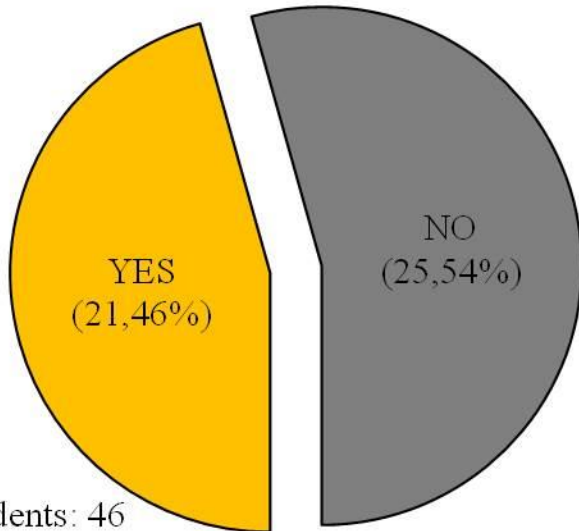
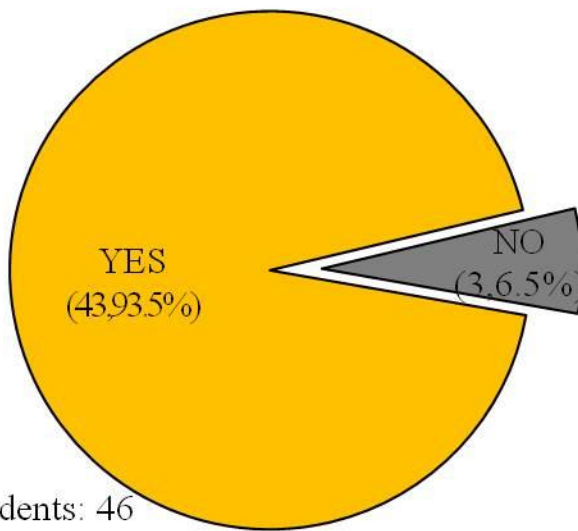


**Supplementary Table 1. Main result of expert interview on the HB-HTA introduction in Korea**

Question A. Have you ever heard of HB-HTA before?		Question B. Do you think HB-HTA is needed in Korea?	
 <p>Respondents: 46</p>		 <p>Respondents: 46</p>	
Question C. What kinds of HB-HTA do you think should be introduced in Korea? (multiple responses)			
Answer (Respondent: 44/46, Response: 119)		Responses	%
For education		10	8.4
Only for research		13	10.9
For research of existing HTA results		25	21.0
For self-operation to save funds		25	21.0
For self-operation for patient safety		22	18.5
For co-operating with government HTA		24	20.2
Total		119	100.0
Question D. What size of medical institution is needed to introduce HB-HTA? (multiple responses)			
Answer (Respondent: 43/46, Response: 70)		Responses	%
Local clinic		-	-
Special hospital		7	10.0
General hospital		24	34.3
Advanced general hospital		39	55.7
Total		70	100.0
Question E. Which medical area needs HB-HTA? (multiple responses)			
Answer (Respondent: 36/46, Response: 64)		Responses	%
Drug	Stem cell, anticancer drug, target therapy drug, new drug, antibiotics, anti-diabetic drug	16	25.0
Medical device	Medical imaging, in vitro diagnostics, robot surgery, new device, ultrasound therapeutic device, major medical equipment	24	37.5
Health technology	Stem cell therapy, robot surgery, monitored anesthesia care	22	34.4
Hospital system	Beds, physician assistant, diagnosis related group, joint commission international accreditation	2	3.1
Total		64	100.0
Question F. Which assessment element do you think should be included in HB-HTA, with the exception of safety and effectiveness? (multiple responses)			
Answer (Respondent: 44/46, Response: 88)		Responses	%
Financial impact		27	30.7
Patient impact		39	44.3
Policy influence		3	3.4
Ethic and law impact		16	18.2
Other		3	3.4
Total		88	100.0