

# Taiwan's Cancer Drugs Fund (TCDF)

**Enhancing Access to Innovative Cancer Medicines**

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# Outline

**1**

**Challenges for Cancer Treatments**

**2**

**Policy Innovation:  
Taiwan Cancer Drugs Fund (TCDF)**

**3**

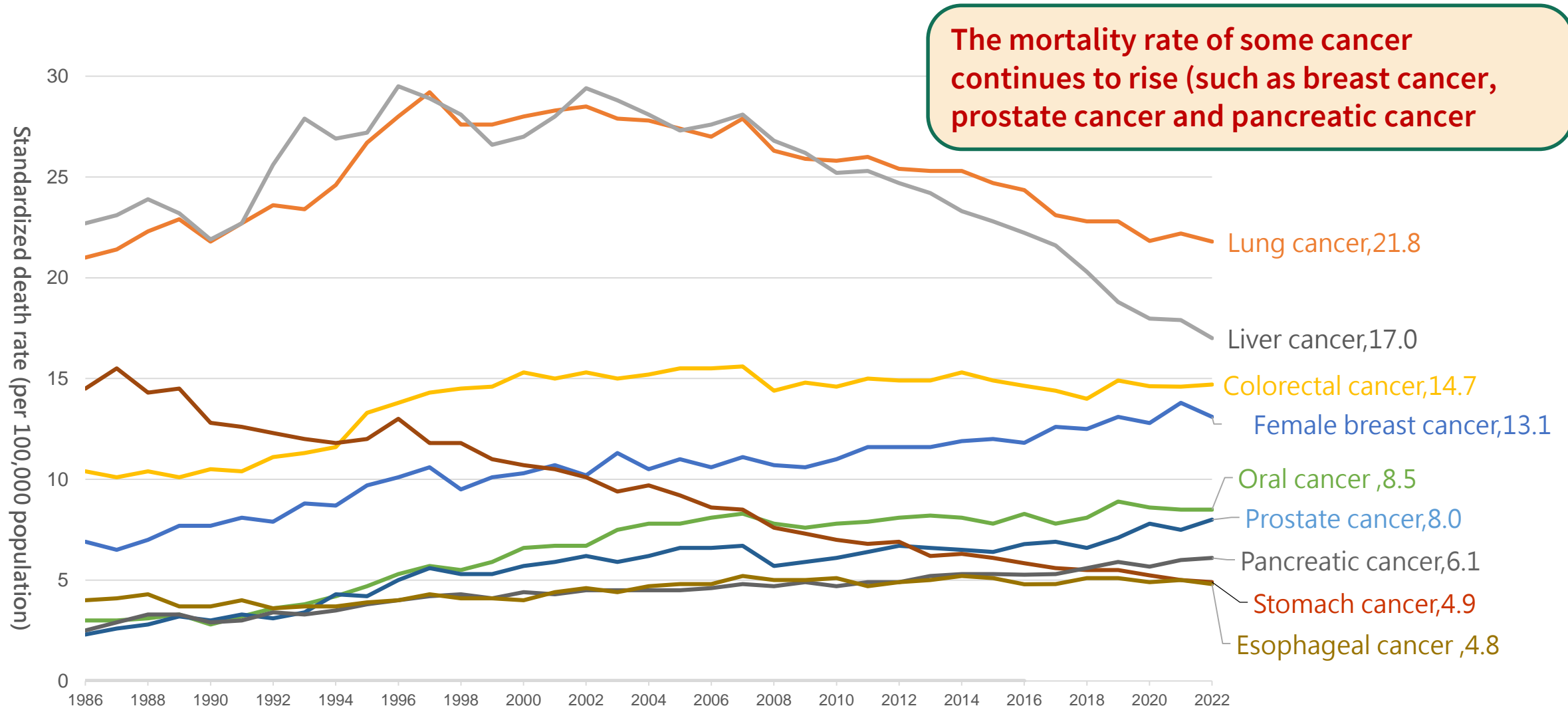
**Digital Transformation for Real  
World Data / Evidence**

