Gemeinsamer Bundesausschuss

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
Beremagene geperpavec (wound treatment for dystrophic epidermolysis bullosa, all age groups)

of 19 February 2026

At their session on 19 February 2026, 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 shall be amended in alphabetical order to include the active ingredient Beremagene geperpavec as follows:

Beremagene geperpavec

Resolution of: 19 February 2026
Entry into force on: 19 February 2026
Federal Gazette, BAnz AT DD. MM YYYY Bx

Therapeutic indication (according to the marketing authorisation of 23 April 2025):

Vyjuvek is indicated for the treatment of wounds in patients with dystrophic epidermolysis bullosa (DEB) with mutation(s) in the collagen type VII alpha 1 chain (COL7A1) gene, from birth.

Therapeutic indication of the resolution (resolution of 19 February 2026):

See therapeutic indication according to marketing authorisation.

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

Beremagene geperpavec is approved as a medicinal product for the treatment of rare diseases under 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 G-BA determine 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 Ordinance on the Benefit Assessment of Pharmaceuticals (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>Patients with wounds due to dystrophic epidermolysis bullosa (DEB) with mutation in the collagen type VII alpha 1 chain (COL7A1) gene</u>

Extent of the additional benefit and significance of the evidence of beremagene geperpavec:

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

Study results according to endpoints:[1]

Patients with wounds due to dystrophic epidermolysis bullosa (DEB) with mutation in the collagen type VII alpha 1 chain (COL7A1) gene

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	n.a.	There are no assessable data.
Morbidity	↑↑	Advantage in the "complete wound closure" endpoint
Health-related quality of life	n.a.	There are no assessable data.
Side effects	n.a.	There are no assessable 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 ∅: No data available. n.a.: not assessable		

GEM-3 study: multicentre, controlled phase III study with intra-individual randomisation, beremagene geperpavec (B-VEC) **vs** placebo, patients simultaneously in the intervention and control groups; 26 weeks

B-VEC-EX-02 study: multicentre, uncontrolled, open-label extension study; roll-over subjects from the GEM-3 study and therapy naïve subjects with DEB

Mortality

Endpoint *Study*	**Beremagene geperpavec / Placebo**	
	N	Patients with event n (%)
Overall mortality		
GEM-3 study		
- Deaths	31	No deaths occurred. [a)]
B-VEC-EX-02 study		
-Deaths of roll-over patients from GEM-3	24	No deaths occurred.
- Deaths of therapy naïve patients	23	No deaths occurred.

[1]Data from the dossier assessment of the G-BA (published on 17 November 2025), unless otherwise indicated.

Morbidity

GEM-3 study Endpoint	Beremagene geperpavec		Placebo		Beremagene geperpavec vs Placebo
	N	*Patients with event n (%)*	N	*Patients with event n (%)*	RR [95% CI] p value
Complete wound closure [b)]					
Complete wound closure at month 3	31	21.9 (70.6)	31	6.1 (19.7)	3.3 [1.50; 7.25]; 0.0005
Complete wound closure at month 6 [c)]	31	20.9 (67.4)	31	6.7 (21.6)	3.23 [1.42; 7.33]; 0.002
Complete wound closure at months 3 and 6	31	15.4 (49.7)	31	2.2 (7.1)	6.46 [1.52; 27.38]; 0.002

GEM-3 study Endpoint	Beremagene geperpavec / Placebo	
	N	Patients with event n (%)
General health status using EQ-5D-VAS (12 years and older) [d)]		
Improvement by ≥ 15 points	21	8 (38.1) [a), e)]

GEM-3 study Endpoint	N	Beremagene geperpavec / Placebo		
		Baseline MV (SD)	*Week 26 MV (SD)*	*Change at week 26* [f)] *MV (SD)*
Skindex-29 (12 years and older) *(presented additionally)*				
- Symptoms [g)]	18	64.8 (16.0)	61.8 (15.1)	-3.0 (n.d.)

GEM-3 study Endpoint	N	Beremagene geperpavec		Placebo		Beremagene geperpavec vs Placebo
		Baseline MV (SD)	*Change at week 26 MV (SD)*	*Baseline MV (SD)*	*Change at week 26 MV (SD)*	*LS mean difference [95% CI] p value*
Pain during change of dressing *(presented additionally)*						
Using VAS (≥ 6 years) [h)]	24	2.41 (2.61)	-0.63 (2.12)	2.67 (2.37)	-0.38 (2.87)	-0.56 [-1.17; 0.05]; 0.07

Using FLACC-R (< 6 years) [h)]	4	1.50 (2.38)	-1.50 (2.38)	1.50 (2.38)	-1.50 (2.38)	n.d. [i)]

Quality of life

GEM-3 study Endpoint	**N**	**Beremagene geperpavec / Placebo**		
		Baseline MV (SD)	*Week 26 MV (SD)*	*Change at week 26 [f)] MV (SD)*
Skindex-29 (12 years and older) [j)] *(presented additionally)*				
- Emotion	18	56.0 (16.3)	49.1 (17.2)	-6.9 (n.d.)
- Function	18	51.6 (15.1)	51.6 (17.1)	0 (n.d.)

