

Resolution

of the Federal Joint Committee on an Amendment of the Pharmaceuticals Directive:

Annex XII – Benefit Assessment of Medicinal Products with New Active Ingredients according to Section 35a (SGB V) Tisagenlecleucel (reassessment after the deadline: B-cell acute lymphoblastic leukaemia (ALL), relapsed/ refractory, 0 ≤ 25 years)

of 15 February 2024

At its session on 15 February 2024, 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 by the publication of the resolution of D Month YYYY (Federal Gazette, BAnz AT DD.MM.YYYY BX), as follows:

I. Annex XII is amended as follows:

- 1. The information on tisagenlecleucel in the version of the resolution of 17 September 2020 (BAnz AT 27.10.2020 B2) is repealed.
- 2. In Annex XII, the following information shall be added after No. 5 to the information on the benefit assessment of Tisagenlecleucel in accordance with the resolution of 1 December 2022:

Tisagenlecleucel

Resolution of: 15 February 2024 Entry into force on: 15 February 2024 Federal Gazette, BAnz AT DD. MM YYYY Bx

Therapeutic indication (according to the marketing authorisation of 23 August 2018):

Kymriah is indicated for the treatment of paediatric and young adult patients up to and including 25 years of age with B-cell acute lymphoblastic leukaemia (ALL) that is refractory, in relapse post-transplant or in second or later relapse.

Therapeutic indication of the resolution (resolution of 15 February 2024):

See therapeutic indication according to marketing authorisation.

1. Extent of the additional benefit and significance of the evidence

Tisagenlecleucel is approved as a medicinal product for the treatment of rare diseases in accordance with Regulation (EC) No. 141/2000 of the European Parliament and the Council of 16 December 1999 on orphan drugs. In accordance with Section 35a, paragraph 1, sentence 11, 1st half of the sentence SGB V, the additional medical benefit is considered to be proven through the grant of the marketing authorisation.

The Federal Joint Committee (G-BA) determines the extent of the additional benefit for the number of patients and patient groups for which there is a therapeutically significant additional benefit in accordance with Chapter 5 Section 12, paragraph 1, number 1, sentence 2 of its Rules of Procedure (VerfO) in conjunction with Section 5, paragraph 8 AM-NutzenV, indicating the significance of the evidence. This quantification of the additional benefit is based on the criteria laid out in Chapter 5 Section 5, paragraph 7, numbers 1 to 4 of the Rules of Procedure (VerfO).

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia</u> (ALL) that is refractory, in relapse post-transplant or in second or <u>later relapse</u>

Extent of the additional benefit and significance of the evidence of tisagenlecleucel:

Hint for a non-quantifiable additional benefit since the scientific data does not allow quantification

Study results according to endpoints:1

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia (ALL) that is refractory</u>, in relapse post-transplant or in second or later relapse

Summary of results for relevant clinical endpoints

| Endpoint category | Direction of effect/ risk of bias | Summary |
|--------------------------------|---|------------------------------|
| Mortality | n.a. | The data are not assessable. |
| Morbidity | n.a. | The data are not assessable. |
| Health-related quality of life | n.a. | The data are not assessable. |
| Side effects | n.a. | The data are not assessable. |

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

 $\downarrow \downarrow$: statistically significant and relevant negative effect with high reliability of data

∅: No data available.n.a.: not assessable

• **ELIANA study:** single-arm, multicentre, phase II study, data cut-off from 17 November 2022

- ENSIGN study: single-arm, multicentre, phase II study, data cut-off from 24 May 2019
- **B2001X study:** single-arm, multicentre, phase IIIb study, data cut-off from 13 October 2020
- Long-term follow-up study (LTFU A2205B): All patients who have received CAR-T therapy under a treatment protocol of the pharmaceutical company as part of a clinical trial or a managed access programme (in this case, patients from the ELIANA, ENSIGN and B2001X studies), data cut-off from 3 May 2022

¹ Data from the dossier assessment of the G-BA (published on 1. Dezember 2023), and from the amendment to the dossier assessment from 26 January 2024, unless otherwise indicated.

