

Blood Cancer Alliance Position Statement on 2023 VPAS Negotiation

5th October 2022

The next Voluntary Scheme for Branded Medicines Pricing and Access (VPAS) represents an important opportunity for Government, NHS, pharmaceutical industry and patient organisations to work in the partnership to address barriers to patient access to new and innovative treatments.

The 2018 process of developing the current VPAS, due for renewal in December 2023, was not sufficiently inclusive of patients or their representative organisations, despite a clear interest. The process for developing the new scheme must be as transparent as possible and offer a formal means by which patient organisations can engage in a meaningful way for the duration of the negotiation period and beyond. This will ensure the potential for the next VPAS to better meet UK patient need is fully explored.

Non-submissions of new medicines for the treatment of blood cancers are rising, meaning that UK patients are increasingly being denied innovative and potentially curative new treatments. The Alliance believes rising non-submissions to be a symptom of the lack of progress on achieving a model for multi-indication-based pricing, and the continued challenges around the pricing of treatments delivered in combination. The Alliance also recognises that a model of outcomes-based payment may provide a way for patients to access effective new therapies while minimising financial risk to the NHS.

We urge the Government and pharmaceutical industry not only to ensure the next VPAS makes firm commitments to make progress in these three areas, but also to ensure that patients are represented throughout the process for development of the post-2023 scheme.

Multi-indication Pricing

The availability of treatments that are effective for multiple disease indications is now commonplace. The absence of a mechanism for multi-indication pricing in the UK therefore presents an obvious challenge in ensuring patients can access existing treatments that have been newly proven to be effective for their condition. It is no longer sufficient to offer some flexibilities in exceptional circumstances.

The Alliance is calling for the Government, NHS and pharmaceutical industry to urgently agree the mechanism by which multi-indication pricing can be routinely permitted, so that it can be applied within the lifespan of the next VPAS.

Combination Pricing

The pricing of medicines delivered in combination with other branded medicines remains a significant barrier to access for patients.

While there is a commitment for Government and industry to work together to address this under Section Three of the current VPAS scheme, the Alliance has not seen any progress update on discussions from either the pharmaceutical industry or Government. On the assumption that little progress has been made, the Alliance calls for the next VPAS scheme to require progress in this area, with a target of publishing a roadmap to a solution within 12 months. The Alliance would also like to see a commitment for this process to be transparent and inclusive of patient organisations.

Outcomes-based Payment

There is more potential for outcome-based payment, where companies are rewarded on the basis of the outcomes that their treatments generate. In cancer, outcomes-based payment has the potential to speed up access to effective new treatments, promote value for money and support innovation.

The Alliance understands that research projects into outcomes-based payments stalled due to the impact of the pandemic. The Alliance asks NICE and the NHS to state the current status of work towards achieving models of outcomes-based payment. The Alliance also strongly urges the Government to ensure the next VPAS scheme creates more specific objectives for achieving the introduction of this payment model, with a process of development that is inclusive of patient organisations.

NICE Methods and Processes Review

While the Alliance recognises the changes recently made, the NICE Methods and Processes Review failed to address some of the fundamental barriers to access for new treatments for blood cancer patients. This includes failing to consider a rarity modifier and the potential for the severity modifier to impact negatively on some blood cancer appraisals. The Alliance would like to see a commitment by NICE in the next VPAS toward continuous improvement of its methods and processes, including working with patient organisations to identify where residual barriers to access to new treatments exist, and collaborating on developing solutions.

Next Steps

As representatives of blood cancer patients' interests, the Alliance is keen to engage in, and support, the process for developing and negotiating the next VPAS. To facilitate this, we request that the Government publish a formal plan for engaging with patient organisations for the duration of that process, as soon as possible.

For more information, please contact BCA@atticuscomms.com