



iHEA News

October 2017

iHEA News is the official newsletter of the International Health Economics Association.

Executive Update

Upcoming iHEA Elections: Message from the Chair of the Nominating Committee, Terkel Christiansen



As reported in the July newsletter, a range of changes have been made to the iHEA Bylaws to improve association governance. One of the changes introduced was to establish a larger and more inclusive Nominating Committee than previously to oversee the nomination and election process. There will shortly be an election for two positions: a member-elected Director and the President-Elect. The Nominating Committee for the 2017 elections consists of the following members:

- Terkel Christiansen, University of Southern Denmark (iHEA Past-President; Committee Chair)
- Tinna Ásgeirsdóttir, University of Iceland (iHEA member)
- John Cawley, Cornell University (iHEA member)
- Jui-Fen Rachel Lu, Chang Gung University (iHEA Board Director)
- Albert Okunade, University of Memphis (iHEA Board Director)
- Tony Scott, University of Melbourne (iHEA Board Director)

The Nominating Committee is tasked with proactively identifying possible candidates and issuing an open call for nominations from iHEA members. All of those nominated for the two positions met the criteria specified in the Bylaws and will be standing in the upcoming elections. The candidates, listed in alphabetical order, are as follows:

President-Elect

- Bruce Hollingsworth
- Winnie Chi-Man Yip

Member-Elected Board Director

- Carl Asche
- Nicole Au Black
- Meltem Daysal

- Kara Hanson
- Paula Lorgelly
- Maia Platt

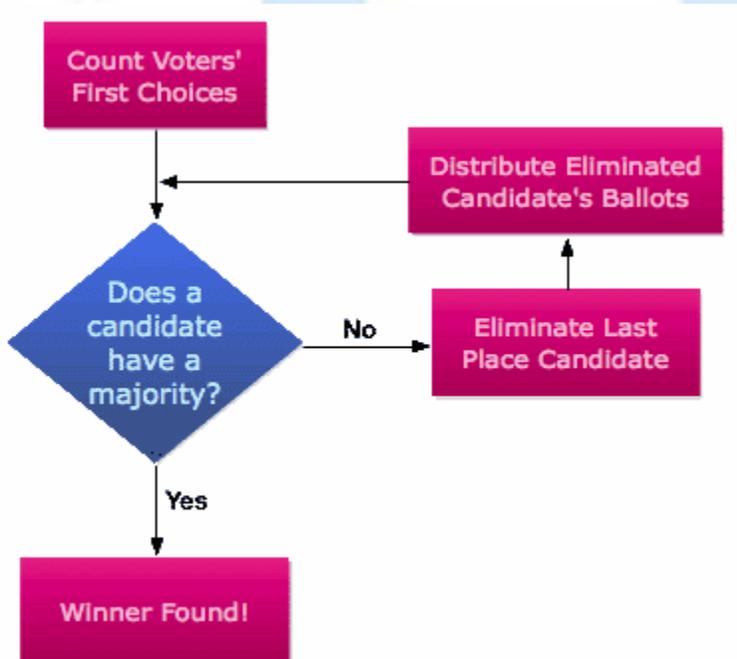
The timing for the election process is as follows:

October 27th: Election statements and brief CVs of all candidates posted on the iHEA website

October 30th - November 17th: Campaigning, which will include online forums where iHEA members can pose questions to the candidates

November 20th – 29th: Voting

Given the relatively large number of candidates standing for the member-elected Board Director position, the Board has decided that it would be most appropriate to use what is known as the “instant-runoff-voting” system, which allows members to rank their preferences for candidates, in this case from 1 to 6. If one of the candidates receives more than half of the “rank 1” votes, they will be the winner. If this does not occur, the person with the least “rank 1” votes will be removed from consideration and their votes will be distributed to the remaining candidates according to the “rank 2” preference.



We encourage all members to review the information on each candidate that will be posted on the iHEA website by the end of this week, and to engage actively in the online forums, to get to know the candidates better.

If you are not currently an iHEA member but would like to have a say on key members of iHEA governance structures ... **why not [join](#) now.**

- **iHEA Nominating Committee Chair, Terkel Christiansen**

Latest News

Special Interest Group: Economics of Obesity

Despite a substantial growth in research and policy initiatives in the last two decades, obesity levels continue to increase globally. This is one of the most significant global challenges of modern times causing huge economic and societal burden.

