Voluntary scheme for branded medicines pricing and access (VPAS) - charity joint statement

About

We are advocacy organisations from the Charity Medicines Access Coalition (CMAC), Cancer52, and the Blood Cancer Alliance, representing nearly 200 charities. We are the voice of millions of people across the UK living with a range of conditions.

The voluntary scheme for branded medicines pricing and access (VPAS) is designed to make the UK an attractive place to bring medicines to market whilst also making sure that spending on medicines grows at a manageable rate. However, in recent years the scheme has not gone far enough in achieving its objectives to make innovative medicines accessible across all disease areas. Commitments made in the previous scheme to improve access to medicines have faltered, and many disease areas including those with high unmet need either face significant delays or are unable to access new, effective treatments.

We are calling on all parties in the negotiations to meet 6 key tests. We think these tests are vital to delivering a "triple win" which will see people and communities benefit from new treatments, the NHS able to make best use of its budget and ensure the UK is an attractive location for global life science research investment.

Key tests for the negotiations and next scheme

We are calling for 6 key tests to be met for the next scheme to be a success. The negotiations should:

1. Focus on people and their needs at all stages of negotiation and design of the new scheme, based on meaningful engagement with communities.
2. Ensure faster and equitable access to new, innovative and effective medicines.
3. Ensure transparency in how decisions around medicines access are made.
4. Enable innovation in how drugs are priced to deliver value for the health system and for people.
5. Support action to enhance NHS data collection to make the best of medicines.
6. Facilitate a joined-up approach to medicines which brings together relevant stakeholders around a single strategy for improving medicines access.

How might this be achieved?

Patient involvement in developing the scheme

Whilst the VPAS represents a commercial negotiation between the pharmaceutical industry, the Government, and the NHS, the implications for people's access to medicines in the UK are potentially far reaching. Despite this, input from people and communities in previous schemes have been very limited.

Therefore, we believe consideration needs to be given to a **mechanism for ensuring appropriate, meaningful input from people and communities into the development and implementation of the scheme**. We stand ready to help with the development of such a mechanism, while recognising the need to respect the confidentiality of discussions between industry and government.

Transparency

The current VPAS is an opaque process, with limited information available on the month-to-month status of payments and where they go and no accountability on how successful the scheme is in achieving its aim of improving access to innovative treatments.

There is a need for greater transparency to truly enable public scrutiny of the scheme and its objectives given the impact of the VPAS on people, the NHS budget and the UK life sciences industry. Patient groups could be included in scrutinising the implementation of the scheme.

We believe there should be an **annual ministerial statement to parliament on the VPAS as well as scrutiny from the House Commons Health Select Committee**.

A roadmap for the future of NICE

Following the NICE Methods and Process Review – the review was itself a recommendation from the 2019 VPAS agreement – NICE indicated that any future changes to the way it operates and assesses health technologies will be "modular" in nature. NICE believes that this will enable it to be more agile and responsive, ensuring its methods and processes remain cutting edge and fit for the future as the healthcare landscape continues to evolve.

However, since the publication of the new Methods and Process manuals in February 2022, NICE has not laid out when this modular approach will start, how topics for modular review will be chosen, or how these processes will be governed. From a patient perspective, key challenges have yet to be addressed such as enabling the broader value of a medicine to be assessed by factoring the impact of a treatment not just on an individual but also their carer.

The new scheme must set out a **roadmap for the future of NICE and how it will work with other organisations to implement improvements**.

Improved offer for rare, less common or small-patient-population diseases

Medicine appraisal organisations need to more clearly consider how it takes rarity into account when appraising medicines. Currently not enough flexibility is given for groups with smaller populations where those in high need of new and innovative treatments are often unable to access the latest drugs. We believe that **a new system for assessing medicines is needed between standard and highly specialised technologies** to address this problem.

Improvements to reimbursement offers

Current reimbursement models offered by UK medicine appraisal organisations lack key flexibilities which could improve and enable access to new therapies in areas such as rare and less common cancers. The next VPAS must **enable the use by the NHS of innovative approaches to pricing including multi-indication pricing, combination pricing, and outcome-based payments**.

Data collection

The negotiations provide an opportunity to make better use of real-world data from NHS datasets, registries, and existing national audit programmes. This could be used to further optimise the use of medicines - improving outcomes, shaping clinical guidelines, supporting re-appraisal of conditionally approved medicines, and feeding into the research pipeline. It could also support pilots of innovative pricing models like outcomes-based pricing through better post-approval monitoring of value and risk.

We recommend that the **VPAS commits to the NHS, NICE, MHRA and industry aligning their data requirements and data collection** to make better use of existing real-world NHS and patient registry data.

Holistic approach to medicines access policy

There have been a number of initiatives in recent years which aim to improve access to medicines in the UK, such as the MHRA's Innovative Licensing and Access Pathway or the new Innovative Medicines Fund. However, we have concerns that these initiatives have not met their full potential, in part because the way in which we regulate, fund and price medicines is done by several different agencies. Whilst each of these agencies has an important remit, a more joined up approach to the approval and use of medicines will be crucial for improving health outcomes. It will also create a more compelling case for life sciences investment in the UK.

The next scheme should agree a **government-led review on the current strengths and weaknesses of how medicines are approved and funded in the UK and aim to create a new multi-agency framework** which will look holistically at this issue. Any review will need to build on recent efforts such as the Accelerated Access Collaborative.