

A prototype software framework for transparent, reusable and updatable health economic models

Matthew P Hamilton^{1,2,*} Caroline X Gao^{2,3,1} Glen Wiesner⁴ Kate M Folia^{2,3}
Jana M Menssink^{2,3} Petra Plencnerova⁵ David Baker^{2,3}
Patrick D McGorry^{2,3} Alexandra Parker⁶ Jonathan Karnon⁷ Sue M Cotton^{2,3}
Cathrine Mihalopoulos¹

Abstract

Summary: Computers are tools that are now essential to the work of health economists. However, the ethical dimensions of how health economic models are implemented computationally are poorly understood. Explicit ethical standards for computational health economic models (CHEMs) and the technical infrastructure to facilitate implementations of that meet those standards are required. We propose six criteria for assessing ethical implementation of CHEMs – two each for the three domains of transparency, reusability and updatability. To facilitate the implementation of CHEMs that meet these criteria, we developed a novel prototype software framework in the open source programming language R. The framework comprises six code libraries that collectively provide a toolkit for authoring CHEMs, supplying them with data and using them to undertake generalisable and transferable analyses. The framework supports integrations with existing digital services for collaborative software development and data archiving. We are currently applying the software framework to develop and apply utility mapping models in youth mental health. We assess the first set of utility mapping CHEMs that we have developed with the framework as wholly meeting both transparency criteria (open access code and data and clarity about author contributions and beliefs), one reusability criteria (liberal terms of use) and one updatability criteria (infrastructure for model maintenance) and partially meeting the two remaining criteria for transparency (supports generalisability and transferability) and updatability (retesting and deprecation). The assessment criteria and the software framework we have developed can inform future work to understand and improve ethical computational implementations of health economic models.

Code: Visit <https://www.ready4-dev.com> for more information about how to find, install and apply the prototype software framework.

¹ School of Public Health and Preventive Medicine, Monash University, Clayton, Australia

² Orygen, Parkville, Australia

³ Centre for Youth Mental Health; The University of Melbourne, Parkville, Australia

⁴ Heart Foundation, Melbourne, Australia

⁵ headspace National Youth Mental Health Foundation, Melbourne, Australia

⁶ Victoria University, Footscray, Australia

⁷ Flinders University, Adelaide, Australia

* Correspondence: Matthew P Hamilton <matthew.hamilton1@monash.edu>

1 Introduction

Health economics is a discipline concerned with problems that arise due to scarce resources, such as how to value health and healthcare, allocate healthcare budgets and configure health services [1]. In seeking to solve these problems, health economists typically use models which are simplified and selective representations of

systems that are believed to influence human health. A health economic model should be capable of being described using words and figures (a conceptual model), equations (a mathematical model) and computer code (a computational model). Health economic scientific manuscripts typically describe a model using its conceptual and mathematical representations but report results that have been generated by applying the computational model. The conceptual, mathematical and computational representations of a model are assumed to be isomorphic. Independent assessment of the validity of this assumption depends in part on the approach taken to computational model implementation and dissemination.

Computational health economic models (CHEMs) can be implemented using specialized commercial software or authored as software development projects in an open-source programming language such as Python [2] or R [3]. Advantages of commercial modelling tools include simplicity and ease of use, but a software development approach may facilitate computational models that are more transparent, reusable and adaptable [4]. The most appropriate approach for a specific CHEM project may depend on both the desired features of the model being developed and the resource and time constraints within which the project needs to be delivered (see Table 1). Although health economists report strong interest in making CHEMs more transparent and accessible [5], open-source CHEMs remain rare [6,7].

A major early decision in open-source CHEM projects is the selection of an appropriate software framework. A software framework is a shared common technology used by developers to collaboratively author software and which is not typically visible to software end-users [8]. A software framework provides a foundation for developing multiple software applications with shared resources, e.g., code and data files, that can be modified to suit specific needs. Software frameworks have widely been developed and implemented in data science, for example, PyTorch [9] for machine learning using Python.

Advantages of using software frameworks include facilitating code reuse and extension, promoting good programming practice and the capability to provide enhanced functionality and performance without additional effort by developers [10]. However, software frameworks can be challenging and time consuming to create [10] and then difficult for others to learn, often requiring model developers to undergo specialist training [8]. There is also a risk that a software framework may become excessively complex over time [10].

