July 2020 Prioritisation Decisions

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

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 classified as level five.

The CPAG ranking of treatments considered in the July 2020 prioritisation round is set out below.

**Level 1:**
External beam radiotherapy for patients presenting with hormone sensitive, low volume metastatic prostate cancer at the time of diagnosis

**Level 2:**
Lung volume reduction by surgery or endobronchial valve for severe emphysema in adults

**Level 3:**
Use of defibrotide in severe veno-occlusive disease following stem cell transplant (all ages)
Transcranial magnetic resonance guided focused ultrasound thalamotomy for treatment of medication-refractory essential tremor (adults)

**Level 4:**
Interim Clinical Commissioning Policy Proposition: Sapropterin for Phenylketonuria (all ages)

**Level 5:**
Mercaptamine hydrochloride for corneal cystine deposits in people aged older than 2 years
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 immediate available resource to fund treatments falling in levels one and two.

With the extra pressures on the specialised commissioning budget required to fund a number of COVID-19 initiatives, there was not sufficient remaining resource to fund the policies falling in levels three, four and five within the current financial year. However, Level 3 priorities were deemed affordable to be funded from the next financial year starting April 2021.

The Level 4 policy on Sapropterin is currently unaffordable. Exceptionally, and as a result of a request from the previous Secretary of State for Health and Social Care, the policy on Sapropterin was considered to determine an interim commissioning position pending the outcome of a full NICE Technology appraisal which would replace any interim position and determine the NHS’s final commissioning position. As the outcome of the NICE Technology appraisal is expected by April 2021, NHS England will now wait for that outcome. We strongly encourage the drug’s US manufacturer BioMarin to offer the drug at a fair price and at a level that NICE is able to recommend as a clinically and cost-effective use of NHS resources. Should NICE recommend Sapropterin for routine commissioning, then the branded version manufactured by BioMarin will be immediately funded.

BioMarin’s exclusivity of Sapropterin is due to end in Europe shortly, meaning that generic versions of Sapropterin are now being manufactured. Should companies decide to make these available in England, NHS England can confirm that it would also commission any generic version(s) of Sapropterin from the next financial year onwards on the condition that these manufacturers price their products below the maximum level NICE advises as representing a clinically and cost-effective use of NHS resources.

The Level 5 policy Mercaptamine hydrochloride will have an opportunity to be considered again for a future prioritisation round.

For more information on our prioritisation process, please watch our video: Making decisions about which new treatments to fund