Canada's Drug and Health Technology Agency

CADTH REIMBURSEMENT REVIEW

Stakeholder Feedback on Draft Recommendation

VERICIGUAT (Verquvo)

(Bayer Inc.)

Indication: for the treatment of symptomatic chronic heart failure in adult patients with reduced ejection fraction who are stabilized after a recent heart failure decompensation event requiring hospitalization and/or intravenous diuretic therapy. VERQUVO should be used in combination with standard of care therapy for heart failure.

June 2, 2023

CADTH

CADTH Reimbursement Review

Feedback on Draft Recommendation

Stakeholder information	
CADTH project number	SR0758
Name of the drug and Indication(s)	Vericiguat (Verquvo) for chronic heart failure
Organization Providing Feedback	FWG

1. Recommendation revisions Please indicate if the stakeholder requires the expert review committee to reconsider or clarify its recommendation.		
Request for Reconsideration	**Major revisions:** A change in recommendation **category** or patient **population** is requested	☐
	Minor revisions: A change in reimbursement **conditions** is requested	☐
No Request for Reconsideration	**Editorial revisions:** Clarifications in recommendation **text** are requested	X☐
	No requested revisions	☐

2. Change in recommendation category or conditions Complete this section if major or minor revisions are requested
Please identify the specific text from the recommendation and provide a rationale for requesting a change in recommendation.

3. Clarity of the recommendation Complete this section if editorial revisions are requested for the following elements
a) Recommendation rationale
Please provide details regarding the information that requires clarification.
b) Reimbursement conditions and related reasons
Please provide details regarding the information that requires clarification.
c) Implementation guidance

Please provide high-level details regarding the information that requires clarification. You can provide specific comments in the draft recommendation found in the next section. Additional implementation questions can be raised here.

CADTH

CADTH Reimbursement Review
Feedback on Draft Recommendation

Stakeholder information	
CADTH project number	SR0758-000
Brand name (generic)	vericiguat
Indication(s)	Heart failure
Organization	HeartLife
Contact information[a]	Name:Marc Bains

Stakeholder agreement with the draft recommendation		
1. Does the stakeholder agree with the committee's recommendation.	Yes	☒
	No	☐
Please explain why the stakeholder agrees or disagrees with the draft recommendation. Whenever possible, please identify the specific text from the recommendation and rationale.		

Expert committee consideration of the stakeholder input		
2. Does the recommendation demonstrate that the committee has considered the stakeholder input that your organization provided to CADTH?	Yes	☒
	No	☐
If not, what aspects are missing from the draft recommendation?		

Clarity of the draft recommendation		
3. Are the reasons for the recommendation clearly stated?	Yes	☒
	No	☐
If not, please provide details regarding the information that requires clarification.		
4. Have the implementation issues been clearly articulated and adequately addressed in the recommendation?	Yes	☒
	No	☐
If not, please provide details regarding the information that requires clarification.		
5. If applicable, are the reimbursement conditions clearly stated and the rationale for the conditions provided in the recommendation?	Yes	☒
	No	☐
If not, please provide details regarding the information that requires clarification.		

[a] CADTH may contact this person if comments require clarification.

Appendix 1. Conflict of Interest Declarations for Patient Groups

- To maintain the objectivity and credibility of the CADTH drug review programs, all participants in the drug review processes must disclose any real, potential, or perceived conflicts of interest.
- This conflict of interest declaration is required for participation. Declarations made do not negate or preclude the use of the feedback from patient groups and clinician groups.
- CADTH may contact your group with further questions, as needed.
- Please see the *Procedures for CADTH Drug Reimbursement Reviews* for further details.

A. Patient Group Information	
Name	*Marc Bains*
Position	*Co-Founder*
Date	*21/05/2023*
☒	I hereby certify that I have the authority to disclose all relevant information with respect to any matter involving this patient group with a company, organization, or entity that may place this patient group in a real, potential, or perceived conflict of interest situation.

B. Assistance with Providing Feedback		
1. Did you receive help from outside your patient group to complete your feedback?	No	☒
	Yes	☐
If yes, please detail the help and who provided it.		
2. Did you receive help from outside your patient group to collect or analyze any information used in your feedback?	No	☒
	Yes	☐
If yes, please detail the help and who provided it.		

