

Mepolizumab for the Treatment of Severe Asthma with Eosinophilia: Effectiveness, Value, and Value-Based Price Benchmarks

Questions for Deliberation: February 12, 2016 Public Meeting

1.	For patients with severe asthma and with an eosinophilic phenotype, is the evidence adequate
	to demonstrate that the net health benefit of adding <i>mepolizumab to standard of care</i> is
	greater than that of standard of care alone ?

Yes No

- 2. Given the available evidence for patients with severe asthma and with an eosinophilic phenotype, what is the care value* of adding *mepolizumab to standard of care* vs. *standard of care alone*?
 - a. Low b. Intermediate c. High
- 3. Given the available evidence for patients with severe asthma and with an eosinophilic phenotype, what is the provisional health system value** of adding *mepolizumab to standard of care* vs. *standard of care alone*?
 - a. Low b. Intermediate c. High
- * *Care value* is determined by looking at four elements: comparative clinical effectiveness, incremental costs per outcomes achieved, other benefits or disadvantages, and contextual considerations. Care value represents the long-term perspective, at the individual patient level, on patient benefits and the incremental costs to achieve those benefits.
- ** **Provisional health system value** represents a judgment integrating consideration of the long-term care value of a new intervention with an analysis of its potential short-term budget impact if utilization is unmanaged.