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2 EMA/410962/2017 Rev.6

3 **Guidance on Parallel EMA/EUnetHTA 21 Joint Scientific**
4 **Consultation**
5

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European Medicines Agency
Domenico Scarlattilaan 6 •
1083 HS Amsterdam • The Netherlands

Telephone +31 (0)88 781 6000
Email info@ema.europa.eu
Website www.ema.europa.eu

EUnetHTA 21 JSC Secretariat
Gemeinsamer Bundesausschuss (G-BA)
Gutenbergstr. 13 •
10587 Berlin • Germany

Telephone +49 (0)30 27 58 38 255
Email EUnetHTA21-JSC@g-ba.de
Website www.eunetha.eu

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37 **Abbreviations**

38	AEMPS	Agencia Española de Medicamentos y Productos Sanitarios
39	AIFA	Agenzia Italiana del Farmaco, Italy
40	ATMPs	Advanced Therapy Medicinal Products
41	CAT	Committee for Advanced Therapies
42	CHMP	Committee for Medicinal Products for Human Use
43	COMP	Committee for Orphan Medicinal Products
44	CSCQ	Committee for Scientific Consistency and Quality
45	CSCQ JSC	Joint Scientific Consultation Committee for Scientific Consistency and Quality
46	EC	European Commission
47	EU	European Union
48	EMA	European Medicines Agency
49	EUnetHTA 21	European Network for Health Technology Assessment 2021
50	G-BA	Gemeinsamer Bundesausschuss, Germany
51	HAS	Haute Autorité de Santé, France
52	HCP	Health Care Professional
53	HOG	Hands-On Group
54	HTA	Health Technology Assessment
55	HTAbs	Health Technology Assessment bodies
56	HTAR	HTA regulation
57	HTD	Health technologies developer
58	INFARMED	National Authority of Medicines and Health Products, I.P., Portugal
59	JA	Joint Actions
60	JSC	Joint Scientific Consultation
61	JSC HOG	Joint Scientific Consultation Hands-On Group
62	KCE/KCE-NIHDI	Centre fédéral d'expertise des soins de santé – Belgian Health Care Knowledge
63		Centre (KCE)
64	LoI	List of Issues
65	MAA	Marketing Authorisation Application
66	NCA	National Competent authority
67	NCPE	National Centre for Pharmacoeconomics (Ireland)
68	NIPN	National Institute of Pharmacy and Nutrition, Hungary
69	NOMA	Norwegian Medicines Agency

70	PICO	Approach used in evidence-based medicine to define e.g. Population –
71		Intervention – Comparator(s) – Outcome(s)
72	PSA	Parallel Scientific Advice
73	PLEG	Post Licensing Evidence Generation
74	PRAC	Pharmacovigilance Risk Assessment Committee
75	SAWP	Scientific Advice Working Party
76	SEED	Shaping European Early Dialogues
77	SME	Small or Medium Enterprises
78	TC	Teleconference
79	TLV	Tandvårds- och läkemedelsförmånsverket (Sweden)
80	ZIN	Zorginstituut Nederland (The Netherlands)
81		

82 **1 History of changes**

83 This guidance replaces the “Guidance for Parallel Consultation” (EMA/410962/2017 Rev. 5) as of the date
84 of publication.

85 Key modifications in this version compared to EMA/410962/2017 Rev.3 include:

- 86 – The Written-only meeting format has been suspended for the current Open Call within
87 EUnetHTA 21 (all partners will continue to collaborate and discuss future options for different
88 meeting formats besides discussion meeting format;
- 89 – Transformation of the early dialogue working party (EDWP) into Committee for Scientific
90 Consistency and Quality for Joint Scientific Consultation (CSCQ JSC), update of the definition and
91 composition of the CSCQ JSC and of the information regarding the EUnetHTA 21 JSC Secretariat;
- 92 – Renaming “parallel consultation” to “parallel EMA/EUnetHTA 21 Joint Scientific Consultation”.

93 Modifications in the version EMA/410962/2017 Rev.6 compared to EMA/410962/2017 Rev.5 include only
94 minor changes such as a clarification on the discussion meetings that are held virtually at the moment.
95 Discussions on PLEG can be facilitated only in conjunction with request for discussion of pivotal trial
96 design and when contextualized with clinical data from the pivotal (phase II/III) studies. Also, there is
97 no option for a follow-up consultation with EUnetHTA 21 during the EUnetHTA 21 project phase.

98 **This latest version EMA/410962/2017 Rev.6 results from the final update of JSC documents during**
99 **EUnetHTA 21 according to the project plan. In this framework a public consultation with stakeholders**
100 **will be performed from 1-31 July 2023. Comments received will be taken into account wherever feasible**
101 **to finalise this EUnetHTA 21 output document.**

102

103

104 **2 Introduction**

105 As the first step to market access, a new medicine requires a marketing authorisation from a medicines
106 regulatory agency. Following regulatory approval, Health Technology Assessment (HTA), providing
107 evidence-based information and analysis, takes place at the national level in accordance with national
108 practices and legislative frameworks¹. HTA is then used to inform subsequent decisions on coverage
109 (reimbursement) and price of an authorised drug at the national level.

110 Interactions between medicines’ developers, Regulators and Health Technology Assessment bodies
111 (HTAbs) or other possible stakeholders to discuss the development plan at an early stage of a medicinal
112 product’s clinical development means that robust evidence can be generated during pre-approval studies
113 to meet the needs of respective decision-makers as efficiently as possible. Thus, a strong interaction
114 between Regulators and HTAbs/other relevant stakeholders is critical to facilitate patients’ access to
115 important new medicines with added value and hence for the overall benefit of public health.

116 The European Medicines Agency (EMA) is the EU body responsible for coordinating the existing regulatory
117 and scientific resources put at its disposal by EU Member States for the evaluation, supervision and
118 pharmacovigilance of medicinal products, including the provision of Scientific Advice for regulatory
119 purposes.

