

Resolution



**of the Federal Joint Committee (G-BA) on an
Amendment of the Pharmaceuticals Directive
(AM-RL):**

**Annex XII – Benefit Assessment of Medicinal
Products with New Active Ingredients According
to Section 35a SGB V Venetoclax (New
Therapeutic Indication: Chronic Lymphocytic
Leukaemia, First-Line, in Combination with
Obinutuzumab)**

of 15 October 2020

At its session on 15 October 2020 the Federal Joint Committee (G-BA) resolved to amend the Pharmaceuticals Directive, (AM-RL) in the version dated 18 December 2008/22 January 2009 (Federal Gazette, BAnz. No. 49a of 31 March 2009), as last amended on DD Month YYYY (Federal Gazette, BAnz AT DD MM YYYY BX), as follows:

- I. **In Annex XII, the following information shall be added after No. 4 to the information on the benefit assessment of venetoclax in accordance with the resolution of 16 May 2019:**

Venetoclax

Resolution of: 15 October 2020
Entry into force on: 15 October 2020
Federal Gazette, BAnz AT DD MM YYYY Bx

New therapeutic indication (according to the marketing authorisation of 9 March 2020):

Venclyxto in combination with obinutuzumab is indicated for the treatment of adult patients with previously untreated chronic lymphocytic leukaemia (CLL).

1. Additional benefit of the medicinal product in relation to the appropriate comparator therapy

- a) Adult patients with previously untreated chronic lymphocytic leukaemia who are eligible for therapy with fludarabine in combination with cyclophosphamide and rituximab (FCR)

Appropriate comparator therapy:

- Fludarabine in combination with cyclophosphamide and rituximab (FCR)

Extent and probability of the additional benefit of venetoclax in combination with obinutuzumab compared with the appropriate comparator therapy:

An additional benefit is not proven.

- b) Adult patients with previously untreated chronic lymphocytic leukaemia who are not eligible for therapy with FCR

Appropriate comparator therapy:

- Bendamustine in combination with rituximab
or
- Chlorambucil in combination with rituximab or obinutuzumab

Extent and probability of the additional benefit of venetoclax in combination with obinutuzumab compared with the appropriate comparator therapy:

An additional benefit is not proven.

- c) Adult patients with previously untreated chronic lymphocytic leukaemia with 17p deletion and/or TP53 mutation or for whom chemo-immunotherapy is not indicated for other reasons

Appropriate comparator therapy:

- Ibrutinib

Extent and probability of the additional benefit of venetoclax in combination with obinutuzumab compared with the appropriate comparator therapy

An additional benefit is not proven.

Study results according to endpoints:¹

- a) Adult patients with previously untreated chronic lymphocytic leukaemia who are eligible for therapy with fludarabine in combination with cyclophosphamide and rituximab (FCR)

There is no data that would allow for the assessment of the additional benefit.

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ Risk of bias	Summary
Mortality	∅	No data available.
Morbidity	∅	No data available.
Health-related quality of life	∅	No data available.
Side effects	∅	No data available.
Explanations: ↑: statistically significant and relevant positive effect with low/unclear reliability of data ↓: statistically significant and relevant negative effect with low/unclear reliability of data ↑↑: statistically significant and relevant positive effect with high reliability of data ↓↓: statistically significant and relevant negative effect with high reliability of data ↔: no statistically significant or relevant difference ∅: There are no usable data for the benefit assessment. n.a.: not assessable		

- b) Adult patients with previously untreated chronic lymphocytic leukaemia who are not eligible for therapy with FCR

There is no data that would allow for the assessment of the additional benefit.

¹ Data from the dossier assessment of the IQWiG (A20-39) and the addendum (A20-76) unless otherwise indicated.

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ Risk of bias	Summary
Mortality	n.a.	There are no evaluable data.
Morbidity	n.a.	There are no evaluable data.
Health-related quality of life	n.a.	There are no evaluable data.
Side effects	n.a.	There are no evaluable data.
Explanations: ↑: statistically significant and relevant positive effect with low/unclear reliability of data ↓: statistically significant and relevant negative effect with low/unclear reliability of data ↑↑: statistically significant and relevant positive effect with high reliability of data ↓↓: statistically significant and relevant negative effect with high reliability of data ↔: no statistically significant or relevant difference ∅: There are no usable data for the benefit assessment. n.a.: not assessable		

- c) Adult patients with previously untreated chronic lymphocytic leukaemia with 17p deletion and/or TP53 mutation or for whom chemo-immunotherapy is not indicated for other reasons

There is no data that would allow for the assessment of the additional benefit.

