond 2020", it is recommended to submit abstracts leaning on one of the plenary themes by, for example, dealing with capability building, digitalization, HTA in EU and emerging markets as well as other scenarios after 2020.

HTAi will also look to ensure that at the conference there is a strong presence of patients, students and presenters from Low and Middle-Income Country (LMIC).

List of topic areas for abstracts:
1) Processes in HTA
   a. Research on HTA Methods, Including Novel Methods for Conducting HTA (e.g., Rapid Reviews, Adapting Existing HTAs)
   b. Horizon Scanning
   c. Information Retrieval
   d. Evidence Quality Including Bias, Transferability and Generalisability
   e. Clinical Effectiveness
   f. Big Data Analysis and Use of Real World Data For HTA
   g. Costs and Economic Evaluation
   h. Ethical, Social, Legal and Environmental Aspects of HTA
   i. HTA Prioritization
2) Policy Issues In HTA
   a. Globalisation
   b. Regulatory-HTA Alignment
   c. Value-Based Health Policy and Value Frameworks
   d. Reassessment and Disinvestment
   e. Capacity Building in HTA, Enhancing Skills and Capabilities at Country Level
   f. Country-Specific HTA and Regional HTA Networks
   g. Comparative HTA Systems and Emerging Markets
3) Hospital-Based HTA
   a. HTA and Procurement
   b. HTA and Health Technology Management
4) HTA and Clinical Practice Guidelines
5) Stakeholder Involvement in HTA
   a. Patient Involvement
   b. Public Involvement
   c. HTA and Shared Decision-Making
   d. Engagement of Health Care Professionals
   e. HTA in the Media and Including Specialist and General Media and Social Media
6) HTA – Presenting Results of HTAs
   a. Pharmaceuticals

b. Medical Devices
c. Public Health Interventions (e.g., Vaccines, Screening Programs)
d. Procedures and Other Interventions (e.g., Surgery)
e. Tests: Predictive or Diagnostic, Precision and Personalised Medicine and Companion Diagnostics
f. Social Services
g. E-Health and M-Health

7) Other Topics

1) Panel and Workshop Submissions

- **Panels** are designed to stimulate discussion and share learning on topics relevant to the 2019 Annual Meeting Theme and Scientific Program. The panels are 75 minutes in duration with a moderator and three to five panellists from different organizations presenting on the topic. HTAi strongly encourages the involvement of panel members from different perspectives and settings, particularly those focusing on or dealing with one of the three plenary topics.

- **Workshops** are designed to share innovative experiences and practices, and to provide learning opportunities for participants. They are half or full-day events that should include interactive activities and focus on developing participants' skills. Workshops should also contribute to HTA capacity building. When submitting a workshop abstract, submitters will be asked to indicate for whom your session will be most relevant (e.g. early career, mid-career, policy makers, industry), as well as learning outcomes and interactive activities. If your proposal does not have an interactive component, you are strongly encouraged to submit it as a panel session instead.

2) Oral, Vignette and Poster Submissions

- **Orals:** Oral presentations will be grouped by topic area with sessions led by Chairs well-versed in the field. Each individual oral presentation will be 12 minutes in length including questions from the audience and held within a conference room. Chairs will be selected by the HTAi Secretariat and the ISPC. Chairs will ensure presenters stay to time and will moderate the question/answer sessions following each oral presentation.

- **Vignettes**: Vignettes are considered a high level of scientific communication. A vignette is a brief oral presentation highlighting a specific research finding with an emphasis on the practical implications. Authors present for five minutes using a single (i.e., one) slide and then answer follow-up questions. Vignettes need to be precise, concise and comprehensible. Each Vignette is followed by time for discussion. Vignette authors are encouraged to show how their research deals with the future of HTA. Presentations will be held in a conference room and grouped by topic area. Chairs will be selected by the HTAi Secretariat and the ISPC. Chairs will ensure presenters stay to time and will also moderate the question/answer sessions following each vignette. HTAi strongly encourages submissions for vignette presentations.

