National Innovative Medicines Fund List

(Including live list of indications funded via the Innovative Medicines Fund with their commissioning criteria for use)

v1.0

03-Jul-24

National Innovative Medicines Fund (IMF) List

A. National IMF List

Notes: This list should be read in conjunction with all other available information found at: https://www.england.nhs.uk/medicines-2/innovative-medicines-fund/

Blueteq Form ref:	Drug	Indication	Criteria for use	Available to new patients		Eligible for Interim Funding	Interim Funding agreed by manufacturer	IMF Managed Access Scheme	Expected Entry into Baseline Commissioning (if known)
				Yes	Yes (but notice of removal served)				
ETR1a_v1.0	**Etranacogene dezaparvovec**	Initial Funding Application for treating moderately severe or severe haemophilia B (ID3812)	1. The prescribing clinician confirms the patient is aged 18 years or older 2. The prescribing clinician confirms the patient has moderately severe or severe haemophilia B 3. The prescribing clinician confirms the patient has a demonstrated absence of Factor IX inhibitors and no previous history of Factor IX inhibitors. 4. The prescribing clinician confirms a pre-existing neutralising antibody titre has been performed and that the patient does not have neutralising anti-AAV5 antibodies above a titre of 1:678 (7-point assay) or 1:898 (9-point assay) 5. The prescribing clinician confirms the patient's baseline hepatic function has been assessed. 6. The prescribing clinician confirms compliance with UKHCDO guideline, in particular the approval and pathway process and that treatment will be delivered by a commissioned haemophilia ATMP treatment hub. 7. The prescribing clinician confirms that use is in accordance with the SmPC and the managed access agreement, as detailed in NICE ID3812	From 27-June-24		Yes	Agreed	Yes	nca

Blueteq Form ref:	Drug	Indication	Criteria for use	Available to new patients		Eligible for Interim Funding	Interim Funding agreed by manufacturer	IMF Managed Access Scheme	Expected Entry into Baseline Commissioning (if known)
				Yes	Yes (but notice of removal served)				
ETR1b_v1.0	**Etranacogene dezaparvovec**	Post Infusion Funding Application for treating moderately severe or severe haemophilia B (ID3812)	1.The prescribing clinician confirms that one of the following applies: -The patient remained eligible for treatment and was infused with etranacogene dezaparvovec -The patient was no longer eligible for treatment and the order was cancelled before acceptance of the product -The patient was no longer eligible for treatment and the order had to be cancelled after acceptance of the product -The product was destroyed following identification of a defect or latent defect (i.e. a fault occurring prior to receipt of product, regardless of when it was detected) -The product was destroyed following identification of other damage to the product Please enter the date of infusion with etranacogene dezaparvovec if option 1 applies, otherwise please enter '00/00/0000': ..... 2. The prescribing clinician confirms that etranacogene dezaparvovec was otherwise used as set out in the SmPC and the managed access agreement as detailed in NICE ID3812	From 27-June-24		Yes	Agreed	Yes	nca

National Innovative Medicines Fund (IMF) List

Blueteq Form ref:	Drug	Indication	Criteria for use	Available to new patients		Eligible for Interim Funding	Interim Funding agreed by manufacturer	IMF Managed Access Scheme	Expected Entry into Baseline Commissioning (if known)
				Yes	Yes (but notice of removal served)				
TAF1a_v1.0	**Tafamidis**	Initial Funding Application – Tafamidis for treating transthyretin amyloidosis with cardiomyopathy [ID6327]	1. The prescribing clinician confirms the patient is 18 years and over. 2. The prescribing clinician confirms the patient has a diagnosis of wild-type or hereditary transthyretin amyloidosis with cardiomyopathy (ATTR-CM) based on a tissue biopsy showing ATTR amyloid or fulfilment of the non-biopsy diagnostic criteria for ATTR-CM. 3. The prescribing clinician confirms the patient will receive the licensed dose and frequency of tafamidis in line with its marketing authorisation.	From 19-June-24		Yes	Agreed	No	19-Jul-24

National Innovative Medicines Fund (IMF) List

Blueteq Form ref:	Drug	Indication	Criteria for use	Available to new patients		Eligible for Interim Funding	Interim Funding agreed by manufacturer	IMF Managed Access Scheme	Expected Entry into Baseline Commissioning (if known)
				Yes	Yes (but notice of removal served)				
VOX1a_v1.0	**Voxelotor**	Initial Funding Application – Voxelotor for treating haemolytic anaemia caused by sickle cell disease [ID1403]	1. The prescribing clinician confirms the patient is 12 years and over. 2. The prescribing clinician confirms the patient has haemolytic anaemia due to sickle cell disease 3. The prescribing clinician confirms the patient is ineligible for, or intolerant of hydroxycarbamide, or hydroxycarbamide alone is insufficiently effective. 4. The prescribing clinician confirms the patient will receive the licensed dose and frequency of voxelotor in line with its marketing authorisation. 5. The prescribing clinician confirms that the patient has been reviewed and approved by a Sickle Cell Disease Haemoglobinopathy Coordinating Centre (HCC) MDT. Please confirm the approving HCC: -North West -North East and Yorkshire -East Midlands -West Midlands -East London and Essex -South East London and South East -West London -North Central London and East Anglia -Wessex and Thames Valley -South West Upon HCC approval, delivery of the treatment can be undertaken at the patient's Specialist Haemoglobinopathy Team (SHT) or Local Haemoglobinopathy Team (LHT) Please confirm HCC MDT approval: ……	From 12-June-24		Yes	Agreed	No	12-Jul-24

National Innovative Medicines Fund (IMF) List

Version Control

Version No.	Date published	Author(s)	Revision summary
0.1	n/a	D Dwyer	Initial draft of new IMF list, based on pre-existing national IMF list but updated for changes to the IMF, for review.
1.0	03/07/2024	S Patel; R Gowa; P Ryan; S Ahmed	Final version of new IMF list

Changes to recent versions

General or criteria changed	Summary of changes
Changes to version 1.0	
ETR1a_v1.0, ETR1b _v1.0	Recommended for the IMF
VOX1a_v1.0	Recommended for routine commissioning, receiving IMF interim funding
TAF1a _v1.0	Recommended for routine commissioning, receiving IMF interim funding