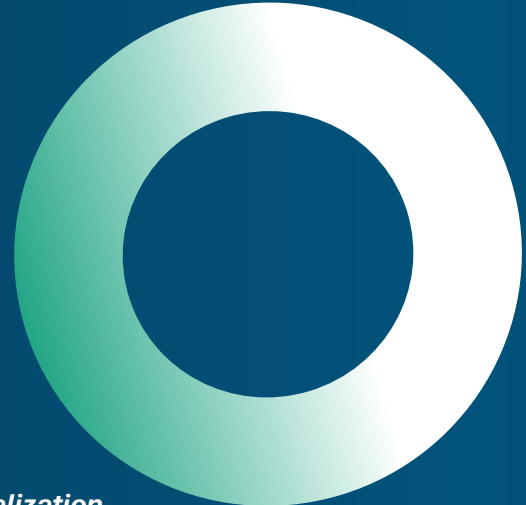
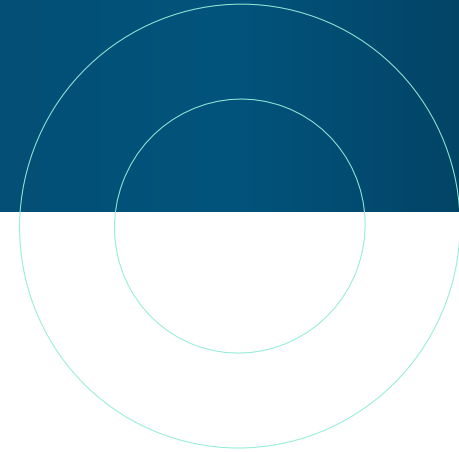


Health Economic Model Conceptualization: Case Studies Using HEM-X™

Tushar Srivastava (Director, HEOR and Gen-AI Lead)
ConnectHEOR, London, UK
November 17, 2024

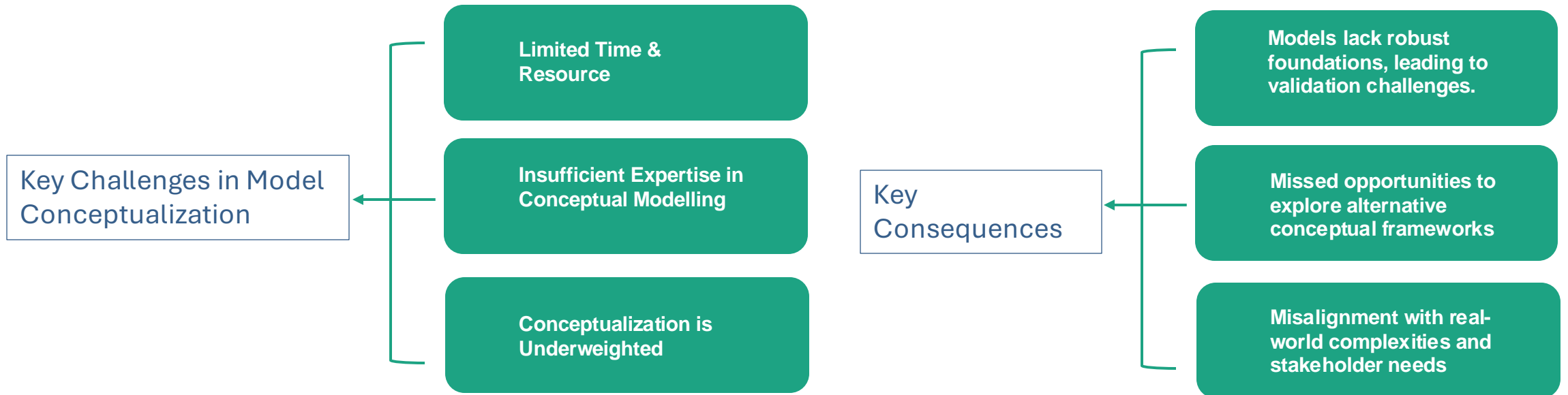


Key Questions!



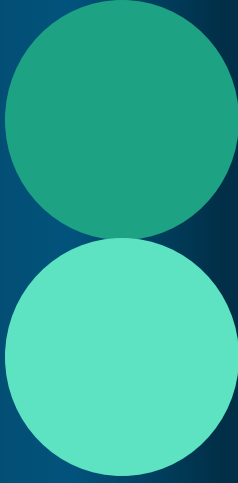
- ? Is it possible to optimally integrate Generative-AI and Human Expertise?
- ? Is it possible to conceptualize health economic models using Generative-AI?
- ? Can we emulate human-like reasoning through Generative-AI?
- ? Can Generative-AI will replace human?
- ? Should we leverage Generative-AI in our HEOR workflows?

Gen-AI in model conceptualization?



Can Gen-AI bridges the gap with faster, smarter and more impactful health economic models?

Let's find out...



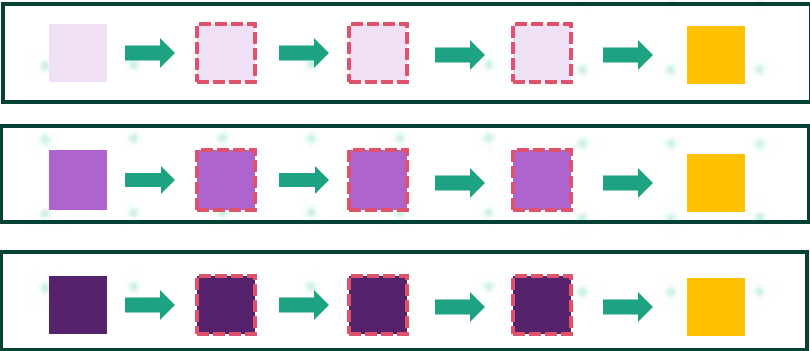
Human-way of model conceptualization and reasoning approach

