

## Integrated Impact Assessment Report for Clinical Commissioning Policies

<b>Policy Reference Number</b>	1622		
<b>Policy Title</b>	Lung Volume Reduction for Severe Emphysema Proposal <b><u>for routine commission</u></b> (ref A3.1)		
<b>Lead Commissioner</b>	Kathy Blacker	<b>Clinical Lead D</b>	David Waller
<b>Finance Lead</b>	Craig Charlton	<b>Analytical Lead</b>	Jacque Low

### Integrated Impact Assessment – Index

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#### About this Impact Assessment: instructions for completion and explanatory notes

- Each section is divided into themes.
- Each theme sets out a number of questions.
- All questions are answered by selecting a drop down option or including free text.
- Free text boxes are provided to enable succinct relevant commentary to be added which explains the rationale for response or assumption. Please limit responses to 3 sentences of explanatory text.
- Data in this document is either drawn from one of the relevant policy documents or a source for the information is provided.
- Where assumptions are included where data is not available, this is specified.

## Section A - Activity Impact

### A1 Current Patient Population & Demography / Growth

A1.1 Prevalence of the disease/condition.	1200 patients meeting the criteria for LVR out of the population with emphysema <i>Source: Policy Proposition section 6</i>						
A1.2 Number of patients currently eligible for the treatment according to the proposed policy commissioning criteria.	1200 <i>Source: Policy Proposition section 6</i> <b>required</b> Please specify <a href="#">Click here to enter text.</a>						
A1.3 Age group for which the treatment is proposed according to the policy commissioning criteria.	<b><u>Adults</u></b> Please specify <a href="#">Click here to enter text.</a>						
A1.4 Age distribution of the patient population eligible according to the proposed policy commissioning criteria	enter number. if relevant <i>Source: required</i> Please specify <a href="#">Click here to enter text.</a>						
A1.5 How is the population currently distributed geographically?	<b><u>Evenly</u></b> If unevenly, estimate regional distribution by %: <table border="1"> <tr> <td>North</td> <td>enter %</td> </tr> <tr> <td>Midlands &amp; East</td> <td>enter %</td> </tr> <tr> <td>London</td> <td>enter %</td> </tr> </table>	North	enter %	Midlands & East	enter %	London	enter %
North	enter %						
Midlands & East	enter %						
London	enter %						

	<table border="1"> <tr> <td>South</td><td>enter %</td></tr> </table> <p>Source: Policy Proposition section 6</p> <p>Please specify</p> <p><a href="#">Click here to enter text.</a></p>	South	enter %								
South	enter %										
<b>A2 Future Patient Population &amp; Demography</b>											
A2.1 Projected changes in the disease/condition epidemiology, such as incidence or prevalence (prior to applying the new policy) in 2, 5, and 10 years?	<p><b><u>Other - detail below</u></b></p> <p>As per ONS growth</p> <p>Source: Policy Proposition section 6</p>										
A2.2 Are there likely to be changes in demography of the patient population and would this impact on activity/outcomes?	<p><b><u>No</u></b></p> <p>Please specify</p> <p>Source: Policy Proposition section 6/other</p>										
A2.3 Expected net increase or decrease in the number of patients who will be eligible for the service, according to the proposed service specification commissioning criteria, per year in years 2-5 and 10?	<table border="1"> <tr> <td>YR2 +/-</td><td>3</td></tr> <tr> <td>YR3 +/-</td><td>6</td></tr> <tr> <td>YR4 +/-</td><td>9</td></tr> <tr> <td>YR5 +/-</td><td>16</td></tr> <tr> <td>YR10 +/-</td><td>0</td></tr> </table> <p>Source: Service specification proposition section 3.1</p> <p><b><u>Yes</u></b></p>	YR2 +/-	3	YR3 +/-	6	YR4 +/-	9	YR5 +/-	16	YR10 +/-	0
YR2 +/-	3										
YR3 +/-	6										
YR4 +/-	9										
YR5 +/-	16										
YR10 +/-	0										

