Appendix B. Elements of the Quality Assessment checklist:

1. *Analytical framework: All relevant costs were measured appropriately?*

* Was the appropriate epidemiologic approach taken?
* Were all relevant, non-trivial cost components and their stakeholders identified?
* Were necessary timeframes specified?
* Was a case of disease or risk factor adequately and appropriately defined?
* Was the counterfactual population occurrence plausible and meaningful?
* Were additional, or excess, costs measured?
* Were only costs specific to (caused by) the health problem included (confounders controlled)?
* Were all important effects captured?
* Were important differences across subpopulations accounted for?
* Could the required level of detail be provided?
* For population-based studies, were cost allocation methods, data and assumptions valid?

1. *Methodology and data: how well were resource use and productivity losses measured?*

* For person-based studies, were appropriate statistical tests performed and reported?
* Were data representative of the study population?
* Were there any other relevant resource quantification issues?
* Were healthcare resources valued appropriately?
* Was the approach for valuing production losses justified, and assumptions valid?
* Was double counting of mortality-related production losses avoided?
* Were losses valued appropriately, given the study’s perspective?

1. *Analysis and reporting*

* Did the analysis address the study question?
* Was a range of estimates presented?
* Were the main uncertainties identified?
* Was a sensitivity analysis performed on: (i) important (uncertain) parameter estimates?
* Was a sensitivity analysis performed on: key assumptions? (including the counterfactual)
* Was a sensitivity analysis performed on: point estimates? (based on confidence or credible intervals)
* Was adequate documentation and justification given for cost components, data and sources, assumptions and methods?
* Was uncertainty around the estimates and its implications adequately discussed?
* Were important limitations discussed regarding the cost components, data, assumptions and methods?
* Were the results presented at the appropriate level of detail to answer the study question (cost components; disease subtypes, severity, stage; subpopulation groups, cost bearers)