Addendum: Correction to PSA results and to estimates of budget impact

1. PSA

Subsequent to submitting on December 1st 2015, an error was identified in the set up sheets of the submitted model which had a minor effect on the way the model was running the probabilistic sensitivity analyses. Cost parameters that were shared across multiple comparators were meant to be sampled jointly once per simulation; the error meant they were sampled more than once. This error has been corrected and the PSA has been re-run. Results utilising list prices for all treatments and comparators are presented below. Results utilising known or assumed comparator discounts are presented in the PAS addendum.

[redacted]

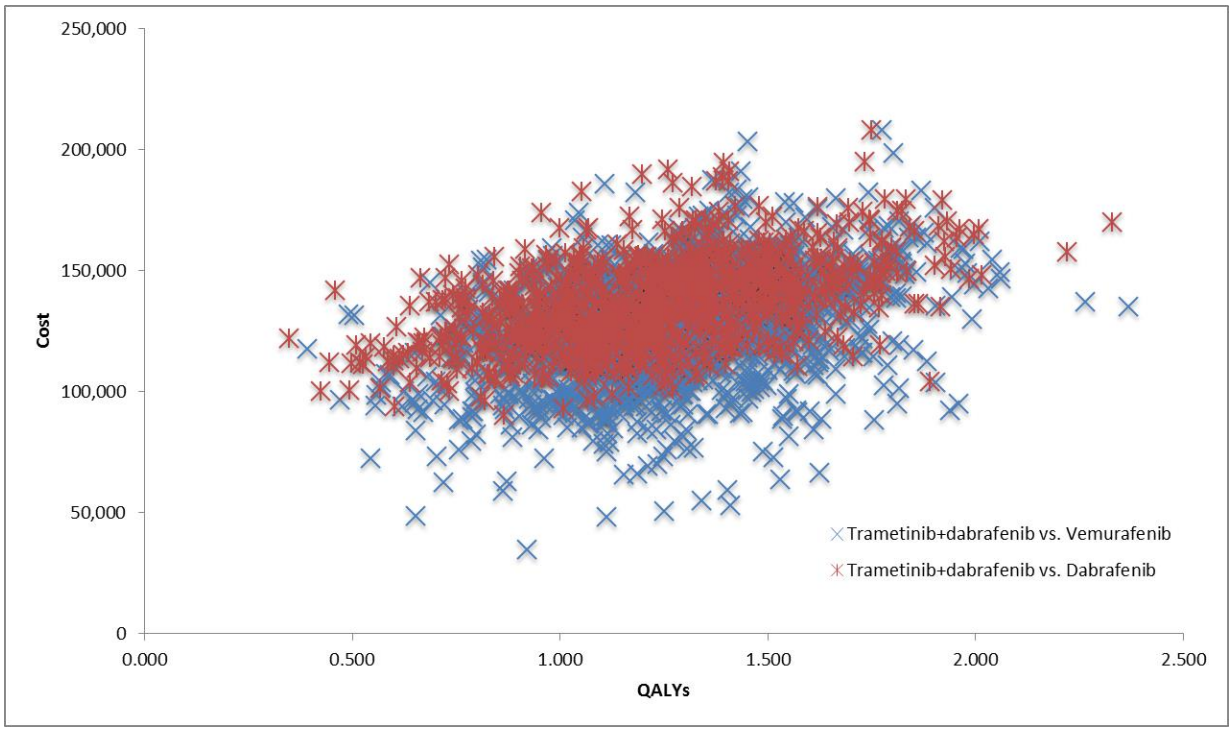
5.8.3. Incremental CE results of PSA

The mean ICERs with 95% CI resulting from the pairwise analyses in the PSA analysis (1000 simulations) are presented below. NB: these results do not incorporate any of the available patient access schemes for the intervention or comparators.

Trametinib + dabrafenib combination	Mean ICER (£)	Lower 95% CI	Upper 95% CI
Versus vemurafenib	97,118	92,526	108,000
Versus dabrafenib	110,473	95,087	161,091

The scatterplot resulting from the PSA for trametinib + dabrafenib versus vemurafenib and versus dabrafenib is presented in Figure 1 below.