Are these numbers in line with ONS growth assumptions for the age specific population? If not please justify the growth assumptions made.	Click here to enter text.
<b>A3 Activity</b>	
A3.1 What is the purpose of new policy?	<p><b><u>Confirm routine commissioning position of an additional new treatment</u></b></p> <p>Please specify</p> <p>No existing policy</p>
A3.2 What is the annual activity associated with the existing pathway for the eligible population?	<p>300</p> <p>Source: Click here to enter text.</p> <p>Please specify</p> <p>NCDR extracts</p>
A3.3 What is the estimated annual activity associated with the proposed policy proposition pathway for the eligible population?	<p>1200</p> <p>Source: financial modelling of clinical view</p> <p>Please specify</p> <p>Assume growth of 180 patients per year for first five years before reaching steady state Areas with well-established pathways to LVR MDTs have not seen significant growth in intervention rates over the last few years. The growth is likely to occur in areas that need these pathways and processes establishing</p>
A3.4 What is the estimated annual activity associated with the next best alternative comparator pathway for the eligible population? If the only alternative is the existing pathway, please state 'not applicable' and move to A4.	<p>Not applicable</p> <p>Source: <i>required</i></p> <p>Please specify</p>

	Click here to enter text.
<b>A4 Existing Patient Pathway</b>	
<b>A4.1 Existing pathway:</b> Describe the relevant currently routinely commissioned: <ul style="list-style-type: none"> <li>• Treatment or intervention</li> <li>• Patient pathway</li> <li>• Eligibility and/or uptake estimates.</li> </ul>	On the current pathway 300 patients receiving LVR are split 2/3 surgical approach and 1/3 EBV  Source: <i>NCDR</i>
A4.2. What are the current treatment access and stopping criteria?	Assessment by LVR Multi-Disciplinary Team into the service. Treatment stopping is completion of treatment
A4.3 What percentage of the total eligible population is expected to: <ul style="list-style-type: none"> <li>a) Be clinically assessed for treatment</li> <li>b) Be considered to meet an exclusion criteria following assessment</li> <li>c) Choose to initiate treatment</li> <li>d) Comply with treatment</li> <li>e) Complete treatment?</li> </ul>	If not known, please specify Click here to enter text. <ul style="list-style-type: none"> <li>a) 100%</li> <li>b) 66%</li> <li>c) 100%</li> <li>d) 100%</li> <li>e) 100%</li> </ul> Source: <i>Clinical experience</i>
<b>A5 Comparator (next best alternative treatment) Patient Pathway</b> (NB: comparator/next best alternative does not refer to current pathway but to an alternative option)	
<b>A5.1 Next best comparator:</b> Is there another 'next best' alternative treatment which is a relevant comparator?	<b><u>No</u></b>

<p><i>If yes, describe relevant</i></p> <ul style="list-style-type: none"> <li>• <i>Treatment or intervention</i></li> <li>• <i>Patient pathway</i></li> <li>• <i>Actual or estimated eligibility and uptake</i></li> </ul>	<p>If yes, <a href="#">Click here to enter text.</a>  Source: <i>required</i></p>
<p>A5.2 What percentage of the total eligible population is estimated to:</p> <ul style="list-style-type: none"> <li>a) Be clinically assessed for treatment</li> <li>b) Be considered to meet an exclusion criteria following assessment</li> <li>c) Choose to initiate treatment</li> <li>d) Comply with treatment</li> <li>e) Complete treatment?</li> </ul>	<p>Not applicable</p> <ul style="list-style-type: none"> <li>a) enter %</li> <li>b) enter %</li> <li>c) enter %</li> <li>d) enter %</li> <li>e) enter %</li> </ul> <p>Source: <i>required</i></p>
<p><b>A6 New Patient Pathway</b></p>	
<p>A6.1 What percentage of the total eligible population is expected to:</p> <ul style="list-style-type: none"> <li>a) Be clinically assessed for treatment</li> <li>b) Be considered to meet an exclusion criteria following assessment</li> <li>c) Choose to initiate treatment</li> <li>d) Comply with treatment</li> <li>e) Complete treatment?</li> </ul>	<p>If not known, please specify <a href="#">Click here to enter text.</a></p> <ul style="list-style-type: none"> <li>a) 100%</li> <li>b) 0</li> <li>c) 100%</li> <li>d) 100%</li> <li>e) 100%</li> </ul> <p>Source: <i>Clinical experience</i></p>
<p>A6.2 Specify the nature and duration of the proposed new treatment or intervention.</p>	<p><b><u>One off</u></b>  For time limited treatments, specify frequency and/or duration.  <a href="#">Click here to enter text.</a></p>

