

Department of Health & Social Care





# Developing and testing innovative models for the evaluation and purchase of antimicrobials: subscription-based payment model

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Nick Crabb, Programme Director, Scientific Affairs, National Institute for Health and Care Excellence Colm Leonard, Consultant Clinical Adviser, National Institute for Health and Care Excellence Grace Jennings, Senior Scientific Adviser, National Institute for Health and Care Excellence Mark Perkins, Commercial Medicines Directorate, NHS England & NHS Improvement David Glover, Medicines Analysis, Strategy and Policy, NHS England & NHS Improvement

# Housekeeping

- Duration of webinar is approximately two hours
- All participants are muted by default
- Use the 'Q&A section' to send in your questions. You can click 'Send Anonymously' if you do not want the panellists to see your name. Questions will be seen only by the panellists who will read them out during presentation



# Agenda

- 1. Purpose of today
- 2. Background
- 3. Overview of Procurement
- 4. Competitive Dialogue Process
- 5. Award Methodology & Criteria
- 6. Payment Model

- 7. Contract
- 8. Health Technology Assessment
- 9. Specifications
- 10. Engagement
- 11. Next Steps



# **Purpose of today**

- Set out how the subscription based model will work
- Seek feedback on;
  - Award methodology,
  - Payment model,
  - Selection criteria, etc.



#### Background





### **Clinical context and need for action**

- Antimicrobial resistance (AMR) is one of the most pressing global challenges we face this century
- Although the UK has made progress in reducing the use of antimicrobials in humans and animals in the past five years, drug resistant bloodstream infections in humans increased by 35% from 2013-2017 in England. <u>https://www.gov.uk/government/news/antimicrobial-</u> <u>resistance-uk-launches-5-year-action-plan-and-20-year-vision</u>
- For most antimicrobials, there are few replacements or alternative products in development and even fewer that target priority pathogens
- Investment in novel antimicrobials is widely seen as commercially unattractive the high R&D costs and low returns have led to market failure



## **Market failure**

- The market for a new antimicrobial following launch may be limited in two main ways:
  - New products active against priority pathogens should be subject to strict stewardship and used on a last in line basis. In the absence of significant outbreaks of drug-resistant infections, sales could be minimal
  - New products offering alternative options to existing antibiotics, which could potentially be valuable as part of "cycling" stewardship regimes, tend not to be used due to their high cost compared to existing products (many of which are generics)

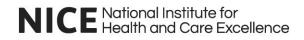


# **Current pipeline**

Only **42** new antimicrobial compounds in phase I-III clinical trials (March 2019) <u>https://www.pewtrusts.org/en/research-and-analysis/issue-briefs/2019/09/tracking-the-global-pipeline-of-antibiotics-in-development</u>

Compared with **3,876** immuno-oncology agents in development (September 2019) <a href="https://www.cancerresearch.org/scientists/immuno-oncology-landscape">https://www.cancerresearch.org/scientists/immuno-oncology-landscape</a>

There is an urgent need to increase investment





#### **Success**

- An agreed HTA valuation framework and complete value assessment of two products
- An agreed payment framework that leads to successful negotiation of payments for the two products, supporting good stewardship
- Other countries test models that, together, achieve pull incentives for antimicrobials and stimulate companies to increase investment



#### **Progress**

- July 2019: Project launched
- September 2019: Completion of stakeholder engagement on draft evaluation framework, product selection process and commercial model
- November 2019: Stakeholder webinar covering outcomes from the targeted engagement and outline procurement process
- February 2020: Project Advisory Group recruited
- **March 2020:** Draft documents for procurement process (via competitive dialogue route) shared with stakeholders
- March 2020: Webinars with companies and broader stakeholders to support market engagement



### **Overview of the Procurement**





### **Procurement Headlines**

- 2 Separate Procurements 1 for Existing Antimicrobials, 1 for New Antimicrobials
- 1 Product selected per Procurement
- 5 Key Steps: (Qualification, Product Selection, HTA, Finalise Terms, Contract Start)
- 3 Year initial contract, extendable to 10 years
- £10m per annum maximum fixed fee (Subject to HTA outcome)
- Fixed fee contingent upon achieving performance requirements (e.g. availability, stewardship, etc)
- Public Contract Regulations 2015 Competitive Dialogue process
- Final tender documents will be informed by feedback from this market engagement



