Ejemplos de aplicación de VBHC en contratación en Europa

Dra Laura Sampietro Colom
Adjunta Innovación
Jefa Unidad Evaluación de Innovaciones y Nuevas Tecnologías
Direcció Investigación e Innovación
Hospital Clinic Barcelona

Ciclo Seminarios VBHC y Contratación Pública Basada en el Valor

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Instituto Aragonés Ciencias de la Salud (IACS)

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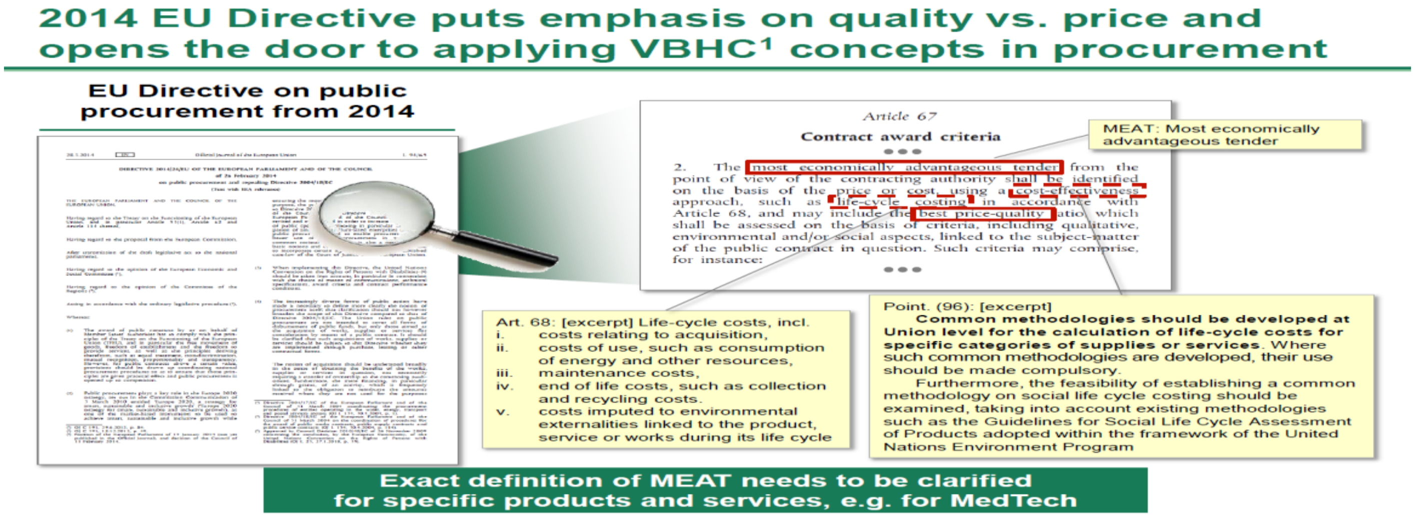
1. Conceptos: VBP y CPI

- **Compra Basada en el Valor (VBP)** : llevar a cabo decisiones de compra que consideran cómo un producto o una solución puede proveer de la mejor manera un resultado (*outcome & output*) y reducir el coste total de la atención sanitaria – más que focalizarse exclusivamente en adquirir un producto específico al menor coste posible.



2014 EU Directive puts emphasis on quality vs. price and opens the door to applying VBHC[1] concepts in procurement

EU Directive on public procurement from 2014

Article 67

Contract award criteria

•••

2. The most economically advantageous tender from the point of view of the contracting authority shall be identified on the basis of the price or cost, using a cost-effectiveness approach, such as life-cycle costing in accordance with Article 68, and may include the best price-quality ratio, which shall be assessed on the basis of criteria, including qualitative, environmental and/or social aspects, linked to the subject-matter of the public contract in question. Such criteria may comprise, for instance:

•••

MEAT: Most economically advantageous tender

Art. 68: [excerpt] Life-cycle costs, incl.
i. costs relating to acquisition,
ii. costs of use, such as consumption of energy and other resources,
iii. maintenance costs,
iv. end of life costs, such as collection and recycling costs.
v. costs imputed to environmental externalities linked to the product, service or works during its life cycle

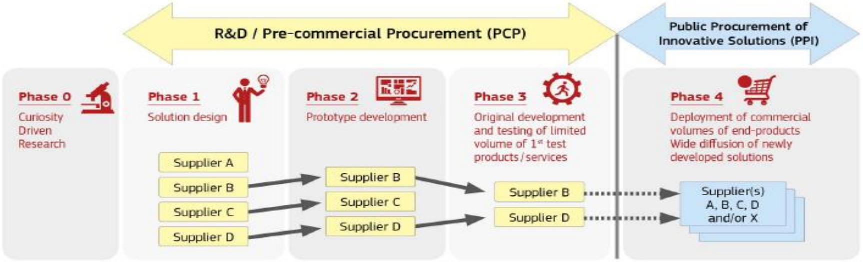
Point. (96): [excerpt]
Common methodologies should be developed at Union level for the calculation of life-cycle costs for specific categories of supplies or services. Where such common methodologies are developed, their use should be made compulsory.
Furthermore, the feasibility of establishing a common methodology on social life cycle costing should be examined, taking into account existing methodologies such as the Guidelines for Social Life Cycle Assessment of Products adopted within the framework of the United Nations Environment Program

Exact definition of MEAT needs to be clarified for specific products and services, e.g. for MedTech

1. Conceptos: VBP y CPI

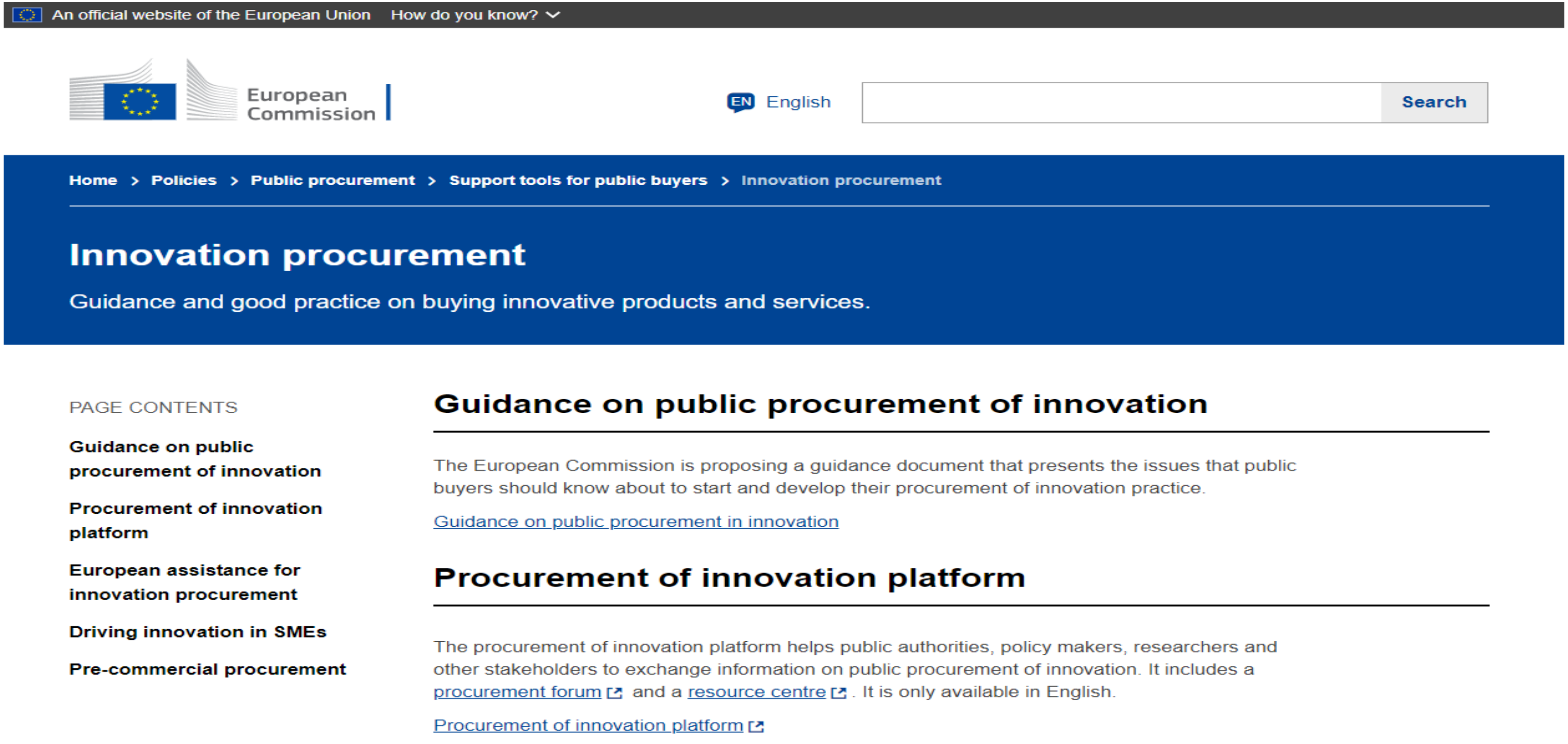
❖ **Compra Pública Innovadora** : compra innovadora que tiene una de las dos siguientes características:

