

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<br>Number | SSC Title  | Trusts approved to prescribe in accordance with the SSC, providing appropriate internal governance arrangements are in place |
|---------------|--|--|
| 2836          | NICE Technology Appraisal Final Draft Guidance: marstacimab for treating severe haemophilia B in people 12 years and over without anti-factor antibodies | University Hospitals Bristol and Weston  |

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: <a href="mailto:england.speccomm-southwest@nhs.net">england.speccomm-southwest@nhs.net</a>



**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

30 May 2025

Dear Colleagues,

Re: NICE Technology Appraisal Final Draft Guidance: marstacimab for treating severe haemophilia B in people 12 years and over without anti-factor antibodies

I am writing to advise you regarding the funding position on the recently published NICE Technology Appraisal Final Draft Guidance (FDG) for marstacimab for treating severe haemophilia B in people 12 years and over without anti-factor antibodies.

The FDG can be found at: <a href="https://www.nice.org.uk/guidance/indevelopment/gid-ta11397">https://www.nice.org.uk/guidance/indevelopment/gid-ta11397</a>.

NICE in their FDG published on 21st May 2025 has stated that:

Marstacimab is recommended, within its marketing authorisation, as an option for preventing bleeding episodes caused by severe (factor IX [9] activity less than 1%) haemophilia B (congenital factor 9 deficiency) in people 12 years and over who:

- weigh at least 35 kg and
- do not have factor 9 inhibitors (anti-factor antibodies).

Marstacimab will be available via the Innovative Medicines Fund (IMF) from the date of stock availability, currently expected w/c 23 June 2025, in line with these recommendations and according to a set of treatment criteria which translates the NICE recommendation into a clinical guide as to use in practice. These treatment criteria can be found on the application form(s) on the Blueteq site.

NHS England will then routinely commission marstacimab in patients with haemophilia B via commissioned haemophilia comprehensive care centres (Appendix 1), incorporating these treatment criteria, including those contained within this letter from 90 days after the day of publication of the final guidance.

In addition, commissioned centres must:

- Ensure that they are purchasing marstacimab at the agreed proposed patient access scheme (PAS) discounted price. This discounted price will be applied automatically at point of invoice and applies to all indications.
- Ensure that, until 90 days after publication of the final guidance from NICE, only



- invoices for the drug procurement costs of marstacimab in this indication are directed to the IMF and that they are also submitting complete and accurate information via the IMF minimum dataset (MDS).
- 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 MDS record and this information being made available in a timely way.
- Patients are registered via Blueteq (MAR1) and meet the clinical criteria on the registration form during the interim funding period.
- Payment of Trust invoices will be contingent on Blueteq registration and IMF MDS record applicable to the drug being completed and this information being made available in timely way.
- 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 <a href="https://nhsengland.sharefile.eu/Authentication/Login">https://nhsengland.sharefile.eu/Authentication/Login</a>

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.

Enna Redfern.

Tracey Williams
Principal Pharmacist

Emma Redfern

Medical Director NHS England South West

Region



## Appendix 1 – Haemophilia comprehensive care centres

- Alder Hey Children's NHS Foundation Trust
- Barts Health NHS Trust
- Birmingham Women's and Children's NHS Foundation Trust
- Cambridge University Hospitals NHS Foundation Trust
- East Kent Hospitals University NHS Foundation Trust
- Great Ormond Street Hospital For Children NHS Foundation Trust
- Guy's and St Thomas' NHS Foundation Trust
- Hampshire Hospitals NHS Foundation Trust
- Hull University Teaching Hospitals NHS Trust
- Imperial College Healthcare NHS Trust
- Leeds Teaching Hospitals NHS Trust
- Liverpool University Hospitals NHS Foundation Trust
- Manchester University NHS Foundation Trust
- Nottingham University Hospitals NHS Trust
- Oxford University Hospitals NHS Foundation Trust
- Royal Free London NHS Foundation Trust
- Sheffield Children's NHS Foundation Trust
- Sheffield Teaching Hospitals NHS Foundation Trust
- The Newcastle Upon Tyne Hospitals NHS Foundation Trust
- University Hospital Southampton NHS Foundation Trust
- University Hospitals Birmingham NHS Foundation Trust
- University Hospitals Bristol and Weston NHS Foundation Trust
- University Hospitals of Leicester NHS Trust