

A Bayesian modelling framework for health care resource use and costs in trial-based HEE

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Part I

Introduction to statistical modelling in HTA

Individual-level data in HTA

- Typically collected from studies (e.g. RCTs) at multiple time points

ID	Trt	Demographics			HRQL data				Cost data				Clinical outcome			
		Sex	Age	...	u_0	u_1	...	u_J	c_0	c_1	...	c_J	y_0	y_1	...	y_J
1	1	M	23	...	0.32	0.66	...	0.44	103	241	...	80	y_{10}	y_{11}	...	y_{1J}
2	1	M	21	...	0.12	0.16	...	0.38	1204	1808	...	877	y_{20}	y_{21}	...	y_{2J}
3	2	F	19	...	0.49	0.55	...	0.88	16	12	...	22	y_{30}	y_{31}	...	y_{3J}
...

y_{ij} = Survival time, event indicator (eg CVD), number of events, continuous measurement (eg blood pressure), ...

u_{ij} = Utility-based score to value health (eg EQ-5D, SF-36, Hospital Anxiety & Depression Scale, ...)

c_{ij} = Cost of healthcare resources/services (eg CSRI, iMCQ, ...)

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- Effectiveness/utility data at each time j and for each individual i often obtained after mapping country-specific value sets to the individual responses of L health domains assessed (profile):

$$u_{ij} = \text{mapping algorithm}[\text{HRQL}_{ij}^1, \dots, \text{HRQL}_{ij}^L]$$

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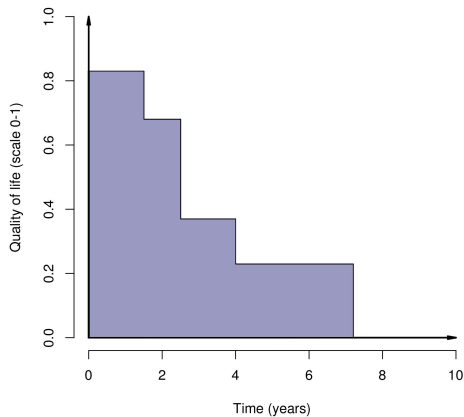
c_{ij} = Cost of healthcare resources/services (eg CSRI, iMCQ, ...)

- Cost** data at each time j and for each individual i obtained after applying service-specific unit prices p_k to each of the K **resource use services** collected and summing up their costs:

$$c_{ij} = \text{HRU}_{ij}^1 \times p_1 + \dots + \text{HRU}_{ij}^K \times p_K$$

Individual-level data in HTA

- Aggregate measures, e.g. **QALYs** and **total costs**, are then obtained by combining u_{ij} and c_{ij} data over the study follow-up time.



QALY = "Area Under the Curve"

$$e_i = \sum_{j=1}^J (u_{ij} + u_{i,j-1}) \frac{\delta_j}{2}$$

$$tc_i = \sum_{j=1}^J c_{ij}$$

where $\delta_j = \frac{\text{Time}_j - \text{Time}_{j-1}}{\text{Unit of Time}}$

Handling missing data in trial-based CEA

- Things to consider in the analysis (Faria et al. 2014):
 - Avoid biased methods (e.g. *case deletion*) in favour of those grounded on “plausible” **missingness assumptions** (e.g. *multiple imputation*)
 - Explore the impact of alternative assumptions on results in **sensitivity analysis**

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- Analysis can be conducted at *different levels*:
 - HRQL and HRU responses at each time (**disaggregated**)
 - Utilities and costs at each time (**intermediate**)
 - QALYs and Total costs (**aggregated**)

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 - QALYs and Total costs (**aggregated**)
- Need to choose the right **balance** between *modelling all evidence* and *fitting a stable model*

Current missing data practice

Ling et al. 2022 revealed a somewhat **unclear picture** about *missing data methods* in routine analyses (2016-2021):

- Different according to the level of data aggregation used in analysis
- **MI** often used at **aggregated/intermediate** level, while at **disaggregated** level missing values are often **"filled-in"** in some ways
- Typical of **HRU** (usually some answers skipped) compared to **HRQL** instruments (usually all answers skipped)
- In many cases **HRUs** are imputed based on *restrictive assumptions* (e.g. **assumed zero**) which, if not justified, can **misrepresent uncertainty** and **distort** the results