Human modeler thought process during the model development

Decision Problem



Problem broken in multiple segments for conceptualization



Each segment then thought through in step-by-step fashion



Potential solution by synthesizing all information together



Potential of Generative-AI in this whole process (multiple approaches)



AI: Artificial Intelligence
HI: Human Intelligence

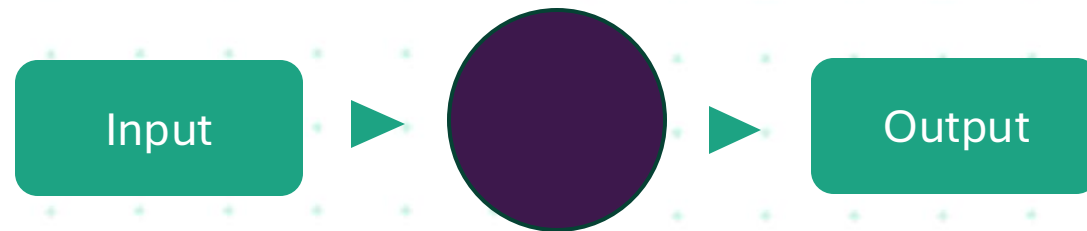


Gen-AI Reasoning Algorithm

LLM capabilities in reasoning

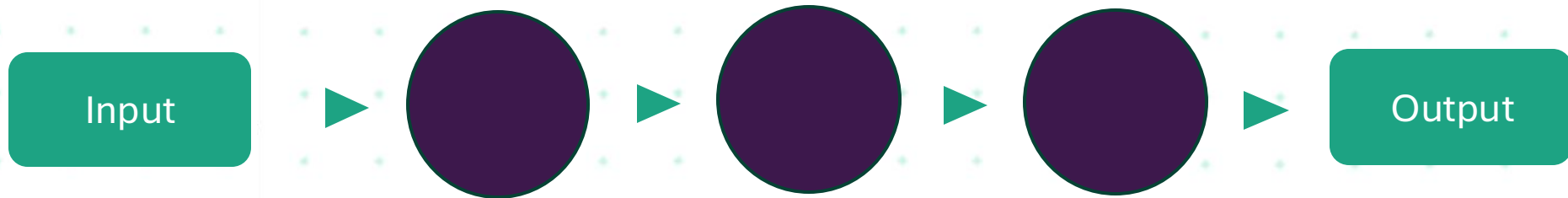
1

Basic Input-Output approach (I-O)



2

Chain of Thoughts (CoT)



Key Novelty: Intermediate LLM thoughts within a chain

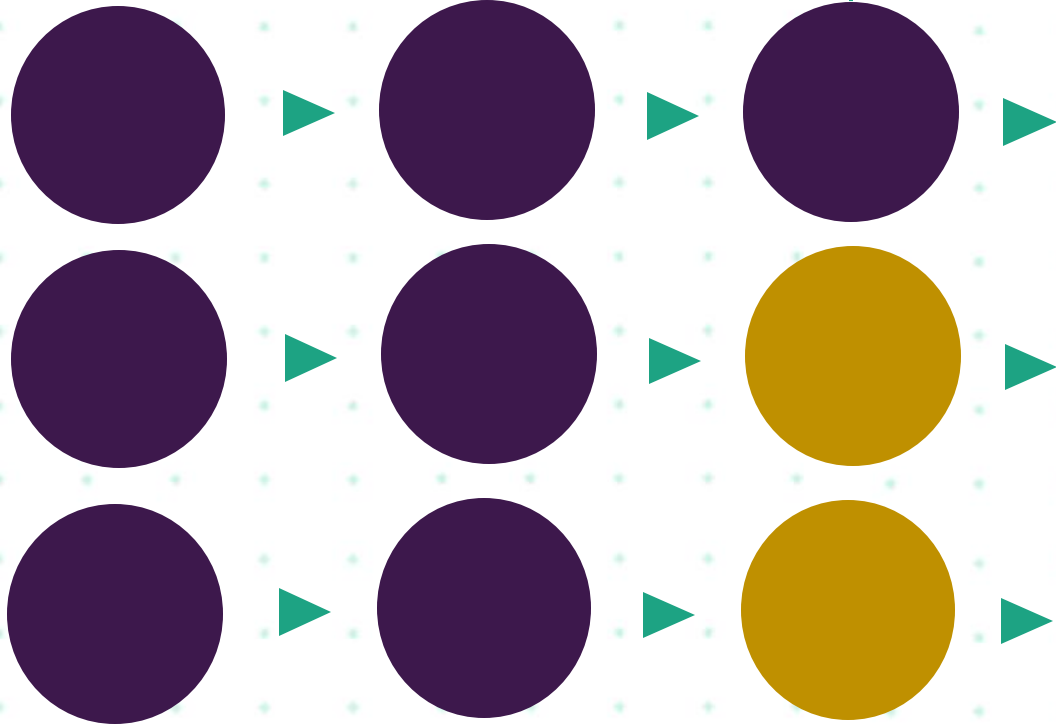
LLM capabilities in reasoning (established algorithms)

3

Multiple Chain of Thoughts (CoT-SC)

