

Reference: FOI.ICB-2324/200

Subject: Primary Care Rebates

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE		
<p>1. Please can you provide the product names with start and finish dates of all your agreed primary care rebates?</p> <p>Please can you advise the level of discount for each agreement and if any of your agreed rebates are conditional on achieving increased volumes/ market shares?</p>	Rebate Product	Start date	End date
	Adcal D3	01/04/2018	Until termination
	BD Viva	Company deems start dates/end dates/term as commercially sensitive	
	Butec	01/04/2021	30/04/2024
	Buvidal	01/07/2021	31/12/2023
	Clenil	01/07/2022	30/06/2024
	Espranor	01/01/2022	31/12/2023
	Fostair NEXThaler	01/07/2022	30/06/2024
	Fostair pMDI	01/07/2022	30/06/2024
	FreeStyle Libre	01/09/2022	31/08/2024
	Gatalin XL	01/12/2022	30/11/2023
	Glucophage	01/07/2022	30/06/2024
	Onglyza	Roll on of previous pre-merge agreements	Until termination
	Pipexus	01/11/2019	Until termination

Prostap	Company deems start dates/end dates/term as commercially sensitive	
Ranexa	01/10/2022	30/09/2024
Stexerol	01/10/2018	Until termination
Strivit	01/04/2021	31/03/2024
Vizidor & Vizidor Duo	01/01/2022	31/12/2023
Xaggitin	01/04/2018	Until termination
Zacco	01/07/2022	30/09/2023
National DOAC rebate	01/01/2022	31/03/2024

The level of discount for each agreement is confidential and commercially sensitive information.

BNSSG ICB can confirm that there are rebate schemes conditional on achieving increased volumes. The ICB has contacted the contract holders involved who have confirmed that they believe the information is confidential and commercially sensitive and provided their reasoning. The ICB has considered this information when applying the public interest test to the exemptions.

The ICB has applied Section 41 (Information provided in confidence) to this part of the response. The contract holders have confirmed that the information was shared with the express understanding that the information was confidential, and this was outlined in the agreement signed by the ICB. Therefore, disclosure of the information would be considered a breach of confidence actionable by the contract holder.

Section 41 is an absolute exemption which does not require a public interest test, however the ICB has considered whether the public interest would outweigh maintaining confidentiality, including the consideration of the public interest test applied regarding Section 43(2) below. In this instance there was no wider public interest in disclosing the confidential information.

The ICB has also applied Section 43(2) (Information prejudice to commercial interests) to the response. The public interest arguments in favour of disclosing the information include the ICB's responsibility to be transparent and accountable in its decision making. The ICB policy for Sponsorship of Activities by and Joint Working with the Pharmaceutical Industry outlines the values the ICB adheres to when working with the pharmaceutical industry and this includes the principle for the ICB to promote confidence between staff, patients and the public through transparency of NHS activities. The policy also outlines that information relating to rebate schemes is disclosable under the FOI Act and only information considered commercially sensitive should be redacted.

The public interest arguments in favour of maintaining the exemption includes the agreement signed by the ICB which confirms the information as commercially sensitive and the subsequent confirmation of this from the contract holder as well as their reasoning for why they consider the information commercially

	<p>sensitive. Rebate schemes allow organisations to offer a financial rebate to the ICB and these schemes are considered on clinical, financial and contractual grounds and will only be considered if the medicines are appropriate and of value to the ICB population. The ICB has considered that disclosure of the information may lead to the contract holder not offering this type of scheme again which may result in the ICB having to spend more public funds on prescribing. The ICB has a responsibility to secure the best use of public resources and provide value for money.</p> <p>The ICB has considered the balance of both disclosing the information and maintaining the exemption and believes that it is in the public's best interest to apply the exemption. The ability for organisations to offer rebate schemes to the ICB reduces the amount of public funding used for prescribing and allows for the more effective use of resources to ensure that the ICB achieves value for money.</p>
<p>2. I would also like to request the process of how you review and evaluate the rebates presented to you and whether the ICB indicates a preference of a rebated product over a comparable non-rebated product to clinicians?</p>	<p>Details of the process of how the ICB reviews and evaluates primary care rebates presented to us is included in the Policy for the Sponsorship of Activities by and Joint Working with the Pharmaceutical Industry which covers Primary Care Rebate Schemes offered by Pharmaceutical Companies under section 9.</p> <p>Link to policy on ICB website: https://bnssg.icb.nhs.uk/for-clinicians/medicines-and-prescribing/policies-and-procedures-for-</p>

	<p>medicines-and-prescribing/ This is the current version of the policy, however it is currently in the process of being reviewed and updated.</p> <p>Rebate schemes are only considered where the medicine is appropriate for BNSSG patients and already accepted onto the BNSSG formulary. Acceptance of a rebate scheme will not constrain the local decision-making processes or formulary development. The ICB promotes the prescribing of medicines with the lowest acquisition cost where all other factors are equivalent whether this is a rebated product or not.</p>
<p>3. Please can you also provide a copy of your most up to date primary care rebate policy.</p>	<p>Primary Care Rebates are covered in the BNSSG Policy for the Sponsorship of Activities by and Joint Working with the Pharmaceutical Industry.</p> <p>Link to policy on ICB website: https://bnssg.icb.nhs.uk/for-clinicians/medicines-and-prescribing/policies-and-procedures-for-medicines-and-prescribing/ This is the current version of the policy, however it is currently in the process of being reviewed and updated.</p>

The information provided in this response is accurate as of 18 September 2023 and has been approved for release by Joanne Medhurst, Chief Medical Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.