

NWSSP – AWTTC Pharmacy – Procurement Medicines Value Unit (MVU)

30th November, 2023

Mark Francis

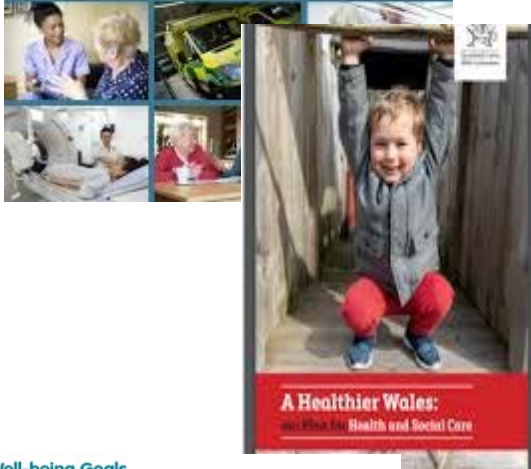
Assistant Director – Medicines Procurement
and Optimisation



GIG
CYMRU
NHS
WALES

Partneriaeth
Cydwasaethau
Shared Services
Partnership

Sicrhau Gwerth, Arloesi a Rhagoriaeth drwy Bartneriaeth
Delivering Value, Innovation and Excellence through Partnership



Well-being Goals



Pharmacy: Delivering a Healthier Wales Our Vision for the Future - 2030



A Medicines
VALUE
Perspective

Vision -
2030

Pharmacy
Delivering a
Healthier
Wales

Enhancing
Patient
Experience

2020

2021

2022

2025

2030

Harnessing Innovation & Technology

SystemC – A single hospital pharmacy stock management system

The Digital Medicines Transformation Portfolio (DMTP)

Goals - 2022

Pharmacy teams leading the medicines discharge from hospital with ongoing support from their community pharmacist

Seamless Pharmaceutical Care

We will supply medicines through pharmacy in a way that meets the changing needs of citizens, whilst improving access to regular advice and expertise.

Developing the Pharmacy Workforce

MDT of appraisal scientists, procurement and pharmacy professionals working in collaboration with the clinical networks across Wales

Pharmacy: Delivering a Healthier Wales



Welsh Pharmaceutical
Committee - April 2019

Meet the: Medicines Sourcing Leads

Tracey Prothero
Head of Medicines Sourcing for
secondary care

Jennifer Tresilian
Senior Category Lead and medicines
homecare specialist

Rachelle Elvin
Senior Category Lead, Specialist
Medicines

Keeley Davies
Senior Category Lead and primary
care commercial arrangements

Supplier engagement

Tender process

Contract award

Contract management

Stock resilience and supply chain



Meet the: Commercial Medicines Access Team (CMAT)

Wendy Casey
AWTTC Medicines Access and Efficiency
project manager



Tanya Bateman
AWTTC Medicines Access and Efficiency
project manager



Caroline Wall
NWSSP Link for commercial
arrangements



Carys Walters
NWSSP – Finance accountant



AWTTC
All Wales Therapeutics
& Toxicology Centre

The Impact of a Commercial Arrangement on timely Patient Access

Simple PAS

1. Letter from supplier with price confirmation
2. CMAT load ready into restricted VAULT workspace
3. FAD published
4. CMAT immediately transfer FAD and PAS information into the “live” reference tool for all HBs and VCC
5. Local implementation plans completed within 60 days
6. Medicine available to prescribers and patients

Commercial arrangement

- **Early engagement with CMAT**
 - Options regarding the CA and implications for NHS Wales
 - Draft CA from supplier shared with CMAT
 - Review and negotiations completed between CMAT and supplier
 - All legal and financial issues are considered and agreed
 - Final draft agreement reviewed by both parties from a legal perspective
 - Final CA signed by both parties in readiness for FAD
 - Repeat Simple PAS steps 2 to 6
- **Delay engagement with CMAT**
 - Initial CA discussions and options considered
 - Draft CA from supplier shared with CMAT
 - Review and negotiations completed between CMAT and supplier
 - All legal and financial issues are considered and agreed
 - Final draft agreement reviewed by both parties from a legal perspective
 - Final CA signed by both parties
 - Repeat Simple PAS steps 2 to 6

