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## URGENT

16/9/03

Dear Colleague,

RE: The rollout of recombinant factor VIII/IX to adult patients ( $\geq 23$  yrs) in England.

I am writing to you as agreed at yesterday's meeting of the UKHCDO Advisory Committee with an urgent request for further treatment data.

In order to place the contracts for recombinant factor VIII/IX and to calculate the financial allocation to each PCT on behalf of DoH, we require that you indicate which of the recombinant products (Aventis, Baxter, Bayer and Wyeth) you would choose *for each eligible patient*. Eligible patients are patients with haemophilia A and B, in England,  $\geq 23$  yrs of age, changing from pdVIII to rVIII and not already treated with rVIII. The contract is binding for three years, once agreed, and so it is imperative that we get it right at this stage.

We need this information as soon as possible and ***no later than mid-day on this Friday, 19/9/2003***. To help you respond on this very short timescale we attach: -

- a.) Your submitted list of eligible patients with two columns for your first and second product choice for each patient.
- b.) A summary of the received tenders and an accompanying guidance note.  
***This information is confidential and should not be shared with industry or any outside agency***
- c.) An approximate option appraisal giving an estimate of the age range which may be started in years 1-2 according to the proportions of the contract awarded to each manufacturer. This is not a final estimate.

The funding available over three years is as follows: -

2003/4	£13.7M.	2004/5	£21.3M .	2005/6	£54.0M
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Given the slippage in 2003/4, all patients starting during 2003-5 are likely to start in October 2003 with no further new patients starting until the beginning of the financial year 2005/6 when the remaining patients should all start.

In order to guarantee that the rollout takes place as quickly as possible and remains within budget in the third year (including an allocation for inhibitor patients) we need to try to optimise the benefits that come from the competitive tendering process. Clearly, if less expensive products are used, we can roll out the process more rapidly with more patients benefiting in the first two years and more funding available for inhibitor management in the third. Whilst this would favour those manufacturers offering the most competitive price, it is also important to preserve some diversity in the marketplace, particularly given the history of interruptions in supply over the years. It is particularly important, if you choose either of the more expensive products (Baxter and Wyeth) that you indicate a 2<sup>nd</sup> choice from Aventis and Bayer. This will help us assemble the data when we try to reconcile treater choice whilst remaining within budget throughout the rollout process.

We recognise that some smaller centres may wish to deal with only one or two suppliers but we would strongly encourage larger centres to consider placing their choice with at least two or three manufacturers in such a way as to optimise cost whilst ensuring security of supply over time.

This data will be used to calculate the financial allocation to each PCT. The financial allocation for each PCT will be uplifted in October to permit a **target start-date for the rollout of 1/10/03**. This data will also enable us to finalise the age-range of patients to start recombinant factor VIII/IX this October. This age range will be the same for both haemophilia A and B.

The data should be sent, preferable by e-mail or, if necessary, by fax to Lynne Dewhurst, the National Haemophilia Database Administrative Assistant on

fax:  Enquiries should be directed to Lynne on , or to Dr CRM Hay , .

Yours sincerely

Professor Frank GH Hill  
Chairman UKHCDO

Examples of Estimated Treatable Age-Range according to Proportion of  
Contract Awarded to each Manufacturer:

This Estimate makes the following assumptions: -

- a.) Price difference calculated assuming an average price for pdVIII/IX of 29p/IU\*.
  - b.) Only price difference + VAT is funded\*.
  - c.) VAT is included. Home delivery deals are for local negotiation\*.
  - d.) Expected 50% increase in units of IX used associated with change to Benefix\*.
  - e.) 1 month stock carrying over from year 1-2.
  - f.) Volume discount according to volume assumed by each percentage share.
  - g.) Year two Baxter discount as described.
- \* Agreed with DoH.

<u>Proportions:</u>	<u>Age-Range Yrs 1-2.</u>
25% for each manufacturer	Ages 23-44 years.
50% Bayer, 50% Aventis	Ages 23-54 years.
Wyeth/Baxter/Aventis/Bayer	
10%/20%/30%/40%	Ages 23-48 years