

Public Bill Committee: Health Bill

Written evidence submitted by the Health Tech Alliance

Executive summary

1. [The Health Tech Alliance \(HTA\)](#) is a coalition of leading health technology companies working alongside industry, clinicians and policymakers to champion the responsible adoption of health tech across the NHS. The HTA works to ensure that innovative medical technologies reach the patients who need them most, driving better outcomes and a more efficient, equitable health system.
2. Our membership spans medical devices, diagnostics, digital health and health technology companies of all sizes, including small and medium-sized enterprises (SMEs) that are often at the forefront of clinical innovation but face the greatest barriers to market access in the NHS.
3. The Health Bill proposes a number of measures, including formally abolishing NHSE and empowering Integrated Care Boards (ICBs) as strategic commissioners. Clause 6 also places a duty on the Secretary of State to promote innovation in the provision of health services. The HTA broadly welcomes the ambition behind these intended reforms and see many of the tools developed by our members as key to the success of the proposed NHS modernisation.
4. The HTA believes health technology has an important role to play in achieving the Government's objectives, and urges the Bill to address critical gaps on commissioning. As DHSC and NHS England merge and commissioning authority shifts to ICBs, this clarity is essential. Without it, the Bill risks slowing the adoption of proven health technologies rather than accelerating it.

Route to market for health and medical technology suppliers

5. The Bill mandates ICBs as strategic commissioners but sets no obligation to adopt proven technologies consistently using value-based procurement methodology and provides no defined route to market for health technology suppliers in the new landscape.
6. With regards to the commissioning clauses in the Bill, the Government should ensure that the transition to ICB-led strategic commissioning does not create additional complexity, fragmentation or delay for health tech companies seeking to bring proven technologies to NHS patients.
7. ICBs should be required to give due regard to nationally-evaluated and approved health technologies, including those assessed through NICE, NHS Supply Chain and equivalent national pathways, to prevent a postcode lottery in access.
8. Value-based procurement methodology should be embedded in ICB commissioning duties, ensuring health technologies are evaluated on clinical outcomes and long-term system value, not upfront cost alone.
9. The merged DHSC/NHSE should publish clear guidance on the national commercial and commissioning frameworks ICBs are expected to use, with pan-ICB commissioning offices highlighting health tech market access as a priority use case for regional collaboration, ensuring SME innovators are not disadvantaged.

Conclusion

10. The HTA believes the Bill presents an opportunity to strengthen ICB accountability for the value-based adoption of health tech. It also presents an opportunity to provide suppliers with a clear, straightforward and consistent route to market.
11. In particular, we encourage consideration of measures that set clearer expectations on ICBs to use the new value-based procurement methodology and ultimately reduce variation in the adoption of proven innovation across the health system.