Deal or No Deal: The evolving use of commercial access mechanisms in NICE technology appraisals

David Aitken[1], Mark Orchard[1], Sophie Fox-Gmuer[1]

[1] Cogentia Healthcare Consulting, Cambridge, United Kingdom

INTRODUCTION

- Commercial arrangements are an important tool for companies seeking to demonstrate cost-effectiveness and strengthen their value proposition during NICE appraisals[1,2]
- The mechanisms available range from simple confidential discounts to more tailored agreements to manage affordability:
  - **Simple patient access scheme (PAS)** - Confidential percentage discount or fixed-price reduction on the published list price
  - **Complex PAS** - Additional conditions around treatment effectiveness, duration and uptake to improve the affordability of high-cost medicines
  - **Commercial access agreement (CAA)** - Confidential commercial terms are negotiated directly between the manufacturer and NHS England. May use similar mechanisms to complex PAS
  - **Managed access agreement (MAA)** - Provide patient access, typically for three to five years, while additional evidence is collected to address uncertainties identified during the initial NICE appraisal

OBJECTIVES

1. Quantify the proportion of NICE technology appraisals incorporating a commercial scheme
2. Characterise how the use of commercial schemes in NICE technology appraisals has evolved over time

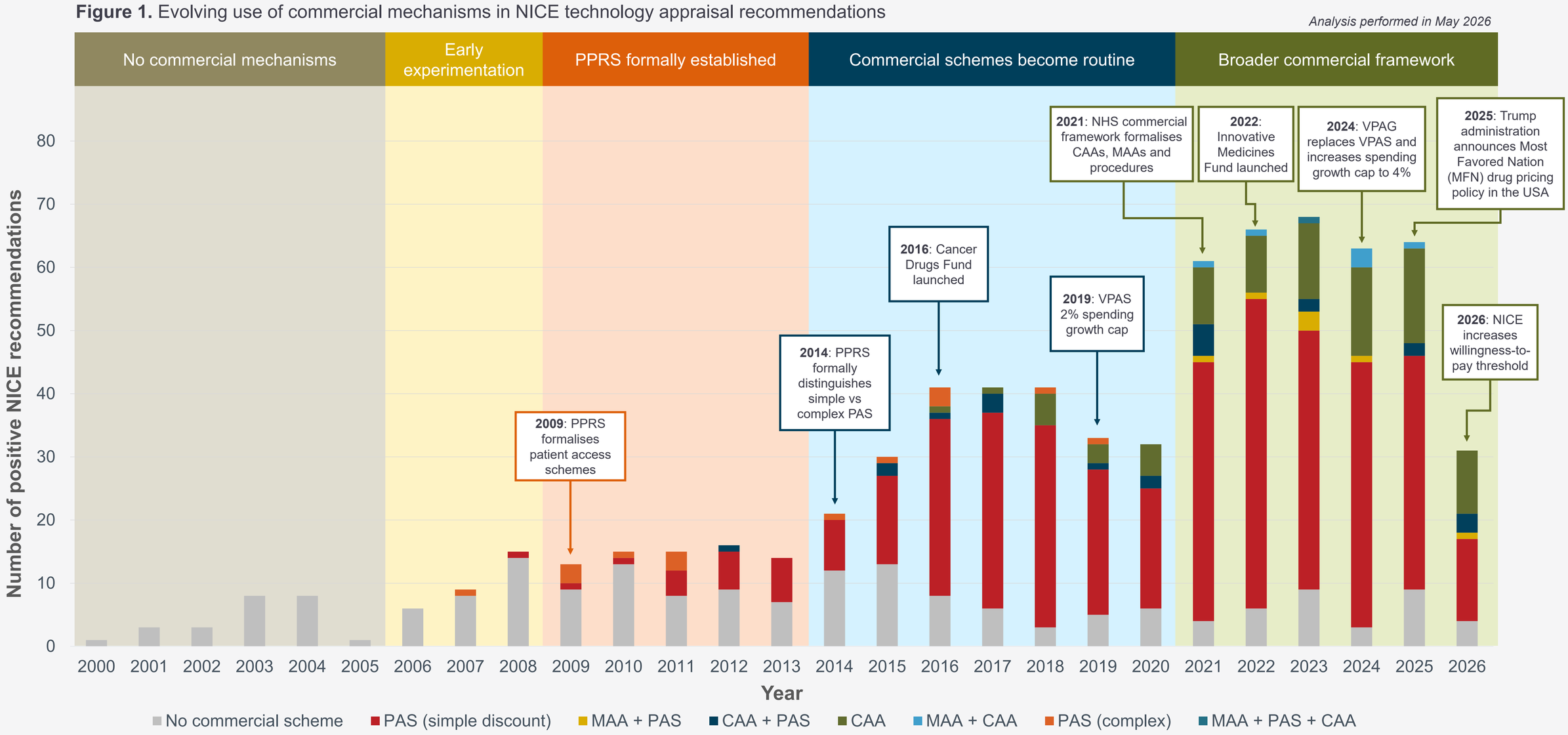
METHODS

- A review of the NICE website was conducted in May 2026 to identify technology appraisals containing a commercial arrangement[2]
- This research leveraged the list of technologies recommended by NICE that include a commercial arrangement and was supplemented with additional research into appraisals for which no entry was included[2]
- Appraisals that were terminated, superseded, non-recommended, or recommended only in research were excluded
- No date restrictions were applied

RESULTS

- Of the 933 appraisals identified, 719 met the inclusion criteria. Within this subset, 428 (60%) included a simple PAS, 113 (16%) a CAA, and 15 (2%) a complex PAS. Notably, one quarter of appraisals (n=186, 26%) included no commercial scheme at all — a pattern largely explained by the absence of a formal commercial framework during NICE's early years, and potentially skewed by primary care medicines, where confidential rebate schemes are typically used in place of other commercial mechanisms.†
- The findings of our research are well aligned with the evolution of the commercial framework (Figure 1)

Figure 1. Evolving use of commercial mechanisms in NICE technology appraisal recommendations



