

A Manufacturer's Perspective on Data Collaboration: Why It Matters





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Learn. Connect. Collaborate.



Disclosure

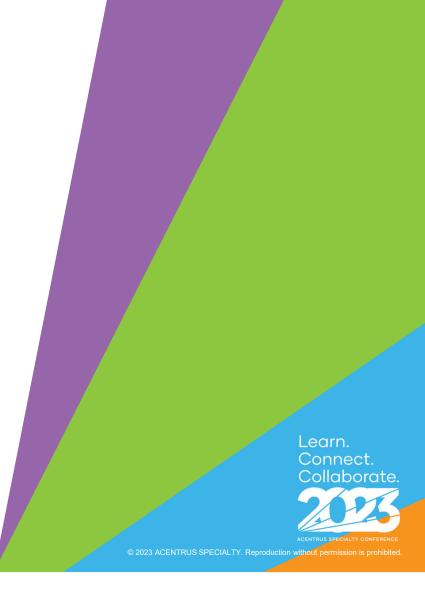
The following individuals report having no relevant conflicts of interest:

- Michelle Lee
- Jillian Dura
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Learning Objectives

- 1. Show how Seagen and BeiGene partner with a network administrator (i.e., Acentrus) to deliver patient metrics for clients by using a hybrid LDD model
- 2. Describe how a manufacturer partners with a network administrator to generate patient metrics and performance benchmarking using a hybrid LDD model
- 3. Recognize the challenges at the manufacturer level to show congruency between various sources of data
- 4. Identify opportunities for collaboration within the Acentrus client portfolio to demonstrate the effectiveness and efficiency of the health system specialty pharmacy
- 5. Construct opportunities to collaborate with a network administrator to demonstrate the effectiveness and efficiency of the health system specialty pharmacy



Acentrus/Seagen Partnership

Connect. Collaborate.



Seagen: A Global Oncology Company

Four approved therapies

with multi-indication opportunities in blood cancers and solid tumors

Expanding U.S. and ex-U.S. footprint

complements strategic partnerships to reach patients globally



Our Mission

Discovering, developing, and commercializing transformative cancer medicines to make a meaningful difference in people's lives

Innovative research and the leader in ADCs*

fueling robust pipeline of targeted medicines for cancer

*Antibody-drug conjugates

Proven, world-class drug development

driving patient-focused clinical programs



Our Values



Passion for Helping Patients

Revolutionizing therapy for people living with cancer



Integrity

Honesty, respect, and trust guide us



Scientific Excellence

Premier science empowers our passion



Diversity, Teamwork, and Mutual Respect

Shared dedication and diverse perspectives drive successful collaborations



Innovation

Entrepreneurial spirit advances breakthroughs



Great Work Environment

By working together to our full potential, we make a real difference in the world



Unwavering Focus on Transformative Oncology Therapies

ADCETRIS® (brentuximab vedotin) Collaborator: Takeda	PADCEV® (enfortumab vedotin-ejfv) Collaborator: Astellas	TUKYSA® (tucatinib) Collaborator: Merck	TIVDAK® (tisotumab vedotin-tftv) Collaborator: Genmab	
 CD30-directed antibody-drug conjugate (ADC) Received approval in >75 countries for certain CD30- expressing lymphoma settings Broad development ongoing in classical Hodgkin lymphoma and other CD30-expressing cancers 	 e (ADC) d approval in >75 s for certain CD30- ng lymphoma settings evelopment ongoing in Hodgkin lymphoma and conjugate (ADC) Approved in the U.S. and several other countries for certain urothelial cancer settings* Multiple ongoing and planned eliniated trials in urothelial cancer 	 HER2-directed oral tyrosine kinase inhibitor Approved in the U.S., EU, and several other countries for certain breast cancer settings* Multiple ongoing and planned clinical trials in breast, colorectal, gastric, and other HER2- expressing cancers *In combination with trastuzumab and capecitabine 	 Tissue factor-directed ADC Received accelerated approval in the U.S. for certain cervical cancer settings; continued approval may be contingent upon verification and description of clinical benefit in confirmatory trials Multiple ongoing trials in cervical cancer and other solid tumors 	

Efficacy/safety for investigational uses have not been established. There is no guarantee that these agents will receive regulatory approval and become commercially available for uses being investigated. © 2023 ACENTRUS SPECIALTY. Reproduction without permission is prohibited.