**4**

**Summary**

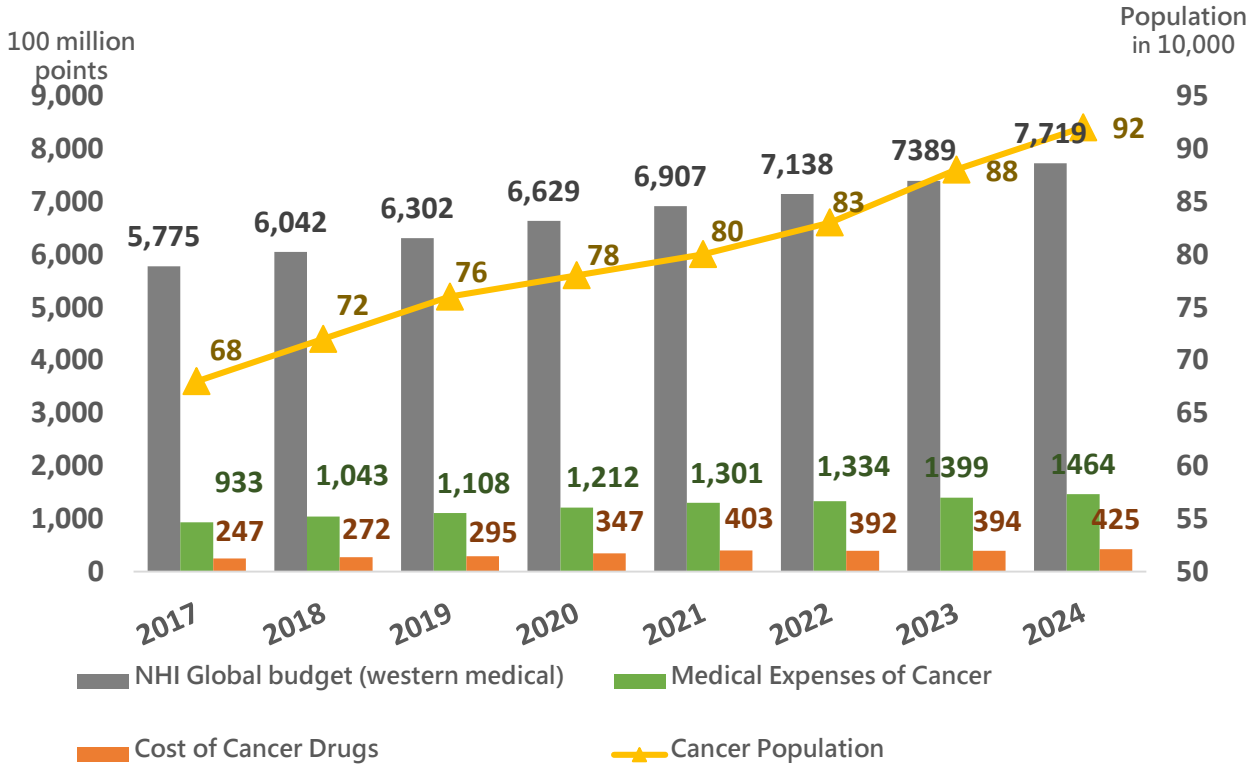


# Trends in Standardized Mortality Rates of the Top 10 Cancers in Taiwan



# Rapid Increase of Expenditure on Cancer Treatments and Drugs

- In 2024, there were 920,000 cancer patients, and the expenditure on cancer treatments was 146.4 billion points
- In 2024, the expenditure on cancer drugs reached 42.5 billion points, of which targeted therapy accounted for the highest (68.2%)
- From 2017 to 2024, cancer drug expenditures grew at an average annual rate of 8.23%, outpacing the NHI global budget growth rate of 4.23%