120 The European Network for Health Technology Assessment (EUnetHTA) was established to create an
121 effective and sustainable network for HTA across Europe – working together to develop reliable, timely,
122 transparent and transferable information to contribute to HTA in European countries, creating a
123 sustainable system of HTA knowledge sharing, and promoting good practice in HTA methods and

¹ Development of archetypes for non-ranking classification and comparison of European National Health Technology Assessment systems.
Allen et al. Health Policy 2013, Volume 113, Issue 3, December 2013, Pages 305–312

124 processes. In February 2021, a call for tender was launched to foster joint HTA work supporting EU
125 cooperation on HTA beyond May 2021 (when the EU co-funded EUnetHTA Joint Action 3 ended), thus
126 providing relevant input to the new legal framework on HTA. The contract was awarded to the
127 EUnetHTA 21 Consortium in September, 2021. It provides for a maximum of 8 (and not less than 6)
128 Joint Scientific Consultations (JSCs; formerly called Early Dialogues) for medicinal products. The
129 EUnetHTA 21 partners continue to collaborate with EMA on a more efficient procedure while ensuring
130 the best scientific quality and coordination. The medium-term goal is to establish a regular, legally
131 acceptable solution (respecting confidentiality and conflict of interest rules) to share JSC
132 recommendations with the team producing Joint Clinical Assessment (JCA).

133 **EUnetHTA 21 and EMA platform on evidence generation interactions**

134 This platform comprises enhanced collaboration for Parallel regulatory/HTA Scientific Advice between
135 EMA and EUnetHTA 21 (henceforward referred to as Parallel EMA/EUnetHTA 21 Joint Scientific
136 Consultation (JSC)). Parallel EMA/EUnetHTA 21 JSC provides a single gateway for requests for parallel
137 discussions before the start of pivotal clinical trials on initial evidence generation for Marketing
138 Authorisation Application/Reimbursement, and Post Licensing Evidence Generation (PLEG, only in
139 conjunction with a request for discussion of pivotal trial design) involving EMA and EUnetHTA 21 HTAbs.
140 Partnership between EMA and EUnetHTA 21 also allows for: streamlined logistics, improved HTA
141 coordination through EUnetHTA 21 JSC Secretariat, greater participation via the involvement of
142 EUnetHTA 21 CSCQ JSC², and maximum gain from the parallel procedure by optimising opportunities for
143 mutual understanding between Regulators and HTAs. This promotes optimal and robust evidence
144 generation fit-for-purpose for both Regulators and HTAbs, ultimately bringing benefits for public health
145 by enabling access to medicines which are effective to European patients as the ultimate goal.

146 For all submitted requests, the EUnetHTA 21 JSC Secretariat facilitates centralised HTA recruitment.

147 All Parallel Scientific Advices will be conducted through this Parallel Consultation Platform.

148

149

150 **3 Principles**

151 **3.1 Roles and remits**

152 This guidance highlights ideal timelines and actions for each party undertaking a Parallel
153 EMA/EUnetHTA 21 JSC.

154 This is a multi-stakeholder procedure with EMA and HTAbs being equal partners. As a multi-stakeholder
155 procedure, collaboration and communication between all stakeholders are important to ensure
156 agreement and clarity on the ownership of different actions, and to deliver on the objectives of the
157 exercise.

158 Each participating body should adhere to the roles and responsibilities under their respective remit.

159 **3.2 Confidentiality**

160 By submitting a request for a Parallel EMA/EUnetHTA 21 JSC, the Applicant agrees to the exchange of
161 information between EMA and participating EUnetHTA 21 HTAbs.

162 The Parallel EMA/EUnetHTA 21 JSC process is confidential.

2 Composition of the CSCQ JSC: AEMPS (Spain), AIFA (Italy), G-BA (Germany), HAS (France), INFARMED (Portugal), KCE/KCE-NIHDI (Belgium), NCPe (Ireland), NIPN (Hungary), NOMA (Norway), TLV (Sweden) and ZIN (Netherlands).

163 EMA and associated regulatory experts are bound by the EMA code of conduct, and confidentiality
164 agreements, and operate under the EMA policy on access to documents (Policy/0043).

165 EUnetHTA 21 prioritises confidentiality and each HTAb participant and associated expert, e.g. patients
166 and healthcare professionals (HCP), is required to submit a signed EUnetHTA 21 [Confidentiality](#)
167 [Agreement](#).

168 Therefore, commercially confidential information provided to the EMA and EUnetHTA 21 within the
169 context of a Parallel EMA/EUnetHTA 21 JSC is not shared with any party before authorisation outside of
170 the respective EMA and HTA networks in the absence of a signed confidentiality undertaking or the
171 consent of the sponsor.

172 **3.3 Conflict of interest**

173 EMA: Conflict of interest of regulatory experts, HCP and patients is handled in line with Policy 44.

174 EUnetHTA 21: Conflict of interest of EUnetHTA 21 partner HTAbs, HCP and patients is handled through
175 the EUnetHTA 21 [Declaration of Interest \(DOI\) form](#). Further information can be found in the
176 EUnetHTA 21 [Procedure Guidance for handling Declaration of Interest \(DOI\) form and EUnetHTA 21](#)
177 [Confidentiality Agreement \(ECA\) forms](#).

178 **3.4 Status of Parallel EMA/EUnetHTA 21 Joint Scientific Consultation** 179 **outputs**

180 As an outcome of the Parallel EMA/EUnetHTA 21 JSC procedure, health technologies developers (HTDs)
181 will receive the EMA Scientific Advice Letter and the EUnetHTA 21 Final Written Recommendations.

182 The advice provided by each stakeholder is not legally binding.

183 European Medicines' Regulators take the Committee for Medicinal Products for Human Use (CHMP)
184 Scientific Advice/Protocol Assistance provided into consideration during the Marketing Authorisation
185 Application (MAA). The Applicant needs to fully justify any deviations from the advice given. Please, see
186 the EMA Scientific Advice Guidance document for further details.

187 Advice provided by EUnetHTA 21 partners is based on the documentation provided by the Applicant. The
188 recommendation reflects the state-of-the-art of medical science and national requirements at the time
189 of advice.

190

191

192 **4 Actors and scope**

193 The process described herein is only for Parallel EMA/EUnetHTA 21 JSC jointly involving EMA and
194 EUnetHTA 21. For regulatory-only, please see EMA website and for Parallel EMA/EUnetHTA 21 JSC please
195 refer to the EUnetHTA 21 Open Call ([EUnetHTA 21 JSC website](#)).

196 The Applicant must ensure that if different consultation formats are used consecutively (e.g. regulatory
197 advice before parallel JSC), the content of the consultation does not lead to a duplication of the advice
198 for participating agencies.