Key Novelty:
Harnessing multiple independent chains of thought

Input



Output



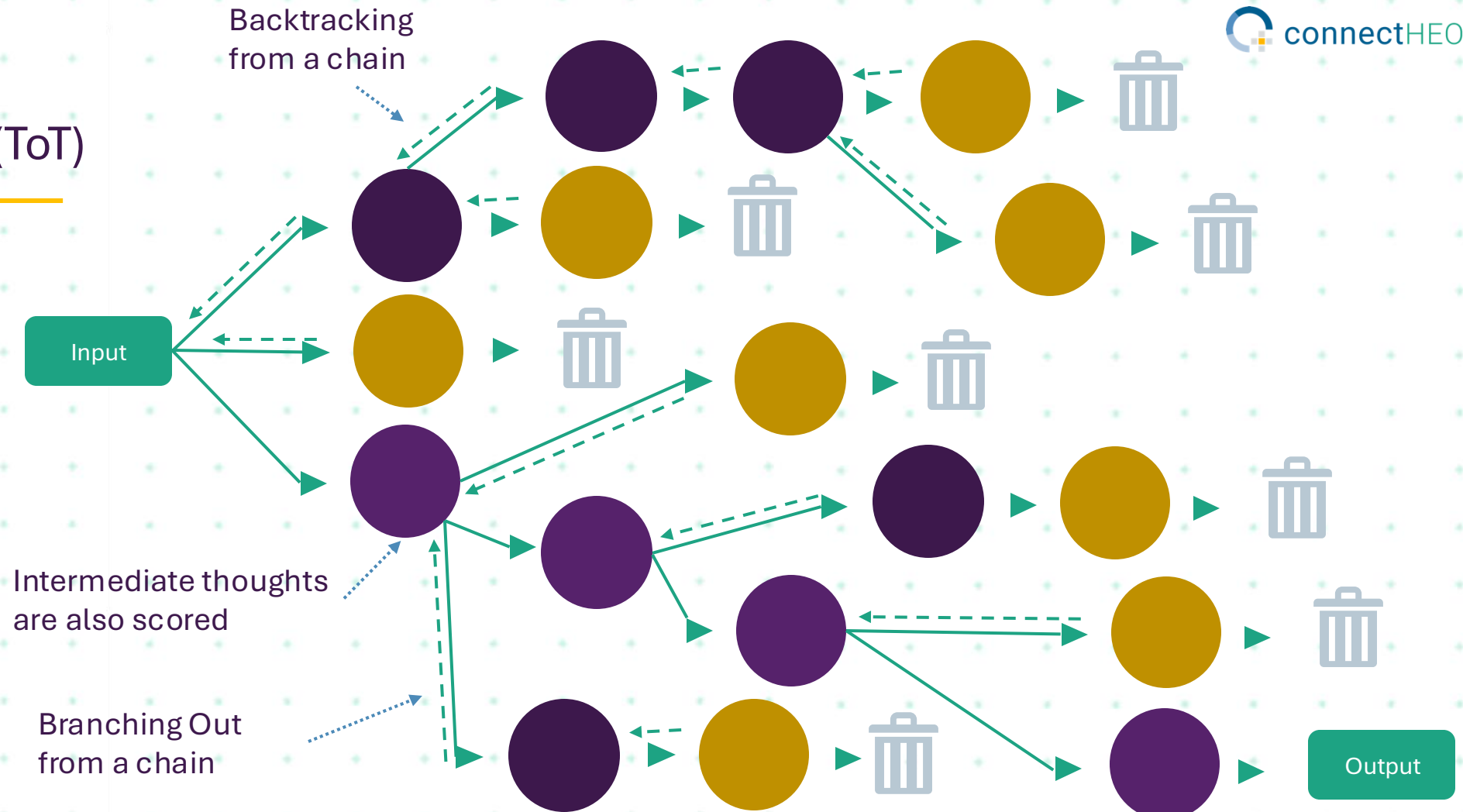
Abandon a chain

LLM capabilities in reasoning (established algorithms)

4

Tree of Thoughts (ToT)

Key Novelty (beyond CoT-SC): Generating several new thoughts based on a given arbitrary thought, exploring it further and possibly backtracking from it

