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Upcoming EU-HTA: How can Pharmaceutical Industry prepare? Now!

25th DGRA Annual Congress, May 4th and 5th, 2023 in Bonn

Regulatory decisions already have a huge impact on Market Access

Anecdotal evidence from Germany

1. Dosing recommendations and reference pricing in Germany
2. Dosing recommendations and cost for leftover
3. Treatment duration and cost per therapy
4. Hybrid applications
5. List of combination partners
6. Stipulations of regulatory agencies (study design, indirect comparison)
7. Wording of label
8. …

Agenda

The upcoming challenge

Status Quo

Key points for preparation

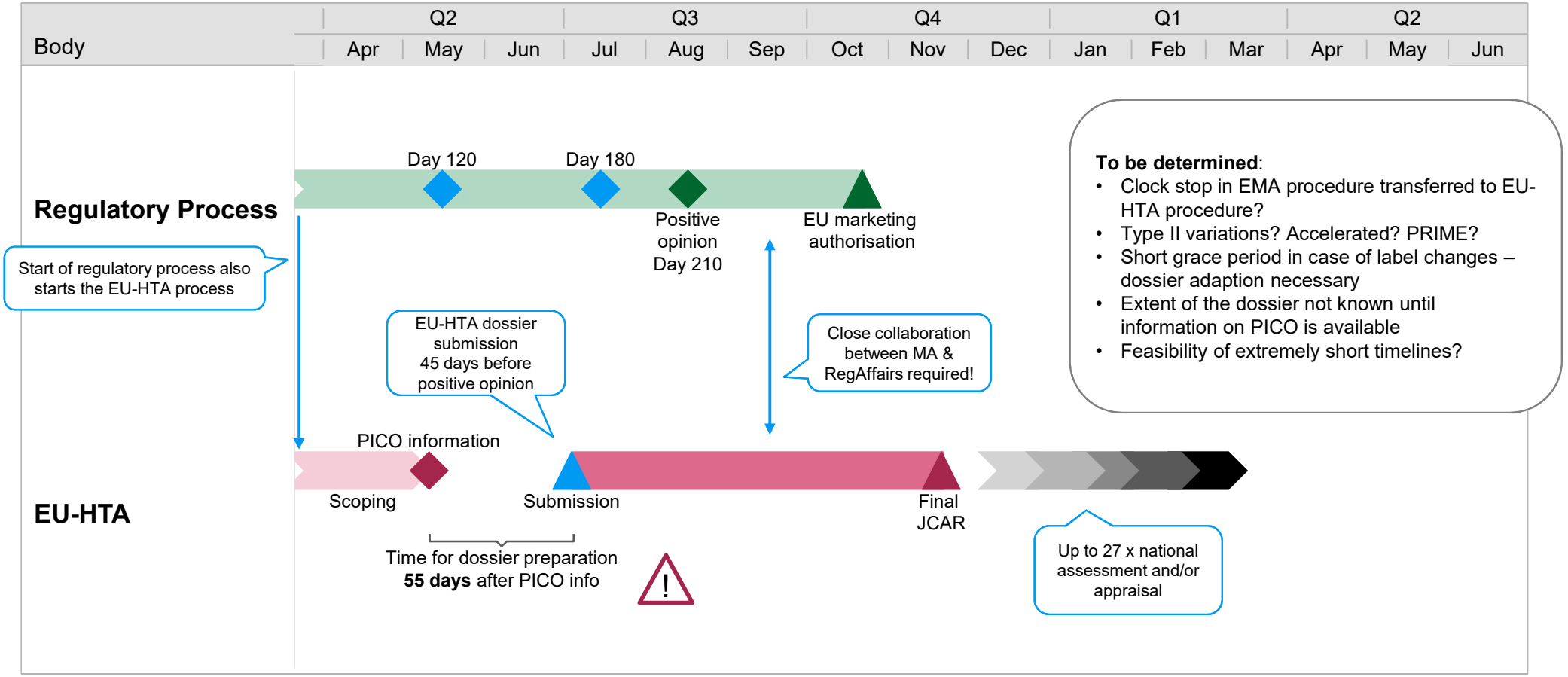
EU-HTA will be mandatory for all new active substances in oncology and ATMPs with a MAA submitted after Jan 12, 2025, and subsequent new indications