- ○ Se compra el proceso de Innovación (investigación y desarrollo) con resultados "parciales". Existe demanda pero no existe oferta. Colaboración en el desarrollo entre partes. **Compra Pública Pre-Comercial (CPC)**.
- ○ Se compra los resultados de la innovación creada por otros. El sistema público actúa como "adoptadores tempranos" de un producto nuevo (innovador) que ya está en el mercado. **Compra Pública de Soluciones Innovadoras (IPP-CPI)**


R&D / Pre-commercial Procurement (PCP)
Public Procurement of Innovative Solutions (PPI)
Phase 0
Curiosity Driven Research
Phase 1
Solution design
Phase 2
Prototype development
Phase 3
Original development and testing of limited volume of 1st test products/services
Phase 4
Deployment of commercial volumes of end-products Wide diffusion of newly developed solutions
Supplier A
Supplier B
Supplier C
Supplier D
Supplier B
Supplier C
Supplier D
Supplier B
Supplier D
Supplier(s) A, B, C, D and/or X

https://ec.europa.eu/transparency/regdoc/rep/3/2018/EN/C-2018-3051-F1-EN-MAIN-PART-1.PDF

2. Iniciativas “macro” en Europa



Home > Policies > Public procurement > Support tools for public buyers > Innovation procurement

Innovation procurement

Guidance and good practice on buying innovative products and services.

PAGE CONTENTS

- **Guidance on public procurement of innovation**
- **Procurement of innovation platform**
- **European assistance for innovation procurement**
- **Driving innovation in SMEs**
- **Pre-commercial procurement**

Guidance on public procurement of innovation

The European Commission is proposing a guidance document that presents the issues that public buyers should know about to start and develop their procurement of innovation practice.

Guidance on public procurement in innovation

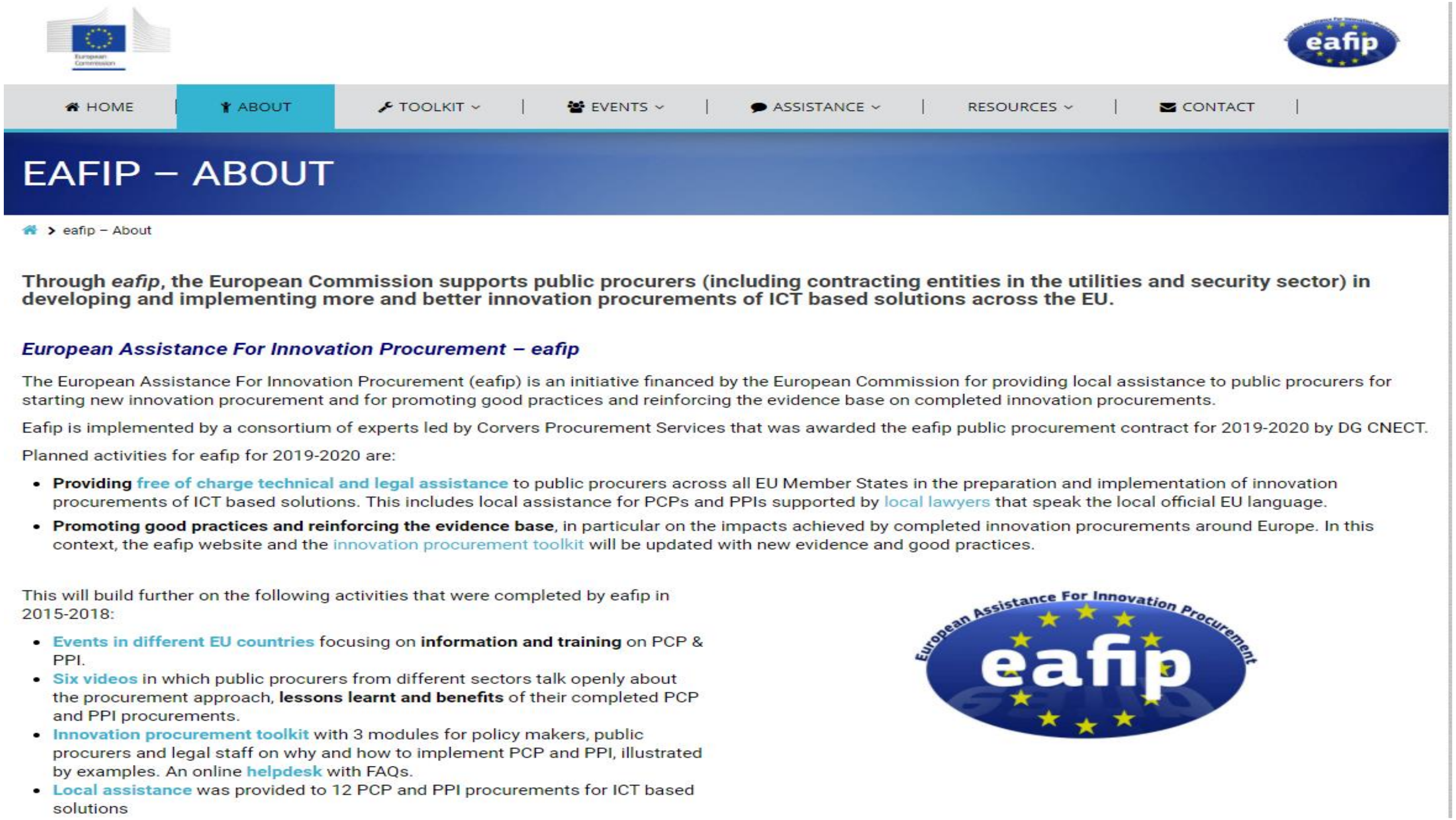
Procurement of innovation platform

The procurement of innovation platform helps public authorities, policy makers, researchers and other stakeholders to exchange information on public procurement of innovation. It includes a procurement forum and a resource centre . It is only available in English.

Procurement of innovation platform

https://ec.europa.eu/info/policies/public-procurement/support-tools-public-buyers/innovation-procurement_en

2. Iniciativas “macro” en Europa



EAFIP – ABOUT

Through *eafip*, the European Commission supports public procurers (including contracting entities in the utilities and security sector) in developing and implementing more and better innovation procurements of ICT based solutions across the EU.

European Assistance For Innovation Procurement – eafip

The European Assistance For Innovation Procurement (eafip) is an initiative financed by the European Commission for providing local assistance to public procurers for starting new innovation procurement and for promoting good practices and reinforcing the evidence base on completed innovation procurements.

Eafip is implemented by a consortium of experts led by Corvers Procurement Services that was awarded the eafip public procurement contract for 2019-2020 by DG CNECT.

Planned activities for eafip for 2019-2020 are:

- **Providing free of charge technical and legal assistance** to public procurers across all EU Member States in the preparation and implementation of innovation procurements of ICT based solutions. This includes local assistance for PCPs and PPIs supported by local lawyers that speak the local official EU language.
- **Promoting good practices and reinforcing the evidence base**, in particular on the impacts achieved by completed innovation procurements around Europe. In this context, the eafip website and the innovation procurement toolkit will be updated with new evidence and good practices.

