NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Single technology appraisal: cost-comparison

[Evaluation title and ID number]

Document B

Company evidence submission

**[Month year]**

|  |  |  |  |
| --- | --- | --- | --- |
| **File name** | **Version** | **Contains confidential information** | **Date** |
|  |  | **Yes/no** |  |

# Instructions for companies

This is the template for submission of evidence to the National Institute for Health and Care Excellence (NICE) when a cost-comparison case is made as part of the single technology appraisal process. Please note that the information requirements for submissions are summarised in this template; full details of the requirements for pharmaceuticals and devices are in the [user guide](https://www.nice.org.uk/About/What-we-do/Our-Programmes/NICE-guidance/NICE-technology-appraisal-guidance).

This submission must not be longer than 100 pages, excluding appendices and the pages covered by this template. If it is too long it will not be accepted.

Companies making evidence submissions to NICE should also refer to the NICE [health technology evaluation guidance development manual](https://www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/nice-technology-appraisal-guidance/changes-to-health-technology-evaluation).

|  |
| --- |
| In this template any information that should be provided in an appendix is listed in a box. |

### Highlighting in the template (excluding the contents list)

Square brackets and grey highlighting are used in this template to indicate text that should be replaced with your own text or deleted. These are set up as form fields, so to replace the prompt text in [grey highlighting] with your own text, click anywhere within the highlighted text and type. Your text will overwrite the highlighted section.

To delete grey highlighted text, click anywhere within the text and press DELETE.

Grey highlighted text in the footer does not work as an automatic form field, but serves the same purpose – as prompt text to show where you need to fill in relevant details. Replace the text highlighted in [grey] in the footer with appropriate text. (To change the footer, double click over the footer text. Double click back in the main body text when you have finished.)

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# Tables and figures

[Include a list of all tables and figures here with page references]

# B.1 Decision problem, description of the technology and clinical care pathway

B.1.1 Decision problem

[Please choose the text below that is most applicable to your submission and adapt as needed:]

The submission covers the technology’s full marketing authorisation for this indication.

The submission covers the full population for the comparator, as recommended by NICE.

The submission focuses on part of the technology’s marketing authorisation or part of the population for the comparator [for example, explain if this affects details of the pathway position or population, such as ‘people with 2 previous relapses only’ or ‘people with severe disease’]. The proposed [position in the treatment pathway/population] is narrower than [the marketing authorisation/the population for the comparator as recommended by NICE] because: [please include the relevant option from the list below]

* The published NICE technology appraisal guidance for the comparator(s) specified in the NICE scope recommends the [comparator] for a subgroup of the population in the marketing authorisation, and therefore a cost-comparison case can be made only for this population [add details of the population for whom the comparator is recommended in NICE guidance].
* This is relevant to NHS clinical practice; it would not be used [elsewhere/in a wider population].
* The evidence base on [technology] is limited to [this position/population].
* This [position/population] optimises the cost effectiveness of [technology], because [please provide rationale].
* This [position/population] reflects where [technology] provides the most clinical benefit.
* [Technology] is not [clinically/cost] effective in [add position/population].

[Specify the decision problem that the submission addresses in the table below.]

### Table [X] The decision problem

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Final scope issued by NICE** | **Decision problem addressed in the company submission** | **Rationale if different from the final NICE scope** |
| **Population** |  |  |  |
| **Intervention** |  |  |  |
| **Comparator(s)** |  |  |  |
| **Outcomes** |  |  |  |
| **Economic analysis** | [please delete row if economic analysis is as per the scope] |  |  |
| **Subgroups to be considered** | [please delete row if not applicable] |  |  |
| **Special considerations including issues related to equity or equality** | [please delete row if not applicable] |  |  |

B.1.2 Description of the technology being evaluated

|  |
| --- |
| In appendix C include the summary of product characteristics or information for use, and the UK public assessment report, scientific discussion or drafts. |

[Describe the technology being evaluated in the table below.]

