



ANNUAL REPORT 2025

HTA Austria – Austrian Institute for Health Technology Assessment GmbH

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FOREWORD



Ingrid Zechmeister-Koss
Director

The year 2025 was a year of significant change for AIHTA. In March, the official handover of the executive leadership took place. I had the privilege of taking over the institute from its founder and long standing director, Claudia Wild, together with an excellent team and a strong national and international reputation.

As the scope of responsibilities – and consequently the number of staff – has grown considerably in recent years, several adjustments were necessary. We moved into new premises and reorganised our internal structures. A role-based organisational model is intended to support us in continuing to carry out our tasks efficiently and to the highest standard, despite the increased demands. At the same time, we have intensified our external communication to meet the expectations of our shareholders and stakeholders for broader and more accessible dissemination of our research findings.

We are very pleased that the external evaluation carried out in 2025 has confirmed our realignment. It attests to AIHTA's excellent work – independent, scientifically rigorous, methodologically robust and of high relevance for evidence-based decision-making processes.

My special thanks go to the entire team, who have continued to perform their tasks with their usual quality and efficiency despite numerous changes. I would also like to express my gratitude to our shareholders for their reliable support and their appreciation of our work.

ABOUT US

The Austrian Institute for Health Technology Assessment (AIHTA) is an independent scientific institution that systematically evaluates medical technologies, medicines, and public health interventions in order to provide evidence-based foundations for decision-making within the healthcare system.

