**Annex I: Standardized checklist used for each model input including costs**

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| **1. Name of the Input**  | **State the name and provide following info:** |
| 1.1. Source | List the full reference of the study. If possible, add the web link.If the source is unpublished or the value comes from your own analysis, you must indicate so here |
| 1.2 Input value(s) | Indicate the base value in bold and provide all other values suggested for sensitivity analyses. If there is more than one value, add a table with all input details. |
| **2. How was the value obtained?** | **Please provide info on the following:** |
| 2.1 Target population/sub-group | Describe characteristics of the population and/or sub-groups from which the above value was obtained (i.e. age, sex, etc.). |
| 2.2 Setting and location | Where was the study from which you have obtained the above value conducted? What were characteristics of (healthcare) system in that setting? If it is not possible to find this information in the source material, state ‘not found’  |
| 2.3 Perspective | State whether the source study state any perspective, e.g. healthcare, societal, etc. If not applicable, state ‘NA’ |
| 2.4 Interventions and comparators  | Is the above input related to an intervention and comparator? Describe those as in the source material. If not applicable, state ‘NA’. |
| 2.5 Time horizon | State the time horizon related to the above input in the source material. If not applicable, state ‘NA’. |
| 2.6 Discount rate | State discount rate as applied in the source material. If not applicable, state ‘NA’. |
| 2.7 Choice of outcome | State how the source material chose (health or other relevant) outcomes or methods used to derive/calculate outcomes to estimate the above value? Specify the unit time of the input. If not applicable, state ‘NA’.  |
| 2.8 Measuring outcome | How was the outcome measured in the source material? Was it based on a single outcome or synthetic estimate? Was the outcome measured using preference-based method? If yes to one or more, provide details. If not applicable, state ‘NA’. |
| 2.9 Year | In which year was the source study was conducted? Does the input value reflect the same year or different year (specify)?  |
| 2.10 Conversion | Was any conversion involved in deriving the above value? If yes, describe method of conversion.If no, state, ‘NA’ (i.e. exchange rate, inflation, etc.). |
| 2.11 (Statistical) model  | Was the above value calculated using any (statistical) model? If yes, describe method of analysis. Include the following:* How was the skewed, missing or censored data handled in the source material?
* How was extrapolation done (if any)?
* What statistical technique (e.g. ANOVA, OLS, Logistic regression, etc.) was used?
* How was the uncertainty measured, e.g. via 95% confidence interval?

If no, describe the non-model based calculation method.  |
| **3. Assumptions** | **List all assumptions underpinning the above value, as described in the source materials.**  |
| **4. Limitations** | **List all important limitations of source materials.**  |
| **5. Transferability** | **Is there anything from the source material that may have implications in relation to applying/generalizing the value to EQUIPT countries?**  |
| **6. Conflict of interest** | **Look at the Conflict of Interest section in the source material and identify if there is anything that we should be aware of in using the above input value in this project (e.g. the value comes from pharma-sponsored study).**  |

Source: The EQUIPT Study Group (2016). EQUIPTMOD Technical Annex. Available from: <http://equipt.eu/deliverables>

**Annex II: An example of standardized method adopted to cost pharmacotherapy (varenicline standard duration, England, £)**

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| **Step**  | **Detail** | **Reference** |
| 1. Specify the intervention | *The intervention specification was finalized by the study team.*0.5 mg twice daily for 1 week and then 1mg twice daily for 11 weeks | [47] |
| 2. Calculate the amount of the medication based on its packages\*  | *An assumption of how the medication was dispensed was made. It was assumed that a full course of treatment would be given on a single prescription, to obtain the cost estimate that would reflect full implementation of the intervention.* 1) One 56-tablet package of 0.5 mg 0.5 mg x 2 tablets x 7 days = 14 tablets 0.5 mg x 4 tablets x 10.5 days = 42 tablets2) Two 56-tablet packages of 1 mg 1 mg x 2 tablets x 56 days = 112 tablets 3) One 28-tablet package of 1 mg 1 mg x 2 tablets x 10.5 days = 21 tablets  |  |
| 3. Obtain the price per package | *The information was obtained from a national formulary, national statistics/databases, or expert opinion.*0.5 mg (white): a 56-tablet package = £54.601 mg (blue): a 28-tablet package = £27.30 and a 56-tablet package = £54.60 | [43] |
| 3. Calculate the price of the medication | *The amount the packages was multiplied by a unit price of a package* (1 package \*£54.6)+(2 packages \*£54.6)+(21 tablets /28 tablets \*£27.3)= £184.275 |  |
| 4. Average the price with other dosage forms by weighting with the use of such dosage form | Not applicable for varenicline |  |
| 5. Add a one-time general practitioner cost for a prescription | £7.60  | [90]  |
| 6. Estimate the final cost | = £191.875\* |  |

\*This is in Sterling (£) and therefore differs from the € figure provided in Table 3.