1. For patients with moderate-to-severe plaque psoriasis for whom topical therapies, older systemic therapies, or phototherapy have been ineffective, contraindicated, or not tolerated, is the evidence adequate to demonstrate clinically significant differences in the net health benefits of different TNF alpha inhibitors (infliximab, etanercept, adalimumab)?

If Yes:

1a. The evidence ratings in the ICER report suggest that infliximab and adalimumab provide an equivalent or greater net health benefit compared to etanercept. Do you feel the evidence is adequate to justify this rating?

If No:  Stop and go to question 2.

2. For patients with moderate-to-severe plaque psoriasis for whom topical therapies, older systemic therapies, or phototherapy have been ineffective, contraindicated, or not tolerated, is the evidence adequate to distinguish among the net health benefits of the IL-17A agents (secukinumab, ixekizumab, and brodalumab)?

3. The evidence ratings in the ICER report suggest that brodalumab provides an incremental net health benefit compared to ustekinumab. Do you feel the evidence is adequate to demonstrate this difference?

4. The evidence ratings in the ICER report suggest that ixekizumab and secukinumab provide an equivalent or greater net health benefit compared to ustekinumab. Do you feel the evidence is adequate to justify this rating?

5. Is the evidence adequate to demonstrate that apremilast provides equivalent or greater net health benefit than etanercept?

6. Is the evidence adequate to demonstrate that apremilast provides equivalent or greater net health benefit than any other targeted immune modulators?
7. For each of the following targeted immunotherapies, given the available evidence on net health benefit, the cost of the therapy, and taking into account other benefits, disadvantages, and contextual considerations, in patients with moderate-to-severe plaque psoriasis for whom topical therapies, older systemic therapies, or phototherapy have been ineffective, contraindicated, or not tolerated, what is the long-term value for money of each targeted immunotherapy?

- Adalimumab
- Etanercept
- Infliximab
- Ustekinumab
- Secukinumab
- Ixekizumab
- Brodalumab
- Apremilast