Intellectual capital statement 2025



30 Employees



34 Project Reports



15 Publications peer-reviewed



8 Third-party funded projects



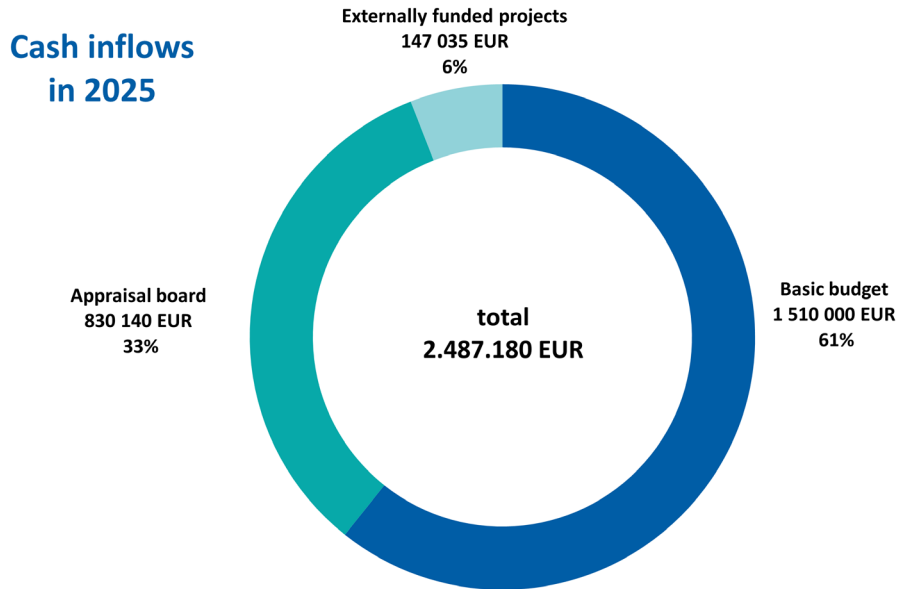
11 Lectures



4 Supervised master's theses

**„Empowering Healthcare Decisions
with Evidence“**

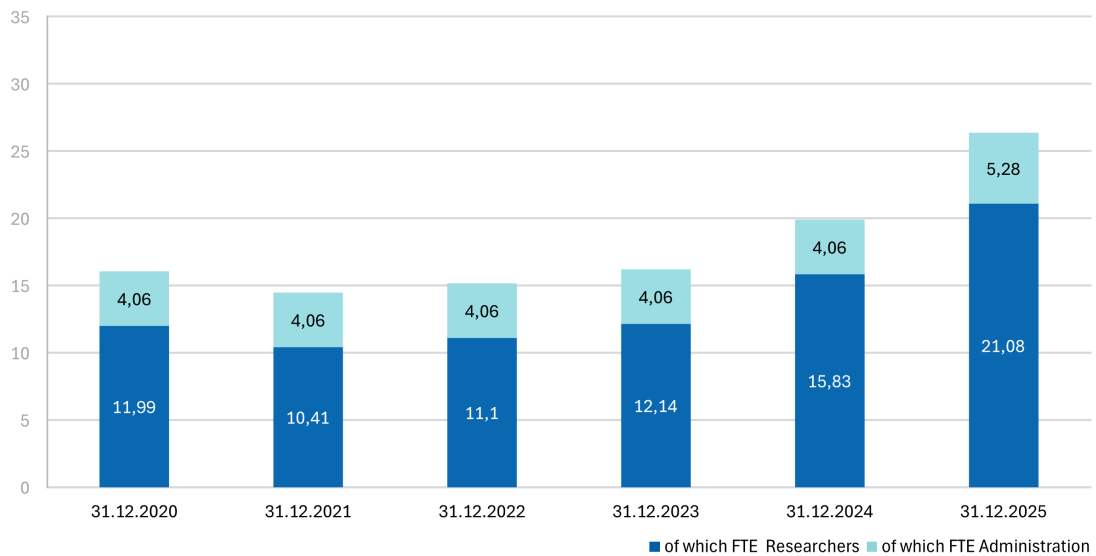
FACTS & FIGURES 2025



Staff level 2025

Employees	30
Full-time equivalents	26,35
of which Researchers	21,08
of which Administration	5,28

Development of Full-Time Equivalents (FTE)



Organisational development 2025: Towards a role-based organisation

In 2025, the expansion of our areas of responsibility, the resulting substantial growth of the institute, and the increasing demand for specialised expertise necessitated a comprehensive organisational development process. This process commenced in March 2025 under external guidance. Supported by an internal development team, we designed the new organisational structure and articulated our strategic orientation through a series of participatory formats.

Since September 2025, we have been progressively implementing the new structural and procedural organisation across the institute. The key characteristics include:

Roles instead of fixed positions

- Staff members assume several clearly defined roles rather than adhering to static job descriptions. Professional, project related and disciplinary responsibilities are distributed across distinct roles.

A dynamic, project driven structure

- Teams are formed flexibly around projects rather than based on permanent departmental boundaries.

Expert career pathways

- Professional development is driven by increasing responsibility within roles, replacing traditional hierarchical career progression.

Enhanced transparency and clarity

- Roles, responsibilities and accountabilities are documented in a transparent and accessible manner.

People Leads:

Dr. rer. soc. oec. Ingrid Zechmeister-Koss, MA – **Director**

Dr. scient. med. Mag. sc. hum. Mag. pharm. Sabine Geiger-Gritsch – **Deputy Director**

Dr. PH Gregor Götz, MSSc, MPH

Sarah Wolf, MSc

Research Area Leads:

Drug Assessments:

Dr. scient. med. Mag. sc. hum. Mag. pharm. Sabine Geiger-Gritsch

Medical Devices & Digital Health Technologies:

Dr. PH Gregor Götz, MSSc, MPH

Rapid Reviews:

Dr. med. Reinhard Jeindl

Public Health & Complex Interventions:

Dr. rer. soc. oec. Ingrid Zechmeister-Koss, MA
Aline Dragosits, MA, PhD (since 01/2026)

Health Economics & Health Service Research:

Christoph Strohmaier, MSc

Central Functions:

Dipl.-Ing. Smiljana Blagojevic

Back Office & Web Administration

Tarquin Mittermayr, BA (Hons), MA
Information Specialist

Karin Hutterer-Schubert

Kerstin Skriner, BSc (since 10/2025)

