### **Budget Impact and Resource Implications**

### What's new in 2017?









#### Role of NMG in BI

- NMG appraises the evidence on the clinical effectiveness and cost-effectiveness of the medicine
- The assessment of budget impact falls to the AWMSG

However, now the NMG are expected to 'verify' that the BI section of the ASAR looks reasonable...

...but only as part of the 'check' when reviewing the ASAR for accuracy/typographical errors...

...to provide an opportunity for any anomalies to be addressed prior to consideration by AWMSG



### **Budget Impact Model template**

Objective:	To add consistency to BI calculations
Action:	Develop a BI template to support company submissions
Output:	Cost-calculator template assessing costs with and without new drug in the treatment mix to provide a credible estimate of the budget impact of approving the drug in Wales over a 5 year time period.  The model compares the drug use, and resource use costs separately
Status:	In use



### What is the aim of the budget impact analysis?

- assess the financial consequences of the introduction of a new technology in the short-term in a specific setting
- forecasts the associated costs for the new drug and changes in rates of use for the mix of current treatments
- determines by how much annual budgets are likely to increase (or decrease) to allow planning for these changes

Sullivan SD, Mauskopf JA, Augustovski F, et al. Budget impact analysisprinciples of good practice: Report of the ISPOR 2012 budget impact analysis good practice II task force. Value Health. 2014;17(1):5-14.

Mauskopf J, Earnshaw S. A methodological review of US budget-impact models for new drugs. Parmacoeconomics. 016;34(11):1111-1131.





### **Cost-effectiveness vs Budget Impact**

	Cost-effectiveness	Budget impact
What is the question?	Is it value for money?	Is it affordable?
What is the time frame?	Usually longer-term (e.g. lifetime)	Short-term (1-5 years)
What inputs are considered?	Clinical evidence, resource use, utilities, costs	Patient numbers, resource use, costs
What are the health outcomes	QALYs	Not considered
Decision rules	Yes	No
Value judgements	Minimal	Yes



### **Opportunity Costs**

### NHS Wales has a limited budget



### opportunity costs

Positive recommendations, that have a positive budget impact, result in savings having to made elsewhere



#### **New Treatments Fund Wales**

- the early introduction of the most innovative, high-cost medicines recommended NICE and AWMSG
- ensuring treatment for life-limiting and life-threatening diseases are immediately and consistently available across Wales
- make drugs available no later than two months from the date of final guidance
- £80m in funding allocated for a five-year period
- Compared to England and Scotland, less restrictive, providing funding deemed costeffective for any conditions published.



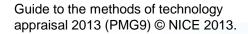
### What makes a good budget impact analysis?

A model that can provide a credible assessment on the impact to the NHS in Wales of the introduction of a new intervention

- Perspective (budget holder)
- Short time horizon (5 years)
- Key epidemiological and cost inputs
- Marketplace dynamics
- Results
  - cost differences between the new scenario and the current scenario
  - impact on healthcare resources
- Sensitivity analyses

Requires robust data sources that reflect the local epidemiology and costs







### Main critique of BI models

- Quality
  - Often poor and inconsistent
  - Few attempt to estimate real local costs in a credible way
  - Epidemiology and cost data often obtained from weak sources, such as foreign estimates, assumptions and/or expert opinion
- Result
  - it is hard to provide plausible estimates of a budget impact in a specific environment

van de Vooren K et al A critical systematic review of budget impact analyses on drugs in the EU countries. Appl Health Econ 201412:33– 40







## AWTTC BI model template: What are the key model inputs?

- Size and characteristics of the eligible population
- Intervention mix with and without new intervention
- Uptake of the new intervention
- Costs of interventions
- Costs of condition-related health care services (resource use)
- Alternative values for uncertainty and scenario analyses

Forecasting is challenging, but should be attempted so long as the assumptions are clear, justifiable and supported by evidence



# Key input parameters: epidemiology Size of eligible population

Welsh population

Disease prevalence and incidence, mortality

Eligible patient population, licensed indication

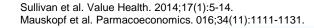
Sub-population according to indication under consideration

Market share/Uptake

N=Patients

Robustness of data sources...



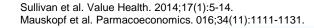




# Key input parameters: epidemiology Size of eligible population

- Will the eligible population change with time?
  - Previously untreated patients may now seek treatment
  - New treatment may increase time on treatment, slow disease progression, reduce mortality
  - Treated population size may increase
  - If not considered, will introduce bias into BI estimates







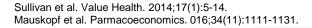
# **Key input parameters: market share and uptake: Intervention mix**

- Compares current use without new intervention to predicted use with new intervention
- Will any of these estimates change with time?
- How to predict the rate of uptake
- Data sources

Can be a major determinant of budget impact...

