

The not-NICE access pathway

NHS England specialised commissioning

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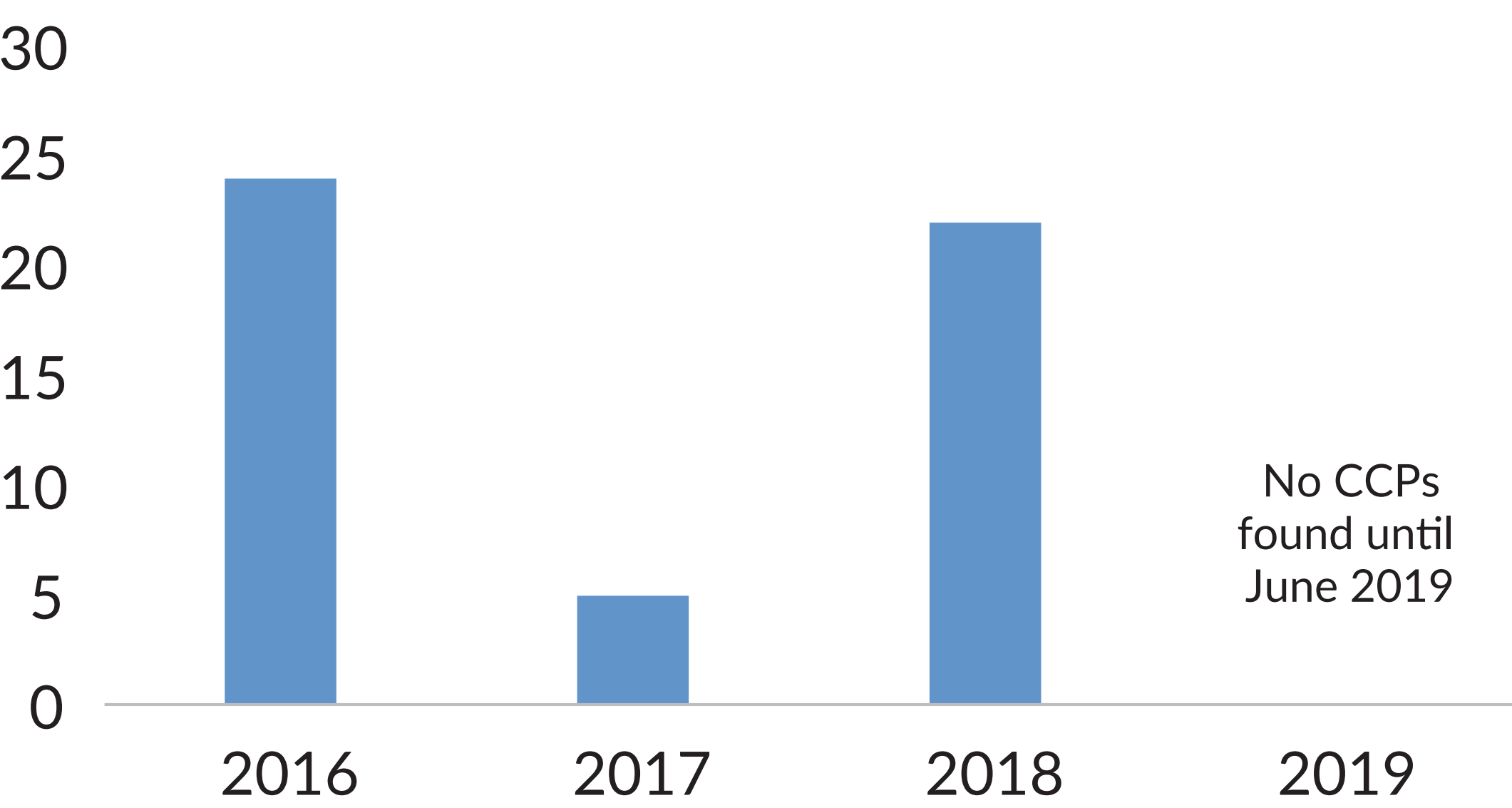
