# Interview: Jaime Calderon – CEO, Colombian Institute for Health Technology Assessment (IETS)



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10.07.2017

Tags: Colombia, IETS, Healthcare, Regulatory Reform, Patient Access

*Jaime Calderon, CEO of IETS and with an extensive clinical background and deep understanding of the Colombian healthcare sector, shares IETS' role in advancing the healthcare landscape while promoting superior standards and taking into account the concerns of the population and industry stakeholders.*

**You were appointed CEO of IETS in February 2017, being the first director of the institute with a clinical approach. What are you looking to accomplish under your tenure and to what extent does your approach differ from that of your predecessors?**

My objective is to enhance the participation of clinicians in the formulation of recommendations within a strong methodological structure. Working with the different stakeholders including clinicians and practitioners is the only way to legitimate our recommendations. Moreover, legitimate recommendations are more likely to be applied and therefore it will increase our chances to improve the system.

**When we met Héctor Castro in 2013 on behalf of IETS, he stated that IETS needs to develop processes and methods. In addition to that, he mentioned hiring highly capable staff and creating awareness of what the institution is doing. How has IETS evolved since then?**

It is a rather new institution within the healthcare system in Colombia. IETS was created as an independent agency, to guarantee impartiality. Only highly qualified teams would be capable of successfully performing the various tasks assigned to IETS. Our institution works with a full-time core team of 30 health economists, epidemiologists and other healthcare professionals dedicated to specific projects commissioned by the Ministry of Health and other government and private institutions. At times, we recruit external contributors to support the core team depending the size of the projects.

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**The role that this institution plays in the new plan of exceptions is fundamental due to the procedure established by the Ministry of Health within the "Technical-Scientific Analysis" phase. The IETS and independent experts are the ones to analyse and determine what treatments or health technologies are considered exclusions. What are the main challenges that you are encountering in this regard?**

It is the first time that the Colombian government has considered a plan of exceptions. While we are still in the early steps of the projects after the ministry has decided which technology could be excluded our mission is quite clear. IETS has to provide a comprehensive report, formulating a general recommendation which will allow the government to determine which technologies should be excluded from public financing. IETS is not involved in the decision process. Instead, IETS's main challenge is to generate the best available evidence on the criteria established by Law that could lead to an exclusion of these technologies.

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**How do you believe your clinical background can help you leverage these technologies and contribute to the improvement of the healthcare system in Colombia?**

The methodology followed is not the only factor affecting the decision-making process. The best way to generate policy recommendation is to have a clear understanding of the context. When generating a recommendation, IETS needs to take into account governmental needs, clinician's expertise and the general public's perception. Our process requires us to describe how these concerns are integrated in the final recommendations. As a former director of the General Society of Scientific Associations in Colombia, I am able to keep in mind how clinicians think and what the most suitable recommendation IETS needs to give is.

**What is your general assessment of the healthcare system in Colombia and where is there room for improvement?**

Over recent years the Colombian health system has attained incredible results in terms of healthcare coverage, reduction of disease and improved access to medication and latest technologies. Nonetheless, certain challenges remain. Indeed, while there have been tremendous gains in terms of services, the general public’s perception remains negative on some aspects of our system especially with regards to efficiency. The high transaction costs, conflict between agents and the waste of resources generated by incentives -not to call it corruption- are at the root of this resentment. Now that health has become a fundamental right for Colombians, there are many opportunities to reduce these inefficiencies. Indeed, the policies are now developed in this regard with the patient at its core. Eventually, people will realize it and perceptions will change. Such an integrated model should be more effective and this might generate the resources to guarantee access to the population.

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