Finance & Personnel Administration

Ozren Sehic, MA, MSc

Digital Officer, IT & Assistant to the Director

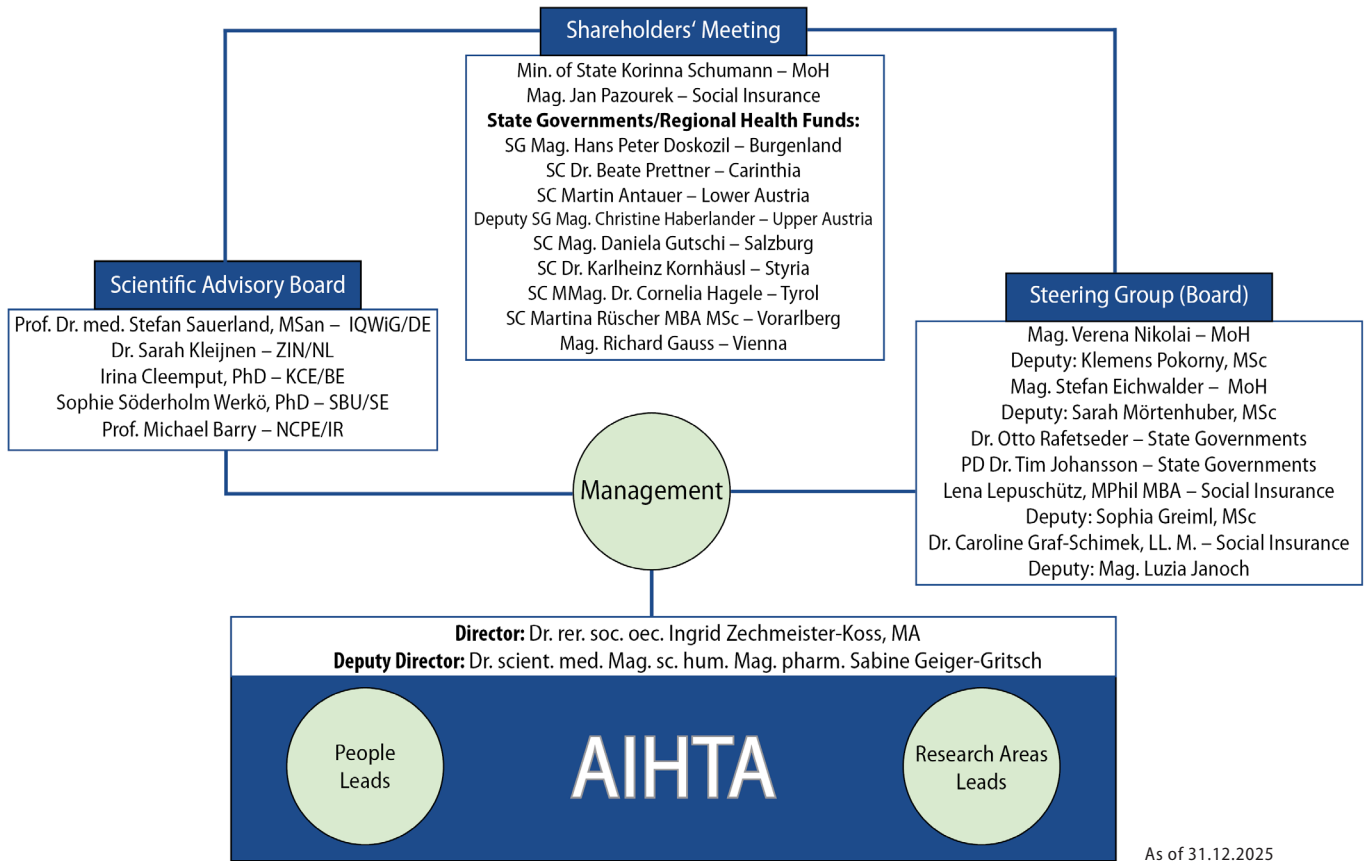
Mag. Andrea Fried (since 08/2025)

Science Communication



As of: 31/12/2025

Organisational structure



Scientific Advisory Board

The Scientific Advisory Board is a central component of AIHTA's quality assurance and makes an essential contribution to the further methodological development of the institute. In accordance with the Articles of Association, the Board consists of five HTA experts with different specialisations who have no connection to projects in Austria. Three members are appointed on the recommendation of the Shareholders, while two further members are proposed by the management. **At the Shareholders' Meeting in November 2025, the following experts were appointed for the coming four years:**



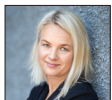
Prof. Dr. med. Stefan Sauerland, IQWiG: Institute for Quality and Efficiency in Health Care (DE) – Head of Non-Drug Interventions Ressort (Photo: IQWiG)



Dr. Sarah Kleijnen, ZIN: National Healthcare Centre Zorginstituut Netherlands (NL) – Director of Development, Research and International Affairs (Photo: ZIN)



Irina Cleemput, PhD, KCE: Belgian Healthcare Knowledge Centre (BEL) – Scientific Director (Photo: PASCAL VANDECASTEELE PHOTOGRAPHY)



Sophie Söderholm Werkö, PhD, SBU: Swedish Agency for Health Technology Assessment and Assessment of Social Services (SWE) – Manager International Relations & Patient Engagement (Photo: SBU)



Prof. Michael Barry, NCPE: National Centre of Pharmacoeconomics (IE) – Clinical Director & Head of Department of Pharmacology (Photo: Anthony Edwards)

We would like to thank **Dr. Frank Hulstaert, MSc, Luciana Ballini, MSc, and Prof. Dr. Signe Flottorp** for their valuable support over the past years.