# Summary Process & Timetable

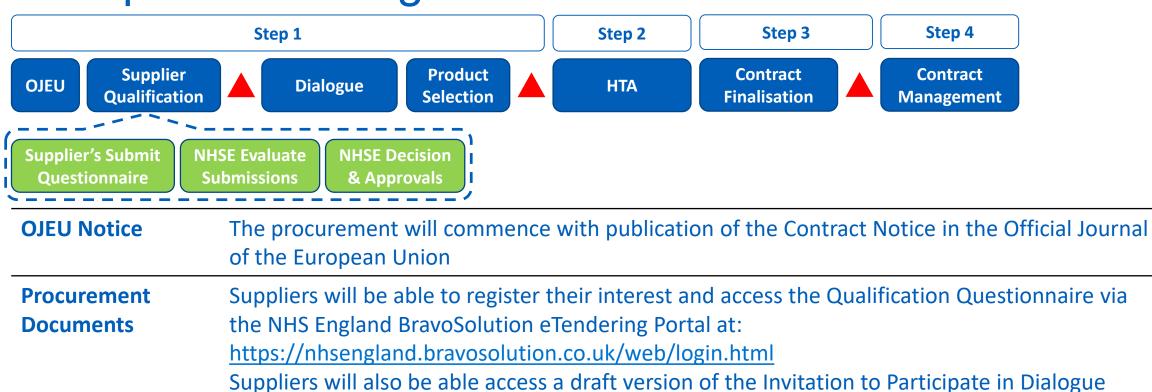


# The Competitive Dialogue Process





#### **Competitive Dialogue Process – Qualification**

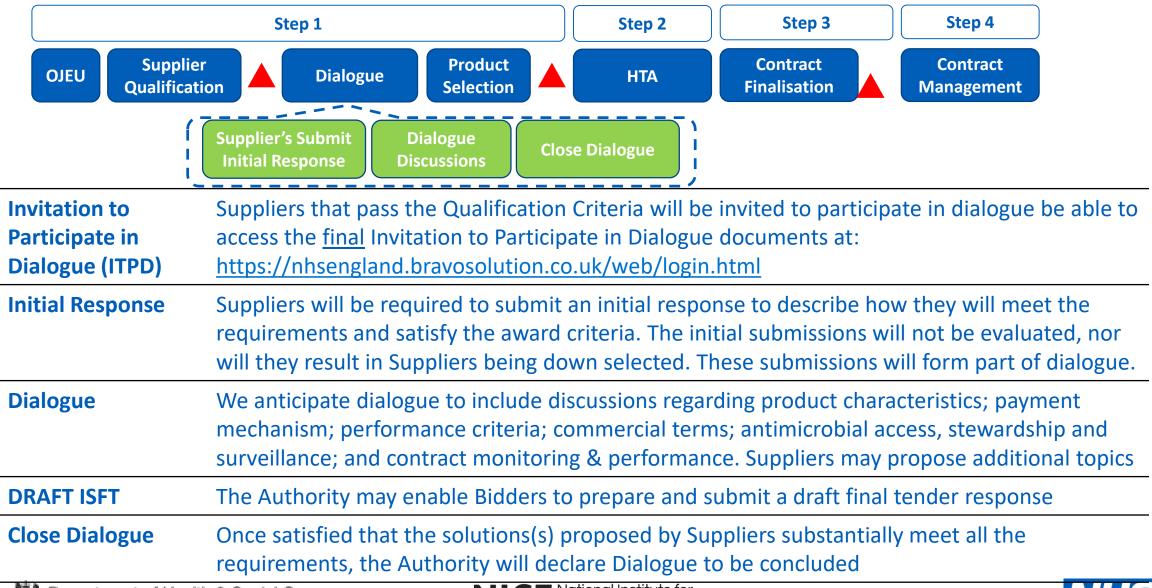


SupplierSuppliers interested in participating in the procurement must complete and submit theirQualificationresponse to the Qualification Questionnaire prior to the specified deadline (c30 days from<br/>OJEU publication)

**Decision Point** ONLY suppliers that pass the Qualification Criteria will be invited to participate in dialogue. Suppliers will be notified at this point if they have been successful or unsuccessful