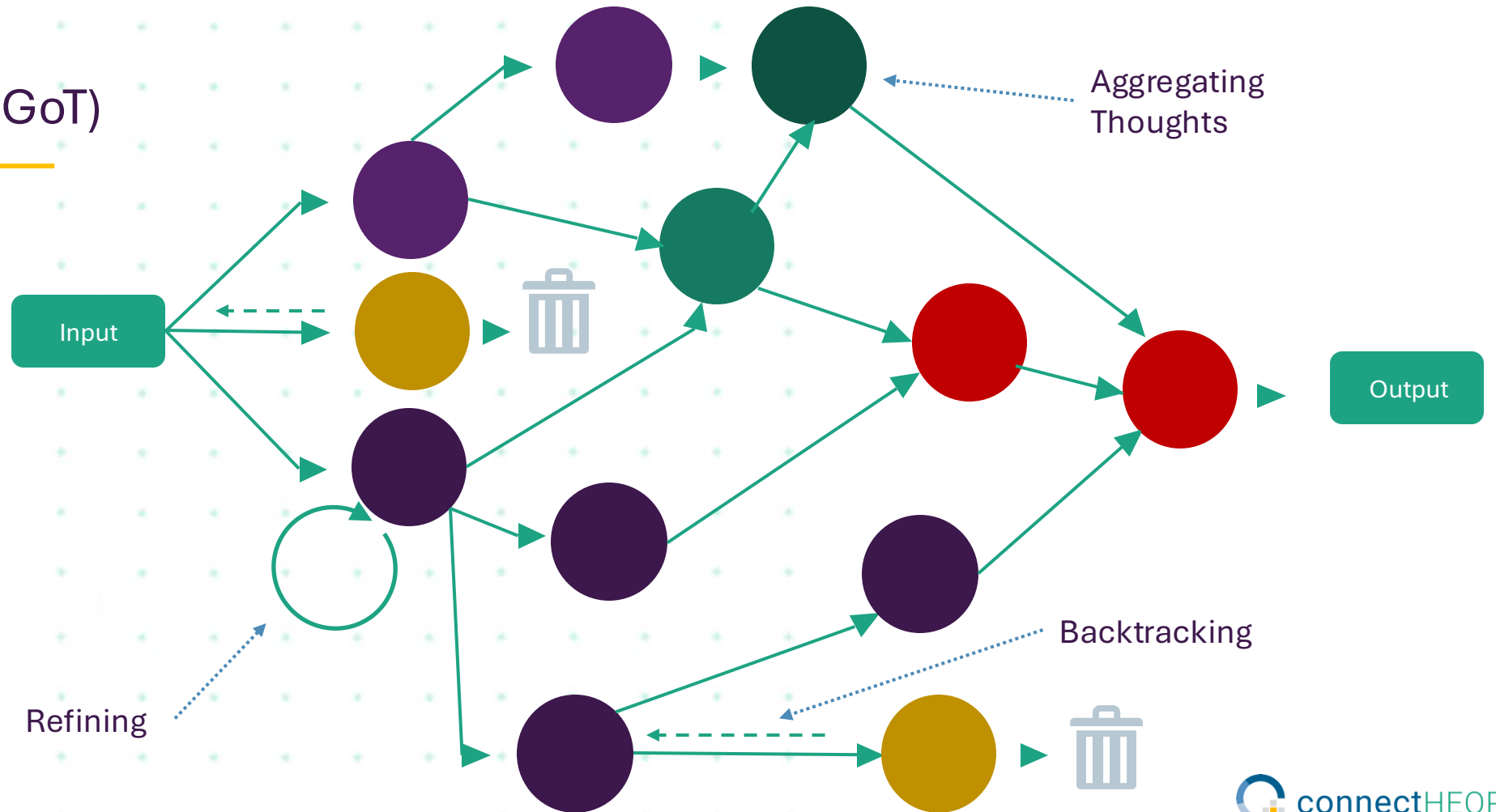


LLM capabilities in reasoning (established algorithms)

5

Graph of Thoughts (GoT)

Key Novelty (beyond ToT): Arbitrary graph-based transformations (aggregating thoughts into a new one, looping over a thought to refine it)





Introducing HEM-X™

HEM-X is powered by Gen-AI and Human Intelligence



Image Credits: Human and DALL-E

Why

Integrating Gen-AI with human expertise lacks a clear systematic approach. HEM-X is built to provide a structured, process-driven framework, ensuring **optimal use of AI and human expertise.**

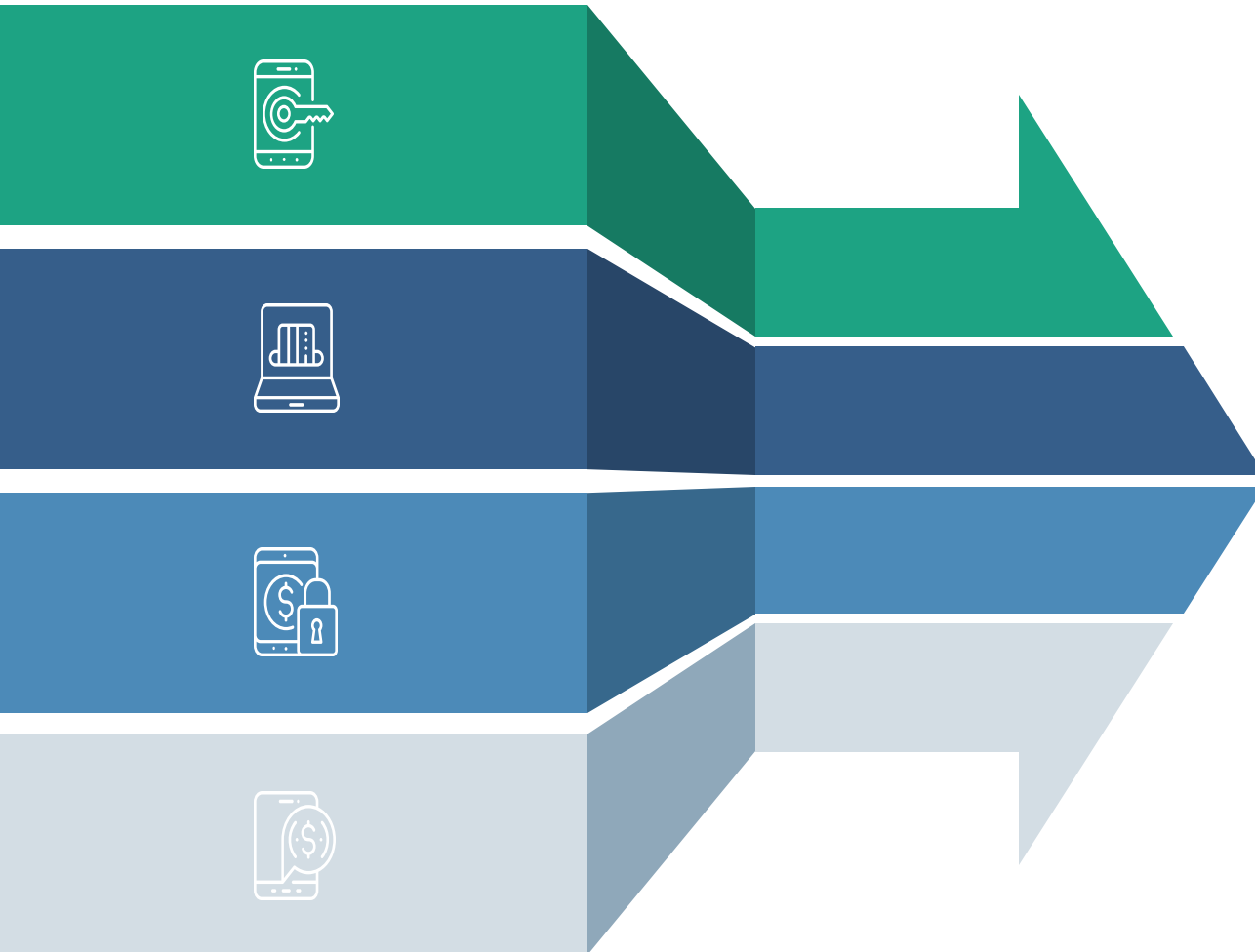
HEM-X is powered by Gen-AI and Human Intelligence



