NICE National Institute for Health and Care Excellence

Cancer 52 – questions about the Cancer Drugs Fund at NICE

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Aim

Collect your

about participating

To produce

To help patient organisations' participate

Two processes

1. Rapid reconsideration reviews **for drugs currently funded** through the cancer drugs fund.

2. Technology appraisal process with CDF recommendation option – **for new drugs** (or uses of drugs)

Two help documents?

1. For the transition (rapid reconsideration)

2. For those going through the Technology Appraisal process.

How are we pulling this together

We are collecting questions from:

- You
- Individuals and organisations who are working with us on the rapid reconsiderations
- Patients Involved in NICE (PIN)

So far we have

1. What is the CDF (should we link to existing materials like MacMillan)
2. What is the rapid reconsideration review?
3. Will people already receiving technologies via the CDF still receive it?
4. Is there a list on the website of all the CDF drugs going through the rapid review and normal CDF NICE technology appraisals route?
5. How many drugs are going through the rapid review and what are they?
6. How long is the rapid review?
7. Why is the process shorter?
8. Who will be on the committee?
9. Where will the committee meetings be held?
10. How can patient organisations be involved?
11. Will there be patient experts?

PIN have asked us…

1. Will new evidence be accepted during the re-appraisal process, where this is relevant to a drug's re-assessment? If not, why not?
2. Will NICE be able to appraise unlicensed, off-label and off-patent drugs?
3. What kind of evidence could NICE recommend to be collected via the new CDF and how will this real world evidence compare against other clinical evidence submitted to NICE?
4. Will real-world evidence be given equal weight than a Phase III trial?
5. Will a drug recommended for use on the CDF, be available to patients throughout its time on the Fund, or will there be a recruitment of patients and then a follow up period (when no new patients are recruited), similar to the way in which clinical trials are conducted?

more questions from PIN……

6. Will all patients, who can benefit from a drug's indication, have access to the drugs on the new CDF?
7. Will there be a time gap between a drug coming to the end of its time on the CDF and the final appraisal decision for routine commissioning or will it be done straight away?
8. Will pharmaceutical companies be given a chance to change their prices between their time on the CDF and entry into routine commissioning?
9. Could pharmaceutical companies make a change in their pricing after the NICE Technology Appraisal process has begun but before the final decision is made, if it looks like a drug will not be recommended for either the CDF or routine commissioning?
10. How will real-world evidence be collected?
11. Will hospitals, that do not have electronic prescribing and/or those not fully compliant with the Systemic Anti-Cancer Therapy database, have access to medicines on the new CDF?

What questions do you have?

Next steps

1. We will take your questions and get the answers
2. This may need to be done in a phased approach
3. We will send them to you to check that they are clear.

We are also working with
Patients Involved in NICE (PIN)