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| **Appendix A. For application of SN drug listing - Comment from CoC / CC**  [CoC/CC Secretaries should directly submit this Appendix (in MS word) to [dacapp@ha.org.hk](mailto:dacapp@ha.org.hk) before the deadline.] | | | | | | | | | | | | | | | | | | |
| **A1 Proposed SN Drug indication** | | | | | | | | | | | | | | | | | | |
| **CoC / CC comment sought from\*:** | | | | | | | | | |  | | | | | | | | |
| **Existing HADF indication** (for drug listed in HADF) **/  HK Licensed indication** | | | | | | | | | | **Proposed HADF indication** | | | | | | | | |
| **Existing HADF status** *(🗸where appropriate)*  Not yet listed in HADF  SFI Safety Net (SN)  **Existing HADF indication/ HK licensed indication:** | | | | | | | | | | **Proposed HADF status***:*Safety Net (SN)  **Proposed indication:**  **(Eng)**  **(Chinese)** | | | | | | | | |
| **Existing Prescribing Specialty:** | | | | | |  | | | | **Proposed Prescribing Specialty\*:** | | | | | |  | | |
| **\***please state all specialties involved. Must seek comment from all relevant specialities on the proposed indication, funding amount request, service transition (e.g. paed to adult, SOPC to GOPC). | | | | | | | | | | | | | | | | | | |
| **A2 Estimated cost per patient** | | | | | | | | | | | | | | | | | | |
| **Treatment regimen**  (dose, frequency, & max. dose) | | | | | | | *e.g. 50mg/m2 i.v. on day1 every 3 week, rest 1 week , then repeat; max 75mg/m2*  *e.g. 70mg s.c. every 2 weeks; max 100mg* | | | | | | | | | | | |
| **Drug treatment cost per patient (e.g. per day / week / cycle)**  *(🗸where appropriate)* | | | | | | | **Existing HA Corporate Drug / Contract Price** (SFI/SN)*(HA Corporate Drug Price will be used for patient’s financial assessment)* | | | | | | | | | | | |
| HK$ | | | | | | | | | | | |
| **Proposed Net price for SN drugs:** *(for estimation of SN financial impact)* | | | | | | | | | | | |
| HK$  *(after taking into account bonus, rebate or free goods from Patient Access Programme)*  *e.g. $X,000/cycle (with existing SN discount of Y%)*  *e.g drug company offer 30% discount if listed in SN* | | | | | | | | | | | |
| **Calculation based on**:  HA Corporate Drug Price/Contract Price   Existing discounted price of SN Drugs  New offer/discount from drug company | | | | | | | | | | | |
| **Total duration of treatment** | | | | | | | *e.g. 8 cycles or 6 months, or continuous till remission/progression/lifetime* | | | | | | | | | | | |
| **Patient Access Programme** (PAP) if listed in safety net | | | | | | | No  Yes: details of PAP: | | | | | *e.g. capped at \_\_\_\_\_\_\_\_\_\_cycles (\_\_\_\_\_\_\_days per cycle )* | | | | | | |
| **Treatment cost per patient per application\* or per year**  *(\* For drug with total duration of treatment duration > or = 52weeks)* | | | | | | | **Existing annual cost based on HA Corporate Drug Price** (SFI/SN)*(HA Corporate Drug Price will be used for patient’s financial assessment)* | | | | | | | | | | | |
| HK$ | | | | | | | | | | | |
| **Proposed annual cost** *(for estimation of SN financial impact)* [input the figure to “a” in Section A6] | | | | | | | | | | | |
| HK$ | | | | | | | | | | | |
| **Whether the drug is renewable# & subject to lifetime maximum no. of cycles**  *(# Renewal of safety net assistance is required if total duration of treatment duration >52 weeks)* | | | | | | | **Renewable**:  No  Yes  **Maximum lifetime no. of cycles** :  No  Yes (how many **.**) | | | | | | | | | | | |
| **Support services required?** | | | | | | | *(e.g. the need and availability for laboratory test/ diagnostic radiology examination/ other specialist assessment in HA associated with using this drug)* | | | | | | | | | | | |
| **A3 Estimated Number of Eligible Patient** *(🗸where appropriate)*: | | | | | | | | | | | | | | | | | | |
| Additional patient number due to relaxation of existing SN guideline/ indication  Share same patient group of existing SN drug(s)^  *^please provide both the total patient number of the targeted group, and the patient number allocated to each drug*  **Estimation based on**: Caseload (ICD codes)Drug ExpenditureRegistryOthers: **.** | | | | | | | | | | | | | | | | | | |
