

Budget impact analysis of zanubrutinib + obinutuzumab for the treatment of relapsed or refractory follicular lymphoma in the United States

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ABSTRACT

Objective: Zanubrutinib+obinutuzumab (ZO) has been evaluated for the treatment of relapsed/refractory (R/R) follicular lymphoma (FL) in adults aged ≥ 18 years who had previously received ≥ 2 lines of therapy. This study aimed to estimate the budget impact of access to ZO for the treatment of R/R FL in the third line or later (3L+) in adult patients from a US healthcare payer perspective.

Methods: An Excel-based budget impact model (BIM) was developed to estimate the economic impact of providing ZO access for adult patients with R/R FL within a 1-million-member mixed commercial and Medicare US health plan over a 3-year period. The BIM accounted for a 3L+ FL population; projected market shares; and costs for drug acquisition, administration, monitoring, premedication, and adverse events. Efficacy, adverse events, dosing, and treatment schedules were obtained from clinical trial publications. Comparators and market shares were based on US market forecasts. Costs were reported in 2023 US\$. Model outputs included annual budget impact and per-member per-month (PMPM) cost differences over a 3-year horizon. Sensitivity analyses tested the impact of input uncertainty on outcomes.

Results: In the payer plan, 19 R/R FL patients were estimated to receive 3L+ treatment with ZO, lenalidomide \pm rituximab, obinutuzumab \pm lenalidomide, bendamustine+obinutuzumab, R-CHOP, tazemetostat, mosunetuzumab-axgb, axicabtagene ciloleucel, or tisagenlecleucel. The estimated total budget impacts from the addition of ZO to formulary were \$189,186 (\$0.016 PMPM) in year 1 and \$306,544 (\$0.026 PMPM) in years 2 and 3. BIM results were most sensitive to changes in zanubrutinib and obinutuzumab acquisition costs and duration of zanubrutinib treatment.

Conclusions: Patients with 3L+ R/R FL, a chronic incurable disease with high unmet needs, may benefit greatly from treatment with ZO. The addition of ZO to formulary for the treatment of 3L+ R/R FL has minimal budget impact on a US health plan over 3 years.