Midomafetamine-Assisted Psychotherapy (MDMA-AP) for Post-Traumatic Stress Disorder (PTSD)

Questions for Deliberation and Voting: May 30th 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 a diagnosis of moderate-to-severe PTSD; patients may be receiving ongoing therapy and/or medications such as SSRI antidepressants.

Clinical Evidence

1. Is current evidence adequate to demonstrate that the net health benefit of MDMA-AP is superior to that of not treating with MDMA-AP?

   Yes  No

2. Is the current evidence adequate to demonstrate that the net health benefit of MDMA-AP is superior to that of short-term trauma-focused psychotherapies (TFP)?

   Yes  No

Benefits Beyond Health and Special Ethical Priorities

To help inform judgments of overall long-term value for money, please indicate your level of agreement with the following statements:

1=Strongly Disagree; 2=Disagree; 3=Neutral; 4=Agree; 5=Strongly Agree

3. There is substantial unmet need despite currently available treatments.

4. This condition is of substantial relevance for people from a racial/ethnic group that have not been equitably served by the healthcare system.
To help inform judgments of overall long-term value for money, please indicate your level of agreement with the following statements based on the relative effects of MDMA-AP versus not treating with MDMA-AP:

1=Strongly Disagree; 2=Disagree; 3=Neutral; 4=Agree; 5=Strongly Agree

5. The treatment is likely to produce substantial improvement in caregivers’ quality of life and/or ability to pursue their own education, work, and family life.
6. The treatment offers a substantial opportunity to improve access to effective treatment by means of its mechanism of action or method of delivery.
7. Other: as determined pre-meeting by ICER team based on input from patients, clinical experts, and appraisal committee members

Long-Term Value for Money

8. Given the available evidence on comparative clinical effectiveness and incremental cost effectiveness, and considering benefits beyond health and special ethical priorities, what is the long-term value for money of MDMA-AP versus not treating with MDMA-AP? *
   a. High long-term value for money at assumed pricing.
   b. Intermediate long-term value for money at assumed pricing.
   c. Low long-term value for money at assumed pricing.

*This vote will only be taken if a price becomes available for MDMA-AP.