199 The uncertainties associated with an early developmental stage of a new medicinal product are
200 acknowledged. However, to enable for a proper planning for all parties, it is requested by the Applicant
201 to make any effort possible to ensure the continuation of a JSC process once initiated. In the exceptional
202 cases where the continuation cannot be achieved, a heads-up as early as possible to both EMA and
203 EUnetHTA 21 is mandatory. Given the tight timelines in preparation of a JSC, it is not guaranteed that a
204 re-planning is successful by that time.

205

206 **4.1 Regulators: actors and scope**

207 The Scientific Advice Working Party (SAWP) is an EMA standing working party with the remit of providing
208 Scientific Advice and Protocol Assistance to Applicants, advising on the conduct of the various tests and
209 trials necessary to demonstrate the quality, safety and efficacy of medicinal products (See "Mandate,
210 objectives and rules of procedure of the Scientific Advice Working Party (SAWP)"
211 (EMA/CHMP/SAWP/69686/04 Rev 14).

212 The SAWP Rapporteur is a medicines regulator and a member, or alternate member, of SAWP who is
213 responsible for providing reports further to the Scientific Advice or Protocol Assistance requests,
214 addressing comments from the SAWP, Working Parties, and EMA Committees, drafting the SAWP List of
215 Issues (LoI), acting as one of the 2 co-chairs for the discussion meeting, and drafting the final report for
216 further input and consideration by SAWP and EMA Committees.

217 The EMA Scientific Officer supports the SAWP Rapporteurs with scientific and administrative coordination.
218 This is the principal EMA contact person to be reached, along with the EMA Procedure Assistant, by the
219 Applicant and EUnetHTA 21 for matters related to an individual procedure.

220 The EMA Scientific advice secretariat informs the EUnetHTA 21 JSC Secretariat who has been appointed
221 as EMA Scientific Officer after receiving the submission via IRIS, while the applicant will be informed
222 automatically by the IRIS system. EMA sends an EMA contact sheet to the EUnetHTA 21 JSC Secretariat
223 including all details for regulator participants (i.e. SAWP Rapporteurs, EMA Scientific Officer, assistant
224 and other contacts, if applicable) as soon as available.

225 For the EMA, through the Parallel Consultation, the Scientific Advice or Protocol Assistance provided to
226 the Applicant is substantive, is prepared pursuant to Article 57 (1.n) of Regulation (EC) No 726/2004)
227 and is adopted by CHMP having been elaborated through the SAWP.

228 Applicants may request advice on any medicinal products for use in humans, (as defined in Directive
229 2001/83 (as amended)), irrespective of the medicinal product's eligibility for the centralised procedure,
230 and at any stage of the product lifecycle. This may include very early strategic advice, advice on novel
231 development plans, broad advice, plans for pivotal phase III studies, post-authorisation safety and
232 efficacy studies, advice on the development of registries, or risk management planning incorporating
233 risk minimisation measures.

234 **4.2 EUnetHTA 21 and HTAbs: actors and scope**

235 The CSCQ JSC is a standing committee composed of 11 national HTAbs as permanent members i.e.
236 AEMPS for Spain, AIFA for Italy, G-BA for Germany, HAS for France, INFARMED for Portugal, KCE/KCE-
237 NIHDI for Belgium, NCPE for Ireland, NIPN for Hungary, NOMA for Norway, TLV for Sweden and ZIN for
238 the Netherlands. The CSCQ JSC is the standing working party of the HTAbs for the performance of the
239 scientific advice and is responsible for the following tasks:

- 240 - Assess the eligibility of advice requests in view of the selection criteria, as specified in section
241 4.3.2 as well as in the Open Call for Participation, and report to the JSC Secretariat on the
242 eligibility and acceptance of the scientific advice requests;
- 243 - Participate in the performance of the JSC;
- 244 - Validate all deliverables and give feedback;
- 245 - Function as a mediation body in cases where a hands-on (HOG) group cannot reach agreement.
246 The JSC Hands-on Group (JSC HOG) represents all partners involved in a specific JSC.

247 The JSC HOG represents all partners involved in a specific JSC. The participation of a minimum of six
248 CSCQ JSC member HTAbs is required. A EUnetHTA 21 Assessor and Co-Assessor will be assigned for
249 each JSC from among the JSC HOG.

250 The EUnetHTA 21 Assessor undertakes scientific coordination on behalf of HTABs. For all procedures, the
251 Assessor facilitates discussion between HTABs in advance of meetings, interacts with the EMA during
252 joint meetings and acts as a co-chair for the HTABs during the discussion meeting. The Assessor is
253 responsible for drafting the EUnetHTA 21 List of Issues (LoI), acting as one of the two co-chairs for the
254 discussion meeting with the Applicant, drafting the recommendations for further input and consideration
255 by JSC HOG as well as CSCQ JSC and providing EUnetHTA 21 Final Written Recommendations to the
256 Applicant addressing comments from the JSC HOG as well as the CSCQ JSC.

257 The EUnetHTA 21 Co-Assessor collects and consolidates responses from the JSC HOG and presents
258 consolidated HTAB answers during the discussion meeting together with the Assessor. The Co-Assessor
259 interacts with the Assessor and EMA on scientific matters. The EUnetHTA 21 Co-Assessor supports the
260 Assessor in the different tasks listed before.

261 The EUnetHTA 21 JSC Secretariat is responsible for all practical coordination of HTAB participation in a
262 Parallel EMA/EUnetHTA 21 JSC. Together with the EMA Scientific Officer, on the regulatory side, the
263 EUnetHTA 21 JSC Secretariat acts as the sole HTAB contact point for all Parallel EMA/EUnetHTA 21 JSCs.
264 Additionally, the EUnetHTA 21 JSC Secretariat is responsible for insuring the receivability of a request
265 and all project management on the HTAB side. Finally, the EUnetHTA 21 JSC Secretariat is responsible
266 for engaging patients and HCPs at the European level to provide expert input regarding HTA relevant
267 aspects related to i.a. the condition, treatment and expectations of patients and the proposed
268 development. Parallel EMA/EUnetHTA 21 JSC focuses on advice before the start of pivotal clinical trials
269 on initial evidence generation for MAA/HTA assessment and PLEG. However, discussions on PLEG can be
270 facilitated only in conjunction with request for discussion of pivotal trial design and when contextualized
271 with clinical data from the pivotal (phase II/III) studies.