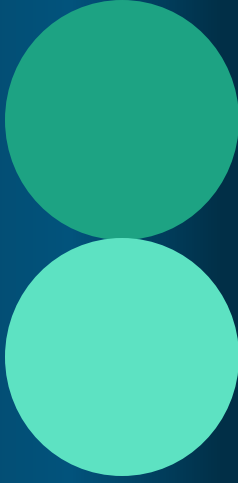
Image Credits: Human and DALL-E

HEM-X is your co-pilot for health economic model conceptualization

Highlighted Features



- ❑ **Accelerated and Balanced Modeling Workflow**
Speeds up model conceptualization with proprietary AI workflows (2-3 months of concepts development reduces to 1 week of task)
- ❑ **Transparent AI**
Generates traceable knowledge maps as powered by Graph-RAG, ensuring no black-box processes
- ❑ **Delivering outputs designed for target audience**
Disease process diagrams for clinicians; Detailed model structures and model design plan for HEOR teams; Easy-to-understand summaries for commercial teams; Plain English summary
- ❑ **Validation features**
Integrates human and sister-LLMs for validation at every stage with cross-comparison of multiple versions

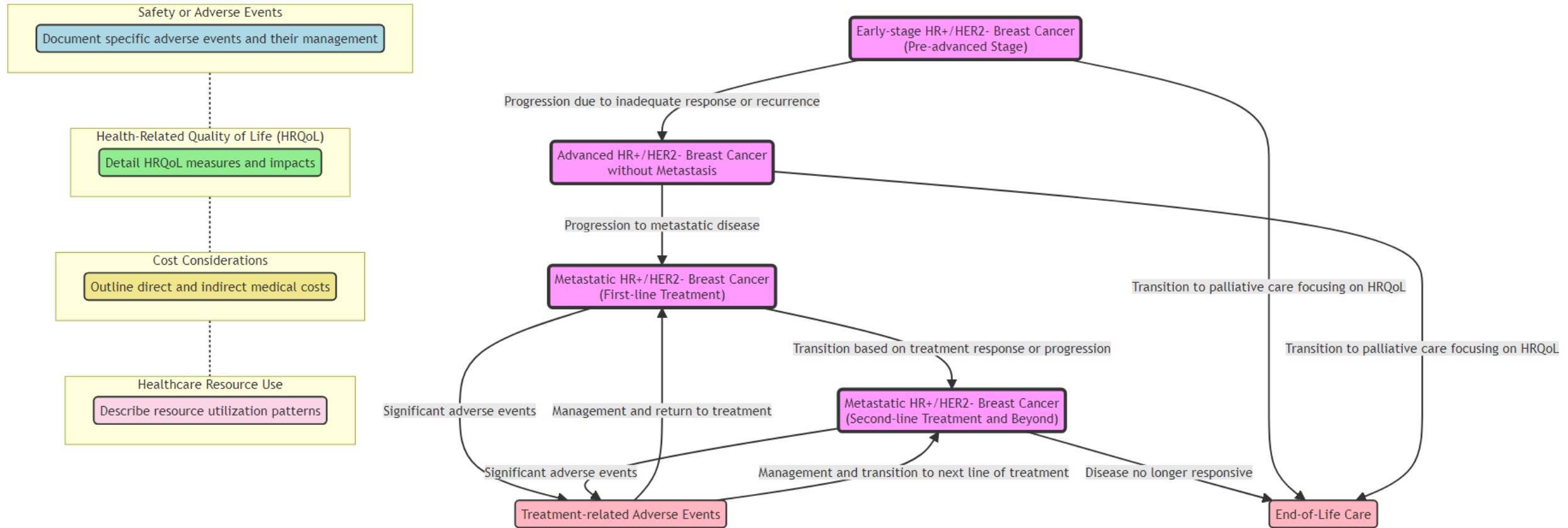


Let's walk the talk:

Case Studies on HEM-X™

Model Concept Mapping: CEM for metastatic Breast Cancer

Oncology Use Case
(relatively rich in data)



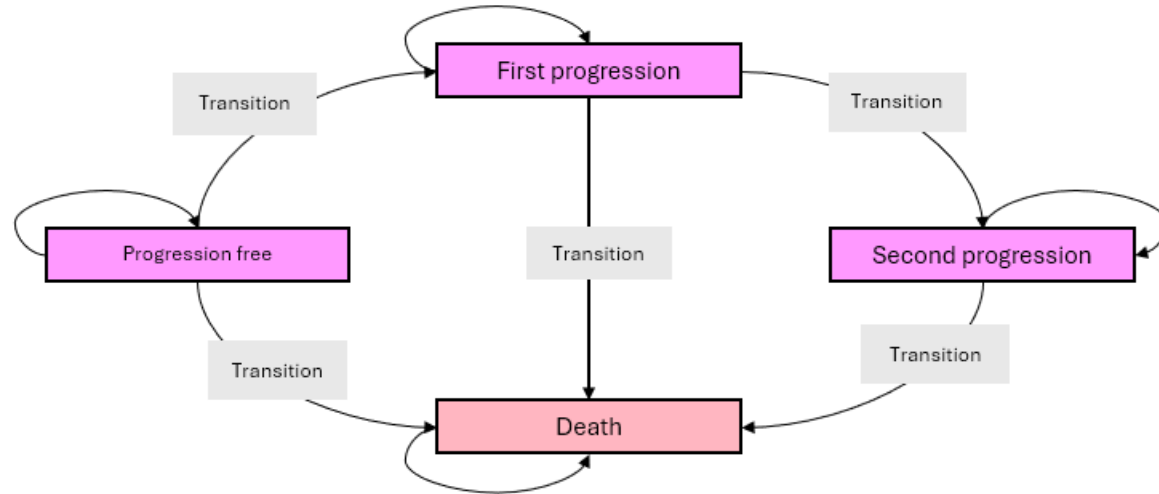
Model Structure Recommendation: CEM for metastatic Breast Cancer

Oncology Use Case
(relatively rich in data)

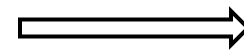
Model type recommended by HEM-X:

Four health states Markov Model

"Disease-Free," "First Progression," "Second Progression," and "Death," to capture the disease's natural history and the impact of treatment interventions.



