

GUEST EDITORIAL

# Advancing healthcare decision-making for the common good: a tribute to Professor Rovira Forns

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## Abstract

This editorial introduces the special issue dedicated to commemorating the life and scholarly achievements of Professor Joan Rovira Forns, a distinguished health economist whose pioneering work continues to influence global health policy and research. We discuss why Professor Rovira was a prominent figure in the field and summarise some of his key contributions. Next, we highlight the collection of papers featured in this issue, explaining how they connect to his work and contribute to his lasting legacy by celebrating his interdisciplinary approach and dedication to societal impact.

**Keywords:** health economics; HTA; pricing; equity; interdisciplinary social science

## 1. A thoughtful and visionary scholar

Scientific and policy debates advance thanks to pioneering individuals who spark critical discussions through innovative ideas and compelling evidence, inspiring others to build on and strengthen their contributions. Professor Joan Rovira Forns (‘Professor Rovira’), a distinguished health economist and Emeritus Professor at the University of Barcelona, to whom this special issue is dedicated, was a leader in the field throughout his career. Professor Rovira brought innovative perspectives to established frameworks in health economics, consistently challenging conventional approaches and inspiring new ways of thinking. His contributions have left a lasting impact on the field, and his work bridged a diverse range of themes, including – without implying a specific order – pharmaceutical pricing and reimbursement, health technology assessment, applied welfare economics, health and decision sciences, policy and institutional analysis of health systems, and global equity in healthcare access. Professor Rovira was a generous mentor who inspired multiple generations of researchers. His unwavering commitment to intellectual rigour – valuing intellectual depth over academic formalities – alongside his ethical integrity and dedication to public service, left a profound and lasting impact on all who had the privilege to learn from him.

As an academic entrepreneur, Professor Rovira held leadership roles that further amplified his intellectual contributions. He co-founded the Spanish Health Economics Association (AES), played a pivotal role in the foundation of the International Society of Outcomes Research (ISPOR) as well as in the early steps of European Health Economics conference in Stockholm in 1998. He edited several journals and even founded some such as the journal *Costs Effectiveness and Resource Allocation* and was a member of the editorial board of

many others<sup>1</sup>. Professor Rovira also made significant practical contributions on a global scale, advising numerous governments – particularly in Latin America. He cared about community and authored the first textbooks on economic evaluation and health technology assessment (HTA) in Spanish, well before the field gained widespread recognition. Moreover, he played a pivotal role in advancing and institutionalising HTA across Europe, but especially in Latin America, and the Caribbean. He was also the founding director of SOIKOS, one of the pioneering research centres for health economics and outcomes evaluation which was necessary given the rigidity of Spanish universities at the time with regards to policy related activities. In addition to his academic tenure at the University of Barcelona, he served as Senior Economist at the World Bank and as consultant to major international health organisations including the World Health Organisation and the Pan-American Health Organization.

Professor Rovira, fondly called ‘Janin’ among friends, was an extraordinary figure – his presence unmistakable at every conference and gathering. A modest scholar that connected with others through warmth, respect, and a sharp sense of humour, making him an exceptionally talented conversationalist. He approached new people and ideas with genuine openness, effortlessly forming friendships wherever he went. Though one might disagree with his viewpoints, the passion and integrity behind his arguments were undeniable. He will be fondly remembered by many for his guitar performances at the World Bank’s Department of Health, Nutrition, and Population happy hours, where he lifted everyone’s spirits. A passionate internationalist, Professor Rovira lived in numerous countries, including Denmark, Germany, Ecuador, Colombia, Argentina, the United States, Moldova, and Cuba. Cuba held special significance for him, as it was the country where his father’s family had settled – one of the very few destinations in Latin America chosen by Catalan migrants at the time. His approach of life embodied the essence of wabi-sabi – valuing simplicity, humility, and the imperfect beauty found in authenticity. He was a pioneer of urban biking in Barcelona and a dedicated advocate of second-hand shops long before they became fashionable, driven by his commitment to reducing consumerism and its impact on the planet.

In contrast to conventional economic thinking, he dismissed the idea that economics occupies a superior position within the social sciences, frequently remarking with a touch of humour, ‘There is more than demand and supply out there!’. His instinct was always to encourage collaboration across disciplines – partnering with sociologists, decision scientists, anthropologists, political scientists, and, notably, professionals in medicine and public health.

His extensive international collaborations, broad professional networks, and deep commitment to mentorship were instrumental in shaping the practice of health economics in Spain, and certainly across Latin America and the Caribbean. His contributions continue to exert a significant influence and are referenced in contemporary research and policy documents, particularly in the areas of pharmaceutical regulation and healthcare decision-making.

