HTAi 2024 Annual Meeting Seville Abstract Submission Guidelines

A Turning Point for HTA? Sustainability, Networks and Innovation

Researchers, agencies, policy makers, industry, academia, health service providers and patients/consumers meet to build international cooperation and to face new challenges together.

Health Technology Assessment international (HTAi) is the global scientific and professional society for everyone who produces, uses or encounters Health Technology Assessment (HTA) to support optimal policy and decision making. Its mission is to support the growth of the HTA community by providing a neutral, global forum for the exchange of information, methods, and expertise. With members from over 60 countries and across six continents, HTAi is a thriving global network.

Our members regularly participate in Annual Meetings, Policy Fora and Interest Groups. HTAi also provides access to a variety of resources including the International Journal of Technology Assessment in Health Care (IJTAHC).

HTAi supports national and regional initiatives for countries embarking on implementing HTA programs and works to connect members with common interests.

The Board of Directors governs HTAi and is supported by an Executive Committee, several Advisory Committees, and a Secretariat.

Held each year in June, the HTAi Annual Meeting is a key international gathering for sharing latest research, advancing discussions in policy and methods, and building global networks.

2024 Annual Meeting: Overall Scientific Theme and Program

Main Theme: A Turning Point for HTA? Sustainability, Networks and Innovation
Over the past few years, the healthcare sector has undergone significant changes. Digital health solutions, personalized medicine, AI, nanotechnology, bioprinting, Big Data, and Multi-Omics are only a few examples of new technologies and innovations that have been acknowledged as potentially disruptive. These developments have created novel challenges for HTA agencies and, more than ever, their assessment will require a wide multiplicity of expertise.

HTA collaborative networks are uniquely placed to provide links between methodologists, patients, payers, clinicians, regulators, innovators, and policymakers to maximize synergies and explore opportunities to tackle emerging challenges for the health and wellbeing of people, of our society and, of course, to contribute towards sustainable development.

Unquestionably, HTAi represents the arena where HTA stakeholders can have a dialogue on the development of tools and frameworks to assess healthcare technologies and related innovations. In this context, collaboration on a global scale is crucial to achieve meaningful results on sharing of data, generation of evidence, and building of regulatory mechanisms, without neglecting ethical and legal aspects.

The HTAi 2024 Annual Meeting will focus on the opportunities and challenges for growing valuable networks for HTA and how collaboration could support the evaluation of innovative healthcare solutions through sharing.

The program will explore:

- Promoting HTA Collaboration without Borders and Method Harmonization
- Global Impact of the HTA related regulations (EU)
- Causality Considerations
- Integrating Sustainability and Sustainable Development Goals (SDGs)
- Enhancing HTA Capacity Building Initiatives for users and doers
- Examining the Value of HTA in New Ways of Paying for Innovation
- Addressing Challenges in Methods: Emerging Technologies, Multi-Omics, and Digital Solutions
- Advancing Health Equity: Frameworks and Instruments
- Links between HTA and Procurement
- Identifying the new questions for HTA

HTAi invites you to join the leading minds in HTA to discuss and debate - A Turning Point for HTA? Sustainability, Networks and Innovation

Plenary 1: Sustainable HTA For Sustainable Health Systems

Health systems around the world are grappling with the complex task of integrating technologies to meet rapidly evolving needs, while also preserving the sustainability of the health system. Sustainability, defined by the United Nations as "meeting the needs of the present without compromising the ability of future generations to meet their own needs," is central to this process. Health technology assessment (HTA) plays a critical role in evaluating the real value of technologies and ensuring that innovations align with societal goals and long-term viability. Challenges such as the rise of novel and intricate innovations, scarcity of skilled evaluators, and diverse ethical contexts are factors impacting both health system and HTA processes. In addition, as the COVID-19 pandemic has shown, the long-term resilience of health systems and their ability to withstand shocks depend on a range of factors that contribute to sustaining and achieving Universal Health Coverage (UHC).

Through lively and interactive discussion, Plenary One will explore the following:

• What does sustainability mean in a broader context and how can HTA contribute to the sustainability of health systems in an era of increased disruptive innovations and growing networks?
• How can HTA ensure sustainability within itself in the face of increasing and challenging demands from health authorities in the race towards reaching a sustainable health system?

