

May 2019 Prioritisation Decisions

Twice a year, NHS England makes decisions on which new specialised treatments should be routinely commissioned. The decisions are taken by the NHS England Board based on recommendations from the [Clinical Priorities Advisory Group \(CPAG\)](#) which is made up of doctors, health experts and patient representatives.

Treatments are grouped into five levels of priority, with those that have the highest relative clinical benefit for patients and the lowest relative cost classified as level one, and treatments with the lowest relative clinical benefit and highest relative cost are classified as level five. The ranking of treatments considered in the May 2019 prioritisation round is set out below.

Level 1:

- [Treatment for defined patients with MDR-TB and XDR-TB including bedaquiline and delamanid](#) (bedaquiline in patients aged 6 years and over, and delamanid in patients aged 3 years)
- [Percutaneous mitral valve leaflet repair for primary degenerative mitral regurgitation](#) (adults)

Level 2:

- [Percutaneous patent foramen ovale closure for the prevention of recurrent cerebral embolic stroke](#) (adults aged around 60 or under)
- Lung volume reduction by surgery or endobronchial valve for severe emphysema in adults.

Level 3:

- No items

Level 4:

- [Sapropterin for phenylketonuria](#) (all ages)

Level 5:

- No items

Choose an item.

NHS England will fund as many of the treatments, by order of priority, as it can from the available budget at that time.

For this round we are pleased to announce there was sufficient available resource to fund both treatments falling in level one. There was not, however, sufficient remaining resource to fund both policies falling in level two. On the basis of CPAG advising that of the level two priorities PFO closure had the greatest clinical benefit, the Board took the decision to fund this as the policy was affordable with the remaining resource. The policies for lung volume reduction and sapropterin will have the opportunity to be considered again at the next prioritisation round in November 2019.

For more information on our prioritisation process, please watch our video:

[Making decisions about which new treatments to fund.](#)

In year service developments

NHS England have also confirmed that the following treatments and services will be routinely commissioned as in-year service developments:

- [Allogeneic Haematopoietic Stem Cell Transplant for Primary Immunodeficiencies](#) (all ages)
- [Bictegravir-emtricitabine-tenofovir alafenamide for the treatment of HIV-1 in adults](#)
- [Cholic acid and chenodeoxycholic acid for treating inborn errors of bile acid synthesis](#) (all ages)

These treatments and services did not go through the above relative prioritisation process as they had a very low overall budget impact.