



Changes to HERC statute

Senate Bill 1508 (2024) Overview

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Bill overview

- SB 1508 (2024) goes into effect January 1, 2025
- Prohibits use of ‘Quality of Life in general measures’ (QALYs and similar measures) by HERC and OHP in utilization management
 - Can redact from studies if certain measures are taken
- Requires HERC to meet in public (no executive session) and follow public meeting law
- Not contract with a single evidence vendor and allow public input on selection of evidence vendors
- Adds language about research practice (outcomes and evidence)

QoL is not QALYs

■ Quality of Life (QoL)

- These are self-reported patient-important health outcomes
- Measurements that assess a person's perception of their own condition and well-being
- Common areas of focus in clinical effectiveness research include:
 - Functional status
 - Psychological or emotional state
 - Symptom management
 - Pain
- Commonly used important outcome for effectiveness; not addressed by the bill

What are QALYs?

- **Quality Adjusted Life Year (QALY)**
 - Measurement that combines both quality of life and duration of life after a medical service
 - QALYs allow for comparison of cost effectiveness across different health interventions
 - When used without proper caution, QALYs can and do result in lower scores for anyone who will not return to a baseline of “perfect health” (e.g., older people and people with disabilities)

Concerns about QALYs & HERC

- QALYs use broad population survey data about the perceived impact of disability
- Uses a single number for conditions with highly variable health impact
- Can be used in ways that are discriminatory
 - Values services that improve health/reduce disability over many years
 - Value a year without disability more than one with disability, on average
- Prioritized List used a similar concept to rank lines
- Analysis of recent uses of QALYs showed that in most cases they supported expanding coverage (see [October 2022 HERC meeting materials](#) p. 231)

Implementing SB 1508 at HERC

■ Redact, report, insulate

- Redact QALYs from research articles included in meeting materials
- Do not reference or rely upon QALYs for staff summaries and recommendations
- Report on past references to QALYs; address any discrimination/equity issues we uncover

Implementing SB 1508 at HERC

- **Contracting with vendors**
 - Requires HERC to contract with more than one evidence vendor
 - Plan to contract with an equity consultant to meet this requirement

- **Disabilities Health Advisory Panel will begin meeting in 2025**

Research practice requirements

- **Engrossed Senate Bill 1508 (2024), Section 4:**

[The HERC] “must evaluate a range of research and analysis, including peer-reviewed medical literature that: (A) Studies health outcomes that are priorities for persons with disabilities who experience specific diseases or illnesses, through surveys or other methods of identifying priority outcomes for individuals who experience the diseases or illnesses; (B) Studies subgroups of patients who experience specific diseases or illnesses, to ensure consideration of any important differences and clinical characteristics applicable to the subgroups; and (C) Considers the full range of relevant, peer-reviewed medical literature and avoids harm to patients caused by undue emphasis on evidence that is deemed inconclusive of clinical differences without further investigation.” (ORS 414.701(2)(a)(A-C))

Disability Health Advisory Panel (DHAP)

- In preparation for next year's advisory panel, staff will:
 - Hold several listening sessions in summer/fall of 2024
 - Recruit DHAP members, with majority being people with disabilities
 - Draft charter and meeting structure



Questions?