A Bayesian framework for trial-based CE data

- Why Bayesian (Spiegelhalter et al. 2004)?
 - **Modular structure** to handle multiple data features (e.g. skewness, clustering, missingness)
 - Imputation and estimation steps are **jointly** performed and always “congenial”
 - Direct implementation of **probabilistic sensitivity analysis** (PSA)
- **Aim** - apply framework to a real case study:
 - Assess impact of *different missing HRU assumptions* on posterior estimates
 - Fit separate models *at different levels of data aggregation* and compare the results

Part II

Case study

The PBS trial

- The *Positive Behaviour Support* (PBS) trial was an RCT involving individuals with mild to severe intellectual disabilities (Hassiotis et al. 2018)
 - Participants ($n = 244$) allocated to either **PBS** ($n_2 = 108$) or **TAU** ($n_1 = 136$)
 - **HRQL** and **HRU** data collected via **EQ-5D-5L** and **CSRI** questionnaires at baseline ($j = 0$), 6 and 12-months ($j = 1, 2$)
- Focus on the following individual-level CE data:
 - **Utilities** derived from **EQ-5D** answers and UK value sets (u_{ij})
 - **HRUs** for $K = 9$ types of **healthcare services** (hru_{ij}^k)

Missingness rates

Outcome	Baseline ($j = 0$)	6-months ($j = 1$)	12-months ($j = 2$)	ic (outcome)
Utilities (u)	14 (5.7%)	23 (9.4%)	16 (6.6%)	40 (16.4%)
PSYDR (hru^1)	0	18 (7.4%)	12 (4.9%)	22 (9%)
PSYCH (hru^2)	2 (1.4%)	12 (4.9%)	9 (3.7%)	14 (5.7%)
PHYSI (hru^3)	1 (0.4%)	13 (5.3%)	10 (4.1%)	16 (6.6%)
DENT (hru^4)	1 (0.4%)	14 (5.7%)	12 (4.9%)	19 (7.8%)
SOCWORK (hru^5)	1 (0.4%)	14 (5.7%)	11 (4.5%)	18 (7.4%)
COMWORK (hru^6)	0	13 (5.3%)	11 (4.5%)	15 (6.1%)
GP (hru^7)	3 (2.1%)	15 (6.2%)	14 (5.7%)	22 (9%)
NURSE (hru^8)	2 (1.4%)	17 (7%)	13 (5.3%)	24 (9.8%)
THERAP (hru^9)	1 (0.4%)	15 (6.1%)	12 (4.9%)	19 (7.8%)
ic (time)	10 (4.2%)	22 (9%)	17 (7%)	59 (24.2%)

- EQ5D data only affected by *unit nonresponse*, while CSRI data affected by both *unit* and *item nonresponse*
- Overall proportion of incomplete cases is **substantial** ($\approx 24\%$)

Structural zeros

Outcome	Structural zeros
PSYDR (hru ¹)	37 (15%)
PSYCH (hru ²)	159 (65%)
PHYSI (hru ³)	189 (77%)
DENT (hru ⁴)	35 (14%)
SOCWORK (hru ⁵)	47 (19%)
COMWORK (hru ⁶)	196 (80%)
GP (hru ⁷)	1 (0.4%)
NURSE (hru ⁸)	53 (22%)
THERAP (hru ⁹)	85 (35%)

- Many individuals have constant zero **HRU** values across all times (so called **"structural zeros"**)
- These values induce a *high degree of skewness* in the empirical distributions

Part III

Modelling framework

Fitting models at different levels of data aggregation

- Consider three alternative model specifications:
 - At the **aggregated** level (e_i, tc_i) – O'Hagan et al. 2001
 - At the **intermediate** level (u_{ij}, c_{ij}) – Gabrio et al. 2020
 - At the **disaggregated** level ($HRQL_{ij}^l, HRU_{ij}^k$)

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- Easier to specify model at **more aggregated** levels **BUT**:
 - when **item nonresponse** occurs, it is not possible to directly incorporate evidence from partially-observed cases into the analysis
 - need to either **discard** cases or **impute** them in some way *prior* to model fitting

