An Appraisal of pCODR’s Decisions and Influence over the Last Three Years

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Introduction

• The pan-Canadian Oncology Drug Review (pCODR), established in 2010 by the provincial and territorial Ministries of Health as the successor to the interim Joint Oncology Drug Review (iJODR), assesses cancer drugs and “makes recommendations to the provinces and territories to guide their drug funding decisions.” This does not include Québec.

• Since its founding, pCODR has completed approximately 30 reviews of oncology products.

Results

• Out of the 29 final recommendations analysed during the period of April 2012 to January 2014, pCODR has issued 24 “positive” funding recommendations, including 20 “conditional on cost-effectiveness being improved.” (Figure 1). Given the 24 “positive” recommendations, provinces funded products with similar or greater restrictiveness than pCODR’s recommendation 21.3% of the time and with less restrictiveness 6.9% of the time; provinces remained under consideration, negotiation, or lacked any status update 71.8% of the time. No province has rejected funding of an oncology product following a positive pCODR recommendation.

• pCODR issued negative funding recommendations 5 of 29 times. Of these instances, only two products, bendamustine in relapsed/refractory leukaemia (TREANDA) and pazopanib hydrochloride in soft tissue sarcoma (VOTRIET), have achieved funding in BC and SK, respectively.

Conclusions

• When making funding decisions, provinces typically follow pCODR’s recommendations. Compared to other provinces, Alberta tends to fund products with fewer mandated restrictions than pCODR recommends, while Ontario demonstrates the most restrictiveness. Saskatchewan has followed pCODR most closely. Newfoundland and Labrador and Prince Edward Island have been the slowest to respond to pCODR, in “consideration” or “negotiation” of most pCODR recommendations. (Figure 3).

References

1. www.pcodr.ca (as of April 4, 2014)