Source: required

## A7 Treatment Setting

A7.1 How is this treatment delivered to the patient?

Select all that apply:

Emergency/Urgent care attendance	<input type="checkbox"/>
Acute Trust: inpatient	<input checked="" type="checkbox"/>
Acute Trust: day patient	<input type="checkbox"/>
Acute Trust: outpatient	<input checked="" type="checkbox"/>
Mental Health provider: inpatient	<input type="checkbox"/>
Mental Health provider: outpatient	<input type="checkbox"/>
Community setting	<input type="checkbox"/>
Homecare	<input type="checkbox"/>
Other	<input type="checkbox"/>

Please specify:

[Click here to enter text.](#)

A7.2 What is the current number of contracted providers for the eligible population by region?

Craig to check contracted providers

NORTH	
MIDLANDS & EAST	
LONDON	
SOUTH	



<p>A7.3 Does the proposition require a change of delivery setting or capacity requirements?</p>	<p><b>No</b>  Please specify:  <a href="#">Click here to enter text.</a>  Source: <i>required</i></p>																					
<p><b>A8 Coding</b></p>																						
<p>A8.1 Specify the datasets used to record the new patient pathway activity.</p> <p>*expected to be populated for all commissioned activity</p>	<p><i>Select all that apply:</i></p> <table border="1"> <tr> <td>Aggregate Contract Monitoring *</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Patient level contract monitoring</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Patient level drugs dataset</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Patient level devices dataset</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Devices supply chain reconciliation dataset</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Secondary Usage Service (SUS+)</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Mental Health Services DataSet (MHSDS)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>National Return**</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Clinical Database**</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Other**</td> <td><input type="checkbox"/></td> </tr> </table> <p>**If National Return, Clinical database or other selected, please specify:  SCTS- NICOR, UK LVR Registry</p>		Aggregate Contract Monitoring *	<input checked="" type="checkbox"/>	Patient level contract monitoring	<input type="checkbox"/>	Patient level drugs dataset	<input type="checkbox"/>	Patient level devices dataset	<input type="checkbox"/>	Devices supply chain reconciliation dataset	<input type="checkbox"/>	Secondary Usage Service (SUS+)	<input checked="" type="checkbox"/>	Mental Health Services DataSet (MHSDS)	<input type="checkbox"/>	National Return**	<input type="checkbox"/>	Clinical Database**	<input checked="" type="checkbox"/>	Other**	<input type="checkbox"/>
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Other**	<input type="checkbox"/>																					
<p>A8.2 Specify how the activity related to the new patient pathway will be identified.</p>	<p><i>Select all that apply:</i></p> <hr/>																					