Mortality

| Endpoint | | ELIANA (+ LTFU) | | ENSIGN (+ LTFU) | B2001X (+ LTFU) ^{b)} | | |
|----------------------|-----|---|----|---|-------------------------------|---|--|
| | N | Median survival time in months ^{a)} [95% CI] | N | Median survival time in months ^{a)} [95% CI] | N | Median survival time in months ^{a)} [95% CI] | |
| | | Patients with event n (%) | | Patients with event n (%) | | Patients with event n (%) | |
| Overall survi | val | | | | | | |
| | 98 | 47.6 [19.4; n.r.] 50 (51) | 75 | 28.5 [10.2; n.r.] 41 (54.7) | 74 | 54.7 [38.8; n.r.] 28 (37.8) | |
| | | Kaplan-Meier estimator [95% CI] | | Kaplan-Meier estimator [95% CI] | | Kaplan-Meier estimator [95% CI] | |
| At study month 6 | 98 | 77.2 [67.5; 84.4] | 75 | 78.7 [67.1; 86.5] | 74 | 87.5 [77.3; 93.3] | |
| At study month 12 | 98 | 69.9 [59.6; 78.0] | 75 | 59.9 [47.4; 70.3] | 74 | 78.5 [66.9; 86.5] | |
| At study month 24 | 98 | 58.0 [47.4; 67.2] | 75 | 55.8 [43.4; 66.5] | 74 | 68.7 [56.0; 78.4] | |
| At study month 36 | 98 | 52.3 [41.7; 61.8] | 75 | 43.5 [31.5; 54.8] | 74 | 63.8 [50.9; 74.2] | |
| At study month 48 | 98 | 48.8 [38.2; 58.5] | 75 | 40.2 [28.5; 51.6] | 74 | - | |
| At study month 60 | 98 | 46.3 [35.8; 56.1] | 75 | 40.2 [28.5; 51.6] | 74 | - | |

Morbidity

| Endpoint | | ELIANA | | ENSIGN | B2001X | | |
|---|----|--|----|--|-------------------|--|--|
| | N | Remission rate [95% CI] ^{c)} | | N Remission rate [95% CI] ^{c)} | | Remission rate [95% CI] ^{c)} | |
| | | Patients with event n | | Patients with event n | | Patients with event n | |
| Response (CR/CRi; presented additionally) ^{d)} | | | | | | | |
| Total | 98 | 68.4 [58.2; 77.4] 67 (68.4) | 75 | 60.0 [48.0; 71.1] 45 (60.0) | 74 | 77.0 [65.8; 86] 57 (77.0) | |
| CR | 98 | - 55 (56.1) | 75 | - 38 (50.7) | 74 - 39 (52.7) | | |
| CRi | 98 | - 12 (12.2) | 75 | - 7 (9.3) | 74 | - 18 (24.3) | |

| Endpoint | | ELIANA | | ENSIGN | | B2001X |
|--------------|--|--|----|--|----|--|
| | N Remission rate [95% CI] ^{c)} | | N | Remission rate [95% CI] ^{c)} | N | Remission rate [95% CI] ^{c)} |
| | | Patients with event n | | Patients with event n | | Patients with event n |
| MRD remissi | on (pr | esented additionally) ^{e)} | | | | |
| | 98 67.3 [57.1; 76.5] 66 (67.3) | | 75 | 57.3 [54.3; 78.4] 43 (57.3) | 74 | 40.5 [29.3; 52.6] 30 (40.5) |
| | ELIANA (+ LTFU) | | | ENSIGN (+ LTFU) | | 32001X (+ LTFU) |
| | N | Median time in months ^{a)} [95% CI] | N | Median time in months ^{a)} [95% CI] | N | Median time in months ^{a)} [95% CI] |
| | | Patients with event n (%) | | Patients with event n (%) | | Patients with event n (%) |
| Recurrence-f | ree su | rvival ^{f)} | | | | |
| | 80 | 46.8 [17.8; n.r.] 26 (38.8) | 64 | n.r. [14.8; n.r.] 16 (35.6) | 69 | 51.4 [24.0; n.r.] 23 (40.4) |
| EQ-5D VASg) | | | | | | |
| No usable da | ta ava | ilable | | | | |