The discussion will examine common challenges currently faced by health authorities in both developed and in-developing healthcare systems, what these systems need from HTA, and what HTA needs to be able to effectively respond. Diverse perspectives from panellists and audience members will contribute to the animated discourse.

Plenary 2: Global Collaboration For A Global Challenge: Do Meta-Networks Help?

Today's rapidly evolving healthcare landscape has given rise to new paradigms in patient care and decision-making. At the heart of this transformation lie networks—individual, jurisdictional, and global—which wield immense influence over health technology assessment (HTA) processes. This interconnectedness has the potential to expedite decision-making processes, leading to more efficient healthcare delivery and resource allocation.

Plenary Two will delve into the role and potential of global networks in fostering innovation and collaboration in HTA, and the pivotal role the play in shaping HTA methodologies and outcomes. Crucial points will be discussed, such as:

- How can international collaboration e.g., networks, address challenges facing HTA, and how does this affect the various stakeholder groups?
- How can networks facilitate sustainability and innovation in HTA globally and in regions where HTA is not well established from a policy or practical standpoint?
- Are Global "Meta-Networks" a pipe dream or a practical possibility?

The impact of networks on health technology assessment is undeniable and far-reaching. The present landscape benefits from interconnectedness, fostering collaboration and improving decision-making. This thought-provoking and captivating discussion will look to the future, to establish even greater potential, from individual to global impact.

Plenary 3: Breaking Boundaries: Unleashing Innovation In Health

Innovation in healthcare is intrinsically tied to the generation value, emphasizing its multifaceted nature. Beyond the development of novel treatments or technologies, healthcare innovation is about enhancing patient outcomes, increasing efficiency, and reducing costs. The integration of technology, data, and patient-centered health services is at the forefront of driving innovation and value in healthcare. However, realizing the full potential of innovation presents formidable challenges.

New technologies introduce complexities to health systems, impacting stakeholders such as HTA practitioners and decision-makers tasked with equitable patient care. The lexicon of healthcare innovation brims with terms like digital technologies, artificial intelligence, chatbots, blockchain, data interoperability, omics, photonics, nanotechnology, and additive manufacturing to name a few. Remarkably, these often evoke images of individual innovators or small, nimble teams. This prompts questions about their motivation and direction.

- Are healthcare systems, including patients, professionals, managers, funders, and policymakers, prepared to fully embrace innovations?
- Are traditional methods of assessing value still well-suited to deal with emerging technologies, or should we devise new ones for the myriad challenges ahead?

- Does the analysis of innovation value adequately consider core ethical and societal values?
- Is the traditional RCTs paradigm adequately suited for evaluating the specificities of emerging Medtech innovations?

These compelling inquiries will be explored in an innovative plenary session merging artificial intelligence and human expertise.

For more details, please visit the HTAi 2024 Annual Meeting website.

Abstract Submissions

HTAi invites abstract submissions for Workshops, Panels, Oral and Poster presentations for the Annual Meeting in Seville, Spain (15 – 19 June 2024).

1) Panel and Workshop Submissions

- **Panels** are designed to stimulate discussion and share learning on topics relevant to the 2024 Annual Meeting Theme and Scientific Program. The Panels are 75 minutes in duration with a moderator and **a maximum of four** panellists from different organizations presenting on the topic. HTAi strongly encourages the involvement of panel members from different perspectives and settings, particularly those focusing on or dealing with one of the three plenary topics.

- **Workshops** are designed to share innovative experiences and practices, and to provide learning opportunities for participants. They are half or full-day events that **must** include interactive activities and focus on developing participants' skills. Workshops should also contribute to HTA capacity building. When submitting a workshop abstract, submitters will be asked to indicate for whom their session will be most relevant (e.g., early career, mid-career, policy makers, industry), the level of as well as learning outcomes and interactive activities. If the proposal does not have an interactive component, submitters are strongly encouraged to submit it as a panel session instead.

2) Oral and Poster Submissions

- **Orals:** Each individual Oral presentation will be 10 minutes in length. The author or presenter should also expect 2 minutes to take questions from the audience. The Oral presentations will be grouped by topic area with sessions led by Chairs well-versed in the field. Chairs will be selected by the HTAi Secretariat and the International Scientific Program Committee (ISPC). Chairs will ensure presenters stay to time and will moderate the question/answer sessions following each Oral presentation. Virtual presenters should note that their contributions may be pre-recorded for later viewing.