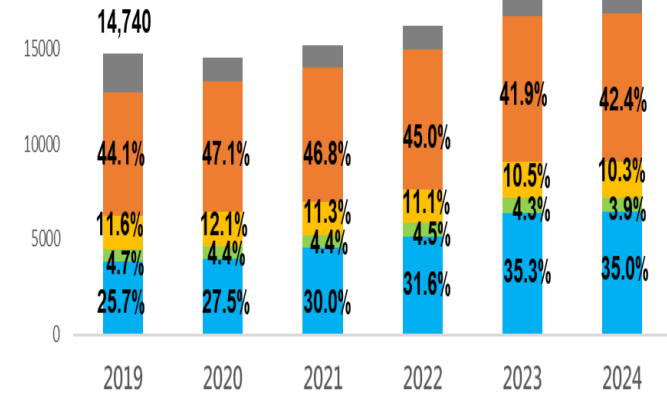
Types of Cancer Drugs	2024 claim quantity (100 million points)	Percentage
Targeted Therapy (including IO)	290	68.2%
Chemotherapy Drugs	79.9	18.8%
Hormonal Drugs	42.1	9.9%
Immunomodulators	6.5	1.5%
Radiopharmaceuticals	3.1	0.7%
Cell Therapy	3.4	0.8%
Total	425	100.0%

# Early Detection is Critical for Improving Cancer Survival

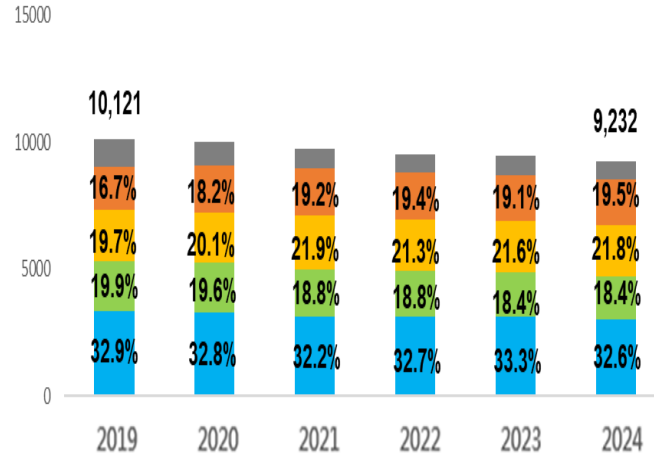
Number of Applicants

20000

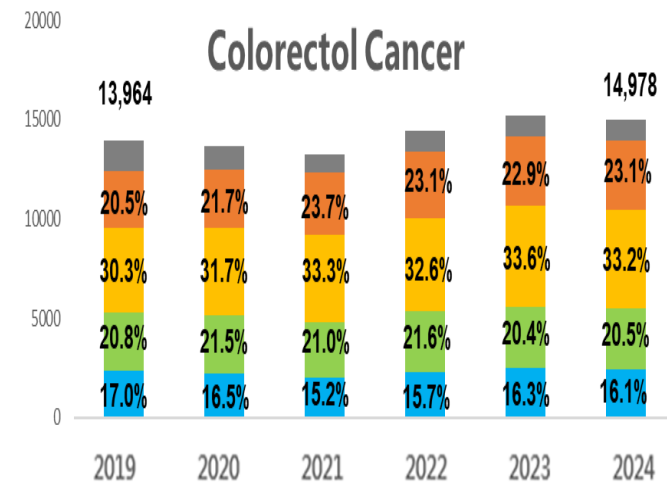
## Lung Cancer



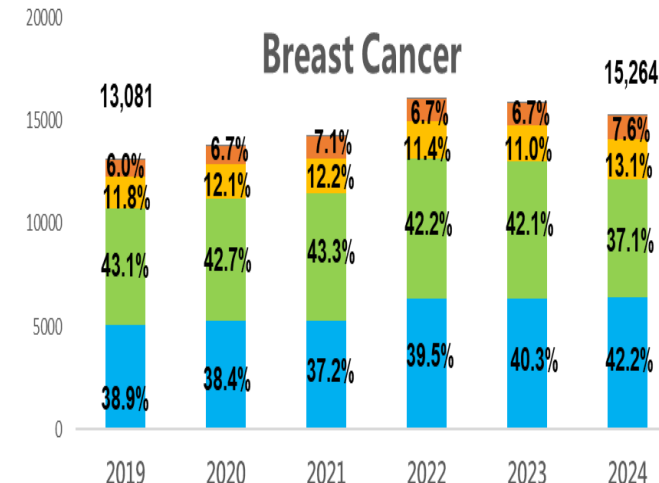
## Liver Cancer



- ✓ According to **Taiwan Cancer Registry data (2017-2021)**, the **5-year relative survival rate** for early-stage cancer of the top 5 cancers is generally **over 90%**, except for oral cancer.
- ✓ Some cancers are difficult to detect at an early stage, resulting in late-stage diagnosis at the time of first detection, such as lung cancer.