A high-level software framework using R has previously been developed with the primary aim of improving the transparency of CHEMs [11]. Novel software frameworks may be necessary to facilitate CHEM implementations that meet broader ethical criteria. The ethical responsibilities of computational modellers are often poorly understood and inadequately fulfilled [12–15]. Guidance on developing, selecting and using software frameworks for ethical CHEM implementations is scarce.

In this paper, we describe: (i) criteria for assessing ethical CHEM implementations; (ii) a prototype software framework for the ethical implementation of CHEMs; and (iii) use of the software framework to develop a computational economic model in youth mental health, with an initial focus on outcome valuation.

1.1 Assessing ethical computational implementations

We considered prior literature on modelling practice, our own professional experience and the needs of our youth mental health modelling project, to identify core ethical responsibilities of CHEM developers, attributes of CHEMs that support fulfilment of these responsibilities and criteria against which these attributes can be assessed.

1.2 Ethical responsibilities of CHEM developers

Health economists have ethical responsibilities relating to the social acceptability, adequacy for purpose and beneficial impact of CHEMs.

Misalignment between the values of model developers and those of the population groups affected by decisions based on their models presents significant ethical risks [14,16]. The value judgments of model developers influence the assumptions, selection of model features and standards for evidence that shape the model

development process [17]. These value judgments are rarely made explicit, omissions that may lead to socially unacceptable policy recommendations [16]. Key choices about the computational implementation of health economic models depend on these value judgments (see Table 1) and these choices in turn influence the extent to which model implementations are readily adaptable by third parties with alternative value judgments.

Model developers have duties both to take sufficient care that a model is adequate for the explicit purpose for which it was developed and to provide potential third party users with the means of assessing its adequacy for their proposed purposes [6,12,18,19]. It is common for health economic models to have serious methodological flaws [20,21]; insufficient validation [22–24], poor reproducibility [25–27]; and undeclared errors [28]. Appropriate computational implementation choices can help address many of these shortcomings, for example by automating quality assurance checks and facilitating manual reviews by third parties.

A health economic model will have limited public benefit if it not much used, if it is mis-used or when its acceptability and adequacy rapidly decay. The scientific goals of generalisability (application without adaptation) and transferability (selective reuse and/or modification of model components) [29] are advanced when models are appropriately reused in new contexts. Reuse of models as components of other models can also make model implementation more efficient [30,31] but the reusability of models is significantly shaped by computational implementation choices such as how model code and data are authored, documented, licensed and disseminated. Currently, health economic models are rarely implemented computationally in a manner that facilitates routine updates [32], thus limiting the temporal window within which a CHEM can be validly applied. Without ongoing maintenance, a CHEM risks becoming less reliable with time [31] and is at risk of being deployed for purposes for which it is poorly suited [15].

1.3 Sssessing ethical CHEM implementations

The acceptability, adequacy and public benefit responsibilities of health economic modellers are easier to state than to measure. We have therefore focused our assessment criteria for ethical modelling practice on measurable attributes of computational model implementations. As described in Table 2, we believe that implementing CHEMs that are transparent, reusable and updatable (TRU) can enable modellers to meet their ethical obligations. We therefore selected these model attributes to use as the basis for deriving ethical assessment criteria.

Transparency has been as a core identified as a core feature of ethical public health modelling practice [12]. Guidance on transparency in health economic modelling recommended that model code and data should be clearly documented, potentially with different versions for technical and non-technical users [33]. Notably, the same guidelines, published over ten years ago, did not include recommendations on sharing model code and data. However, more recent guidance recommends publicly dissemination of healthcare model artefacts using online repository services [18]. Repositories such as Zenodo [34] and Dataverse [35] provide persistent storage solutions that generate a Digital Object Identifier (DOI) for each code and data collection. An essential component of quality assuring health economic models is verification - ensuring that calculations are correct and consistent with model specifications [36]. The extensiveness of verification checks in models implemented as software projects can be reported using the concept of code coverage [37] - the proportion of model code that has been explicitly tested. Tests should ideally combine both unit tests (to verify that small, isolated sections of code produce the correct output when run independently) and acceptance tests (to verify that the correct output is produced when multiple code components are run together to perform tasks that meet core user-requirements [38]). The nature and extent of individual model authorship contributions can become unclear when models are implemented over longer time-frames with a large and changing group of collaborators [14]. This issue can be addressed by use of online repository services such as GitHub [39], that provide citation tools and can transparently record all individual code contributions to a modelling project over its lifecycle.