In this changing world, what role can economists play? Can we use economic tools to help explain individual and market behaviour, and use this information to formulate policy that will actually make a difference? Can we help evaluate suggested interventions providing much needed information on value for money? Can we offer a system-wide analysis to help understand policy impact – recognising the distinctive context of different countries?

What is the Economics of Obesity Special Interest Group?

The EOSIG will bring together iHEA members who are working in obesity to develop an understanding of obesity from an economics perspective. The group will gather and share knowledge and build capacity working in this area. Our aim is to work together to enhance the profile of economics in obesity research. We will forge links between individuals and groups with an interest in obesity from diverse country contexts and, where appropriate, provide input to policy development at an international level.

EOSIG objectives:

First and foremost as a new group the purpose is to bring together members of iHEA with an interest in issues related to the economics of obesity.

The group will work together to:

- Enhance understanding of the prevention and treatment of obesity from an economics perspective;
- Connect economists working in obesity from across the world;
- Share knowledge and provide support through the creation of a community of economists working together;
- Establish a database of existing projects that are about enhancing our understanding of obesity from an economics perspective;
- Host pre-congress and/or special organised sessions at iHEA Congress meetings that are about sharing knowledge and creating a research environment that is supportive and focused on increasing research knowledge and capacity;
- Offer shared mentorship and support for students and early career researchers working across different country contexts;
- Host international workshops to connect researchers; and
- Provide input to policy development at an international level.

For more information or to join the group, please contact either **Emma Frew**, e.frew@bham.ac.uk, or **Nicole Cork**, ihea@healthconomics.org.

Regional News

Health System Implications of Brexit

Brexit negotiations are well underway for the United Kingdom (UK) to leave the European Union (EU) by 2019. As negotiations around the terms of the UK withdrawal only began in June 2017, there remains considerable uncertainty about the ultimate form that trade agreements, conditions on movement of EU citizens and related issues will take and hence, the likely implications for the economy and specific sectors.

Two recent papers have explored the potential implications of Brexit for the UK National Health Service (NHS). The major concerns identified in these papers in terms of likely impact on the NHS relate to public spending levels and the supply of health workers. It is unclear how Brexit will impact on economic growth in the UK, or in countries remaining in the EU. Whether Brexit has a positive or negative effect on economic growth will have a comparable impact on public spending on health services in these countries. Of even greater concern for the UK is that the NHS is heavily reliant on migrant labor, particularly for nursing staff. While the UK has recently increased the number of domestic training positions to grow the local health worker supply, the post-Brexit migration policy could limit NHS access to overseas health workers. This may benefit the countries from which migrant NHS workers are drawn currently, but it could create delivery capacity constraints for the NHS. A related labor market issue is that the UK is heavily reliant on EU countries for their supply of health researchers, which may be affected by the final Brexit terms.

There are also some concerns that Brexit could lead to delays in accessing new medicines. At present the NHS participates in the European Medicines Agency's (EMA) single market authorization process. However, the UK already has a strong domestic Medicines and Healthcare products Regulatory Agency (MHRA), and the UK could establish an agreement for mutual recognition of medicine approval with EMA to reduce the potential for delayed access to new medicines.

A key concern for individuals is the effect on access to health care for UK citizens living in another EU country and vice versa if current reciprocal health service access arrangements are not retained after Brexit. The UK Prime Minister has offered to guarantee that any EU citizen living in the UK for more than five years before Brexit would enjoy the same rights as UK citizens if the EU provides a reciprocal guarantee for British citizens living in other EU countries. While there are about more than double the number of EU migrants living in the UK than UK migrants in other EU countries (three million and 1.2 million respectively), many UK pensioners live in these countries; if they were to return to the UK, this could increase pressure on UK health and social care services.

Given the early stage of Brexit negotiations, the extent to which these and other concerns about the impact of Brexit for the UK and other EU countries' health systems and citizens' access to health care will materialize is unclear (see referenced papers for information on other possible implications of Brexit). The only certainty is that should Brexit happen, it will provide an important opportunity to research the impact of changes in trade, migration and other policies on health and health systems.

