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Decision-Relevant Early Health Economic Modelling to Inform Development and Investment in Emerging Health Technologies

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Moving HEOR modelling upstream to shape policy, access, and value

Conflict-of-interest slide

- No external funding
- No conflicts of interest relevant to this presentation

Why EHEM matters especially in MedTech, diagnostics, and digital health

- Higher uncertainty
- Smaller firms, tighter resources
- Often dependent on external investment
- Positioning decisions still open



Diagnostics

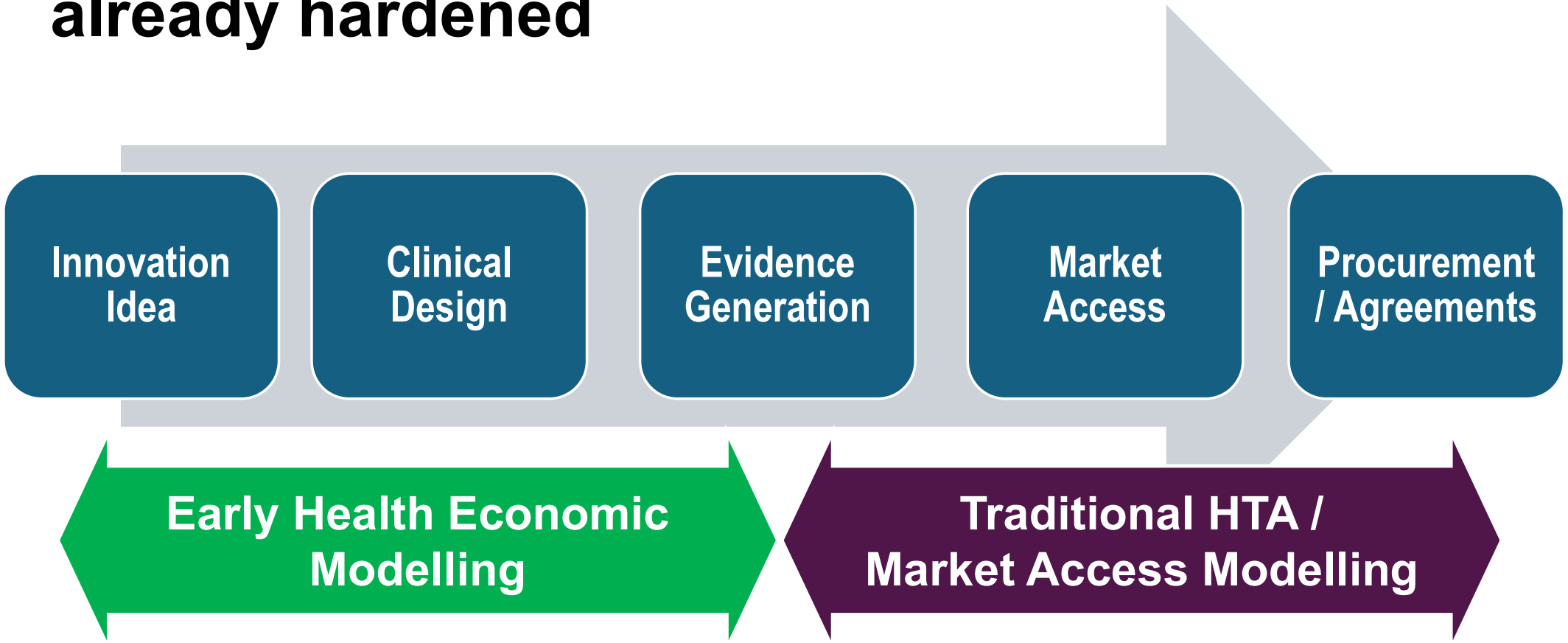


Medical devices



Digital health

Too often, HEOR enters after the path has already hardened



Why are we not at the table earlier?

Not because...

- uncertainty is too high
- methods are missing

HEOR is seen as...