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- Models fitted at **more disaggregated** level can overcome this limitation but are usually *more challenging* to fit

Aggregated-data model

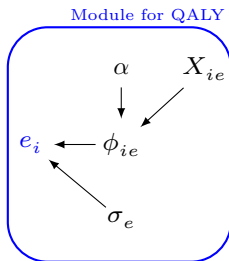
- Cross-sectional model for QALYs (e_i) and Total costs (tc_i)

$$p(e_i, tc_i) = p(tc_i | e_i) p(e_i)$$

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Marginal model for e

- Select a *distribution* $f(\cdot)$ for each variable (e.g. Normal, Gamma)

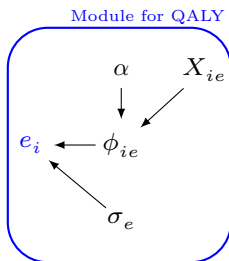
$$e_i \sim f(\phi_{ie}, \sigma_e)$$

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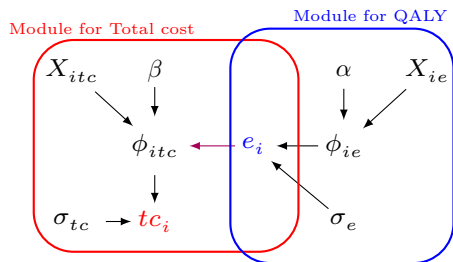
- Select a *distribution* $f(\cdot)$ for each variable (e.g. Normal, Gamma)
- Choose *structure* and *link function* $g(\cdot)$ to model dependence on other variables (e.g. log)

$$e_i \sim f(\phi_{ie}, \sigma_e)$$
$$g(\phi_{ie}) = \alpha_0 + \alpha_1 X_{ie} + \dots$$

Aggregated-data model

- Cross-sectional **joint** model for **QALYs** (e_i) and **Total costs** (tc_i)

$$p(e_i, tc_i) = p(tc_i | e_i) p(e_i)$$



Marginal model for e

$$e_i \sim f(\phi_{ie}, \sigma_e)$$

$$g(\phi_{ie}) = \alpha_0 + \alpha_1 X_{ie} + \dots$$

Conditional model for tc

- Capture *correlation* between the outcomes

$$tc_i | e_i \sim f(\phi_{itc}, \sigma_{tc})$$

$$g(\phi_{itc}) = \beta_0 + \beta_1 e_i + \beta_2 X_{itc} + \dots$$

Aggregated-data model

- Mean incremental **QALYs** ($\Delta_e = \mu_{e2} - \mu_{e1}$) and **Total costs** ($\Delta_{tc} = \mu_{tc2} - \mu_{tc1}$) derived as *linear combination* of model parameters or through *simulation* (e.g. Monte Carlo methods)

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- **Advantages**
 - Need to model only two variables (e_i, tc_i)
 - Relatively easy to implement in most cases

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- **Advantages**
 - Need to model only two variables (e_i, tc_i)
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- **Drawbacks**
 - **HRQL/HRU** item nonreponses are either *discarded* or *imputed* a priori
 - Incomplete **utilities** / **costs** are either *discarded* or *imputed* a priori
 - Often partially-missing **HRUs** / **costs** are imputed as **zero**, and used to calculate tc_i to ensure higher completion rates

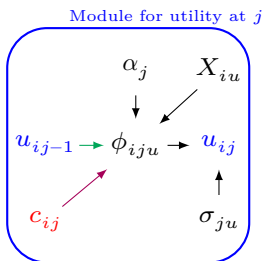
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Conditional models for u

- Select a *distribution*, *structure* and *link function* for each variable
- Capture *correlation* between outcomes and *dependence* over time

$$u_{ij} | u_{ij-1}, c_{ij} \sim f(\phi_{iju}, \sigma_{ju})$$
$$g(\phi_{iju}) = \alpha_{0j} + \alpha_{1j} X_{iu} +$$
$$\alpha_{2j} u_{ij-1} + \alpha_{3j} c_{ij} + \dots$$