Legal framework for EU-HTA

- **Chapter II, Section 1, Article 7, 1/1a):** "*for which the application for a marketing authorisation is submitted in accordance with that Regulation **after** the relevant dates set out in paragraph 2 of this Article, and for which that application is in compliance with Article 8(3) of Directive 2001/83/EC*"
- **Chapter II, Section 1, Article 7, 2):** "***12 January 2025**, for medicinal products with new active substances (…) for (…) the **treatment of cancer** and medicinal products which are regulated as **advanced therapy medicinal products** (…)*"
- **Chapter II, Section 1, Article 7, 1/1b):** "*(…) subject to joint clinical assessments: medicinal products (…) **for which a joint clinical assessment report has been published**, (…) for a variation to an existing marketing authorisation which **corresponds to a new therapeutic indication***"
- **Chapter II, Section 1, Article 9, 1a/1b):** "*… a joint clinical assessment report that **shall not contain any value judgement or conclusions on the overall clinical added value** …*"
- **Chapter II, Section 1, Article 13:** "*… **Member States shall**: (a) **give due consideration to the published joint clinical assessment reports** and (…) (d) **not request** at the national level information, data, analyses or other evidence that **has been submitted** … at Union level (…)*"

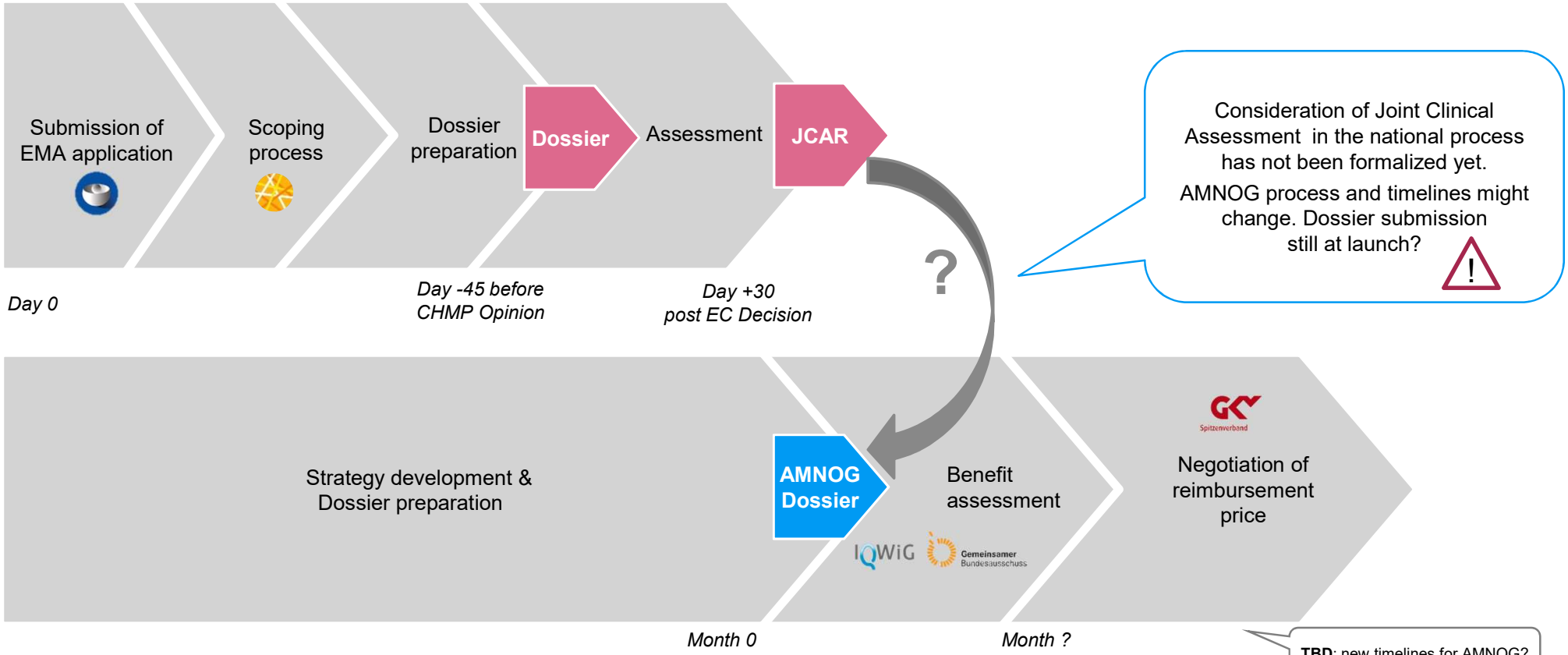
In a (regulatory) best case scenario companies have only 55 calendar days to submit an EU-HTA dossier once the final PICOs are announced

Scenario: no clock stops during EMA process



Timelines are being discussed in EUnetHTA 21's hands-on group and are subject to change.