Side effects

Endpoint MedDRA system organ classes/ AEs of special interest	**Beremagene geperpavec / Placebo**	
	N [k)]	**Patients with event n (%)**
Total adverse events (presented additionally)		
GEM-3 study		
	31	18 (58.1)
B-VEC-EX-02 study		
- Roll-over patient from GEM-3	24	17 (70.8)
- Therapy naïve patients	23	18 (78.3)
Serious adverse events (SAEs)		
GEM-3 study		
	31	3 (9.7)
B-VEC-EX-02 study		
- Roll-over patient from GEM-3	24	9 (37.5)
- Therapy naïve patients	23	5 (21.7)
Severe adverse events (CTCAE grade 3 or 4)		
GEM-3 study		
	31	2 (6.5)
B-VEC-EX-02 study		
- Roll-over patient from GEM-3	24	8 (33.3)
- Therapy naïve patients	23	2 (8.7)
Therapy discontinuation due to adverse events		
GEM-3 study		
	31	0 (0)

Endpoint MedDRA system organ classes/ AEs of special interest	**Beremagene geperpavec / Placebo**	
	N [k)]	**Patients with event n (%)**
B-VEC-EX-02 study		
- Roll-over patient from GEM-3	24	0 (0)
- Therapy naïve patients	23	0 (0)
Severe adverse events according to MedDRA system organ class (with an incidence ≥ 10%)		
No severe AEs with an incidence ≥ 10%		
SAEs according to MedDRA system organ class (with an incidence ≥ 10%)		
B-VEC-EX-02 study (roll-over patients from GEM-3)		
- Infections and infestations	24	6 (25.0)

a. The result refers to a subject's overall condition and cannot be attributed to the intervention/ control due to the split-body design. A comparator analysis is not possible for these endpoints.
b. Multiple imputation of missing values. Since a multiple imputation method was used to replace missing values, the number of responders is no longer a whole number.
c. Primary endpoint of the GEM-3 study.
d. Scale 0–100; a higher value corresponds to better health status.
e. An event is defined as a one-time improvement by ≥ 15 points (≙ improvement of ≥ 15% of the scale range). Subjects with missing values are classified as non-responders. No statistical outputs are available for this evaluation.
f. Own calculation.
g. Scale 0–100; a higher value corresponds to more severe skin symptomatology.
h. Scale 0–10; a higher value corresponds to more severe pain.
i. According to the statistical analysis plan (SAP), a descriptive presentation was planned. Due to the small number of patients, no additional evaluations were presented in Module 4.
j. Scale 0–100; a higher value corresponds to a poorer quality of life.
k. When comparing the study populations, the different observation periods must be taken into account. In the GEM-3 study, subjects were treated for a median of 25.1 weeks and were to be followed up for 4 weeks. In the B-VEC-EX-02 study, rollover subjects from the GEM-3 study were treated for a median of 91.7 weeks, and therapy naïve subjects were treated for 49.1 weeks. No safety follow-up was planned.

Abbreviations used:
CTCAE = Common Terminology Criteria for Adverse Events; FLACC-R = Face, Legs, Activity, Cry, Consolability Behavioural Scale – Revised; n.d.: no data available; CI = confidence interval; MV = mean value; N = number of patients evaluated; n = number of patients with (at least one) event; RR = relative risk; SD = standard deviation; (S)AE = (serious) adverse event; VAS = visual analogue scale; vs = versus

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

Patients with wounds due to dystrophic epidermolysis bullosa (DEB) with mutation in the collagen type VII alpha 1 chain (COL7A1) gene

Approx. 240 – 900 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 Vyjuvek (active ingredient: beremagene geperpavec) at the following publicly accessible link (last access: 10 February 2026):

https://www.ema.europa.eu/en/documents/product-information/vyjuvek-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 that contains information for medical professionals and patients (if applicable incl. patient identification card).

4. Treatment costs

Annual treatment costs:

Patients with wounds due to dystrophic epidermolysis bullosa (DEB) with mutation in the collagen type VII alpha 1 chain (COL7A1) gene

Designation of the therapy	Annual treatment costs/ patient
Medicinal product to be assessed:	
Beremagene geperpavec	€ 1,488,641.84[2]

Costs after deduction of statutory rebates (LAUER-TAXE® as last revised: 15 December 2025)

5. 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:

Patients with wounds due to dystrophic epidermolysis bullosa (DEB) with mutation in the collagen type VII alpha 1 chain (COL7A1) gene

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

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.

[2] Annual treatment costs for the maximum weekly total dosage for children over 3 years, adolescents and adults according to the product information.

6. Percentage of study participants at study sites within the scope of SGB V in accordance with Section 35a, paragraph 3, sentence 5 SGB V

The medicinal product Vyjuvek is a medicinal product placed on the market from 1 January 2025.

The percentage of study participants in the clinical studies of the medicinal product conducted or commissioned by the pharmaceutical company in the therapeutic indication to be assessed who participated at study sites within the scope of SGB V (German Social Security Code) is < 5% of the total number of study participants.

The clinical studies of the medicinal product in the therapeutic indication to be assessed were therefore not conducted to a relevant extent within the scope of SGB V.

II. The resolution will enter into force on the day of its publication on the G-BA website on 19 February 2026.

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

Berlin, 19 February 2026

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

Prof. Hecken