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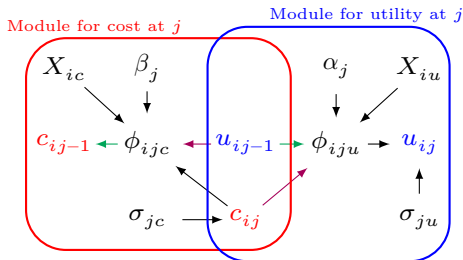
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Conditional models for c

$$c_{ij} | u_{ij-1}, c_{ij-1} \sim f(\phi_{ijc}, \sigma_{jc})$$

$$g(\phi_{ijc}) = \beta_{0j} + \beta_{1j} X_{ic} + \beta_{2j} u_{ij-1} + \beta_{3j} c_{ij-1} + \dots$$



- Time-specific mean **utilities** (μ_{ju}) and **costs** (μ_{jc}) derived as *linear combination* of model parameters or through *simulation* (e.g. Monte Carlo methods), and then used to calculate Δ_e and Δ_{tc}

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- **Advantages**
 - Directly capture the *longitudinal structure* of the data
 - Missingness in (u_{ij}, c_{ij}) is directly handled

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Disaggregated-data model

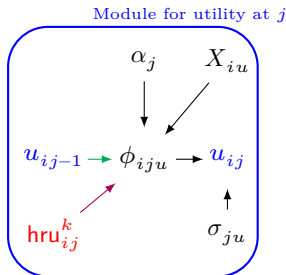
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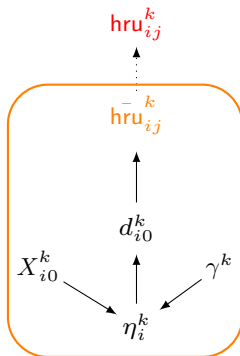
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$$\alpha_{2j} u_{ij-1} + \alpha_{3j} \text{hru}_{ij}^k + \dots$$

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Module zeros for service k

Logistic models for hru_{ij}^{-k}

- Handle **structural zeros** in service k using an **hurdle approach**

$$d_{i0}^k := \mathbb{I}(\text{hru}_{i\forall j} = 0) \sim \text{Bernoulli}(\eta_i^k)$$

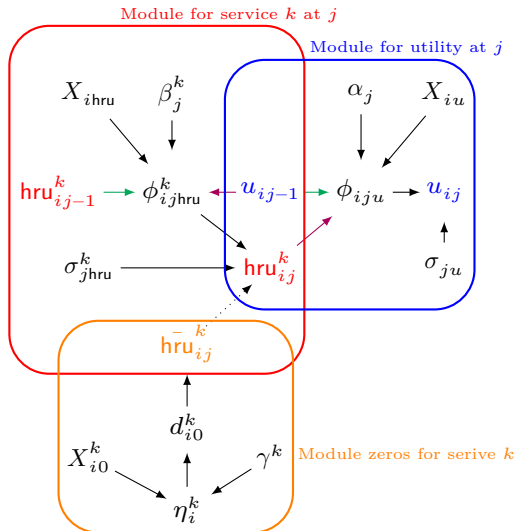
$$\text{logit}(\eta_i^k) = \gamma_0^k + \gamma_1^k X_{i0} + \dots$$

- Original hru_{ij}^k are expressed as:

$$\text{hru}_{ij}^k = \text{hru}_{ij}^k \times (1 - \pi_0^k) + \text{hru}_{ij}^{-k} \times \pi_0^k$$

Disaggregated-data model

- Longitudinal **joint** model for **utilities** (u_{ij}) and **HRUs** (hru_{ij}^k)



Disaggregated-data model

- Estimates for the overall mean **HRUs** for each service k and time j are then obtained as:
 - the linear combination $\mu_{j\text{hru}}^k = (1 - \pi_0^k)\mu_{j\text{hru}}^k$
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 - Missingness in $(u_{ij}, \text{hru}_{ij}^k)$ directly handled **without** the need of prior imputation
- **Drawbacks**
 - More challenging to fit (i.e. $J \times (K + 1)$ variables)
 - Need a compromise between **model complexity and feasibility** (e.g. in small samples)

