Subject: Specialised Services Circular (SSC 2680)
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
2680	New Subcutaneous (SC) formulation for ocrelizumab 920mg (Ocrevus®): Implications for currently funded indications.	• Gloucestershire Hospitals NHS Foundation Trust • North Bristol NHS Trust • Somerset NHS Foundation Trust • Royal United Hospitals NHS Foundation Trust • Great Western Hospitals NHS Foundation Trust • Salisbury NHS Foundation Trust • University Hospitals Dorset NHS Foundation Trust • Torbay and South Devon NHS Foundation Trust • Royal Devon University Healthcare NHS Foundation Trust • University Hospitals Plymouth NHS Trust • Royal Cornwall Hospitals NHS Trust • University Hospitals Bristol and Weston NHS Foundation Trust (paediatrics)

Is an implementation plan required for this SSC? NO

For all other SouthWest 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

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18 July 2024

All Chief Executives

All Medical Directors

All Chief Pharmacists

Re: New Subcutaneous (SC) formulation for ocrelizumab 920mg (Ocrevus®): Implications for currently funded indications.

I am writing to advise you of the funding position for ocrelizumab (Ocrevus®) following marketing of a subcutaneous (SC) version of the product. A new Summary of Product Characteristics (SmPC) for the Ocrevus® 920 mg solution for injection subcutaneous product is available at:
https://www.medicines.org.uk/emc/product/15824/smpc

The following NICE Technology Appraisal Guidance for ocrelizumab includes a recommended dose schedule using ocrelizumab intravenous (IV) infusion:

- TA533: Ocrelizumab for treating relapsing–remitting multiple sclerosis: https://www.nice.org.uk/guidance/ta533
- TA585: Ocrelizumab for treating primary progressive multiple sclerosis: https://www.nice.org.uk/guidance/ta585

NHS England can confirm that the new SC ocrelizumab product will be funded within the NHS from the date of this letter provided it remains a cost neutral alternative to the IV formulation.

The new SC product has a recommended dose of 920mg of ocrelizumab solution for subcutaneous injection. The SmPC advice is to administer 920mg (23mL) of Ocrevus® SC solution for injection subcutaneously every 6 months. New patients may be initiated on the SC version as an alternative to the IV formulation following discussion between the individual patient and their clinician. Patients currently receiving IV ocrelizumab can be switched to SC ocrelizumab as advised in the manufacturers SmPC.

In addition, NHS England will commission ocrelizumab in children where ocrelizumab is used in accordance with the NHS England policy 'Commissioning medicines for children

in specialised services' as regards post-pubescent patients. In this setting ocrelizumab should only be requested by and administered in appropriate service treatment centres and the use of the ocrelizumab should 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 ocrelizumab should be used within the Trusts governance framework as ocrelizumab is not licensed for use in children.

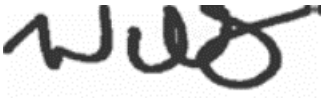
In addition:

- Trusts must ensure that they are purchasing SC ocrelizumab at the agreed discounted price. This discounted price will be applied automatically at point of invoice.
- Trusts must ensure that only invoices for the drug procurement costs of SC ocrelizumab in these indications are invoiced to NHSE and that they are also submitting complete and accurate information via the minimum dataset (MDS). All other on costs are in block arrangements.
- In line with the terms and conditions included in the NHS Standard Contract, Schedule 6a Reporting Requirements for drugs will apply. Payment of Trust invoices will be contingent on the completion of the drugs MDS record and this information being made available in a timely way.
- All new patients starting on SC ocrelizumab must be registered via Blueteq, using the existing Blueteq forms, and meet the clinical criteria for each indication on each registration form.
- Patients who started on the IV formulation and switched to SC ocrelizumab do not need to re-register on Blueteq when switching to SC ocrelizumab.
- **Payment of Trust invoices will be contingent on Blueteq registration and MDS record applicable to the drug being completed and this information being made available in a timely way. [Please note there are different Blueteq registration forms for adults and post-pubescent children]**
- 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.

Trusts should refer to the CAP portal for further information on the PAS price. The CAP portal is available at https://nhsengland.sharefile.eu/Authentication/Login

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.

Yours sincerely,



Luke Culverwell
Deputy Director of Specialised Commissioning

Tracey Williams
Principle Pharmacist