Auto-programmed in HEM-X



With very high-level assumption, early cost-effectiveness analysis estimates for R+F vs F were:

Incremental QALY: 0.63
Incremental costs: \$520K

ICER (/QALY): \$825K

Compared to published Yang J et al (2020)

Incremental QALY: 0.47
Incremental costs: \$382K

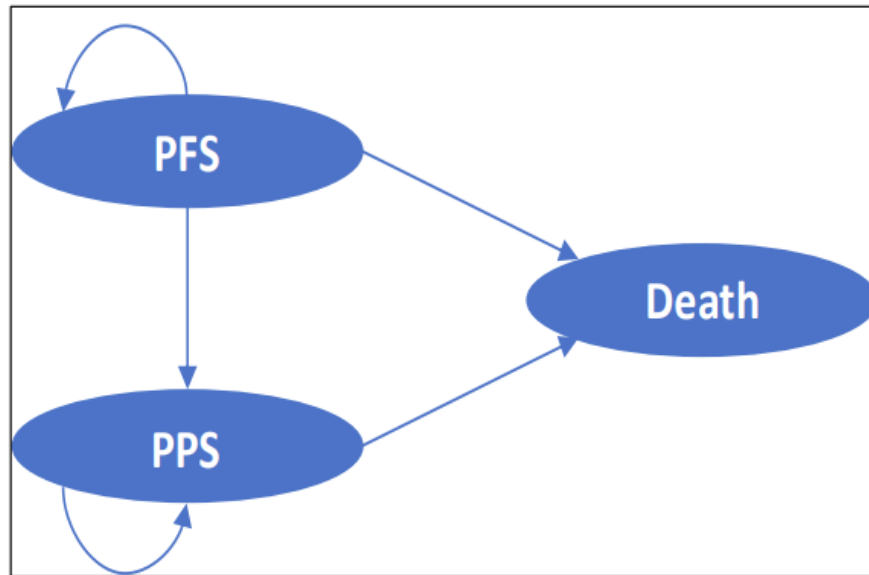
ICER (/QALY): \$813K

Cross-comparison with Published models

Model Schematic and Simulation approach

NICE TA 687

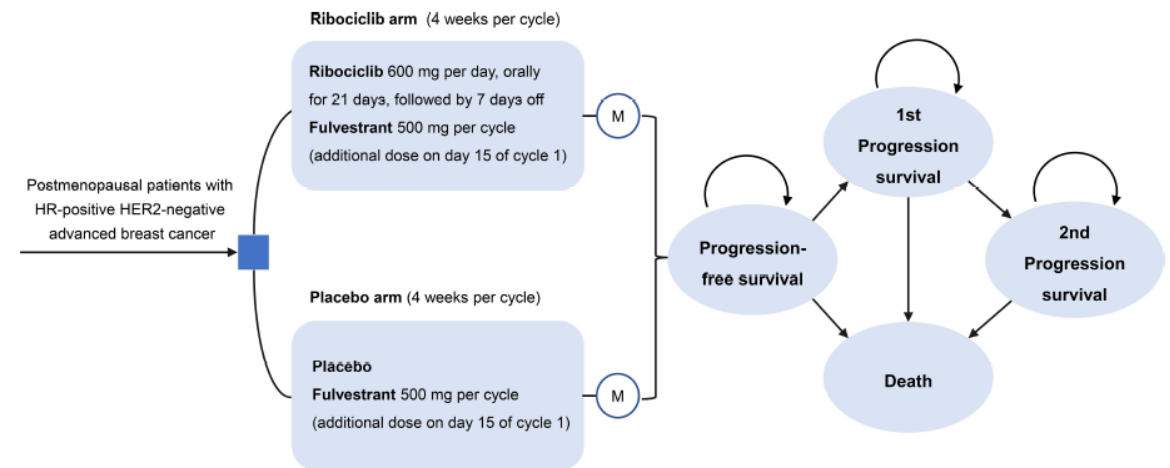
Markov model with three health states



PFS, progression-free survival; PPS, post-progression survival.

Yang J et al (2020)

