



Anti B-Cell Maturation Antigen CAR T-cell and Antibody Drug Conjugate Therapy for Triple Class Refractory Multiple Myeloma

Draft Questions for Deliberation and Voting: April 16, 2021 Public Meeting

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

Clinical Evidence

Patient Population for question 1: Triple-class refractory multiple myeloma patients who have tried at least four prior lines of treatment. Our characterization of the population is consistent with the FDA label.

1. Given the currently available evidence, is the evidence adequate to demonstrate that the net health benefit of **belantamab mafodotin** is superior to that provided by usual care*?

Yes No

Patient Population for questions 2-4: Triple-class refractory multiple myeloma patients who have tried at least three prior lines of treatment. Our characterization of the population for both *ide-cel* and *cilta-cel* is consistent with the entry criteria in the key studies.

2. Given the currently available evidence, is the evidence adequate to demonstrate that the net health benefit of **idecabtagene vicleucel (ide-cel)** is superior to usual care*?

Yes No

3. Given the currently available evidence, is the evidence adequate to demonstrate that the net health benefit of **ciltacabtagene autoleucel (cilta-cel)** is superior to usual care*?

Yes No

4. Is the evidence adequate to distinguish the net health benefit of **idecabtagene vicleucel (ide-cel)** from **ciltacabtagene autoleucel (cilta-cel)**?

Yes No

- a. If the answer to question 4 is yes, which therapy has the greater net health benefit?

a) idecabtagene vicleucel (ide-cel) b) ciltacabtagene autoleucel (cilta-cel)

*usual care is represented by the regimens employed for the relevant populations in the MAMMOTH observational study.

Potential Other Benefits and Contextual Considerations

Please vote on the following contextual considerations relevant for all the new treatments under review:

Question: When making judgments of overall long-term value for money, what is the relative priority that should be given to any effective treatment for triple-class refractory multiple myeloma, on the basis of the following contextual considerations:

1= Very low priority; 2 = Low priority; 3 = Average priority; 4 = High priority; 5= Very high priority

5. Acuity of need for treatment based on the severity of the condition being treated
6. Magnitude of the lifetime impact of the condition being treated

Please vote separately for each treatment under review on the following potential other benefits or disadvantages:

Question: What are the relative effects of belantamab mafodotin versus usual care* on the following outcomes that inform judgment of the overall long-term value for money of belantamab mafodotin?

1= Major negative effect; 2 = Minor negative effect; 3 = No difference; 4 = Minor positive effect; 5 = Major positive effect

7. Patients' ability to achieve major life goals related to education, work, or family life
8. Caregivers' quality of life and/or ability to achieve major life goals related to education, work, or family life
9. Patients' ability to manage and sustain treatment given the complexity of regimen
10. Health inequities

Question: What are the relative effects of idecabtagene vicleucel (ide-cel) and ciltacabtagene autoleucel (cilta-cel) versus usual care* on the following outcomes that inform judgment of the overall long-term value for money of ide-cel and cilta-cel?

1= Major negative effect; 2 = Minor negative effect; 3 = No difference; 4 = Minor positive effect; 5 = Major positive effect

11. Patients' ability to achieve major life goals related to education, work, or family life
12. Caregivers' quality of life and/or ability to achieve major life goals related to education, work, or family life
13. Patients' ability to manage and sustain treatment given the complexity of regimen
14. Health inequities

*usual care is represented by the regimens employed for the relevant populations in the MAMMOTH observational study.

Long-term Value for Money

15. 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 at current pricing with **belantamab mafodotin** versus usual care*?
 - a. Low long-term value for money at current prices
 - b. Intermediate long-term value for money at current prices
 - c. High long-term value for money at current prices

*usual care is represented by the regimens employed for the relevant populations in the MAMMOTH observational study.