The **transparency** of a CHEM implementation can be assessed against the criteria:

- T1: All model code, non-confidential data and testing procedures and outcomes are available in open access repositories.

- T2: It is easy to see who developed and tested each part of the CHEM and to identify the modelling team’s assumptions, judgments and theories about CHEM development and use.

Model **reusability** is the second attribute that we identify as being core to ethical CHEM implementations. Making a CHEM’s code, data and documentation publicly available is increasingly considered good practice, yet is not sufficient to promote model re-use. Writing model algorithms as collections of functions (short, self-contained and reusable software routines that each perform a discrete task), is good scientific computing practice [40] and facilitates model reuse without adaptation (generalisability). To support reuse with adaptation (transferability), computational implementations can store model code and data in distinct files and locations (as opposed to embedding data such as parameter values into source code). Transferability can also be advanced through the use of object-oriented programming approaches [41] that take advantage of the concept of inheritance [42] to allow models to be first duplicated and then selectively modified. Generalisability and transferability are further enhanced if computational implementations adopt a modular approach, in which a model is constructed from multiple independently reusable and replaceable sub-models (modules) [43]. To grant permissions to others to use, test and adapt models and their components, health economists can avail of two broad categories of open source licensing options. Some guidance strongly recommends the use of permissive licensing [40] that provides users with great flexibility as to the purposes (including commercial) for which content can be re-used. An alternative approach is to use copyleft licenses [44] that can require content users to distribute any derivative works they create under similar open-source arrangements. The **reusability** of a CHEM implementation can be assessed against the criteria:

- R1: Model code and data are implemented to facilitate both generalisability and transferability.
- R2: Terms of use allow anyone to reuse model code and non-confidential data, in whole or in part, without charge, and for purposes that include the creation of derivative works.

Models should be **updatable** so that they remain valid for longer, evolving as new evidence emerges and the systems being modelled change [45, @ 31]. Ensuring that a model is regularly reviewed to identify and implement required improvements is a recommended defense against model validity decay [15]. Sustainable maintenance of open source research software requires both a core development team and an active user community [46]. Online communities can be an efficient means of engaging model users in testing each version of a model, identifying issues and suggesting improvements. Services such as GitHub [39] provide collaborative code development tools [47] that help elicit, integrate and reconcile contributions from multiple contributors and to ensure each update is uniquely identifiable and retrievable. It is also important that verification checks are rerun with each model update, a task that can be automated using the software development practice of Continuous Integration [48]. The risk of model revisions having unintended consequences for third party users can be mitigated through the use of deprecation conventions [49] that take an informative and staged approach to retiring outdated model code and data.

The **updatability** of a CHEM implementation can be assessed against the criteria:

- U1: Technical infrastructure is in place to support sustained development, testing, maintenance and version control of a model in collaboration with model users.
- U2: Each new release of a model is retested, with changes implemented to minimize disruptions for existing model users.

1.4 Software framework

To support the development of CHEMs that meet TRU assessment criteria, we have created a prototype software framework called ready4. We have designed this framework to enable ethical computational implementations of health economic models that are both open-source (for transparency and reusability) and modular (for reusability and updatability). The framework aims to support the standardization and

interoperability that are core enablers of implementing a modular and open source approaches. Model modules need to be able to share inputs and outputs with each other and to be run as independent models [50], even when these modules are authored by different teams.

1.5 Framework libraries

To work within the popular open-source programming language R [3], the ready4 software framework is implemented as R code libraries.

The R language supports functional and object-oriented programming paradigms [51]. Both these paradigms are used in the ready4 framework to provide tools for authoring CHEMs, supplying those CHEMs with data and using CHEMs to implement reproducible modelling analyses.