No Delay

Minimum Delay

Maximum Delay

Meet the: MVU Team

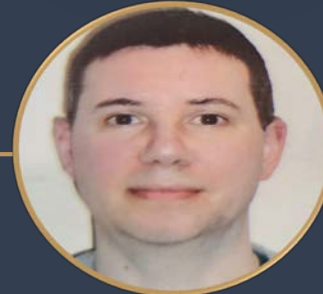
David Hutchings
National Medicines Value Lead
Pharmacist
Medicines Value Unit
Clinical Programme Lead



Guy Thompson
Principal Negotiator



Rob Hollands
Commercial manager



Theo Davies
Data analyst



Reuben Morgan
National medicines homecare manager





The Medicines Value Unit

David Hutchings
National Medicines Value Unit –
Lead Pharmacist

MVU Strategy

Our Vision

To provide value for medicines for the benefit of patients, the NHS, and industry in Wales.

Our Values

Listening & Learning

To continually reflect upon and improve the quality, effectiveness of all we do

Innovating

To be courageous and creative through continuous improvement

Working Together

Inclusively with colleagues, customers, and suppliers

Taking Responsibility

For brave and compassionate decisions and making the right things happen

Innovative

Demonstrate high health gains for NHS Wales in priority areas.

Life science friendly

Wales to be viewed as attractive to life science organisations and innovative solutions

Prospective view

Horizon scan and business intelligence to plan & implement opportunities optimally across Wales

Retrospective view

Review, analyse, intervene and monitor NHS Wales medicines bill

NHS Wales Medicines Spend circa £1bn

Primary Care

(community pharmacy contractor supply)

Secondary Care

(in-patient and out-patient hospital supply)

* Medicines Homecare

(by a third-party provider)

* VAT efficient supply options

Primary Care

£650m

Secondary Care

£350m

Homecare Medicines

£155m

Pharma funded

£125m

NHS Wales funded

£30m

Aim

Working with key stakeholders across the NHS in Wales to deliver the optimal value

Innovating with the life science industry to maximise outcomes from medicines for all patients in Wales

Objectives

1) Work with stakeholders to identify medicines which demonstrate improved outcomes for patients.

2) Engage with life science industry to agree and implement outcome based agreements

3) Develop and utilise data on medicines to identify where medicines can demonstrate improved value