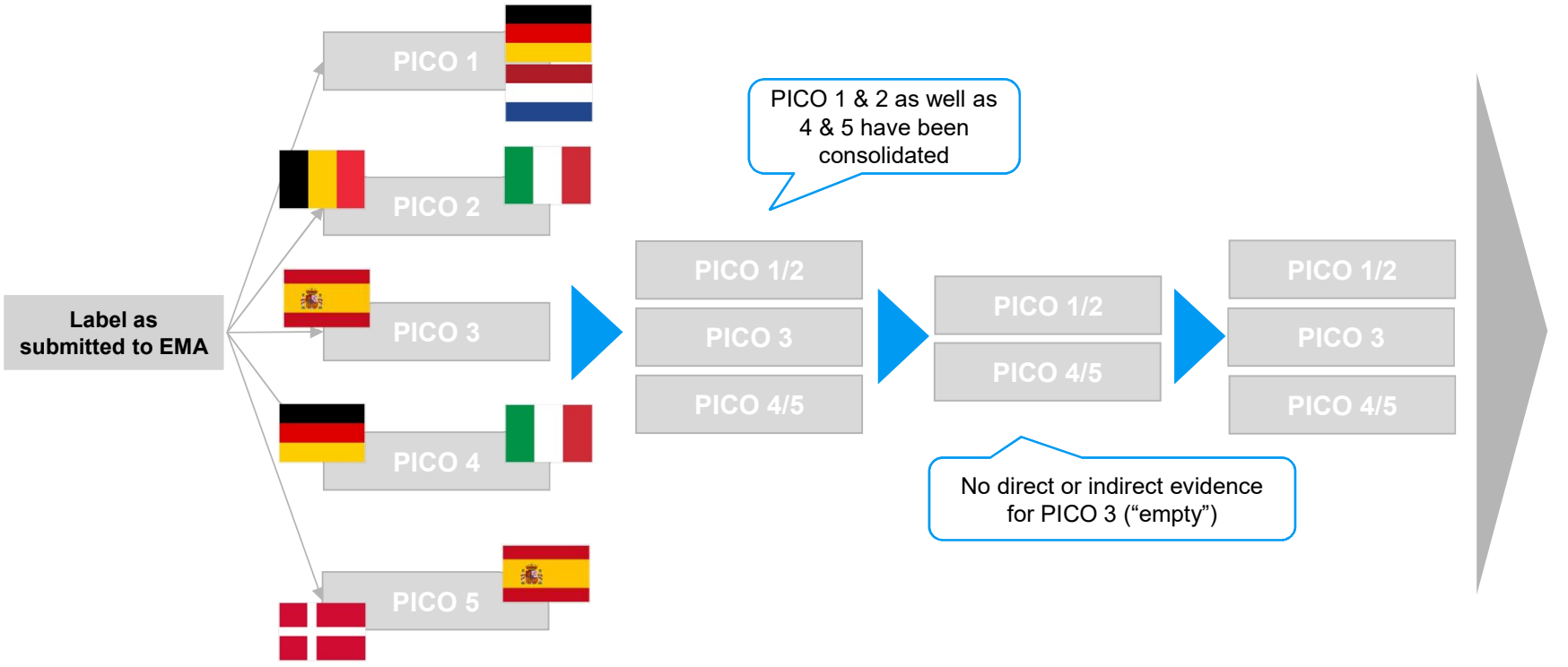
Launch immediately after approval requires preparation of EU-HTA dossier and AMNOG dossier in parallel



AMNOG: *Arzneimittelmarktneuordnungsgesetz* (Act on the Reform of the Market for Medicinal Products); G-BA: *Gemeinsamer Bundesausschuss* (Federal Joint Committee); GKV-SV: *Spitzenverband Bund der Krankenkassen* (National Association of Statutory Health Insurance Funds); IQWiG: *Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen* (Institute for Quality and Efficiency in Health Care)

As every European country might have different PICO(s) schemes, EU-HTA requires their consolidation

Please note: number of PICOs is not limited!



National HTA body will chose the corresponding PICO. The actual benefit assessment will be solely based on the “national PICO”.