	<table border="1"> <tr> <td data-bbox="1084 97 1749 156">OPCS v4.8</td> <td data-bbox="1756 97 1841 156"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 156 1749 215">ICD10</td> <td data-bbox="1756 156 1841 215"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 215 1749 274">Treatment function code</td> <td data-bbox="1756 215 1841 274"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 274 1749 333">Main Speciality code</td> <td data-bbox="1756 274 1841 333"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 333 1749 392">HRG</td> <td data-bbox="1756 333 1841 392"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 392 1749 451">SNOMED</td> <td data-bbox="1756 392 1841 451"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1084 451 1749 544">Clinical coding / terming methodology used by clinical profession</td> <td data-bbox="1756 451 1841 544"><input type="checkbox"/></td> </tr> </table>	OPCS v4.8	<input checked="" type="checkbox"/>	ICD10	<input checked="" type="checkbox"/>	Treatment function code	<input checked="" type="checkbox"/>	Main Speciality code	<input checked="" type="checkbox"/>	HRG	<input checked="" type="checkbox"/>	SNOMED	<input checked="" type="checkbox"/>	Clinical coding / terming methodology used by clinical profession	<input type="checkbox"/>
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Clinical coding / terming methodology used by clinical profession	<input type="checkbox"/>														
<p><b>A8.3 Identification Rules for Drugs:</b> How are drug costs captured?</p>	<p><b><u>Not applicable</u></b> If the drug has already been specified in the current NHS England Drug List please specify drug name and drug indication: <a href="#">Click here to enter text.</a> If the drug has NOT already been specified in the current NHS England Drug List please give details of action required and confirm that this has been discussed with the pharmacy lead: <a href="#">Click here to enter text.</a></p>														
<p><b>A8.4 Identification Rules for Devices:</b> How are device costs captured?</p>	<p><b><u>Not applicable</u></b> If the device is covered by an existing category of HCTED please specify the Device Category (as per the National Tariff Payment System Guidance). <a href="#">Click here to enter text.</a> If the device is not excluded from Tariff <b>nor</b> covered within existing National or Local prices please specify details of action required and confirm that this has been discussed with the HCTED team. <a href="#">Click here to enter text.</a></p>														

<b>A8.5 Identification Rules for Activity:</b> How are activity costs captured?	<u><b>Already correctly captured by an existing specialised service line (NCBPS code within the PSS Tool)</b></u> NCBPS29B ADULT THORACIC SURGERY SERVICES: COMPLEX THORACIC SURGERY						
<b>A9 Monitoring</b>							
<b>A9.1 Contracts</b> Specify any new or revised data flow or data collection requirements, needed for inclusion in the NHS Standard Contract Information Schedule.	<u><b>Yes - population of clinical databases</b></u> Please specify SCTS- NICOR, UK LVR Registry						
<b>A9.2 Excluded Drugs and Devices (not covered by the Zero Cost Model)</b> For treatments which are tariff excluded drugs or devices not covered by the Zero Cost Model, specify the pharmacy or device monitoring required, for example reporting or use of prior approval systems.	<i>Select all that apply:</i> <table border="1" data-bbox="1088 711 1597 890"> <tr> <td>Drugs or Device MDS</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Blueteq</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other prior approval</td> <td><input type="checkbox"/></td> </tr> </table> Please specify: <a href="#">Click here to enter text.</a>	Drugs or Device MDS	<input type="checkbox"/>	Blueteq	<input type="checkbox"/>	Other prior approval	<input type="checkbox"/>
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Blueteq	<input type="checkbox"/>						
Other prior approval	<input type="checkbox"/>						
<b>A9.3 Business intelligence</b> Is there potential for duplicate reporting?	<u><b>No</b></u> If yes, please specify mitigation: <a href="#">Click here to enter text.</a>						
<b>A9.4 Contract monitoring</b> Is this part of routine contract monitoring?	<u><b>Yes</b></u> If yes, please specify contract monitoring requirement: <a href="#">Click here to enter text.</a>						