4) Support stakeholders with implementation to allow focus on clinical outcomes

Medicines Value Unit: A single point for industry to engage

Horizon
scanning

Pre-Launch

Appraisal

Adoption &
uptake

Loss of
exclusivity

NICE National Institute for
Health and Care Excellence

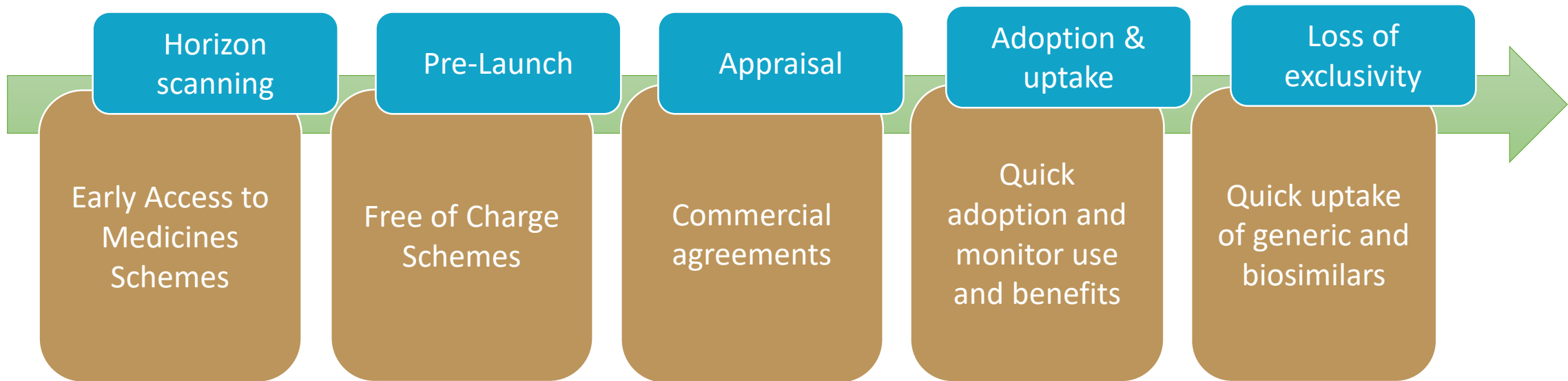


AWTTC

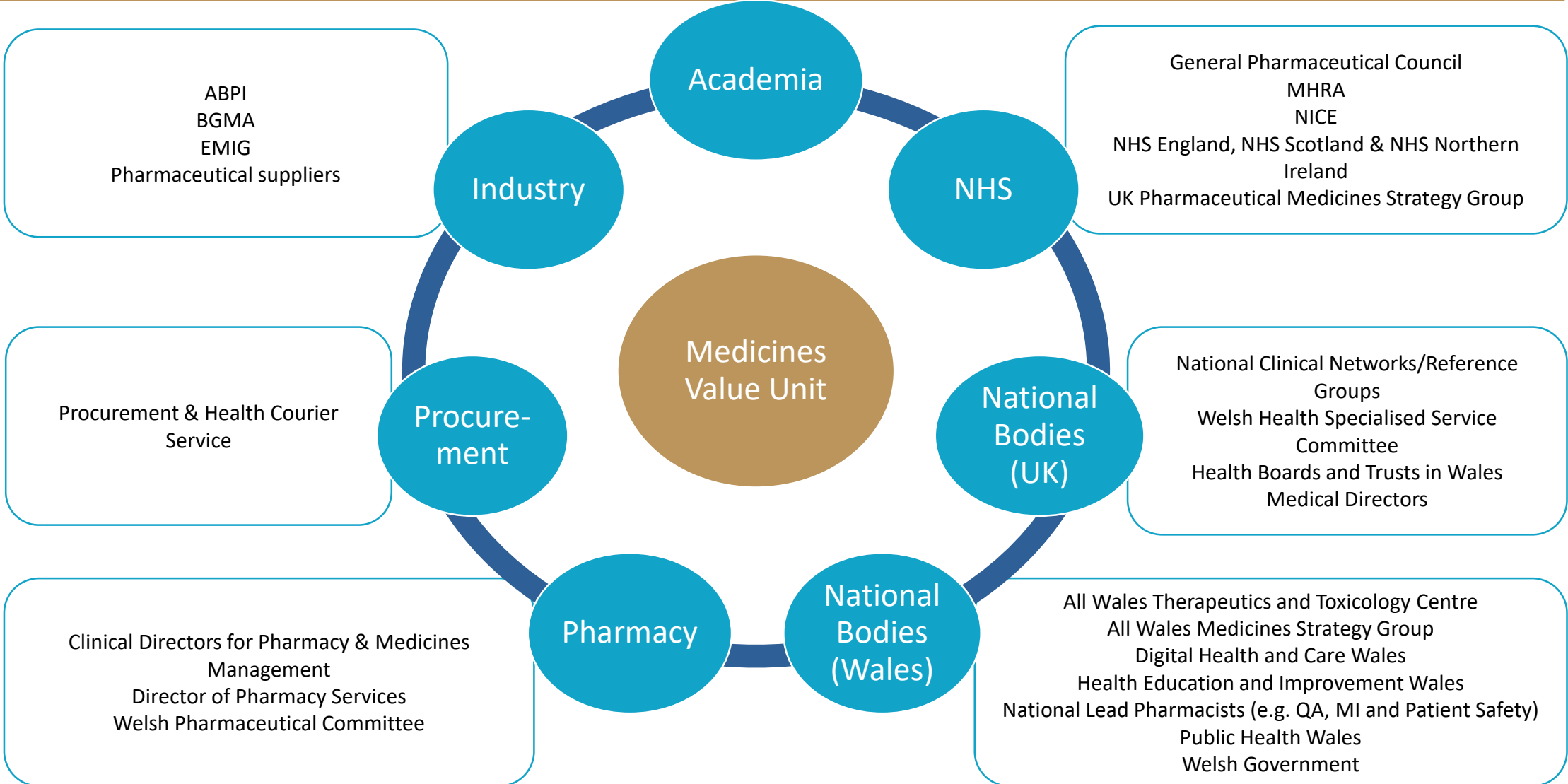
Medicines Value Unit

Industry

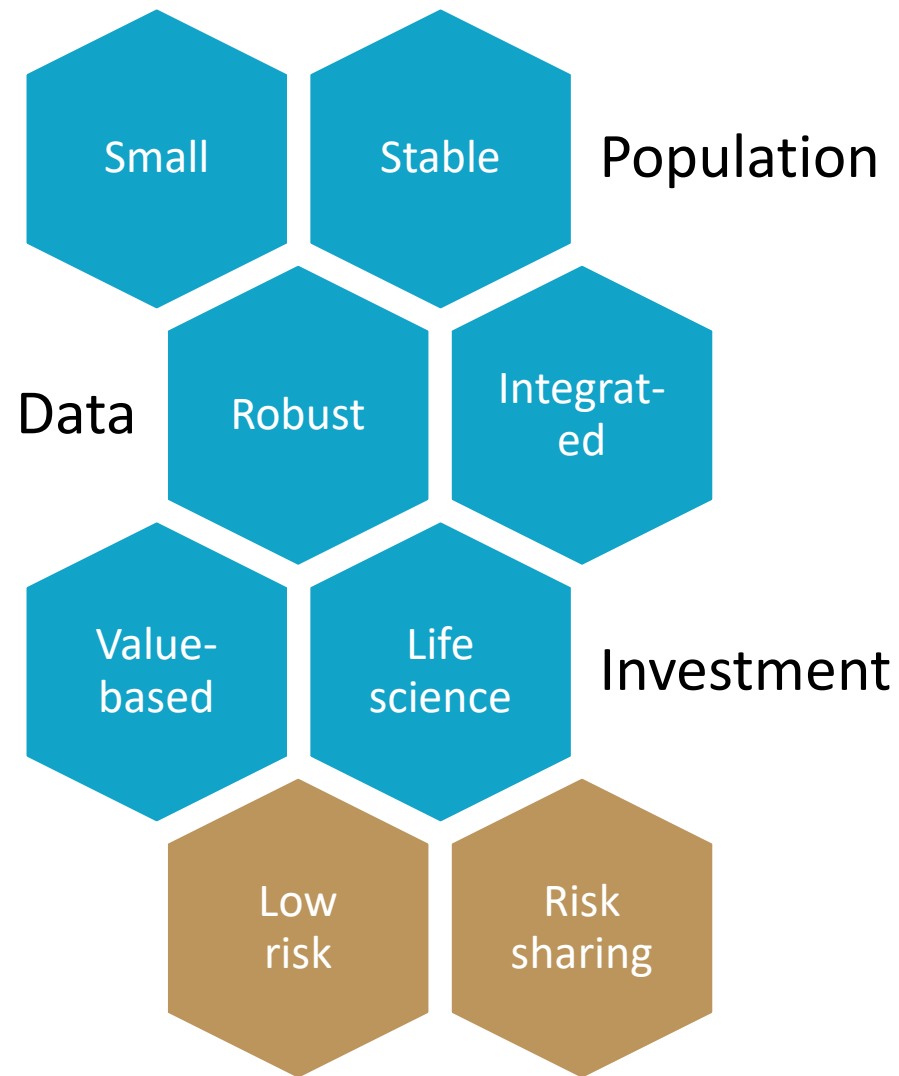
Medicines Value Unit: How can we support