Health-related quality of life

| PedsQL ^g |
|---------------------|
|---------------------|

No usable data available

Side effects

| Endpoint | Chemotherapy Lymphocyte depletion | | | genlecleucel infusion Intil study week 8 | Study week 9 to study month 12 | | |
|---|--------------------------------------|---------------------------|-----------------------------|---|-----------------------------------|------------------------------|--|
| | N | Patients with event n (%) | N Patients with event n (%) | | N | Patients with event n (%) | |
| Total adverse events (presented additionally) | | | | | | | |
| ELIANA | 78 | 62 (79.5) | 80 | 79 (98.8) | 75 | 69 (92.0) | |
| ENSIGN | 61 | 51 (83.6) | 64 | 63 (98.4) | 56 | 46 (82.1) | |
| B2001X | 63 | 45 (71.4) | 69 | 69 (100) | 60 | 48 (80.0) | |
| Serious adverse events (SAE) | | | | | • | | |
| ELIANA | 78 | 8 (10.3) | 80 | 54 (67.5) | 75 | 23 (30.7) | |

| Endpoint | | Chemotherapy phocyte depletion | _ | genlecleucel infusion ntil study week 8 | Study week 9 to study month 12 | | |
|---|----------|-----------------------------------|---------|--|-----------------------------------|------------------------------|--|
| | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) | |
| ENSIGN | 61 | 9 (14.8) | 64 | 46 (71.9) | 56 | 21 (37.5) | |
| B2001X | 63 | 10 (15.9) | 69 | 39 (56.5) | 60 | 19 (31.7) | |
| Severe adverse events (CTCAE grade 3/4) ^{h)} | | | | | | | |
| ELIANA | 78 | 30 (38.4) | 80 | 67 (83.8) | 75 | 36 (48.0) | |
| ENSIGN | 61 | 38 (62.3) | 64 | 54 (84.4) | 56 | 26 (46.4) | |
| B2001X | 63 | 27 (42.8) | 69 | 50 (72.5) | 60 | 27 (45.0) | |
| Therapy discont | inuatio | on due to adverse ev | ents | | | | |
| ELIANA | 78 | 1 (1.2) ⁱ⁾ | 80 | n.r. | 75 | n.r. | |
| ENSIGN | 61 | 0 | 64 | n.r. | 56 | n.r. | |
| B2001X | 63 | 0 | 69 | n.r. | 60 | n.r. | |
| Severe adverse | events | according to MedDR | RA (inc | idence ≥ 5% at SOC le | vel) | | |
| Blood and lymph | natic sy | ystem disorders | | | | | |
| ELIANA | 78 | 11 (14.1) | 80 | 39 (48.8) | 75 | 10 (13.3) | |
| ENSIGN | 61 | 18 (29.5) | 64 | 38 (59.4) | 56 | 7 (12.5) | |
| B2001X | 63 | 11 (17.5) | 69 | 22 (31.8) | 60 | 7 (11.7) | |
| Cardiac disorder | S | | | | | | |
| ELIANA | 78 | - | 80 | 8 (10.0) | 75 | - | |
| ENSIGN | 61 | - | 64 | - | 56 | - | |
| B2001X | 63 | - | 69 | - | 60 | - | |
| Gastrointestinal | disord | lers | | | | | |
| ELIANA | 78 | - | 80 | 14 (17.6) | 75 | - | |
| ENSIGN | 61 | - | 64 | 11 (17.2) | 56 | 4 (7.1) | |
| B2001X | 63 | - | 69 | 5 (7.2) | 60 | - | |
| General disorde | rs and | administration site o | onditi | ons | | | |
| ELIANA | 78 | - | 80 | 11 (13.8) | 75 | - | |
| ENSIGN | 61 | - | 64 | 10 (15.7) | 56 | | |
| B2001X | 63 | - | 69 | 8 (11.5) | 60 | - | |
| Hepatobiliary di | sorder | s | | | | | |
| ELIANA | 78 | - | 80 | 6 (7.6) | 75 | - | |
| ENSIGN | 61 | - | 64 | - | 56 | - | |