<p><b>A9.5 Dashboard reporting</b></p> <p>Specify whether a dashboard exists for the proposed intervention?</p>	<p><b><u>No</u></b></p> <p>If yes, specify how routine performance monitoring data will be used for dashboard reporting.</p> <p><a href="#">Click here to enter text.</a></p> <p>If no, will one be developed?</p> <p>Yes</p>
<p><b>A9.6 NICE reporting</b></p> <p>Are there any directly applicable NICE or equivalent quality standards which need to be monitored in association with the new policy?</p>	<p><b><u>No</u></b></p> <p>If yes, specify how performance monitoring data will be used for this purpose.</p> <p><a href="#">Click here to enter text.</a></p>
<p><b>Section B - Service Impact</b></p>	
<p><b>B1 Service Organisation</b></p>	
<p>B1.1 Describe how the service is currently organised? (i.e. tertiary centres, networked provision etc.)</p>	<p>Tertiary centres – thoracic services with respiratory services through a joint MDT assessment</p> <p><i>Source: Policy proposition</i></p>
<p>B1.2 Will the proposition change the way the commissioned service is organised?</p>	<p><b><u>Yes</u></b></p> <p>Please specify:</p> <p>In some areas changes may be required to ensure joint MDT is in place</p> <p><i>Source: Policy proposition</i></p>
<p>B1.3 Will the proposition require a new approach to the organisation of care?</p>	<p><b><u>No change to delivery of care</u></b></p> <p>Please specify:</p> <p><a href="#">Click here to enter text.</a></p>

## B2 Geography & Access

B2.1 Where do current referrals come from?

Select all that apply:

GP	<input type="checkbox"/>
Secondary care	<input checked="" type="checkbox"/>
Tertiary care	<input type="checkbox"/>
Other	<input type="checkbox"/>

Please specify:

[Click here to enter text.](#)

B2.2 What impact will the new policy have on the sources of referral?

**No impact**

Please specify:

[Click here to enter text.](#)

B2.3 Is the new policy likely to improve equity of access?

**Increase**

Please specify:

Currently there is geographical inequity

Source: *Equalities Impact Assessment*

B2.4 Is the new policy likely to improve equality of access and/or outcomes?

**Increase**

Please specify:

Address geographical inequity

Source: *Equalities Impact Assessment*

B3 Implementation	
B3.1 Will commissioning or provider action be required before implementation of the proposition can occur?	<p><b><u>Contract action</u></b></p> <p>Please specify:</p> <p>In some areas patient pathways to and from LVR MDT may need confirmation</p>
B3.2 <b>Time to implementation:</b> Is a lead-in time required prior to implementation?	<p><b><u>No - go to B3.4</u></b></p> <p>If yes, specify the likely time to implementation: <a href="#">Enter text</a></p>
B3.3 <b>Time to implementation:</b> If lead-in time is required prior to implementation, will an interim plan for implementation be required?	<p><a href="#">Choose an item.</a></p> <p>If yes, outline the plan:</p> <p><a href="#">Click here to enter text.</a></p>
B3.4 Is a change in provider physical infrastructure required?	<p><b><u>No</u></b></p> <p>Please specify:</p> <p>Use of existing theatres and bronchoscopy facilities</p>
B3.5 Is a change in provider staffing required?	<p><b><u>No</u></b></p> <p>Please specify:</p> <p><a href="#">Click here to enter text.</a></p>
B3.6 Are there new clinical dependency and/or adjacency requirements that would need to be in place?	<p><b><u>Yes</u></b></p> <p>Please specify:</p> <p>Thoracic services and respiratory services must work together to establish joint MDT for appropriate patient selection</p>