| **Reference year for estimation**: | | | | | | **.** | | | | | | | | | | | | |
| *Please provide details*  *e.g. Around 5,000 new lung cancer patients per year in Hong Kong. 85% suffer from non-small cell lung cancer. 60% adenocarcinoma 75% have advanced disease. 85% are seen in HA and 1.7% have ROS1-positive disease* | | | | | | | | | | | | | | | | | | |
| **Total number of clinically eligible patients** [input figures to “b1, b2, b3” in Section A6] | | 1st year | | | | | | 2nd year | | | | | 3rd year | | | | | |
|  | | | | | | ( new patients in 2nd year + .patients in 1st year continue treatment) | | | | | ( new patients in 3rd year  + patients in 2nd year continue treatment  + patients in 1st year continue treatment) | | | | | |
| **A4 Treatment Criteria for SN Drugs** (information will be incorporated in the SN clinical guidelines if appropriate) | | | | | | | | | | | | | | | | | | |
| **Place in therapy** | | | |  | | | | | | | | | | | | | | |
| **Eligibility** | | | |  | | | | | | | | | | | | | | |
| **Exclusion criteria** | | | |  | | | | | | | | | | | | | | |
| **Pretreatment Medical Assessment** | | | |  | | | | | | | | | | | | | | |
| **Monitoring and Reassessment** | | | | *Treatment response for continuing SN assistance, if applicable* | | | | | | | | | | | | | | |
| **Termination /**  **Exit Criteria** | | | |  | | | | | | | | | | | | | | |
| **A5 Existing Treatment in HA for the proposed targeted patient group**  *List (1) drug names (2) HADF indication (3) HADF status (4) indicate if currently covered by SN* (5) *efficacy (6) any need to revise clinical guidelines of the existing drugs/ indications under SN* | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **A6 Estimated Budget impact/ Funding Requirement**  *(Assuming (i) 70% of the patients will apply for assistance from SF/CCF; and (ii) 95% of the drug cost is subsidised by SF/CCF)* | | | | | | | | | | | | | | | | | | |
| Estimated drug cost per patient per year (HK$) a | 1st year | | | | | | | | | 2nd year | | | | | 3rd year | | | |
| No. of clinically eligible patients  b1 | | | | Estimated No. of patients applying for assistance c1=b1 \*70% | | | | Cost ($M) d1=a\*c1\*95% | No. of clinically eligible patients  b2 | Estimated No. of patients applying for assistance c2=b2\*70% | | | Cost  ($M) d2=a\*c2\*95% | No. of clinically eligible patients  b3 | | Estimated No. of patients applying for assistance c3=b3 \*70% | Cost  ($M) d3=a\*c3\*95% |
|  |  | | | |  | | | |  |  |  | | |  |  | |  |  |
| [Remarks] a: copied from Section A2 b: copied from Section A3 | | | | | | | | | | | | | | | | | | |
| **A7 Required Modifications Required for Related drugs /indications currently covered by SN** (if applicable) | | | | | | | | | | | | | | | | | | |
| Drug | | | Indication | | | | | | | Revision on clinical guidelines of the existing drugs/indications under SN | | | | | | | | |
|  | | |  | | | | | | | No  Yes.Please provide details as follows: | | | | | | | | |
| **A8 Summary of Clinical Benefits over existing treatments**  *(Clinical evidence compared with existing treatment & references e.g. PFS, OS and p value)* | | | | | | | | | | | | | | | | | | |
| e.g. Proposed drug vs. Chemotherapy :  median Progression-free survival (PFS) : lengthened by X months (X months vs. X months)  Overall response rate (ORR) : improved by X% (X% vs. X%)  Definitive deterioration : shows prolonged time for the composite endpoint of lung cancer-specific symptoms (pain, cough, and shortness of breath) by Lung Cancer Symptom Scale (LCSS) | | | | | | | | | | | | | | | | | | |
| **A9 CoC / CC Comment** \* Comment from all involving specialties MUST BE sought | | | | | | | | | | | | | | | | | | |

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| ***CoC/ CC Contact Person*** | ***Comment*** *(🗸where appropriate)* |
| Involving CoC/ CC  Name:  Position:  Date: | CoC/ CC: support this SN proposal  CoC/ CC: not support this SN proposal |
| Other involving CoC/ CC  Name:  Position:  Date: | CoC/ CC: support this SN proposal  CoC/ CC: not support this SN proposal |