| Endpoint | | Chemotherapy phocyte depletion | | genlecleucel infusion ntil study week 8 | Study week 9 to study month 12 | | |
|--------------------|--------|-----------------------------------|-------|--|-----------------------------------|------------------------------|--|
| | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) | |
| B2001X | 63 | - | 69 - | | 60 | - | |
| Immune system | disord | lers | | | | | |
| ELIANA | 78 | - | 80 | 43 (53.8) | 75 | 4 (5.3) | |
| ENSIGN | 61 | - | 64 | 22 (34.4) | 56 | - | |
| B2001X | 63 | - | 69 | 23 (33.3) | 60 | - | |
| Infections and in | festat | ions | | | | | |
| ELIANA | 78 | 5 (6.4) | 80 | 19 (23.8) | 75 | 20 (26.7) | |
| ENSIGN | 61 | 4 (6.5) | 64 | 7 (10.9) | 56 | 12 (21.5) | |
| B2001X | 63 | 5 (7.9) | 69 | 11 (15.9) | 60 | 14 (23.4) | |
| Investigations | | | | | | | |
| ELIANA | 78 | 18 (23.0) | 80 | 45 (56.3) | 75 | 16 (21.4) | |
| ENSIGN | 61 | 26 (42.6) | 64 | 44 (68.7) | 56 | 12 (21.4) | |
| B2001X | 63 | 14 (22.2) | 69 | 25 (36.2) | 60 | 10 (16.6) | |
| Metabolism and | nutrit | ion disorders | | | | | |
| ELIANA | 78 | 4 (5.1) | 80 | 29 (36.3) | 75 | 7 (9.3) | |
| ENSIGN | 61 | 8 (13.1) | 64 | 24 (37.5) | 56 | 4 (7.1) | |
| B2001X | 63 | - | 69 | 11 (15.9) | 60 | - | |
| Musculoskeletal | and c | onnective tissue diso | rders | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | - | |
| ENSIGN | 61 | - | 64 | - | 56 | - | |
| B2001X | 63 | - | 69 | - | 60 | - | |
| Nervous system | disord | lers | | | | | |
| ELIANA | 78 | - | 80 | 10 (12.5) | 75 | - | |
| ENSIGN | 61 | - | 64 | 5 (7.9) | 56 | - | |
| B2001X | 63 | - | 69 | 7 (10.1) | 60 | - | |
| Psychiatric disord | ders | | | | | | |
| ELIANA | 78 | - | 80 | 6 (7.5) | 75 | - | |
| ENSIGN | 61 | - | 64 | | 56 | - | |
| B2001X | 63 | - | 69 | - | 60 | - | |

