

Trends in Use of Cost-minimization Analyses in CDA-AMC Reimbursement Submissions

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Background

- Canada's Drug Agency-L'Agence des médicaments du Canada (CDA-AMC) accepts a cost-minimization analysis (CMA) when the intervention is an additional drug in a therapeutic class already reimbursed for the indication and the intervention has similar comparative effectiveness.¹
- In January 2024, CDA-AMC revised its criteria to no longer require sponsor-submitted CMAs to demonstrate cost savings relative to comparators while signaling greater use of CMAs during re-analyses.
- It remains unclear whether an increase in CMAs were observed following implementation of the new CDA-AMC criteria.

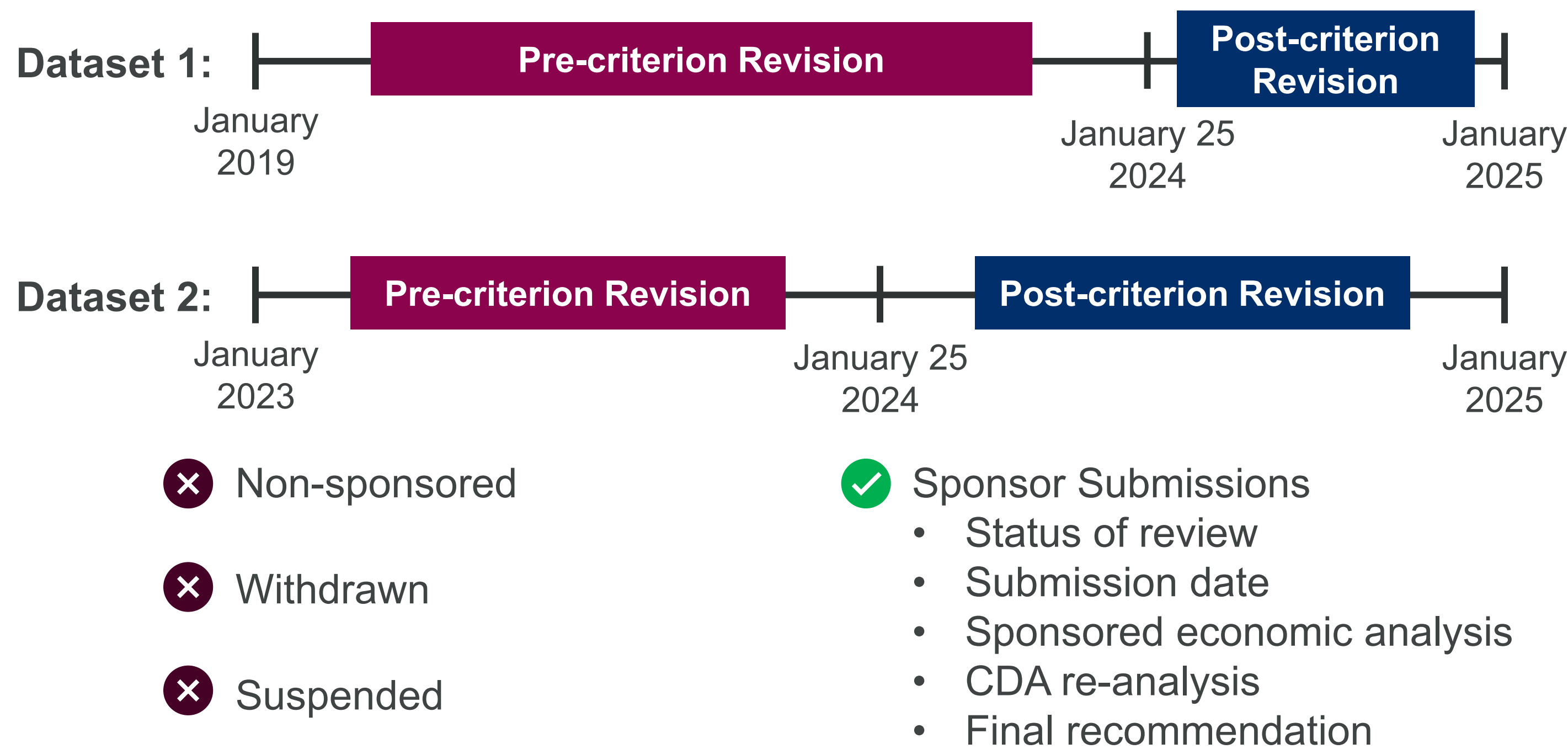
Objective

- This study evaluated trends pre- and post-revision of CDA-AMC criteria in January 2024 in CMA reimbursement submissions.

Methods

- A targeted search of the CDA-AMC website² in January 2025 identified sponsored submissions within a one-year time frame pre-criterion and post-criterion revision, as well as years 2019 onwards. Inclusion and exclusion criteria are outlined in **Figure 1**.