- **Posters:** Authors submitting abstracts that are accepted for posters will be given the opportunity to present their works. Authors presenting their work are expected to be present at their poster at the assigned time to interact with fellow conference delegates. Virtual presenters should note that their contributions may be pre-recorded for later viewing.

As the conference focuses on *A Turning Point for HTA? Sustainability, Networks and Innovation,* it is recommended to submit abstracts leaning on one of the plenary themes:

- **Plenary 1:** Sustainable HTA For Sustainable Health Systems

- **Plenary 2:** Global Collaboration For A Global Challenge: Do Meta-Networks Help?
- **Plenary 3:** Breaking Boundaries: Unleashing Innovation In Health

Additionally, the scientific program may be enhanced by contributions on the following topics:

- Understanding and Navigating Regulatory Impact
- Sustainability, Equity, and Value in HTA
- Evolving Methodologies and Innovations in HTA
- Role of AI and Digital Innovation in HTA
- Broadening the Scope of HTA
- HTA in the Pandemic Era
- Global Health Matters and HTA

Read more about these supplementary topics on the 2024 Annual Meeting website.

HTAi will also look to ensure that at the conference there is a strong presence of patients, students, and presenters from Low and Middle-Income Country (LMIC).

When submitting abstracts, applicants will be asked to select topic areas from the list below to identify the one that most closely matches the theme of their abstract. Reviewers will identify their area of expertise based on this same list of topics — this ensures that knowledgeable reviewers assess all abstracts.

List of topic areas for abstracts:

1. **HTA Processes**
   a) Core concepts, Introduction to HTA
   b) Novel approaches to conducting HTA (e.g., Fast Track Appraisals, AI in review production Adapting Existing HTAs, Integrated HTA)
   c) Horizon Scanning, Early Awareness
   d) HTA Prioritization Deliberative Processes (e.g., Citizen's Juries, Citizen's Councils, Delphi Panels, Consensus Meetings, Expert Elicitation Methods, Advisory Committees, etc.)
   e) Measuring the Impact of HTA
   f) Reassessment and Disinvestment

2. **HTA Core Methods**
   a) Topic Refinement, Scoping
   b) Information Retrieval, Database Search Methods
   c) Study design (Randomized clinical trials, knowledge synthesis, adaptive designs)
   d) Outcome measurement: Patient-Reported Outcomes, patient preferences, clinical effectiveness

e) Evidence Review and Synthesis (e.g., Rapid Reviews, Meta-analysis, Network Meta-Analysis, Living Systematic Reviews)

f) Evidence Quality (e.g., Rating/Grading, Bias, Transferability and Generalisability, evidence reporting)

g) Economic Evaluation (e.g., Cost Effectiveness Analysis, Cost Benefit Analysis, etc.)

h) Budget Impact Analysis

i) Pricing Models and Approaches (e.g., Reference Prices, Cost Plus, Value-Based Pricing, etc.)

j) Ethical evaluation in of HTA

k) Social evaluation Aspects of HTA

l) Cultural Aspects of HTA

m) Legal Aspects of HTA

n) Organizational Aspects of HTA

o) Environmental Aspects of HTA

p) Measuring and Valuing Health

q) Multi-Criteria Decision Analysis

3. **Stakeholder Involvement in HTA**
   a) HTA and Shared Decision-Making
   b) Patient Involvement
   c) Public Involvement
   d) Engagement with Industry
   e) Engagement with Payers
   f) Engagement with Regulators
   g) Engagement with Health Care Professionals
   h) Facilitating Multi-stakeholder engagement, co-creation
   i) Teaching and learning through social networks/media
   j) HTA in the Media (e.g., Specialist, General, social media, includes Misinformation and Fake News)

4. **HTA Findings, Advanced Methods and Other Topics**
   a) HTA and Procurement (National, or setting based)
   b) HTA and Health Technology Management
   c) Technology Innovation, research, and development, early HTA
   d) Novel approaches to conducting HTA (e.g., Fast Track Appraisals, AI in review production Adapting Existing HTAs, Integrated HTA)
   e) Real World Data/Evidence
   f) Machine Learning and Artificial Intelligence Methods

g) Procedures and Other Interventions (e.g., Surgery, Non-Pharmacological/Non-Device Interventions)

h) Tests (Including Screening, Predictive, Diagnostic, Companion Diagnostics, Biomarkers, etc.)

i) Innovative Pharmaceuticals and Biologics (Including Genetic Therapies, Immunotherapies, etc.)

