

Putting NICE guidance into practice

Resource impact report: Nirmatrelvir plus ritonavir and tocilizumab for treating COVID-19 (TA878 updated following review)

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1 Recommendations

1.1 Nirmatrelvir plus ritonavir is recommended as an option for treating COVID-19 in adults, only if they:

- do not need supplemental oxygen for COVID-19 and
- have an increased risk for progression to severe COVID-19, as defined in [section 5](#).

1.2 Tocilizumab is recommended, within its marketing authorisation, as an option for treating COVID-19 in adults who:

- are having systemic corticosteroids and
- need supplemental oxygen or mechanical ventilation.

Tocilizumab is only recommended if the company provides it according to the commercial arrangement.

2 Resource impact of the guidance

2.1 This guidance will have resource implications at a local level which cannot be outlined due to commercial in confidence data and uncertainty around patient populations. Therefore, we encourage organisations to evaluate their own practices against the recommendations in the NICE guidance and assess costs and impact on capacity by using the local resource impact template.

2.2 The list price of tocilizumab have a commercial agreement (simple discount patient access scheme). This makes tocilizumab available to the NHS with a discount. The size of the discounts is commercial in confidence. The discounted prices of tocilizumab can be input into the template and other variables such as prevalence figures may be amended. NHS organisations can get details on the Commercial Access and Pricing (CAP) Portal. The list price for nirmatrelvir plus ritonavir is confidential until released by the company and cannot be reported here.

3 Implications for commissioners

- 3.1 These technologies are commissioned by integrated care boards (ICB's). Providers are NHS Hospital trusts and primary care. The payment mechanism is determined by the responsible commissioner and depends on the technology being classified as high cost.
- 3.2 COVID-19 therapeutics falls within the programme budgeting category PBC 01x infectious diseases.
- 3.3 [Section 7 of the National Institute for Health and Care Excellence \(Constitution and Functions\) and the Health and Social Care Information Centre \(Functions\) Regulations 2013](#) requires ICBs, NHS England and, with respect to their public health functions, local authorities to comply with the recommendations in this evaluation within 3 months of its date of publication.

4 How we estimated the resource impact

The population

- 4.1 In 2023, around 570,000 new cases of people with COVID-19 were recorded in England by Gov.uk. It's important to note that this data only extends until 13 December, 2023, and the actual number of cases may be higher due to changes in recording practices.

Assumptions

- 4.2 The resource impact template assumes that:
- the adult population in England will increase in the next 5 years (please see resource impact template for more details).
 - all patients have best supportive care alone in current practice
 - VAT is included in the resource impact template where applicable

- eligible population figures, drug prices and estimated market share for COVID-19 therapeutics have been left for local input in the resource impact template. This is due to commercial in confidence information that cannot be shared.
- people who have an increased risk for progression to severe COVID-19 includes people outlined in [section 5 of the NICE technology appraisal guidance on nirmatrelvir plus ritonavir and tocilizumab \[TA878\]](#)
- people having treatment in secondary care with nirmatrelvir-ritonavir only includes people hospitalised for reasons other than COVID-19 within 5 days of onset symptoms of COVID-19
- number of bed days and their associated cost can be locally input to assess capacity impact in the resource impact template
- associated care costs can be locally input for people who are not in hospital
- no administration costs have been included for people who are in hospital because drug administration will be included as part of the inpatient tariff.

This resource impact report accompanies the [NICE guidance on nirmatrelvir plus ritonavir and tocilizumab for treating COVID-19](#) and should be read with it.

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