272 **4.3 HTAB involvement in Parallel EMA/EUnetHTA 21 Joint Scientific** 273 **Consultation**

274 **4.3.1 Open Call**

275 The EUnetHTA 21 JSC Secretariat published Open Calls for applications for Parallel EMA/EUnetHTA 21
276 JSC. In order to apply for a JSC, HTDs should complete the EUnetHTA 21 JSC application form available
277 on the EUnetHTA website or upon request (EUnetHTA21-JSC@g-ba.de) and submit their application and
278 annexes (if applicable) via Eudralink to the EUnetHTA 21 JSC Secretariat (EUnetHTA21-JSC@g-ba.de).
279 The Applicant's request for an EMA/EUnetHTA 21 JSC should provide sufficient information to
280 substantiate the claimed basis for selection and follow the guidance notes provided with the form. In all
281 cases, selection criteria of the HTA regulation (HTAR) will apply (see 4.3.2). Once the call is closed, the
282 CSCQ JSC members will review the applications.

283 EUnetHTA 21 reserves the right to contact the Applicant in order to discuss their request.

284 There is no option for a follow-up consultation with EUnetHTA 21 during the project phase. All relevant
285 questions must be submitted for a single JSC application.

286 All Applicants will be informed of the CSCQ JSC decision within three weeks after termination of the call.
287 The EUnetHTA 21 JSC Secretariat communicates the outcome of the selection to all Applicants and EMA
288 once the decision is final. For those requests that are selected, information will be provided regarding
289 the participating HTABs to the Applicant and EMA according to the Parallel EMA/EUnetHTA 21 JSC process
290 outlined in Table 1.

291 Other products which are not selected for a parallel EMA/EUnetHTA 21 JSC could pursue a regular
292 Scientific Advice procedure with EMA and may be eligible for national advice from some HTABs.

293 **4.3.2 CSCQ JSC selection criteria**

294 Due to the tender specifications in EUnetHTA 21, the number of products to be selected for the JSC is
295 limited. As the number of Applicants is expected to exceed the number of slots, a selection of products

296 will be necessary. EUnetHTA 21 will apply the same selection criteria as defined in the HTAR. A
297 prerequisite for a JSC is that the pivotal clinical trial (pivotal phase II/ or III) has not yet started.

298 The criteria for selecting from eligible JSC requests for medicinal products are:

- 299 a) Unmet medical needs (no treatment or only unsatisfactory treatment available);
- 300 b) First in class;
- 301 c) Potential impact on patients, public health, or healthcare systems;
- 302 d) Significant cross-border dimension;
- 303 e) Major Union-wide added value; or
- 304 f) Union clinical research priorities.

305 Oncology products and/or ATMPs and indications for which there is no established guidance for clinical
306 development (i.e. in absence of recent HTA evaluation in a similar indication) are given preferred
307 consideration but not exclusively.

308 In the application form the HTD should elaborate on the selection criteria respectively and provide an
309 explanation why the criteria are met and the product is eligible for an advice procedure, at the time of
310 the application.

311 **4.3.3 Parallel EMA/EUnetHTA 21 Joint Scientific Consultation format and** 312 **outcome**

313 There is one single procedure for Parallel EMA/EUnetHTA 21 JSCs within the two Open Calls in EUnetHTA
314 21; the consultations take place in a discussion meeting format. All Parallel EMA/EUnetHTA 21 JSCs are
315 supported by the EUnetHTA 21 JSC Secretariat, thereby benefiting from HTA scientific and administrative
316 coordination, consolidated HTA comments and List of Issues (LoI), a concerted effort to find agreement
317 among the JSC HOG regarding specific issues as well as a consolidated document containing EUnetHTA
318 21's Final Written Recommendations.

319 The generation of consolidated HTA outputs through the JSC HOG involves identifying aspects of
320 development programs for which there is a shared position amongst HTAbs and attempting to reach
321 consensus. Where necessary individual positions will be presented in the document's appendix. The final
322 output is the EUnetHTA 21 Final Written Recommendations, a single written report including:
323 consolidated EUnetHTA 21 recommendations for shared positions, individual HTAb answers to state
324 diverging positions or to clarify additional national specifications and anonymised transcripts of European
325 level patient and/or HCP input obtained through the procedure. The entire procedure will be
326 approximately 4,5 months in duration starting from reception of the draft briefing document. The
327 Applicant needs to produce written answers to a EUnetHTA 21 LoI. The Parallel EMA/EUnetHTA 21 JSC
328 with a discussion meeting allows for a direct exchange between the participating HTAbs, EMA and the
329 Applicant. The discussion meeting is hosted by EMA and is held virtually. The Applicant will be provided
330 with the Final Written Recommendations from HTAbs only at the end of the procedure as indicated in
331 the published timeline. Exchanges between HTAbs and EMA and the high-quality output expected of
332 EUnetHTA 21 are guaranteed for this procedure as well. The full procedure is detailed in Table 2.

333 **4.4 Other stakeholders**

334 The inclusion of patients and clinical experts in Parallel EMA/EUnetHTA 21 JSCs is expected on a routine
335 basis.

336 **EMA**

337 Regulators' clinical experts are identified through National Competent Authorities (NCA) and SAWP
338 members. An HCP representative may also be invited by the EMA through the EMA HCP Working Party
339 framework, as well as other stakeholders as appropriate.

340 Individual patient experts are identified through patient organisations under the framework for
341 interaction between the EMA and patients and consumers, and their organisations (EMA/637573/2014).

342 Where possible, patients are invited to attend the discussion meeting; briefing of chairpersons (on the
343 inclusion of a patient) and patients (on the aims and nature of the meeting) by EMA Scientific Officer is
344 essential. Any additional time or facilities required by patients should be considered.

345 EMA exchanges with EUnetHTA 21 JSC Secretariat on the participation of clinical experts and/or patient
346 experts.

347 **EUnetHTA 21**

348 EUnetHTA 21 is committed to involving experts (patients (representatives) and HCP) in its work. Hearing
349 directly from patients about the outcomes that matter to them and how their condition impacts their
350 quality of life and hearing directly from HCP about natural disease history and current disease
351 management are areas that are important from an HTA perspective.