Core Tenets Shaping the TUKYSA Channel Strategy



Ease of Navigation

By grounding our model in market trends and expectations, we aligned to the market without disruption or interruption

Proximity to the Provider

By keeping care close to the provider, we stand the best chance of navigating a complex regimen in patients with late-stage disease



Leverage SGEN Expertise

By identifying synergies with the current **Seagen** model, we capitalized on efficiencies and reduced the time to launch preparedness



Alignment to End Customers

The solution is configured to specialty pharmacy but includes key customers within the physician dispensary and hospital pharmacy space







Utilization of two national specialty pharmacies (SPs)

Any hospital fully owned specialty pharmacy (HSSP)

0:0 0:0 0:0

In-office dispensing/medically integrated dispensaries

No access to pharmacy benefit manager (PBM)-owned SPs

How Seagen Partners with Acentrus



How Seagen Partners with Health System SPs

- Specialty pharmacy URAC accreditation
- Specialty pharmacy volume
- Willingness to provide data
- Desire to collaborate and help patients access therapy
- Industry leaders/influencers



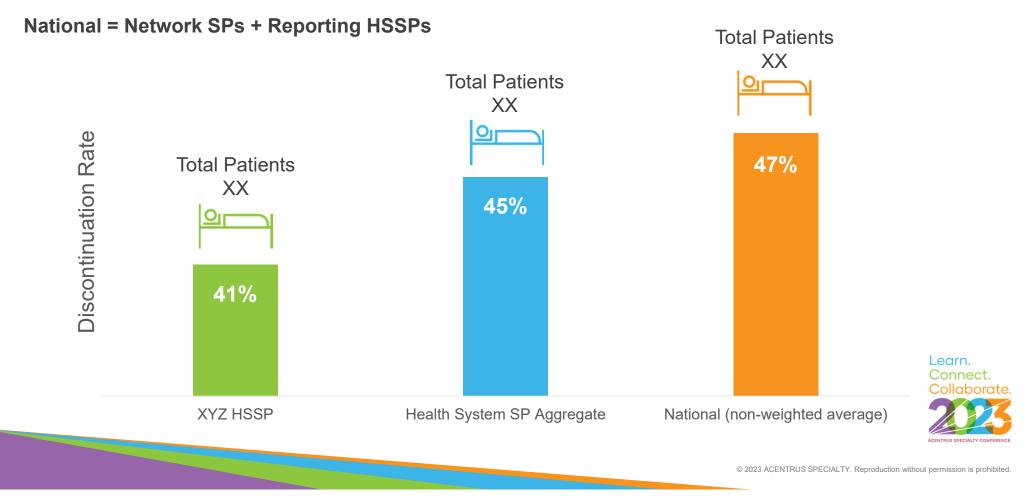
EXAMPLE DATA

Patient Metrics: Payer Mix

National Payer Mix, LTD XYZ HSSP Payer Mix, LTD 3.0%_ 1.0% 0.6%_ 0.4% 11.0% 17.0% 25.0% 57.0% 21.0% 63.0% Learn. Connect. Commercial Medicare Medicaid Commercial Medicare Medicaid Collaborate. Tricare Cash Other Tricare Cash Other © 2023 ACENTRUS SPECIALTY. Reproduction without permission is prohibited.

National = Network SPs + Reporting HSSPs

Patient Metrics: Discontinuation Rate



EXAMPLE DATA

Patient Metrics: Duration of Therapy

Percentage of Patients 2-3 Years 1-2 Years 6 Months to 1 Year 3-6 Months 1-3 Months Up to a Month 25% 30% 35% 40% 0% 5% 10% 15% 20% National (non-weighted average) HSSP Aggregate XYZ HSSP

Average Duration of Therapy in Months



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EXAMPLE DATA

Challenges: Data Congruency

All HSSPs operate and report slightly differently

- How do you define time to first fill (TTFF)?
- Can you report substatus to include holds, transfers, discontinuation, cancellations, and so on?
 - Seagen implements business rules for some metrics to overcome lack of data elements in comparison to national SP reporting



Opportunities to Collaborate

Depends on you!