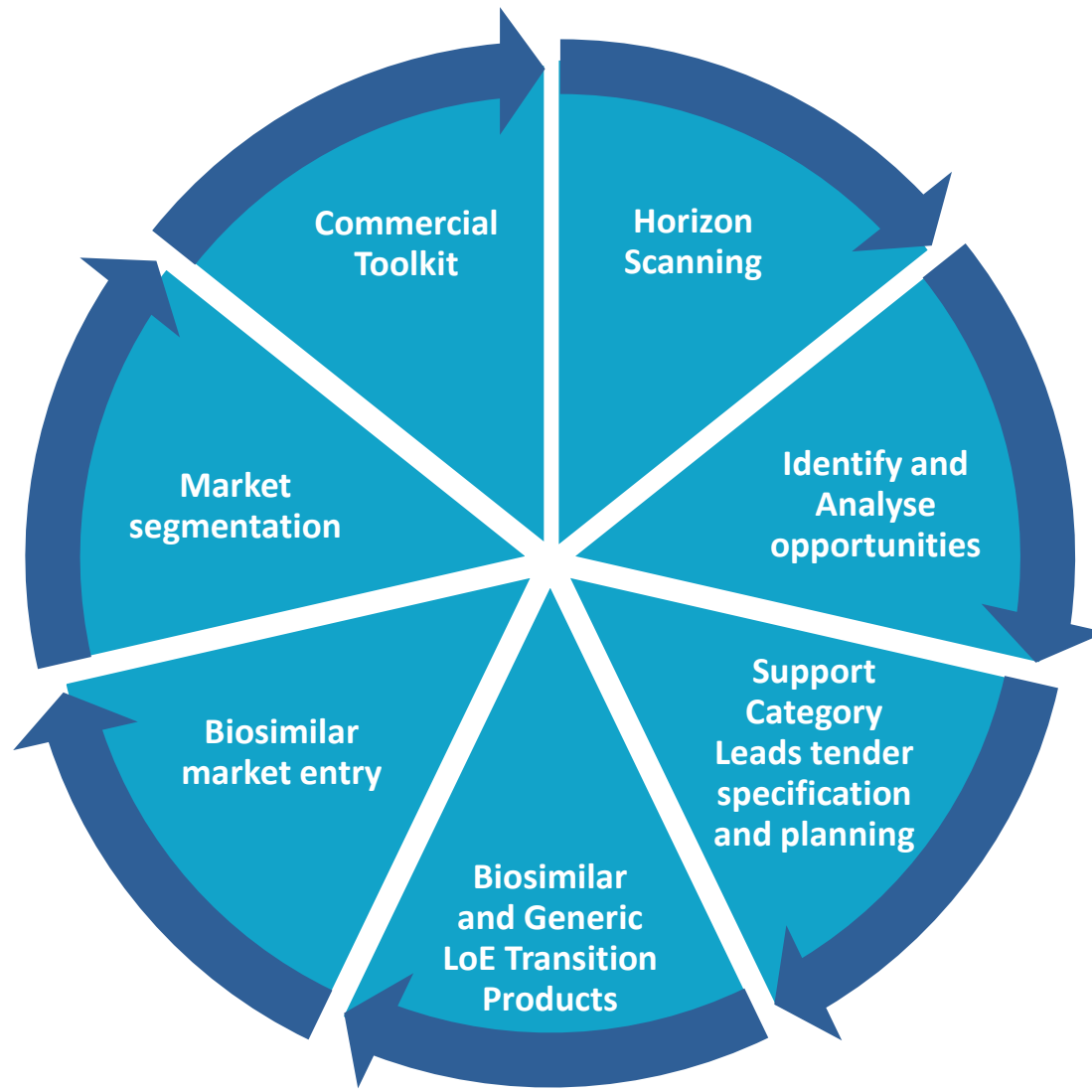
Medicines Value Unit: Working in Collaboration



Medicines Value Unit: Why is Wales attractive to the life science industry?