| Endpoint | | Chemotherapy phocyte depletion | | genlecleucel infusion ntil study week 8 | Study week 9 to study month 12 | | | | |
|-----------------------------|---------|-----------------------------------|--------|--|-----------------------------------|------------------------------|--|--|--|
| | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) | | | |
| Renal and urinary disorders | | | | | | | | | |
| ELIANA | 78 | - | 80 | 9 (11.3) | 75 | - | | | |
| ENSIGN | 61 | - | 64 | 7 (10.9) | 56 | - | | | |
| B2001X | 63 | - | 69 | - | 60 | - | | | |
| Respiratory, tho | racic a | nd mediastinal disord | lers | | | | | | |
| ELIANA | 78 | - | 80 | 23 (28.8) | 75 | 6 (8.0) | | | |
| ENSIGN | 61 | 4 (6.6) | 64 | 12 (18.8) | 56 | 3 (5.4) | | | |
| B2001X | 63 | - | 69 | 6 (8.6) | 60 | - | | | |
| Vascular disorde | rs | | | | | | | | |
| ELIANA | 78 | - | 80 | 17 (21.3) | 75 | 5 (6.7) | | | |
| ENSIGN | 61 | 4 (6.6) | 64 | 16 (25.0) | 56 | - | | | |
| B2001X | 63 | - | 69 | 7 (10.1) | 60 | - | | | |
| SAEs according t | o Med | IDRA (incidence ≥ 5% | at SO | C level) | | | | | |
| Blood and lympl | natic s | ystem disorders | | | | | | | |
| ELIANA | 78 | - | 80 | 16 (20.0) | 75 | 4 (5.3) | | | |
| ENSIGN | 61 | 7 (11.5) | 64 | 23 (35.9) | 56 | 5 (8.9) | | | |
| B2001X | 63 | - | 69 | - | 60 | - | | | |
| Cardiac disorder | s | | | | | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | - | | | |
| ENSIGN | 61 | - | 64 | - | 56 | - | | | |
| B2001X | 63 | - | 69 | - | 60 | - | | | |
| Gastrointestinal | disord | lers | | | | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | 5 (6.7) | | | |
| ENSIGN | 61 | - | 64 | 5 (7.8) | 56 | - | | | |
| B2001X | 63 | - | 69 | - | 60 | - | | | |
| General disorde | rs and | administration site of | onditi | ons | | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | - | | | |
| ENSIGN | 61 | | 64 | 4 (6.3) | 56 | 5 (8.9) | | | |
| B2001X | 63 | 5 (7.9) | 69 | 7 (10.1) | 60 | 6 (10.0) | | | |

| Endpoint | Lyn | Chemotherapy nphocyte depletion | Tis | agenlecleucel infusion until study week 8 | Sti | udy week 9 to study month 12 |
|-----------------|--------|---------------------------------|-------|--|-----|---------------------------------|
| | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) |
| Immune syste | m dis | orders ^{j)} | | | | |
| ELIANA | 78 | - | 80 | 50 (62.5) | 75 | - |
| ENSIGN | 61 | - | 64 | 41 (64.1) | 56 | - |
| B2001X | 63 | - | 69 | 28 (40.6) | 60 | - |
| Infections and | infes | tations | | | | |
| ELIANA | 78 | - | 80 | 11 (13.8) | 75 | 16 (21.3) |
| ENSIGN | 61 | - | 64 | 9 (14.1) | 56 | 12 (21.4) |
| B2001X | 63 | 4 (6.3) | 69 | - | 60 | 13 (21.7) |
| Metabolism a | nd nut | trition disorders | | | | |
| ELIANA | 78 | - | 80 | 4 (5.0) | 75 | - |
| ENSIGN | 61 | - | 64 | 3 (4.7) | 56 | - |
| B2001X | 63 | - | 69 | - | 60 | - |
| Musculoskelet | al and | d connective tissue di | sorde | rs | , | |
| ELIANA | 78 | - | 80 | - | 75 | - |
| ENSIGN | 61 | - | 64 | - | 56 | 3 (5.4) |
| B2001X | 63 | - | 69 | - | 60 | - |
| Nervous syste | m disc | orders | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | - |
| ENSIGN | 61 | - | 64 | 9 (14.1) | 56 | - |
| B2001X | 63 | - | 69 | - | 60 | - |
| Renal and urin | ary di | isorders | | | | |
| ELIANA | 78 | - | 80 | 5 (6.3) | 75 | - |
| ENSIGN | 61 | - | 64 | 4 (6.3) | 56 | - |
| B2001X | 63 | - | 69 | - | 60 | - |
| Respiratory, th | noraci | c and mediastinal dis | order | 5 | | |
| ELIANA | 78 | - | 80 | 10 (12.5) | 75 | 6 (8.0) |
| ENSIGN | 61 | - | 64 | 8 (12.5) | 56 | - |
| B2001X | 63 | - | 69 | - | 60 | - |
| Vascular disea | ses | | | | | |
| ELIANA | 78 | - | 80 | 8 (10.0) | 75 | - |