John Wildman, Rachel Baker, Cam Donaldson (2017) Health and Brexit. Health Economics; 26: 959-961.

Law Society of Scotland (2017). The UK withdrawal from the EU and the potential impact on health related matters. Edinburgh: Law Society of Scotland
<https://www.lawscot.org.uk/media/1214157/MED-EU-withdrawal-and-the-potential-impact-on-health-related-matters-Law-Society-of-Scotland-Analysis-Paper.pdf>

Health Economics Network Activity in Asia



9th Tri-country Health Economics Conference, Sep. 4, 2017



Regional Meeting for the Asian Delegates at 2017 iHEA Boston Congress

On September 3, 2017, the 9th Tri-Country (Japan, South Korea and Taiwan) Health Economics Conference, hosted by Japan Health Economics Association (JHEA), was held at the Hiyoshi campus of Keio University.

Japan, South Korea and Taiwan have achieved universal coverage through implementing a national health insurance system in 1961, 1989 and 1995 respectively. Given the common features and development paths, and likely the challenges, shared by the three health systems, J. Rachel Lu (Taiwan Society of Health Economics, TaiSHE), Soonman Kwon (Korean Association of Health Economics and Policy, KAHEP) and Hideki Hashimoto (JHEA) initiated an annual joint conference to enhance the intellectual exchange and experience learning among researchers from the three countries. The inaugural conference, hosted by TaiSHE, was launched in 2008 and the tri-country network will be celebrating its 10th anniversary in Taipei Taiwan in 2018.

In the past joint conferences, a wide range of research papers have been presented and there were extensive discussions on topics such as aging, low fertility, health behavior, equity performance of and directions for health system reforms, with a particular focus on National Health Insurance systems in the respective countries. The joint conferences have always attempted to strive for a balance between theory-focused research themes and policy-oriented discussions.

Following the Regional Meeting for Asian Delegates at the iHEA World Congress in Boston, which was well attended by approximately 90 delegates, the delegates from JHEA, KAHEP and TaiSHE have held further discussions on ways to strengthen regional networking among Asian health economics researchers. It is proposed to exploit the tri-country annual conference as a platform and engage delegates from country-based health economics associations to gradually expand the network and opportunities for potential collaboration.

- *Jui-fen Rachel Lu, iHEA Board Member*

iHEA Members

Call for Nominations for the 2018 iHEA Annual Student Paper Prize

Deadline for nominations: January 12th 2018

The International Health Economics Association (iHEA) is pleased to invite nominations for the Annual Student Paper Prize in Health Economics.

Nominations should include a brief letter of nomination (250 words max) and a copy of the paper (preferably pdf).

A student is defined as someone currently studying (full or part time) at a higher education institution, at either Masters or Doctoral level. In addition, students who have completed their studies in the year previous to the announcement qualify as long as the paper was written while registered as a student.

Papers can be published or unpublished, but must be in comparable format to a published paper in Journal of Health Economics or Health Economics, of maximum length 8,000 words. Self nomination is acceptable. Papers should be in English. If a submitted paper has more than one author, the student contribution must be at least 75% overall and an accompanying letter must be signed by co-authors to support this, stating the nature of their contribution (conceptualization, analysis, writing etc.). A joint student paper with 50-50 contributions is acceptable.

Papers will be reviewed by an [International Committee](#) chaired by Professor Bruce Hollingsworth.

The Prize will be subsidized travel and attendance at the 2019 iHEA Congress in Basel to present the paper in a Student Prize Special Organised Session chaired by the iHEA President, or Chair of the Prize

Committee; the equivalent of US\$1,000; and the offer (if the author wishes, and the paper is unpublished) of potential fast track publication in Health Economics, subject to Editorial approval.

The papers in 2nd and 3rd place will receive the equivalent of US\$250 each and free registration (but not travel) at the 2019 Basel iHEA Congress. They will be invited to give brief presentations at the iHEA Congress Student Prize Special Organized Session.

For further information [visit the website](#).