Markov model with **four** health states

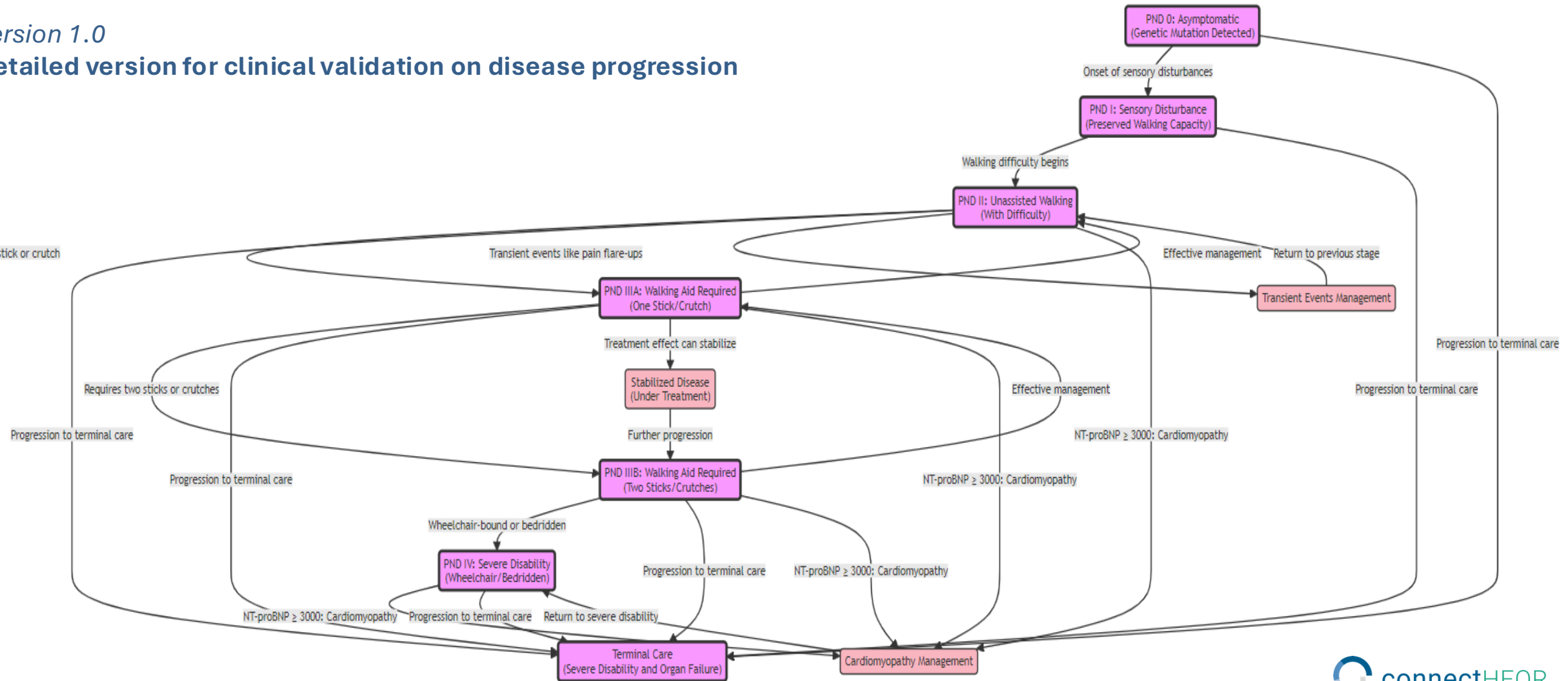


Model Concept Mapping: CEM for ATTR-Polyneuropathy

Rare Disease Use Case
(very less data available)

Version 1.0

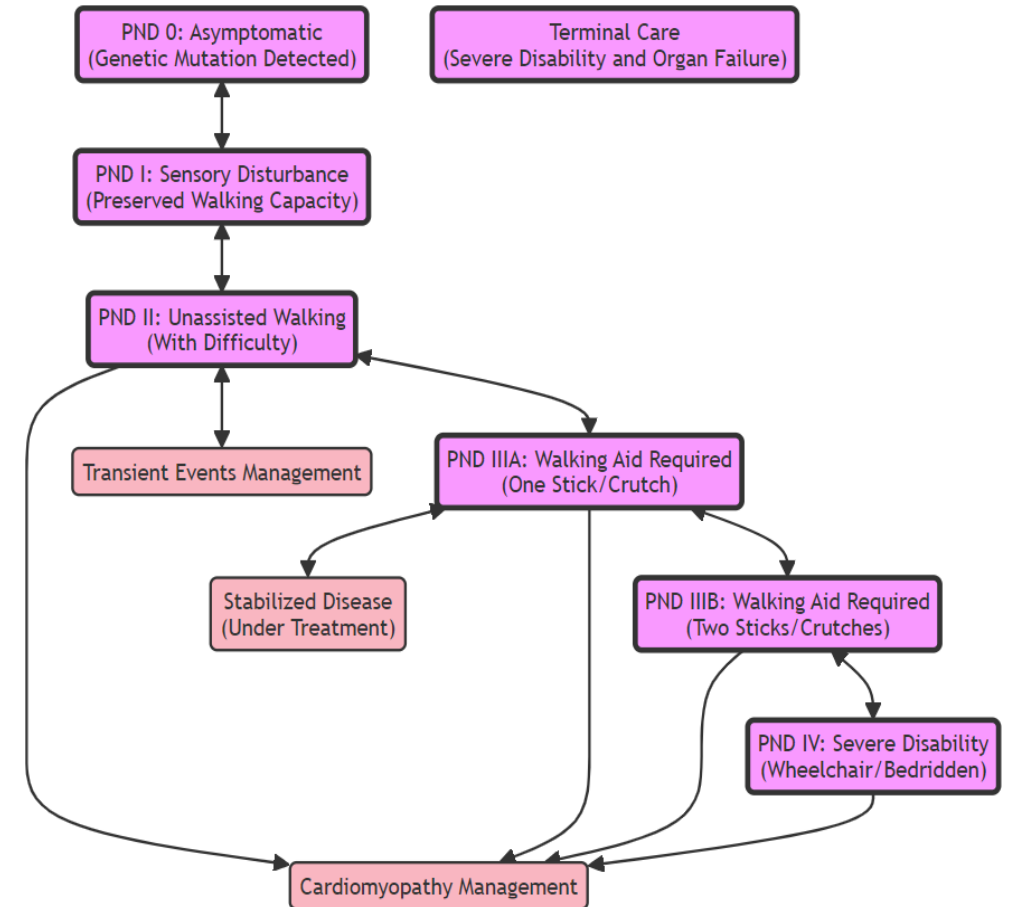
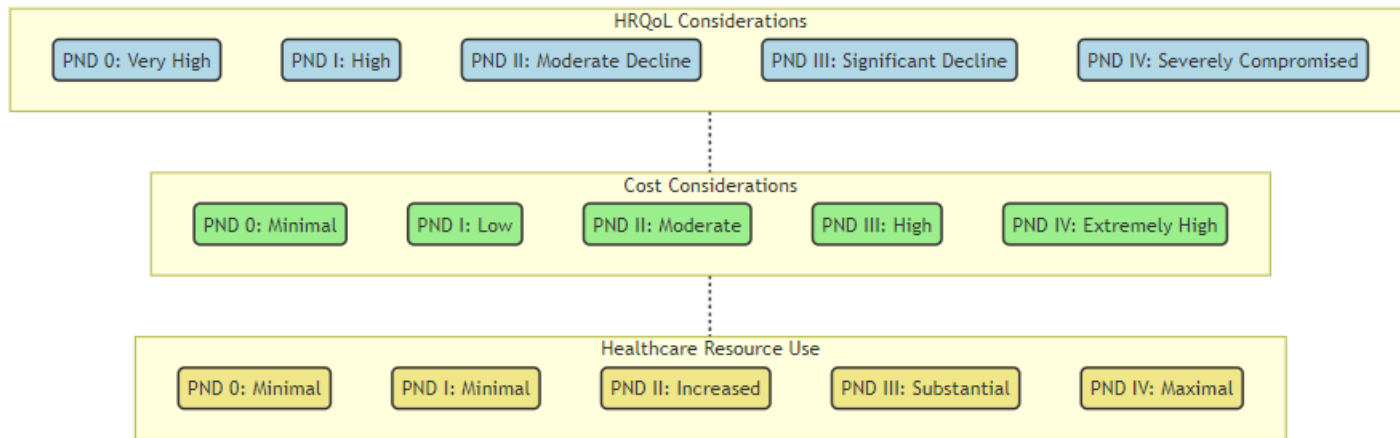
Detailed version for clinical validation on disease progression



