Evidence Summary | 48

from a mix of sources (e.g., DOH CCD, the Philippine Charity Sweepstake Office (PCSO), and self-funding) while the other patient mentioned that their treatment is purely self-funded.

Recommendation

Based on the evidence review and appraisal, the HTAC does not recommend the inclusion of rituximab SC in the Philippine National Formulary (PNF) despite it being found to be non-inferior to rituximab IV for the following reasons:

- Costing analysis showed that using rituximab SC is more costly and would have higher budget impact compared to rituximab IV if the latter is based on the lowest price -Australian PBS price. From the government payer perspective, the government should consider allocating its limited resources to health technologies that provide equal or superior treatment results at less cost.
- In addition, the non-inclusion will not deprive patients of care as there are available treatment options for non-Hodgkin's lymphoma. The HTAC considered the following assumptions in the costing analysis.

Assumptions/ BSA	Minimum BSA	Average BSA	Maximum BSA
Current prices of rituximab IV are maintained	Cost of IV all	Cost of IV all	Cost of IV all
	throughout < Cost	throughout > Cost	throughout > Cost
	of SC treatment	of SC treatment	of SC treatment
	regimen (IV first	regimen (IV first	regimen (IV first
	then SC)	then SC)	then SC)
Rituximab IV prices	Cost of IV all	Cost of IV all	Cost of IV all
are bidded by the	throughout < Cost	throughout < Cost	throughout < Cost
manufacturers to	of SC treatment	of SC treatment	of SC treatment
become as low as	regimen (IV first	regimen (IV first	regimen (IV first
Australia prices	then SC)	then SC)	then SC)
Legend: Favors SC (IV first then SC)			

Favors SC (IV first then SC)
Favors IV all throughout

- Considering the possible entry of biosimilars in the Philippines that can result in lower prices of rituximab IV, the use of rituximab SC will incur an unfavorable budget impact.
- There are available alternative treatment options for non-Hodgkin's lymphoma. PhilHealth has 10 benefit packages for the said condition amounting to Php 13,900.00 per patient utilizing PNF-listed drugs for the treatment of non-Hodgkin's lymphoma (chlorambucil, methotrexate, etoposide, carboplatin, and rituximab IV).

Evidence Summary | 49

• The DOH-Disease Prevention and Control Bureau (DPCB) currently does not have plans to procure rituximab SC since the Bureau still procures the IV formulation for its Cancer Control Program. While non-Hodgkin's lymphoma is identified as a high priority for cancer control by DPCB, it is not yet included by PhilHealth in developing the benefit plan for 2022-2025. Hence, there is still no expansion of the benefits package for NHL to facilitate sufficient financing for this health technology in the near future.