NICE National Institute for Health and Care Excellence

Resource impact summary report

Resource impact

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Resource impact summary report

Guidance recommendation

See NICE's recommendations on obecabtagene autoleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia.

Financial and capacity resource impact

The key drivers of resource impact are:

- The drug price of obecabtagene autoleucel (obe-cel) is in routine commissioning and it is expected to displace brexucabtagene autoleucel, which is currently funded in the Cancer Drug Fund.
- Obe-cel is less likely to cause serious side effects like grade 3+ cytokine release syndrome or immune effector cell-associated neurotoxicity syndrome. This may reduce the associated length of hospital stay.

The company has a commercial arrangement. This makes obe-cel available to the NHS at a discount.

The payment mechanism for the technology is determined by the responsible commissioner and depends on whether the technology is classified as high cost.

Eligible population for obe-cel

The eligible population is estimated to be around 50 people. The uptake is expected to be around 35 people from year 2. Because the population is small, we have not produced a resource impact template.

Key information

Table 1 Key information

Time from publication to routine commissioning funding	90 days
Programme budgeting category	PBC 02l
Commissioner(s)	NHS England
Provider(s)	NHS Hospital trusts
Pathway position	Second line to treat relapsed or refractory B-cell precursor acute lymphoblastic leukaemia

About this resource impact summary report

This resource impact summary report accompanies the NICE technology appraisal guidance on obecabtagene autoleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia and should be read with it.

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