Comment Letter from Patient Advocacy Groups

in response to

<u>Centers for Medicare and Medicaid Services' Proposed Decision Memo:</u> <u>Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease</u>

February 9, 2022

Dear Secretary Becerra:

We, the undersigned, write to express our concern that the recent proposed National Coverage Determination (NCD) on anti-amyloid monoclonal antibodies (mAbs) sets a precedent that could have far-ranging and damaging impacts on approval and access to new therapeutics across all disease areas. The draft NCD creates the potential for a new paradigm in which U.S. Food and Drug Administration (FDA) approval is not sufficient for access. It suggests that drug approvals, whether based on Accelerated Approval or on traditional approval to market, will be second-guessed by the Centers for Medicare and Medicaid Services (CMS) and made subject to a new set of requirements that may preclude patients from having access to an FDA-approved product for which they qualify.

The draft NCD sends a signal that the CMS can effectively set aside the FDA's approval of a new therapy and require a duplicative system for its own re-evaluation of the evidence upon which an approval is based. This proposed approach disregards the primacy of the FDA's jurisdiction as therapy regulator, its critical role in overseeing trial design (endpoint selection, methodology, target product profile, and biomarker selection, to name a few areas), and its benefit/risk determination based on significant scientific expertise in the relevant disease state. The unfortunate effect of the decision will be to prevent access for patients who meet the label criteria, especially those from racially, ethnically, or geographically diverse populations that have disproportionate challenges to accessing clinical trials. It creates a system that will thwart the very goal for diversity espoused by the agency.

We urge you to consider the implications of this draft decision. The NCD raises a number of questions that stand unanswered, including:

- 1. Does this determination create a paradigm where FDA approval is not sufficient for patient access? While CMS states that, "Generally, an intervention is not reasonable and necessary if its risks outweigh its benefits,"¹ based on the proposed NCD, we are left unclear whether the converse remains the standard. *Specifically, when the benefits outweigh the risks, as determined by the FDA, should this not be tantamount to a finding that the intervention is reasonable and necessary?*
- 2. What is the role of Coverage with Evidence development? As stated by CMS, is it a tool that can be a bridge for patient access while additional evidence is generated? Further CMS's own guidance provides, "CED will not duplicate or replace the FDA's authority in assuring the safety, efficacy, and security of drugs, biological products, and devices."² How does this decision abide by and advance these principles for a CED?

¹ <u>Centers for Medicare and Medicaid Services. Proposed Decision Memo: Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease. January 11, 2022.</u>

² <u>https://www.cms.gov/medicare-coverage-database/view/medicare-coverage-document.aspx?MCDId=27</u>

The significant urgency, unmet need, and public health impact of our communities is matched by the potential for scientific discoveries that will transform health outcomes for millions of Americans. We must protect and preserve the processes enabling this progress, while also working towards collaborative solutions to address identified gaps in evidence.

On behalf of millions of patients and caregivers living with different acute, chronic, common, and rare diseases, we ask you exercise the overarching jurisdictional authority inherent in your office as Secretary of Health and Human Services (HHS) to:

- Take steps to address the sweeping, negative impacts of this draft decision;
- Guide CMS and FDA to work in collaboration, not contradiction; and
- Direct CMS to issue a substantially revised NCD that:
 - Respects and relies upon FDA's review authorities; and
 - Assures coverage for beneficiaries who meet the FDA label requirements coupled with a robust post-market evidence generation strategy from various sources including the sponsors' post-market commitments that will deliver real-time, longitudinal data on the safety and efficacy profile across diverse populations for each drug in this class of disease-modifying therapeutics as these may come to market.

We are anxious to work with you toward these important and urgent goals.

Sincerely,

Adult Polyglucosan Body Disease Research Foundation	Congenital Adrenal Hyperplasia Research, Education & Support Foundation (DBA: CARES Foundation)
Advocacy & Awareness for Immune Disorders Association (AAIDA)	Cure GM1 Foundation
Alliance for Aging Research	Cure Mito Foundation
Alpha-1 Foundation	Cure Sanfilippo Foundation
ALS Association	Cure SMA
American Behcet's Disease Association	Dusty Joy Foundation
Amyloidosis Research Consortium	EveryLife Foundation for Rare Diseases
Angelman Syndrome Foundation	Fabry Support and Information Group
Avery's Hope	Friends of Cancer Research
The Balm in Gilead, Inc.	The Global Foundation of Peroxisomal Disorders
Batten Disease Support and Research Association	Global Liver Institute
BrightFocus Foundation	Haystack Project
Cancer Support Community	HealthyWomen
Caregiver Action Network	Histiocytosis Association
Caring Ambassadors Program, Inc.	HIV + Hepatitis Policy Institute
Color of Crohn's and Chronic Illness	HypoPara Support & Advocacy, Inc.
	International Pemphigus Pemphigoid Foundation

Little Hercules Foundation LUNGevity Foundation Marilyn's Legacy MarylandRARE MEPAN Foundation Mission: Cure National Fabry Disease Foundation National Fabry Disease Foundation National PKU Alliance NTM Info & Research One Rare The Oral Cancer Foundation Parent Project Muscular Dystrophy Partnership to Fight Chronic Disease Pompe Alliance Powerful Patient, Inc. Sarcoidosis of Long Island Sudden Arrhythmia Death Syndromes (SADS) Foundation SynGAP Research Fund (SRF) 501(c)(3) Texas Rare Alliance Undiagnosed Diseases Network Foundation (UNDF) UsAgainstAlzheimer's Voices of Alzheimer's