REVISIONS TO PREVIOUS VERSION

A minor error was noted in the calculation underpinning the Budget Impact Analysis in the version of the report originally posted on-line. This error has been corrected and the version available on-line is accurate. The error only had a very minor effect on the budget impact analysis.

1] PAGE 5 BUDGET IMPACT: NEW VERSION

Budget impact: Based on published prevalence and incidence estimates and assuming between 16% and 33% of PNH patients are treated with eculizumab with annual savings from SC costs avoided ranging from £1K to £10K/patient, the budget impact for the West Midlands (population ~ 5.5M) is estimated to be between about £3.3M and £7.0M in year one and £9.5M to £15.3M by year 10. If greater savings of between £100K and £200K are made from standard care treatments avoided then at 10 years annual cost ranges between about £1.8M and £9.1M.

PAGE 5 BUDGET IMPACT: PREVIOUS VERSION

Budget impact: Based on published prevalence and incidence estimates and assuming between 16% and 33% of PNH patients are treated with eculizumab with annual savings from SC costs avoided ranging from £1K to £10K/patient, the budget impact for the West Midlands (population ~ 5.5M) is estimated to be between about £3.3M and £7.1M in year one and £8.9M to £15M by year 10. If greater savings of between £100K and £200K are made from standard care treatments avoided then at 10 years annual cost ranges between about £1.7M and £8.9M.

2] BUDGET IMPACT PAGE 46: NEW VERSION

Figure 10 shows the budget impact under these assumptions. With between 16% and 33% of patients treated immediately and between £1K and £10K savings from avoided standard care expenditure the annual cost in year one would be between £3.3M and £7.0M, and at 10 years ranges between about £9.5M and £15.3M. If greater savings of between £100K and £200K are made from standard care treatments avoided then at 10 years annual cost ranges between about £1.8M and £9.1M.

BUDGET IMPACT PAGE 46: PREVIOUS VERSION

Figure 10 shows the budget impact under these assumptions. With between 16% and 33% of patients treated immediately and between £1K and £10K savings from avoided standard care expenditure the annual cost in year one would be between £3.3M and £7.1M, and at 10 years ranges between about £8.9M and £15M. If greater savings of between £100K and £200K are made from standard care treatments avoided then at 10 years annual cost ranges between about £1.7M and £8.9M.

3] BELOW: REVISED (upper) & PREVIOUS (lower) VERSIONS OF FIG 10