Figure 1: Overview of study design and methodology



References

1. CADTH Pharmaceutical Reviews Update – Issue 43. <https://www.cda-amc.ca/cadth-pharmaceutical-reviews-update-issue-43> (Accessed January 2025). 2. Reimbursement Review Reports. <https://www.cda-amc.ca/reimbursement-review-reports>. (Accessed January 2025).

Results

- From 2019 to 2024, 385 submissions to CDA-AMC were identified; 77 were excluded, resulting in 308 included submissions (**Figure 2**).
- A total of 113 oncology and 195 non-oncology submissions were identified, 87 which had review reports available (**Figure 2**).

Figure 2: Overview of CDA-AMC submissions from 2019 to 2024

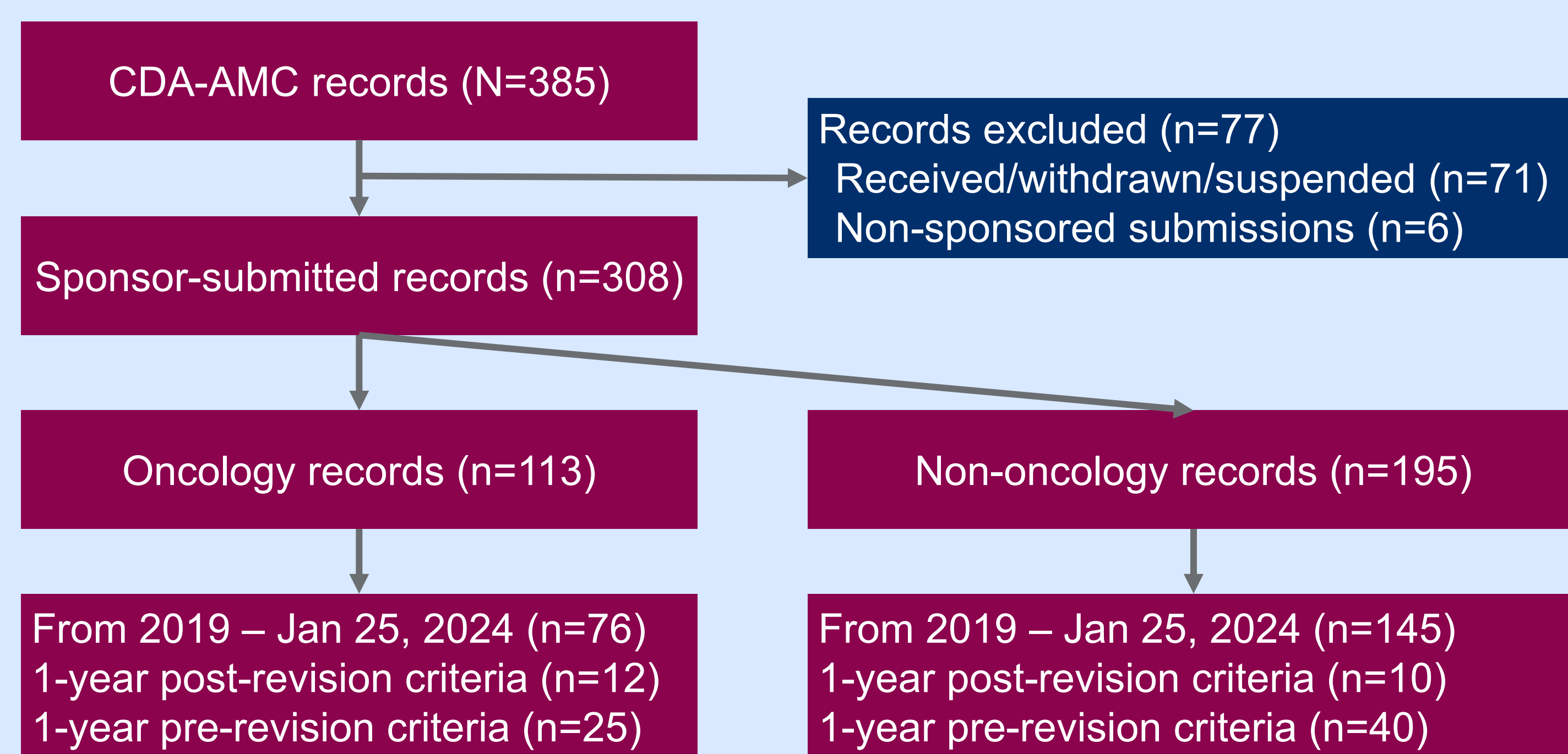
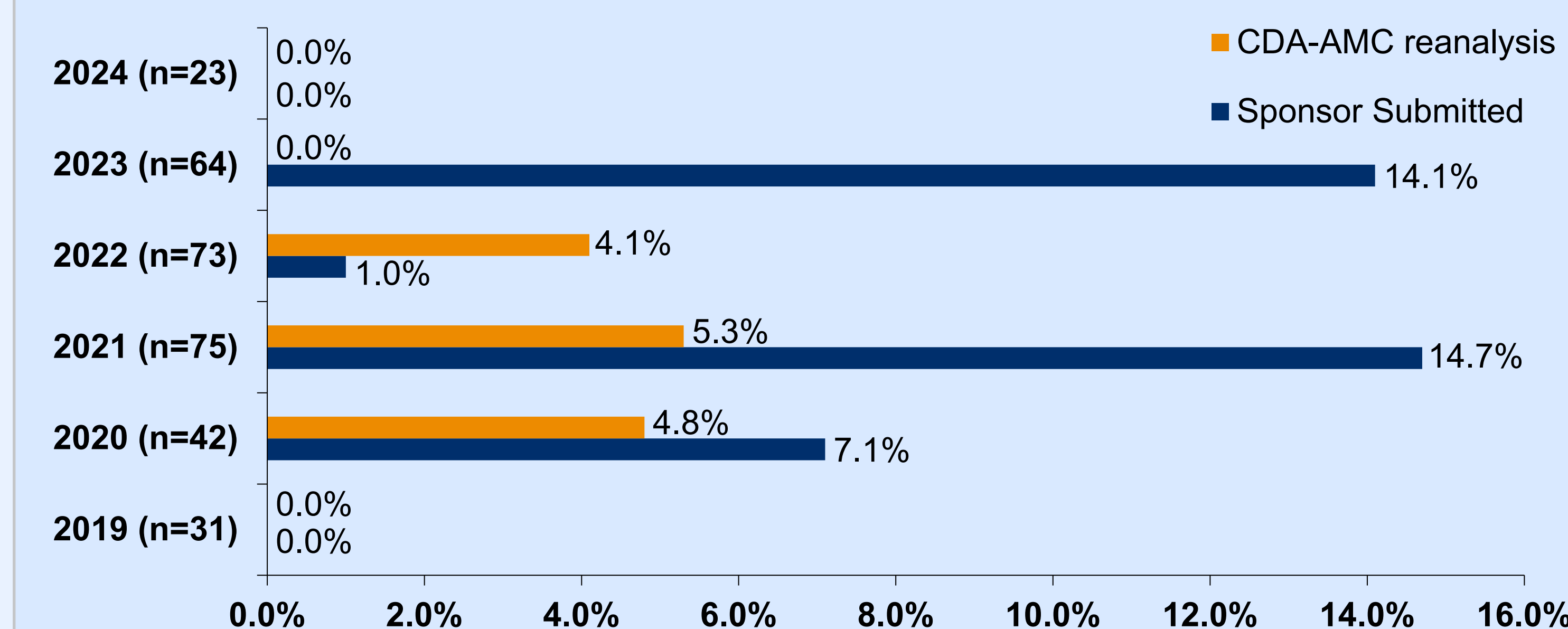