Research Area

Medical Devices and Digital Health Technologies

This Research Area evaluates non-drug interventions, primarily encompassing medical devices – from implants and diagnostic procedures to telemedicine. The aim is to support evidence-based decision making throughout the entire product life cycle. The results support both the inclusion of new services and the re evaluation of existing healthcare provisions.

»» *In 2025, through our annual evaluations of individual medical services, we made substantial contributions to support evidence-based decision making. At the same time, we were able to provide methodological support for the reimbursement of digital technologies and genetic tests, and to further advance alignment with Joint Clinical Assessment (JCA).* ««



Gregor Götz

Projects 2025

Assessment of Individual Medical Services (MEL)

Each year, numerous new individual medical services are proposed to the Ministry of Health (BMASGPK) for inclusion as Individual Medical Services (MEL) in the hospital service catalogue for reimbursement. AIHTA's task is the systematic assessment of the comparative effectiveness and safety of these new interventions. Topics are prioritised in a working group of the Federal Health Agency, jointly composed of BMASGPK, the federal provinces and social insurance institutions. In 2025, evidence syntheses were conducted for the following interventions:

Newly assessed products and procedures:

- Islet cell transplantation for chronic pancreatitis, type 1 diabetes, with and without kidney transplantation
- Drug-coated balloon catheter for the treatment of urethral strictures
- Thermal ablation for early-stage breast cancer: cryoablation, microwave, radiofrequency, high-intensity focused ultrasound, and laser ablation
- One-stage matrix-assisted cartilage repair with and without bone marrow aspirate concentrate in the knee

Updates:

- Leadless cardiac pacemakers: 3rd Update 2025
- Temporary nitinol implantation for the treatment of benign prostatic hyperplasia

[more Info >>](#)

Telecardiology in Heart Failure

In Austria, telemonitoring for heart failure is already used regionally as a supplement to nurse led disease management programmes (DMPs), and further regions are planning implementation. However, the demonstrable added benefit compared with DMPs without telemonitoring remains unclear. AIHTA systematically evaluated the effectiveness and safety of non invasive telemonitoring in addition to DMPs versus DMPs without telemonitoring for heart failure patients after hospital discharge. In addition, an evaluation concept for digital health technologies within Austrian DMPs was developed.

[more Info >>](#)

Genetic Testing: Overview, Prioritisation Criteria and Pilot Evaluations

As part of this project, clinical indications for genetic testing were identified from systematic reviews and HTA reports and subsequently prioritised in a stakeholder workshop. The jointly developed criteria, together with an international cross-country analysis, are intended to serve as a basis for future evidence-based reimbursement processes in Austria. Using these prioritisation criteria, two pilot assessments in the areas of “molecular diagnostics” and “carrier screening” were carried out. Based on systematic reviews, clinical effectiveness and safety, organisational, economic and ethical aspects and guideline recommendations were analysed. The results were then discussed in the Austrian context.

[more Info >>](#)

Clinical and Organisational Effects of AI Applications in Hospitals

Within this project, two reviews were produced on AI supported digital health technologies currently used or considered particularly relevant in Austrian hospitals in the areas of documentation and diagnostic imaging. As a concrete use case, an AI supported analysis of chest X rays for lung cancer detection was evaluated regarding its clinical and organisational effects as well as the resources required for implementation. For documentation support, a structured analysis of the available areas of application was conducted, including a systematic overview of existing functionalities and the currently available evidence.

[more Info >>](#)

ASSESS-DHT: Assessing Digital Health Technologies in Europe

Harmonising evaluation methods for digital health technologies (DHT) is a crucial factor in driving the digital transformation of health systems across the EU. In a European collaborative project, AIHTA worked together with other HTA institutions to develop a DHT assessment manual. To test this new manual in practice and identify potential areas for improvement, it is currently being piloted using a telemedicine DHT for people with type 2 diabetes.

[more Info >>](#)

Preparatory Work for the EU HTA Regulation

From 2026 onwards, selected medical devices will undergo joint clinical assessments (JCA) at European level in accordance with the EU HTA Regulation. In 2025, AIHTA participated in meetings and played an active role in preparing methodological and procedural documents as part of the preparatory work.

[more Info >>](#)

Research Area

Drug Assessments

AIHTA analyses the effectiveness, safety, costs economic and organisational as well as, in many cases, ethical and social aspects of new and existing medicinal products. The aim is to provide evidence-based recommendations for their use – primarily in the hospital sector – to ensure fair and efficient healthcare. Since September 2024, HTA reports for the Appraisal Board have been a key focus of this research area.

