



# Resource impact statement

Resource impact

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## Managed access technology

NICE has recommended selpercatinib with managed access as an option for treating RET fusion-positive advanced non-small-cell lung cancer (NSCLC) in adults only if:

- it is untreated
- the conditions in the managed access agreement for selpercatinib are followed.

This recommendation is not intended to affect treatment with selpercatinib that was started in the NHS before this guidance was published. People having treatment outside this recommendation may continue without change to the funding arrangements in place for them before this guidance was published, until they and their NHS clinician consider it appropriate to stop.

Selpercatinib will be available to the NHS in line with the [managed access agreement](#) with NHS England. As part of this, NHS England and Eli Lilly have a commercial access agreement that makes selpercatinib available to the NHS at a reduced cost. The financial terms of the agreement are commercial in confidence.

It is estimated that around 160 adults per year with untreated RET fusion-positive advanced NSCLC are eligible for treatment with selpercatinib.

Since selpercatinib is administered orally, there will be a capacity benefit for providers if it is used instead of comparators that are administered by intravenous (IV) infusion.

The resource impact of selpercatinib will be covered by the Cancer Drugs Fund budget. More evidence on selpercatinib is being collected until further data from LIBRETTO-001 and LIBRETTO-431 is available. After this, NICE will decide whether or not to recommend it for use on the NHS and update the guidance. It will be available through the Cancer Drugs Fund until then. Further information can be found in [NHS England's Appraisal and Funding of Cancer Drugs from July 2016 \(including the new Cancer Drugs Fund\) - A new deal for patients, taxpayers and industry.](#)

This technology is commissioned by NHS England. Providers are NHS hospital trusts.