



# Resource impact statement

Resource impact

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## No significant resource impact is anticipated

NICE has recommended [tepotinib](#) within its marketing authorisation, as an option for treating advanced non-small-cell lung cancer (NSCLC) with METex14 skipping alterations in adults, only if the company provides tepotinib according to the commercial arrangement.

We do not expect this guidance to have a significant impact on resources; that is, the resource impact of implementing the recommendations in England will be less than £5 million per year (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million people).

This is because tepotinib is a further treatment option and the overall incremental cost of treatment is low. There are also resource benefits from the favourable side effect profile of tepotinib compared with chemotherapy and chemo-immunotherapy. In addition, there is a reduced treatment administration burden offered by tepotinib which is an oral therapy that does not require day-unit attendance, unlike the alternative treatment options chemotherapy and chemo-immunotherapy. This benefits both NHS capacity and people receiving the treatment.

The company has a commercial arrangement (simple discount patient access scheme). This makes tepotinib available to the NHS with a discount. The size of the discount is commercial in confidence. It is the company's responsibility to let relevant NHS organisations know details of the discount.

Tepotinib is commissioned by NHS England. Providers are NHS hospital trusts.