» The year 2025 was characterised by the successful establishment of new HTA processes: through the systematic involvement of clinical experts and patients, the production of comprehensive HTA reports for national decision-makings within the Appraisal Board and active participation in joint EU assessments, AIHTA assumed a central role in the evaluation of medicinal products. «



Sabine Geiger-Gritsch

Projects 2025

Decision Support for the Appraisal Board

In 2024, the Appraisal Board was established in Austria as an interdisciplinary body responsible for issuing evidence-based recommendations on the use of selected high-cost and specialised medicinal products in the inpatient setting and at the interface between inpatient and outpatient care. AIHTA supports the work of the Appraisal Board's office within the Federal Ministry of Labour, Social Affairs, Health, Care and Consumer Protection (BMASGPK), including the prioritisation of medicinal products by the Appraisal Board and the development of a database of clinical experts across various specialties. The core of the work consists of producing comprehensive HTA reports. In 2025, AIHTA conducted assessments for the following medicinal products:

- Fidanacogene elaparovec (BEQVEZ®)
- Teprotumumab (TEPEZZA®)
- Lifileucel (AMTAGVI®)
- Obecabtagene autoleucel (AUCATZYL®)
- Dorocubicel / expanded CD34+ cells / unexpanded CD34-cells (ZEMCELPRO®)

[more Info >>](#)

EU HTA Regulation: Joint Clinical Assessments

The implementation of the EU HTA Regulation and the initiation of the first Joint Clinical Assessments (JCAs) marked the beginning of a new era of evidence-based decision-making in Europe in January 2025. The objective is to harmonise clinical benefit assessment through a coordinated process that enhances transparency and supports the efficient use of resources. The participation in a joint EU HTA assessment in November 2025 marked a significant milestone for AIHTA. As co-assessor in the evaluation of a new Advanced Therapy Medicinal Product (ATMP), together with the Danish Medicines Council, AIHTA actively contributed to the further development of the European HTA landscape. In addition, AIHTA undertook work to support the implementation of the EU HTA Regulation in Austria, including active participation in meetings of the HTA Coordination Group and its subgroups, as well as involvement in various working groups aimed at improving cooperation between Member States.

[more Info >>](#)

Enzyme Replacement Therapy in Mucopolysaccharidosis Types I, II and IVA and in Pompe Disease

Enzyme replacement therapy (ERT) is currently the standard of care for lysosomal storage disorders. These rare genetic diseases are characterised by a chronically progressive course and require long term, specialised medical care. Treatment is generally lifelong, and ERT does not provide a cure. The aim of AIHTA's systematic review was to assess the evidence on the long-term effectiveness and safety of selected enzyme replacement therapies for mucopolysaccharidosis (MPS) types I, II and IVA, as well as for Pompe disease.

[more Info >>](#)

Horizon Scanning in Oncology

To support decision making by (regional) drug commissions and payers, AIHTA conducted early assessments of new oncology medicines from 2009 to the end of 2019. From 2020 to the end of 2025, monthly fact sheets were prepared on all new cancer medicines that had received a positive opinion from the European Medicines Agency. Since the EU HTA Regulation came into force in January 2025, all new oncology medicines are assessed at the European level. Accordingly, AIHTA's existing programme line will be adapted from 2026 onwards. In the reporting year, ten fact sheets were published as part of the Horizon Scanning Oncology programme.

[more Info >>](#)

Research Area

Health Economics and Health Services Research

AIHTA analyses the economic aspects of health technologies and their impact on healthcare delivery. This includes cost-utility assessments, budget impact analyses and the examination of models of care. The aim is to support evidence-based decisions on the (needs based) allocation of resources and efficiency within the healthcare system.

»» *A highlight in 2025 was the dissemination of our findings on the international threshold landscape. Together with preparatory work for a health economic guideline and the other annual projects, we helped to create momentum for systematically addressing underuse, overuse and misuse of care and for promoting (needs based) healthcare provision.* ««



Christoph Strohmaier

Projects 2025

Structured Medication Review in Polypharmacy

AIHTA produced a systematic review on the effectiveness and safety of structured medication reviews, as well as on organisational aspects, patient-relevant outcomes, costs and implementation factors. In addition, the authors carried out a qualitative content analysis of documents of selected European countries in which structured medication reviews are reimbursed.

[more Info >>](#)

Nudges to Optimise Prescribing Behaviour among Physicians

Nudging is a behavioural economics concept that aims to influence people's behaviour without relying on bans or financial incentives. In a systematic review, AIHTA examined the effectiveness of nudging interventions in optimising prescribing behaviour among physicians and reflected on implementation aspects for Austria through an expert survey.