## Breast Cancer



■ Stage1 ■ Stage2 ■ Stage3 ■ Stage4 ■ Unknown

Stage	0	1	2	3	4
Lung Cancer	>99.9	94.6	62.1	33.2	13.1
Liver Cancer	76.9	66.7	51.5	12.9	3.3
Colorectal Cancer	93.4	92.7	83.3	71.1	15.4
Breast Cancer	>99.9	>99.9	95.6	80.5	39.4
Oral Cancer	76.0	85.3	75.2	61.3	38.3
Cervical Cancer	99.6	91.5	73.6	55.4	22.5



# Taiwan's National Strategy to Reduce Cancer

健康台灣論壇

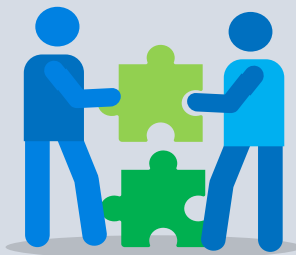
打造台灣成為健康幸福的國家



By 2030,  
cancer mortality rate will be reduced by  $\frac{1}{3}$



Three steps for  
cancer treatment



1 Improving Cancer Early Detection

2 Genetic Testing & Precision Medicine

3 Establish \$10 Billion NTD Cancer New Drug Fund

APRIL 27, 2024  
NATIONAL FORUM  
PRESIDENTIAL SUMMARY





# National Cancer Control Strategies

## Strengthening Precision Medicine Across the Care Continuum

### Health Promotion

- Tobacco Control
- Betel Nut Control
- Alcohol Addiction Treatment
- Exercise Promotion
- National Nutrition Plan
- Healthy Lifestyle

### Evidence-Based Screening

- 4 Major Cancers Screening
- LDCT
- HBV/HCV Screening
- H. pylori Screening\*

### Preventive Treatments

- Hepatitis B vaccine/treatment
- Hepatitis C Eradication
- H. pylori Eradication\*

### Early Diagnosis

- NHI Initiative on Quality Improvement for Cancer Treatment
- Follow-up of Suspected Cases Identified through LDCT

### Precision Treatment

- Next-Generation Sequencing (NGS)
- Targeted Therapy
- Immunotherapy
- Emerging Healthcare