Evidence submitted that corresponds to other PICOs does not need to be considered.

Responsibility for derivation of additional benefit lies with the national HTA bodies.

CAVEAT: The national PICO is not known

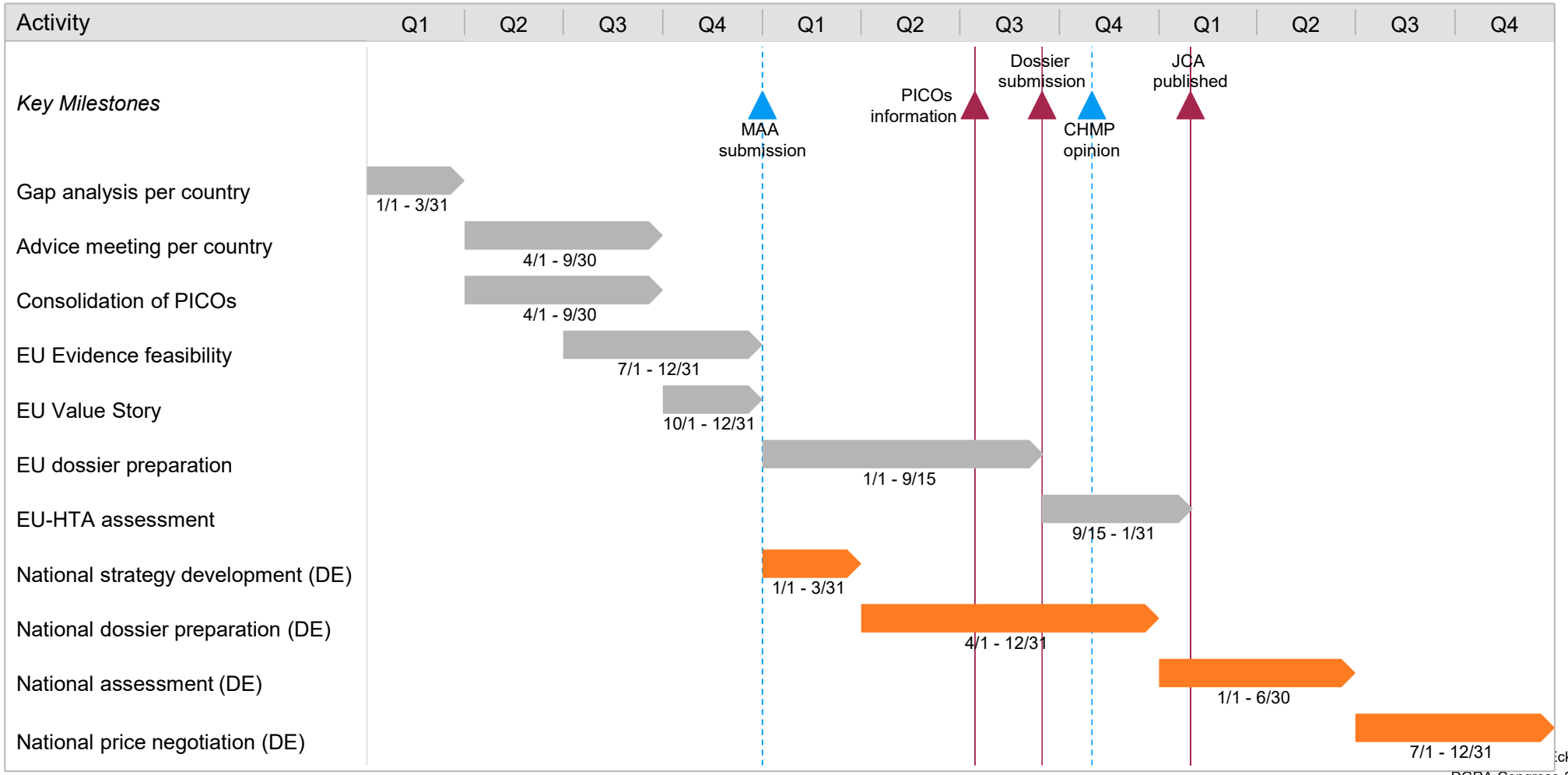
Schematic illustration of the process of PICO-survey and consolidation.