[more Info >>](#)

Preparatory Work for an Austrian Health Economic Guideline

- **Overview of International Guidelines**

Alongside the assessment of effectiveness, safety and factors such as ethical and social implications, health economic evidence is a core component of HTA. Many countries have developed guidelines to ensure the quality, methodological consistency and comparability of health economic evaluations. In 2025, AIHTA conducted an overview of international health economic guidelines and derived recommendations for Austria.

[more Info >>](#)

- **Guidelines – overview of costing methods**

The project comprised three key steps: first, outlining fundamental costing principles. Second, undertaking a systematic comparison of international best practices – particularly health economic reference cases and related costing processes. Third, developing initial proposals for costing within a future Austrian health economic guideline based on these analyses.

[more Info >>](#)

HI-PRIX

The aim of the Health Innovation Next Generation Payment & Pricing Models (HI-PRIX) project, funded under the EU Horizon Europe programme, was to expand the toolbox of pricing and payment models for new health technologies. The consortium, coordinated by Bocconi University, involved 18 partners from ten European countries. AIHTA's task was to compile facts and data on public contributions to the actual research and development costs of pharmaceutical development and to develop a method for identifying these costs for individual medicines.

[more Info >>](#)

STREAMLINE

As part of this project, all services available in Vienna for mental health conditions across the health, social, education, labour market, justice and informal sectors were recorded, their costs analysed and the results linked to existing data on demand and reimbursement. The project was funded by the Vienna Science and Technology Fund (WWTF) and implemented by the Department of Health Economics at the Medical University of Vienna in cooperation with AIHTA, Gesundheit Österreich GmbH and Loyola University.

[more Info >>](#)

Research Area

Public Health and Complex Interventions

The assessment of complex and public health interventions using Health Technology Assessments is still a relatively new field of research, but one that is gaining increasing importance internationally. The aim is to generate a foundation for health policy decision-making to design public health measures – from prevention programmes to models of care for different diseases – in an efficient and cost effective manner.

» In 2025, our research area intensified the use of new methodologies and innovative forms of evidence synthesis. Together with established approaches and the successful continuation of European collaborations, this strengthened the robust assessment of complex public health interventions. «



Aline Dragosits



Ingrid Zechmeister-Koss

Projects 2025

Further Development of the Preventive Medical Check-up

The preventive medical check-up (VU) has been an essential part of the Austrian social health insurance system since 1974. Its purpose is to reduce health risk factors and to detect diseases as early as possible. The last update of the programme took place in 2005. The Federation of Social Insurances is currently revising the preventive services included in the programme. In 2025, AIHTA was commissioned to collect and subsequently update the evidence for selected components of the VU. The following reports were published:

- **Brief Interventions for Lifestyle Counselling**

Lifestyle counselling is regarded as a key preventive intervention against non-communicable diseases, particularly cardiovascular and oncological conditions. AIHTA examined the effectiveness and practical feasibility of brief interventions targeting physical activity, healthy diet and the reduction of alcohol consumption, all of which address risk factors for these diseases. Recommendations were derived from these findings.

[more Info >>](#)

- **Scores for Predicting Cardiovascular Diseases**

Cardiovascular risk scores – mathematical models that estimate the likelihood of a cardiovascular event within a specified timeframe – are used internationally for prevention. AIHTA systematically reviewed several of these risk prediction models. The aim was to compare their predictive accuracy as well as their impact on population health and health related behaviour. In addition, aspects of practical implementation within the Austrian preventive check-up programme were examined.

[more Info >>](#)

- **Screening for Chronic Kidney Disease**

Chronic kidney disease is common and often remains undetected for a long time. It is associated with an increased risk of cardiovascular disease, premature mortality and reduced quality of life. Early detection can prevent disease progression and complications. AIHTA summarised the evidence from systematic reviews and guidelines regarding screening recommendations and placed the findings in the context of the Austrian preventive medical check-up.

[more Info >>](#)

- **Screening for Prostate Cancer, Lung Cancer and Abdominal Aortic Aneurysm**

Prostate cancer is the most common malignancy among men in Austria; lung cancer is the second most common cancer in both sexes and is associated with high mortality. Abdominal aortic aneurysm (AAA) is rare, more frequent in men and usually asymptomatic, but can be fatal if ruptured. Screening procedures exist for all three conditions, but they are currently not part of publicly funded preventive health-care in Austria. AIHTA summarised current evidence from HTA reports and guidelines in concise fact sheets.