Please submit nominations, and address queries by email to: b.hollingsworth@lancaster.ac.uk

Call for Proposals to Host the 2021 iHEA World Congress

iHEA is interested in receiving expressions of interest from **health economics research organizations** to host the 2021 World Congress on Health Economics, for between 1,000 to 1,500 delegates. We particularly encourage proposals from regions of the world that have not yet hosted an iHEA congress. The background information on iHEA congresses presented below indicates the key requirements for hosting such a congress and will allow you to determine your eligibility. These initial proposals should be relatively brief (about 5 pages long) and will be used to short-list candidates from whom to request full proposals. Proposals should include the following information:

- A brief motivation on why you would like to host an iHEA congress;
- Background information on the institution(s) that would host the congress and the person proposed to chair the Local Organizing Committee (LOC);
- Proposed location of the congress, including describing the proximity to an international airport that has flights from and to a wide range of countries;
- An assessment of any visa requirements for your country and whether or not congress delegates will experience difficulties in securing visas;
- The number of delegates you would hope to attract to the congress;
- A description of the available facilities, demonstrating how they meet the space and equipment requirements outlined below and confirmation of the availability of these venues during the congress period (Saturday to Wednesday, preferably in the second week in July);
- An indication of what catering services are available for provision of mid-morning and mid-afternoon refreshments and lunches;
- A brief overview of delegate accommodation options in close proximity to the congress venue (e.g. bed capacity and price range of nearby hotels; low-cost alternatives to large hotels);
- An indication of what costs will be incurred onsite for the congress, including indicating what will be provided as an in-kind contribution by the institution and whether any charges will be levied by the host institution – you are not required to develop a budget but rather to identify and describe the nature of all likely local expenses and how these may vary with different numbers of delegates (e.g. 1,000-1,500 delegates);
- An indication of what national organizations could be approached to contribute to funding the congress; and
- An indication of any significant risk factors that could affect the congress happening as proposed (e.g. factors that could result in the venue not being available, political factors, delegate safety concerns).

Please approach the iHEA Executive Director (diane.mcintyre@healthconomics.org) to discuss your interest in submitting a proposal and to obtain additional guidance in preparing an initial proposal. Proposals should be submitted to ihea@healthconomics.org by **January 31, 2018**.

Background information on iHEA Congresses

Congress attendees and timing

iHEA congress generally attract delegates from over 70 countries. The size of iHEA congresses has varied from around 1,200 to 1,800 delegates over the past decade, often influenced by the capacity of the facilities available in the host city. iHEA places emphasis on quality of the scientific content of the congress rather than size.

Congresses usually take place as near to the second week in July as possible. The main congress is held from Sunday evening to Wednesday, with pre-congress sessions on the Saturday and Sunday.

Space and equipment requirements

iHEA has a preference for holding its congresses in university facilities that are made available as an in-kind contribution by the host institution to ensure that registration fees are affordable to a wide range of health economists. All venues should be within close proximity of each other and should have wheelchair access. Generally, iHEA congresses require the following:

Registration area: Large central area with space for on-site registration, and tables for a small number of exhibitors and on which university members can display brochures for delegates' information.

Refreshments and lunch: Space for people to meet during break times for refreshments and space where lunch can be served. It would be preferable if posters can be displayed in the area where refreshments are served.

Plenary venue: Should be able to accommodate all delegates; the seating capacity of the venue available for plenary sessions usually determines the maximum registration capacity.

Parallel session venues: In general, at least 20 venues, but preferably up to 25 venues, with an average capacity of 60 to 100, are required. There should also be at least one larger venue (with a capacity of 200-300).

Computer laboratory/Speaker ready room: A room with 10-15 computers is required where delegates can load up their presentations for distribution to individual venues

Office space: A room suitable for use by the local organizing and iHEA teams should also be available

Technology requirements: All plenary and parallel session venues should be equipped with a networked computer, data projector, screen and microphone(s). There should be the capacity for centralized internet distribution of Powerpoint and PDF files from the computer laboratory to individual parallel session venues. There should also be high-speed wireless access to the internet for all congress delegates.

Food and beverage and social events

Mid-morning and mid-afternoon refreshments and lunch are provided to all delegates during the main congress. Depending on availability of funds, one or more social events may be held during the congress and generally includes an opening reception and an event on the Tuesday evening.