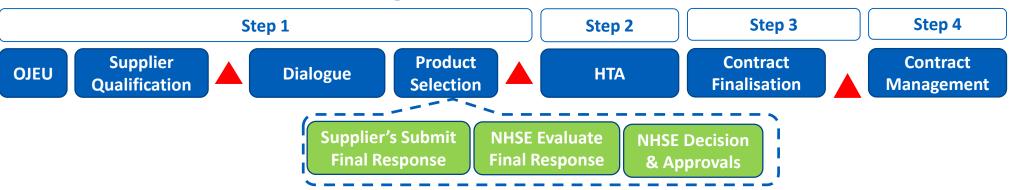


# Competitive Dialogue Process – Dialogue





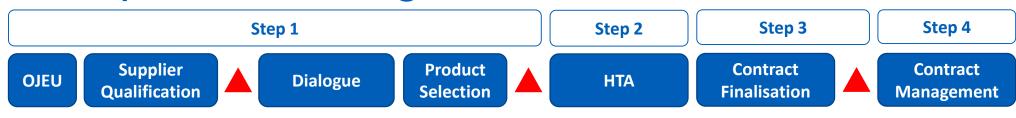
# Competitive Dialogue Process – Selection



Invitation to Submit Final Solutions (ISFS)	Once dialogue has been closed, the Authority will issue the Invitation to Submit Final Solutions The ISFS will reflect the final requirements and contractual terms against which Suppliers will prepare their final proposals.
Submit Final Response	Suppliers will typically have a couple of weeks after dialogue to finalise their proposal and to submit them via the Portal at: <u>https://nhsengland.bravosolution.co.uk/web/login.html</u>
Evaluation	The final responses will be evaluated by the Authority in accordance with the published award methodology and award criteria. The evaluation process will recommend a single Supplier to proceed to HTA and contract finalisation
Decision Point	The recommendation from the evaluation process is subject to approval via the Authority's governance processes. Suppliers will be notified of the evaluation outcome. However this does not yet constitute the award of a contract or a promise or decision to award a contract.

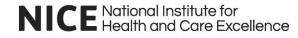


#### **Competitive Dialogue Process – HTA**



To be covered later in presentation

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#### **Competitive Dialogue Process – Finalisation**





### **Contract Management**





# Award Methodology & Criteria





# Qualification & Product Selection: Criteria

Qualification Criteria

Supplier ualificatior

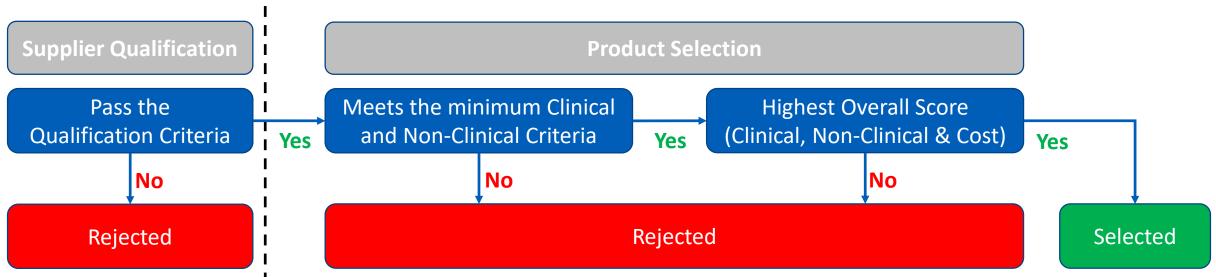
Product licence & launch dates (new & nearly new) Must be active against WHO Priority Pathogen(s) Prior commitment to Antimicrobial stewardship

Selection	Clinical Criteria	WHO Priority Pathogens included in MA Satisfies High Unmet Need in UK Performance against key resistance determinants Clinical severity of disease areas covered Degree of Novelty	
Product	Non-Clinical Criteria	Surety of supply (available when & where needed) Antimicrobial stewardship Antimicrobial surveillance	
	Cost Criteria	<= to NHSE&I Maximum Contract Value	





# Qualification and Award Methodology



Suppliers must pass the Qualification Criteria to be considered;

The criteria select products that score highest against the clinical and non-clinical criteria;

Only products that achieve a minimum clinical and non-clinical score are considered for award;

The thresholds can be reduced in defined steps if no product meets the initial thresholds;