Figure 1: Scatter plot: Trametinib + dabrafenib versus vemurafenib and versus dabrafenib (list prices)



Pairwise and incremental acceptability plots are presented below in Figure 2 and Figure 3.

Figure 2: Acceptability curves of pairwise comparisons of trametinib + dabrafenib combination (list prices)

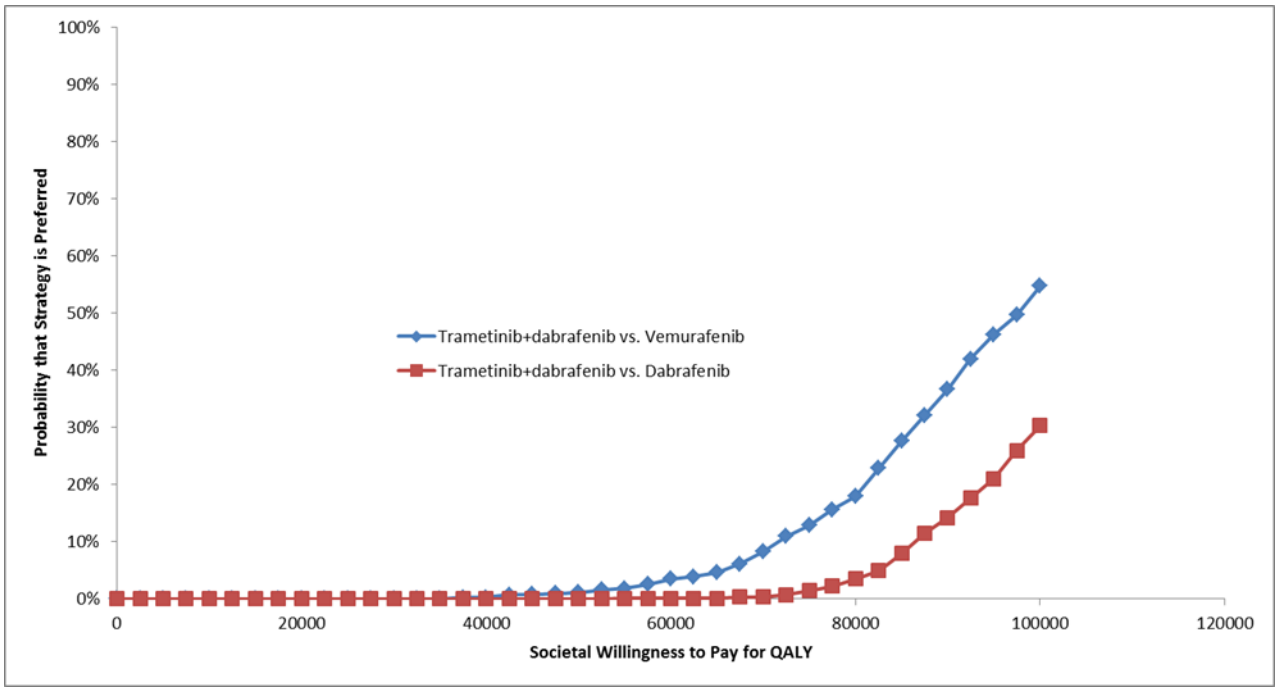
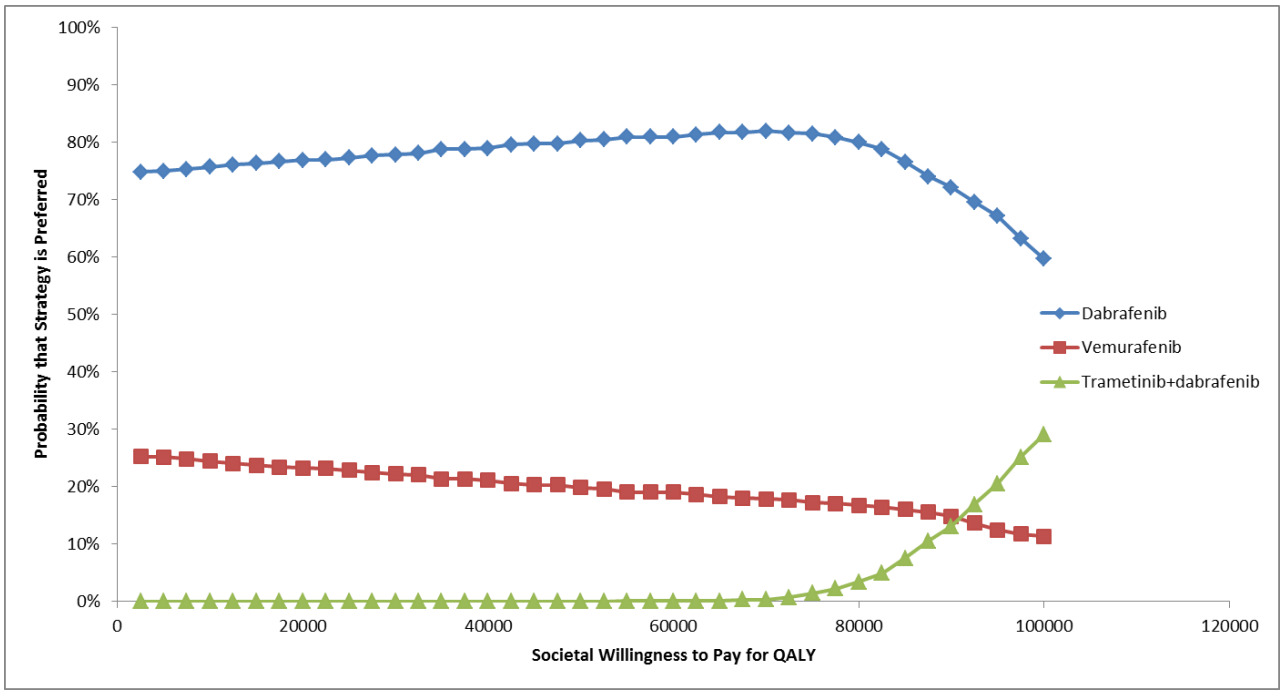


