Majority of oncology products receive a positive recommendation in Canada conditional on improved cost-effectiveness

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ABSTRACT

OBJECTIVES: Identifying decision patterns of health technology assessments can offer valuable insights into the factors that may influence reimbursement. This study examined oncology reimbursement recommendations made by the pan-Canadian Oncology Drug Review (pCODR) and determined the implications of these recommendations.

METHODS: Final pCODR recommendations were identified from 13 July 2011 to 9 June 2014. Only publicly available information accessible at www.pcodr.ca and reimbursementdecisions.com were reviewed.

RESULTS: During this time period, 40 indications were reviewed by pCODR; 30 received positive guidance while 10 received negative guidance. Twenty-one of the thirty (70%) indications that received a positive recommendation were recommended conditional on the cost-effectiveness being improved to an acceptable level. There were no observable relationships between tumor type and recommendation. Six positive recommendations (20%) were recommended without listing criteria or conditions, while the remaining three were recommended in a more restricted patient population. More than half (60%) of the negative recommendations were due to insufficient or unclear clinical benefit and economic analysis. The remaining four negative recommendations were based on a lack of clear clinical benefit. Interestingly, negative recommendations based solely on poor economic analysis were absent.

CONCLUSIONS: The majority of pCODR recommendations were positive conditional on improved cost-effectiveness, with the probability of a positive recommendation increasing with unmet need and strong clinical data. All negative recommendations included concerns regarding insufficient or unclear clinical benefit. This study highlights the value placed on unmet need and clinical data, as well as the need for a reimbursement strategy that incorporates price and cost-effectiveness considerations.