

SMC Budget Impact Template

User Guide for Boards

January 2025



# User Guide for Boards

The purpose of this document is to provide a summary guide for NHS health boards covering options, inputs and outputs available in the updated SMC Budget Impact Template.

All input options on the template (highlighted in blue) are completed by the submitting company and can be altered by health boards, but this summary guide seeks to highlight those likely to be of most relevance. The guide is presented sequentially by tab.

## 1. Cover page

This presents an overview of the medicine including the branded and generic name, SMC ID number and the licensed indication.

## 2. Summary

This presents a summary of the budget impact results for years 1 to 3, with the key output being the “Net medicines budget impact”.

The key inputs for health boards that can be altered are shown in Table 1.

**Table 1: Key inputs for the Summary tab**

|  |  |  |
| --- | --- | --- |
| **Cell(s)**  | **Name**  | **Notes**  |
| B4  | [ALL] Scotland (OR USER) population / Regional board (Proportion)  | Select “all” population to use the patient population derived from the Scotland population or select a regional board to scale this figure.  |
| B5  | PAS discounts applied?  | If selecting yes, this applies the PAS discounts to both the intervention and comparator medicines.   |
| B6  | VAT applied (Intervention arm)?  | If selecting yes, this applies a 20% VAT to all medicine acquisition costs in the model's proposed intervention arm.  |
| B7  | VAT applied (Comparator arm)?  | If selecting yes, this applies a 20% VAT to all medicine acquisition costs in the model's comparator arm.  |
| B8  | Consider resource (administration) costs?  | If selecting yes, this will include the administration costs in the “net total budget impact figure”.   |
| B9  | Proportion of financial year (April - March)  | Allows user to select a starting month for the product launch. This will adjust the Year 1 budget impact, by scaling to a proportion of the remaining financial year (April to March).   |

## 3. Input - Medicine Cost Proposed

This tab presents the derivation of the proposed medicine’s acquisition cost.

The key inputs for health boards are shown in Table 2.

**Table 2: Key inputs for Medicine Cost Proposed tab**

|  |  |  |
| --- | --- | --- |
| Cell(s)  | Name  | Notes  |
| B10:B13  | PAS discount %  | Allows input of the PAS discount for the proposed medicine. The company should have inputted this.   |

The remaining cells of this excel tab should give a clear breakdown calculation of the proposed medicine’s cost, derived from inputs such as pack costs and size, units used, the length of treatment cycle (days), administrations per cycle, and the number of expected cycles per year.

## 4. Input - Medicine Cost Comp.

This tab presents the derivation of the comparator medicines acquisition cost. In total, up to four comparator medicines can be included.

The key inputs for health boards are shown in Table 3.

**Table 3: Key inputs for Medicine Cost Comp. tab**

|  |  |  |
| --- | --- | --- |
| Cell(s)  | Name  | Notes  |
| B8:B13  | PAS discount %  | Allows input of the PAS discounts for comparator medicines. The submitting company will not know the PAS discounts for comparators (unless they are the manufacturer).   |

The remaining cells of this excel tab should give a clear breakdown calculation of the comparator medicines’ costs, derived from inputs such as pack costs and size, units used, the length of treatment cycle (days), administrations per cycle, and the number of expected cycles per year.

## 5. Input - Patient numbers

This tab presents the derivation of the patient numbers.

The company should present a clear breakdown of patient numbers, covering a selection of inputs such as prevalence, incidence, and eligible patient population.

The key inputs of interest for health boards are shown in Table 4.

**Table 4: Key inputs for Patient numbers. tab**

|  |  |  |
| --- | --- | --- |
| Cell(s)  | Name  | Notes  |
| B10:D10 | Prevalent patients | Allows input for prevalent patients for each year.  |
| B11:D11 | Incident patients | Allows input for incident patients for each year. Prevalent and incident patients are added together to give the "estimated number of patients with the condition". |
| B23:D23 | Anticipated market share for new intervention (%) (Proportion of eligible treated with new medicine) | Allows input for the share of eligible patients that will be treated with the new medicine as a percentage for each year. This applies a percentage to the patient numbers to determine the number eligible for the new treatment (or by extension, would have been eligible for the comparator basket).  |

## 6. Input - Service Resource Other

This tab presents the derivation of the service/resource/use or other costs.

The company should provide a clear breakdown of administration costs on this tab and can also provide additional notes on service/resource costs.

There are no highlighted key inputs for boards on this tab.

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Healthcare Improvement Scotland

|  |  |
| --- | --- |
| Edinburgh OfficeGyle Square1 South Gyle CrescentEdinbEH12 9EB0131 623 4300 | Glasgow OfficeDelta House50 West Nile StreetGlasgowG1 2NP0141 225 6999 |

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or email his.contactpublicinvolvement@nhs.scot

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