B3.7 Are there changes in the support services that need to be in place?	<p><b><u>No</u></b>  Please specify:  <a href="#">Click here to enter text.</a></p>																								
B3.8 Is there a change in provider and/or inter-provider governance required? (e.g. ODN arrangements / prime contractor)	<p><b><u>Yes</u></b>  Please specify: Thoracic and respiratory services will need to establish governance arrangements. They may not always be the same provider.</p>																								
B3.9 Is there likely to be either an increase or decrease in the number of commissioned providers? If yes, specify the current and estimated number of providers required in each region	<p><b><u>No change</u></b>  Please complete table:</p> <table border="1" data-bbox="1088 555 2013 999"> <thead> <tr> <th>Region</th> <th>Current no. of providers</th> <th>Future State expected range</th> <th>Provisional or confirmed</th> </tr> </thead> <tbody> <tr> <td>North</td> <td></td> <td></td> <td><a href="#">select</a></td> </tr> <tr> <td>Midlands &amp; East</td> <td></td> <td></td> <td><a href="#">select</a></td> </tr> <tr> <td>London</td> <td></td> <td></td> <td><a href="#">select</a></td> </tr> <tr> <td>South</td> <td></td> <td></td> <td><a href="#">select</a></td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td><a href="#">select</a></td> </tr> </tbody> </table> <p>Please specify:  <a href="#">Click here to enter text.</a></p>	Region	Current no. of providers	Future State expected range	Provisional or confirmed	North			<a href="#">select</a>	Midlands & East			<a href="#">select</a>	London			<a href="#">select</a>	South			<a href="#">select</a>	Total			<a href="#">select</a>
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South			<a href="#">select</a>																						
Total			<a href="#">select</a>																						
B3.10 Specify how revised provision will be secured by NHS England as the responsible commissioner.	<p><i>Select all that apply:</i></p> <table border="1" data-bbox="1088 1193 1998 1313"> <tbody> <tr> <td>Publication and notification of new policy</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Market intervention required</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Publication and notification of new policy	<input type="checkbox"/>	Market intervention required	<input type="checkbox"/>																				
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	Competitive selection process to secure increase or decrease provider configuration		<input type="checkbox"/>					
	Price-based selection process to maximise cost effectiveness		<input type="checkbox"/>					
	Any qualified provider		<input type="checkbox"/>					
	National Commercial Agreements e.g. drugs, devices		<input type="checkbox"/>					
	Procurement		<input type="checkbox"/>					
	Other		<input checked="" type="checkbox"/>					
	Please specify: <a href="#">Click here to enter text.</a>							
<b>B4 Place-based Commissioning</b>								
B4.1 Is this service currently subject to, or planned for, place-based commissioning arrangements? (e.g. future CCG lead, devolved commissioning arrangements, STPs)	<b><u>No</u></b> Please specify: <a href="#">Click here to enter text.</a>							
<b>Section C - Finance Impact</b>								
<b>C1 Tariff/Pricing</b>								
C1.1 How is the service contracted and/or charged? Only specify for the relevant section of the patient pathway	<i>Select all that apply:</i> <table border="1" data-bbox="1088 1222 2130 1374"> <tr> <td data-bbox="1088 1222 1245 1318" rowspan="2"><b>Drugs</b></td> <td data-bbox="1245 1222 2040 1318">Not separately charged – part of local or national tariffs</td> <td data-bbox="2040 1222 2130 1318"><input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="1245 1318 2040 1374">Excluded from tariff – pass through</td> <td data-bbox="2040 1318 2130 1374"><input type="checkbox"/></td> </tr> </table>			<b>Drugs</b>	Not separately charged – part of local or national tariffs	<input checked="" type="checkbox"/>	Excluded from tariff – pass through	<input type="checkbox"/>
<b>Drugs</b>	Not separately charged – part of local or national tariffs	<input checked="" type="checkbox"/>						
	Excluded from tariff – pass through	<input type="checkbox"/>						



		Excluded from tariff - other	<input type="checkbox"/>	
	<b>Devices</b>	Not separately charged – part of local or national tariffs	<input checked="" type="checkbox"/>	
		Excluded from tariff (excluding ZCM) – pass through	<input type="checkbox"/>	
		Excluded from tariff (excluding ZCM) – other	<input type="checkbox"/>	
		Via Zero Cost Model	<input type="checkbox"/>	
	<b>Activity</b>	Paid entirely by National Tariffs	<input checked="" type="checkbox"/>	
		Paid entirely by Local Tariffs	<input type="checkbox"/>	
		Partially paid by National Tariffs	<input type="checkbox"/>	
		Partially paid by Local Tariffs	<input type="checkbox"/>	
		Part/fully paid under a Block arrangement	<input type="checkbox"/>	
		Part/fully paid under Pass-Through arrangements	<input type="checkbox"/>	
		Part/fully paid under Other arrangements	<input type="checkbox"/>	
<b>C1.2 Drug Costs</b> Where not included in national or local tariffs, list each drug or combination, dosage, quantity, <b>list</b> price including VAT if applicable and any other key information e.g. Chemotherapy Regime.  NB discounted prices or local prices must not be included as these are subject to commercial confidentiality and must not be disclosed.		N/A		
<b>C1.3 Device Costs</b>		N/A		