- Seagen is thrilled to partner with Acentrus and each of its clients for opportunities to help patients start and stay on therapy
- Data In = Data Out
 - Seagen is able to ingest a very large data set to reflect most metrics that HSSPs would like to see at the individual site level
 - A gap example—reporting substatus for canceled patients—opportunity to determine how many patients your HSSP never fills, but still completes the work for
- Partner with Acentrus TSOC program as a multi-site collaboration for outcomes reporting



Acentrus/BeiGene Partnership

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At BeiGene, we are unique among global biotech companies



BeiGene global internal discovery pipeline covers a vast majority of the world's cancers

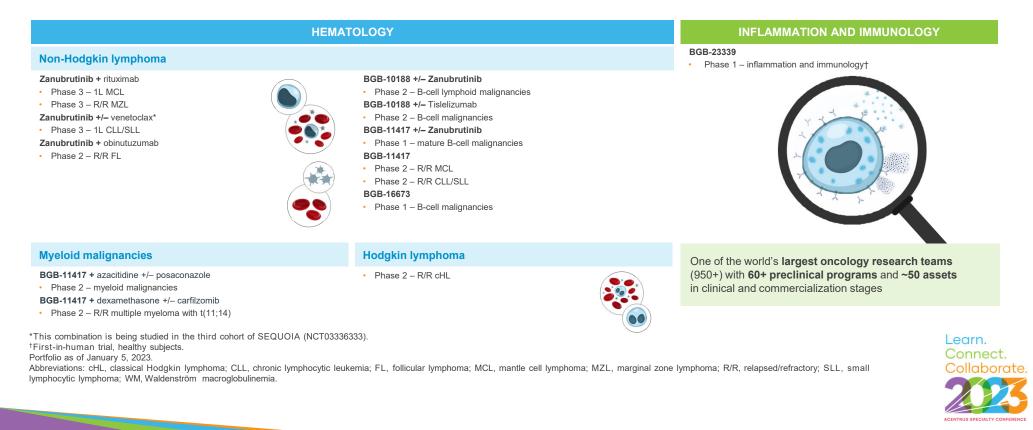
SOLID TUMORS						
Breast cancer		Cervical cancer				
Tislelizumab + fruquintinib (VEGFR inhibitor)* Phase 2 – advanced triple-negative BC		 Ociperlimab + Tislelizumab Phase 2 – 2L+ cervical cancer 				
Esophageal cancer, Gastric cancer		Non–small cell lung cancer, Small cell lung cancer				
Ociperlimab + Tislelizumab • Phase 2 – 2L PD-L1+ advanced ESCC Pamiparib • Phase 2 – 1L maintenance platinum-sensitive GC Tislelizumab • Phase 3 – 2L advanced ESCC Tislelizumab + chemotherapy • Phase 3 – 1L advanced ESCC • Phase 3 – 1L GC/GEJC	٢	 Ociperlimab + Tislelizumab Phase 3 – 1L PD-L1 high advanced NSCLC Ociperlimab + Tislelizumab + chemotherapy Phase 2 – 1L NSCLC Additional investigational provided in the second secon	Ociperlimab + Tislelizumab + concurrent chemoradiotherap Phase 3 – 1L unresectable NSCLC Phase 2 – 1L LS-SCLC Tislelizumab Phase 3 – 2L/3L NSCLC roducts	y Ø		
 Tislelizumab + Zanidatamab + chemotherapy Phase 3 – GEA Hepatocellular carcinoma, Biliary tract cancer 		 BGB-24714 (SMAC mimetic) +/- chemotherapy – Phase 1 Lifirafenib (RAF inhibitor) + mirdametinib (MEK inhibitor) – Phase 1 Ociperlimab + Tislelizumab – Phase 1 				
 Tislelizumab Phase 3 – 1L HCC Phase 2 – previously treated HCC 		 Pamiparib + temozolomide - Phase 1 Tislelizumab + BGB-A445 - Phase 1 Tislelizumab + BGB-15025 - Phase 1 Tislelizumab + surufatinib (VEGFR, FGFR, CSF-1R inhibitor) - Phase 2 				

*Enrolling in the United States. Portfolio as of January 5, 2023.