- All models fitted to the PBS data via *JAGS*, called from *R*
 - Total of 20000 iterations per chain, with a burn-in of 10000
 - Convergence assessed via standard measures (e.g. *Rhat*, *Trace plots*)
 - Fit to observed data assessed through **graphical posterior predictive checks** and Bayesian **information measures** (e.g. *WAIC*)
- For each model, the distribution for each outcome was selected after comparing the fit of alternative choices:
 - **Normal** for *utilities* / *QALYs*
 - **Gamma** for *costs* / *Total costs* (compared to Normal and LogNormal)
 - **Normal + hurdle for structural zeros** for *HRUs* (compared to Poisson and Negative Binomial)

Part IV

Results

Posterior mean QALY/Total cost estimates

- Compare alternative *models* and *missingness strategies*:
 - **S1) Aggregated data**: all cases (**ALL**); zero-imputed HRU (**IMP-H**); zero-imputed HRU and costs (**IMP-HC**)
 - **S2) Intermediate data**: all cases (**ALL**); zero-imputed HRU (**IMP-H**)
 - **S3) Disaggregated data**: all cases (**ALL**)

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Approach	$\mu_{tc(t=1)}$		$\mu_{tc(t=2)}$		$\mu_{e(t=1)}$		$\mu_{e(t=2)}$	
	mean	95% CI	mean	95% CI	mean	95% CI	mean	95% CI
Strategy 1 - total cost & QALY								
ALL	2543	(2157;2938)	2754	(2249;3310)	0.487	(0.449;0.575)	0.609	(0.569;0.649)
IMP-H	2888	(2411;3393)	2379	(1939;2872)	0.488	(0.45;0.526)	0.61	(0.571;0.651)
IMP-HC	2395	(1897;2899)	2237	(1175;2749)	0.486	(0.449;0.523)	0.61	(0.572;0.649)
Strategy 2 - cost & utility at each time								
ALL	2607	(2253;2971)	2701	(2278;3145)	0.494	(0.463;0.527)	0.6	(0.566;0.635)
IMP-H	2453	(2087;2843)	2273	(1874;2664)	0.494	(0.462;0.526)	0.6	(0.565;0.633)
Strategy 3 - HRU category & utility at each time								
ALL	2687	(2173;3194)	2587	(1995;3206)	0.513	(0.475;0.55)	0.599	(0.565;0.634)

Posterior mean QALY/Total cost estimates

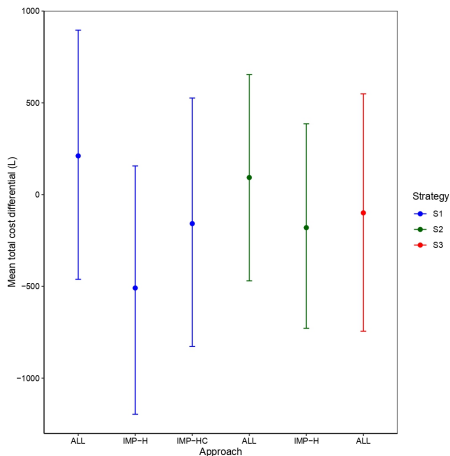
- Compare alternative *models* and *missingness strategies*:
 - S1) Aggregated data**: all cases (**ALL**); zero-imputed HRU (**IMP-H**); zero-imputed HRU and costs (**IMP-HC**)
 - S2) Intermediate data**: all cases (**ALL**); zero-imputed HRU (**IMP-H**)
 - S3) Disaggregated data**: all cases (**ALL**)

Approach	$\mu_{tc(t=1)}$		$\mu_{tc(t=2)}$		$\mu_{e(t=1)}$		$\mu_{e(t=2)}$	
	mean	95% CI	mean	95% CI	mean	95% CI	mean	95% CI
Strategy 1 - total cost & QALY								
ALL	2543	(2157;2938)	2754	(2249;3310)	0.487	(0.449;0.575)	0.609	(0.569;0.649)
IMP-H	2888	(2411;3393)	2379	(1939;2872)	0.488	(0.45;0.526)	0.61	(0.571;0.651)
IMP-HC	2395	(1897;2899)	2237	(1175;2749)	0.486	(0.449;0.523)	0.61	(0.572;0.649)
Strategy 2 - cost & utility at each time								
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Posterior mean incremental TC estimates