Medicines Value Unit: Key Roles



Market Influence and Industry engagement

- **Strategy and approach to engagement**
- Close working relationships with Industry
- **Unmet need**
- Identifying and Reporting opportunities
- **Supply resilience**
- Price elasticity and trend analysis

Medicines Value Unit: Aligned to NHS Wales Priorities

Delivering better health to the population of Wales through medicines

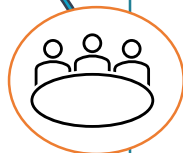
- Improved Health Outcomes
- Safer Medication
- Productivity Savings
- Effective HTA commercial arrangements migrating to BlueTeq®
- Financial Savings
- Environmental Sustainability
- Supply Resilience



Medicines Value Unit: Current Work Programmes



Identify and optimise opportunities from Loss of Exclusivity



Unlicensed medicines Framework



Homecare medicines service review across Wales



Develop data visualisation tools for NHS Wales



Exploring future outcome -based agreements for new medicine opportunities

Medicines Value Unit: New medicines entry in Wales

Identify opportunities for new medicines for:

Risk Sharing
Agreements

Value-Based
Arrangements

Outcome-Based
Arrangements

Commercial
Arrangements

Industry
engagement

Clinical
engage-
ment

Engage-
ment with
HTA bodies

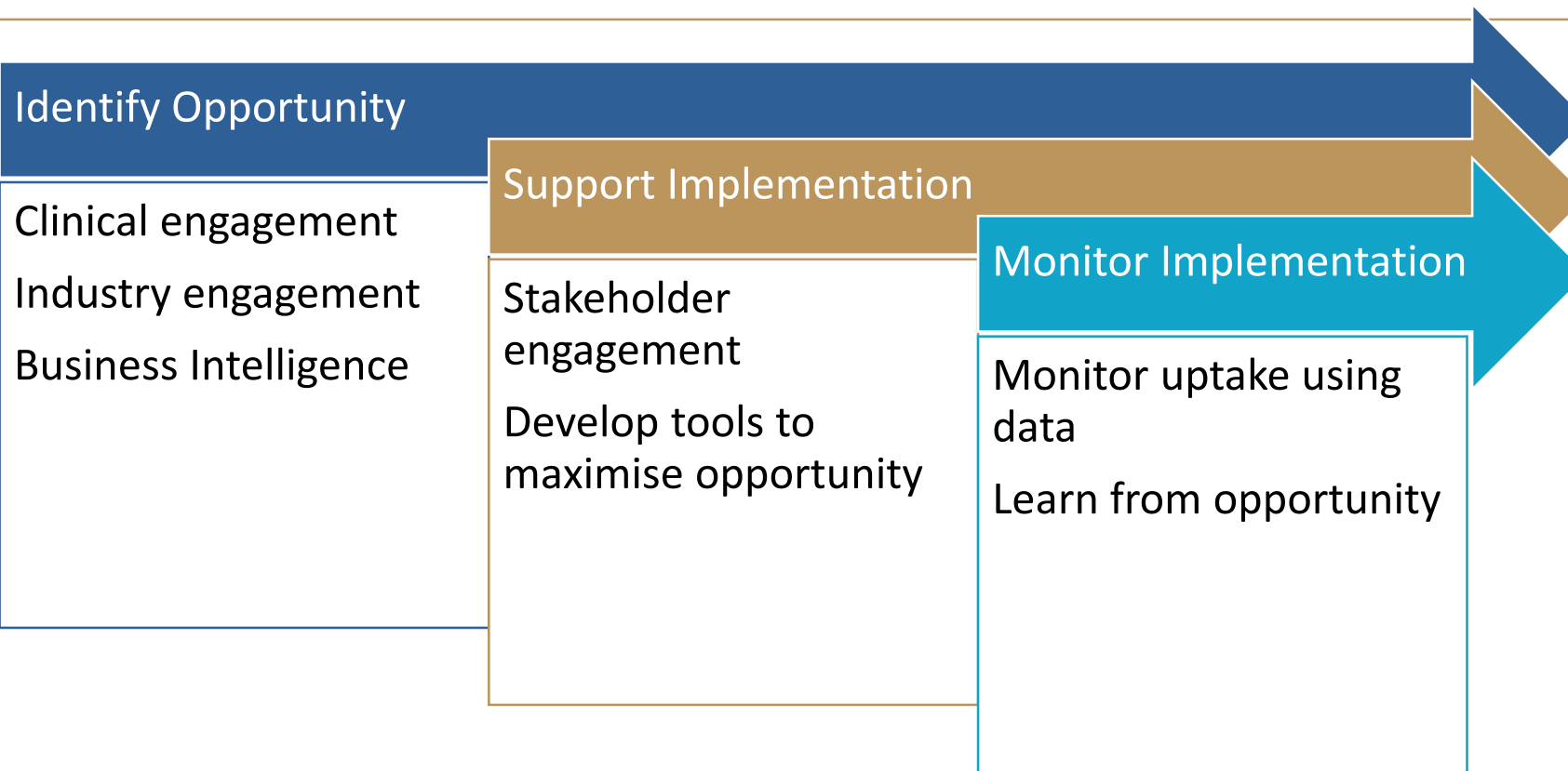
Data
availability

Learning
from other
bodies

Improved
access to
medicines

Better
health

Medicines Value Unit: Maximising Opportunities



Priority objectives to establish the MVU operational structure and clinical work programme

Data and Analytics

- Continue to build capabilities and capacity to extract and analyse key data to support pipeline opportunities
- Produce reports and datasets to support wider opportunity and implementation strategies for the health boards and trusts supporting their IMTPs using once for Wales principles
- Work with AWTTTC, DHCW and other key-stakeholders to ensure all strategic policy decisions are aligned to improving patient outcomes and experience and service capacity

Market and Industry Engagement

- Third Party support with dedicated expertise in Patents, Litigations updates and Industry and Product Development Insights
- Key Metric Indicators output by Toolkit (e.g. unmet need/limited supply) used within Industry engagement to increase resilience
- Working directly with Industry on Horizon Scanning opportunities, development pipelines and intelligence gathering
