

Subject: Specialised Services Circular (SSC)
Sent on behalf of: Chair of the SW Specialised Service Circular Group

Dear Colleagues,

Please find attached the following Specialised Services Circular(s):

SSC Number	SSC Title	Trusts approved to prescribe in accordance with the SSC, providing appropriate internal governance arrangements are in place
	_	Adults: North Bristol Trust and University Hospitals Plymouth Trust
2871	for Neuromyelitis	Paediatrics: University Hospitals Bristol and Weston Foundation Trust

Is an implementation plan required from all SW trusts (regardless of commissioned status) for this SSC? No

For all other South West region trusts this is for information only.

Trusts should ensure that use is registered on the Blueteq system (if appropriate).

Treatment will only be funded where the drugs minimum dataset is fully and accurately populated.

Please direct any queries to: england.speccomm-southwest@nhs.net



All Chief Executives

All Medical Directors

All Chief Pharmacists

Specialised Commissioning South West NHS England 100 Temple Street Bristol BS1 6AG

> Email: england.speccommsouthwest@nhs.net

> > 8 August 2025

Dear Colleagues,

Re: NHS England Clinical Commissioning Policy - Tocilizumab for Neuromyelitis optica spectrum disorder (NMOSD) and myelin oligodendrocyte glycoprotein antibody-associated disease (MOGAD) refractory or intolerant to previous lines of therapy (Adults) [2334]

I am writing to advise you regarding the funding position on the recently published NHS England Clinical Commissioning Policy (CCP) for NMOSD and MOGAD (Adults).

The CCP can be found at: NHS England » Tocilizumab for neuromyelitis optica spectrum disorder and myelin oligodendrocyte glycoprotein antibody-associated disease refractory or intolerant to previous lines of therapy

Tocilizumab has been routinely commissioned from 31st July 2025 in line with these recommendations and according to a set of treatment criteria which translates the recommendation into a clinical guide as to use in practice.

NHS England will commission tocilizumab in children aged 2 years to 17 years of age, where tocilizumab is used in accordance with the NHS England policy 'Commissioning medicines for children in specialised services' for younger patients in accordance with the tocilizumab dosage as described in the BNF for Children [Tocilizumab | Drugs | BNFC | NICE]. In this setting tocilizumab should only be requested by, and administered in specialised treatment centres. The use of the tocilizumab should also be discussed at a multi-disciplinary team (MDT) meeting which must include at least two consultants in the subspecialty with active and credible expertise in the relevant field of whom at least one must be a consultant paediatrician. The MDT should include a paediatric pharmacist and other professional groups appropriate to the disease area. Separate Blueteq registration forms for registration of adults and children have been made available. It should also be noted that tocilizumab should be used within the Trusts governance framework as tocilizumab is not licensed for use in NMOSD and MOGAD.

In addition:

Trusts must ensure that only invoices for the drug procurement costs of tocilizumab

in this indication are invoiced to NHSE and that they are also submitting complete and accurate information via the high-cost drugs minimum dataset (MDS). All other on costs are in block arrangements.

- Patients must be registered via Blueteq (initiation and continuation forms) and meet the clinical criteria on the registration form. This letter gives the required one month's notice as per Schedule 2 Part G (Other Local Agreements, Policies and Procedures) of your Specialised Services contract for prior approval for this treatment/indication. From one month of the date specified above, NHS England will only reimburse these treatments for patients that have been confirmed as meeting the eligibility criteria via the formal Prior Approval Scheme (i.e. Blueteq). You may wish to use the prior approval mechanism earlier than this to expedite access to this drug.
- Payment of Trust invoices will be contingent on Blueteq registration and high-cost drug MDS record applicable to the drug being completed and this information being made available in a timely way.
- Trusts must ensure that local governance aspects (e.g. technical issues, education & training, patient information) have been identified and addressed for all staff groups (as appropriate) in order to permit the safe delivery of this therapy.

I would be grateful if you could cascade this information to relevant clinical teams within your organisation to support the consistent adoption of the policy nationally.

With best wishes,

Emma Redfern

Medical Director NHS England South West

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Region

MUS

Tracey Williams
Principal Pharmacist