352 EUnetHTA 21 systematically endeavors to involve experts in all Parallel EMA/EUnetHTA 21 JSCs. The
353 EUnetHTA 21 JSC Secretariat coordinates European level expert recruitment and involvement. European
354 level patients and/or clinical experts are involved via interview/written statement and participate in the
355 discussion meeting (if applicable). The involved experts express their personal opinions and do not act
356 as representatives for any stakeholder organization.

357 National patients and clinical experts are involved at Member State level, provided that a national
358 procedure exists. The inclusion of these experts remains the responsibility of the participating HTA bodies
359 (HTAbs).

360 The selection and involvement procedures are outlined in the [EUnetHTA 21 D7.2/3 Guidance for the
361 interaction with patient representatives, healthcare professionals and other experts](#).

362 The EUnetHTA 21 JSC Secretariat exchanges with EMA on the participation of patients and/or clinical
363 experts.

364

365

366 **5 Process**

367 **5.1 Simultaneous notification**

368 For all Parallel EMA/EUnetHTA 21 JSCs, the Applicants who received a notification of selection by
369 EUnetHTA 21 after the Open Call (see section 4.3) should notify the EMA Scientific Advice Secretariat by
370 means of an application submitted via the IRIS platform. The EMA and EUnetHTA 21 Secretariat should
371 simultaneously receive the draft briefing package by the published deadline for the intended procedure
372 start date (for submission details, please refer to 5.2 "default without presubmission TC").

373 This IRIS submission deadline is approximately 1 month (30 days) before the formal procedure start
374 date (day 0 or SAWP 1) and 3 months before the intended discussion meeting (day 60 or SAWP 3
375 meeting). For accurate submission deadlines, please refer to the relevant [submission deadlines](#) on the
376 EMA website.

377 EMA and EUnetHTA 21 JSC Secretariat will then mutually agree the allocation of discussion meeting slots
378 considering the batch of requests for the intended start date. EMA will confirm the date and time of the
379 discussion meeting in writing to the EUnetHTA 21 JSC Secretariat and the Applicant by approximately
380 day - 40.

381 **5.2 Presubmission phase**

382 For all Parallel EMA/EUnetHTA 21 JSCs, the presubmission phase starts when the Applicant submits the
383 request to the EMA through IRIS and sends the draft briefing package to the EUnetHTA 21 JSC
384 Secretariat via Eudralink (<https://eudralink.ema.europa.eu/>).

385 **Default without presubmission TC**

386 By default, the presubmission phase is based on written comments on the draft briefing document.

387 The draft briefing package should be submitted at least 30 days before the due start date (day 0 or
388 SAWP1) of the procedure. (See published parallel EMA/EUnetHTA 21 JSC [published timetables](#) for a 70
389 day procedure; SAWP 3 provides the intended discussion meeting date).

390 In addition to the standard EMA timetables, EMA sets up a timetable in consultation with the
391 EUnetHTA 21 JSC Secretariat for each procedure including closed EMA/EUnetHTA 21 interactions.
392 Calendar meeting requests are sent by EMA to the EUnetHTA 21 JSC Secretariat and other regulatory
393 participants shortly after a meeting is confirmed.

394 The Applicant simultaneously submits the request through IRIS and sends the draft briefing document
395 to the EUnetHTA 21 JSC Secretariat³ in accordance with the agreed timeline. It is important that the
396 timelines are adhered to allow for the participants to have sufficient time with the draft briefing document
397 in order to provide feedback to the Applicant, and also that there is sufficient time for the Applicant's
398 revision before the agreed formal start of the procedure. Initial written comments from the EMA and
399 EUnetHTA 21 JSC Secretariat (collated comments from HTAbs) are provided directly to the Applicant by
400 15 working days, where necessary for the optimisation of the draft submission prior to the start of the
401 procedure. However, EUnetHTA 21 reserves the right to contact the Applicant in order to request further
402 clarification at any time within the procedure, if needed.

403 Comments are shared with the Applicant by the EMA Scientific Officer and EUnetHTA 21 JSC Secretariat
404 (if applicable) in terms of a check for completeness: the scope, wording and clarity of the questions,
405 whether the material provided in the briefing package is sufficient to answer the questions posed,
406 whether all the right questions have been asked or if additional questions should be added, and to
407 consider whether the questions are appropriately addressed to HTAbs, Regulators or both. Both EMA and
408 HTAB reserve the right to answer selected questions that have been directed to the other entity if deemed
409 appropriate.

410 **Finalising the briefing document**

411 The Applicant submits a revised final briefing document with all annexes and references having
412 addressed the EMA comments and EUnetHTA 21 points of clarification (if any) through IRIS at least 5
413 full working days before the start of the procedure. One version should be in "track changes" mode and
414 the other should be "clean". EMA conducts an administrative check to ensure the briefing package is fit
415 for purpose (i.e. that all annexes and references are present and readable, and that any essential
416 changes have been made to the briefing document).

417 Following confirmation of validation from EMA, the Applicant submits the final briefing document through
418 IRIS and sends the document also to the EUnetHTA 21 JSC Secretariat via Eudralink
419 (<https://eudralink.ema.europa.eu/>), according to the shared timeline. One version should be in "track
420 changes" mode and the other one should be "clean". There is no formal confirmation of the validation
421 by the HTA Coordination Contact Point but a proactive reach out if files are identified to be missing. The
422 Applicant should ensure that the final briefing document has been received by both parties.

³ The submission to EUnetHTA 21 must be done via Eudralink (<https://eudralink.ema.europa.eu/>) which will allow for the confidential exchange of information between EUnetHTA 21 and the Applicant.

423 The presubmission phase ends with the circulation of the final briefing document prior to SAWP 1
424 (Wednesday before start of SAWP; SAWP1 defined according to the published timelines) as in the
425 published Parallel Scientific Advice timelines.

426 There is no option for a follow-up consultation with EUnetHTA 21 during the project phase. All relevant
427 questions must be submitted in the briefing package for the JSC.

428 **5.3 Evaluation phase**

429 ***Lists of Issues (LoI)***

430 For all Parallel EMA/EUnetHTA 21 JSCs, Lists of Issues (LoI) facilitate the discussion during the discussion
431 meeting by indicating the focus of Regulators' and HTAbs' discussion.

432 In the regulatory process, the SAWP discusses the first reports (preliminary views) at the SAWP 2
433 meeting and drafts a Regulators' LoI by approximately day 40 of the procedure.