Figure 3: Incremental CEAC for trametinib + dabrafenib combination (list prices)



In this analysis expected costs are higher for trametinib + dabrafenib combination than vemurafenib and dabrafenib monotherapy in the majority of simulations. Expected QALYs are higher for the combination than either monotherapy in the majority of the simulations. Table 1 below presents the probability that the trametinib + dabrafenib combination is cost-effective at an acceptability threshold of £50,000/QALY (see Section **Error! Reference source not found.**.3).

Table 1: Summary of PSA for trametinib + dabrafenib combination (list prices)

QALY threshold	**Probability that trametinib + dabrafenib combination is cost-effective versus comparator (%)**	
	Vemurafenib	Dabrafenib
£50,000	1%	0%

5.8.4. Variability between basecase and PSA

The PSA results are broadly consistent with the results presented in the base case (T+D versus vemurafenib: £97,118/QALY in PSA versus £96,437/QALY in base case| T+D versus dabrafenib: £110,473/QALY in PSA versus £104,069/QALY in base case).

2. Estimates of budget impact

An error has been identified in the estimates of budget impact in that total patient costs were assumed instead of annual patient costs. The consequence is that the budget impact (at list prices) was overestimated. The costs of interest are incurred during treatment and therefore in order to derive annual costs, each cost element is divided by the total PFLYs.

6.6. Estimated annual budget impact for the NHS in England

Table 2 below describes the anticipated 5 year budget impact to the NHS of introducing the dual therapy, treatments are at list price. Underlying patient estimates are as described in **Error! Reference source not found.** above and it is assumed that these costs will displace those of the BRAF inhibitor monotherapies, not be in addition to them.

Table 2. Anticipated budget impact of introducing dual therapy

Cost	Year 1	Year 2	Year 3	Year 4	Year 5
Anticipated number of patients	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Drug acquisition / patient / year ([redacted] £	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Dispensing / patient / year [redacted] £	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Treatment of adverse events / patient / year [redacted] £	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Other pre-progression costs / patient / year [redacted] £	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Total costs (£)	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]

***Estimates are based on drug list prices and do not incorporate available patient access schemes**