Of those products that meet the minimum clinical and non-clinical scores, the product that achieves the highest overall score (clinical, non-clinical & cost) is selected





## **Qualification Criteria**

Qualification Criteria

Potential Supplier Information (Name etc) Bidding Model (individual organisation, etc) Grounds for mandatory exclusion Grounds for discretionary exclusion Economic & Financial Standing Technical & Professional Ability Modern Slavery Act Insurance Data Security & information Governance Licensing and Registrations Incidents and disputes Declaration

Additional

Standard

Product license & launch dates (new & nearly new) Must be active against WHO Priority Pathogen Prior commitment to Antimicrobial stewardship

#### **Existing Antimicrobial**

- Product Information
- Licensed & launched in UK between 01/01/2017 and 31/12/2018
- WHO Priority pathogens covered by licensed indications
- Prior commitment to stewardship

#### **New Antimicrobial**

- Product Information
- Licensed & launched in UK by 2021
- WHO Priority pathogens to be covered by licensed indications
- Prior commitment to stewardship



#### Product Selection Croco and Market Engagement Briefing-Final

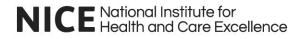
	Question	Focus	Scoring	Maximum Points
Criteria		Who Priority Pathogen	Priority 1, 2 and 3 Pathogens	11,250
		Unmet need in England	High, Medium & Low	6,000
	AMR1	Key Resistance Determinants	High, Medium, Low & None	6,000
		Disease Setting	High, Medium & Low	6,000
Product Selection Criteria	AMR2	Degree of Novelty	New Class New Pathogen Target New Mode of Action Reduced Susceptibility No Cross Resistance Additional Benefits	2,000 1,500 15,00 1,500 1,000 500
	AMR3	Surety of Supply	Confidence	5,000
	AMR4	Antimicrobial Stewardship	Minor Concerns Concerns Major Concerns	5,000
	AMR5	Antimicrobial Surveillance		5,000



If no Bidder achieves the minimum scores for the clinical and non-clinical criteria at the Final Tender stage, then the Authority may reduce the thresholds until one or more Bidders satisfy the revised threshold.

	Clinical Score Threshold	Non-Clinical Score Threshold	
Initial Threshold	Greater than or equal to 24,200 points (c67% of the Maximum Score)	Greater than or equal to 3,500 points for each of AMR3, AMR4 & AMR5	
Revised Threshold 1	Greater than or equal to 21,800 points (c60%)		
Revised Threshold 2	Greater than or equal to 19,600 points (c54%)	Average of AMR3, AMR4 & AMR5 is greater than or equal to 3,500 points	
Revised Threshold 3	Greater than or equal to 18,100 points (c50%)		
Revised Threshold 4	Less than 18,100 points		

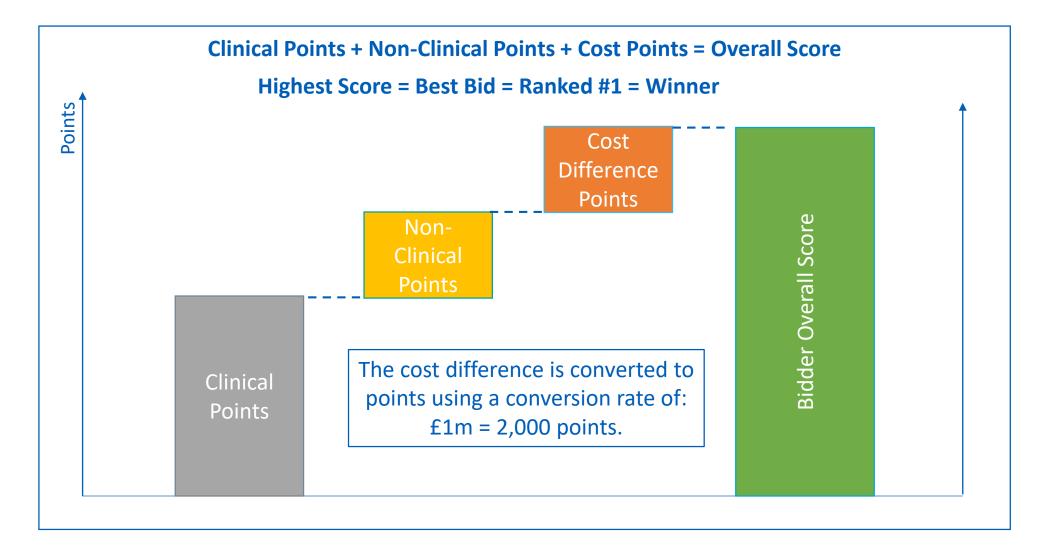
However, Bidders should note that the Authority may abandon the procurement if it considers that the offered products provide insufficient value to the NHS in England