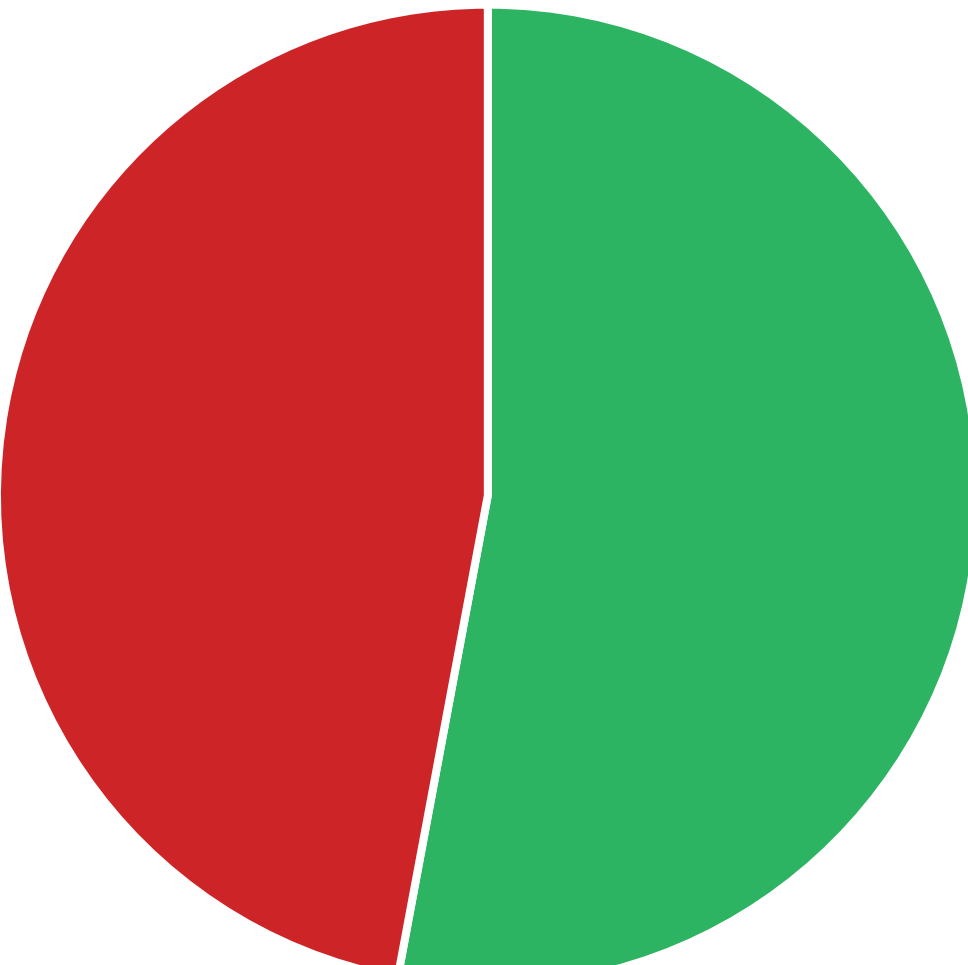
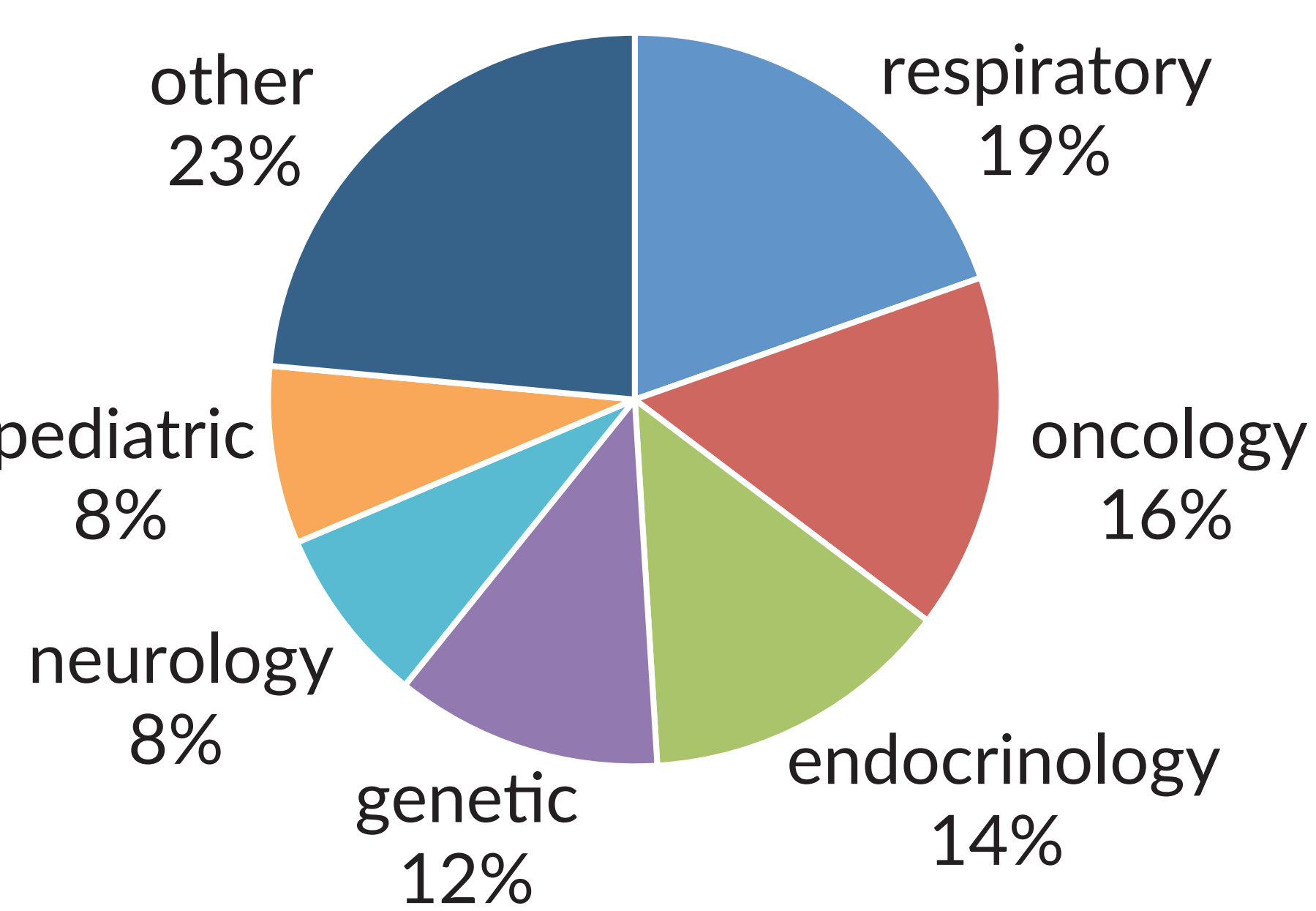