j) Assessment of Medical Devices

k) Public Health Interventions (e.g., Screening Programs, Immunization Programs)

l) Health Systems Research

m) Health and Social Services

n) Models and Methods of Hospital-Based HTA

o) Digital Health (e.g., wearable tracking devices)

p) Telehealth (e.g., telemonitoring, remote consultations, etc.)

q) Mobile-Health (e.g., Health Apps)

r) Personalised Medicine Interventions (e.g., Prediction Models, etc.)

s) Research on Research

t) Aligning HTA and Clinical Practice Guidelines (e.g., case studies, methods and processes, etc.)

u) Other HTA findings

5. **Policy Issues In HTA**
   a) Globalisation
   b) Universal Health Coverage and HTA
   c) Health System Quality Assessment
   d) Regulatory-HTA Alignment
   e) Value-Based Health Policy and Value Frameworks
   f) Translating HTA Findings into Policy and Practice (Including Evidence-to-Decision Frameworks)
   g) Dissemination via Journal Publication
   h) Transferability of HTA Findings Across Jurisdictions
   i) Capacity Building in HTA, Enhancing Skills and Capabilities at Country and Regional Level
   j) Country-Specific HTA and Regional HTA Networks
   k) Comparative HTA Systems and Emerging Markets
   l) Measuring the Impact of HTA

6. **Other Topics**
   a) Emergency Response (e.g., COVID-19)
   b) Other

General Information

1) **Submission deadlines** are different based on submission type. Please note below the important dates regarding abstract submissions and be advised that no extensions to these deadlines will be made.

- **Open Call for Abstracts:** September 28, 2023
- **Deadline for Workshop and Panel submissions:** October 25, 2023
  Acceptance notification: November 24, 2023
- **Deadline for Oral and Poster Presentation submissions:** December 7, 2023
  Acceptance notification: January 31, 2024

Receipt of abstract submission will be acknowledged via e-mail prior to submission close for each category.

2) **Submission details**

a) **General submission details:**
- All proposals must be submitted via the online abstract submission system. HTAi will accept proposals by email from people who have conditions that prevent them from using the online submission system.
- Abstract submissions must include a brief description (less than 60 words) that would allow delegates to assess relevance and interest to them. Descriptions may be displayed on the Annual Meeting website and mobile app, in the program and/or in the abstract book.
- Submitters may return to the online abstract submission system to edit their <u>draft</u> abstracts; add or delete authors, moderators, or presenters; revise information; or delete abstracts at any time before the submission deadline.
- Abstracts saved as DRAFT cannot be seen by the system administrator and therefore will not proceed to abstract review. Please make sure to submit your abstract once complete. Receipt of abstract submission will be acknowledged via email.
- Accepted abstracts may be published in the Annual Meeting materials (e.g., website, mobile app, program, and/or abstract book) as submitted. Changes to abstracts will not be accepted after the submission deadline.
- If authors wish their abstracts to go into the Supplement of International Journal of Technology Assessment in Health Care (IJTAHC), they must provide consent when submitting abstracts on the online portal of the HTAi 2024 Annual Meeting website. The abstracts that will be published in the Supplementary Issue of IJTAHC might be subject to further review and authors might be contacted for revisions.
- Abstract submissions and presentations must be in English.
- Abstract submissions must not include references; however, the ISPC strongly encourages presenters to include all appropriate citations in their presentation at the Annual Meeting.

- Abstract submissions must not include tables, figures, or charts.
- Please spell out all acronyms on first use.
- Abstract submissions and presentations must not promote any product or service.
- Abstract submission and presentation expenses are the responsibility of the abstract submitter (primary contact) and presenter. For presenters requiring financial support to attend the Annual Meeting, HTAi offers a limited number of Participation Grants each year (subject to conditions and availability).
- The abstract or work summarized in the abstract must be the sole work of the submitter or associated persons/authors; the abstract must not contain information with respect to which such person or persons is/are subject to an obligation of confidentiality; and the abstract must not infringe the copyright or moral right of any other person.
- The presenters of research are required to declare sources of funding for their presented work.
- Local Organizing Committee members, HTAi partner organizations and Interest Group Chairs should contact the ISPC Co-Chairs with their relevant abstract submission numbers to inform them about their official submissions.