**Table [X] Technology being evaluated**

|  |  |
| --- | --- |
| **UK approved name and brand name** |  |
| **Mechanism of action** |  |
| **Marketing authorisation/CE mark status** | [Indicate whether the technology has a UK marketing authorisation/CE marking for the indications in this submission. If so, give the date when this was granted. If not, state the current UK regulatory status, with relevant dates for example, date of application and/or expected date of approval from the MHRA.] |
| **Indications and any restriction(s) as described in the summary of product characteristics (SmPC)** | [Give the (anticipated) indiciation(s) in the UK. For devices, provide the date of (anticipated) CE marking, including the indication for use. If a submission is based on the company's proposed or anticipated marketing authorisation, the company must advise NICE immediately of any difference between the anticipated and the final marketing authorisation approved by the regulatory authorities. Include the (draft) SmPC for pharmaceuticals or information for use (IFU) for devices in appendix C. Provide the (draft) UK Public Assessment Report for pharmaceuticals or a (draft) technical manual for devices in appendix C.] |
| **Method of administration and dosage** |  |
| **Additional tests or investigations** | [State whether additional tests or investigations are needed (for example, diagnostic tests to identify the population for whom the technology is indicated in the marketing authorisation).] |
| **List price and average cost of a course of treatment** |  |
| **Patient access scheme/commercial arrangement (if applicable)** | [Indicate if there is a patient access scheme/commercial arrangement agreed with NHS England and whether this is a simple discount or complex arrangement.] |

B.1.3 Health condition and position of the technology in the treatment pathway

[Summarise the clinical pathway of care in a diagram showing the context and the proposed placement of the technology within the pathway.]

[If the management of the condition has changed since the NICE technology appraisal(s) of the comparator(s) specified in the final scope, or differs from the treatment pathway set out in a relevant NICE guideline, highlight and explain the differences.]

[See section 1.3 of the user guide for full details of the information required here.]

B.1.4 Equality considerations

[Provide an assessment of whether the use of this technology is likely to raise any equality issues.]

[See section 1.4 of the user guide for full details of the information required here.]

# B.2 Key drivers of the cost effectiveness of the comparator(s)

## B.2.1 Clinical outcomes and measures

[Summarise the clinical outcomes and measures that were used in the cost-effectiveness analysis of the NICE technology appraisal(s) of the comparator(s) specified in the final scope for this appraisal and relevant to the decision problem.]

[Highlight the key clinical drivers of the cost-effectiveness results and include any preferred assumptions from the committee that are relevant to the consideration of these outcomes, for example duration of treatment effect.]

[Describe any uncertainties in the assumptions and estimates used in the previous NICE appraisal(s).]

[See section 2.1 of the user guide for full details of the information required here.]

## B.2.2 Resource use assumptions

[Summarise the committee’s preferred assumptions about resource use and the associated costs from the NICE technology appraisal(s) of the comparator(s) specified in the NICE scope and relevant to the decision problem, for example, the frequency of monitoring visits. Describe any uncertainties in the assumptions and estimates used in the previous NICE appraisal(s).]

[See section 2.2 of the user guide for full details of the information required here.]

# B.3 Clinical effectiveness

## B.3.1 Identification and selection of relevant studies

See appendix D for full details of the process and methods used to identify and select the clinical evidence relevant to the technology being evaluated.

|  |
| --- |
| * In appendix D describe the process and methods used to identify and select the clinical evidence relevant to the technology being evaluated.
* See section 3.1 of the user guide for full details of the information required in appendix D.
 |

## B.3.2 List of relevant clinical effectiveness evidence

[In a table, provide details of the trials that provide evidence of the clinical benefits of the technology at its licensed dosage within the indication being appraised.]

[These should be based on the best evidence available, preferably from randomised controlled trials (RCTs). Non-randomised and non-controlled evidence may be needed to supplement RCT data.]

[See section 3.2 of the user guide for full details of the information required here.]

### Table [X] Clinical effectiveness evidence

| **Study**  | [Clinical trial name or primary author surname (year published)] |
| --- | --- |
| **Study design** |  |
| **Population** |  |
| **Intervention(s)** |  |
| **Comparator(s)** |  |
| **Indicate if study supports application for marketing authorisation (yes/no)** |  |
| **Reported outcomes specified in the decision problem** |  |
| **All other reported outcomes** |  |

## B.3.3 Summary of methodology of the relevant clinical effectiveness evidence

[Provide details of the methodology of the RCTs and non-randomised and non-controlled evidence identified in section 3.2.]

[Provide a summary of the baseline characteristics of trial participants.]

[See section 3.3 of the user guide for full details of the information required here.]

## B.3.4 Statistical analysis and definition of study groups in the relevant clinical effectiveness evidence

[State the primary hypothesis or hypotheses under consideration and provide methods used for testing hypotheses for each trial listed in section 3.2.]

[State whether each trial was designed as a superiority, equivalence or non-inferiority trial.]

|  |
| --- |
| In appendix D, provide details of the numbers of participants eligible to enter the studies. |

[See section 3.4 of the user guide for full details of the information required here.]

## B.3.5 Critical appraisal of the relevant clinical effectiveness evidence

[Provide a quality assessment for each of the sources of clinical evidence identified in section 3.2.]

|  |
| --- |
| In appendix D, provide the complete quality assessment for each trial. |

[Provide a discussion on the limitations of the evidence base presented.]