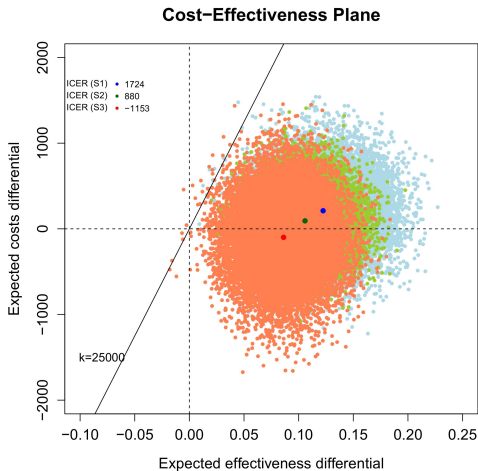
- **Key results:**

- **S1/S2** Δ_{tc} based on zero-imputed data are systematically lower
- **S3** Δ_{tc} located between **S1/S2** alternative missingness strategies



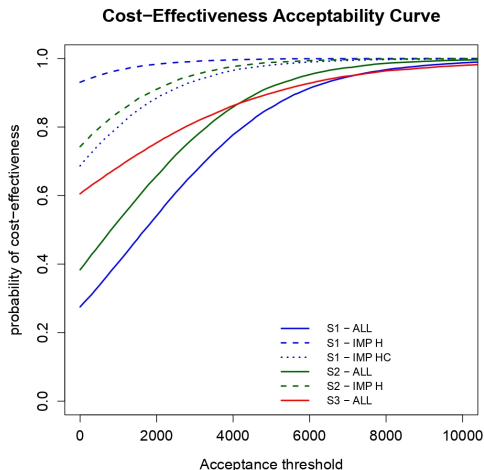
Economic evaluation

- Assess cost-effectiveness based on standard tools
 - **CE plane:** representation of the joint distribution of (Δ_e, Δ_{tc})



Economic evaluation

- Assess cost-effectiveness based on standard tools
 - **CE acceptability curve:** proportion of dots lying below the straight line (*sustainability area*) in CE plane upon varying the threshold k



Part V

Discussion

- CEAs often conducted on quantities derived from *questionnaire data* affected by **missingness**
 - Lack of a **"gold standard"** to handle missing at item level (e.g. **HRUs**)
 - Current practice often relies on *ad-hoc methods* (e.g. **zero-imputing**)
 - These can **distort** the data and lead to *incorrect* inferences

Summary

- CEAs often conducted on quantities derived from *questionnaire data* affected by **missingness**
 - Lack of a **"gold standard"** to handle missing at item level (e.g. **HRUs**)
 - Current practice often relies on *ad-hoc methods* (e.g. **zero-imputing**)
 - These can **distort** the data and lead to *incorrect* inferences
- Propose Bayesian framework for CEA data to handle *item nonresponse* in **HRUs**
 - Allow to fit models at **different levels** of data-aggregation
 - Can handle different types of **data features** (correlation, skewness, structural zeros)
 - Directly quantify impact of **missingness uncertainty** on results
 - Implemented using *freely-available* software (e.g. JAGS)

- Application to PBS data shows that:
 - Model estimates and CE results are **affected** by the approach used
 - Aggregated models require **implicit assumptions**(e.g. zero) about disaggregated missingness
 - Possibly lead to a substantial **loss of information** and **distort** the results

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 - Quantify impact of missingness and parameter uncertainty **coherently** with the analysis model
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- **Advantages:**
 - Quantify impact of missingness and parameter uncertainty **coherently** with the analysis model
 - **Flexible** model specification at *different aggregation levels*
- **Limitations:**
 - Same assumption for cases with different **missingness patterns**
 - **Challenging** to fit as number of variables and parameters increases

Recommendations & Conclusions

- **Design:** **minimise** item missingness (e.g. shorter follow-ups or fewer questionnaire items)
- **Data processing:** **ad-hoc** imputation should be **avoided** unless clearly motivated
- **Analysis:** account for *data features*, including **missingness**:
 - Fully-missing **HRQL/HRU** & partially-missing **utilities/costs** → **Intermediate model**
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- Always need to find a **balance** between **ideal approach** and its **feasibility** based on the available data:
 - **Simplify** model (i.e. dependence among variables) to reduce the number of parameters
 - Use *more* **informative priors** to handle sparse data
 - **Aggregate** some types of **HRUs** to reduce number of variables

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