434 In the EUnetHTA 21 process, CSCQ JSC members participating in the advice (JSC HOG) discuss draft
435 positions and major issues (following PICO (Population, Intervention, Comparator, Outcome)) pre-listed
436 by the Assessor and Co-Assessor during an e-meeting around day 30. The EUnetHTA LoI is shared with
437 the HTD around day +35 of the procedure.

438 ***Exchange between EMA and HTAbs***

439 EMA and HTAb LoI are also exchanged between EMA and HTA Coordination Contact Point.

440 The EMA arranges a closed preparatory virtual meeting between EMA and EUnetHTA 21 (JSC Secretariat,
441 Assessor and Co-Assessor), to take place around one week prior to the discussion meeting, focusing on
442 the issues identified by Regulators and HTAbs.

443 The purpose of the pre-discussion meeting is to exchange and understand respective (preliminary)
444 positions of the different Regulator and HTAb participants on the major aspects of the proposed
445 development plan. Potential solutions that could facilitate one trial, or at least one development plan,
446 could be discussed in advance of the discussion meeting. The Regulator's and the HTAb's chairperson for
447 the discussion meeting should be agreed in the meeting.

448 ***Preparation for discussion meeting***

449 The Applicant can contact the EMA Scientific Officer and/or EUnetHTA 21 JSC Secretariat regarding the
450 format of the discussion meeting. This is to ensure that the meeting fulfils the needs of involved
451 stakeholders. The Applicant should send any written responses to the EUnetHTA 21 LoI 12 working days
452 before the discussion meeting directly to EUnetHTA 21 JSC Secretariat. For EMAs LoI, the Applicants'
453 written response is expected 5 working days before the start of the discussion meeting week (SAWP3
454 meeting week, according to the published timelines).

455 The Applicant should submit the final presentation and list of participants to the EMA via IRIS and to the
456 EUnetHTA 21 JSC Secretariat, 2 working days before the end of the week preceding the discussion
457 meeting week (SAWP3 meeting week, according to the published timelines). Any changes to the
458 presentation after this date will not be accepted. The presentation can include a very brief introduction,
459 rationale and status of the program. An upper limit of 5 slides for this introduction is recommended to
460 maximise the time available for the questions and discussion. Once shared with the meeting participants,
461 according to the agreed timelines, the presentation should not be amended by the Applicant. There
462 should be no major changes to the development plan compared to the final briefing document, unless
463 the process in topic "Amended development plans" has been followed.

464 The EUnetHTA 21 JSC Secretariat is asked to send their final list of attendees to the EMA also in advance
465 of the meeting (1 week before the discussion meeting). Applicants may have up to 12 representatives
466 which can be increased to 14 in case of applicants between collaborating companies. The EMA circulates

467 a preliminary list of all participants 2 days in advance of the discussion meeting. The discussion meeting
468 is hosted by EMA and is held virtually.

469 **Amended development plans triggered by the Lists of Issues/written response to List of**
470 **Issues or external factors**

471 Amended development plans triggered by the Lists of Issues or external factors can be accommodated
472 to some extent during the evaluation phase. However, to facilitate sufficient time for review of the
473 amended development plan, it is stressed that the Applicant should advise all parties of their intention
474 to submit an amended development plan as early as possible, before the discussion meeting. The
475 amended plan must be received by all parties together with a clear comparative table of changes in the
476 plans and justification for the changes.

477 For EUnetHTA 21, the written response to LoI and, if applicable, necessary information regarding the
478 amended development plan must be received at the latest by 12 working days before the discussion
479 meeting. Any substantial changes to the development plan submitted past this date cannot be addressed
480 within the discussion meeting or reflected in the minutes.

481 For EMA's LoI, the Applicants' Written Response and, if applicable, necessary information regarding the
482 amended development plan is expected 5 working days before the start of the discussion meeting week
483 (SAWP3 meeting week, according to the published timelines).

484 **Discussion meeting**

485 The meeting is hosted by EMA (at the moment virtually).

486 The aims of the discussion meeting are:

- 487
- 488 • To discuss issues of concern or disagreement from EMA and/or HTAbs with the Applicant's
proposal regarding major aspects of trial designs.
 - 489 • To get a mutual understanding of each body's constraints as it has to be acknowledged that
490 Regulators and HTAbs are operating within distinct remits (benefit/risk evaluation vs. added
491 value or cost-effectiveness' evaluation). Possible resulting divergences between HTAbs and
492 Regulators positions on major aspects of the trial design will be discussed.
 - 493 • To share and discuss preliminary positions on major aspects of trial designs from EUnetHTA 21
494 with all participants.
 - 495 • To discuss potential solutions that could facilitate one trial design or at least one development
496 plan.

497 The discussion meeting has 2 co-chairs: one from EMA and one from the HTAbs. The meeting duration
498 will depend on the range of issues to be discussed, the maximum length of the meeting is 3 hours. If it
499 is agreed between the EMA and the HTAbs prior to the discussion meeting that the content of the
500 discussion is limited, the meeting can be set at 1.5 hours. The Applicant will be informed about the length
501 of the discussion meeting in due time.

502 Before the Applicant enters the room, the Regulators and the HTAbs have the opportunity to have a
503 closed session in order to exchange on organisational items and to interact on any possible changes of
504 position after the Applicant's responses and presentation. This pre-meeting could be extended if
505 necessary (e.g. late changes to the development plan).

506 The meeting with the Applicant is interactive, focusing on the issues raised by the Regulator and the
507 HTAbs in the LoI. The chairperson of the HTAb side (the Assessor) presents the common position of the
508 participating HTAb. If at any point the Assessor presents the individual position of his or her own agency,
509 this is made particularly clear. Wherever possible the issues of both Regulators and HTAbs should be
510 grouped together and structured following PICO (Population, Intervention, Comparator, Outcome) to
511 enable for a joint discussion of the stakeholders. During the discussion meeting, the views of each

512 stakeholder should be clearly represented on each issue. It is usual to pause after each question/issue
513 for discussion. Time should be allowed for summing up at the end of the meeting.

514 Following the discussion meeting, a closed debriefing between HTAbs and Regulators should be held.
515 This is dedicated to the recap, identification and discussion of any outstanding divergences, where such
516 divergences mean that a single development plan/trial could not be carried out. There might be situations
517 in which the divergences cannot be resolved due to differences in the Regulators' and HTAbs' assessment
518 questions and remit.