<p>Where not included in national or local tariff, list each element of the excluded device, quantity, <b>list or expected</b> price including VAT if applicable and any other key information.</p> <p>NB: Discounted prices or local prices must not be included as these are subject to commercial confidentiality and must not be disclosed.</p>															
<p><b>C1.4 Activity Costs covered by National Tariffs</b></p> <p>List all the HRG codes, HRG descriptions, national tariffs (excluding MFF), volume and other key costs (e.g. specialist top up %)</p>	<p>Surgical procedures would be covered under the following HRGs</p> <table border="1" data-bbox="1086 475 2105 791"> <thead> <tr> <th data-bbox="1086 475 1973 552">HRG &amp; Description</th> <th data-bbox="1973 475 2105 552">2018/19 Tariff</th> </tr> </thead> <tbody> <tr> <td data-bbox="1086 552 1973 592">TBA</td> <td data-bbox="1973 552 2105 592">TBA</td> </tr> <tr> <td data-bbox="1086 592 1973 632"></td> <td data-bbox="1973 592 2105 632"></td> </tr> <tr> <td data-bbox="1086 632 1973 671"></td> <td data-bbox="1973 632 2105 671"></td> </tr> <tr> <td data-bbox="1086 671 1973 711"></td> <td data-bbox="1973 671 2105 711"></td> </tr> <tr> <td data-bbox="1086 711 1973 751"></td> <td data-bbox="1973 711 2105 751"></td> </tr> <tr> <td data-bbox="1086 751 1973 791"></td> <td data-bbox="1973 751 2105 791"></td> </tr> </tbody> </table>	HRG & Description	2018/19 Tariff	TBA	TBA										
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TBA	TBA														
<p><b>C1.5 Activity Costs covered by Local Tariff</b></p> <p>List all the HRGs (if applicable), HRG or local description, estimated average tariff, volume and any other key costs. Also indicate whether the Local Tariff(s) is/are newly proposed or established and if newly proposed how it has been derived, validated and tested.</p>	<p>N/A</p>														
<p><b>C1.6 Other Activity Costs not covered by National or Local Tariff</b></p> <p>Include descriptions and estimates of all key costs.</p>	<p>N/A</p>														
<p><b>C1.7</b> Are there any prior approval mechanisms required either during implementation or permanently?</p>	<p><b><u>No</u></b></p>														

		Please specify: <a href="#">Click here to enter text.</a>	
<b>C2 Average Cost per Patient</b>			
<p>C2.1 What is the estimated cost per patient to NHS England, in years 1-5, including follow-up where required?</p>     <p>Are there any changes expected in year 6-10 which would impact the model?</p>	YR1	£TBC	
	YR2	£TBC	
	YR3	£TBC	
	YR4	£TBC	
	YR5	£TBC	
	<p>No</p> <p>If yes, please specify:</p> <p><a href="#">Click here to enter text.</a></p>		
<b>C3 Overall Cost Impact of this Policy to NHS England</b>			
C3.1 Specify the budget impact of the proposal on NHS England in relation to the relevant pathway.	<p><b><u>Cost pressure</u></b></p> <p>Please specify:</p> <p>£TBC</p>  <p><a href="#">Click here to enter text.</a></p>		
C3.2 If the budget impact on NHS England cannot be identified set out the reasons why this cannot be measured.	<p><a href="#">Click here to enter text.</a></p>		