[See section 3.5 of the user guide for full details of the information required here.]

## B.3.6 Clinical effectiveness results of the relevant studies

[Provide results for all relevant outcome measures important to the decision problem.]

[These must include outcomes and measures that were used in the cost-effectiveness analysis of the NICE technology appraisal(s) of the comparator(s) specified in the final scope, focusing on outcomes the model was sensitive to.]

[See section 3.6 of the user guide for full details of the information required here.]

## B.3.7 Subgroup analysis

[Only provide results of subgroup analyses if the technology does not provide similar or greater health benefits at a similar or lower cost to the comparator in the full population for whom the comparator has been recommended by NICE, that is, if the benefits are seen only in a subgroup of the population.]

[Specify the rationale for doing these analyses and whether they were pre-planned or post-hoc.]

|  |
| --- |
| Provide a summary of the results for the subgroups in appendix E. |

[See section 3.7 of the user guide for full details of the information required here.]

## B.3.8 Meta-analysis

[Provide details of any meta-analyses carried out. If a meta-analysis is not considered appropriate, a rationale must be given and a qualitative overview provided.]

[See section 3.8 of the user guide for full details of the information required here.]

## B.3.9 Indirect and mixed treatment comparisons

See appendix D for full details of the methodology for the indirect comparison or mixed treatment comparison.

|  |
| --- |
| In appendix D include full details of the methodology for the indirect comparison or mixed treatment comparison. |

[Provide the results of the indirect and/or mixed treatment comparison.]

[See section 3.9 of the user guide for full details of the information required here.]

### Uncertainties in the indirect and mixed treatment comparisons

[Describe and explain any uncertainties in the inputs and assumptions of the indirect and mixed treatment comparisons described above. Please provide a summary of any sensitivity analyses conducted to explore these uncertainties.]

## B.3.10 Adverse reactions

[Provide details of all adverse reactions experienced with the technology in relation to the decision problem and reported in the studies identified in section 3.2.]

[Comment on the similarities and differences between the technology under appraisal and its comparator(s), with respect to adverse reactions. Provide evidence to confirm whether any differences are statistically significant or clinically meaningful.]

|  |
| --- |
| In appendix F, provide details of any studies that report additional adverse reactions to those reported in the studies in section 3.2. |

[See section 3.10 of the user guide for full details of the information required here.]

## B.3.11 Conclusions about comparable health benefits and safety

[Draw conclusions from the evidence supporting superiority, similarity, non-inferiority or equivalence of the technology compared with the comparator(s) specified in the final scope issued by NICE, including any subgroups.]

[Focus on the key outcomes on which the clinical and cost effectiveness of the comparator(s) were based (detailed in section 2), including efficacy and safety outcomes.]

[If there are differences in effectiveness between the technology and its comparator(s), comment on whether these are clinically meaningful and provide supporting evidence.]

[Provide evidence on the clinical or biological plausibility of similarities in health benefits between the technology and the comparator(s).]

[Describe and explain any uncertainties in the evidence informing your conclusions.]

[See section 3.11 of the user guide for full details of the information required here.]

## B.3.12 Ongoing studies

[Provide details of all completed and ongoing studies that should provide additional evidence in the next 12 months for the indication being appraised.]

# B.4 Cost-comparison analysis

B.4.1 Changes in service provision and management

[Describe the location or setting of care for the technology being appraised. If this differs from the location or setting of care for the comparators listed in the final scope from NICE, describe these differences.]

[Describe any differences in resource use between the technology and the comparators listed in the final scope from NICE.]

[See section 4.1 of the user guide for full details of the information required here.]

B.4.2 Cost-comparison analysis inputs and assumptions

### Features of the cost-comparison analysis

[State the time horizon used in the cost-comparison analysis, and the rationale for the chosen time horizon. State whether costs were discounted.]

[See sections 4.2.1 to 4.2.2 of the user guide for full details of the information required here.]

### Intervention and comparators’ acquisition costs

[In a table, present the acquisition costs of the intervention and comparator technologies included in the cost-comparison analysis.]

A suggested format for the table is provided below. Indicate whether the acquisition costs represent list prices or include a patient access scheme or other nationally available price reduction (for example, through contracts negotiated by the NHS Commercial Medicines Unit).]

[See sections 4.2.3 to 4.2.5 of the user guide for full details of the information required here.]