# NHI Cancer Precision Medicine Policy

Funding for  
Genetic Testing  
with Precision  
Medicine

Align with  
International  
Guidelines

Advancing  
Precision and  
Minimally  
Invasive Cancer  
Treatment

Establishing  
Dedicated Units  
and Strengthening  
HTA Capacity

Cancer Drug Fund  
to Reduce Patients'  
Financial Burden

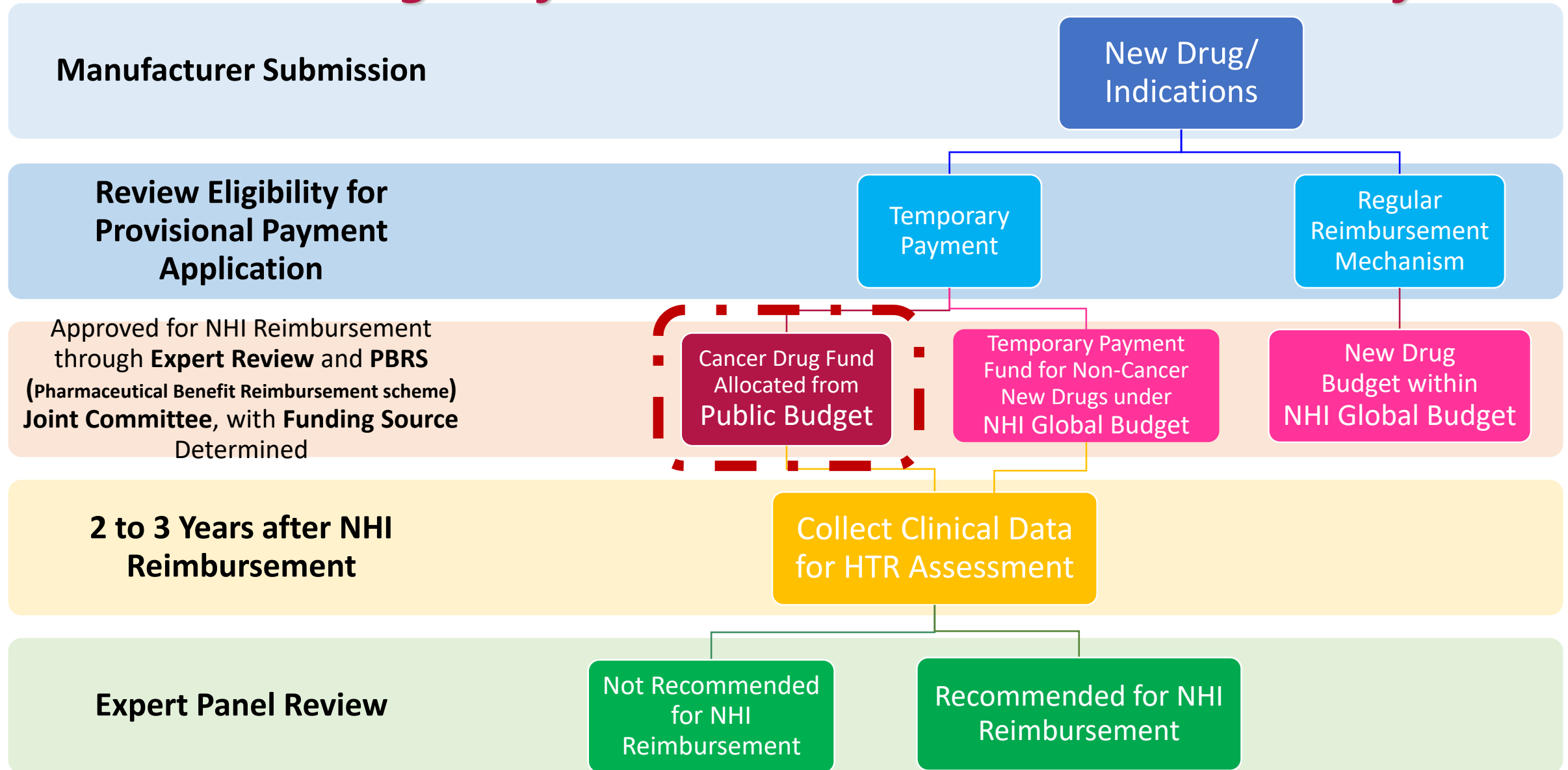
Digital Transformation  
of Treatment with a  
National Data  
Repository





# Reimbursement Pathway for New Drugs

## Balancing Early Access and Financial Sustainability





# TCDF — Phased Implementation Approach

Jan.2023-Dec.2023

## Conditional Listing Mechanism

- ✓ Urgent clinical needs but uncertain in efficacy and safety
- ✓ Temporally pay for 2 years
- ✓ Collect real world data (RWD) or clinical trial results for review

Jan.2024-Dec.2024

## Dedicated Fund within Global Budget

- ✓ Dedicated funding \$2.43 billion NTD for year 2024

2025-

## Independent Funding For TCDF

- ✓ Starting from 2025, the government will allocate \$5 billion NTD (¥22.5 billion) from the public budget to the NHI, specifically for the "Taiwan Cancer Drugs Fund" outside the NHI global budget.
- ✓ Establishing a \$10 billion NTD (¥45 billion) Taiwan Cancer Drug Fund in the future.



