

Drug Coverage Decision for B.C. PharmaCare

AboutB.C. PharmaCare is a government-funded drug plan. It helps British Columbians with the
cost of eligible prescription drugs and specific medical supplies.

Details of Drug Reviewed

Drug	semaglutide
Brand Name	Ozempic®
Dosage Form(s)	1.34 mg/mL solution for injection
Manufactur er	Novo Nordisk Canada Inc.
Submission	New Submission
Туре	
Use Reviewed	type 2 diabetes mellitus (T2DM)
Common Drug Review (CDR)	Yes, CDR recommended: to Reimburse with clinical criteria and/or conditions . Visit the CDR website for more details: <u>www.cadth.ca/sites/default/files/cdr/complete/SR0594%20Ozempic%20-%20CDEC%20Final%20Recommendation%20May%2017%2C%202019%20%28redacted%29_For%20posting.pdf</u>
Provincial Review	DBC now screens drug submissions under review by the CDR to determine whether or not a full DBC review is necessary, based on past DBC reviews, recommendations, and existing PharmaCare coverage. If a full DBC review is determined to not be required, the Ministry's drug coverage decision will be based on the Canadian Drug Expert Committee (CDEC) recommendation and an internal review only. The DBC screened Ozempic [®] on February 4, 2019. The DBC advised that because semaglutide is similar to some of the other drugs used for the treatment of T2DM, the Ministry may accept the CDEC's recommendation for semaglutide.
Drug	Limited Coverage Benefit. Access the semaglutide criteria from
Coverage	www.gov.bc.ca/pharmacarespecialauthority
Decision	
Date	December 15, 2020

Reason(s)	 Drug coverage decision is consistent with the CDEC recommendation to reimburse semaglutide in combination with metformin alone, when diet and exercise plus maximal tolerated dose of metformin do not achieve adequate glycemic control (i.e., second-line therapy) as long as the drug plan cost should not exceed the least costly currently reimbursed second-line therapy. Drug coverage decision is not consistent with CDEC recommendation not to reimburse semaglutide as add-on therapy to metformin and another antihyperglycemic drug (i.e., third-line therapy).
	 In patients with T2DM and inadequate glycemic control on previous antidiabetic treatment, semaglutide as add-on therapy to metformin, or metformin plus another antidiabetic agent was associated with significant reductions in haemoglobin A1C (HbA1c) and body weight as compared to placebo plus add-on therapies.
	 Although CDEC indicated that there was a high degree of uncertainty in the conclusions that could be drawn on the results based on the study design, semaglutide is effective in lowering HbA1c and body weight as a third-line therapy.
	 At the manufacturer-submitted price, semaglutide is more expensive than all other reimbursed second or third line therapy options.
	 The pan-Canadian Pharmaceutical Alliance (pCPA) completed negotiations with the manufacturer and value for money was achieved.
Other Information	None

The Drug Review Process in B.C.

A manufacturer submits a request to the Ministry of Health (Ministry).

An independent group called the <u>Drug Benefit Council (DBC)</u> gives advice to the Ministry. The DBC looks at:

- whether the drug is safe and effective
- advice from a national group called the <u>Common Drug Review (CDR)</u>
- what the drug costs and whether it is a good value for the people of B.C.
- ethical considerations involved with covering or not covering the drug
- input from physicians, patients, caregivers, patient groups and drug submission sponsors

The Ministry makes PharmaCare coverage decisions by taking into account:

- the existing PharmaCare policies, programs and resources
- the evidence-informed advice of the DBC
- the drugs already covered by PharmaCare that are used to treat similar medical conditions
- the overall cost of covering the drug

Visit The Drug Review Process in B.C. - Overview and Ministry of Health - PharmaCare for more information.

This document is intended for information only.

It does not take the place of advice from a physician or other qualified health care provider.