

# Cell and Gene Therapy (CGT) Model State Medicaid Director Briefing

Sick Cells

## Cell And Gene Therapy (CGT) Model: Background



- **Goal**: Increase beneficiary access to cell and gene therapies while reducing health care expenditures
  - Sickle cell disease—first disease area of focus
- How: Create a standard framework for outcomes based agreements (OBAs) between States and pharmaceutical manufacturers
- Who:
  - <u>CMS</u>: Negotiate terms of OBAs with manufacturer, including pricing (reflects rebates), access standards and outcome measures to be met
    - CMS will reconcile data, monitor results, and evaluate outcomes with respect to the negotiated OBAs
  - <u>Manufacturers</u>: Must have an FDA approved therapy launched by May 2024, must participate in the MDRP
  - <u>States</u>: Any state or territory that participates in the MDRP
    - Can apply for option additional funding via NOFO issued by CMS
  - <u>Beneficiary</u>: Medicaid or Medicaid expansion CHIP
    - States may separately negotiate with manufacturers for coverage of beneficiaries covered by state's separate CHIP program



## **CGT Model Focus**

- The Cell and Gene Therapy (CGT) Access Model seeks to **test a CMS-led approach** to negotiating and administering OBAs for cell and gene therapies.
- The Model will focus initially on CGTs for sickle cell disease (SCD), a genetic blood disorder that affects 100,000+ people in the U.S.
- SCD disproportionately impacts individuals from the Black and Brown communities. The CGT model aims to improve access and health outcomes for people with Medicaid; address existing barriers to equitable access to cell and gene therapies; and reduce health care costs.
- **Existing health disparities** have led people with SCD to experience:
  - An average lifespan more than 20 years shorter than average life expectancy in the U.S.
  - Excruciating pain episodes, which can cause multiple hospitalizations



## FDA-Approved Gene Therapies for SCD

### What new gene therapies are FDA-approved for SCD, and how do they work?

- On December 8th, 2023, the Food and Drug Administration (FDA) approved **CASGEVY** and **Lyfgenia** for patients with sickle cell disease patients 12 years of age or older and a history of vaso-occlusive events (VOEs).
- Both therapies are **one-time gene therapies** that use the body's own stem cells to decrease or stop VOEs.
- CASGEVY uses your **own stem cells** that are collected from the patient. Therefore, no donor is needed. These cells are sent for gene editing done by CRISPR/CAS 9. This gene-editing tool will edit a specific gene called BCL11A., As a result, there is an increase in the production of **fetal hemoglobin**, which binds to oxygen very well however, produces less after birth. Once more **fetal hemoglobin** is made, this can stop the production of sickled cells and later prevent VOEs.
- Lyfgenia uses a similar method of using your own stem cells. This gene therapy uses a vector to deliver a functional gene called HbAT87Q, which mimics regular hemoglobin. It binds to oxygen like normal hemoglobin, limiting sickled cell production and reducing VOEs.