- Simple and complex PAS were uncommon in the early periods of NICE, reflecting that commercial schemes were exceptional rather than routine. However, an increase in PAS usage was observed following the PPRS formalisation in 2009. By 2011, approximately 47% of NICE recommendations included either a simple or complex PAS
- CAAs were almost entirely absent before 2016 but have grown steadily following the launch of the Cancer Drugs Fund and, subsequently, the Innovative Medicines Fund as managed access routes, for which a commercial agreement (alongside a data collection agreement) is a prerequisite
- Overall use of commercial mechanisms has remained high since 2016, reflecting an increasingly challenging and competitive commercial environment. Indeed, a further spike in commercial schemes was observed in 2021, following the publication of the NHS Commercial Framework which formalised the MAA and CAA routes
- Interestingly, our analysis suggests an increase in the number of CAAs being proposed by companies and accepted by NICE in 2026, with over half (14 of 27) of products with a commercial deal involving a CAA as of our data cut off. While it would be premature to draw firm conclusions from this observation, one plausible driver is the increased focus on reference pricing introduced by the Trump administration's Most Favored Nation (MFN) policy

CONCLUSIONS AND RECOMMENDATIONS TO MANUFACTURERS

- Early commercial arrangements centred on complex PAS, before simple PAS discounts emerged as the dominant mechanism. More recently, CAAs have grown rapidly, though their overall use remains well below that of simple PAS
- Reflecting the competitive UK pharmaceutical landscape, commercial schemes have become a routine feature of NICE appraisals, appearing in 86% of positive recommendations in 2025. Manufacturers should therefore treat commercial schemes as a core component of their HTA submission strategy

† Total exceeds 719 as some appraisals included both a simple PAS and a commercial access agreement

References: **1.** NHS England. 2025. NHS commercial framework for new medicines. Available at: https://www.england.nhs.uk/long-read/nhs-commercial-framework-for-new-medicines/ [accessed: May 2026]; **2**. National Institute for Health and Care Excellence. 2026. Patient access schemes and pricing agreements. Available at: https://www.nice.org.uk/what-nice-does/patient-access-schemes-and-pricing-agreements [accessed: May 2026]

Abbreviations: CAA, commercial access agreement; MAA, managed access agreement; MFN, most favored nation; NICE, National Institute for Health and Care Excellence; PAS, patient access scheme; PPRS, Pharmaceutical Price Regulation Scheme; VPAG, voluntary scheme for branded medicines pricing, access and growth; VPAS, voluntary scheme for branded medicines pricing and access

© Cogentia 2026. All rights reserved