**Dec 4th, 2025: EAA Comment on the HTACG Annual Work Programme 2026**

Last Friday, the Member State Coordination Group on HTA (HTACG) adopted the Annual HTA Work Programme (AWP) for 2026.


In essence, an estimated 50 JCAs are foreseen to be initiated for Medicinal Products and an estimated 5 procedures for Medical Devices, and there will be four JCS request periods in 2026, one at the beginning of each quarter.


Annual Work Programme 2026

28 November 2025

Adopted on 28 November 2025 by the HTACG
pursuant to Article 6 of Regulation (EU) 2021/2282 on Health Technology Assessment

*This document has not been endorsed by the European Commission and may not in any circumstances be regarded as stating a position of the European Commission.*

https://health.ec.europa.eu/publications/2026-work-programme-member-state-coordination-group-hta-htacg_en

The EAA would like to thank DG Santé the HTACG for their continued efforts and for publishing the AWP 2026. However, we would also like to point out some key issues that remain to be addressed:

- The AWP contains mainly procedural requirements and estimates but lacks strategic content and direction. As stipulated in Preamble 24 “Methodologies for performing joint clinical assessments and joint scientific consultations should be adapted to include specificities of new health technologies [...]”. The EAA supports strengthening the current methodological framework and recommends a transparent and inclusive approach for developing a framework for living and contextual adaptive methodological recommendations that meet the paradigms of state-of-the-art clinical research questions under assessment.
- Further, in line with the concept of evidence-based medicine the inclusion of consolidated input of medical societies and consolidated scientific input of patient associations should be strengthened.
- The JSC instrument appears significantly underdeveloped at the moment. Continuous and frequent advice opportunities are critical to bring HTDs in a position to submit ‘the right information’, especially in the first years of EUHTA. The 8-12 slots for Medicinal Products and 2-5 slots for Medical Devices in 2026 are far from sufficient. Furthermore, the JSC selection procedure is highly questionable and will create a competitive imbalance which could even result in legal action on the side of the disadvantaged HTDs.

The EAA strongly believes in the value of a European Value Framework and joint European HTA procedures and remains committed to support the implementation of the EU HTA Regulation.