Fundraising

Securing sponsorships is important to assist in covering the costs of the congress and ensuring affordable registration fees. Responsibility for fundraising is shared between iHEA and the local host. In general, iHEA focuses on raising funds from large international organizations, with an emphasis on providing financial support to delegates from low- and middle-income countries and students in

need. The local host generally focuses on raising funds from organizations based in their country to assist in covering core congress costs and any social events.

Roles and responsibilities of iHEA and local host

The division of responsibilities for congress organization is distributed as follows:

iHEA:

- iHEA assumes financial responsibility for its congresses; this requires that the congress budget be developed by the iHEA Executive Director in consultation with the Chairperson of the Local Organizing Committee, and approved by the iHEA Finance Committee and Board, and that iHEA review and sign contracts for all major cost items
- Set registration fees based on budget
- Develop and maintain congress website
- Establish the Scientific Committee and manage abstract submission and review process and compile program
- Mobile app
- Funded delegates' logistic arrangements
- Delegate registration
- Invitation letters
- Taking orders for exhibition tables and program adverts
- Congress evaluation
- Congress report
- Income and expenditure audit

Local team:

- Establish Local Organizing Committee (LOC)
- Recommend plenary speakers
- Contribute LOC members to Scientific Committee to ensure involvement in the program
- Venues: confirmation of availability at university; finding appropriate plenary venue
- Obtain quotes on all key local/onsite congress costs
- Equipment and staff for IT & AV requirements – particularly speaker ready room and uploading presentations; ensuring adequate wi-fi availability, etc.
- Catering arrangements (within agreed budget)
- Social events and entertainment (within agreed budget)
- Arranging for congress bags, lanyards etc.
- Signage
- Printing
- Hire and manage students to assist during congress

Joint:

- Agree a budget including both local/on-site and iHEA costs for submission to the iHEA Finance Committee and Board
- Agree on delegate numbers/size of congress
- Fundraising
- Agree on plenary speakers
- Pre-congress sessions – encourage submission of proposals, review proposals and agree which to accept

Call for Proposals to Establish Special Interest Groups

With the first Special Interest Group (SIG) – on the Economics of Obesity - about to be established, the iHEA Board is calling for further proposals to establish SIGs. These groups are intended to provide a

platform for professional interaction between iHEA members. These may focus on specific health economics issues, methodological approaches and/or capacity development initiatives; they may also have a geographic focus. Organizing and participating in collegial activity related to a topic of common interest offers tremendous professional growth opportunities and intellectual rewards.

SIGs approved by the iHEA Board will be offered:

- a page on the iHEA website to advertise SIG activities to all;
- a moderated blog or discussion list for iHEA members who join the SIG (summarized updates would be available to anyone interested);
- support in communicating via the iHEA mailing lists and social media channels;
- support for webinars for iHEA members; and
- a special organized session at the biennial iHEA congress, after review via the Scientific Committee process.

Proposals should include the following information:

- Proposed name of the SIG
- Background: Explain the focus of the proposed SIG, why the area of focus is of particular importance and why it is likely to be of interest to iHEA members
- Aim and objectives of the proposed SIG
- Proposed activities of the SIG
- List of iHEA members willing to contribute to SIG activities: A basic requirement for consideration of an SIG proposal is at least 10 iHEA members expressing a willingness to participate in the SIG, preferably from different regions with at least some from high-income countries and some from low- and middle-income countries
- Names and brief biographies of proposed convener(s) of SIG who would take responsibility for developing the program of work and its implementation

Proposals to establish SIGs can be submitted (to ihea@healthconomics.org) at any stage and the iHEA Board will consider proposals at regular intervals – the next round of SIG proposals will be considered by the Board at its meeting in January 2018 at the latest. If you would like to discuss your ideas for an SIG proposal, please contact the Executive Director (diane.mcintyre@healthconomics.org).

Upcoming Events

iHEA will be represented at the American Economic Association Annual meeting at the Marriott Philadelphia Downtown, January 5-7, 2018. iHEA will be hosting two organized sessions and co-hosting a reception with the American Society of Health Economists.

ASHEcon / iHEA Cocktail Reception

Friday January 5, 2018; 6:00 PM - 7:30 PM
Grand Ballroom Salon K

Details of the iHEA organized sessions and other health economics sessions organized by ASHEcon and HERO can be found [here](#).

Stay Connected