This special issue is a tribute to his scholarly life. The papers included in this special issue comprise a carefully selected group of contributions originally presented at a workshop held in Professor Rovira’s honour. Spanning time zones from Sydney to Colombia and San Francisco, the workshop took place in the faculty of economic sciences in Barcelona, brought together a truly global and diverse group of scholars, reflecting the inclusive and international spirit that Professor Rovira so strongly championed. More than a dozen papers were presented with remarkable energy and efficiency – ‘rejoicing without pause’, as he loved to say. The studies discussed during this workshop, explored the diverse themes central to his work. Friends and collaborators generously submitted papers, all of which underwent a rigorous peer-review process. Unfortunately, due to space limitations, we were only able to accept just over half of the submissions.<sup>2</sup> Professor Rovira’s

<sup>1</sup>Including *Pharmacoeconomics*, the *European Journal of Health Economics*, the *Journal of Health Services research and Policy*.

<sup>2</sup>On April 14, 2023, an important date in Spain’s modernization - the declaration of the II Spanish Republic 1931-39 - a few months after he left us in July 2022.

wife, Mireia Esteve, and his daughters Sara and Muriel – both academics specialised in linguistics and physics respectively, actively participated in the workshop adding a deeply personal dimension to this tribute. At the heart of these contributions lied a question that underpinned much of his scholarship – how to conceptualise and measure welfare in healthcare and operationalise it for health decision-making and policy analysis. Next, we attempt to provide a snapshot of his main contributions. Section three discusses the main contributions of the special issue in his honour, and a final section concludes with final thoughts.

## 2. Professor Rovira's scholarly and intellectual contributions

Acknowledging that any attempt to summarise the life and work of an academic will inevitably be incomplete, this section highlights selected aspects of Professor Rovira's research that we believe represent some of his most significant contributions. It is fair to say that he was a pioneer in examining how medicines should be priced and reimbursed – always with a commitment to ensuring equitable global access. His work consistently addressed the enduring challenge of balancing the promotion of pharmaceutical innovation with the goal of universal access (Rovira, 2015)<sup>3</sup>. For instance, his work on orphan drugs addressed the unique economic challenge of how best to fund treatments for rare diseases, calling for sustainable policies that balance the need for research incentives with affordability (Drummond *et al.*, 2007). He engaged in important research on the effectiveness and efficiency of pharmaceutical lending practices by international institutions, including the World Bank (Rodríguez-Monguio *et al.*, 2007), and his editorial contributions emphasised the pressing need for fair drug pricing strategies in low-income countries (Rovira, 2002).

Some of Professor Rovira's work focused too on specific problems akin to many European countries, addressing the efficiency of pharmaceutical pricing and reimbursement schemes, the design and implications of copayment systems (Costa-Font *et al.*, 2007), as well as the welfare effects of rigid price controls alongside the effect of flexible strategies to promote generic drugs market penetration across diverse national settings (Espín *et al.*, 2011). As an economist, he was deeply concerned about the rising costs of healthcare – which diverts funding for other social programmes – and contributed actively to broader discussions on pharmaceutical cost containment across Europe (Rovira and Darbà, 2001; Espín and Rovira, 2007). His work was widely disseminated through high-quality peer-reviewed journals, reports by the World Bank, the European Commission and the World Health Organisation, as well as white papers exploring cross-country comparisons of pricing and reimbursement systems. At the time, these studies were instrumental in helping policymakers understand how global market forces and regional practices shape national pharmaceutical policies.

Professor Rovira was a leading figure in promoting the standardisation of cost-effectiveness analysis in Spain and Latin-America, co-authoring one of the first best practice guides for the Spanish Ministry of Health in the early 1990s. His work underscored the importance of harmonising economic evaluation methods to improve the comparability of health care decision making across healthcare systems. He also contributed to the development and application of cost-effectiveness thresholds in decision-making and reviewed the progress of HTA journals in shaping the discipline and did not shy away of actual practice and conducted numerous economic evaluations himself.

Unlike many academic that work on HTA, Professor Rovira's commitment to global equity was a relentless theme in his research together with his obsession for health system to reflect the values of the population that fund them. Accordingly, he was an advocate for participatory approaches to healthcare priority setting. He developed and applied innovative methods on this front – such as budget experiments – to elicit public preferences for health programs in both European and

<sup>3</sup>For a comprehensive list of Professor Rovira's publications since 2001, you can visit his personal blog: Joan Rovira Forns – Publications.

developing country contexts (Costa-Font and Rovira, 2005; Costa-Font *et al.*, 2015; Gonzalez-Block *et al.*, 2001). In Costa-Font *et al.* (2016), he tested an alternative method for eliciting healthcare preferences tailored specifically to rural and less literate populations, though also applicable in urban settings. This study implemented a realistic, participatory budget allocation experiment in Guatemalan communities, demonstrating that such approaches are effective in revealing collective preferences while fostering meaningful community engagement in health care reform.

