



Applied Healthcare Cost-Effectiveness Analysis Training Course

9 – 13 August 2027
Rome

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Ref: 1419_204750 **Date:** 9 – 13 August 2027 **Location:** Rome **Fees:** 5700 Euro

Overview

Applied Healthcare Cost-Effectiveness Analysis Training Course is a one-week course for healthcare finance leaders, health economists, planners, commissioning teams, quality leaders, analysts, and clinical service managers who leave with a Healthcare Cost-Effectiveness Decision Dossier. Participants connect healthcare cost-effectiveness analysis, economic evaluation, cost-utility analysis, incremental cost-effectiveness analysis, and probabilistic sensitivity analysis with model design, uncertainty, equity, budget context, and reporting. Agile Leaders Training Center presents healthcare economic evaluation as a transparent decision-support discipline.

Who Should Attend

- Healthcare finance functions responsible for costs, resource use, and investment evidence
- Health economics functions responsible for evaluation design, modeling, and uncertainty analysis
- Planning and commissioning functions responsible for comparing service and technology alternatives
- Quality functions responsible for outcomes, evidence appraisal, and decision transparency
- Analytical functions responsible for data inputs, assumptions, calculations, and reporting
- Clinical service management functions responsible for pathway context and implementation implications

The course assumes participants already work with healthcare evidence, finance, planning, analysis, or service decisions and leaves out introductory statistics, software programming, jurisdiction-specific reimbursement rules, and professional certification preparation.

Departments and Industries

The course supports departments and industries responsible for evaluating healthcare choices and communicating resource-allocation evidence.

- Hospitals, clinics, and integrated care networks
- Healthcare finance, planning, commissioning, and strategy departments
- Health technology, pharmaceutical, diagnostic, and medical device organizations
- Insurance, payer, and care-management services
- Public health, humanitarian health, and nonprofit health organizations
- Research, consulting, and academic health-economics teams



Learning Objectives

By the end of this course, participants will be able to:

- Analyze decision problems, perspectives, comparators, and populations
- Build pathway and economic model blueprints
- Use cost, resource, outcome, and utility evidence
- Apply incremental and sensitivity analysis methods
- Evaluate uncertainty, equity, budget context, and limitations
- Design transparent reports and decision briefings

Course Agenda

Day 1: Decision Problem and Evaluation Design

- Decision-Problem Specification and Scope Canvas
- Population, Intervention, Comparator, and Outcome Matrix
- Perspective and Stakeholder Impact Map
- Time-Horizon and Discounting Assumption Log
- Healthcare Pathway and Decision-Context Diagram

Day 2: Costs, Outcomes, and Model Structure

- Cost and Resource-Use Evidence Register
- Health Outcome and Utility Evidence Table
- Decision-Tree Structure Blueprint
- State-Transition Model Design Map
- Parameter Source and Validation Checklist

Day 3: Incremental Analysis and Uncertainty

- Incremental Cost and Outcome Calculation Worksheet
- Incremental Cost-Effectiveness Ratio Interpretation Guide
- Deterministic Sensitivity Analysis Plan
- Probabilistic Sensitivity Analysis Specification
- Scenario and Structural Uncertainty Register

Day 4: Interpretation, Appraisal, and Reporting

- Cost-Effectiveness Plane and Acceptability Brief
- Equity and Budget-Context Interpretation Note
- Economic Model Critical-Appraisal Checklist
- CHEERS 2022 Reporting Alignment Matrix
- Decision Evidence and Limitations Briefing Pack



Day 5: Cost-Effectiveness Analysis Practice

- Exercise: Define the Decision Problem and Comparator Set
- Exercise: Build the Pathway and Model Structure
- Exercise: Calculate Incremental Results and Key Drivers
- Exercise: Test Uncertainty and Interpret Decision Context
- Capstone Exercise: Healthcare Cost-Effectiveness Decision Dossier

Practical Exercises

The course uses suggested activities drawn from hospitals, health technologies, insurance, public health, and service redesign.

- Suggested activity: specify a decision problem, perspective, population, alternatives, outcomes, horizon, and pathway context.
- Suggested activity: organize cost, resource, outcome, utility, and parameter evidence into a model blueprint.
- Suggested activity: calculate incremental results and test parameter, scenario, and structural uncertainty.
- Suggested activity: assemble interpretation, equity, budget context, reporting checks, and limitations in the capstone dossier.

FAQs

Who suits applied healthcare cost-effectiveness analysis training, and what does it assume?

Applied healthcare cost-effectiveness analysis training suits experienced professionals who compare healthcare choices and already work with evidence, costs, outcomes, planning, modeling, commissioning, quality, or service management.

How does healthcare cost-effectiveness analysis differ from budget impact analysis?

Healthcare cost-effectiveness analysis compares incremental costs with incremental outcomes over an appropriate horizon, while budget impact analysis focuses on the financial consequences of adoption for a defined budget and period.

How should an incremental cost-effectiveness ratio be interpreted?

An incremental cost-effectiveness ratio should be interpreted with the decision problem, comparator, perspective, evidence, model assumptions, uncertainty, equity considerations, budget context, and effects not captured in the calculation.



Why does healthcare economic evaluation require sensitivity analysis?

Healthcare economic evaluation requires sensitivity analysis to test how parameter uncertainty, structural choices, scenarios, and evidence selection influence results and the conclusions drawn from them.

What does CHEERS 2022 add to healthcare economic evaluation?

CHEERS 2022 adds a structured reporting checklist that supports transparent description of context, alternatives, methods, results, uncertainty, and interpretation; it does not replace methodological appraisal.

Conclusion

The course connects evaluation design, pathways, models, costs, outcomes, incremental analysis, uncertainty, equity, budget context, appraisal, and reporting. Participants take back a Healthcare Cost-Effectiveness Decision Dossier. The dossier changes decision practice by making assumptions, evidence, calculations, uncertainties, limitations, and interpretation explicit and reviewable.