#### Source: Sick Cells Gene Therapy FAQ

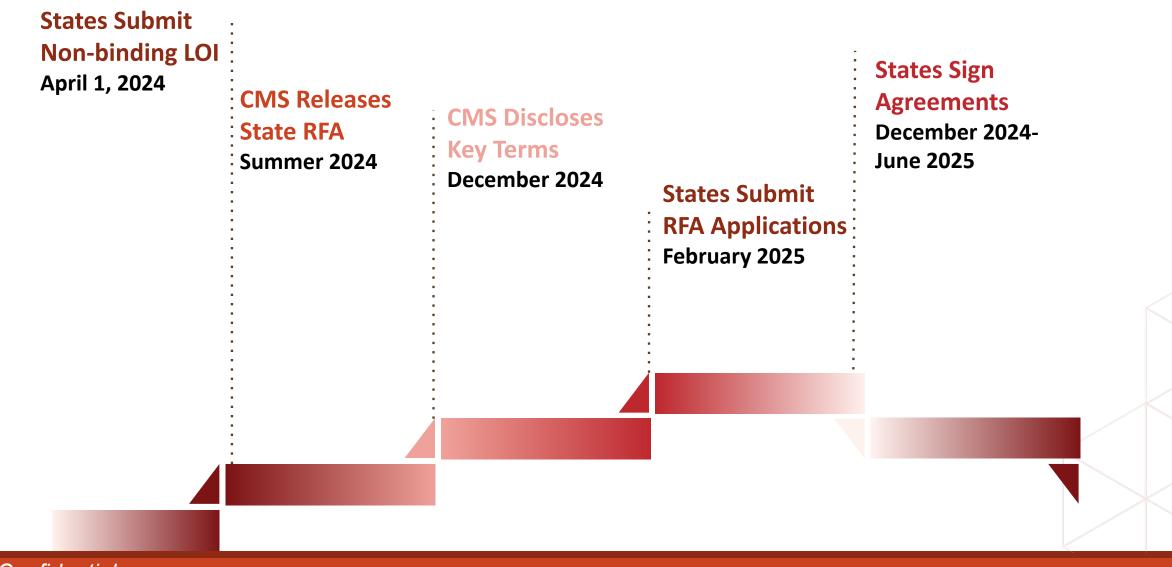
Key Events

		1		2024		2025	2026
Manufacturer Participation	CMS releases Manufacturer RFA	Mar 2024	$\blacklozenge$				
	Manufacturers submit RFA applications	Due May 2024					
	CMS-Manufacturer negotiations	May – Nov 2024					1
	Manufacturers sign Participation Agreements	Nov 2024			$\diamond$		
State Participation	States submit non-binding LOIs	Due Apr 2024					
	CMS releases State RFA	Summer 2024		<b>♦</b>			
	CMS discloses Key Terms	Dec 2024			$\diamond$		
	States submit RFA applications; CMS reviews	Dec 2024 – Feb 2025, rolling					
	States sign State Agreements	Dec 2024 – Jun 2025					
Optional State Funding	CMS releases NOFO	Summer 2024		<b>♦</b>			1
	States submit NOFO applications	Due Feb 2025					
	CMS reviews applications	Mar – Jun 2025					1
	CMS issues Notice of Awards; Cooperative Agreement funding begins	June/July 2025					
Model Performance	Performance Year 1 (may start at any time)	Jan 2025 – Dec 2025					
	Performance Year 2	Jan 2026 – Dec 2026					



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### **State Participation Timeline**



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## Notice of Funding Opportunity (NOFO)

- A **notice of Funding Opportunity (NOFO)** is a formal announcement inviting award applications to states who would like to participate in the CGT Model.
- States are not required to respond to the NOFO in order to participate in the CGT Model.
- The CGT Model NOFO was released in Summer 2024

https://grants.gov/search-results-detail/354875

- A notice of awards and initial funding will be released in **Summer 2025**
- Information on the type of funding, available award amounts, the number of awardees to be selected, eligibility requirements, and the process for submission are forthcoming.



## **Application Timeframe**

• The CGT Model is now accepting state applications through March 14, 2025. <u>https://www.cms.gov/priorities/innovation/innovation-models/cgt</u>

Electronic Application Due Date	March 14, 2025, 11:59 pm EST				
Anticipated Issuance Notice(s) of Award	July 1, 2025				
<b>Periods of Performance:</b> There are two periods of performance to be aware of in this Model					
Model Performance Period (anticipated)	January 1, 2025 – December 31, 2035				
Cooperative Agreement Period of Performance (anticipated)	July 1, 2025 – December 31, 2035				



## **Rhode Island SCD Therapies Data**

Therapy	Step Therapy or "fail first"	<b>Prior Authorization</b>	Additional Information/PDL Status
Hydroxyurea	N/A	N/A	Not Reviewed
Droxia	N/A	N/A	Not Reviewed
Siklos	N/A	N/A	Not Reviewed
Endari	N/A	N/A	Not Reviewed
Oxbryta	N/A	N/A	Not Reviewed
Adakveo	N/A	N/A	Not Reviewed



## Thank you!

For further questions, please feel free to contact:

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