b) Workshop and Panel submission details:
- For workshops and panels, the abstract text must not exceed 210 words. Word count will include the introduction (70 words max.), structure of the session (80 words max.), objectives and outcomes (80 words max.). For workshops, you will need to specify target audience and method of interactive activities.
- The title must not exceed 18 words and must accurately reflect content, with no abbreviations and the beginning of each word capitalized. (i.e.: An Introduction To Health Technology Assessment)
- Title, chairs, and presenters as well as affiliated institutes and the abstract description are not included in the word count.
- For a panel of 75 minutes, please limit your presenters to a **maximum of five** (5).

c) Oral and Poster submission details:
- For oral and poster presentations, the abstract text must not exceed 320 words. Word count will include the introduction (60 words max.), methods (100 words max.), results (100 words max.), and conclusions (60 words max.).
- Title must not exceed 18 words and must accurately reflect content, with no abbreviations and the beginning of each word capitalized. (i.e.: An Introduction To Health Technology Assessment)
- Title, authors, and affiliated institutes are not included in the word count.

3) Review, acceptance, notification, and final inclusion in the official Program

a) Review: All abstracts will be screened by the HTAi Secretariat to check for compliance with the [submission and style guidelines](#) before being peer reviewed by three experts identified by the HTAi International Scientific Program Committee (ISPC). Panel and workshop submissions will be reviewed by members of the ISPC. Oral and poster submissions will be reviewed by a broad group of reviewers, coordinated by the HTAi Secretariat, which will include ISPC members and a selected group of experts in the HTA field. Final decisions about inclusion and organization of the program will be made by the ISPC, led by the ISPC Co-Chairs.

b) Abstract acceptance and notifications:
- Workshops and Panels: After review, the abstract's primary contact will receive an email notification indicating the abstracts acceptance or rejection by November 24, 2023. Please check your spam folder if you have not received an abstract update. **Registration for the Annual Meeting must be submitted by March 28, 2024 (early bird registration deadline), to ensure inclusion in the Annual Meeting program.**

- Oral and Poster Presentations: After review, the abstract's primary contact will receive an email notification indicating the abstract's acceptance or rejection by January 31, 2024. Please check your spam folder if you have not received an abstract update. **Registration for the Annual Meeting must be submitted by March 28, 2024 (Early Bird Registration Deadline), to ensure inclusion in the Annual Meeting program.**

c) Final inclusion in the official Annual Meeting Program:
- Workshops and Panels: **Until the Early Bird Deadline (March 28, 2024), at least one of the named chairs/moderators must be registered for the Annual Meeting to confirm the final inclusion in the official Annual Meeting Program**. Panels and Workshops which do not fulfill this requirement will be withdrawn from the program.

- Oral and Poster Presentations: **Until the Early Bird Deadline (March 28, 2024), the abstract's primary presenter must be registered for the Annual Meeting to confirm the final inclusion in the official Annual Meeting Program.** Oral and Poster Presentations which do not fulfill this requirement will be withdrawn from the program.

4) Publication of abstract content

a. Annual Meeting Materials:
- Submission of abstracts constitutes all authors' consent to have their abstracts published on the HTAi 2024 website, mobile app, within the program and/or abstract book.

- Please review your abstract prior to submission; check grammar and spelling and ensure all special characters and formatting display correctly. Accepted abstracts will be published in the Annual Meeting Materials (e.g., website, mobile app, program, and/or abstract book) as submitted. Changes to abstracts will not be accepted after the respective Submission Deadlines.

b. **Supplementary Issue of the International Journal of Technology Assessment in Health Care:** Accepted abstracts of Oral and Poster presentations have the possibility to be published in a Supplementary Issue of the International Journal of Technology Assessment in Health Care. Abstract submitters will be able to provide their consent for publication in the abstract submission form. Once abstracts have been accepted for the official program, there will be an editing process and if any major changes are recommended these will be communicated to the abstract submitter (primary contact).

Scoring Criteria

The scoring system applied to all abstracts will take into consideration gender balance, the involvement of students and contributions from people from Low and Middle-Income Country (LMIC) as well as patients, users, and clients.

1) **Appropriateness to HTAi**

The concept of the abstract should be appropriate to HTAi and in alignment with the main themes of the Annual Meeting. Panels and workshops should have presenters who are knowledgeable about the subject matter and, collectively, represent a variety of different perspectives and/or settings.

