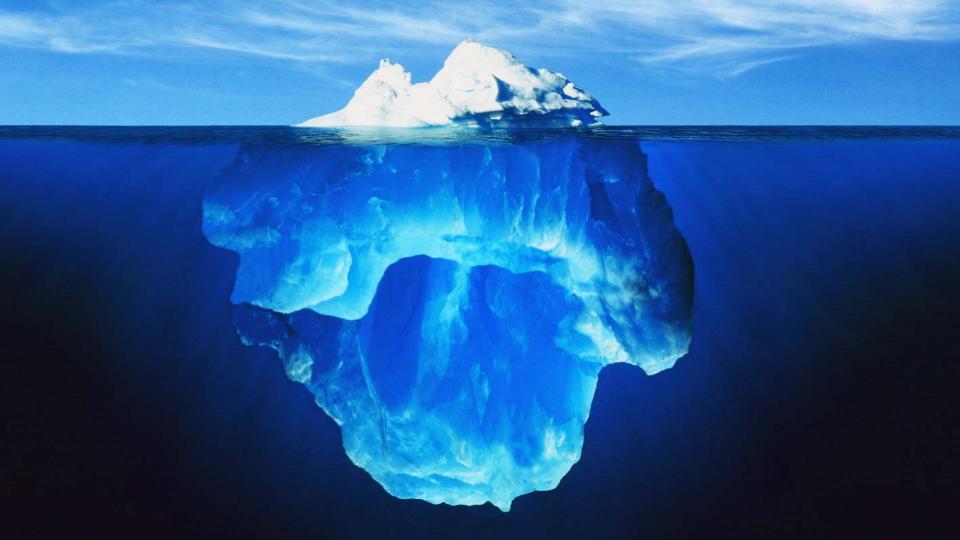
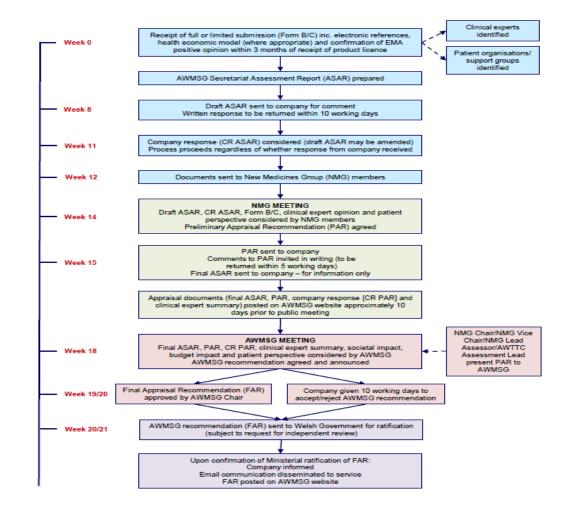
The Company Submission – AWTTC's role

Tony Williams All Wales Therapeutics and Toxicology Centre



AWTTC All Wales Therapeutics & Toxicology Centre







Overview

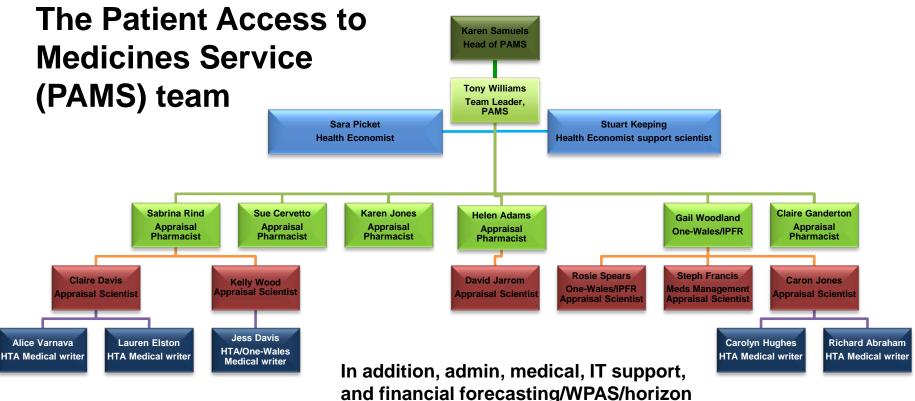
- AWTTC staff
- Data capture and engagement pre-submission
- Initial assessment of the company submission
- Writing of the assessment report
- Role of AWTTC at committee meetings
- Reviewing of AWMSG advice





- All queries are routed via email through the AWTTC generic account: <u>AWTTC@Wales.NHS.UK</u> or dealt with directly by Ruth - liaison manager
- Queries requiring input from the professional team are routed to Duty Managers (appraisal pharmacist and appraisal scientist on a rota basis) supported by the senior management team as required
- Majority of enquires are replied to on the same day





scanning support from WAPSU

Data capture

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Pre-submission

- Although the onus is on the company to engage in the AWMSG process, AWTTC staff actively monitor for medicines approaching marketing authorisation
- Companies are contacted to submit an initial submission form (Form A) around the time of CHMP positive opinion
- Support is offered for those companies who indicate difficulties with progressing a submission