Another of Professor Rovira's passions was to question some of the assumptions of rationality used in economics, and especially in behavioural decision-making under risk so common in health economics models. His work explored how individuals perceive risks to explain smoking behaviour. Antoñanzas *et al.* (2000) investigated the perceptions of tobacco-related health risks among smokers in Spain, highlighting that like in the US, individuals overestimate their perceived risks of lung cancer after smoking which in turn varied notably with education levels. Building on this, Rovira *et al.* (2000) expanded the analysis to encompass public understanding of secondhand smoke risks, and Costa-Font and Rovira-Forns (2008) show that the willingness to pay for long-term care insurance depends on people's risk perception too.

Probably, one of the most defining features of Professor Rovira was his normative and policy research. For instance, his report for the World Bank introduced the concept of 'equity pricing' as a pricing mechanism to improve drug affordability in low-income settings (Rovira, 2003), which he later expanded by studying how regional cooperation could enhance access to health technologies (Espín *et al.*, 2016). His subsequent work tackled urgent global challenges such as how best to mitigate medicine shortages and address the emergence of disparities in access to essential treatments (Acosta *et al.*, 2019). He took some of his ideas to the practical arena, and developed several comprehensive decision-making models to guide the pricing and reimbursement decisions in low-income countries – particularly in Latin America – which, redefined the delicate balance between encouraging innovation with drug prices and, the costs to a resource-constrained country of intellectual property (Iglesias *et al.*, 2005).

It's worth noting that he was deeply fascinated by the refinement of fundamental concepts. He explored core questions, such as the true meaning of 'welfare' – a concept central to healthcare resource allocation yet still unresolved due to its dependence on underlying value judgments. Closely linked to this was his work on how healthcare systems determine and measure 'value' of health care systems. In Costa-Font *et al.* (2017), he argued that value goes beyond traditional health outcomes to encompass broader societal and ethical dimensions such as equity, autonomy, and quality of process – areas where he made significant foundational contributions.

Similarly, one could engage in endless discussions with him about what truly constitutes a 'cost' in real-world settings – for example, whether any negative outcome should be considered a cost – or what defines 'innovation'. In Rovira (2009), he explored the challenges posed by intellectual property rights in rewarding innovation, their impact on global access to medicines, and proposed alternative policy approaches, offering valuable insights and practical recommendations. These issues are especially important in health economics, where everyday decisions rely on practical proxies for welfare, such as quality-adjusted life years (QALYs).

### 3. The special issue contributions

#### 3.1. Standardising and expanding the use of economic evaluation

The first section of this special issue is devoted to understanding how to support evidence-based decision-making. This theme is taken up in Vallejo-Torres *et al.* (2025) in this issue by examining the incorporation of economic evidence in Spain's Therapeutic Positioning Reports. They show

that while references to cost-effectiveness data are becoming more common, their application in reimbursement applications remains still patchy. The authors highlight the need for greater methodological consistency and clearer regulatory expectations – an agenda fully aligned with Professor Rovira's advocacy for standardisation and transparency in economic evaluations (Brandt *et al.*, 1993).

### 3.2. Expert insights on pharmaceutical reimbursement

Building on the growing recognition of the need for both evaluative rigour and societal legitimacy in healthcare decision-making, recent research has increasingly turned to the complex realities of how reimbursement decisions are made in practice. Rejon-Parrilla *et al.* (2025) in this issue contribute to this discourse by offering a complementary perspective through interviews with Spanish health policy experts, shedding light on the multifaceted nature of pharmaceutical reimbursement processes. Their findings underscore that such decisions involve a careful balancing act between economic considerations, clinical evidence, ethical values, and political pressures. Policy experts recommended that reimbursement decisions should specifically account for unmet medical needs and rare diseases, using QALYs to measure health benefits, alongside explicit cost-effectiveness thresholds. This result seems to suggest Professor Rovira did a good job alongside others at training decision makers on how to use cost-effectiveness analysis, and more generally, in disseminating the use of economic evaluation.

In this issue, Papadopoulos, Visinti, Kyriopoulos, Kanavos P (2025) examine the determinants of HTA rejections and explore the extent of inter-agency variation in technology appraisals. Their analysis identifies key predictors of HTA rejections, including submissions for cancer or orphan drugs, low-quality evidence, and significant uncertainty regarding cost-effectiveness. Importantly, they reveal systematic differences across HTA agencies in their likelihood of rejecting the same drugs – and note that such differences that are particularly pronounced in the evaluation of treatments for cancer and rare diseases. This paper explores a topic that aligns closely with areas where Professor Rovira made significant contributions and, surely, a question he would have offered valuable insights.