Table 1: Proportion of submissions with CMAs in the pre-criterion revision year vs. post-criterion revision year

Submission	Pre-criterion Revision Year CMA, n / N (%)	Post-criterion Revision Year CMA, n / N (%)
Oncology		
Total	4 / 25 (16.0%)	0 / 12 (0.0%)
Negative recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)
Conditional recommendation	4 / 4 (100.0%)	0 / 0 (0.0%)
Positive recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)
Non-oncology		
Total	5 / 40 (12.5%)	0 / 10 (0.0%)
Negative recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)
Conditional recommendation	5 / 5 (100.0%)	0 / 0 (0.0%)
Positive recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)
Combined		
Total	9 / 65 (13.8%)	0 / 22 (0.0%)
Negative recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)
Conditional recommendation	9 / 9 (100.0%)	0 / 0 (0.0%)
Positive recommendation	0 / 0 (0.0%)	0 / 0 (0.0%)

- There were nine CMAs submitted, with annual sponsor-submitted CMA rates of 13.8% pre-revision vs. 0.0% post-revision (**Table 1**).
- The number of CMAs were roughly equal between oncology products (4/25 [16.0%]) and non-oncology products (5/40 [12.5%]), with all receiving conditional recommendations (**Table 1**).
- There were no CMAs with negative recommendations (**Table 1**).
- The number of sponsor-submitted CMAs varied year over year between 2019-2024 (0.0%-14.7%) (**Figure 3**).
- The number of CMA re-analyses conducted by the CDA-AMC following a sponsored cost-utility analysis pre- and post-revision were both 0.0% however, rates varied between 2019-2024 (0.0%-5.3%) (**Figure 3**).

Figure 3: Number of submitted CMAs and CMA re-analyses by CDA-AMC



Conclusion

- This study was limited by a small sample size of completed post-revision reviews.
- Sponsor-submitted CMAs to CDA-AMC are a minority of submissions and were not used in any completed reimbursement reviews since the change to CMA criteria.
- Analysis of the last five years suggests no obvious trend in the annual proportion of submitted CMAs or CMA re-analyses by the CDA-AMC.

Abbreviations

CDA-AMC = Canada's Drug Agency-L'Agence des médicaments du Canada; CMA = cost-minimization analysis.

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