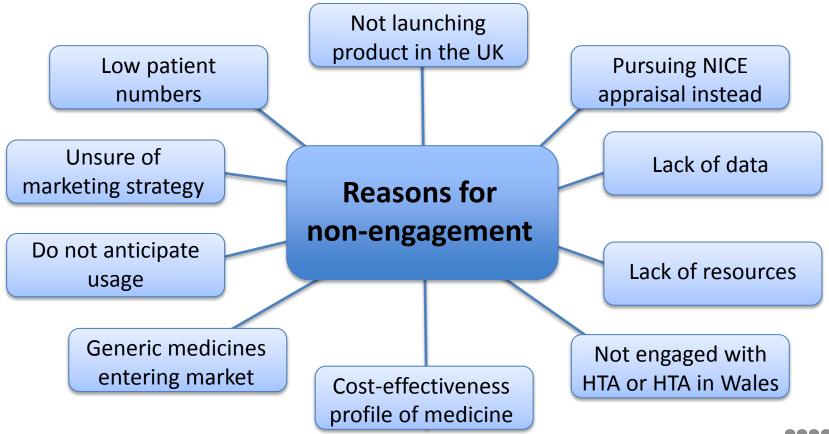
FORM A: INITIAL APPRAISAL SUBMISSION

Product information

Please refer to the process for industry engagement, guidance notes, exclusion criteria and frequently asked questions available in the Pharmaceutical Industry section of the AWMSG website. Please note that the guidance notes provide essential information and failure to use them may result in an inadequate submission. Should you have any queries in completing the form, please contact Ruth Lang, the Head of Liaison and Administration for the AWMSG secretariat (the All Wales Therapeutics and Toxicology Centre (AWTTC[) no 029 20716980 or email AWTTC@wales.nhs.uk.

1.1 General information	
a) Marketing authorisation (MA) holder	
b) Approved name of medicine	
c) Trade name	
 Formulation(s), strength(s) and route(s) of administration 	
e) Full licensed indication(s)	

)	Indication covered in this submission (if different from the full licensed indication above)
	If the licence has been amended, provide details of the change(s), e.g. new indication, new target group, change in place of the group.



'Form A' stage: NSDF

- NSDF = New Submission Decision Form
- Decision process for deciding whether a medicine meets criteria for appraising and if so, whether it should be a full or limited submission
- Aim is to provide a decision within two of Form A
- Each submission is checked against the latest exclusion criteria, decision process for a full or limited submissior and projected costs are verified





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'Form A' stage: NSDF

Areas of difficulty can include:

- Does it meet exclusion criteria? e.g. antidote, biosimilar, very minor licence extension, overlap with current or upcoming NICE guidance
- Acceptance of a limited submission: companies will often argue the case for a pragmatic approach to be taken
- ➢ Is there a PAS/WPAS associated with the medicine?
- Is budget impact considered significant?
- The comparator appropriate?
- Consistency with previous decisions



The Form B/C submission

• If the AWMSG exclusion criteria are not met, AWTTC request Form B/C from the company

 Upon receipt, the company submission is reviewed by the AWTTC medical advisor, appraisal pharmacist and a health economist at Bangor University



Is the submission appropriate for the licensed indication?

Has the company restricted their submission?

Does the End of Life criteria apply?

> Does the orphan/ultra-orphan policy apply?

Is the population data appropriate for Wales? Have the correct comparators been used?

Is the health economic model present and complete?

Is the health economic measure/model appropriate?

Is the information on budgetary impact satisfactory?



The Form B/C submission

- AWTTC highlight any areas where the company may strengthen their submission; examples include:
- Choice of comparator
- Increased evidence to be able to appraise the full indication
- The need for a full rather than limited submission
- Choice of health economic model; CUA versus CMA
- Evidence surrounding EoL or orphan/ultra-orphan status
- The company are informed that AWTTC can only advise on their approach and it is the decision of the committees to decide on whether their approach is justified



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AWMSG SECRETARIAT ASSESSMENT REPORT Pasireotide (as pamoate) (Signifor®) 20 mg, 40 mg, 60 mg powder and solvent for suspension for injection Reference number: 643 FULL SUBMISSION

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

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> > over a 5 day period itor (Pharmacist)

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AWTTC at NMG

- Assessment lead provides notes containing key points for NMG chair
- Assessment lead presents any issues raised by applicant company and clinical experts and responds to any queries regarding process/clarify evidence
- Points raised by NMG members are documented and form part of AWMSG briefing notes for the AWMSG Chair and Head of HTA
- ASAR may be updated in line with comments or corrections provided by committee members
- Draft PAR for Form C agreed prior to NMG

AWTTC at AWMSG

- Assessment lead highlights key points and presents any issues raised by applicant company and clinical experts
- Responds to any queries regarding process/ clarification of the evidence
- Ensure that there is consistency with wording and process
- Liaises with the company representatives before, during and subsequent to the meeting



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Updating AWMSG advice

- Following recommendations from NICE accreditation a review process has now been developed and a review team has been set up within AWTTC
- All advice is reviewed after three years of initial advice being issued.
- Literature search conducted and close liaison with the applicant company and clinical experts takes place
- Consideration is given whether it is appropriate to amalgamate advice



Updating AWMSG advice

Recommendation of AWMSG

Insulin detemir (Levemir[®]) is recommended as an option for use within NHS Wales for the treatment of diabetes mellitus in children aged 2–5 years.

- Licence extended to include 1-2 year olds
- Advice reviewed and updated

Recommendation of AWMSG

Insulin detemir (Levemir[®]) is recommended as an option for use within NHS Wales for the treatment of diabetes mellitus in children aged 1–5 years.





- Changing landscape within NICE
- New Treatment Fund and closer engagement with Pharma and NHS Wales for horizon scanning and financial forecasting
- Earlier engagement with companies with further refinement of the appraisal process to ensure advice is timely
- Strengthen links between HTA and One-Wales processes



Thank you



AWTTC All Wales Therapeutics & Toxicology Centre