- late-stage validation
- cost justification
- final hurdle

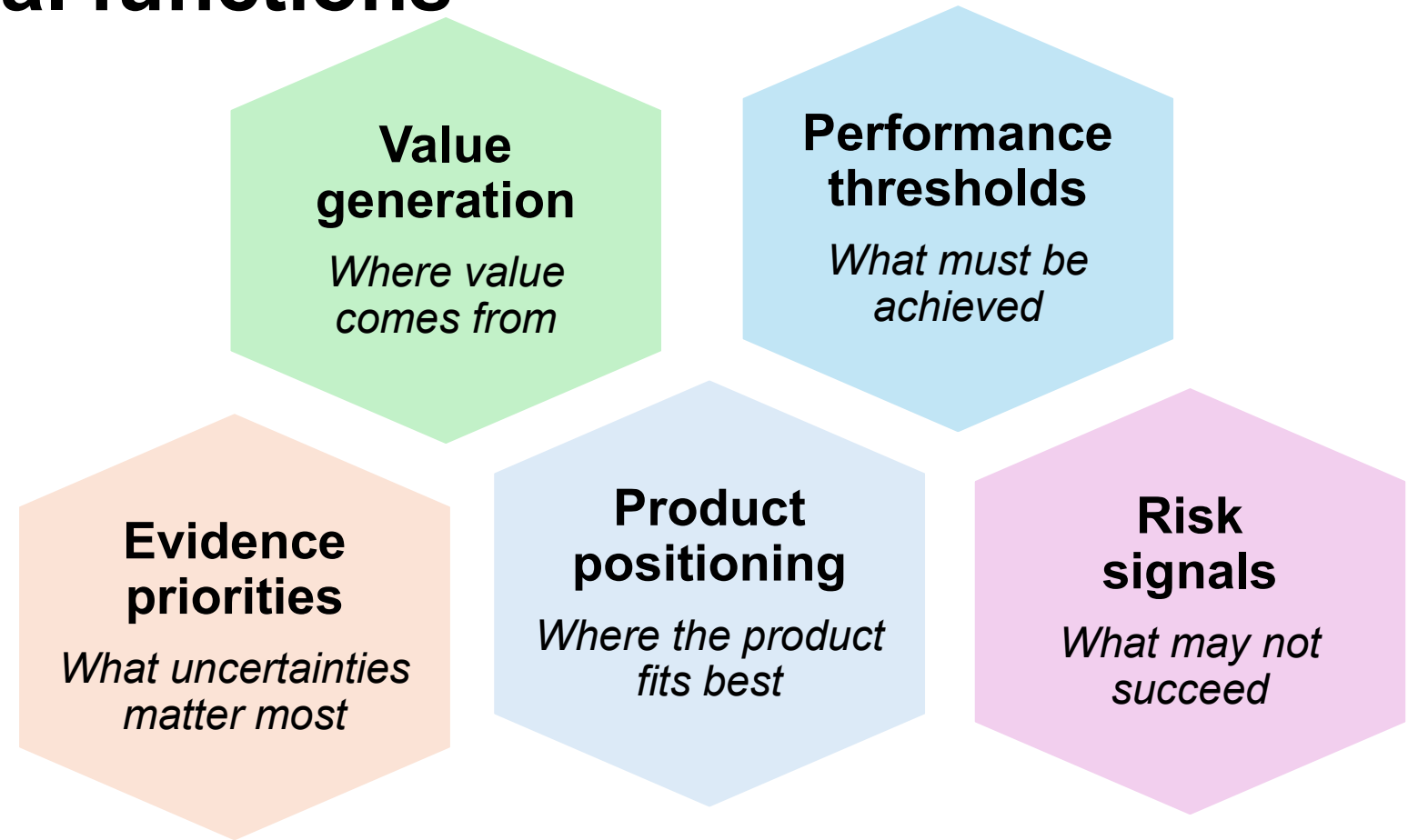
To matter earlier, HEOR must be positioned as decision support under uncertainty.

