

**77. Ocrevus –  
DHSC plans to make available**

The Hon. Member for Onchan (Mr Callister) to ask the Minister for Health and Social Care:

*Whether his Department has any plans to make available Ocrevus (Ocrelizumab), which received NICE approval in 2019, for early, inflammatory primary progressive multiple sclerosis?*

**The Minister for Health and Social Care (Mr Ashford):** Ocrevus received a NICE recommendation for use in the English NHS in July 2018 (NICE TA533, 25 July 2018). The NICE guidance approves Ocrevus as an option for treating relapsing-remitting MS in patients who meet specified diagnostic criteria, for whom an alternative drug (Alemtuzumab) is contra-indicated or otherwise unsuitable and where the manufacturer provides Ocrevus in line with the commercial agreement negotiated with the NHS.

NICE recommends treatments for inclusion on the NHS in England in line with a clear framework which assesses clinical and cost effectiveness, taking into account other specified factors such as the perceived value of the treatment to patients and carers, whether the treatment is innovative, and so on. Detailed information on the process and framework for consideration can be found in the information on the NICE website and is set out for individual treatments within each Technology Appraisal (TA) document.

In England, it has been agreed that all treatments passing the NICE assessment framework as clinically and cost effective (and thus receiving a recommendation for use within the NICE TA document) will usually be made available on the NHS, in line with the TA, within three months of the publication date. It is deemed that a large health economy such as the NHS in England is able to afford to deliver NICE TA recommendations within the baseline budget.

DHSC recognises the strength and quality of the NICE assessment process and agrees that it should aspire to fund all treatments assessed by NICE as clinically and cost effective. However, an assessment of clinical and cost effectiveness does not equate to affordability within budget – particularly for a small health economy where the budget is more sensitive to the impact of changes in cost. DHSC has not therefore been able to move to a position of routinely following NICE TA recommendations since to do so, particularly in the current financial circumstances, would put DHSC significantly at risk of unfunded cost pressure. Given the requirement for healthcare needs assessment, pathway and service review identified in the Sir Jonathan Michael Report, it cannot be assumed that funding new drugs in line with NICE recommendations would be the highest priority for service development/new funding for DHSC. It should also be noted that the Ocrevus TA was one of 51 TAs published during 2018.

In order to make an informed and sustainable policy decision on NICE TA approved treatments, DHSC needs to understand the likely cost impact of moving to a position of routine implementation. An analysis of the cost of both 'catching up' with current NICE guidance and implementing new guidance as it is published is being requested from a specialist agency in Merseyside. Once completed, a policy decision can be made.

In the meantime, there is a well-established process for consideration of any new treatment, including those covered by a NICE TA. This relies on the relevant consultant/clinical team to initiate the request and provide evidence to demonstrate clinical and cost effectiveness (for a treatment covered by NICE, this would simply require submission of the NICE TA) and an estimate of the impact on the Isle of Man in terms of number of patients and expected cost. Information on availability of funding within existing resources and relative priority of this treatment compared to other calls on resources is also required. Details about this process can be found here:

<https://www.gov.im/about-the-government/departments/health-and-social-care/guidance-centre/dhsc-clinical-commissioning/>

No request for policy consideration of Ocrevus has as yet been received and therefore DHSC currently has no plans to make this treatment available as part of the routine pathway for MS on the NHS here.