This will build further on the following activities that were completed by eafip in 2015-2018:

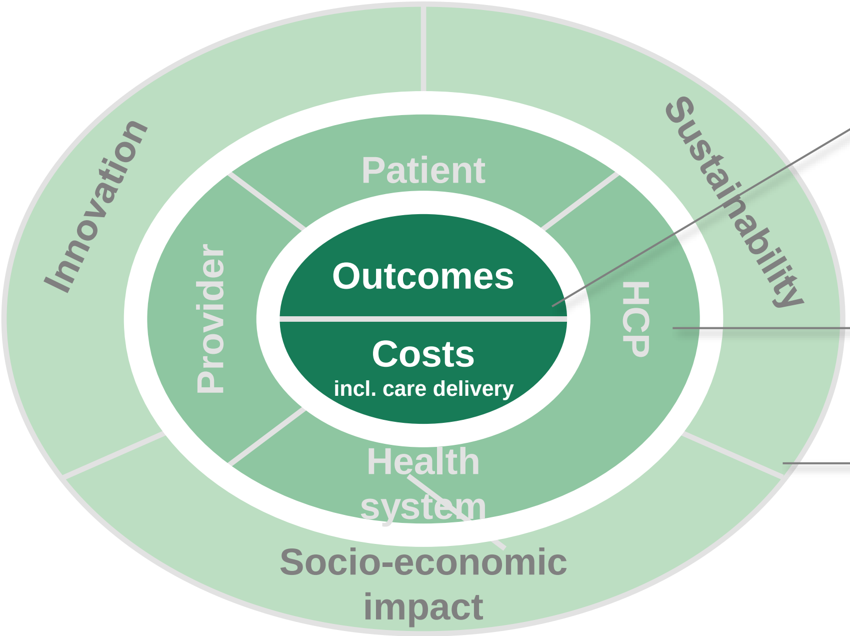
- **Events in different EU countries** focusing on **information and training** on PCP & PPI.
- **Six videos** in which public procurers from different sectors talk openly about the procurement approach, **lessons learnt and benefits** of their completed PCP and PPI procurements.
- **Innovation procurement toolkit** with 3 modules for policy makers, public procurers and legal staff on why and how to implement PCP and PPI, illustrated by examples. An online **helpdesk** with FAQs.
- **Local assistance** was provided to 12 PCP and PPI procurements for ICT based solutions

https://eafip.eu/about/

2. Iniciativas “macro” en Europa

MEAT VBP Framework (2015)

VALUE-BASED PROCUREMENT
Partnering for patient-centric, sustainable health care


Innovation
Sustainability
Patient
Provider
HCP
Outcomes
Costs
incl. care delivery
Health system
Socio-economic impact

Core of value: outcomes & costs

Core value creation in terms of outcomes, that matter for patients &. the related product / service and provider costs

Other benefits for key stakeholders

Secondary benefits for patients, health care professionals, providers and the health system a whole

Broader impact on society

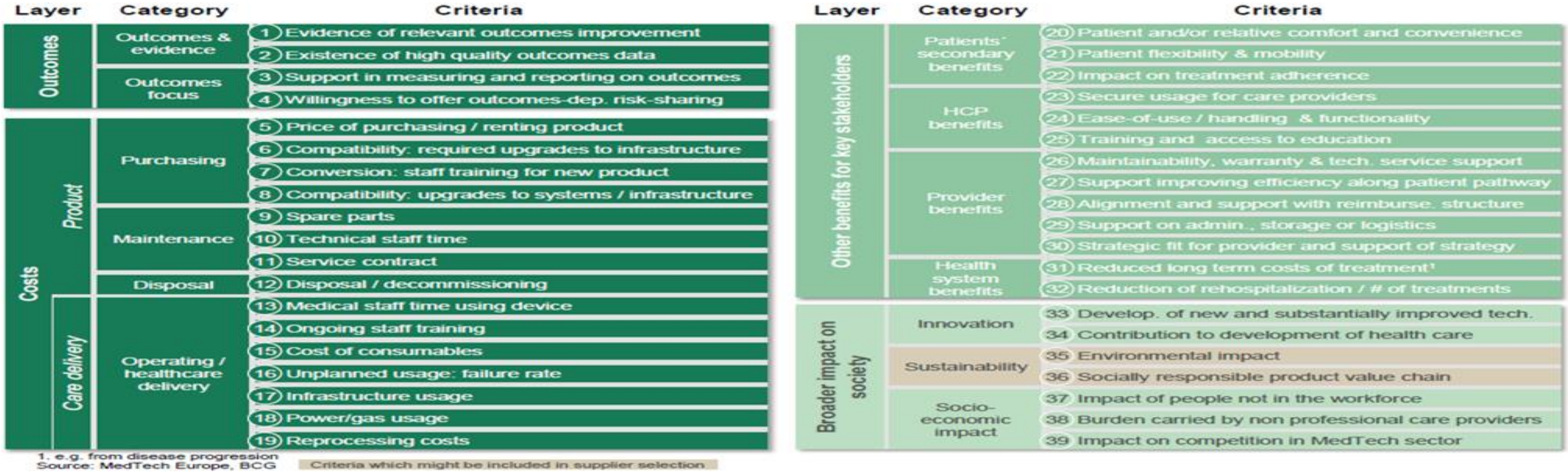
Broader impact on society in terms of socio-economics[1] , sustainability and innovation

MedTech Europe
from diagnosis to cure

BCG BOSTON CONSULTING GROUP

2. Iniciativas “macro” en Europa

MEAT VBP Framework (2015)



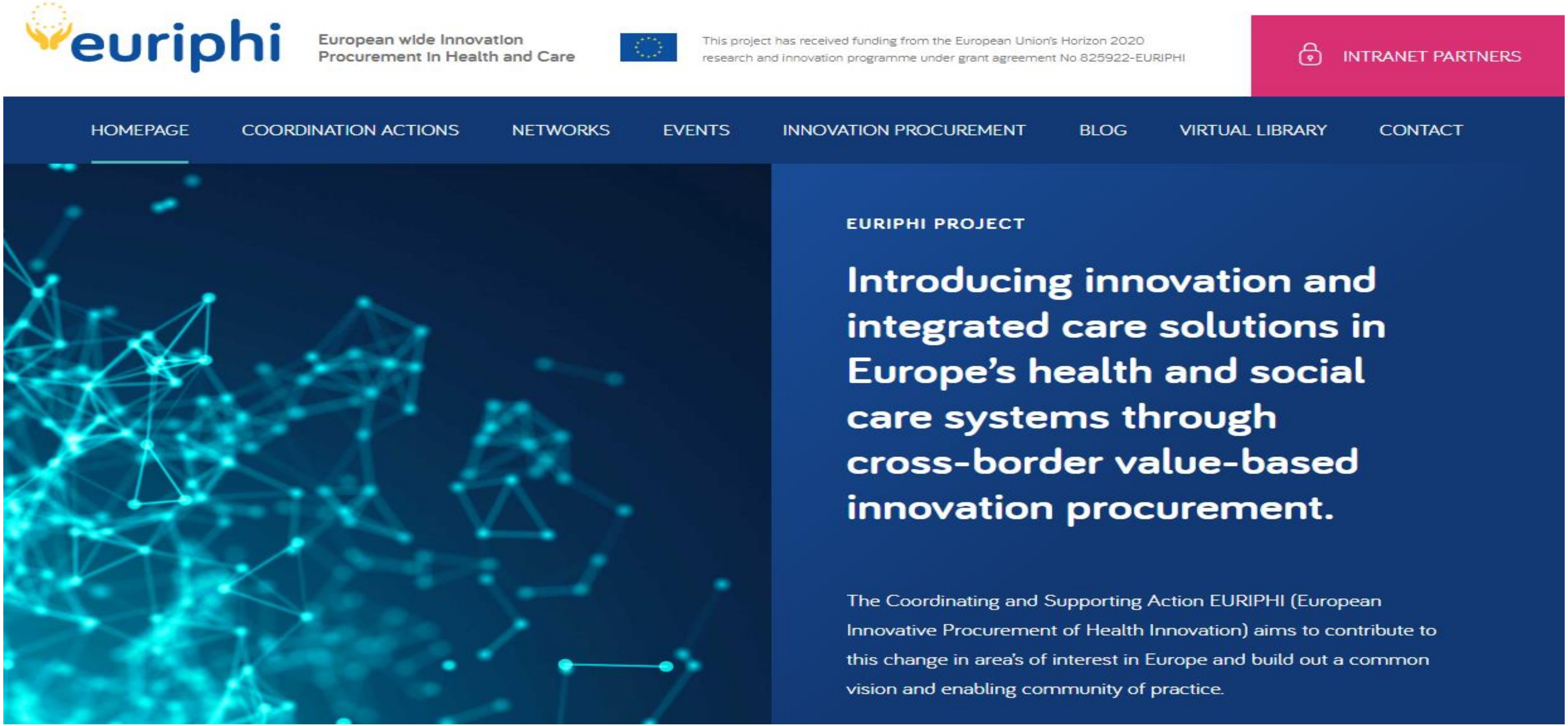
Layer		Category	Criteria
Outcomes		Outcomes & evidence	① Evidence of relevant outcomes improvement
			② Existence of high quality outcomes data
		Outcomes focus	③ Support in measuring and reporting on outcomes
			④ Willingness to offer outcomes-dep. risk-sharing
Costs	Product	Purchasing	⑤ Price of purchasing / renting product
			⑥ Compatibility: required upgrades to infrastructure
			⑦ Conversion: staff training for new product
			⑧ Compatibility: upgrades to systems / infrastructure
		Maintenance	⑨ Spare parts
			⑩ Technical staff time
			⑪ Service contract
		Disposal	⑫ Disposal / decommissioning
	Care delivery	Operating / healthcare delivery	⑬ Medical staff time using device
			⑭ Ongoing staff training
			⑮ Cost of consumables
			⑯ Unplanned usage: failure rate
			⑰ Infrastructure usage
			⑱ Power/gas usage
			⑲ Reprocessing costs
Other benefits for key stakeholders		Patients' secondary benefits	⑳ Patient and/or relative comfort and convenience
			(21) Patient flexibility & mobility
			(22) Impact on treatment adherence
		HCP benefits	(23) Secure usage for care providers
			(24) Ease-of-use / handling & functionality
			(25) Training and access to education
		Provider benefits	(26) Maintainability, warranty & tech. service support
			(27) Support improving efficiency along patient pathway
			(28) Alignment and support with reimburse. structure
			(29) Support on admin., storage or logistics
			(30) Strategic fit for provider and support of strategy
		Health system benefits	(31) Reduced long term costs of treatment[1]
			(32) Reduction of rehospitalization / # of treatments
Broader impact on society		Innovation	33 Develop. of new and substantially improved tech.
			34 Contribution to development of health care
		Sustainability	35 Environmental impact
			36 Socially responsible product value chain
		Socio-economic impact	37 Impact of people not in the workforce
			38 Burden carried by non professional care providers
			39 Impact on competition in MedTech sector