#### **Overall Score**

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#### **Payment Model**





# Payment Model

Fixed Fee per annum

Fixed Fee is capped at lower of NHSE&I or Supplier Maximum Contract Value for term of contract

Agreed Fee is informed by outcome of NICE HTA

Fee paid is performance dependent & minus cost of supplies to hospitals

Performance Requirements (Draft):

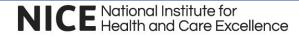
- Surety of supply
- Antimicrobial Stewardship
- Good AM manufacturing practice
- Good AM environmental practice
- Monitoring & reporting
- Antimicrobial Surveillance

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Monitoring, Reporting & Surveillance

The Agreed Contract Value, adjusted for performance and care provider purchases, will be paid in quarterly instalments.



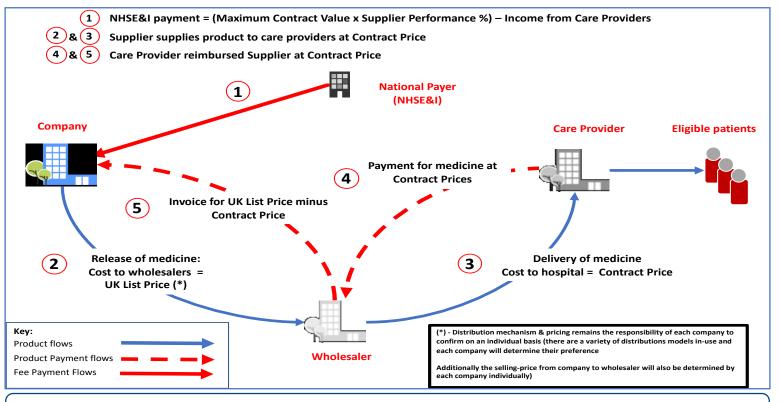


# **Payment Flows**

NHSE&I pays the supplier the agreed fee in quarterly instalments, adjusted for performance and minus any adjustments for product supplied to care providers;

The supplier provides the product to the care provider at the Invoice Price (via a wholesaler if that is their current / preferred delivery model);

The care provider reimburses the supplier (if needed via a wholesaler) at the Invoice Price



A national list price will be maintained for the purposes of international reference pricing.

An Invoice Price will be agreed with each Bidder as part of the procurement process. All NHS care providers will purchase the product at the agreed Invoice Price.



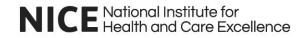
### **Contract Review**

The Authority may initiate a contract review if:

- the supplier significantly or repeatedly underperforms against the service or stewardship requirements; or
- if, in the opinion of NHSE&I, there has been a material change to the assumptions used within the HTA; or
- if, in the opinion of NHSE&I, there has been a material reduction to the unmet need addressed by the product.

A Review may result in:

- reduction of the Maximum Contract Value (subject to the agreement of the supplier);
- adjustment of the performance requirements or the performance criteria;
- adjustment of the data capture and reporting requirements;
- termination of the contract.





## Performance Criteria

Stewardship	No promotion of the product No sales team incentives
Surety of Supply	Product delivered with [xx] [hours][days] of order
Manufacturing Practice	[AMR Industry Alliance – Making Antibiotics Responsibly audit report indicates the supplier / their supply chain has not satisfied the minimum expectations] Initial Report to be provided by the Supplier to the Authority within first contract year
Environmental Practice	[AMR Industry Alliance – Making Antibiotics Responsibly audit report indicates the supplier / their supply chain has not satisfied the minimum expectations] Initial Report to be provided by the Supplier to the Authority within first contract year
Monitoring & Reporting	Monthly Report Deliveries Supply chain status Key risks & issues together with proposed mitigations
Antimicrobial Surveillance	[Quarterly] Surveillance Report