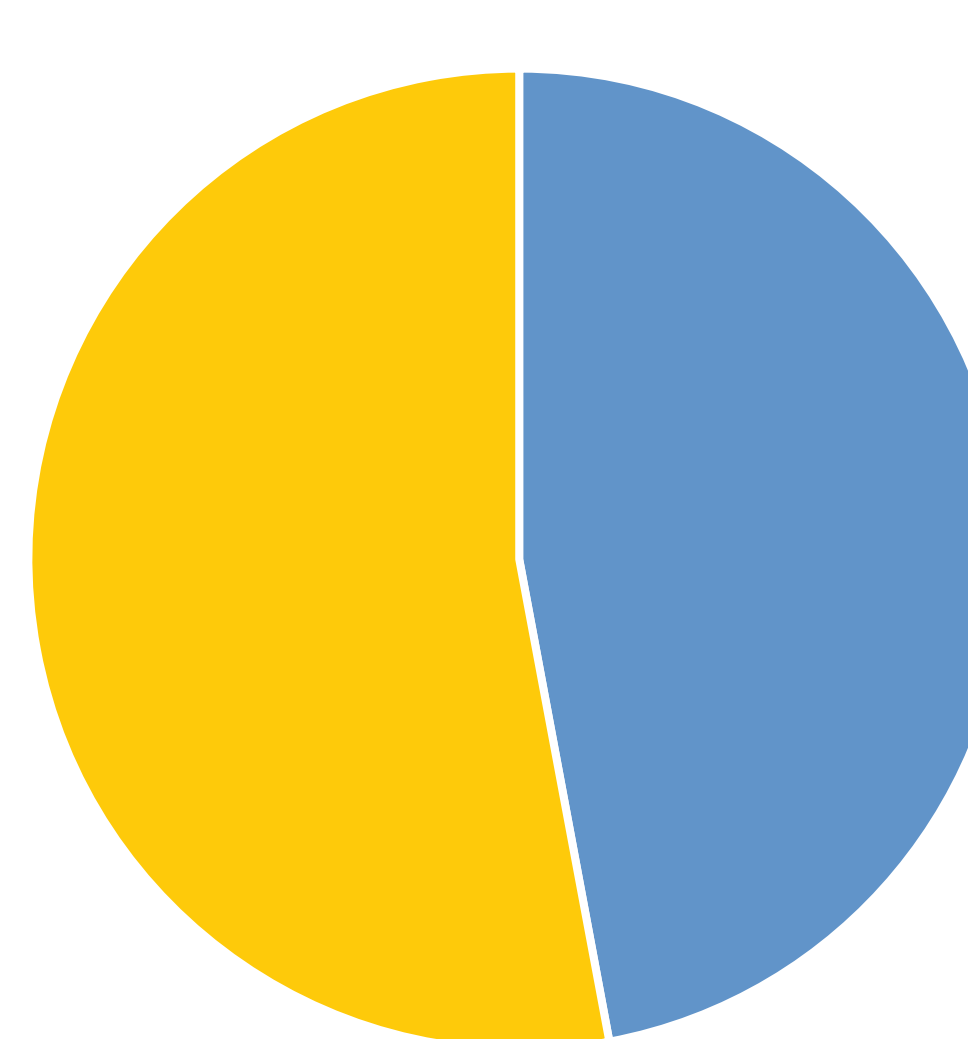
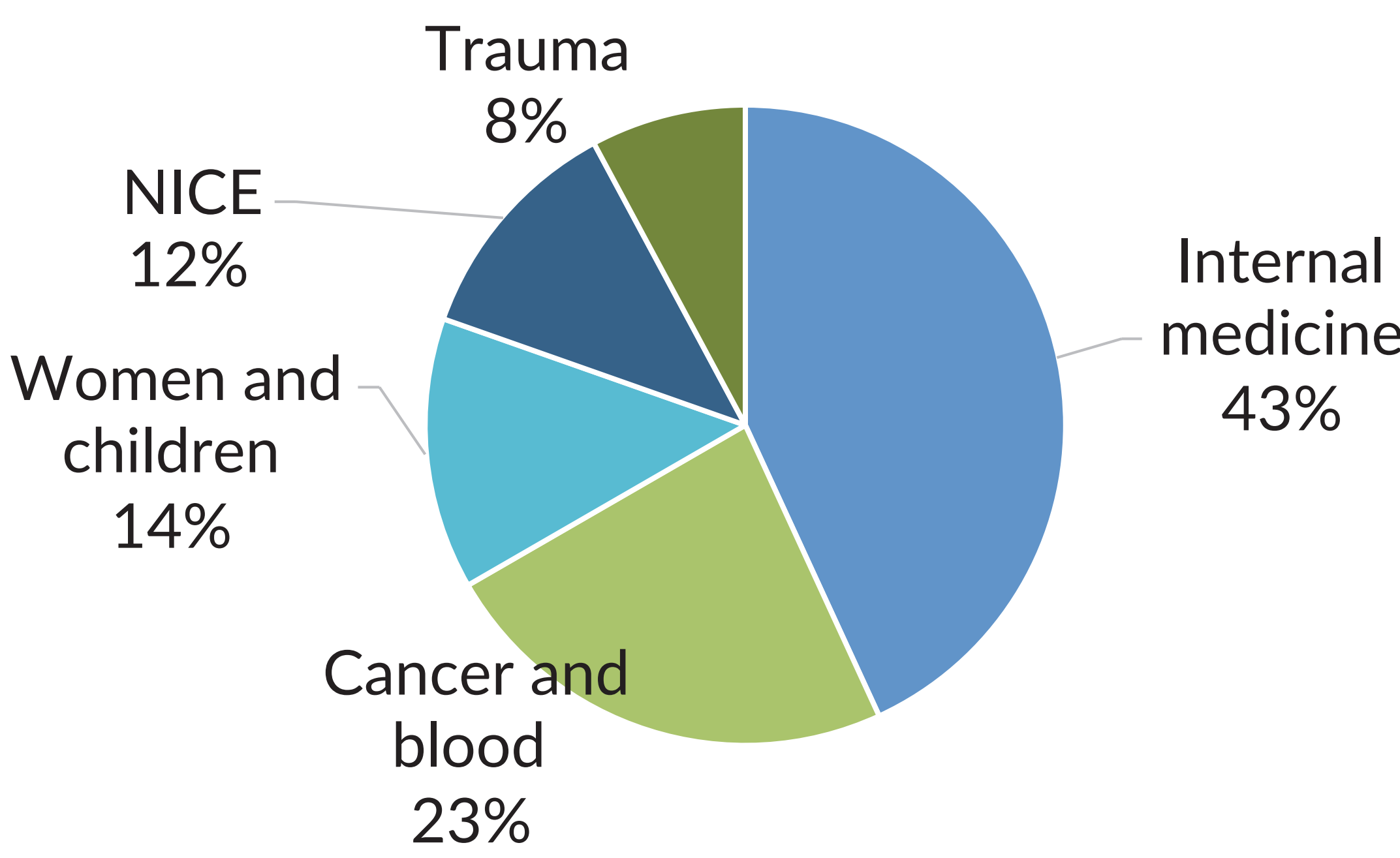
Background