1. e.g. from disease progression

Source: MedTech Europe, BCG

▨ Criteria which might be included in supplier selection

2. Iniciativas “macro” en Europa


euriphi
European wide Innovation Procurement in Health and Care
INTRANET PARTNERS
HOMEPAGE
COORDINATION ACTIONS
NETWORKS
EVENTS
INNOVATION PROCUREMENT
BLOG
VIRTUAL LIBRARY
CONTACT

This project has received funding from the European Union’s Horizon 2020 research and innovation programme under grant agreement No 825922-EURIPHI

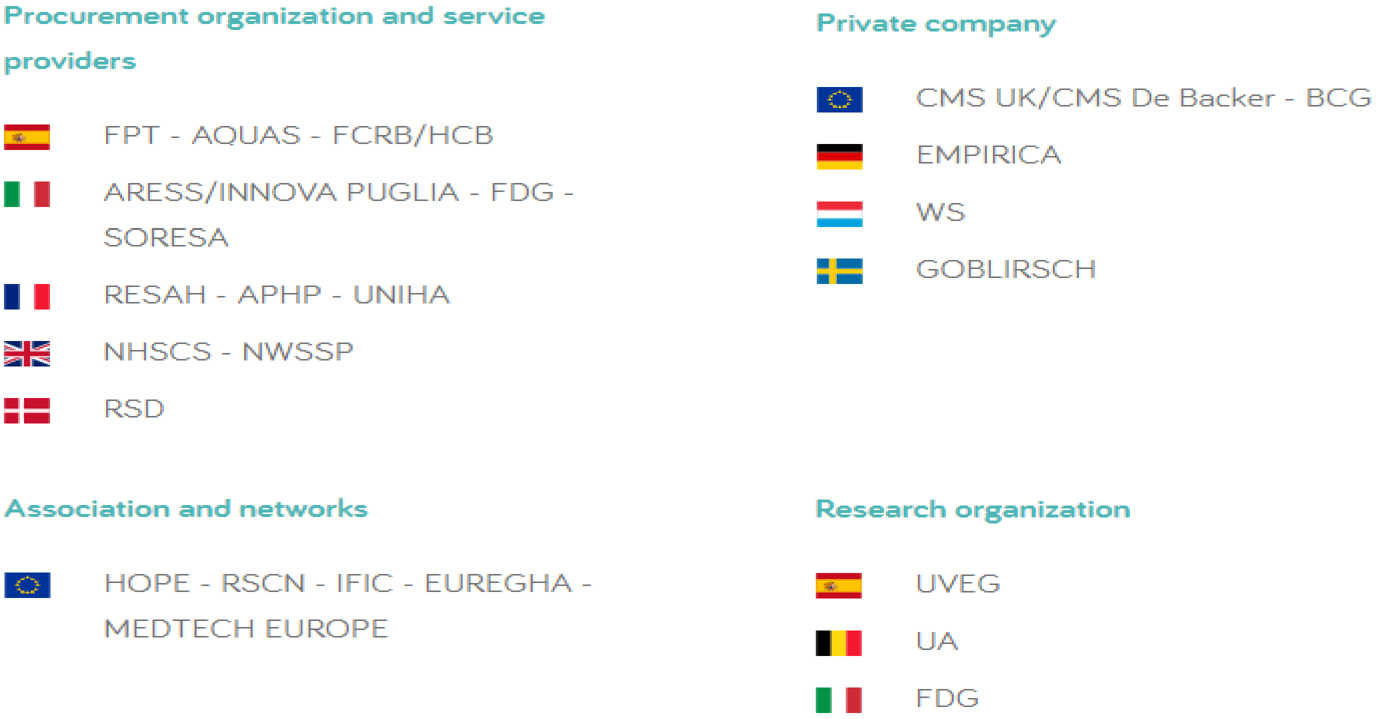
EURIPHI PROJECT

Introducing innovation and integrated care solutions in Europe’s health and social care systems through cross-border value-based innovation procurement.

The Coordinating and Supporting Action EURIPHI (European Innovative Procurement of Health Innovation) aims to contribute to this change in area’s of interest in Europe and build out a common vision and enabling community of practice.

https://www.euriphi.eu/

Socios del Consorcio



Procurement organization and service providers

- 🇪🇸 FPT - AQUAS - FCRB/HCB
- 🇮🇹 ARESS/INNOVA PUGLIA - FDG - SORESA
- 🇫🇷 RESAH - APHP - UNIHA
- 🇬🇧 NHSCS - NWSSP
- 🇩🇰 RSD

