Biologic Therapies for Treatment of Asthma Associated with Type 2 Inflammation: Effectiveness, Value, and Value-based Price Benchmarks

Draft Questions for Deliberation and Voting: November 29, 2018 Public Meeting

These questions are intended for the deliberation of the Midwest CEPAC voting body at the public meeting.

Clinical Evidence

For patients ≥ 12 years with moderate to severe asthma:

1. Is the evidence adequate to demonstrate that the net health benefit of **dupilumab** is superior to that provided by standard of care (ICS plus at least one additional controller medication)?
   
   Yes  
   No

For patients ≥ 12 years with severe asthma and eosinophilic phenotype:

2. Is the evidence adequate to distinguish the net health benefit *between* mepolizumab, reslizumab, and benralizumab?
   
   Yes  
   No

   If NO...

3. Is the evidence adequate to distinguish the net health benefit *between dupilumab* and these three treatments?
   
   Yes  
   No

4. Is the evidence adequate to distinguish the net health benefit *between omalizumab* and these three treatments?
   
   Yes  
   No
Potential Other Benefits and Disadvantages

5. In the treatment of patients ≥ 12 years with moderate to severe asthma, does dupilumab offer one or more of the following potential other benefits or disadvantages compared to best usual care without biologic treatment? (select all that apply)
   a. Dupilumab offers reduced complexity that will significantly improve patient outcomes.
   b. Dupilumab will reduce important health disparities across racial, ethnic, gender, socioeconomic, or regional categories.
   c. Dupilumab will significantly reduce caregiver or broader family burden.
   d. Dupilumab offers a novel mechanism of action or approach that will allow successful treatment of many patients for whom other available treatments have failed.
   e. Dupilumab will have a significant impact on improving patients’ ability to return to work and/or their overall productivity.
   f. There are other important benefits or disadvantages that should have an important role in judgments of the value of this intervention: ________________

Contextual Considerations

6. Are any of the following contextual considerations important in assessing the long-term value for money of dupilumab versus best usual care without biologics? (select all that apply)
   a. This intervention is intended for the care of individuals with a condition of particularly high severity in terms of impact on length of life and/or quality of life.
   b. This intervention is intended for the care of individuals with a condition that represents a particularly high lifetime burden of illness.
   c. This intervention is the first to offer any improvement for patients with this condition.
   d. There is significant uncertainty about the long-term risk of serious side effects of this intervention.
   e. There is significant uncertainty about the magnitude or durability of the long-term benefits of this intervention.
   f. There are additional contextual considerations that should have an important role in judgments of the value of this intervention: ____________________________.

7. Are there important and distinctive other benefits or disadvantages, or unique contextual considerations that apply to any of the other biologic treatments for their labeled population?

   Verbal discussion; no voting.
Long-term Value for Money

For patients with moderate to severe asthma:

8. Given the available evidence on comparative effectiveness and incremental cost-effectiveness, and considering other benefits, disadvantages, and contextual considerations, what is the long-term value for money of treatment with **omalizumab** versus standard of care (ICS plus at least one additional controller medication)?
   
   Low
   Intermediate
   High

9. Given the available evidence on comparative effectiveness and incremental cost-effectiveness, and considering other benefits, disadvantages, and contextual considerations, what is the long-term value for money of treatment with **mepolizumab** versus standard of care (ICS plus at least one additional controller medication)?
   
   Low
   Intermediate
   High

10. Given the available evidence on comparative effectiveness and incremental cost-effectiveness, and considering other benefits, disadvantages, and contextual considerations, what is the long-term value for money of treatment with **reslizumab** versus standard of care (ICS plus at least one additional controller medication)?
    
    Low
    Intermediate
    High

11. Given the available evidence on comparative effectiveness and incremental cost-effectiveness, and considering other benefits, disadvantages, and contextual considerations, what is the long-term value for money of treatment with **benralizumab** versus standard of care (ICS plus at least one additional controller medication)?
    
    Low
    Intermediate
    High

12. Given the available evidence on comparative effectiveness and incremental cost-effectiveness, and considering other benefits, disadvantages, and contextual considerations, what is the long-term value for money of treatment with **dupilumab** versus standard of care (ICS plus at least one additional controller medication)?
    
    Low
    Intermediate
    High