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ Risk of bias	Summary
Mortality	n.a.	There are no evaluable data.
Morbidity	n.a.	There are no evaluable data.
Health-related quality of life	n.a.	There are no evaluable data.
Side effects	n.a.	There are no evaluable data.
Explanations: ↑: statistically significant and relevant positive effect with low/unclear reliability of data ↓: statistically significant and relevant negative effect with low/unclear reliability of data ↑↑: statistically significant and relevant positive effect with high reliability of data ↓↓: statistically significant and relevant negative effect with high reliability of data ↔: no statistically significant or relevant difference ∅: There are no usable data for the benefit assessment. n.a.: not assessable		

2. Number of patients or demarcation of patient groups eligible for treatment

- a) Adult patients with previously untreated chronic lymphocytic leukaemia who are eligible for therapy with fludarabine in combination with cyclophosphamide and rituximab (FCR)

approx. 1810 patients

- b) Adult patients with previously untreated chronic lymphocytic leukaemia who are not eligible for therapy with FCR

approx. 810 patients

- c) Adult patients with previously untreated chronic lymphocytic leukaemia with 17p deletion and/or TP53 mutation or for whom chemo-immunotherapy is not indicated for other reasons

approx. 470 patients

3. Requirements for a quality-assured application

The requirements in the product information are to be taken into account. The European Medicines Agency (EMA) provides the contents of the product information (summary of product characteristics, SmPC) for Venclyxo (active ingredient: venetoclax) at the following publicly accessible link (last access: 7 May 2020):

https://www.ema.europa.eu/documents/product-information/venclyxo-epar-product-information_de.pdf

Treatment with venetoclax in combination with obinutuzumab should only be initiated and monitored by specialists in internal medicine, haematology, and oncology who are experienced in the treatment of patients with chronic lymphocytic leukaemia.

4. Treatment costs

Annual treatment costs:

- a) Adult patients with previously untreated chronic lymphocytic leukaemia who are eligible for therapy with fludarabine in combination with cyclophosphamide and rituximab (FCR)

Designation of the therapy	Annual treatment costs/patient
Medicinal product to be assessed:	
Venetoclax	€ 63,767.07
Obinutuzumab	€ 27,196.88
Additionally required SHI services	€ 71.21
Total	€ 91,035.16
Appropriate comparator therapy:	
Fludarabine + cyclophosphamide + rituximab (FCR)	
Fludarabine	€ 1,842.12
Cyclophosphamide	€ 207.48
Rituximab	€ 19,271.12
Additionally required SHI services	€ 41.65
Total	€ 21,362.37

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 September 2020

Costs for additionally required SHI services: not applicable

Other services covered by SHI funds:

Designation of the therapy	Type of service	Costs/unit	Number/cycle	Number/patient/year	Costs/patient/year
Obinutuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 71	Cycle 1: 3 Cycle 2–6: 1	8	€ 568
Fludarabine	Surcharge for the preparation of a parenteral solution containing cytostatic agents	€ 81	3	18	€ 1,458
Cyclophosphamide	Surcharge for the preparation of a parenteral solution	€ 81	3	18	€ 1,458

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
	containing cytostatic agents				
Rituximab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 71	1	6	€ 426

b) Adult patients with previously untreated chronic lymphocytic leukaemia who are not eligible for therapy with FCR

Designation of the therapy	Annual treatment costs/patient
Medicinal product to be assessed:	
Venetoclax	€ 63,767.07
Obinutuzumab	€ 27,196.88
Additionally required SHI services	€ 71.21
Total	€ 91,035.16
Appropriate comparator therapy:	
Bendamustine + rituximab (BR)	
Bendamustine	€ 5,191.20
Rituximab	€ 19,271.12
Additionally required SHI services	€ 41.65
Total	€ 24,503.97
Chlorambucil + rituximab (ClbR)	
Chlorambucil	€ 324.70
Rituximab	€ 19,271.12
Additionally required SHI services	€ 41.65
Total	€ 19,637.47
Chlorambucil + obinutuzumab	
Chlorambucil	€ 324.70
Obinutuzumab	€ 27,196.88
Additionally required SHI services	€ 71.21
Total	€ 27,592.79

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 September 2020

Costs for additionally required SHI services: not applicable

Other services covered by SHI funds:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year
Obinutuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 71	Cycle 1: 3 Cycle 2–6: 1	8	€ 568
Bendamustine	Surcharge for the preparation of a parenteral solution containing cytostatic agents	€ 81	2	12	€ 972
Rituximab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 71	1	6	€ 426

- c) Adult patients with previously untreated chronic lymphocytic leukaemia with 17p deletion and/or TP53 mutation or for whom chemo-immunotherapy is not indicated for other reasons

Designation of the therapy	Annual treatment costs/patient
Medicinal product to be assessed:	
Venetoclax	€ 63,767.07
Obinutuzumab	€ 27,196.88
Additionally required SHI services	€ 71.21
Total	€ 91,035.16
Appropriate comparator therapy:	
Ibrutinib	
Ibrutinib	€ 73,330.06

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 September 2020

Costs for additionally required SHI services: not applicable

Other services covered by SHI funds:

Designation of the therapy	Type of service	Costs/unit	Number/cycle	Number/patient/year	Costs/patient/year
Obinutuzumab	Surcharge for the preparation of a parenteral solution containing monoclonal antibodies	€ 71	Cycle 1: 3 Cycle 2–6: 1	8	€ 568

II. The resolution will enter into force with effect from the day of its publication on the internet on the website of the G-BA on 15 October 2020.

The justification to this resolution will be published on the website of the G-BA at www.g-ba.de.

Berlin, 15 October 2020

Federal Joint Committee
in accordance with Section 91 SGB V
The Chair

Prof. Hecken