Private company

- 🇪🇺 CMS UK/CMS De Backer - BCG
- 🇩🇪 EMPIRICA
- 🇱🇺 WS
- 🇸🇪 GOBLIRSCH

Association and networks

- 🇪🇺 HOPE - RSCN - IFIC - EUREGHA - MEDTECH EUROPE

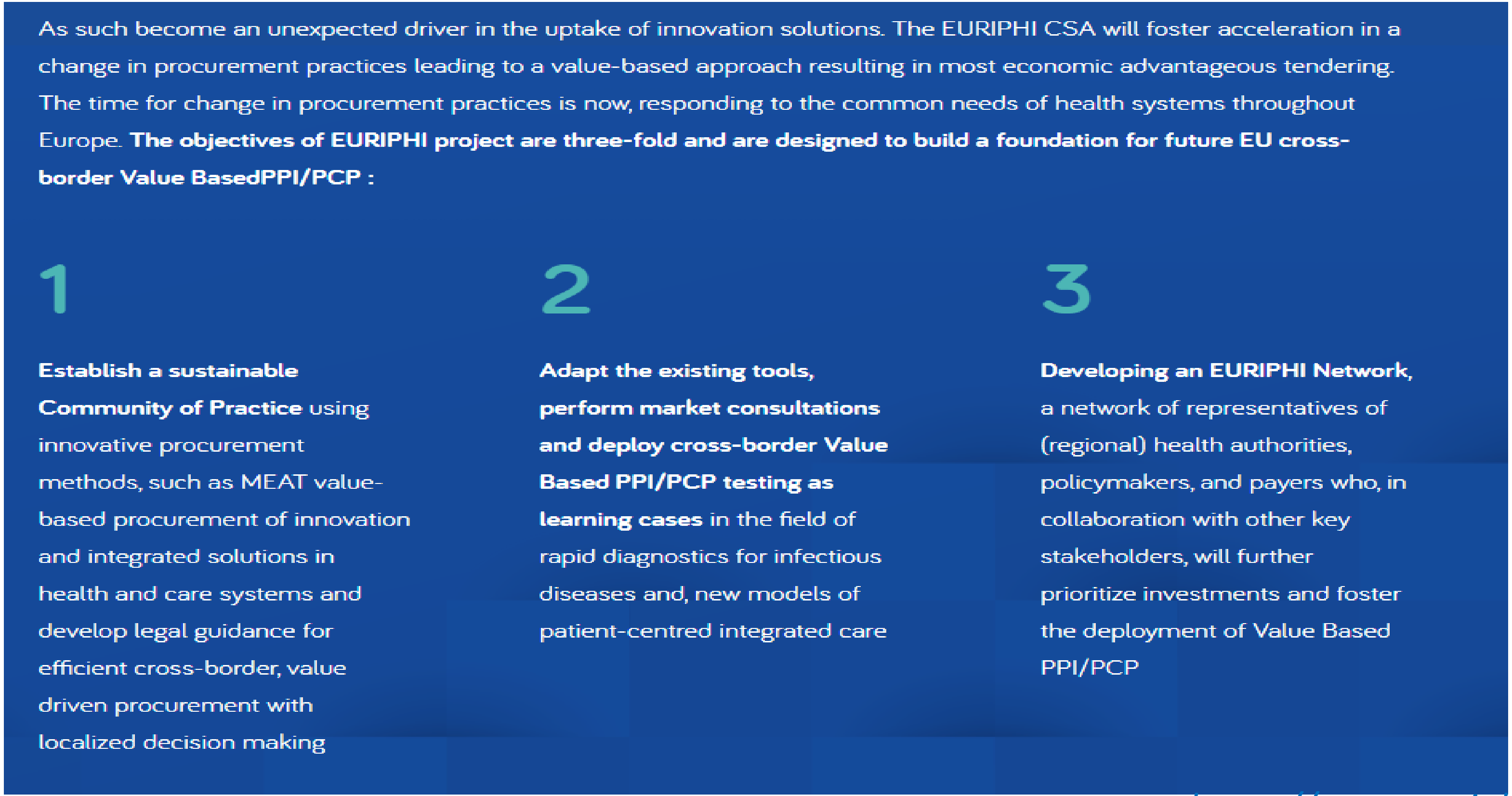
Research organization

- 🇪🇸 UVEG
- 🇧🇪 UA
- 🇮🇹 FDG

2. Iniciativas “macro” en Europa

euriphi

3 Objetivos:



As such become an unexpected driver in the uptake of innovation solutions. The EURIPHI CSA will foster acceleration in a change in procurement practices leading to a value-based approach resulting in most economic advantageous tendering. The time for change in procurement practices is now, responding to the common needs of health systems throughout Europe. **The objectives of EURIPHI project are three-fold and are designed to build a foundation for future EU cross-border Value BasedPPI/PCP :**

1

Establish a sustainable Community of Practice using innovative procurement methods, such as MEAT value-based procurement of innovation and integrated solutions in health and care systems and develop legal guidance for efficient cross-border, value driven procurement with localized decision making

2

Adapt the existing tools, perform market consultations and deploy cross-border Value Based PPI/PCP testing as learning cases in the field of rapid diagnostics for infectious diseases and, new models of patient-centred integrated care

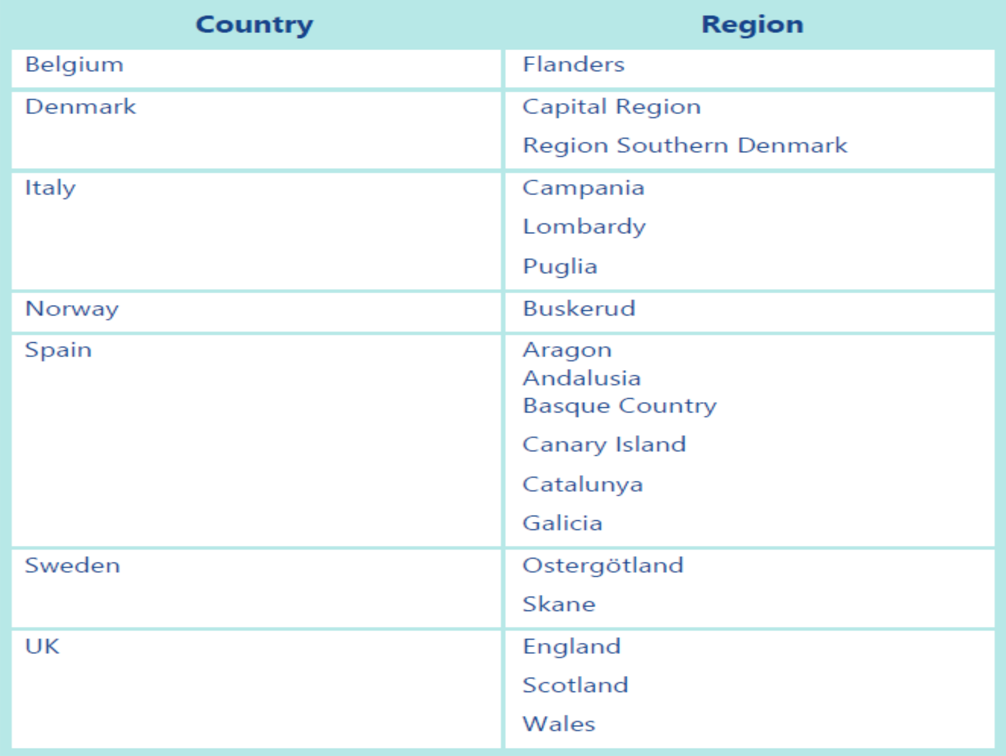
3

Developing an EURIPHI Network, a network of representatives of (regional) health authorities, policymakers, and payers who, in collaboration with other key stakeholders, will further prioritize investments and foster the deployment of Value Based PPI/PCP