As R is an open source language, each new R library typically depends on a number of other R libraries that have been written by third parties. As the number of third party dependencies of an R library grows so does the fragility of that library (e.g. the library may cease to work as intended due to changes in one of its dependency libraries). To reduce the fragility of our framework we implemented it as multiple R libraries rather than one R library. In total we authored six novel R libraries to implement the ready4 framework, all of which have distinct purposes and depend on have unique third-party R library dependencies (Table ??).

The foundational framework library, called ready4, defines a template module data structure (using R's S4 class system) from which all CHEM module data structures will be created and a novel syntax that enable module algorithms to be consistently named. The ready4 library also contains tools for retrieving web based information on model modules, datasets and analysis programs authored with the framework and for partially automating updates to a project documentation website.

Three R libraries are designed to help standardize workflows for authoring, documenting, testing and disseminating new model modules. The ready4pack library is designed to integrate with GitHub and provides tools for authoring model modules and disseminating them as themed bundles in R libraries libraries that are:

- documented (with a website, a PDF manual itemising selected contents and a PDF manual itemising all contents);
- licensed (using the copyleft GNU GPL-3 [66] by default);
- easily citable (citation information can be retrieved within an R session or from hosting repositories); and
- quality assured (each update triggers continuous integration workflows, including any acceptance and unit tests created by module library authors).

The ready4pack library depends on two other module authoring libraries. The ready4fun library contains tools for authoring functions in a consistent house style that automatically generates basic documentation for each function. Functions to implement model algorithms can be associated with a module via a special type of function called a method. Tools from the ready4class library can help streamline and standardise the authoring of module data structures and their associated methods and to automatically generate basic documentation for each module.

The ready4use library contains tools for supplying model modules with data stored in online repositories (hosted on a Dataverse installation or on GitHub), labelling these datasets and then sharing them via online repositories. The ready4show library contains tools to help author R Markdown programs that combine model modules and datasets to undertake analyses. These programs are either self-documenting (code is easy to understand and integrated with plain English explanations of what it does) or trigger the creation of separate documents (e.g. a scientific manuscript).

1.6 Framework integration with online services

Our software framework needs to be used in conjunction with a number of online services. To facilitate its application to our youth mental health project, we established and configured accounts with these required services (see Availability of data and materials).

We created a GitHub organisation (a collection of code repositories) where all code (libraries, programs and sub-routines) that we author with the framework is stored and version controlled. We configured individual repositories in our GitHub organisation that are used for code library projects to use GitHub actions to implement continuous integration. By default, code libraries authored with our framework will use continuous integration to assess compliance with policies specified by the Comprehensive R Archive Network (CRAN) [52]. To track our code coverage, we linked our GitHub organisation to an account we established at codecov [53]. To facilitate the creation and hosting of documentation websites, we enabled GitHub Pages in each repository we used for code library development. We also created a Zenodo community - a collection of permanent, uniquely identified repositories. We then linked our Zenodo community and GitHub organisation so that every time we specify a version of code in one of our GitHub repositories as a “release”, a copy of that code is automatically created on Zenodo with a DOI. Finally, to manage model datasets, we created a dedicated collection within the Harvard Dataverse installation.

2 Application

2.1 Economic topics

Currently, we are using the ready4 software framework to develop, apply and share youth mental health computational models in four of the twelve domains of health economics identified by Wagstaff and Culyer [1]:

- health and its value (our projects: utility mapping models);
- determinants of health and ill-health (our projects: models for creating synthetic household populations with key risk and protective factors for mental disorders);
- demand for health and health care (our projects: spatial epidemiology and help-seeking choice models); and
- supply of health services (our projects: a model of primary mental health care services).

Once these projects are completed, our aim is to flexibly combine these models as modules of a multi-purpose model (also called “ready4”) to answer questions in two additional Wagstaff and Culyer domains:

- efficiency and equity (our goal: assess the distributional impacts and identify the optimal targeting of care provision); and
- economic evaluation (our goal: assess the cost-utility of competing policy options for improving the mental health of young people).