- › In the UK, medicines can be commissioned through Clinical Commissioning Groups (CCGs, which follow NICE appraisal guidance), or via national-level specialised services (those provided in a few hospitals and accessed by a few patients) where commissioning is governed by NHS England (NHSE)
- › NHSE develops Clinical Commissioning Policies (CCPs) for health technologies where there is a need (due to number of patients, costs of service, number of people providing the service, and/or financial implications for CCGs) and no relevant NICE guidance exists
- › Dedicated Clinical Reference Groups (CRGs) grouped in five Programmes of Care (PoC) are tasked with CCP preparation
- › This research aims to systematically evaluate all CCPs published since 2016

Methods

- › The NHSE website was screened for CCPs for pharmaceutical products (01/07/2016–01/06/2019) and key data was extracted

Results

Number of CCPs issued	Outcomes
51 	
Indications	On or off-label
	
PoCs who issue CCPs	Decision-making criteria
	Data considered Literature searches of published data (including cost-effectiveness studies) Criteria Clinical, safety, and health economic impact

Conclusions

- › In the absence of relevant NICE guidance, CCPs have been used to provide national guidance for specialised technologies, especially in the endocrinology and respiratory space
- › Notably, they have been frequently used to provide guidance for indications outside the label, however many are also for on-label indications outside of NICE’s remit (e.g. HIV therapies)
- › Following the announcement that NICE is looking to review its evaluation methods linked to the 2019 Voluntary Scheme for Branded Medicines Pricing and Access, there is anticipation that a clearer distinction between the remit of the two bodies – NICE and NHSE – will ensue