https://www.euriphi.eu/

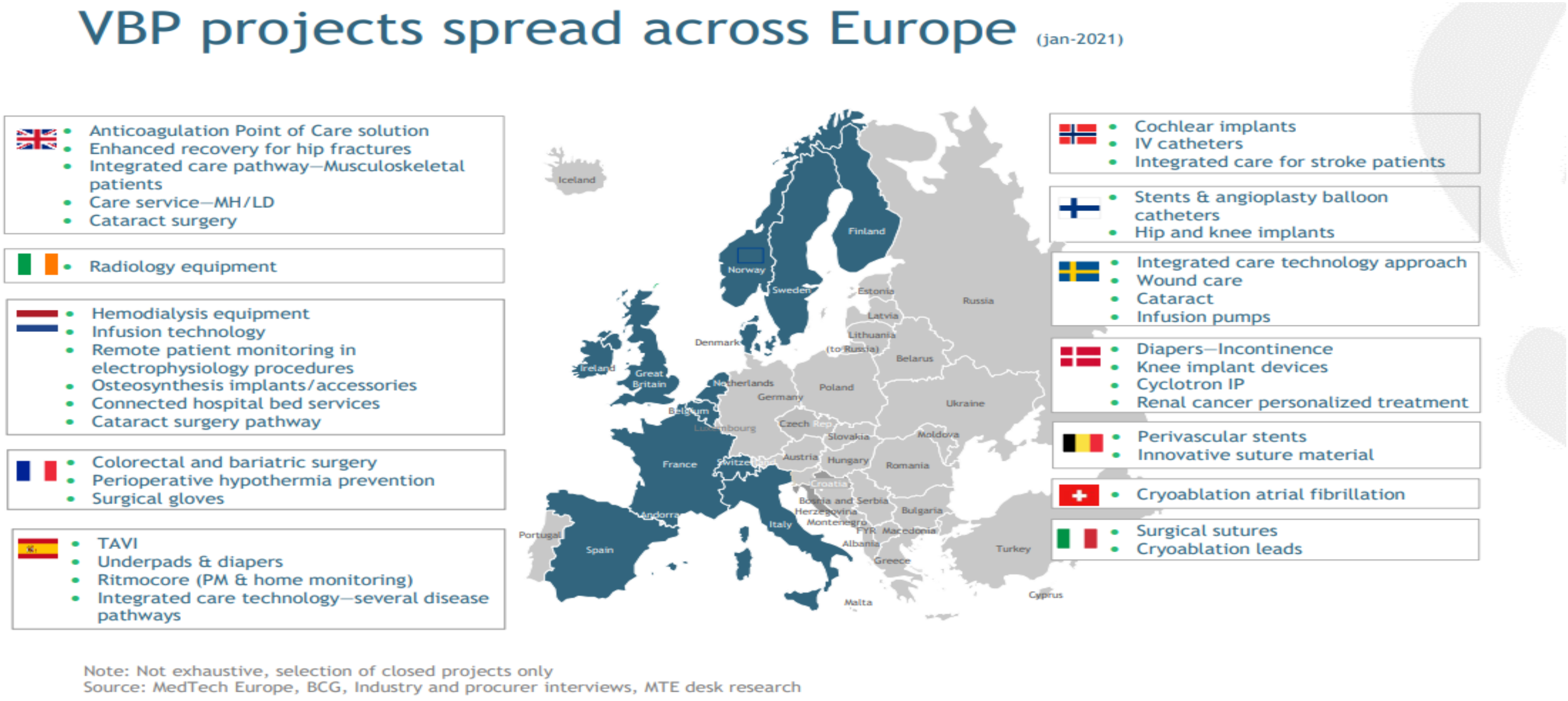
2. Iniciativas “macro” en Europa

EURIPHI & EUREGHA: Regiones de EU preparadas para VBP-PPI



Country	Region
Belgium	Flanders
Denmark	Capital Region Region Southern Denmark
Italy	Campania Lombardy Puglia
Norway	Buskerud
Spain	Aragon Andalusia Basque Country Canary Island Catalunya Galicia
Sweden	Ostergötland Skane
UK	England Scotland Wales

3. Ejemplos de caso en Europa



VBP projects spread across Europe (jan-2021)

🇬🇧
- Anticoagulation Point of Care solution
- Enhanced recovery for hip fractures
- Integrated care pathway—Musculoskeletal patients
- Care service—MH/LD
- Cataract surgery

🇮🇪
- Radiology equipment

🇳🇱
- Hemodialysis equipment
- Infusion technology
- Remote patient monitoring in electrophysiology procedures
- Osteosynthesis implants/accessories
- Connected hospital bed services
- Cataract surgery pathway

🇫🇷
- Colorectal and bariatric surgery
- Perioperative hypothermia prevention
- Surgical gloves

🇪🇸
- TAVI
- Underpads & diapers
- Ritmocore (PM & home monitoring)
- Integrated care technology—several disease pathways

🇳🇴
- Cochlear implants
- IV catheters
- Integrated care for stroke patients

🇫🇮
- Stents & angioplasty balloon catheters
- Hip and knee implants

🇸🇪
- Integrated care technology approach
- Wound care
- Cataract
- Infusion pumps

🇩🇰
- Diapers—Incontinence
- Knee implant devices
- Cyclotron IP
- Renal cancer personalized treatment

🇧🇪
- Perivascular stents
- Innovative suture material

🇨🇭
- Cryoablation atrial fibrillation

🇮🇹
- Surgical sutures
- Cryoablation leads

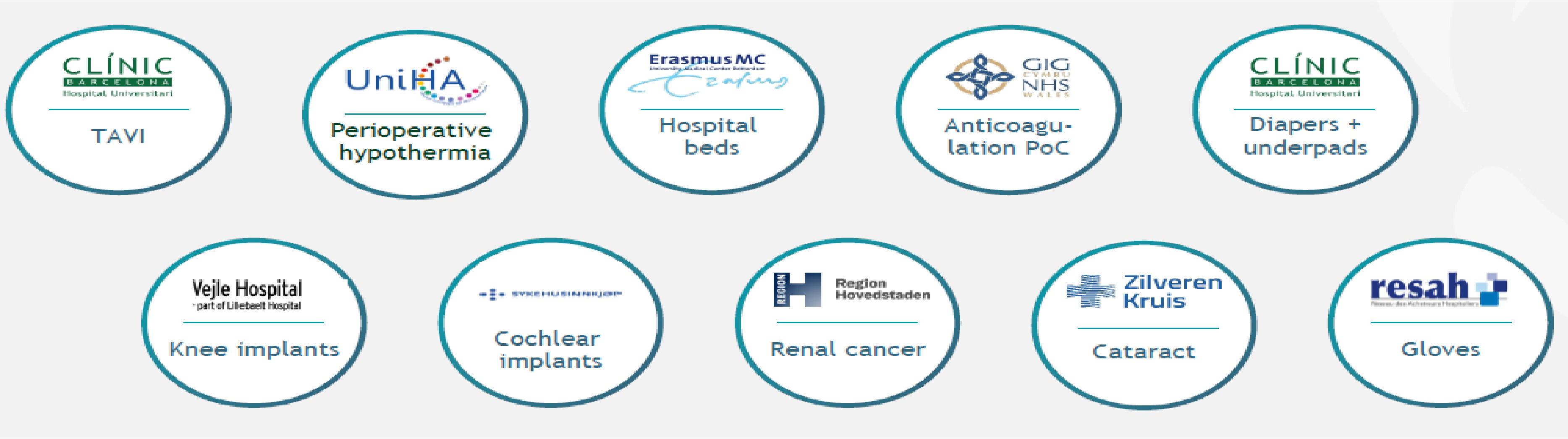
Iceland
Norway
Sweden
Finland
Estonia
Latvia
Lithuania
(to Russia)
Russia
Belarus
Denmark
Ireland
Great Britain
Netherlands
Germany
Poland
Ukraine
Belgium
Luxembourg
Czech Rep.
Slovakia
Moldova
France
Switzerland
Austria
Hungary
Romania
Croatia
Bosnia and Herzegovina
Serbia
Montenegro
Bulgaria
FYR Macedonia
Albania
Andorra
Portugal
Spain
Italy
Greece
Turkey
Malta
Cyprus

Note: Not exhaustive, selection of closed projects only
Source: MedTech Europe, BCG, Industry and procurer interviews, MTE desk research

3. Ejemplos de caso en Europa

Estudios de Caso. Beneficios/retos para:

- Compañías
- Compradores Públicos



CLÍNIC BARCELONA Hospital Universitari
TAVI

UniHA
Perioperative hypothermia

Erasmus MC
Hospital beds

GIG CYMRU NHS WALES
Anticoagulation PoC

CLÍNIC BARCELONA Hospital Universitari
Diapers + underpads

Vejle Hospital - part of Lillebaelt Hospital
Knee implants

SYKEHUSINNKJØP
Cochlear implants

Region Hovedstaden
Renal cancer

Zilveren Kruis
Cataract

resah
Gloves

Lecciones aprendidas de casos Europeos

Beneficios del VBP-PPI para **compañías (eg.)**:

La existencia de VBP **promueve y premia** el desarrollo de **innovación** y se compensa económicamente, es un valor asegurado

- Productos innovadores **nuevos** y Reconocimiento amplio del valor de la innovación (Ej. Medios de comunicación, premios, etc)
- Se refuerza el reconocimiento del valor añadido de productos **ya existentes** (Ej. Pañales asociados a menos infecciones adquiridas en el hospital)

Generación de **ingresos a largo plazo** a través de la colaboración

- **Contrato** de servicios a **largo plazo** (Ej. Servicio de camas de hospital conectadas durante 15 años).
- Posibles beneficios económicos (**ahorros en coste**) adicionales largo plazo (Ej. Solución TAVI innovadora, reduce tasa de complicaciones en HCB).