However, little data is usually available on which to forecast uptake







### **Key input parameters: costs**

- Which costs are taken into account?
  - Drug acquisition costs (resource use and unit costs, PAS if applicable)
  - Supportive therapy acquisition costs
- Discounting?
  - No, interested in impact at that point in time.
- Source

These costs have an immediate effect on budgets increasing costs or be money saving



## Key input parameters: healthcare service resource use

- Resource use inputs
  - Administration
  - Diagnostics and monitoring
  - Adverse events
  - Primary and secondary care
  - Personal and social care
- Impact can be resource saving e.g. fewer bed days in hospital.
  - No immediate effect on NHS bottom line and may have no impact at all on the short-term budget, but there is potential that savings may be realised at a future point
  - Still needs to be evaluated can effect planning and is important for the overall picture
  - Both drugs costs and resource costs are typically identified in the ASAR, but interpret the bottom line with care...



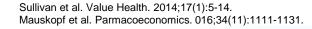
### **Sensitivity analysis**

- Uncertainty
  - BI requires assessment of the impact of uncertainty on model outcomes

allow budget holders to understand the impact that changes in single input parameters may have on results

- One way sensitivity and scenario analyses around the input parameters
- Two types of uncertainty parameter and structural (best-case/worst-case)
- Data-driven preferred to arbitrary fixed percentage change
- Estimation of their plausibility





### Where to find the new BI template



About AWMSG

**Appraisals** 

Medicines management

#### **Pharmaceutical industry**

#### Appraisal information

- About
- Appraisal process Wales Patient Access Scheme
- AWMSG in relation to
- Orphan, ultra-orphan and rare diseases
- All appraisal documents

#### All appraisal documents

ABPI and AWTTC confidentiality agreement

Appraisal FAQs

Appraisal principles and process flowchart

Appraisal process flow diagram & timeline

Budget Impact template (Excel 2007)

Budget Impact template (Excel 2003)

Clinical expert questionnaire and declarations of interest form Clinician and Patient Involvement Group (CAPIG) Information

Clinician and Patient Involvement Group (CAPIG) Terms of reference

Decision process for full & limited submissions

Exclusion criteria

Form A

Form A guidance notes

Form B

Form B guidance notes

Form C guidance notes

Independent review process

Industry engagement

Information for companies attending AWMSG appraisal meetings

Letter to companies following a NICE negative

Life-extending, end of life medicines

Orphan, ultra orphan and rare disease medicines

Process for implementing NICE HST advice

Recommendation wording

Requirement for LHBs to implement AWMSG recommendations within three months

Summary guidelines for appraising medicines

Summary information for patients to be completed by the company

Therapeutic Development Assessment (TDA) Partnership Group

Template for raising an issue during an appraisal



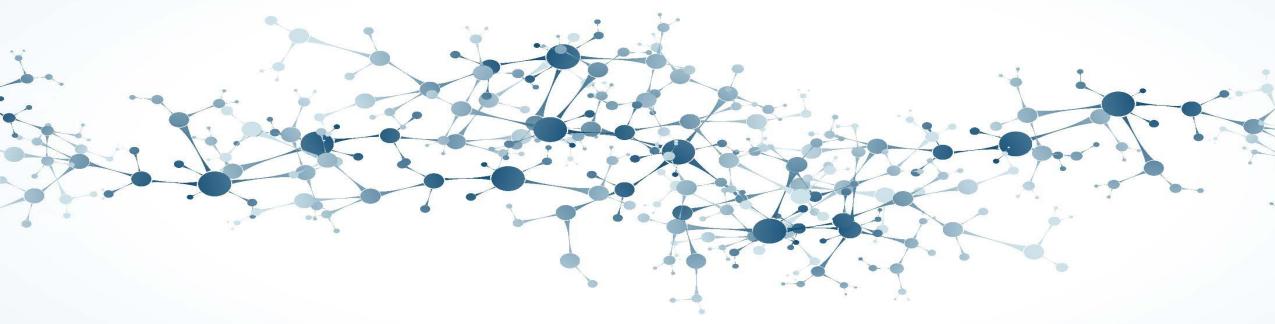


### **Closing notes**

- Budget impact analysis complements cost-effectiveness analysis
- Budget impact analysis subject to uncertainty
- Money savings are realised differently to resource savings
- Opportunity cost of funding new interventions
- A positive AWMSG recommendation with a positive budget impact will require an alternative technology to be displaced
- Will this impact overall health benefits?

## Thank you, and questions...







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Patient Access to Medicines Service





**WNPU** Welsh National Poisons Unit



Resource Centre



Yellowcard



WAPSU Welsh Analytical Prescribing Support Unit