- **Posters:** Authors submitting abstracts that are accepted for posters will be given the opportunity to present their work during formal conference breaks. Authors presenting their work as a poster are expected to be present at their poster at the assigned time to interact with fellow conference delegates.

General Information

1) **Submission deadlines** are different based on submission type. Please note below the important dates regarding abstract submissions and be advised that no extensions to these deadlines will be made.

   - **Open Call for Abstracts:** August, 2018
   - **Deadline for Workshop and Panel submissions:** October 4, 2018
     Acceptance notification: November 9, 2018
   - **Deadline for Oral, Vignette and Poster Presentation submissions:** November 16, 2018
     Acceptance notification: February 1, 2019

   Receipt of abstract submission will be acknowledged via e-mail prior to submission close for each category.

2) **Submission details**

a) **General submission details:**
   - All proposals must be submitted via the online abstract submission system. HTAi will accept proposals by email from people who have conditions that prevent them using the online submission system.
   - Abstract submissions must include a brief description (less than 60 words) that would allow delegates to assess relevance and interest to them. Descriptions will be displayed on the Annual Meeting website and mobile app, in the program and in the abstract book.
   - Submitters may return to the online abstract submission system to edit their abstracts; add or delete authors, moderators or presenters; revise information; or withdraw abstracts at any time before the submission deadline.
   - Accepted abstracts will be published in the Annual Meeting materials (e.g. website, mobile app, program and abstract book) as submitted. Changes to abstracts will not be accepted after the submission deadline.
   - If authors wish their abstracts to go into the Supplement of International Journal of Technology Assessment in Health Care (IJTAHC), a fully completed copyright form must accompany the submission. Link to the Copyright Assignment Form. The abstracts that will be published in the Supplementary Issue of International Journal of Technology Assessment in Health Care might be subject to further review and authors might be contacted for revisions.
   - Abstract submissions and presentations must be in English.

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- Abstract submissions must not include references; however, the ISPC strongly encourages presenters to include all appropriate citations in their presentation at the Annual Meeting.
- Abstract submissions must not include tables, figures or charts.
- Please spell out all acronyms on first use.
- Abstract submissions and presentations must not promote any product or service.
- Abstract submission and presentation expenses are the responsibility of the abstract submitter (primary contact) and presenter. For presenters requiring financial support to attend the Annual Meeting, HTAi offers a limited number of Travel Grants each year (subject to conditions and availability).
- The abstract or work summarized in the abstract must be the sole work of the submitter or associated persons/authors; the abstract must not contain information with respect to which such person or persons is/are subject to an obligation of confidentiality; and the abstract must not infringe the copyright or moral right of any other person.
- The presenters of research are required to declare sources of funding for their presented work.
- Local Organizing Committee members, HTAi partner organizations and Interest Group Chairs should contact the ISPC Co-Chairs with their relevant abstract submission numbers to inform them about their official submissions.

b) Workshop and Panel submission details:
- For workshops and panels, the abstract text must not exceed 500 words. Word count will include the introduction, structure of the session, objectives and outcomes. For workshops, you will need to specify target audience and method of interactive activities.
- The title must not exceed 100 characters and must accurately reflect content.
- Please make sure your abstract title fits within the allotted space and is written in title case (i.e.: An Introduction To Health Technology Assessment).
- Title, chairs and presenters as well as affiliated institutes are not included in the word count.
- For a panel of 75 minutes, please limit your presenters to a maximum of five (5).

c) Oral, Vignette and Poster submission details:
- For oral, vignette and poster presentations, the abstract text must not exceed 300 words. Word count will include the introduction, methods, results and conclusions.
- Title, authors and affiliated institutes are not included in the word count.
- Title must not exceed 70 characters and must accurately reflect content.
- Please make sure your abstract title fits within the allotted space and is written in title case (i.e.: An Introduction To Health Technology Assessment).