Potential PICO(s) for a specific country can be (and should) be discussed with national HTA-agencies in an Early Scientific Advice – ideally prior defining pivotal study design

General requirements for evidence in HTA

Population	For which population is evidence needed?
Intervention	How should the new product be used in the evidence submitted for EU-HTA?
Comparator	What should the new product be compared with? How should the comparator be used in the evidence submitted for EU-HTA?
Outcome	Which endpoints should be covered in the evidence submitted for EU-HTA?
Study Design	What study design is required for the evidence submitted to HTA? What study duration is required for the evidence submitted to HTA?

So, we are speaking of a 36-month long Market Access process – and even more when giving input to pivotal study design



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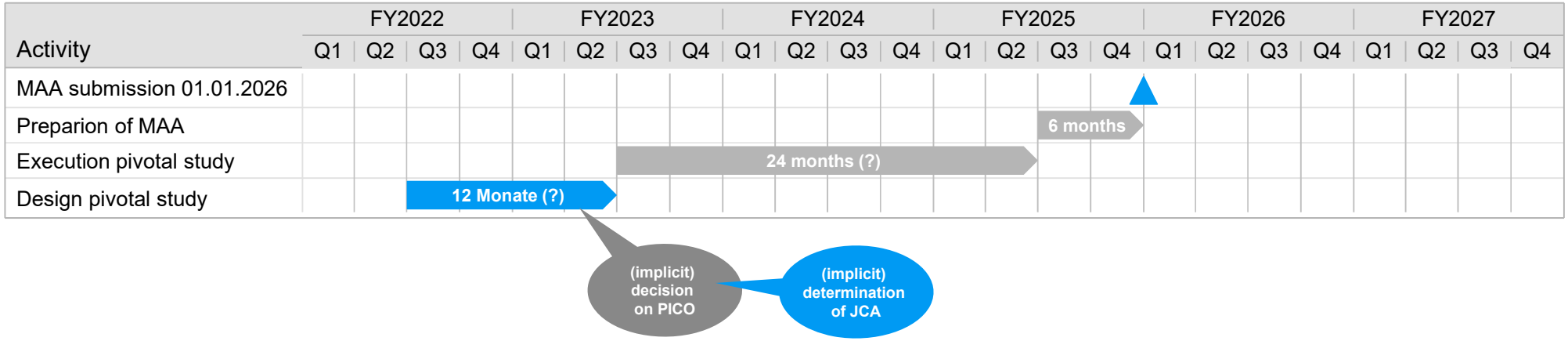
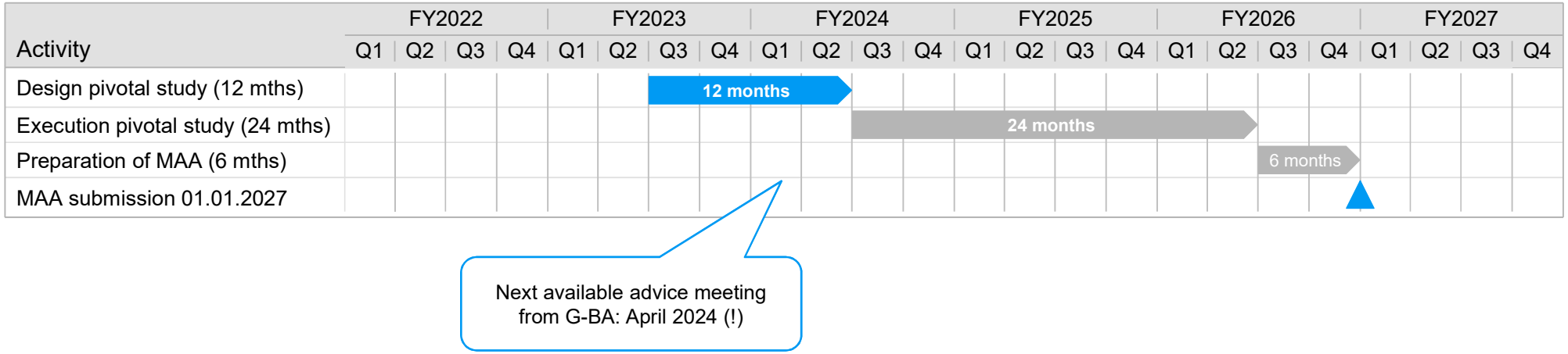
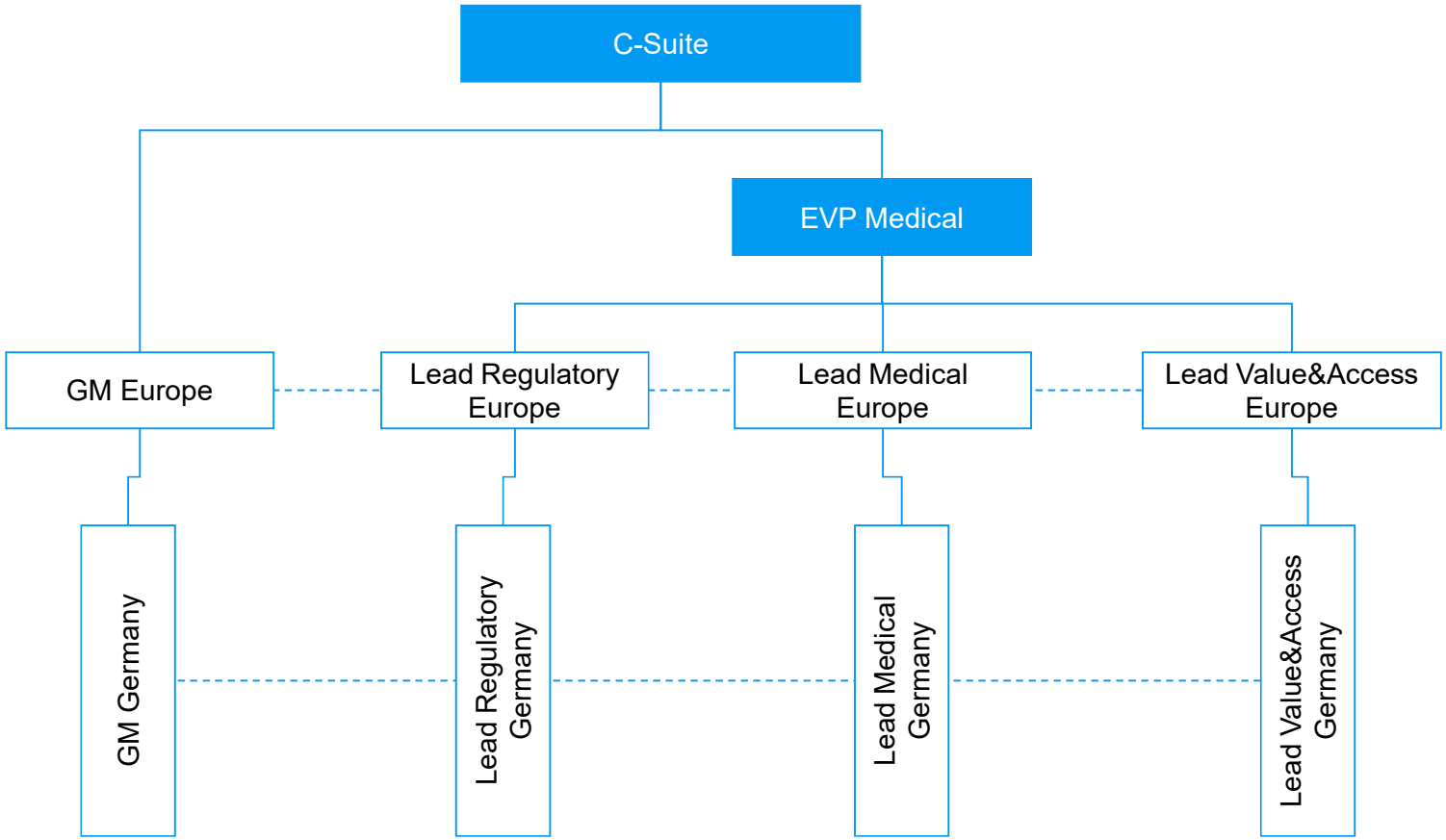
Let’s assume you plan for a MAA submission in Jan 2026, you should have started anticipating EU-HTA when planning pivotal study design, i.e. in (mid) 2022