2.2 Case study: Utility mapping

Our initial application of the ready4 software framework was to undertake a previously described study [54] to develop utility mapping models for use in samples of young people presenting to primary mental health services. The ready4 software framework was used to develop CHEM modules, supply those modules with data and implement modelling analyses, creating the following artefacts:

- development version module libraries for describing and validating youth mental health human record datasets [55], scoring health utility [56], specifying utility mapping models [57] and implementing reproducible utility mapping studies [58];
- a development version library of functions for finding and using utility mapping models developed with these tools [59];
- data collections of synthetic populations for testing model modules [60] and study input and results data [61];
- programs for replicating all steps from data ingest to manuscript reporting [62], applying utility mapping models to new data [63] and generating a synthetic representation of the study dataset [64];
- subroutines for creating a catalogue of utility mapping models [65] and generating a draft scientific manuscript [66] for studies implemented with these modules.

We created a checklist (Table ??) that we used to subjectively assess these study outputs against TRU criteria. For each criterion, we provided a global assessment of whether it was met using the responses “yes”, “no” or “partial”. We believe the outputs from our utility mapping study may be assessable as having satisfactorily met four of the six criteria (T1, T2, R2 and U1) and to have partially met two criteria (R1 and U2). The main shortcomings that we identified when applying the assessment criteria were the need for additional development before the CHEM modules would be sufficiently generalizable for valid application in datasets that measure health utility with different instruments and a general lack of unit testing.

2.3 Model documentation

We developed a versioned model documentation website (www.ready4-dev.com) that provides guidance to model developers on how to use and contribute improvements to the ready4 software framework and model. The documentation website was developed using the Hugo framework [67], Docsy theme [68] and Algolia DocSearch [69] and is hosted using the Netlify [70] service. We used functions from the ready4 R library to partially automate website updates relating to available CHEM modules, datasets and analysis programs. We linked our Netlify account to our GitHub organisation so that the project website would automatically update whenever the source code in its GitHub repository was edited.

3 Discussion

Ethical practice is a core expectation of health researchers and computational methods underpin most quantitative research, yet an understanding of what constitutes ethical computational modelling practice in health is underdeveloped [12]. The modeller responsibilities, enabling model attributes and model implementation assessment criteria that we propose can help address this gap.

The ethical responsibilities and enabling model attributes we describe have both commonalities and distinctive features compared to a previous ethical framework for computational modelling in public health [12]. The authors of that framework propose 13 questions to evaluate ethical risk across the four criteria of independence, transparency, beneficence and justice. Their descriptions of the four criteria at least partially map to either our proposed modeler responsibilities (“justice” to “social acceptability”, “independence” to “adequacy for purpose” and “beneficence” to “beneficial impact”) or enabling model attributes (“transparency”). However, while our six assessment criteria are specific to three attributes (TRU) of the computational implementation of the model, the prior ethical framework includes questions relevant to the conceptual and mathematical models and the potential impacts of model use. Examples of these more general evaluation questions include (for the justice criterion) “is any lack of knowledge about important parameters attributable to uncertainty or variability?” and (for the beneficence criterion) “if a policy is based on the model evidence, is it more likely to be effective and beneficial than a decision made in the absence of the model?”. The less numerous and more focused assessment criteria we propose may potentially be more tractable to implement in reviews of models authored by third parties and as the basis for designing software frameworks to support ethical computational model implementation.

Currently, many if not most existing CHEMs are insufficiently transparent [22,25–27], reusable [6,7] and updatable [32,71]. Existing incentive structures for health economists generally do not promote facilitating peers to reuse their work. Currently, it takes “an extraordinary amount of idealism” to dedicate the substantial time and resources required to author, test, document and maintain even fragile prototype research software that could instead be used to write scientific manuscripts [72].

Reducing waste in research is a core responsibility of research funders [73] and funding the development of CHEMs that are not adequately understood, reused or updated is wasteful. Previously recommended strategies for more beneficial health economic research investments include support for harmonized ethical standards for model development [12], methodological innovation to improve model transferability [74], networks of modellers working on common health conditions [75], and centralized infrastructure such as open source model repositories [5] and a standard platform for model implementations [22]. Development of software frameworks to support ethical CHEM implementations could enable and enhance each of these strategies.

As illustrated by Table ??, we have developed a software framework that can help us to author a youth mental health model that largely satisfy our TRU criteria. However, we believe our software framework is currently too fragile to be anything more than a prototype for supporting the development needs other modelling teams and projects. A major reason for this distinction is that our software framework was developed with the needs of only one group of developers in mind – ourselves. We currently lack the resources required to adequately implement strategies to target factors such as user enjoyment, usability, active user-community and supporting resources that influence adoption of software frameworks [8].

