ICER Opens Nominations for New Members of Its Voting Panels

--- Independent panel members debate the evidence on the effectiveness and value of new drugs and other health care interventions at ICER public meetings ---

BOSTON, December 2, 2020 - The Institute for Clinical and Economic Review (ICER) is seeking nominations for new members to join its independent evidence review groups:

- The California Technology Assessment Forum (CTAF)
- The Midwest Comparative Effectiveness Public Advisory Council (Midwest CEPAC)
- The New England Comparative Effectiveness Public Advisory Council (New England CEPAC)

These bodies are composed of leading clinicians, patient and public representatives, methodologists, and health economists. Each group convenes three to four times per year at public meetings to discuss ICER evidence reports, hear input from stakeholders, and vote on the strength of evidence on the effectiveness and value of new drugs, devices, and delivery system innovations.

Prospective nominees should have familiarity with the interpretation and application of medical evidence in health care delivery. This may include (but is not limited to) training in fields such as clinical epidemiology, health services research, or health economics, or experience in public health administration, consumer/patient engagement, or policy efforts to improve access to health care.

ICER is not looking specifically for members who have clinical expertise in topic areas that will be studied in upcoming reports. While expertise in a specific topic area would not disqualify a candidate, we strive to maintain the objectivity of each group and to ground the conversation in the interpretation of the available evidence rather than anecdotal experience or expert opinion alone.

ICER's reports review a broad range of treatments and interventions; in the last year, the three panels have reviewed and deliberated over several ICER assessments, on topics including therapies for acute migraine, cystic fibrosis, hemophilia A, and ulcerative colitis. Learn more about ICER's evidence and value assessment methods here.

To reduce the influence of possible conflicts of interest, prospective nominees cannot be directly involved in making medical policy decisions for any state health agency, or be employees of any private insurer or life sciences industry company. Candidates cannot have substantial financial interests in the health care industry, defined as more than $25,000 in health care company stock, honoraria, or consultancy income from any one health care manufacturer or insurer, or more than $50,000 in combined assets from multiple health care manufacturers and insurers. All members will be required to complete conflict of interest forms before each meeting and may be asked to recuse themselves from voting if there is a potential influence on judgment related specifically to the topic under review.

All members are eligible for travel reimbursement and an honorarium for each meeting attended.

All nominations should be submitted to ICER on or before **January 19, 2021 at 5 pm ET**. We will interview nominees by phone, and the final selection will be completed shortly thereafter. To apply, please email a CV and letter of interest to info@icer-review.org. Nomination by sponsoring organizations and self-nominations are both welcome.

About ICER

The Institute for Clinical and Economic Review (ICER) is an independent non-profit research institute that produces reports analyzing the evidence on the effectiveness and value of drugs and other medical services. ICER's reports include evidence-based calculations of prices for new drugs that accurately reflect the degree of improvement expected in long-term patient outcomes, while also highlighting price levels that might contribute to unaffordable short-term cost growth for the overall health care system.

ICER's reports incorporate extensive input from all stakeholders and are the subject of public hearings through three core programs: the California Technology Assessment Forum (CTAF), the Midwest Comparative Effectiveness Public Advisory Council (Midwest CEPAC), and the New England Comparative Effectiveness Public Advisory Council (New England CEPAC). These independent panels review ICER's reports at public meetings to deliberate on the evidence and develop recommendations for how patients, clinicians, insurers, and policymakers can improve the quality and value of health care. For more information about ICER, please visit ICER's website.