| Endpoint | Lyn | Chemotherapy Lymphocyte depletion Tisagenlecleucel infusion until study week 8 | | | | | | Sti | • | eek 9 to study onth 12 | |
|---------------|----------|--|------|---------|------------------------------|--------|-------------------------|-----|-------|--|--|
| | N | Patients with e n (%) | vent | N | Patients with event n (%) | | | N | Patie | Patients with event n (%) | |
| ENSIGN | 61 | - | | 64 | 8 | 3 (12. | .5) | 56 | | - | |
| B2001X | 63 | - | | 69 | | - | | 60 | | - | |
| Neoplasms b | enign, | malignant and | unsp | ecified | (includin | g cys | ts and poly | ps) | | | |
| B2001X | 63 | - | | 69 | | - | | 60 | | 3 (5.0) | |
| Endpoint | iı | agenlecleucel nfusion until tudy week 8 | | | eek 9 to onth 12 | | dy month : udy month | | Froi | m study month 60 (LTFU) | |
| | N | Patients with event n (%) | N | | nts with nt n (%) | N | Patients event n | | N | Patients with event n (%) | |
| AEs of specia | linter | est | | | | | | | | | |
| Cytokine rele | ase sy | ndrome | | | | | | | | | |
| ELIANA | 80 | 61 (76.3) | 75 | C | 0 (0) | | 1 (2.0) | | 30 | 0 (0) | |
| ENSIGN | 64 | 50 (78.1) | 56 | C | 0 (0) | | 0 (0) | | 14 | 0 (0) | |
| B2001X | 69 | 46 (66.7) | 60 | 1 (1.7) | | 40 | 0 (0) | | 40 | 0 (0) | |
| Haematopoie | etic cyt | openias | | | | | | | | | |
| ELIANA | 80 | 53 (66.3) | 75 | 26 | (34.7) | 50 | 7 (14.0) | | 30 | 0 (0) | |
| ENSIGN | 64 | 27 (42.2) | 56 | C | 0) (0) | 32 | 0 (0) | | 14 | 0 (0) | |
| B2001X | 69 | 0 (0) | 60 | C | 0 (0) | 40 | 0 (0) | | 40 | 0 (0) | |
| Infections | | | | | | | | | | | |
| ELIANA | 80 | 35 (43.8) | 75 | 40 | (53.3) | 50 | 23 (46. | 0) | 30 | 3 (10) | |
| ENSIGN | 64 | 26 (40.6) | 56 | 33 | (58.9) | 32 | 11 (34. | 4) | 14 | 2 (14.3) | |
| B2001X | 69 | 26 (37.7) | 60 | 35 | (58.3) | 40 | 8 (16.0 | O) | 40 | 9 (22.5) | |
| Prolonged B- | cell de | pletion or agam | mag | lobulir | naemia | | | | | <u>, </u> | |
| ELIANA | 80 | 37 (46.3) | 75 | 15 | (20.0) | 50 | 4 (8.0 |) | 30 | 0 (0) | |
| ENSIGN | 64 | 27 (42.2) | 56 | 8 (| 8 (14.3) | | 1 (3.1 |) | 14 | 2 (14.3) | |
| B2001X | 69 | 21 (30.4) | 60 | 7 (| (11.7) | 40 | 3 (6.0 |) | 40 | 0 (0) | |
| Serious neuro | ologic | events | | | | | | | | | |
| ELIANA | 80 | 31 (38.8) | 75 | 5 | (6.7) | 50 | 2 (4.0 |) | 30 | 0 (0) | |
| ENSIGN | 64 | 19 (29.7) | 56 | 2 | (3.6) | 32 | 2 (6.3 |) | 14 | 0 (0) | |