3) Review, acceptance, notification and final inclusion in the official Program

a) Review: All abstracts will be peer reviewed by three experts identified by the HTAi International Scientific Program Committee (ISPC). Panel and workshop submissions will be reviewed by members of the ISPC. Oral, vignette and poster submissions will be reviewed by a broad group of reviewers, coordinated by the HTAi Secretariat, which will include ISPC members and a selected group of experts in the HTA field. Final decisions about inclusion and organization of the program will be made by the ISPC, led by the ISPC Co-Chairs.

b) Abstract acceptance and notifications:
- Workshops and Panels: After review, the abstract's primary contact will receive an email notification indicating the abstracts acceptance or rejection by November 9, 2018. Registration for the Annual Meeting must be submitted by March 22, 2019 (early bird registration deadline), to ensure inclusion in the Annual Meeting program.

- Oral, Vignette and Poster Presentations: After review, the abstract's primary contact will receive an email notification indicating the abstract's acceptance or rejection by February 1, 2019. Registration for the Annual Meeting must be submitted by March 22, 2019 (Early Bird Registration Deadline), to ensure inclusion in the Annual Meeting program.

c) Final inclusion in the official Annual Meeting Program:
- Workshops and Panels: Until the Early Bird Deadline (March 22, 2019), at least one of the named chairs/moderators must be registered for the Annual Meeting to confirm the final inclusion in the official Annual Meeting Program. Panels and Workshops which do not fulfill this requirement will be withdrawn from the program.

- Oral, Vignette and Poster Presentations: Until the Early Bird Deadline (March 22, 2019), the abstract's primary presenter must be registered for the Annual Meeting to confirm the final inclusion in the official Annual Meeting Program. Oral, Vignette and Poster Presentations which do not fulfill this requirement will be withdrawn from the program.

4) Publication of abstract content

a. Annual Meeting Materials:
- Submission of abstracts constitutes all authors' consent to have their abstracts published on the HTAi 2019 website, mobile app, within the program and abstract book.
- Please review your abstract prior to submission; check grammar and spelling and ensure all special characters and formatting display correctly. Accepted abstracts will be published in the Annual Meeting Materials (e.g. website, mobile app, program and abstract book) as submitted. Changes to abstracts will not be accepted after the Submission Deadline.

b. **Supplementary Issue of the International Journal of Technology Assessment in Health Care:**
    Accepted abstracts of Oral, Vignette and Poster presentations have the possibility to be published in
    a Supplementary Issue of the International Journal of Technology Assessment in Health Care.
    Abstract submitters will be able to provide their consent for publication in the abstract submission
    form. Once abstracts have been accepted for the official program, there will be an editing process
    and if any major changes are recommended these will be communicated to the abstract submitter
    (primary contact). If authors would like to have their abstracts to go into the Supplement of IJTAHC
    then a fully completed copyright form must accompany the submission. Link to the Copyright
    Assignment Form. The Supplementary Issue will be published ahead of the meeting.

Scoring Criteria

The scoring system applied to all abstracts will take into consideration gender balance, the
involvement of students and contributions from people from Low and Middle-Income Country
(LMIC) as well as patients, users and clients.

1) **Appropriateness to HTAi**

    The concept of the abstract should be appropriate to HTAi and in alignment with the main themes of
    the Annual Meeting. Panels and workshops should have presenters who are knowledgeable about
    the subject matter and, collectively, represent a variety of different perspectives and/or settings.

2) **Original and Innovative Contribution**

    Abstracts with original and innovative ideas will receive a higher score. In particular:
    •   challenging existing paradigms or HTA practice,

    •   addressing an innovative hypothesis or critical barriers/issues to progress, and

    •   developing or enhancing novel concepts, approaches or methodologies, tools or technologies
        for this area.