[more Info >>](#)

Transition from Child and Adolescent to Adult Mental Health Services

According to expert estimates, almost half of the patients in child and adolescent mental health care require continued treatment in adult mental health care services. This phase of “transition” is often characterised by interruptions and care discontinuities. Austrian experts highlight the need for structured protocols and clear framework conditions. AIHTA analysed international models of transitional psychiatry and derived recommendations for Austria.

[more Info >>](#)

Social Prescribing in Primary Care: A Realist Review

In social prescribing, patients in primary care with non-medical health related needs are referred to suitable local services. Available options range from physical activity programmes to housing advice. The concept has already been implemented in several primary care units and practices in Austria. Using realist methods, AIHTA examined the evidence for the Austrian social prescribing process and identified success factors.

[more Info >>](#)

FALCO: Comprehensive Drug Rehabilitation with Music

The EU project “Fighting Addictions, improving Lives: COmprehensive drug rehabilitation with music” (FALCO) investigates how music therapy can reduce the burden of disease caused by substance misuse. A study involving 600 participants across seven European countries compares active music groups, music listening groups and standard treatments. Additionally, mechanisms of action are explored using neuropsychological tests and brain imaging. As part of the European consortium, AIHTA is responsible for the systematic review of long-term patient and policy relevant outcome instruments, complemented by patient interviews.

[more Info >>](#)

Research Area

Rapid Reviews

On behalf of hospital providers and social insurance institutions, AIHTA prepares Rapid Reviews on a wide range of topics, synthesising scientific findings from multiple studies assessing and integrating them into an overall picture. These reviews provide high quality decision support when timely analyses of the evidence base on medical services are required.

» In addition to providing immediate decision support through four Rapid Reviews, we discussed our methodology at a symposium during the EbM Network meeting, presented findings at the LISAVienna Conference, and contributed the results of a Rapid Review to a Delphi process for evidence-based recommendations on skin cancer prevention. «



Reinhard Jeindl

Projects 2025

Reimbursement Models and Pricing of Digital Health Applications

Digital health applications (DiGA) are officially approved medical devices for which Austria does not yet have established assessment and reimbursement procedures. In a rapid scoping review, AIHTA examined international models of cost reimbursement and pricing and analysed their advantages and disadvantages for potential integration into routine care.

[more Info >>](#)

Serum Eye Drops for Severe Eye Diseases

Based on the available evidence, AIHTA evaluated how effective and safe serum eye drops are for patients with severe diseases of the ocular surface (particularly keratoconjunctivitis sicca) compared with standard therapy, placebo or no treatment. Outcomes assessed included diagnostic parameters, quality of life, and adverse effects.

[more Info >>](#)

Telerehabilitation for Chronic Low Back Pain

In a rapid review, AIHTA investigated telemedical interventions for chronic lower back pain. The review assessed the effectiveness and safety of telerehabilitation compared with standard therapy or no treatment, focusing on pain reduction, functional improvement, quality of life, and adverse effects.

