Cost-effectiveness survey - v2

Directions:

You are being asked to take part in a research study. This research is being conducted to learn about best practices for cost-effectiveness analysis. Specifically, we are interested in learning about how researchers would recommend using cost-effectiveness analysis in decision-making. You are being asked to participate in this research because you have completed at least one course about cost-effectiveness analysis and/or written in at least one cost-effectiveness analysis.

Your participation in this study is voluntary and you may withdraw your participation at any time for any reason. If you take part in this study, you will be asked to complete a survey, which will take about 5-7 minutes. Specifically, you will be asked a number of questions about whether you would implement certain programs and how you conduct and interpret cost-effectiveness analysis. You can terminate your participation at any time. If you have any questions about this study, you can contact

At the end of the survey, you will be given an opportunity to enter your email for a chance to win a \$25 gift card; we will give out 5 gift cards in total. Thank you again for your time and participation.

To participate in the survey, click "I consent to participate in this survey." To decline, close this tab.

Q1 You are a researcher conducting a cost-effectiveness analysis on a new drug, Drug X in Massachusetts. You find that the drug has an incremental cost-effectiveness ratio of \$40,000/QALY (compared to a typical threshold of \$50,000-\$100,000 QALY) over a lifetime time horizon. To provide the drug to the entire eligible population would cost about 20% of the current Medicaid budget over the next 3 years. Which of the following best summarizes how you write up this result in the discussion section in an academic paper?

O In general, decision-makers should fund Drug X at current prices. (1)
O In general, decision-makers should not fund Drug X at current prices. (2)
O It's unclear whether the decision-maker should fund Drug X current prices. (3)

Display This Question:

If You are a researcher conducting a cost-effectiveness analysis on a new drug, Drug X in Massachuse... = In general, decision-makers should not fund Drug X at current prices.

Or You are a researcher conducting a cost-effectiveness analysis on a new drug, Drug X in Massachuse... = It's unclear whether the decision-maker should fund Drug X current prices.

Q2	Which of the following best explains your response in the previous question?
	Orug X is cost-effective, but policymakers would have to to reallocate funding from existing programs to pay for the drug. (3)
	Orug X is cost-effective, but policymakers should wait until more competitors or generic options enter the market. (4)
	Other (5)
Pa	ge Break

adopt Drug X in its would advise them?	Medicaid budget. W	/hich of the following best summarizes how	v you
O Recommend	funding Drug X for all e	eligible patients (1)	
O Refuse to fund	d Drug X at its current	price. Wait for a lower price or competitor	s. (2)
Only fund Druimpact concerns	_	ble population (chosen at random) to redu	ice budget
Other (4)			

Massachusetts health commission on whether and how to

Q4 Each box in the grid represents an intervention, with its ICER across the top and total cost across the left side. For example, the top left box represents an intervention of low cost with an ICER of less than \$50K/year.

Click the boxes to indicate an opinion on these interventions in a United States setting:

- One click (green): decision-maker should fund intervention
- Two clicks (red): decision-maker should not fund the intervention
- No click (white): unclear whether the decision-maker should fund the intervention

ICERs are given in units of \$/QALY. Costs represent total costs for the eligible patient population ("budget impact"). The alarm bell threshold is the "amount of net cost increase per individual new intervention that would contribute to growth in overall health care spending greater than the anticipated growth in national GDP + 1%" (Institute for Clinical and Economic Review).

Low cost Medium cost At alarm bell threshold High cost

Q3 You are asked to advise the

< 50K	50-100K	100-300K	300K +

Q5				
	In the academic literature, the willingness to pay threshold should reflect the current budget, i.e. be explicitly derived from funding interventions in order of cost-effectiveness until budget is exhausted. (1)	In the academic literature, the willingness to pay threshold should reflect societal willingness to pay, even if this would result in substantial increases or decreases to the current health budget (2)		
I more strongly agree with the following: (1)				
Q6 Rate the strength of your agreement on the previous question.				
O Completely agree with the	O Completely agree with the option I chose (1)			
O Felt conflicted but had a	Felt conflicted but had a clear preference (2)			
O Felt nearly equal about both answer choices (3)				
Q7				
	In most cases, if a program is cost-effective but not affordable, this typically means that policymakers should increase the budget. (1)	If a program is cost-effective but not affordable, this typically means that policymakers should decrease the willingness to pay threshold. (2)		
I more strongly agree with the following: (1)				

Demographic Information
Q11 Current position
○ Government (6)
O Industry (5)
O Master's Student (1)
O PhD Student (2)
O Post-doc/Research scientist (3)
O Professor (4)
Other (7)
Q14 Gender identity
○ Male (1)
O Female (2)
O Non-binary (3)
O Prefer to self describe (4)
O Prefer not to say (5)
Q15 Age

Q16 Years of experience (coursework, research, OR teaching) with cost-effectiveness analysis
Q17 Number of about cost-effectiveness analyses to which you have contributed
O 0 (1)
O 1-2 (2)
O 3-5 (3)
O 5+ (4)
Q5f Which of the following are your main focus in cost-effectiveness analysis?
O High-income countries (1)
O Low- and middle-income countries (2)
○ A combination of both (3)
Q18 Any further comments?