3) **Abstract Structure and Quality**

    •   **Workshop and panel abstracts** must have the following structure:

        Title: must not exceed 100 characters, with no abbreviations and the beginning of each word
        is capitalized.
        Introduction: Include the scientific background and rationale for the panel or workshop, and
        a clear statement of the issue. Must be clearly stated to achieve the highest score.
        Structure of the session: Give the structure of your workshop/panel (e.g. presenters, timing,
        format of interaction, etc.) and your plans to generate a vibrant discussion or learning
        environment.

Panel/Workshop outcome and objectives: Explain what you would like to accomplish during your workshop/panel session, the session's contribution to HTA capacity building as well as the benefits and takeaways for the audience or participants.

Moderators/Presenters: Include name, organization, position of all presenters, as well as the title (or brief description) of their specific contribution. Only confirmed moderators/presenters can be submitted with your application.

Declaration of funding: Please declare sources of funding of the research.

Basic quality: Workshops and panel abstracts should be appropriately summarised, and grammar and spelling should be checked.

- **Oral, vignette and poster abstracts** must have the following structure:

Title: must not exceed 70 characters, with no abbreviations and the beginning of each word is capitalized.

Introduction: Include the scientific background and rationale, and give a clear statement of the problem, issue, study goal, objectives, and/or research hypothesis. Must be clearly stated to achieve the highest score.

Methods: For quantitative and related studies, include a clear statement of the perspective, data collected, sources of data, analyses including statistical testing, etc. Clearly describe the populations studied, method of accrual and sample frame and analytical techniques. For conceptual, institutional, organizational or policy papers, provide a concise description of the content of the paper or report to be presented and other relevant factors such as policy analysis of alternatives, details of qualitative methods, etc.

Results: Present the most important study findings including generalisability to other populations, health systems or countries if relevant. Abstracts must reflect work that has already been done (i.e. results available) or at least provide preliminary results suggesting that the work is in progress and that results will be available to present at the Annual Meeting.

Conclusions: Provide a concise statement on the most important findings or policy implications. You should also address the question, "What do these results mean for your main area of research?" If relevant, include next steps, proposals for further research and study limitations.

Declaration of funding: Please declare sources of funding of the research.

Basic quality: Oral, poster and vignette abstracts should be appropriately summarised, and grammar and spelling should be checked.

Style Guidelines

Please consider the following style guidelines as a general direction in the submission process to have the abstracts submitted as consistent and standardised for Annual Meeting publications (website, mobile app, program and abstract book). These guidelines are in line with those required for abstracts to be included in the Supplementary Issue of the International Journal of Technology Assessment in Health Care.

- American spelling (unless title is non-US English)
- Title – start of all words capitalized, no abbreviations
- Define all abbreviations on first use
- Use the word 'percent' rather than %
  (except for when using with numbers for Confidence intervals – stated as 95% CI)
- Confidence Interval - define first i.e. Confidence Interval (95% CI: 0.33 - 2.4)
- All numbers less than 1 have a 0 in front e.g. p< 0.001
- For numeric lists use Arabic letters in parentheses (i), (ii), (iii)
- i.e., e.g., e.t.c. must be spelled out – that is, for example and etcetera if as part of main text. In brackets abbreviations are allowed.
- Numbers up to 100 spelled out and for 100 and over given as a numeral, but numerals for units of time and measurement.
- Dates must be in form of 8 June 1960 and not 8/6/60 or 6/8/60
- Currency should be given using currency abbreviations (see www.xe.com/iso4217.php) and must always include a conversion to USD or EUR as well as the local currency value i.e. in parentheses after the initial currency (i.e. USD ___) or (EUR ___)
- No Tables, Figures and Charts allowed
- No references allowed
- Results must be provided for publishing in supplement

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3 things to keep in mind:

1. Abstracts with **original and innovative ideas** will receive higher scores.

2. It is recommended that all abstracts featuring the future of HTA should consider the main topics **capability building, digitalization as well as HTA in EU and emerging markets.**

3. Please read the submission guidelines carefully and thoroughly.