14.03(a) ADALIMUMAB
Injection 40 mg in 0.8 mL pre-filled syringe,
Injection 40 mg in 0.8 mL single dose autoinjector,
Hadlima®,
Merck Sharp & Dohme (Australia) Pty Ltd

1. Purpose of Application
	1. The minor submission requested the listing of Hadlima®, an adalimumab biosimilar, for the remaining indications for which Humira® (adalimumab) is currently listed on the Pharmaceutical Benefits Scheme (PBS).
2. Background

Registration status

* 1. Hadlima was approved by the Therapeutics Goods Administration (TGA) for rheumatoid arthritis (RA) on 24 January 2018, and was determined to be a biosimilar to the reference brand Humira. At that time, RA was the only TGA-approved indication for Hadlima.
	2. On 28 January 2020, the TGA approved Hadlima for 8 additional indications for which Humira is PBS-listed:
	+ Severe Crohn disease
	+ Complex refractory Fistulising Crohn disease
	+ Moderate to severe ulcerative colitis
	+ Moderate to severe hidradenitis suppurativa
	+ Severe active juvenile idiopathic arthritis
	+ Severe psoriatic arthritis
	+ Ankylosing spondylitis
	+ Severe chronic plaque psoriasis.

Previous PBAC consideration

* 1. At its July 2018 meeting, the PBAC recommended the biosimilar brand of adalimumab (Hadlima) for the RA indication for which the reference product Humira is currently PBS listed.
	2. The PBAC then noted that RA was the only TGA-approved indication for Hadlima at the time of the initial application and that the Sponsor had not sought to have Hadlima TGA-registered for the remaining Humira-registered indications at this time. The PBAC foreshadowed that if Hadlima is TGA registered for any or all of the remaining Humira indications in the future and the sponsor requests PBS listing for those indications, the submission would require minimal review.
	3. At that time, the PBAC advised that, under Section 101(4AACD) of the *National Health Act 1953*, in the Schedule of Pharmaceutical Benefits, for respective PBS-listed indications for each brand, Hadlima, Amgevita®, Hyrimoz® and Humira pre-filled syringes should be treated as equivalent (‘a’ flagged) to each other for the purpose of substitution. Similarly, the PBAC advised that Hadlima, Amgevita and Humira cartridges should be ‘a’ flagged.
	4. The PBAC advised that there would be no clinical or other concerns about appropriate use of medicines if the policy decision were made to apply the following uptake drivers to the RA indication:
	+ change to the prescribing software that gives preference to biosimilar for patients naïve to treatment with adalimumab; and
	+ lower the authority level to streamlined authority for patients continuing (i.e. subsequent continuing) on biosimilar adalimumab.

*For more detail on PBAC’s view, see section 5 PBAC outcome.*

1. Requested listing
	1. The submission requested the listing of Hadlima for the following indications under the same conditions as the reference biologic:
	* Severe Crohn disease
	* Complex refractory Fistulising Crohn disease
	* Moderate to severe ulcerative colitis
	* Moderate to severe hidradenitis suppurativa
	* Severe active juvenile idiopathic arthritis
	* Severe psoriatic arthritis
	* Ankylosing spondylitis
	* Severe chronic plaque psoriasis.
	1. Consistent with its July 2018 recommendation for RA, the submission requested the application of biosimilar uptake drivers to Hadlima for these additional indications, including ‘a’ flagging with other brands of adalimumab, streamlined authorities for subsequent continuing treatment and the inclusion of an administrative note encouraging the use of biosimilar brands for treatment-naïve patients.

*For more detail on PBAC’s view, see section 5 PBAC outcome.*

1. Consideration of the evidence

Sponsor hearing

* 1. There was no hearing for this item as it was a minor submission.

Consumer comments

* 1. The PBAC noted that no consumer comments were received for this item.

Estimated PBS usage & financial implications

* 1. The minor submission estimated substantial savings to the PBS following the listing of Hadlima, as the first adalimumab biosimilar listing would trigger a 25% statutory price reduction. However, Hyrimoz was recommended in March 2020 and may be the first adalimumab biosimilar listed. The submission requested an AEMP of $790.62 (current published Humira AEMP minus 25%) with a DPMQ of $895.86; however noted the final price was subject to finalisation post-recommendation as adalimumab is subject to a Special Pricing Arrangement.

For more detail on PBAC’s view, see section 5 PBAC outcome.