519 The Applicant is expected to provide detailed minutes of the discussion meeting, within 5 working days
520 directly to EMA. The minutes should reflect the views for each participating stakeholder in the discussion
521 meeting discussion. Areas of agreement and divergence of opinion between Regulators and HTAbs can
522 be summarised by the Applicant. Minutes are regarded as an Applicant's record of the meeting and will
523 not, in general, be endorsed by the participating bodies. The minutes should be sent also to the HTA
524 Coordination Contact Point for information. The minutes will not be commented by HTAbs.

Table 1: Outline of actions for Applicant, EMA and EUnetHTA 21 in Parallel EMA/EUnetHTA 21 JSCs

Day	Applicant	EMA	EUnetHTA 21
Draft briefing package			
D - 30	<ul style="list-style-type: none"> ➤ Applicant submits the draft briefing document with annexes and references simultaneously to the EUnetHTA 21 JSC Secretariat via Eudralink⁴ and to the EMA via IRIS. 	<p>IRIS automatically confirms receipt.</p> <p>Communication of EMA contact point (EMA Scientific Officer) to Applicant and EUnetHTA 21 JSC Secretariat. IRIS submission triggers appointment of 2 SAWP Rapporteurs and, where appropriate, a SAWP Rapporteur for questions relating to significant benefit (only applicable for protocol assistance) by the SAWP.</p>	<p>Main contact for all HTA matters: EUnetHTA 21 JSC Secretariat</p> <ul style="list-style-type: none"> ➤ EUnetHTA 21 JSC Secretariat confirms receipt to the Applicant. ➤ Appointment of Assessor and Co-Assessor, information shared with EMA. ➤ EUnetHTA 21 JSC Secretariat communicates the draft briefing document, annexes and references to JSC HOG + CSCQ JSC. ➤ Assessor and Co-Assessor can request any necessary clarifications to the Applicant copied to EMA Scientific Advice secretariat at any time.
D - 15		<p>Feedback on draft</p> <ul style="list-style-type: none"> ➤ Where applicable, comments on the draft briefing document are sent to Applicant through IRIS by ~D -15 and also sent to the EUnetHTA 21 JSC Secretariat. ➤ Additional Experts/patients representatives are identified and shared with EUnetHTA 21 JSC Secretariat. 	<ul style="list-style-type: none"> ➤ European level patient (representative)/clinical expert are identified by the EUnetHTA 21 JSC Secretariat and information is shared with EMA (also possible at a later stage of the procedure).

⁴ <https://eudralink.ema.europa.eu/>

Day	Applicant	EMA	EUnetHTA 21
D - 10		Administrative meeting between EMA and EUnetHTA 21 JSC Secretariat.	
Validation/reception of briefing package			
D - 5	<p>Submission</p> <p>The Applicant submits the briefing package together with annexes and references in response to the request(s) for clarification to the EMA via IRIS and to EUnetHTA 21 via Eudralink. One version of briefing document should be in "track changes" mode and the other should be "clean".</p>	<p>Validation of final briefing document</p> <p>Notification of positive validation of the final briefing document by EMA Scientific Advice secretariat to the Applicant via IRIS and information of the EUnetHTA 21 JSC Secretariat thereof at D -2 together with final instructions.</p>	<p>Reception of final briefing document:</p> <ul style="list-style-type: none"> ➤ There is no formal confirmation of the validation by the HTA Coordination Contact Point but a proactive reach out if files are identified to be missing.
Submission of final briefing package			
D -2	<p>The Applicant submits final briefing package including annexes and references to the EMA via IRIS and to the EUnetHTA 21 JSC Secretariat via Eudralink.</p>		<ul style="list-style-type: none"> ➤ EUnetHTA 21 JSC Secretariat shares the final briefing document with JSC HOG + CSCQ JSC.
Evaluation Phase			
		<ul style="list-style-type: none"> ➤ Discussion of the first reports during SAWP meeting focusing on controversial issues followed by production of a draft List of Issues (LoI), which outlines the topics of 	<ul style="list-style-type: none"> ➤ Preliminary discussion (e-meeting) on JSC HOGs` position on main topics (PICO) of the development proposed and exchanges on related issues. Production of a EUnetHTA 21 List of Issues

Day	Applicant	EMA	EUnetHTA 21
		Regulators' interest to be addressed by the Applicant in the discussion meeting.	<p>(LoI), which outlines the topics of HTAbs interest to be addressed by the Applicant in the discussion meeting.</p> <p>➤ JSC HOG starts to discuss the draft written positions.</p>
~D + 35-40		EUnetHTA 21 JSC Secretariat and EMA exchange their respective LoI and send the lists to the Applicant.	
		➤	➤
Applicant's Written Response to List of Issues (LoI)			
D + 45-50	<p>➤ Applicant sends their Written Responses (if applicable) to the LoI raised by EUnetHTA 21 via Eudralink to the EUnetHTA 21 JSC Secretariat (if applicable: notification of amended development plan with changes and justifications).</p> <p>➤ Applicant sends their Written Responses (if applicable) to the LoI raised by the EMA via IRIS.</p>		<p>➤ EUnetHTA 21 JSC Secretariat distributes the Applicant's Written Response and any notification of amended development plan with changes and justification (if applicable) to JSC HOG.</p>
	➤		

Day	Applicant	EMA	EUnetHTA 21
Preparation for discussion meeting			
~D + 55	<ul style="list-style-type: none"> ➤ Applicant submits PowerPoint presentation to EMA via IRIS and EUnetHTA 21 JSC Secretariat via Eudralink, at least 2 full working days before the week preceding the discussion meeting week (SAWP3 meeting week), addressing the Lists of Issues for both HTAbs and Regulators. The Applicant should group related issues together. Further changes after this date will not be accepted. ➤ Applicant submits list of participants. 	<ul style="list-style-type: none"> ➤ The EMA arranges a closed preparatory e-meeting between EMA and EUnetHTA 21 (JSC Secretariat, Assessor and Co-Assessor), to take place around one week prior to the discussion meeting, focusing on the issues identified by Regulators and HTAbs. 	
~D + 55	<ul style="list-style-type: none"> ➤ 	EMA and SAWP Rapporteurs take part in a Bilateral e-meeting with the EUnetHTA 21 JSC Secretariat, EUnetHTA 21 Assessor and Co-Assessor.	
Discussion meeting (virtually)			