EHEM is decision support under uncertainty — not early reimbursement modelling

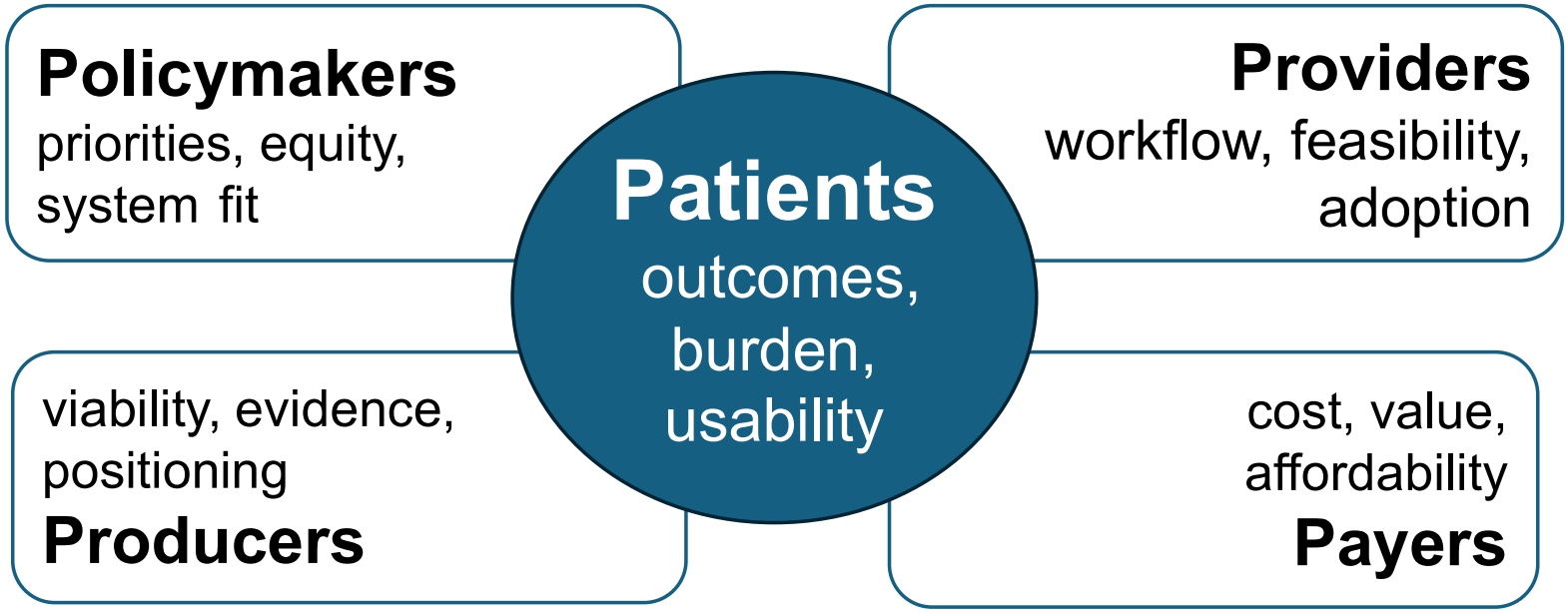
Traditional HTA modelling	Early Health Economic Modelling
Validates decisions	Shapes decisions
Enters late	Enters early
Works with mature evidence	Works with uncertainty
Complexity	Fit-for-purpose
Supports access	Guides development
“**Is it cost-effective?**”	“**What must be true to create value?**”

EHEM helps shape decisions before the path hardens.

Across domains, EHEM delivers five decision-critical functions



Value must be defined across all 5Ps



Early modelling makes value explicit across stakeholders — enabling earlier dialogue and alignment.

EHEM helps decide where to invest, where to reposition, and where to stop



Continue

Credible value potential

fit · thresholds · evidence



Redirect

Refine positioning or design

indication · pathway · use case



Stop

Unlikely to succeed

risk · misalignment · weak value

The real barrier is not methods — it is mindset and discomfort with uncertainty

Late mindset

HEOR seen as a downstream task

Sparse evidence

Limited early data

Uncertainty discomfort

False need for precision

Uncertainty is not the weakness of early modelling.

It is the reason early modelling is needed.

We already have the tools

Medical Decision Making

- Acts **early under uncertainty**
- Uses **best available evidence**
- Accepts **imperfect information**
- Focus: **make a decision now**

HEOR Modelling (today)

- Often applied **late in the pathway**
- Seeks **high methodological rigor**
- Waits for **more complete evidence**
- Focus: **validate decisions already made**

We don’t need new methods — we need to apply them earlier and more pragmatically

Understand the river before building the bridge



Need
Do we need this bridge at all?

Positioning
Where should it stand to create the highest value and access?

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HEOR at the Forefront of Policy, Access, and Value



If we want HEOR at the forefront of policy, access, and value, **we need to show our value before the bridge is planned - by helping others understand the river.**

Interested in more?



Webinar Recording: Defining Value Upstream: A Canadian Success Story in Early Modeling

https://www.ispor.org/conferences-education/event/2026/04/01/default-calendar/defining-value-upstream--a-canadian-success-story-in-early-modeling





Manuscript: Early health economic modelling in innovative health technologies: a framework for early decision-making

https://doi.org/10.1016/j.hlpt.2026.101203