## Past Papers for Economics

## Final

ICER has to be calculated if the new drug is located in $\qquad$ in the cost-effect difference graph.*
A. Northeast quadrant
B. Northwest quadrant
C. Southeast quadrant
D. None of the above

In the cost-effectiveness plane, a drug in the southeastern quadrant should be approved*
A. True
B. False

Two hypertension treatments are being compared on a national level in terms of total cost and lives saved by using them.

Drug A: cost $=40$ thousand Dinars, lives saved $=5$.
Drug B: cost $=140$ thousand Dinars, lives saved $=10$.
Calculate the ICER from the previous question.
A. 20
B. 100
C. 8
D. 14

Which of the following is not a common strategy for incorporating pharmacoeconomics into practice?
A. Modeling
B. Determining the cheapest alternative with respect to drug acquisition cost
C. Conducting a local pharmacoeconomic evaluation
D. Evaluating and applying the literature

Which of the following statements about the application of pharmacoeconomics to pharmacy decision-making is false?
A. Pharmacoeconomics can be a powerful tool for determining the value of drug-use guidelines
B. Pharmacoeconomics should be the only consideration when making a drug therapy decision
C. Pharmacoeconomics can assist pharmacy and therapeutics (P\&T) committees in incorporating clinical, economic, and humanistic outcomes of drug therapy into formulary management decisions
D. Pharmacoeconomics can provide data to support resource allocation decisions

Answer: B

Which of the following potential advantages could also be considered a potential disadvantage of using the literature as a strategy to apply pharmacoeconomics to "real world" decision-making?
A. Study results can be from a randomized clinical trial
B. Strategy is inexpensive
C. A variety of results might be available for consideration
D. Strategy is relatively quick and inexpensive

Answer: A
Which of the following is true regarding the use of modeling as an application strategy?
A. A disadvantage of modeling is that it can confuse efficacy with effectiveness
B. Modeling can be used to assess efficacy but not effectiveness
C. Modeling is a relatively inexpensive method for obtaining pharmacoeconomic information specific to an organization or patient population
D. An advantage of modeling is that it is an inexpensive method; a disadvantage is that it is much more time-consuming than other strategies for obtaining pharmacoeconomic data

Answer: C

Which of the following is considered a disadvantage of conducting a local pharmacoeconomic evaluation and a reason for assessing the impact of a local decision of cost and quality of care?
A. It is expensive and time-consuming
B. Unable to interpret and generalize results
C. Able to produce organization-specific results
D. Decreased chance of patient selection bias

Answer: A

The development and use of pharmacoeconomics models is very prevalent today. Which of the following are common modeling techniques employed?
A. Markov modeling
B. Monte Carlo simulation
C. Decision analysis
D. A and C
E. All of the above

Answer: Written answer is C but not sure

Which of the following statements regarding the discount is not true?
A. When costs and consequences of a treatment alternative occur in the future, they should be reduced to reflect current fiscal value
B. Discounting is a process of adjustment for differential timing
C. There is one standard discount that should be be used in pharmacoeconomic analysis
D. Comparisons of programs or treatment alternatives should be made at the same time

Answer: C

Which one of the following statements regarding discounting is true?
A researchers should always use a 5\% discount rate
B coast and current today to initiate a new programme should be discounted
C discounting can be useful when comparing accused and long term treatment strategies
D. Benefits should not be discounted

Answer: C

The primary reason to perform a sensitivity analysis is to accomplish which one of the following?
A. Test the robustness of the economy evaluation conclusions
B. Reveal sensitive variables of the economy evaluation
C. uncover the range of possible values
D. Allow for a meaningful comparison of treatment alternatives

Answer: A

Which one of the following statements is not true regarding the application of pharmacoeconomics to pharmacy practice?
A. Pharmacoeconomics can be a powerful tool for determining the most efficient use of drugs
B. Pharmacoeconomics can assist pharmacy and therapeutics committees in incorporating clinical, economic, and humanistic outcomes of a drug therapy into formularly management decisions
C. Pharmacoeconomics can provide data to support individual patient treatment and resource allocation decisions
D. Use of pharmacoeconomic data ensures that organizational drug use policies will influence physician prescribing patterns

Answer: D

## You can plot the CEAC in multiway sensitivity analysis

True
False
Answer: False
In CEAC the $y$ axis is the cost-effectiveness while the $x$ axis is the probability of cost effectiveness

True
False
Answer: False
Inflation is concerned with the unit cost (price) whereas discounting (time preference) concerned with when the total cost

True
False

Which of the following is false?
Discounting is only related to costs

If a study was conducted and prices were weighed in 2018 and has a follow-up for 4 years, which of the following will be needed?

Discounting
If the patients were enrolled in the trial during a 4-year period, but each is followed for two years. In addition, the investigators collect hospital bills to estimate inpatient cost. Which of the following would be needed?
A. Inflation
B. Discounting
C. Both
D. Neither

A study over 6 months with one time follow-up will need:
A. Inflation
B. Discounting
C. Both
D. Neither

Answer: D
Discounting reflects the preference of receiving an income today rather than in the future

True
False

The term "efficacy" used in a CEA means that this drug can work under. $\qquad$ conditions:
A. Real world
B. Relatively ideal
C. None of the above

If the numbers were weighted in the past, they need to be $\qquad$ If they are projected to the future, the need to be.
A. adjusted, discounted
B. Discounted, adjusted
C. Inflated, adjusted
D. None of the above

In health care, discounts are realistically between $2 \%$ and $4 \%$
True
False
Answer: False
An analysis is performed on the economic benefit of a pharmacist-led smoking cessation clinic. Data is extrapolated for the next $\mathbf{1 1}$ months. It should be discounted.

True
False
Answer: False