Our prototype framework has a number of features that subsequent work to develop ethical software frameworks may find useful to incorporate. Firstly, developing a software framework to work within an existing and widely used open source programming language such as R or python, can keep framework scope relatively narrow (making it more tractable to develop, maintain and learn) while readily leveraging and coherently integrate other modelling tools written in that language (e.g. the dependency libraries we list in Table ??). Secondly, implementation that combines both object oriented and functional programming paradigms can avail of the modular and syntactical simplicity benefits of the former, while limiting needless bundling of code artefacts (a limitation of object oriented approaches famously described as: “you wanted a banana but what you got was a gorilla holding the banana” [76]). Thirdly, a sensible trade-off needs to be found between transparent code implementation (which requires clear and sufficiently detailed

documentation) and Agile Software Development (for which a foundational principle is prioritizing the development of working code over writing documentation [77]). Our software framework makes this trade off by enforcing the use of consistent code naming conventions and file organisation which in turn enables automated generation of simple documentation at every code update. All model data-structures and algorithms are therefore always documented (at least minimally, with machine authored content), meaning model developers have a requirement to write customized documentation less frequently.

A future software framework for ethical CHEMs would ideally incorporate a base set of features useful to developers of computational models across all domains of public health, with the capability for community-led extensions that are tailored to the needs of modellers focused on specific health-conditions.

4 Conclusion

We have identified criteria that can be used to systematically assess extent to which the computational implementation of health economic models adheres to the ethical goals of transparency, reusability and updatability. We have developed an open-source software framework that can support the ethical computational implementation of economic models in youth mental health. Our framework can be used as a prototype for developing future software frameworks to support ethical implementation of CHEMs.

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Availability of data and materials

The most up to date and comprehensive source of documentation on our framework and model is available at <https://www.ready4-dev.com> . Development versions of all code repositories referenced in this article are available in <https://github.com/ready4-dev/> . Archived code releases are available in <https://zenodo.org/communities/ready4> . All data repositories referenced in this article are available in <https://dataverse.harvard.edu/dataverse/ready4> .

Ethics approval

Software framework development did not involve human subject research and was not ethically reviewed. The utility mapping worked example is a previously reported study that was reviewed and granted approval by the University of Melbourne’s Human Research Ethics Committee, and the local Human Ethics and Advisory Group (1645367.1).

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Conflict of Interest

None declared.

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Table 1: Considerations when choosing between implementing computational models using commercial software or as software projects using a programming language

Objective	Commercial modelling software	Programming language
Fast	A	ONE
Cheap	B	TWO
Good	C	THREE

Tables and figures

Table 2: Framework standards

Objective	Standard	Meaning
Accountable - it is easy to see who developed, tested and applied a model and how they did it.		
	A1	Open online repositories are used to permanently archive, uniquely identify and transparently record authorship and development history of model code and data.
	A2	Model code and data are documented.
	A3	Model code uses consistent and abstracted syntax.
	A4	Literate programming is used to implement model analyses.
	A5	Model code coverage is reported.
	A6	All parts of a study analysis and reporting workflow can be reproduced and/or replicated.
	A7	Model code and data are distributed with tools to support appropriate citation.
Reusable - a model and its components can be used in other models and by other modellers.		
	R1	Model code is made available for re-use under copyleft or permissive licenses.
	R2	Non-confidential model data is licensed for liberal re-use (potentially subject to ethical use terms).
	R3	Model code and data are stored and managed separately.
	R4	Model code uses encapsulation and inheritance for data structures.
	R5	Model code uses functions to implement algorithms.
	R6	Model code is distributed as code libraries.
	R7	Test data is available to demonstrate the transferability of model code.
	R8	Statistical models are distributed with tools for making out of sample predictions.
	R9	User-interfaces allow non-technical users to configure and use models.
Updatable - a model and its components are maintained and continuously improved.		
	U1	Model code and data are version controlled.
	U2	The significance and status of code and data updates are indicated with semantic versioning and release types.
	U3	Continuous integration is used to verify model code updates.
	U4	Deprecation conventions are used to retire model code and data.