### 3.3. Toward fair access to pharmaceuticals

How to ensure a global fair, transparent, and sustainable access to pharmaceuticals was another of Professor Rovira's passions. The principles of fair pricing and access to quality pharmaceuticals were long-standing priorities in his work. As early as the 1990s and 2000s, he explored the main international mechanisms to improve affordability, including external reference pricing and World Bank lending strategies (Espín and Rovira, 2007; Rodríguez-Monguio *et al.*, 2007). Fernández *et al.* (2025) in this issue revisits these claims, and evaluates the evidence from various initiatives, including alternative models of innovation, manufacturing, procurement, intellectual property management, and organisational operation, and discusses the persistent challenges in the access to pharmaceuticals worldwide, and underscores the still incomplete pursuit of a free access to pharmaceuticals.

### 3.4. Public Participation and sustainable healthcare systems

A final section of the special issues is devoted to finding ways to increase public participation to enhance the responsiveness to local healthcare needs. López-Valcárcel and López-Casasnovas (2025) in this issue evaluate the effects of decentralised decision-making during the COVID-19 pandemic in Spain. They document that decentralised governance allowed more responsive and effective public health strategies, tailored to regional demographics and capabilities. They find that decentralisation must be accompanied by coordination mechanisms to ensure consistency and

fairness across regions. Using QALYs to assess regional responses to the pandemic healthcare related challenges, exemplifies the kind of integrated evaluative frameworks that Professor Rovira advocated for in both national and multilateral contexts, including the Observatorio Regional de Medicamentos para las Américas. These findings are consistent Costa-Font *et al.* (2015), which underscores how involving diverse actors – from policymakers to patients – can enhance both the fairness and acceptability of health system decisions, and are complementary to other studies of health care decentralisation (Angelici *et al.*, 2023). Finally, McGuire, Wharton, Hodgson, Kourouklis, Jofre-Bonet and Tran (2025) in this issue propose a new and innovative measures of health system resilience and sustainability, drawing on an index methodology that allows comparing health systems across countries and track changes over time. By capturing both structural and dynamic aspects of resilience, their framework offers valuable insights for policymakers aiming to strengthen health systems in the face of future challenges

#### 4. A lasting legacy

This special issue – and the workshop that preceded it – underscore the profound influence of Professor Rovira, not only on the authors of this editorial and the contributors to this special issue, but on countless scholars influenced by him which knowingly or not, they continue Joan's endeavours. John Maynard Keynes once observed that *'the ideas of economists and political philosophers, both when they are right and when they are wrong, are more powerful than is commonly understood. Indeed, the world is ruled by little else'* (Keynes, 1936). In our view, Professor Rovira was one of those 'economists and political philosophers' Keynes referred to in the area of health policy and economics. Beyond scholarly collaboration, he fostered numerous friendships that lead to wider debates on how to reform society for the common good. Despite his remarkable talent, he remained approachable and down-to-earth, treating everyone with genuine respect and warmth, regardless of their status, achievements, or background, and avoided academic politics, even though engaging in such behaviors might have accelerated his rise within the field.

Professor Rovira navigated the most exclusive circles of his field with ease, actively participating in major contemporary debates on health policy alongside some of the era's leading thinkers. We fondly remember him discussing the standardisation of economic evaluation with Mike Drummond, exploring (in Spanish) pathways to universal health coverage in the United States with Uwe Reinhardt and Peter Zweifel, or delving into the complexities of preference elicitation in healthcare decision-making with Alan Williams. Much like the spirit of the Enlightenment, he viewed everyone as 'citizen-philosophers', approaching the 'stars of his time' as friends – no different from anyone else.

We sincerely hope that this special issue not only highlights Professor Rovira's significant contributions but also brings greater awareness to his work. By showcasing his achievements and the depth of his insights, we only hope to inspire current and future generations of scholars, practitioners, and policymakers to build upon his legacy. Professor Rovira's passing is a poignant reminder, a "tipping point", that the true purpose of life is to make a meaningful difference in the lives of others; everything else – personal memories – will eventually fade and be forgotten. May his dedication and visionary approach serve as a guiding light, encouraging others to follow in his footsteps and continue advancing the field with the same passion and commitment.

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such as Anna García-Altés, Sergi Jimenez-Martin, Alistair McGuire, Félix Lobo, Juan del Llano, Mireia Jofre-Bonet, as well as international colleagues from across Europe and Latin America.

Both authors of this article were early life mentees of Professor Joan Rovira Forns and continue to build on his intellectual legacy through their research, teaching, and various academic duties. Professor Rodríguez-Monguió is a Professor of Health Economics, Outcomes Evaluation and Policy at the University of California San Francisco (UCSF), and Director of the UCSF Medication Outcomes Center. Professor Joan Costa-Font is a Professor of Health Economics at the London School of Economics and Political Science.

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