Se reduce la duración del ciclo de I+D y existe un **co-desarrollo** con los usuarios finales

- Canal de I+D adaptado a las necesidades clínicas.
- Soluciones desarrolladas y perfeccionadas de acuerdo los puntos débiles identificados por los clínicos.
- Colaboración con centros de excelencia.

Colaboración con proveedores para la **co-creación de evidencia**

- Evidencia co-creada **en el mundo real**.
- **Aumento en la experiencia/el dominio** de la medición de resultados.
- Información sobre los **puntos débiles** del producto

Lecciones aprendidas de casos Europeos

Retos del VBP-PPI para **compañías**:

Insuficiente atención a un modelo de ventas centrado en el valor

- **Mentalidad interna** y configuración del proceso de ventas hacia un enfoque de producto **tradicional**
- El **equipo de ventas** no esta familiarizado o **no sabe plantear la oferta en base al valor**

Insuficiente experiencia y capacitación de VBP

- En muchas empresas de tecnología médica, los **empleados** de los distintos departamentos aún **no están formados** ni tienen experiencia en VBP y no comprenden el valor de participar en un proyecto de licitación de VBP.
- **Se carece de experiencia y preparación** para un **proceso de licitación** VBP (las **empresas más pequeñas**)

Falta de evidencia para la propuesta de valor

- **Falta** de una "propuesta de valor" específica para las cohortes de pacientes diana.
- Los proveedores frecuentemente aún **no han establecido un modelo** operativo coste-efectivo y específico para **generar evidencia** del **mundo real** específica para cada cliente (sistema de salud o los contextos de los clientes).

Alineación interna insuficiente entre funciones

- La licitación de VBP a menudo se retrasa debido a la obtención de **procesos administrativos** de aprobación **lentos** dentro de la compañía (a veces requieren tiempo).
- Insuficiente atención por parte de los departamentos de gestión para llevar a cabo VBP. (Ej. Falta de respaldo **por la alta dirección**)

Lecciones aprendidas de casos Europeos

Beneficios del VBP-PPI para **compradores públicos y proveedores**:

Mejor resultado en salud para los pacientes

- **Resultado** de salud más **transparente y accesible**.
- **Mejora continua** y más efectiva de la solución, con el apoyo del proveedor.
- **Tratamiento personalizado** de los pacientes en función de sus necesidades.

Reducción del coste total de la atención

- **Menos complicaciones** (Ej. El implante TAVI reduce las complicaciones neurológicas en un 3%).
- **Flujo de trabajo** y proceso de atención **optimizados.** (Ej. reduce la necesidad de documentación en papel).
- El alto volumen de cirugías realizadas **disminuye el coste del procedimiento por paciente**.

Desarrollo de un modelo de **atención centrada en el paciente**

- Mejor atención centrada en el paciente debido a la **liberación de tiempo del profesional**. (Ej. El tiempo de la enfermera para atender al paciente aumentó en Erasmus MC debido a que se dedica menos tiempo a la monitorización del paciente).

Mejora de la **sostenibilidad** financiera a largo plazo

- Se puede **cambiar la partida del presupuesto** para compra de equipos a costes operativos.
- **Menor coste a largo plazo** ya que VBP es flexible y adaptable a las necesidades cambiantes. (Ej. Cuando Erasmus MC experimenta un cambio en las necesidades de atención médica en su población de pacientes, el proveedor de tecnología médica adapta las características de las camas a éstas necesidades).
- **Garantía de ingresos para compra a largo plazo**, ya que se puede hacer un contrato de compra mayor duración.

Lecciones aprendidas de casos Europeos

Retos del VBP-PPI para **compradores públicos y proveedores**:

Demanda de tiempo y recursos alta

- La **planificación y ejecución** del proceso de licitación, así como la selección de criterios durante la fase de consulta al mercado requiere de **mucho tiempo** y de personal.

Resistencia interna debido a la incertidumbre del valor

- En muchos de los **hospitales**, las partes interesadas (Ej. Dept compras y médicos) **trabajan en silos**, lo que hace que los compradores carezcan de conocimientos sobre los puntos críticos y las necesidades clínicas.

- Los **médicos también desconocen el proceso** de licitación y compra y, por lo tanto, no pueden apreciar el valor de la licitación MEAT VBP.

Preparación insuficiente de los proveedores

- Muchos proveedores aún no están listos

- Ofertas de las compañías y la evidencia de sus soluciones no son suficientemente específicas para el entorno hospitalario, sus puntos débiles y las cohortes de pacientes.

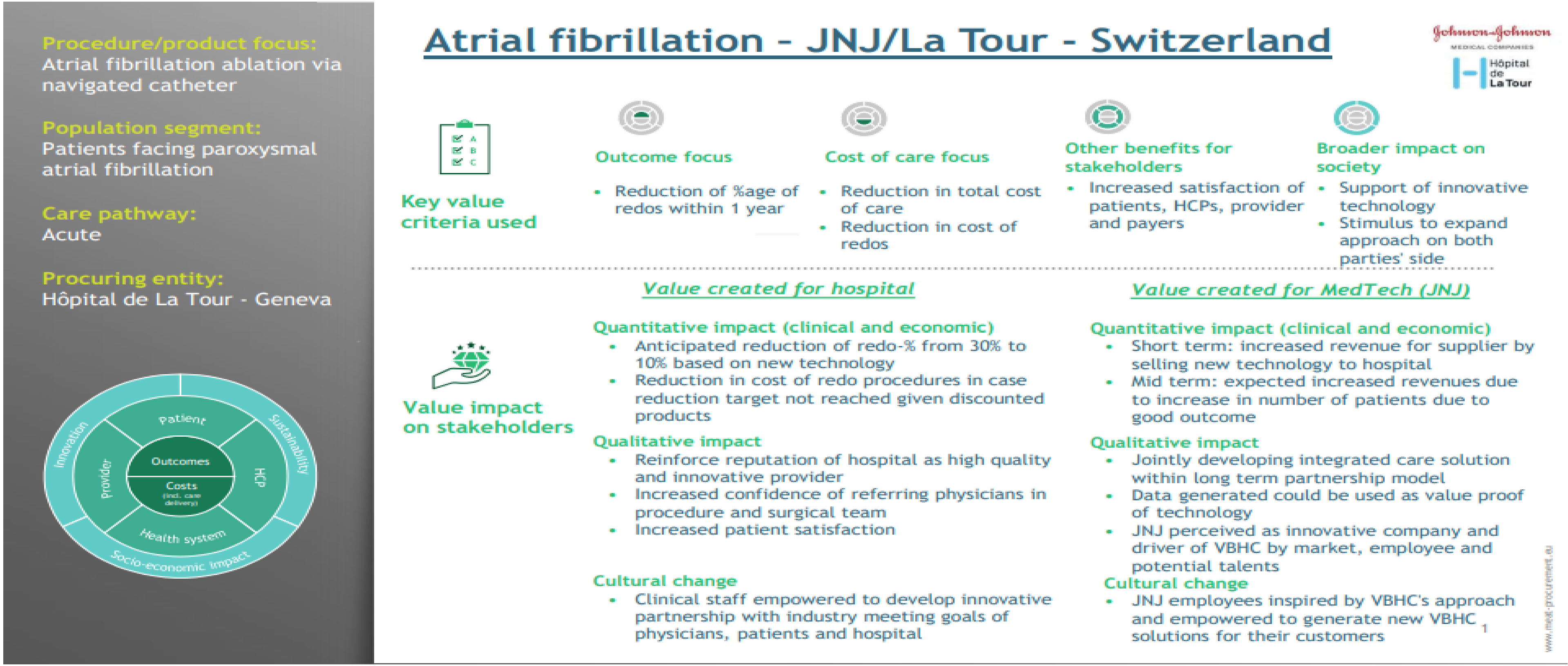
Pruebas sobre el valor insuficientemente específicas

- La **evidencia** no suele ser lo suficientemente específica para el **contexto** hospitalario.