### Table [X] Acquisition costs of the intervention and comparator technologies

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Intervention**  | **Comparator 1** | **Comparator 2** | **[Add more columns as needed]** |
| **Pharmaceutical formulation**  |  |  |  |  |
| **(Anticipated) care setting** |  |  |  |  |
| **Acquisition cost (excluding VAT) \*** |  |  |  |  |
| **Method of administration** |  |  |  |  |
| **Doses**  |  |  |  |  |
| **Dosing frequency** |  |  |  |  |
| **Dose adjustments** |  |  |  |  |
| **Average length of a course of treatment** |  |  |  |  |
| **Average cost of a course of treatment (acquisition costs only)** |  |  |  |  |
| **(Anticipated) average interval between courses of treatment** |  |  |  |  |
| **(Anticipated) number of repeat courses of treatment** |  |  |  |  |
| \* Indicate whether this acquisition cost is list price or includes an approved patient access scheme or other nationally available price reduction. When the marketing authorisation or anticipated marketing authorisation recommends the intervention in combination with other treatments, the acquisition cost of each intervention should be presented. |

### Intervention and comparators’ healthcare resource use and associated costs

[In a table, present the healthcare resource costs associated with the intervention and comparator technologies included in the cost-comparison analysis, and the methods used to estimate them.]

[This should include, when relevant, the costs associated with drug administration, patient monitoring and patient follow-up.]

[Identify the unit cost for each resource and justify why that cost was chosen, together with a supporting reference and the price year.]

[Estimate the value of each resource for each technology (that is, the quantity of resources affected multiplied by their unit cost). Justify the quantity of resources estimated. A suggested format for the table is provided below.]

|  |
| --- |
| In appendix G describe how relevant cost and healthcare resource data for England were identified. |

[See sections 4.2.6 to 4.2.9 of the user guide for full details of the information required here.]

### Table [X] Resource costs of the intervention and comparator technologies

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Intervention**  | **Comparator 1** | **Comparator 2** | **[Add more columns as needed]** |
| **[Resource 1]** |  |  |  |  |
| **Unit cost**  |  |  |  |  |
| Cost (£), price year |  |  |  |  |
| Source reference |  |  |  |  |
| Rationale for source |  |  |  |  |
| **Units per course of treatment** |  |  |  |  |
| Number of units |  |  |  |  |
| Source reference |  |  |  |  |
| Rationale for source |  |  |  |  |
| **Total cost of** [resource 1] |  |  |  |  |
| Per course of treatment |  |  |  |  |
| Over the full time horizon |  |  |  |  |
| **[Resource 2]** |  |  |  |  |
| **Unit cost** |  |  |  |  |
| Cost (£), price year |  |  |  |  |
| Source reference |  |  |  |  |
| Rationale for source |  |  |  |  |
| **Units per course of treatment** |  |  |  |  |
| Number of units |  |  |  |  |
| Source reference |  |  |  |  |
| Rationale for source |  |  |  |  |
| **Total cost of** **[resource 2]** |  |  |  |  |
| Per course of treatment |  |  |  |  |
| Over the full time horizon |  |  |  |  |
| **[Add more rows as needed]** |  |  |  |  |

### Adverse reaction unit costs and resource use

[Describe and tabulate the unit costs and resource use associated with the adverse reactions included in the cost-comparison analysis.]

[See sections 4.2.10 to 4.2.11 of the user guide for full details of the information required here.]

### Miscellaneous unit costs and resource use

[Describe and tabulate any other unit costs and resource use that have been included in the cost-comparison analysis.]

[See section 4.2.12 of the user guide for full details of the information required here.]

### Clinical expert validation

[If clinical experts assessed the applicability of the cost and healthcare resource use values available, or approximated any of the values used in the analysis, provide the details.]

[See section 4.2.13 of the user guide for full details of the information required here.]

### Uncertainties in the inputs and assumptions

[Describe and explain any uncertainties in the cost and resource use estimates described above.]

B.4.3 Base-case results

[Describe and tabulate the base-case cost-comparison results.]

[A suggested format for the table is provided in section 4.3 of the user guide.]

B.4.4 Sensitivity and scenario analyses

[Describe the impact of varying inputs in the cost-comparison analysis that are subject to uncertainty, as identified in section 4.2. Tabulate the results.]

B.4.5 Subgroup analysis

[Provide details of any subgroup analyses explored in the cost-comparison analysis.]

[See section 4.5 of the user guide for full details of the information required here.]

B.4.6 Interpretation and conclusions of economic evidence

[Provide a conclusion on the cost of the technology compared with the comparators listed in the final scope from NICE.]

[See section 4.6 of the user guide for full details of the information required here.]