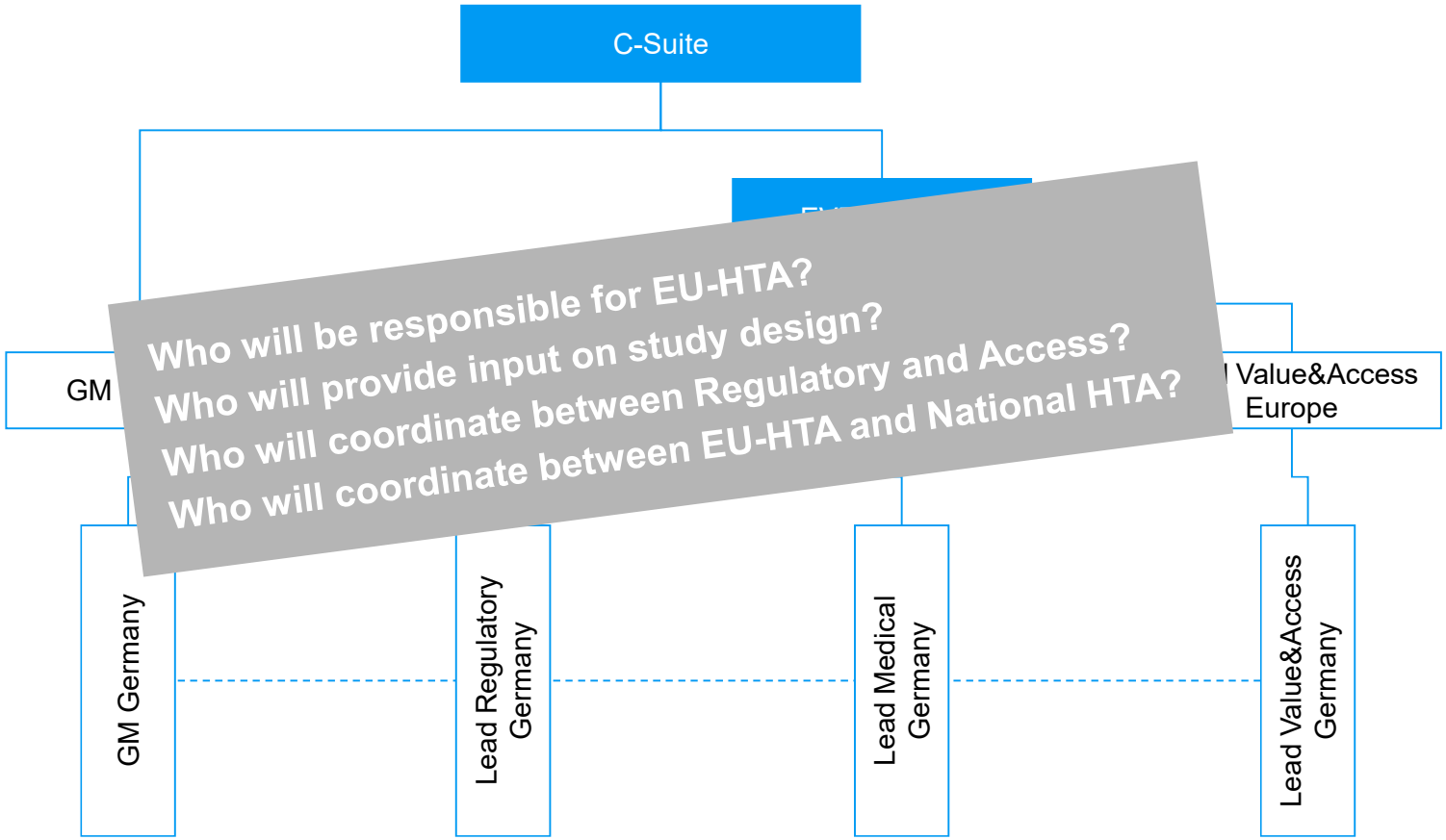
Starting now with preparing for EU-HTA will be more in line for a MAA submission in 2027



Many companies are organized in functional direction



But is this still appropriate for EU-HTA?



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Preparation includes Organization, Workflows, Pipeline planning, and Monitoring of ongoing EU-HTA activities

Organization

- Final responsibility
- Existing vs. new organization
- Statistics as potential bottleneck

Workflow

Dry run on:

- National phase: PICO identification, Gap-analysis, national HTA dossier development
- European phase: Information sharing, PICO consolidation, EU-HTA dossier development, alignment of dossiers

Pipeline

- Assessment: EU-HTA vs. national assessment
- HTA planning per asset and indication
  - Resources
  - Responsibilities
  - Timeline
- Ad hoc approach and long-term preparation

Monitoring

- Guideline development by EUnetHTA
- Lessons learned, especially
  - PICO consolidation, early advice
  - Adaptation to regulatory dynamics
  - Endpoints
  - RWE
  - Indirect Comparison

Thanks for your attention!

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