# Framework of TCDF

## Applicable Drugs

- New cancer drugs or new indications with clinical efficacy evidence, but have not yet been reimbursed due to global budget constraints
- Other new cancer drugs or new indications for unmet medical needs, recognized by the NHIA

## Financial Control

**Once the expenditure exceeds the budget for the current year, participating companies will bear the excess drug expenses based on the proportion of the amount exceeding the annual agreed quota for each individual drug**

## Benefit Evaluation

**Requires collecting ongoing clinical trial data and real-world data for evaluation within 2 to 3 years, with a maximum duration of 5 years**

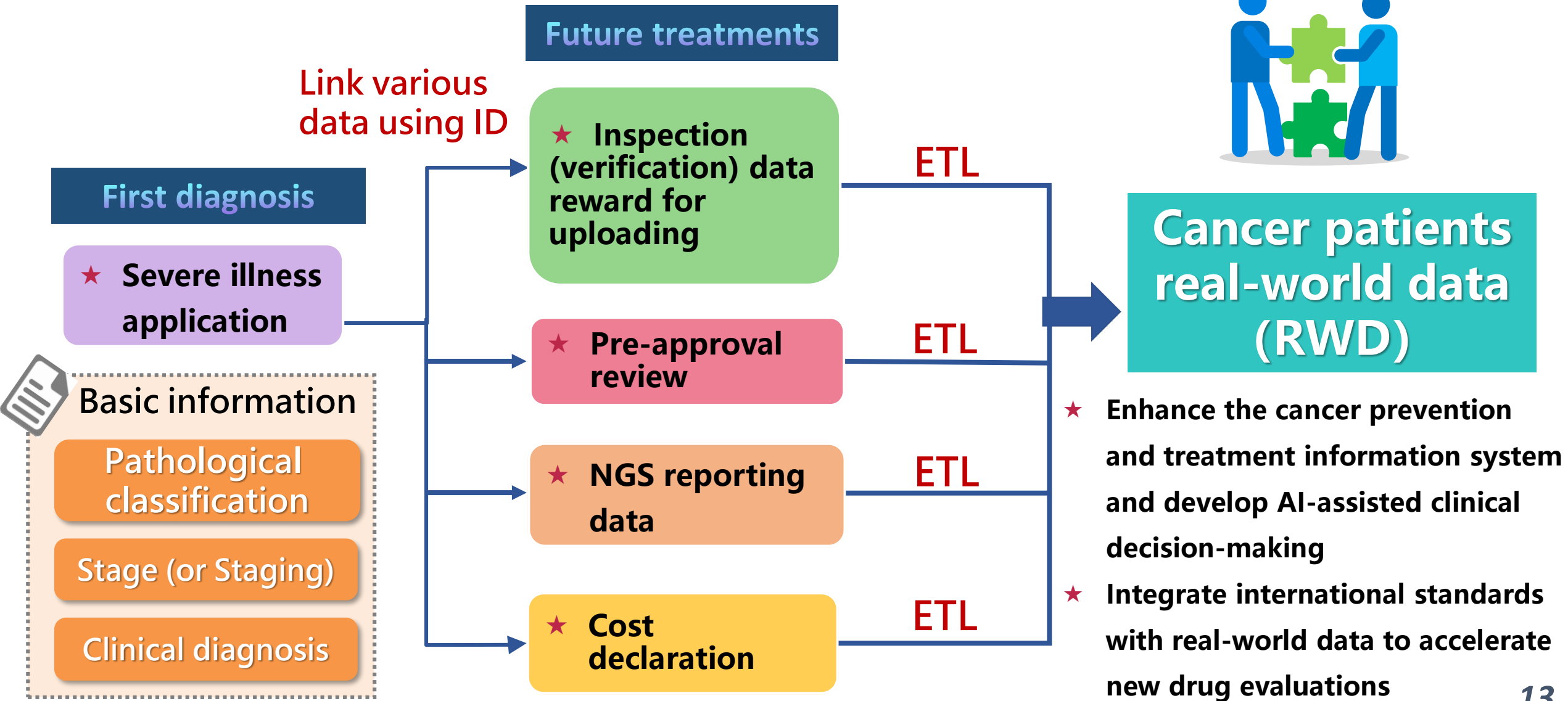
## Information Disclosure

**The Cancer Drugs Fund shall be handled in accordance with The Freedom of Government Information Law**

# Draft Operation Principles of TCDF

Stage	Key Point	Explanation
Submission	Manufacturer Submission	Manufacturers may choose to opt in or opt out of the Provisional Payment Fund .
Document Review	Completeness Check	If all required documents are complete, the manufacturer will be notified to proceed. Incomplete submissions will be returned.
Expert Panel Review	Evaluation Process	If Opted In: Upon receiving the preliminary notification of non-inclusion in the CDF, the manufacturer may submit an appeal with supporting opinions for inclusion. If Not Opted In: Upon receiving the preliminary notification of inclusion in the CDF, the manufacturer shall submit the HTR proposal within 1 month, or submit an appeal for non-inclusion.