# B.5 References

[Please use a recognised referencing style, such as Harvard or Vancouver. Trials should be identified by the first author or trial ID, rather than by relying on numerical referencing alone (for example, ‘TrialNCT123456/Trial ACRONYM/Jones et al.126' rather than ‘One trial126’).]

Please also provide references as a separate RIS file.

# B.6 Appendices

[List the titles of the appendices here. All appendices should be provided as separate documents to the main submission.]

[See section 6 of the user guide for a list of the appendices that should be used to support the submission.]

[Labelling of appendices should start at C, because document A is the submission summary and document B is the main submission. Appendices C to I should be provided. Any additional appendices should start at appendix J.]

# Appendix C: Summary of product characteristics (SmPC) and UK public assessment report

## C1.1 SmPC

## C1.2 UK public assessment report

# Appendix D: Identification, selection and synthesis of clinical evidence

## D1.1 Identification and selection of relevant studies

[Describe the process and methods used to identify and select the studies relevant to:]

* [the technology being appraised]
* [comparator technologies, when an indirect or mixed treatment comparison is carried out.]

[See section 3.1 of the user guide for full details of the information required here.]

[Note that clinical evidence for the comparator(s) must include all of the studies included in the NICE technology appraisal(s) of the comparator(s).]

[Therefore the start date for the search strategy to retrieve new data on the comparator(s) should be the end date used for literature searches in the NICE technology appraisal(s) of each comparator. Specify whether the study is from the original technology appraisal or from a new search.]

### Search strategy

### Study selection

#### Complete reference lists for included studies and excluded studies

### Summary of trials used for indirect or mixed treatment comparisons

#### Methods and outcomes of studies included in indirect or mixed treatment comparisons

#### Methods of analysis of studies included in the indirect or mixed treatment comparison

#### Programming language for the indirect or mixed treatment comparison

#### Risk of bias of studies included in indirect or mixed treatment comparisons

## D1.2 Participant flow in the relevant randomised control trials

[Provide details of the numbers of participants who were eligible to enter the trials.]

[Include the number of participants randomised and allocated to each treatment. Provide details of and the rationale for participants who crossed over treatment groups, were lost to follow-up or withdrew from the RCT.]

[Provide a CONSORT [diagram](http://www.consort-statement.org/) showing the flow of participants through each stage of each of the trials.]

[See section 3.4 of the user guide for full details of the information required here.]

## D1.3 Quality assessment for each study

[See section 3.5 of the user guide for full details of the information required here.]

# Appendix E: Subgroup analysis

[See section 3.7 of the user guide for full details of the information required here.]

# Appendix F: Adverse reactions

[See section 3.10 of the user guide for full details of the information required here.]

# Appendix G: Cost and healthcare resource identification, measurement and valuation

[Describe how relevant cost and healthcare resource data for England were identified.] [Explain any assumptions made and the rationale for these.] [It may be appropriate to use a systematic approach to identify resource use and cost data, for example if service provision or disease management has changed since the technology appraisal of the comparator(s), or if there are differences in resource use between the technology and the comparators which warrant the identification of new data sources.]

[Search strategies and inclusion criteria should be provided in the appendix. Published and unpublished studies may be considered.] [If there are limited data for England, the search strategy may be extended to capture data from other countries. Please give the following details of included studies:]

* [country of study]
* [date of study]
* [applicability to clinical practice in England]
* [cost valuations used in the study]
* [costs for use in the economic analysis]
* [technology costs.]

[When describing how relevant unit costs were identified, comment on whether NHS reference costs or payment-by-results (PbR) tariffs are appropriate for costing the intervention being appraised.] [Describe how the clinical management of the condition is currently costed in the NHS in terms of reference costs and the PbR tariff.] [Provide the relevant Healthcare Resource Groups and PbR codes and justify their selection.]

# Appendix H: Price details of treatments included in the submission

## H1.1 Price of intervention

[See section 3.7.X of the user guide for full details of the information required here.]

Table X Details of intervention costs, including concomitant medicines, for each formulation used in the model

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Form** | **Dose per unit** | **Pack size** | **List price** | **Source** | **PAS price** |
| [Technology]  | [Mode of administration] |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| [Add more rows as needed] |  |  |  |  |  |  |
| Abbreviations: PAS, Patient access scheme |

## H1.2 Price of comparators and subsequent treatments

Table X Details of comparators and subsequent treatment costs, including concomitant medicines, for each formulation used in the model

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Form** | **Dose per unit** | **Pack size** | **List price** | **Source** |
| [Technology]  | [Mode of administration] |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| [Add more rows as needed] |  |  |  |  |  |
| Abbreviations: PAS, Patient access scheme |

# Appendix I: Checklist of confidential information