LOCAL HEALTH SYSTEM SUSTAINABILITY (LHSS) PROJECT IN VIETNAM

National consultant to conduct a systematic review on efficacy and cost-effectiveness analysis of dolutegravir for HIV treatment in Vietnam

1. Background of the assignment

The global USAID LHSS Activity helps low- and middle-income countries transition to sustainable, self-funded health finance systems that support high-performing overall health systems. The LHSS activity in Vietnam will work with the Government of Vietnam (GVN) to advance greater local ownership of HIV and TB prevention and control. Led by Abt Associates, the four-year activity supports Vietnam in increasing its domestic financing for HIV and TB services in the context of declining donor funding, in using government resources more efficiently, and in assuming local ownership of HIV and TB prevention and control activities. Specific objectives are: (1) Support the GVN to strengthen its public financial management systems for public sector health and find greater efficiencies in social health insurance (SHI), (2) Increase and improve the efficiency of domestic financing of HIV prevention and treatment services; (3) Strengthen the capacity of Vietnam's supply chain management system; and (4) Integrate TB services into SHI.

Context of the assignment

LHSS has been strengthening the GVN capacity in the supply chain management system by supporting Vietnam to transition essential and recommended ARV drugs to the Social Health Insurance (SHI) scheme. Starting in 2019, the transition of tenofovir disoproxil fumarate-lamivudine-dolutegravir (TLD) and tenofovir disoproxil fumarate-lamivudine-efavirenz (TLE400) to SHI in the country has facilitated the access of patients to optimal HIV treatment regimens. By 2022, SHI has covered 78% of total ARV procurement costs and addressed the treatment needs of over 90% of all patients on ARVs[1]. Optimization of current antiretroviral drug regimens is a critical component in supporting country efforts to achieve the 95/95/95 targets and epidemic control.

In 2018, The World Health Organization provided guidance on the transition to dolutegravir (DTG) based ART, and DTG became part of the preferred first-line pediatric treatment regimens for all HIV children ≥4 weeks and ≥3 kilograms. According to WHO guidance, all newly initiating children with HIV on ARV and existing virally suppressed first-line children ≥4 weeks and from 3 to <20kg should be transitioned to DTG[2]. As a result, the Vietnam MOH recommended transfer to DTG-based regimens for children under 10 years old and less than 30 kg of weight in its latest guidance for HIV treatment.

DTG is a drug that is more effective, easier to take, and has fewer side effects than alternative drugs that are currently used. DTG also has a high genetic barrier to acquiring drug resistance, which is important given the rising trend of resistance to efavirenz and nevirapine-based regimens[3]. In Vietnam, dolutegravir 10mg and dolutegravir 50 mg – single doses have been first used for pediatric treatment starting in December 2022.

To facilitate the accessibility of this drug and ensure the sustainability of the HIV treatment to the preferred regimens, adding DTG to the SHI drug list, it is essential to prepare pharmaco-economic reports including the reports on efficacy, cost-effectiveness, from that, the budget impact when adding the drug into SHI drug

[1] VSS-eLMIS

[2] https://clintonhealth.app.box.com/s/6sh87gaaxhya9nvorubst6j8b7k4bhso

[3] https://www.who.int/news-room/q-a-detail/who-recommends-dolutegravir-as-preferred-hiv-treatment-option-in-all-populations

list is analyzed. In this context, LHSS will engage a national consultant to conduct a systematic review of efficacy, and cost-effectiveness analysis.

2. Objectives

The general objective of the consultancy is to generate and provide evidence on the efficacy and cost-effectiveness of DTG. The specific objectives are to:

- Conduct a systematic review of efficacy, safety, tolerability, and cost-effectiveness analysis (CEA) of DTG10mg and DTG50mg in HIV treatment.
- Support to prepare necessary deliverables as required for pharmacoeconomic reports to facilitate the procedures of adding a pharmaceutical product to the SHI drug list.

3. Specific tasks and deliverables

To address the objectives, the national consultant is expected to cover the specific tasks and deliverables:

Specific tasks:

- Conduct a systematic review on efficacy, tolerability, bioequivalence, safety, and cost-effectiveness of dolutegravir 10mg and dolutegravir 50mg; document and summarize the materials on the cost-effectiveness analysis of these drugs in Vietnam if any.
- Write a draft and full report on the assessment under standard guidance on pharmaco-economic report writing from MOH.
- Participate in technical meetings and workshops related to the process of preparing pharmaco-economic reports.
- Prepare and present key findings in the relevant meetings, seminars, workshops, and conferences upon the project's request.
- Provide technical support when needed to the national consultant who conducts a budget impact assessment (BIA) of dolutegravir 10mg and dolutegravir 50mg.
- On a monthly basis, submit to the project a written report on the progress of the task performance as required.

Deliverables and timeline

Deliverable & Sub-deliverables	Deadline
• Inception report of the consultancy	May 19, 2023
• Preliminary report of budget impact assessment (BIA)	June 19, 2023
• Draft summary and full report for review	July 30, 2023
• Final summary and full report of budget impact analysis	August 31, 2023
• Presentation/slide decks of the report	September 15, 2023
• Monthly consultant progress report	Monthly

Number of working days: 40

4. Location and timing

The work will be carried out in Hanoi traveling to the provinces if needed. The consultancy will be conducted from April 2023 through July 2023 with a total of up to 40 working days.

5. Management of the assignment

The national consultant will report to the Technical Director. The consultant will work closely with LHSS Supply Chain Specialist - Procurement, MOH/ DHI, VAAC, NCDPC, VSS, and other key government agencies as needed to fulfill the tasks.

6. Qualification requirements

The consultant should satisfy the following requirements:

- An advanced degree in medicine/ pharmaco-economics / health economics or relevant disciplines.
- More than 5 years of relevant work experience in the pharmaceutical area and social health insurance.
- Strong understanding and knowledge of SHI policies and processes for the inclusion of new drugs into SHI.
- Previous experience in preparing and reviewing dossier for including new drugs into the SHI list.
- Strong understanding and experience in conducting and reporting systematic reviews on efficacy and cost-effectiveness analysis (CEA) of drugs.
- Strong experience and skills in conducting and reporting on budget impact analysis of pharmaceutical products.
- Adequate knowledge and understanding of HIV/AIDS care and treatment programs in Vietnam.
- Demonstrate ability to work effectively with government agencies including health and social security sectors and health facilities.
- Proficient in English particularly reading and writing.

To apply, please send your application documents to the following email:
LHSS_Vietnam_Procurement@abtassoc.com
Deadline: 10 April 2023
Only short-listed candidates will be contacted for interviews.