| Endpoint | ir | agenlecleucel nfusion until tudy week 8 | | udy week 9 to udy month 12 | | dy month 12 to udy month 60 | From study month 60 (LTFU) | |
|-----------------|-------|---|-------|-------------------------------|----|--------------------------------|-------------------------------|---------------------------|
| | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) | N | Patients with event n (%) |
| B2001X | 69 | 17 (24.6) | 60 | 2 (3.3) | 40 | 2 (4.0) | 40 | 0 (0) |
| Tumour lysis sy | ndro | ome | | | | | | |
| ELIANA | 80 | 4 (5.0) | 75 | 1 (1.3) | 50 | 0 (0) | 30 | 0 (0) |
| ENSIGN | 64 | 1 (1.6) | 56 | 1 (1.8) | 32 | 0 (0) | 14 | 0 (0) |
| B2001X | 69 | 1 (1.4) | 60 | 0 (0) | 40 | 0 (0) | 40 | 0 (0) |
| Recurrence or | exace | erbation of an a | utoir | nmune disease | | | | |
| ELIANA | 80 | 35 (43.8) | 75 | 15 (20.0) | 50 | 5 (10.0) | 30 | 0 (0) |
| ENSIGN | 64 | 1 (1.6) | 56 | 3 (5.4) | 32 | 1 (3.1) | 14 | 0 (0) |
| B2001X | | | | | - | | | |
| Exacerbation o | f the | graft-versus-ho | st re | sponse | | | | |
| ELIANA | 80 | 0 (0) | 75 | 2 (2.7) | 50 | 2 (4.0) | 30 | 0 (0) |
| ENSIGN | 64 | 1 (1.6) | 56 | 3 (5.4) | 32 | 0 (0) | 14 | 0 (0) |
| B2001X | | | | | - | | | |
| Secondary mal | ignar | ncies | | | | | | |
| ELIANA | 80 | 0 (0) | 75 | 1 (1.3) | 50 | 0 (0) | 30 | 0 (0) |
| ENSIGN | 64 | 0 (0) | 56 | 2 (3.6) | 32 | 1 (3.1) | 14 | 0 (0) |
| B2001X | | | | | - | | | |
| Cerebral oeder | na | | | | | | | |
| ELIANA | 80 | 0 (0) | 75 | 0 (0) | 50 | 0 (0) | 30 | 0 (0) |
| ENSIGN | 64 | 1 (1.6) | 56 | 0 (0) | 32 | 0 (0) | 14 | 0 (0) |
| B2001X | | | | | - | | | |

- a. Percentiles with 95% CI were calculated using PROC LIFETEST according to the method of Brookmeyer and Crowley (1982).
- b. Since the primary follow-up phase of the B2001X study is 12 months post infusion, the data cut-off from 13 October 2020 was not presented. Only the LTFU data cut-off from 3 May 2022 is shown.
- c. Data according to the exact Clopper-Pearson method.
- d. Primary endpoint of the ELIANA and ENSIGN studies; assessment by the Independent Review Committee (IRC)
- e. The MRD remission was estimated by IRC. The reference value is all patients who achieved a CR/CRi within 6 months according to the IRC.
- f. The response was estimated by IRC. According to the study report, all recurrences that were categorised as an event were confirmed by the IRC. The reference value is all patients who achieved a CR/CRi within 6 months according to the IRC. Evaluations with censoring at the time of allogeneic stem cell transplantation and taking into account the data of the long-term follow-up study A2205B. The reliability of data of the effect estimator for the B2001X study is limited due to the small number of subjects with a correspondingly long observation period at the time the median was reached.