Model Concept Mapping: CEM for ATTR-Polyneuropathy

Rare Disease Use Case
(very less data available)

Version 2.0
Simplified version for modelers for
health economic modeling



Time taken for this conceptualization exercise with HEM-X (including both human and AI efforts)

Specific Tasks Undertaken in this Case Study:

- Published clinical trial information and guidelines
- Run 1 of HEM-X (1 hour)
- First review by expert modeler and providing feedback to HEM-X
- Run 2 of HEM-X (1 hour)
- Additional peer-reviews by internal clinicians and modelers (not involved in the project)
- Final run of HEM-X (1 hour)
- Ready for discussion with KOLs

Output generated in every run: Model Concept Diagram, Model Structure Schematic, & Full Model Design Plan in MS-Word

Total time using HEM-X's optimally integrated AI-Human framework: 3 days — a significant reduction compared to the typical **3 months** required by a human-only modeler.

Model Design Plans by HEM-X

Rare Disease Use Case
(very less data available)

MDP Generated by Hem-X™(ConnectHEOR)

Cost-Effectiveness of RNAi therapy for the treatment of ATTR-PN

MDP Generated by Hem-X™(ConnectHEOR)

17 November 2024

Confidential 1

MDP Generated by Hem-X™(ConnectHEOR)

Introduction

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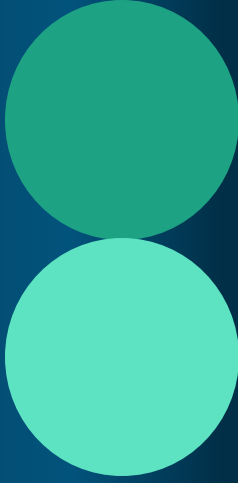
- Table 1: Summary of Clinical Trials and Outcomes
- Table 2: Economic Models and Their Parameters
- Table 3: Cost Inputs and Sources
- Table 4: Sensitivity Analysis Parameters

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- Figure 1: Disease Progression and Health States Diagram
- Figure 2: Model Structure and Patient Flow
- Figure 3: Cost-Effectiveness Plane

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~40 pages well-written MDP



Key Takeaways

Takeaways



? Is it possible to optimally integrate Generative-AI and Human Expertise?

Yes

? Is it possible to conceptualize health economic models using Generative-AI?

Yes

? Can we emulate human-like reasoning through Generative-AI?

Yes

? Can Generative-AI will replace human?

No. It is there to make human more efficient. Human-in-loop is must.

? Should we leverage Generative-AI in our HEOR workflows?

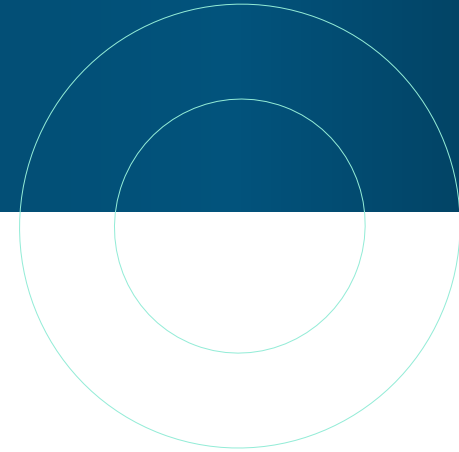
Yes. We should embrace this technology and evolve together.

What's Next?



Let's **unite to embrace Gen-AI—exploring the unexplored and proving that AI and humans can thrive together. With a shared mission, we can bring more proof-of-concepts to life, drive deployment, and create a transformative future for HEOR.**

Experience the Future Today at ISPOR EU 2024!



We warmly invite you to visit ConnectHEOR Booth #1400 to witness HEM-X and other groundbreaking tools live in action.



Thank You!



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Thank You!

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