- **Falta de datos sobre necesidades no cubiertas/debilidades y** de la infraestructura necesaria para medir resultados específicos.

- La información sobre los **costes asociados** del proceso de atención es **difícil de obtener**, desafío para conocer el rendimiento de una VBP en el hospital

3. Ejemplos de caso en Europa



Procedure/product focus:
Atrial fibrillation ablation via navigated catheter

Population segment:
Patients facing paroxysmal atrial fibrillation

Care pathway:
Acute

Procuring entity:
Hôpital de La Tour - Geneva

Patient
Outcomes
Costs (incl. care delivery)
Provider
HCP
Health system
Innovation
Sustainability
Socio-economic impact

Atrial fibrillation - JNJ/La Tour - Switzerland

Johnson & Johnson MEDICAL COMPANIES
Hôpital de La Tour

Key value criteria used

Outcome focus
- Reduction of %age of redos within 1 year

Cost of care focus
- Reduction in total cost of care
- Reduction in cost of redos

Other benefits for stakeholders
- Increased satisfaction of patients, HCPs, provider and payers

Broader impact on society
- Support of innovative technology
- Stimulus to expand approach on both parties' side

Value impact on stakeholders

Value created for hospital

Quantitative impact (clinical and economic)
- Anticipated reduction of redo-% from 30% to 10% based on new technology
- Reduction in cost of redo procedures in case reduction target not reached given discounted products

Qualitative impact
- Reinforce reputation of hospital as high quality and innovative provider
- Increased confidence of referring physicians in procedure and surgical team
- Increased patient satisfaction

Cultural change
- Clinical staff empowered to develop innovative partnership with industry meeting goals of physicians, patients and hospital

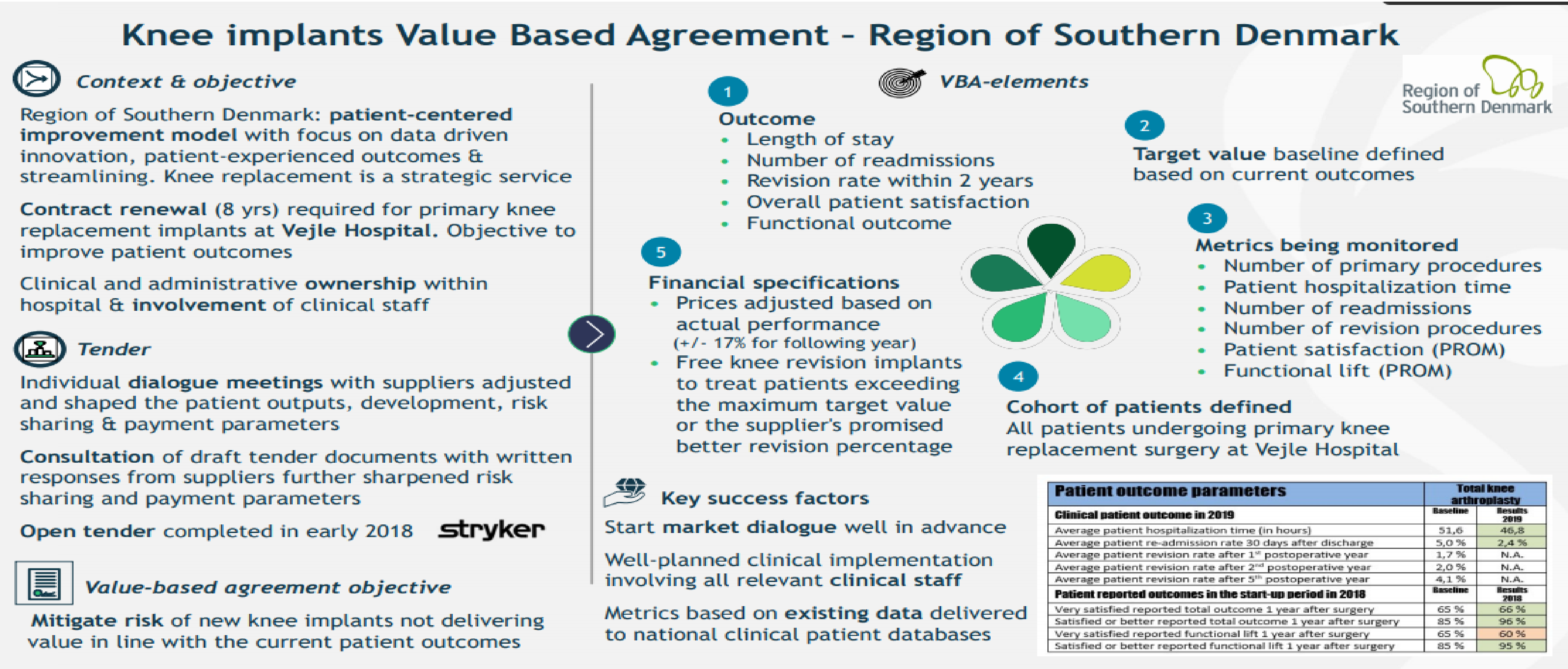
Value created for MedTech (JNJ)

Quantitative impact (clinical and economic)
- Short term: increased revenue for supplier by selling new technology to hospital
- Mid term: expected increased revenues due to increase in number of patients due to good outcome

Qualitative impact
- Jointly developing integrated care solution within long term partnership model
- Data generated could be used as value proof of technology
- JNJ perceived as innovative company and driver of VBHC by market, employee and potential talents

Cultural change
- JNJ employees inspired by VBHC's approach and empowered to generate new VBHC solutions for their customers

3. Ejemplos de caso en Europa



Knee implants Value Based Agreement - Region of Southern Denmark

Region of Southern Denmark

Context & objective

Region of Southern Denmark: **patient-centered improvement model** with focus on data driven innovation, patient-experienced outcomes & streamlining. Knee replacement is a strategic service

Contract renewal (8 yrs) required for primary knee replacement implants at **Vejle Hospital.** Objective to improve patient outcomes

Clinical and administrative **ownership** within hospital & **involvement** of clinical staff

Tender

Individual **dialogue meetings** with suppliers adjusted and shaped the patient outputs, development, risk sharing & payment parameters

Consultation of draft tender documents with written responses from suppliers further sharpened risk sharing and payment parameters

Open tender completed in early 2018 stryker

Value-based agreement objective

Mitigate risk of new knee implants not delivering value in line with the current patient outcomes

VBA-elements

1

Outcome
- Length of stay
- Number of readmissions
- Revision rate within 2 years
- Overall patient satisfaction
- Functional outcome

2

Target value baseline defined based on current outcomes

3

Metrics being monitored
- Number of primary procedures
- Patient hospitalization time
- Number of readmissions
- Number of revision procedures
- Patient satisfaction (PROM)
- Functional lift (PROM)

4

Cohort of patients defined
All patients undergoing primary knee replacement surgery at Vejle Hospital

5

Financial specifications
- Prices adjusted based on actual performance (+/- 17% for following year)
- Free knee revision implants to treat patients exceeding the maximum target value or the supplier's promised better revision percentage

Key success factors

Start **market dialogue** well in advance

Well-planned clinical implementation involving all relevant **clinical staff**

Metrics based on **existing data** delivered to national clinical patient databases

Patient outcome parameters	**Total knee arthroplasty**	
Clinical patient outcome in 2019	**Baseline**	**Results 2019**
Average patient hospitalization time (in hours)	51,6	46,8
Average patient re-admission rate 30 days after discharge	5,0 %	2,4 %
Average patient revision rate after 1st postoperative year	1,7 %	N.A.
Average patient revision rate after 2nd postoperative year	2,0 %	N.A.
Average patient revision rate after 5th postoperative year	4,1 %	N.A.
Patient reported outcomes in the start-up period in 2018	**Baseline**	**Results 2018**
Very satisfied reported total outcome 1 year after surgery	65 %	66 %
Satisfied or better reported total outcome 1 year after surgery	85 %	96 %
Very satisfied reported functional lift 1 year after surgery	65 %	60 %
Satisfied or better reported functional lift 1 year after surgery	85 %	95 %

2nd Conference VBP Europe, 1st December 2020 (on-line)

Supporting partners

EHPPA eüregha MedTech Europe from diagnosis to cure

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