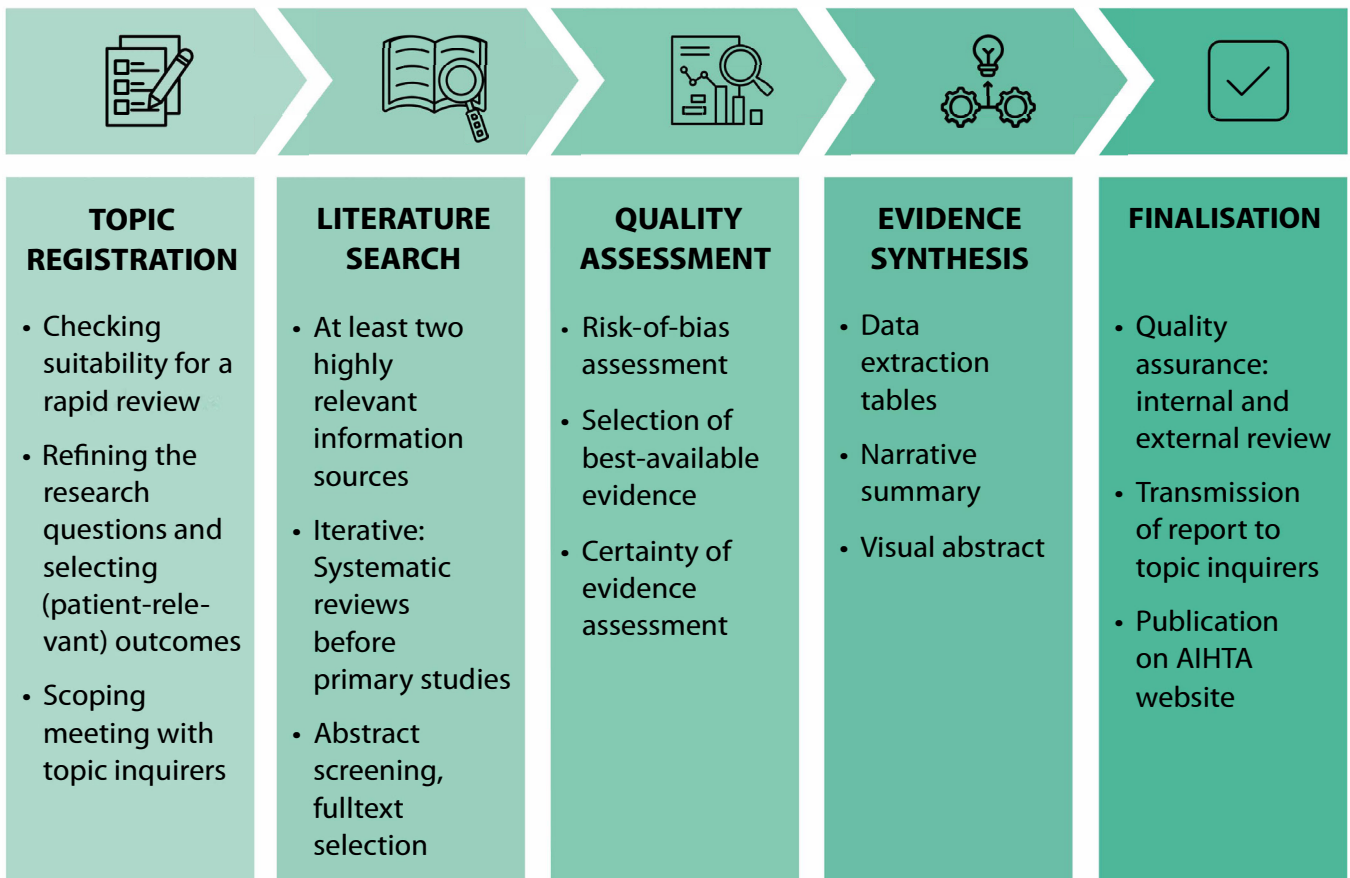
[more Info >>](#)

Combination Therapy for Urothelial Carcinoma

Cancers of the urinary tract are common and carry a high risk of recurrence after treatment. AIHTA conducted a rapid review analysing the effectiveness, safety and cost effectiveness of Enfortumab vedotin in combination with Pembrolizumab compared with platinum-based chemotherapy.

[more Info >>](#)

AIHTA Process for Rapid Reviews



Events

17
MAR

Symposium Economic Evaluations in Decision Making

Ceremony marking the change in management – Farewell to Claudia Wild



25
MAR

Board Meeting



2
APR

Team Workshop on the annual work programme, skills and expertise



16
Mai

Scientific Advisory Board



12
JUN

ASSESS-DHT Meeting



13
AUG

AFYA Press Conference



22
AUG

Team Workshop on organisational development

Summer Picnic



2025

9
SEP

Workshop: Appraisal Board
'Health Economic Evaluation'



11
NOV

Board Meeting



24
NOV

Christmas Party



2
DEZ

Signing of the Benelux Contract
with General Manager



12
DEZ

Shareholders' Meeting



18
DEZ

Validation Workshop: Evaluation



The Team 2025



Jule Pleyer



Tatiana Marschik



Eelen Rotschedl



Andrea Fried



Christoph Strohmaier



Sarah Wolf



Lena Grabenhofer



Ingrid Zechmeister-Koss



Gregor Götz



Smiljana Blagojevic



Kerstin Skriner



Daniel Fabian



Eva Malikova



Yui Hidaka



Sabine Ettinger



Alba Colicchia



Julia Mayer-Ferbas



Michaela Riegelneegg



Karin Hutterer-Schubert



Aline Dragosits



Ozren Sehic



Naomi Linton-Romir



Sabine Geiger-Gritsch



Nicole Grössmann-Waniek



Reinhard Jeindl



Diana Szivakova



Lucia Gassner



Judit Erdös



Viktoria Hofer



Julia Kern-Kim



Tarquin Mittermayr



Romy Schönegger



IMPRINT

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