- Collaboration with BGMA/BBA as Industry bodies

Commercial Toolkit

- Build Opportunity Catalogue and Data Capture of molecules due to lose exclusivity 2023 and beyond
- Capture historic spend and usage trends and forecast future volumes
- Development of a Clinical Complexity template
- Assess existing generic/biosimilar market conditions to inform likely competition levels and tender strategy
- Forecast likely savings levels based on known parameters and intel from Health Board and Trust Pharmacy and Clinical specialists

Key enablers to support the success of the MVU

What does good look like ?



Listen and Learn



Work together



Take responsibility



Innovate

Medicines Value Unit: Measuring Success

Benefits realisation

Non-Financial

- Improve access
- Improving health outcomes
- Reduce variation
- Reduce duplication
- Ensure efficacy and quality
- Patient Safety
- Stock resilience

Financial

- Purchase volume – WDA & HCSW
- Improved contract coverage and management
- Market share – standardisation
- Managed access of new medicines
- Free supply of Medicines pre-HTA
- Commercial arrangements for HTA medicines
- Commercial agreements for Clinical Policy medicines
- Primary care rebates



Partneriaeth
Cydwasaethau
Shared Services
Partnership

October 2023
Version 1

NHS WALES MEDICINES VALUE UNIT COMMERCIAL FRAMEWORK



Delivering
Value,
Innovation
and
Excellence
Through
Partnership



Partneriaeth
Cydwasaethau
Shared Services
Partnership

October 2023
Version 1

NHS WALES MEDICINES VALUE UNIT STRATEGY



Delivering
Value,
Innovation
and
Excellence
Through
Partnership

Health

Abiraterone: Thousands of men miss out on life-extending prostate cancer drug

1 day ago



Giles Turner, from Sussex, is paying for abiraterone privately at a cost of £250 per month.

By Hugh Pym, health editor, and Ian Atkinson
BBC News


AWTTC

All Wales Therapeutics & Toxicology Centre
Canolfan Theroleitwng a Thocsioleg Cymru Gyfan

Abiraterone acetate for the treatment of non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer (OW20)

November 2022

ONE WALES INTERIM DECISION

Abiraterone acetate for the treatment of non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer

Date of advice: November 2022

The following One Wales Medicines Assessment Group (OWMAG) recommendation has been endorsed by health board Chief Executives.

