Oral Semaglutide for Type 2 Diabetes:
Effectiveness and Value

Draft Questions for Deliberation and Voting: November 14, 2019 Public Meeting

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

Patient Population for all questions: Adults with Type 2 diabetes mellitus (T2DM) with inadequate glycemic control despite current treatment with antihyperglycemic agent(s).

Clinical Evidence

1. Is the evidence adequate to demonstrate that adding oral semaglutide to ongoing background therapy provides a positive net health benefit?
   - Yes
   - No

2. Is the evidence adequate to demonstrate that the net health benefit of adding oral semaglutide is superior to that provided by adding sitagliptin (Januvia®)?
   - Yes
   - No

3. Is the evidence adequate to demonstrate that the net health benefit of adding oral semaglutide is superior to that provided by adding liraglutide (Victoza®)?
   - Yes
   - No

4. Is the evidence adequate to distinguish the net health benefit of adding oral semaglutide from that provided by adding empagliflozin (Jardiance®)?
   - Yes
   - No

If yes:
4a. Which treatment provides greater net health benefit?
   a. Oral semaglutide
   b. Empagliflozin
Potential Other Benefits and Disadvantages and Contextual Considerations

Potential Other Benefits and Disadvantages

5. For patients currently receiving ongoing background therapy, does adding treatment with oral semaglutide offer one or more of the following potential “other benefits or disadvantages.” (select all that apply)¹
   a. This intervention offers reduced complexity compared to liraglutide that will significantly improve patient outcomes.
   b. 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 oral semaglutide? (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. There is significant uncertainty about the long-term risk of serious side effects of this intervention.
   d. There is significant uncertainty about the magnitude or durability of the long-term benefits of this intervention.
   e. There are additional contextual considerations that should have an important role in judgments of the value of this intervention: __________________________.

¹ Votes will be taken on an abbreviated list of potential other benefits and contextual considerations. Although ICER’s value framework identifies a broader list, the omitted options were determined not to apply to the treatment in question.
Long-term Value for Money

7. 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 oral semaglutide versus ongoing background therapy alone?
   a. Low long-term value for money at current pricing
   b. Intermediate long-term value for money at current pricing
   c. High long-term value for money at current pricing

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2 Value votes for oral semaglutide (Novo Nordisk) will not be taken without a known price.