#### Contract



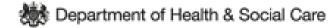


#### Contract

Form	NHS Standard Contract for the Supply of Goods and the Provision of Services (Contract version)
Parties	NHS England and the Supplier
Key Provisions	<ul> <li>The Contract will contain (amongst other 'local' terms):</li> <li>bespoke payment provisions;</li> <li>obligations on the Supplier to deliver the antimicrobial included in their Final Offer;</li> <li>obligations on the Supplier to comply with the performance requirements;</li> </ul>
	<ul> <li>obligations on the Supplier to comply with the specifications; and</li> <li>the standard Commercial Medicines Unit (CMU) provisions regarding the supply of pharmaceuticals;</li> </ul>
Duration	Initial period of 3 years with the Authority having the option to extend for a period, or periods up to a total of 10 years
Contract Start	1 April 2022
Transition	In the event that contracts are awarded as a result of this procurement, then any existing framework agreements for the supply of the antimicrobial will be terminated.



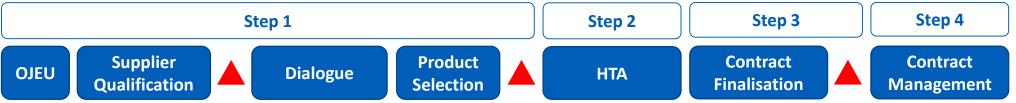
# Health Technology Assessment (HTA)







# Proposed NICE HTA evaluation process and timelines



- Process based on Multiple Technology Appraisal process •
- Special committee: •
  - Approximately 10 members from current NICE committees with 6 additional members with specialist expertise
  - Chair: Gary McVeigh
  - Vice-chair: Amanda Adler
- Assessment Group report will be prepared by EEPRU •
- Output of NICE process will be a guidance document used to inform final contract negotiations







#### 2020-03-25 NHS AMR Market Engagement Briefing-Final

#### **Evaluation process**

Completion of procurement process

Invitation to participate

Assessment group report protocol agreed including stakeholder information meeting

Assessment group report

Assessment group report consultation

Pre-meeting briefing

Committee preparation

Appraisal committee meeting

Evaluation document produced

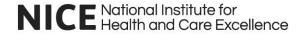
Final contract negotiation

Final guidance publication





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### Proposed timelines in weeks

- Draft scope developed & Stakeholders identified confirmed
- Scoping workshop with EEPRU, NICE and the company to discuss the draft scope
- Final scope developed using consultation comments & workshop discussions, ready for invite
- Invite submissions / start of appraisal
- Stakeholder Information Meeting
- Submission deadline

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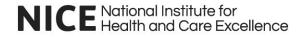
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- HTA Report deadline (from EEPRU)
- Papers sent to committee
- Committee meeting
- NICE Guidance document





# **Outline Specifications**

#### Surety of Supply

- Delivery within x [hours][days] of order
- Commercial Medicines Unit (CMU) Contract Technical Specification for Licensed Medicines for the NHS

#### **Antimicrobial Stewardship**

- No product promotion
- No sales incentives
- Educational materials
- Evidence of complying with "AMR Industry Alliance – Making Antibiotics Responsibly"

#### **Antimicrobial Surveillance**

- Monitor usage
- Monitor emergence of resistance

We are keen to understand what suppliers and stakeholders would like and expect to see in these specifications

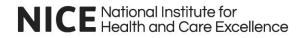
Please include any suggestions within your feedback





### Market Engagement







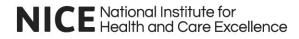
## Market Engagement

Share & Present Proposed Approach	Feedback From	Finalise Procurement Documents	Final Approval
NHSE&I's Maximum Contract Value; Procurement process and timeline; Selection Process; Qualification and Award Criteria; Payment Model; Service & Stewardship Specifications; Commercial Terms.	AMR PAG Suppliers Stakeholders	Why are we doing this What is important to us How we will make our decision How long will it take How & what suppliers will be paid What are the terms & conditions.	NHSE&I & NICE



#### **Next Steps**







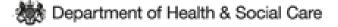


1. Provide clarification question via <u>ABpaymentmodels@nice.nhs.uk</u>.

2. Provide feedback on the form provided by 13:00 on Friday 17 April 2020 via <u>ABpaymentmodels@nice.nhs.uk</u>.

Suppliers do NOT need to register interest or prepare responses yet

The OJEU notice to initiate the procurement and calling for expressions of interest will be launched in May – subject to the feedback received during market engagement





#### Questions