Using the agreed starting and stopping criteria, abiraterone in combination with prednisone can be made available within NHS Wales for the treatment of non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer. High risk is defined as at least 2 of the following: tumour stage T3 or T4, a Gleason score of 8 to 10, and a PSA level of ≥ 40 ng/ml.

Abiraterone acetate should be prescribed on the basis of lowest acquisition cost.

The risks and benefits of the off-label use of abiraterone for this indication should be clearly stated and discussed with the patient to allow informed consent. Providers should consult the relevant guidelines on prescribing unlicensed medicines before any off-label medicines are prescribed.

Clinician responsibility

Clinicians will be obliged to collect and monitor patient outcomes. Evidence of clinical outcomes will be taken into consideration when reviewing the One Wales Medicines Assessment Group decision.

Health board responsibility

Health boards will take responsibility for implementing One Wales Medicines Assessment Group decisions and ensuring that a process is in place for monitoring clinical outcomes.

This advice will be reviewed after 12 months or earlier if new evidence becomes available.

One Wales advice promotes consistency of access across NHS Wales.

Prepared by the All Wales Therapeutics and Toxicology Centre
Page 1 of 5

Thousands of patients in England and Northern Ireland are missing out on a life-extending prostate cancer drug that is more widely available on the NHS in Scotland and Wales, say experts.

Other factors	OWMAG considers that the patient group should be defined as non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer where high risk is defined as per the stricter STAMPEDE criteria.
Final recommendation	OWMAG recommends that the use of abiraterone is made available for treatment of non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer. This recommendation is subject to the development of appropriate start/stop criteria.
Summary of rationale	There is evidence to suggest that abiraterone improves failure free survival and overall survival in patients with non-metastatic and locally advanced, high-risk, hormone-sensitive prostate cancer when compared with treatment with ADT alone. When compared to docetaxel, abiraterone improves failure free survival and overall survival is similar. The adverse effect profile of abiraterone is superior to that of docetaxel. It would appear to offer reasonable value for money and cost effectiveness if provided at the contract price.

Wales is the first UK nation to have dostarlimab approved as a standard treatment offer.

It was ratified by Welsh Government following a robust process of checks and evaluation of its benefits.



AWTTC

All Wales Therapeutics & Toxicology Centre
Canolfan Therapiwteg a Thocsicoleg Cymru Gyfan

Dostarlimab (Jemperli®) for the first-line treatment of locally advanced stage II/III deficient mismatch repair (dMMR) / high microsatellite instability (MSI-H) rectal cancer (OW26)

August 2023

ONE WALES INTERIM DECISION

Dostarlimab (Jemperli®) for the first-line treatment of locally advanced stage II/III deficient mismatch repair (dMMR) / high microsatellite instability (MSI-H) rectal cancer

Date of advice: August 2023

The following One Wales Medicines Assessment Group (OWMAG) recommendation has been endorsed by the All Wales Medicines Strategy Group (AWMSG) and ratified by Welsh Government.

Using the agreed starting and stopping criteria dostarlimab (Jemperli®) can be made available within NHS Wales for the first-line treatment of locally advanced stage II/III deficient mismatch repair (dMMR) / high microsatellite instability (MSI-H) rectal cancer. This recommendation applies only in circumstances where the approved commercial arrangement price is applied.

The risks and benefits of the off-label use of dostarlimab (Jemperli®) for this indication should be clearly stated and discussed with the patient to allow informed consent.

Providers should consult the relevant guidelines on prescribing unlicensed medicines before any off-label medicines are prescribed.

This advice will be reviewed after 12 months or earlier if new evidence becomes available.

Clinician responsibility

Clinicians will be obliged to collect and monitor patient outcomes. Evidence of clinical outcomes will be taken into consideration when reviewing the One Wales Medicines Assessment decision.

Health board responsibility

Health boards will take responsibility for implementing One Wales Medicines Assessment Group decisions and ensuring that a process is in place for monitoring clinical outcomes.

One Wales advice promotes consistency of access across NHS Wales.

We look forward to working with you



Contact us on: nwssp.mvu@wales.nhs.uk