Review of Provisional Payment Plan	Review Timeline	If Opted In: After the manufacturer responds with no objection to the preliminary notification, the review meeting for the provisional payment plan will be held within 1 month. If Not Opted In: After the manufacturer submits the HTR proposal, the review meeting for the provisional payment plan will be held within 2 months.
Temporary Effectiveness	Provisional Listing	After approval by the <b>PBRS Joint Committee</b> , provisional reimbursement will take effect.
Fund Management & Payment Regulation	Agreement & Reconciliation	Signing of payment agreements; any amount exceeding the budget cap will be recovered from the manufacturer.
Information Disclosure	Transparency	Information on fund usage will be disclosed publicly in accordance with government regulations.

# Comprehensive Cancer Treatment Data Opens a New Era of Precision Medicine



# Establishing a Precision Medicine Ecosystem

Single Platform for NGS Data Collection, Providing More Precise Clinical Drug Treatments



**NGS files,**  
including: raw  
data, XML, PDF  
report

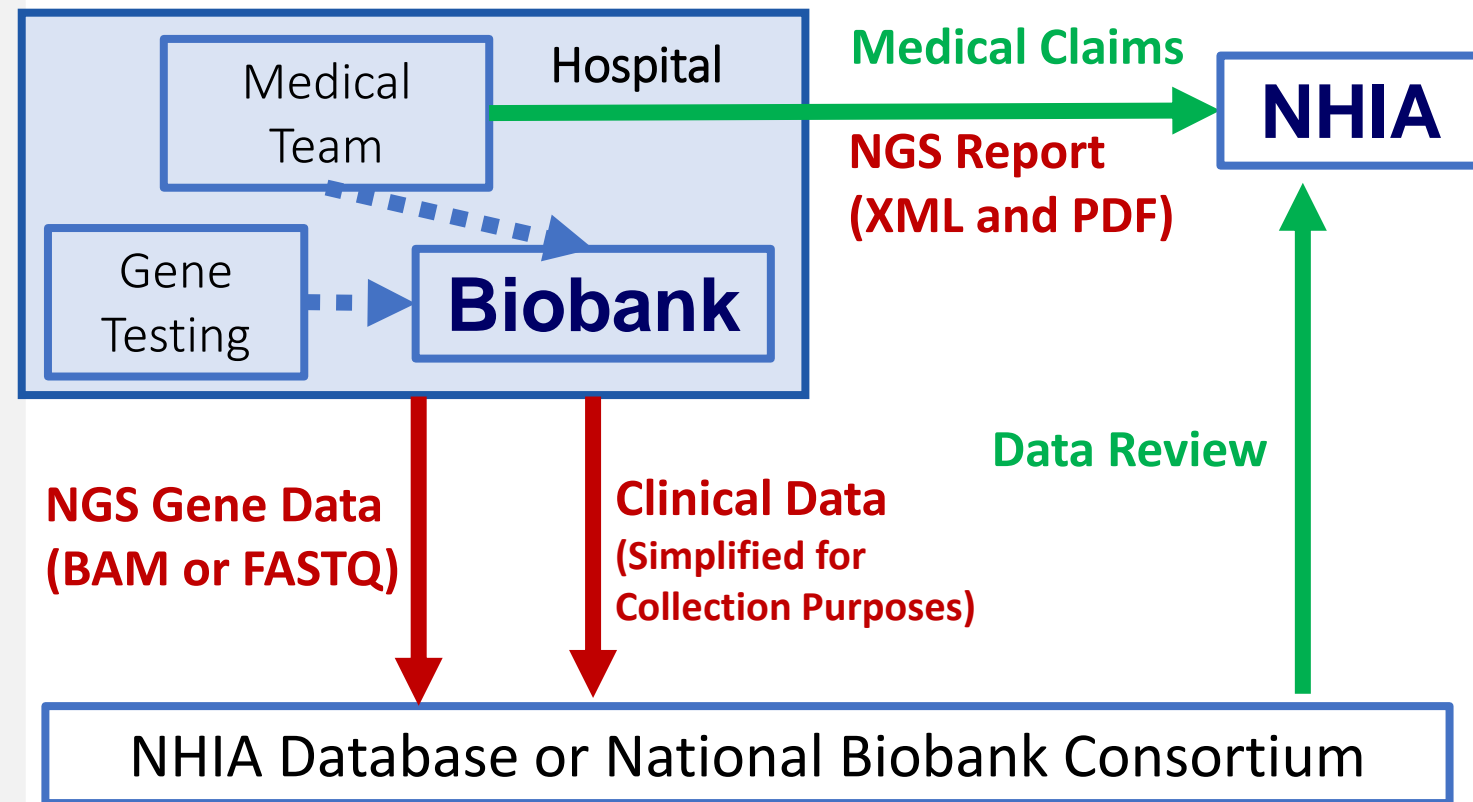
**Medication  
efficacy data,**  
including  
conditional  
listing