C. Previously Disclosed Conflict of Interest		
1. Were conflict of interest declarations provided in patient group input that was submitted at the outset of the CADTH review and have those declarations remained unchanged? If no, please complete section D below.	No	☐
	Yes	☒

D. New or Updated Conflict of Interest Declaration

3. List any companies or organizations that have provided your group with financial payment over the past two years AND who may have direct or indirect interest in the drug under review.

Company	**Check Appropriate Dollar Range**			
	$0 to 5,000	**$5,001 to 10,000**	**$10,001 to 50,000**	**In Excess of $50,000**
Add company name	☐	☐	☐	☐
Add company name	☐	☐	☐	☐
Add or remove rows as required	☐	☐	☐	☐

CADTH

CADTH Reimbursement Review
Feedback on Draft Recommendation

Stakeholder information	
CADTH project number	SR0758-000
Brand name (generic)	VERQUVO (vericiguat)
Indication(s)	Heart Failure
Organization	Bayer
Contact information[a]	[redacted]

Stakeholder agreement with the draft recommendation		
1. Does the stakeholder agree with the committee's recommendation.	Yes	☒
	No	☐

Bayer agrees with the CADTH recommendation for VERQUVO (vericiguat), and the supporting rationale, which includes the clinical evidence of VERQUVO providing a "statistically significant and clinical meaningful reduction in the hazard of a first event of cardiovascular (CV) death or hospitalization for heart failure" and that VERQUVO, "when added to dual or triple background HF therapy resulted in added clinical benefit for patients…". Bayer is also in agreement with the committee's conclusion that "no new safety signals were identified in patients with HFrEF" treated with VERQUVO.

Expert committee consideration of the stakeholder input		
2. Does the recommendation demonstrate that the committee has considered the stakeholder input that your organization provided to CADTH?	Yes	☒
	No	☐

Overall, Bayer views that the committee considered most of the input provided by Bayer. However, Bayer disagrees that there was "the potential misclassification of CV deaths in the VICTORIA trial…". As stated in previous input provided by Bayer, the endpoint definitions of the VICTORIA trial were guided by those proposed by the Standardized Data Collection for Cardiovascular Trials Initiative (SCTI) and the US Food and Drug Administration (FDA).[1,2] The inclusion of undetermined deaths as CV deaths is considered a common analytical approach by the SCTI and standard for large cardiometabolic trials.[1,2] As such, Bayer maintains that the classification of CV deaths in the VICTORIA trial was appropriate.

Clarity of the draft recommendation		
3. Are the reasons for the recommendation clearly stated?	Yes	☒
	No	☐

The reasons for the recommendation are clearly stated.

4. Have the implementation issues been clearly articulated and adequately addressed in the recommendation?	Yes	☒
	No	☐

The implementation issues have been clearly articulated and adequately addressed in the recommendation.

5. If applicable, are the reimbursement conditions clearly stated and the rationale for the conditions provided in the recommendation?	Yes	☒
	No	☐

Bayer acknowledges the clarity of the reimbursement conditions but does not agree with the pricing condition and the underlying rationale provided. A recommended “price reduction of 14%” was based on CADTH’s application of highly conservative assumptions in the economic evaluation, including extrapolating a linear declining treatment effect for VERQUVO that Bayer considers to be clinically implausible. It is well documented that heart failure hospitalizations (HFH) are positively associated with an increased and sustained risk of subsequent HFH and death. As VERQUVO has been shown to reduce HFH and CV mortality over the trial duration, a longer-term positive impact of VERQUVO treatment on future HFH and death than what was assumed in the CADTH economic re-analysis is a more likely outcome.

[a] CADTH may contact this person if comments require clarification.

References

1) Hicks KA, Mahaffey KW, Mehran R, Nissen SE, Wiviott SD, Dunn B, et al. 2017 Cardiovascular and Stroke Endpoint Definitions for Clinical Trials. Circulation. 2018;137(9):961-72.

2) Fanaroff AC, Clare R, Pieper KS, Mahaffey KW, Melloni C, Green JB, et al. Frequency, Regional Variation, and Predictors of Undetermined Cause of Death in Cardiometabolic Clinical Trials: A Pooled Analysis of 9259 Deaths in 9 Trials. Circulation. 2019;139(7):863-73.