CMS Finalizes Limited Coverage for Aducanumab- AAN Recommendations Reflected in NCD

On April 7, the Centers for Medicare & Medicaid Services (CMS) released its final National Coverage Determination (NCD) for monoclonal antibodies (mAbs) directed against amyloid for the treatment of Alzheimer's disease (AD). The AAN has been engaged with regulators and other stakeholders on the issues surrounding aducanumab (brand name Aduhelm) since prior to the drug's FDA approval in June 2021. During the comment period for this NCD, the AAN met with CMS on several occasions and provided the agency with written comments. The AAN's advocacy had a substantial impact on the final NCD as seen in a number of key changes to the final NCD, and CMS' extensive citation of the AAN including the recent Evidence in Focus report.

CMS has finalized the following policies:

- Use of coverage with evidence development (CED) to further study aducanumab and future drugs within the same class. The CED requirements account for multiple products that are currently in various stages of the FDA approval process.
    - Products approved based on a change in a surrogate endpoint may be covered in a randomized controlled trial or trials supported by the NIH.
    - Products approved based on a direct measure of clinical benefit may be covered in CMS approved prospective comparative studies for beneficiaries that are similar to patients in that drug's pivotal trial.
    - Use of mAbs directed against amyloid for the treatment of AD provided outside of a FDA approved randomized controlled trial, CMS approved studies, or studies supported by the NIH, are nationally non-covered.
- The setting at which trials can be held is not restricted. Study protocols submitted for approval must include a description of the multidisciplinary team and optimal management of patients as well as the study sites with clinical expertise and infrastructure to provide treatments consistent with safety monitoring protocols.
- Promotion of maximum flexibility for investigators to conduct a wide range of study designs to assess benefits and harms in special populations, as well as patients with various comorbidities who were excluded from patient populations in RCTs designed for FDA approval.
- CMS approved studies must include a study population whose diversity of patients is representative of the national population with mild cognitive impairment (MCI) due to AD or mild AD dementia.
- Allowance for one PET scan for amyloid in the patient's lifetime to confirm amyloid positivity.

This NCD realizes many of the key elements of the AAN's advocacy including limitation of coverage to patients with MCI or mild AD, further clinical trials to confirm clinical benefit, coverage of PET to confirm amyloid positivity, and more inclusive trial data to reflect the diverse patient population. Additionally, the final NCD includes several positive changes when compared to what was initially proposed stemming from the AAN's advocacy. These include a modification so that trials are not solely limited to the hospital

outpatient setting, a commitment from CMS to quickly reconsider the NCD if a mAb product has answered the CED questions with quality evidence, and deference to CED investigators in determining key elements of study design.

Find more information and resources on our Aducanumab Resources page.