Facilitating  
**donated  
medications**

Referring to  
**clinical trials**

- Biobanking
- Medication outcome tracking
- Quality monitoring of testing
- Key clinical data for HTR
- Promotion of research and development in testing and diagnostics
- Facilitating the development of new medical

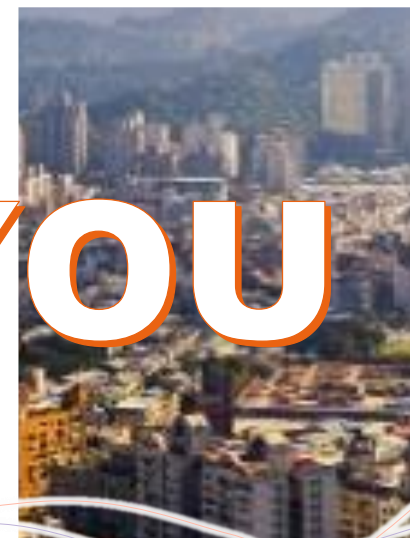
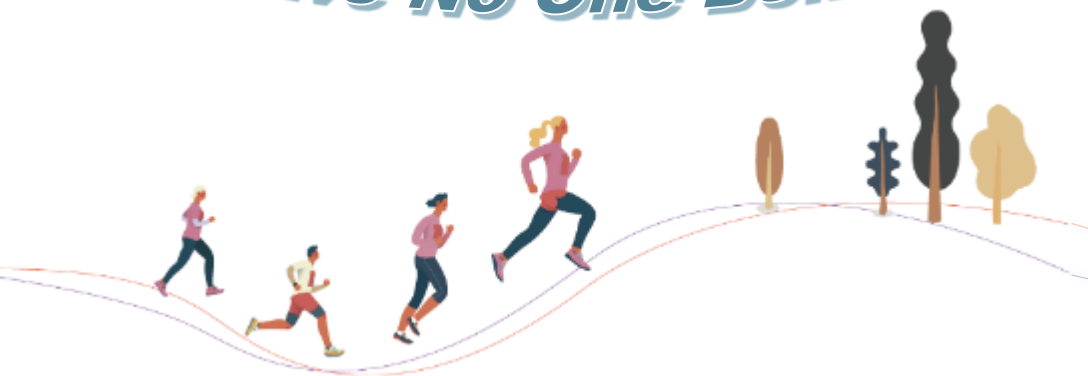
## Informed Consent







**Health for All**  
*Leave No One Behind*



**THANK YOU**