- g. Return rate < 70%
- h. The pharmaceutical company presents adverse events for CTCAE grades 3 and 4 separately. The joint presentation of CTCAE grades 3/4 is based on own calculation.
- i. Enrolled set
- j. PT Cytokine release syndrome

Abbreviations used:

AD = absolute difference; CR = complete remission; CRi = complete remission with incomplete haematologic recovery; CTCAE = Common Terminology Criteria for Adverse Events; HR = hazard ratio; IRC = Independent Review Committee; CI = confidence interval; KM = Kaplan-Meier; LTFU = long-term follow-up; N = number of patients evaluated; n = number of patients with (at least one) event; n.c. = not calculable; n.r. = not reached; n.r. = not relevant; MRD = minimal residual disease; vs = versus

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

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia (ALL) that is refractory</u>, in relapse post-transplant or in second or later relapse

approx. 40 – 90 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 Kymriah (active ingredient: tisagenlecleucel) at the following publicly accessible link (last access: 5 January 2024):

https://www.ema.europa.eu/en/documents/product-information/kymriah-epar-product-information en.pdf

In accordance with the European Medicines Agency (EMA) requirements regarding additional risk minimisation measures, the pharmaceutical company must provide training material and a patient emergency card. Training material for all healthcare professionals who will prescribe, dispense, and administer tisagenlecleucel includes instructions for identifying, treating, and monitoring cytokine release syndrome and neurological side effects. It also includes instructions on the cell thawing process, availability of tocilizumab at the point of treatment, provision of relevant information to patients, and full and appropriate reporting of side effects.

The patient training programme should explain the risks of cytokine release syndrome and serious neurologic side effects, the need to report symptoms immediately to the treating physician, to remain close to the treatment facility for at least 4 weeks after infusion of tisagenlecleucel, and to carry the patient emergency card at all times.

Tisagenlecleucel must be used in a qualified treatment facility. For the infusion of tisagenlecleucel in the present therapeutic indication, the quality assurance measures for the use of CAR-T cells in B-cell neoplasms apply (ATMP Quality Assurance Guideline, Annex 1).

4. Treatment costs

Annual treatment costs:

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute lymphoblastic leukaemia (ALL) that is refractory, in relapse post-transplant or in second or later relapse

| Designation of the therapy | Annual treatment costs/ patient | | | |
|------------------------------------|---------------------------------|--|--|--|
| Medicinal product to be assessed: | | | | |
| Tisagenlecleucel | € 239,000 | | | |
| Additionally required SHI services | € 505.87 - € 966.97 | | | |

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 January 2024)

Other SHI services:

| Designation of the therapy | Type of service | Costs/ unit | Number/ cycle | Number/ patient/ year | Costs/ patient/ year | | |
|--|--|----------------|------------------|-----------------------------|----------------------------|--|--|
| Medicinal product to be assessed | | | | | | | |
| Tisagenlecleucel: Lymphocyte depletion | | | | | | | |
| Cyclophosphamide | Surcharge for production of a parenteral solution containing cytostatic agents | € 100 | 2 | 2.0 | € 200 | | |
| Fludarabine | Surcharge for production of a parenteral solution containing cytostatic agents | € 100 | 4 | 4.0 | € 400 | | |

Designation of medicinal products with new active ingredients according to Section 35a, paragraph 3, sentence 4 SGB V that can be used in a combination therapy with the assessed medicinal product

In the context of the designation of medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V, the following findings are made:

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia</u> (ALL) that is refractory, in relapse post-transplant or in second or <u>later relapse</u>

 No medicinal product with new active ingredients that can be used in a combination therapy and fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.

The designation of combinations exclusively serves the implementation of the combination discount according to Section 130e SGB V between health insurance funds and pharmaceutical companies. The findings made neither restrict the scope of treatment required to fulfil the medical treatment mandate, nor do they make statements about expediency or economic feasibility.

II. The resolution will enter into force on the day of its publication on the website of the G-BA on 15 February 2024.

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

Berlin, 15 February 2024

Federal Joint Committee (G-BA) in accordance with Section 91 SGB V

The Chair

Prof. Hecken