Day	Applicant	EMA	EUnetHTA 21
D + 60	<ul style="list-style-type: none"> ➤ The meeting is hosted by EMA (at the moment virtually). ➤ The meeting will normally have 2 co-chairs: one from the Regulators and one from the HTAbs (the Assessor). <p>Tripartite session: Discussion meeting EMA and EUnetHTA 21 HTAbs with the Applicant. The meeting duration will depend on the range of issues to be discussed (maximum 3 h), with 15 minutes closed pre-, and 15 minutes closed post-discussion meeting (EMA and EUnetHTA 21). The pre-meeting of EMA and EUnetHTA 21 includes organisational items, sharing draft positions, related expert's feedback received by the two parties (if applicable) and discussing last minute changes. This pre-meeting could be extended if necessary (e.g. late changes to the development plan).</p> <p>The Applicant addresses key issues that were identified by EUnetHTA 21 JSC and EMA. An interactive discussion follows on the key issue.</p>		
D + 70		<ul style="list-style-type: none"> ➤ The Regulators' Final Advice Letter is adopted by the CHMP (and by the COMP in case of questions on significant benefit for Protocol Assistance), made available to Applicant via IRIS and sent to the EUnetHTA 21 JSC Secretariat. 	<ul style="list-style-type: none"> ➤ Finalisation of EUnetHTA 21 Final Written Recommendations.
D + 82			<ul style="list-style-type: none"> ➤ EUnetHTA 21 Final Written Recommendations sent to Applicant and EMA. ➤ Feedback questionnaire sent to Applicant, HTAbs and involved patient (representative)/HCP.
D + 95	<p>Applicant completes and returns feedback questionnaire to the EUnetHTA 21 JSC Secretariat.</p>		

527

528 **6 Practical issues**

529 **6.1 Fees**

530 The EMA charges fees for this procedure, which are the same as for standard Scientific Advice/Protocol
531 Assistance including the application of any fee incentives. For more information see [Fees payable to the](#)
532 [European Medicines Agency](#).

533 The participation of HTA bodies in the JSCs offering consolidated HTA outputs in the framework of the
534 EUnetHTA 21 service contract is covered by EUnetHTA 21 budget.

535 **6.2 Contact points**

536 The EUnetHTA 21 JSC Secretariat (EUnetHTA21-JSC@g-ba.de) is the single point of EUnetHTA 21 contact
537 in relation to all HTA aspects, unless otherwise indicated.

538 The EMA point of contact (with back-up) is identified via IRIS. The Applicant should keep the EUnetHTA
539 21 JSC Secretariat up to date with changes in contact details. Changes in contacts should also be
540 implemented by Applicants directly in IRIS.

541 **6.3 Processing of documents**

542 The Parallel EMA/EUnetHTA 21 JSC uses Eudralink for exchanging documents between the Applicant and
543 the EUnetHTA 21 JSC Secretariat. Document exchange between the Applicant and EMA takes place
544 through the IRIS platform.

545 The Applicant is responsible for sending all relevant documents directly to the HTA Coordination Contact
546 Point and EMA in a simultaneous manner. The Applicant must ensure that receipt of documents has been
547 confirmed by all the participants.

548 Document version control, numbering, and adherence to timelines are essential to ensure all parties
549 have the appropriate document at the correct time. It is strongly advised to avoid making significant
550 changes to the documentation/clinical development close to the discussion meeting except where this
551 has been discussed and agreed with participants. This is in order to guarantee an appropriate time for
552 the revision and the evaluation by Regulators and HTAbs.

553 The Applicant provides consent to document exchange between EMA and EUnetHTA 21 in the Application
554 Form.

555 **6.4 Briefing document for Parallel EMA/EUnetHTA 21 Joint Scientific** 556 **Consultation**

557 A common briefing document is used; each question can be addressed to the Regulators or the HTAbs
558 alone, or to both. Quality and nonclinical questions are possible during a Parallel EMA/EUnetHTA 21 JSC
559 procedure and should be posed to Regulators only. In the same manner questions related to health
560 economics are possible and should be directed to HTAbs. The labelling of questions is a guide but does
561 not prevent interested bodies answering questions deemed also relevant and of interest although
562 originally raised to the other entity.

563 Applicants are encouraged to submit detailed information concerning the choice of patient reported
564 outcomes and any substantiated PLEG plans (if applicable) already with the draft briefing document.

565 However, Applicants are to acknowledge that PLEG can only be discussed in conjunction with a request
566 for discussion of pivotal trial design and when contextualized with clinical data from the pivotal (phase
567 II/III) studies. Use of the associated briefing document template is required ([See published template for](#)
568 [Parallel Consultation](#)).

569

570

571 **7 Other**

572 **7.1 Advice format**

573 The EMA will provide via IRIS the CHMP final Scientific Advice/Protocol Assistance letter to the Applicant
574 in accordance with the [published timelines](#).

575 The EUnetHTA 21 JSC Secretariat sends out validated Final Written Recommendations at day +82.

576 Final outcome letters are exchanged between EMA and the EUnetHTA 21 JSC Secretariat.

577 **7.2 Follow-up procedures**

578 A follow-up procedure for a EUnetHTA 21 Parallel EMA/EUnetHTA 21 Joint Scientific Consultation
579 procedure during EUnetHTA 21 is not foreseen.

580

581

582 **8 Summary of documents**

583 **Table 4.** Description of documents

584 All current documents can be found on the [EUnetHTA 21 JSC website](#).

Documents	Description
Open Call Application Form	Application form for the formal expression of interest by an Applicant (available for submission by the Application during Open Call periods on the EUnetHTA 21 website or upon request via EUnetHTA21-JSC@g-ba.de)
Draft briefing document	Draft briefing document comprising the questions and Applicant's positions, as well all the relevant information, annexes and references, important to assess such questions.
Final briefing document	Finalised version of the draft briefing document addressing regulators' comments and HTAb's points of clarification, including all annexes and references - with adaptations in text and reference list highlighted.
SAWP List of Issues (LoI), EUnetHTA 21 List of Issues (LoI)	Documents outlining the concerns or disagreements with the Applicant's proposal. Further justifications, clarification or changes to the Applicant's proposals are requested.
Final CHMP Scientific Advice/	Documents with written answers to the Applicant's questions.

Documents	Description
Protocol Assistance letter, EUnetHTA 21 Final Written Recommendations	

585