2) **Original and Innovative Contribution**

Abstracts with original and innovative ideas will receive a higher score. In particular:
- challenging existing paradigms or HTA practice,

- addressing an innovative hypothesis or critical barriers/issues to progress, and

- developing or enhancing novel concepts, approaches or methodologies, tools, or technologies for this area.

3) **Abstract Structure and Quality**

- **Workshop and panel abstracts** must have the following structure:

  Title: must not exceed 18 words, with no abbreviations and the beginning of each word is capitalized.
  Introduction: Include the scientific background and rationale for the panel or workshop, and a clear statement of the issue. Must be clearly stated to achieve the highest score.
  Structure of the session: Give the structure of your workshop/panel (e.g., presenters, timing, format of interaction, etc.) and your plans to generate a vibrant discussion or learning environment.
  Panel/Workshop outcome and objectives: Explain what you would like to accomplish during your workshop/panel session, the session's contribution to HTA capacity building as well as the benefits and takeaways for the audience or participants.
  Moderators/Presenters: Include name, organization, position of all presenters, as well as the title (or brief description) of their specific contribution. Only confirmed moderators/presenters can be submitted with your application.
  Declaration of funding: Please declare sources of funding of the research.

Basic quality: Workshops and panel abstracts should be appropriately summarised, and grammar and spelling should be checked.

- **Oral and poster abstracts** must have the following structure:

Title: must not exceed 18 words, with no abbreviations and the beginning of each word is capitalized.

Introduction: Include the scientific background and rationale, and give a clear statement of the problem, issue, study goal, objectives, and/or research hypothesis. Must be clearly stated to achieve the highest score.

Methods: For quantitative and related studies, include a clear statement of the perspective, data collected, sources of data, analyses including statistical testing, etc. Clearly describe the populations studied, method of accrual and sample frame and analytical techniques. For conceptual, institutional, organizational or policy papers, provide a concise description of the content of the paper or report to be presented and other relevant factors such as policy analysis of alternatives, details of qualitative methods, etc.

Results: Present the most important study findings including generalizability to other populations, health systems or countries if relevant. Abstracts must reflect work that has already been done (i.e., results available)

Conclusions: Provide a concise statement on the most important findings or policy implications. You should also address the question, "What do these results mean for your main area of research?" If relevant, include next steps, proposals for further research and study limitations.

Declaration of funding: Please declare sources of funding of the research.

Basic quality: Oral and poster abstracts should be appropriately summarised, and grammar and spelling should be checked.

Style Guidelines

Please consider the following style guidelines as a general direction in the submission process to have the abstracts submitted as consistent and standardised for Annual Meeting publications (website, mobile app, program, and abstract book). These guidelines are in line with those required for abstracts to be included in the Supplementary Issue of the International Journal of Technology Assessment in Health Care.

- American spelling (except for formal titles and names)
- Title – start of all words capitalized, no abbreviations
- Define all abbreviations on first use
- Use the word 'percent' rather than %
  (except for when using with numbers for Confidence intervals – stated as 95% CI or for numbers in parentheses)

- Confidence Interval - define first i.e., Confidence Interval (95% CI: 0.33, 2.41)
- All numbers less than 1 have a 0 in front e.g., p< 0.001
- For numeric lists use Arabic letters in parentheses (i), (ii), (iii)
- i.e., e.g., etc. must be spelled out – that is, for example and etcetera if as part of main text. In brackets abbreviations are allowed.
- Numbers up to 10 spelled out and for 10 and over given as a numeral. Numerals for units of time and measurement.
- Dates must be in form of 8 June 1960 and not 8/6/60 or 6/8/60
- Currency should be given using currency abbreviations (see www.xe.com/iso4217.php) and must always include a conversion to USD or EUR as well as the local currency value i.e., in parentheses after the initial currency [i.e. (USD___) or (EUR___)]
- No Tables, Figures and Charts allowed
- No references allowed
- Results must be provided for acceptance on the program and publishing in Supplement

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3 things to keep in mind:

1. Abstracts with **original and innovative ideas** will receive higher scores.

2. It is recommended that all abstracts relating to the 2024 Annual Meeting Theme(s) should consider the main topics:

Plenary 1: Sustainable HTA For Sustainable Health Systems
Plenary 2: Global Collaboration For A Global Challenge: Do Meta-Networks Help?
Plenary 3: Breaking Boundaries: Unleashing Innovation In Health

3. Please read the submission guidelines carefully and thoroughly.