C3.3 If the activity is subject to a change of commissioning responsibility, from CCG to NHS England, has a methodology for the transfer of funds been identified, and calculated?	<a href="#">Click here to enter text.</a>
<b>C4 Overall cost impact of this policy to the NHS as a whole</b>	
C4.1 Specify the budget impact of the proposal on other parts of the NHS.	Budget impact for CCGs: <u><b>Cost saving</b></u> Budget impact for providers: <u><b>Cost neutral</b></u> Please specify: <a href="#">Click here to enter text.</a>
C4.2 Taking into account responses to C3.1 and C4.1, specify the budget impact to the NHS as a whole.	<u><b>Cost pressure</b></u> Please specify: <a href="#">Click here to enter text.</a>
C4.3 Where the budget impact is unknown set out the reasons why this cannot be measured	N/A
C4.4 Are there likely to be any costs or savings for non-NHS commissioners and/or public sector funders?	<u><b>No</b></u> Please specify: <a href="#">Click here to enter text.</a>
<b>C5 Funding</b>	

C5.1 Where a cost pressure is indicated, state known source of funds for investment, where identified, e.g. decommissioning less clinically or cost-effective services.	Specialised Commissioning CPAG Funding decision
<b>C6 Financial Risks Associated with Implementing this Policy</b>	
C6.1 What are the material financial risks to implementing this policy?	Risks associated with the increase in patient numbers profiled across five years and subsequently amending the ratio over the first two financial years
C6.2 How can these risks be mitigated?	Consideration of patient phasing
C6.3 What scenarios (differential assumptions) have been explicitly tested to generate best case, worst case and most likely total cost scenarios?	The model can be amended to reflect patient number and phasing changes
C6.4 What scenario has been approved and why?	Growth from current 300 patients to 1200 patients by year 5 and the split changing from 66% surgery and 34% EBV to a 50/50 split by year 3 of the policy.
<b>C7 Value for Money</b>	
C7.1 What published evidence is available that the treatment is cost effective as evidenced in the evidence review?	<p><b><u>There is no published evidence of cost-effectiveness</u></b></p> <p>Please specify:</p> <p><a href="#">Click here to enter text.</a></p>

<p>C7.2 Has other data been identified through the service specification development relevant to the assessment of value for money?</p>	<p><i>Select all that apply:</i></p> <table border="1"> <tr> <td>Available pricing data suggests the treatment is equivalent cost compared to current/comparator treatment</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Available pricing data suggests the treatment is lower cost compared to current/comparator treatment</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Available clinical practice data suggests the new treatment has the potential to improve value for money</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other data has been identified</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No data has been identified</td> <td><input type="checkbox"/></td> </tr> <tr> <td>The data supports a high level of certainty about the impact on value</td> <td><input type="checkbox"/></td> </tr> <tr> <td>The data does not support a high level of certainty about the impact on value</td> <td><input type="checkbox"/></td> </tr> </table> <p>Please specify: N/A <a href="#">Click here to enter text.</a></p>	Available pricing data suggests the treatment is equivalent cost compared to current/comparator treatment	<input type="checkbox"/>	Available pricing data suggests the treatment is lower cost compared to current/comparator treatment	<input type="checkbox"/>	Available clinical practice data suggests the new treatment has the potential to improve value for money	<input type="checkbox"/>	Other data has been identified	<input type="checkbox"/>	No data has been identified	<input type="checkbox"/>	The data supports a high level of certainty about the impact on value	<input type="checkbox"/>	The data does not support a high level of certainty about the impact on value	<input type="checkbox"/>
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The data supports a high level of certainty about the impact on value	<input type="checkbox"/>														
The data does not support a high level of certainty about the impact on value	<input type="checkbox"/>														
<p><b>C8 Cost Profile</b></p>															
<p>C8.1 Are there non-recurrent capital or revenue costs associated with this policy?</p>	<p><b>No</b> If yes, specify type and range: <a href="#">Click here to enter text.</a></p>														
<p>C8.2 If yes, confirm the source of funds to meet these costs.</p>	<p><a href="#">Click here to enter text.</a></p>														