# PBAC Outcome

* 1. The PBAC recommended extending the recommendation for the Hadlima brand of adalimumab (as a biosimilar of the Humira reference biologic) for the remaining indications for which Humira is PBS-listed:
	+ Severe Crohn disease
	+ Complex refractory Fistulising Crohn disease
	+ Moderate to severe ulcerative colitis
	+ Moderate to severe hidradenitis suppurativa
	+ Severe active juvenile idiopathic arthritis
	+ Severe psoriatic arthritis
	+ Ankylosing spondylitis
	+ Severe chronic plaque psoriasis.
	1. The PBAC recalled that at its July 2018 meeting, the Committee recommended Hadlima for the RA indication and foreshadowed that if Hadlima is TGA registered for any or all of the remaining Humira indications in the future and the Sponsor requests PBS listing for those indications, the submission would require minimal review.
	2. The PBAC noted that Hadlima is available either as a single-use, pre-filled syringe, or as a single-use, auto-injector (Hadlima PushTouch™). It is not available in a vial or other form, which would allow dosing of less than 40 mg. As such, per the Humira Product Information, no suitable 20 mg form of Hadlima will be available for paediatric patients weighing less than 30 kg for juvenile idiopathic arthritis or 40 kg for paediatric plaque psoriasis and maintenance of paediatric Crohn’s disease.
	3. The PBAC recalled that the Committee recommended the listing of two other brands of adalimumab (Amgevita in July 2018 and Hyrimoz® in March 2020), and noted that these brands had not yet been listed on the PBS.
	4. The PBAC advised that, under Section 101(4AACD) of the *National Health Act 1953*, in the Schedule of Pharmaceutical Benefits, the pre-filled syringe forms of the four brands should be treated as equivalent to each other; and that the pre-filled pen forms of the four brands should be treated equivalent to each other for the purposes of substitution (i.e., ‘a’ flagged in Schedule with a NOTE stating PBS of one form and PBS of another form are equivalent for the purpose of substitution).
	5. The PBAC noted that when the first biosimilar adalimumab is listed (which may not be Hadlima), the restrictions for all brands of adalimumab would be changed to facilitate the listing of biosimilar forms, similar to that which has been implemented for infliximab and etanercept. The PBAC agreed that the following biosimilar uptake drivers should be applied to Hadlima, consistent with its previous recommendations regarding the application of these drivers to other biosimilar brands of adalimumab:
	+ Retain the initial 1 an 2 restrictions as Authority Required (written) benefits;
	+ Split the continuation criteria into ‘first continuing’ and ‘subsequent continuing’, to allow for the subsequent continuing restriction for the biosimilar to be Streamlined Authority while subsequent continuing restriction for the reference biological medicine will remain as a written authority; and
	+ The application of the following Administrative Note encouraging the use of biosimilar brands for treatment of naïve patients (see recommended listing).
	1. The PBAC noted that its recommendation was on a cost-minimisation basis and advised that, because Hadlima is not expected to provide a substantial and clinically relevant improvement in efficacy, or reduction of toxicity, over Humira, or not expected to address a high and urgent unmet clinical need given the presence of an alternative therapy, the criteria prescribed by the *National Health (Pharmaceuticals and Vaccines – Cost Recovery) Regulations 2009* for Pricing Pathway A were not met.
	2. The PBAC noted that this submission is not eligible for an Independent Review as it received a positive recommendation.

**Outcome:**

Recommended

1. Recommended listing
	1. Add new brand with schedule equivalence (‘a’ flag) for the same indications as for Humira. As there is no 20 mg form, Hadlima will not be listed under items 10389T, 10396E, 10422M, 11121H, 11127P, 9661L or 9678J.
	2. Restrictions to be consistent with its previous recommendations regarding the application of these drivers to other biosimilar brands of adalimumab:
	* Retain the initial 1 an 2 restrictions as Authority Required (written) benefits;
	* Split the continuation criteria into ‘first continuing’ and ‘subsequent continuing’, to allow for the subsequent continuing restriction for the biosimilar to be Streamlined Authority while subsequent continuing restriction for the reference biological medicine will remain as a written authority; and
	* The application of the following Administrative Note encouraging the use of biosimilar brands for treatment of naïve patients.

**Note**

**Biosimilar prescribing policy**

Prescribing of the biosimilar brand Hadlima is encouraged for treatment naïve patients.

Encouraging biosimilar prescribing for treatment naïve patients is Government policy. A viable biosimilar market is expected to result in reduced costs for biological medicines, allowing the Government to reinvest in new treatments. Further information can be found on the Biosimilar Awareness Initiative webpage ([www.health.gov.au/biosimilars](http://www.health.gov.au/biosimilars)).

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| --- | --- | --- | --- | --- | --- |
| **Name, Restriction,****Manner of administration and form** | **PBS item code** | **Max. qty packs** | **Max. qty units** | **№.of****Rpts** | **Available brands** |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL syringes | 10399H9662M9679K | 1 | 2 | 0 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL syringes | 10419J10944B8963R9188N | 1 | 2 | 2 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL syringes | 5281Y8738W9033K9077R | 1 | 2 | 3 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL syringes  | 9425C | 1 | 2 | 4 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL syringes | 10412B10960W5283C8741C8964T9034L9078T9189P9427E | 1 | 2 | 5 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL injection devices | 9680L9663N10400J | 1 | 2 | 0 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL injection devices | 10413C10955N8965W9190Q | 1 | 2 | 2 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL injection devices | 5282B9099X9101B9103D | 1 | 2 | 3 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL injection devices | 9426D | 1 | 2 | 4 | Humira aHadlima aHyrimoz aAmgevita a |
| ADALIMUMABadalimumab 40 mg/0.8 mL injection, 2 x 0.8 mL injection devices | 10420K10961X5284D8966X9100Y9102C9104E9191R9428F | 1 | 2 | 5 | Humira aHadlima aHyrimoz aAmgevita a |

***This restriction may be subject to further review. Should there be any changes made to the restriction the Sponsor will be informed.***

1. Context for Decision

The PBAC helps decide whether and, if so, how medicines should be subsidised through the PBS in Australia. It considers applications regarding the listing of medicines on the PBS and provides advice about other matters relating to the operation of the PBS in this context. A PBAC decision in relation to PBS listings does not necessarily represent a final PBAC view about the merits of the medicine or the circumstances in which it should be made available through the PBS. The PBAC welcomes applications containing new information at any time.

1. Sponsor’s Comment

The sponsor had no comment.