Clinical Evidence

1. For adults and adolescents with severe asthma, is the evidence adequate to demonstrate that the net health benefit of tezepelumab added to standard-of-care therapy without biologics, is superior to that provided by standard-of-care therapy alone?

   Yes  No

2. For adults and adolescents with severe eosinophilic asthma, is the evidence adequate to distinguish the net health benefit provided by tezepelumab from that provided by dupilumab?

   Yes  No

   a. If the answer to question 2 is yes, which therapy has the greater net health benefit?

      a) tezepelumab  b) dupilumab

3. For adults and adolescents with severe allergic asthma, is the evidence adequate to distinguish the net health benefit provided by tezepelumab from that provided by omalizumab?

   Yes  No

   a. If the answer to question 3 is yes, which therapy has the greater net health benefit?

      a) tezepelumab  b) omalizumab

4. For adults with steroid-dependent asthma, is the evidence adequate to distinguish the net health benefit provided by tezepelumab from that provided by dupilumab?

   Yes  No

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

      a) tezepelumab  b) dupilumab
Contextual Considerations and Potential Other Benefits or Disadvantages

When making judgments of overall long-term value for money, what is the relative priority that should be given to any effective treatment for severe asthma, 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 of individual patients based on short-term risk of death or progression to permanent disability
6. Magnitude of the lifetime impact on individual patients of the condition being treated
7. Other (as relevant):

What are the relative effects of tezepelumab versus standard-of-care alone on the following outcomes that inform judgment of the overall long-term value for money of tezepelumab?

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

8. Patients’ ability to achieve major life goals related to education, work, or family life
9. Caregivers’ quality of life and/or ability to achieve major life goals related to education, work, or family life
10. Patients’ ability to manage and sustain treatment given the complexity of regimen
11. Society’s goal of reducing health inequities
12. Other (as relevant):

Long-term Value for Money

13. 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 tezepelumab versus standard-of-care alone?
   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

*The CEPAC will vote on these questions if there is a net price available for these treatments by the time of the public meeting.