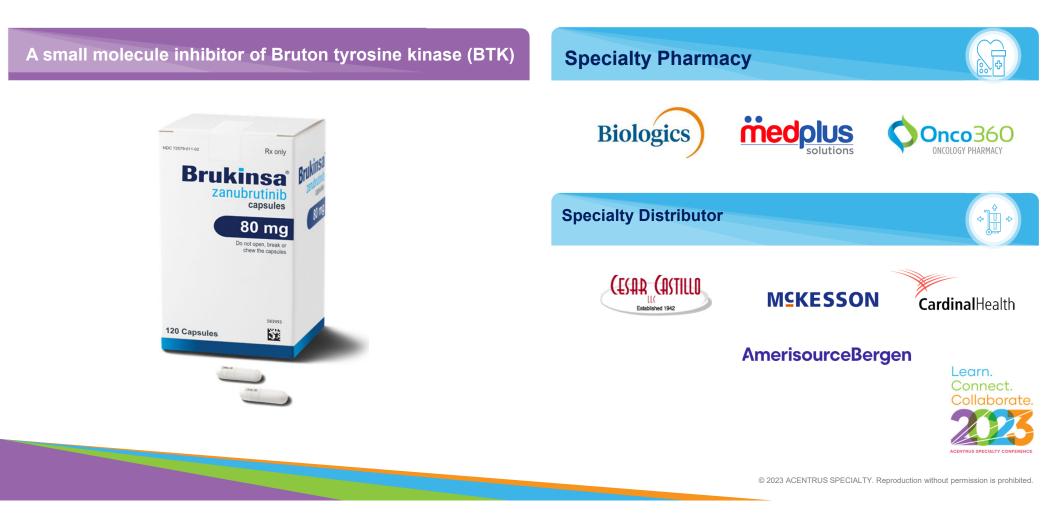
Abbreviations: 1L, first-line; 2L, second-line; 3L, third-line; BC, breast cancer; CSF-1R, colony stimulating factor-1 receptor; ESCC, esophageal squamous cell carcinoma; FGFR, fibroblast growth factor receptor; GC, gastric cancer; GEA, gastroesophageal adenocarcinoma; GEJC, gastroesophageal junction carcinoma; HCC, hepatocellular carcinoma; LS-SCLC, limited-stage small cell lung cancer; MEK, MAP/ERK kinase; NSCLC, non-small cell lung cancer; PD-L1, programmed death ligand-1; VEGFR, vascular endothelial growth factor receptor.



BeiGene global internal discovery pipeline covers a vast majority of the world's cancers (cont)



BRUKINSA® (zanubrutinib)



Independent & PBM owned SP Qualifications

PATIENT CENTRIC

Oncology focused with a great track record of launching oral oncology products

Must have high touch oncology/hematology services

- Nimble and Flexible
- Able to comply with data requirements

Covered lives

R

Committing resources to oncology advocacy groups to better transition patients to these services

High rates of performance metrics

Cost–AGREE TO FEES

Current network can handle future indications. More volume doesn't equal more partners needed. We are partnered with the best independent oncology focused SP's

> Learn. Connect. Conaborate



BeiGene is dedicated to a patient-centric approach. The distribution model we choose to remain with or move towards needs to continue to focus on the patient and their continuum of care by:



Aligning with patient support programs

Providing transparent data to monitor patient adherence

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Maintaining a sense of urgency in taking care of each patient

Cancer patients deserve high-touch service and BeiGene continues to differentiate ourselves by aligning with our mission and values. It is critical that our distribution network demonstrates our commitment to patient care with a white glove approach.



BeiGene/Acentrus Partnership Data Delivery

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Data Intake

 Easy-to-submit data mart enables health systems to provide data that meets manufacturer requirements.

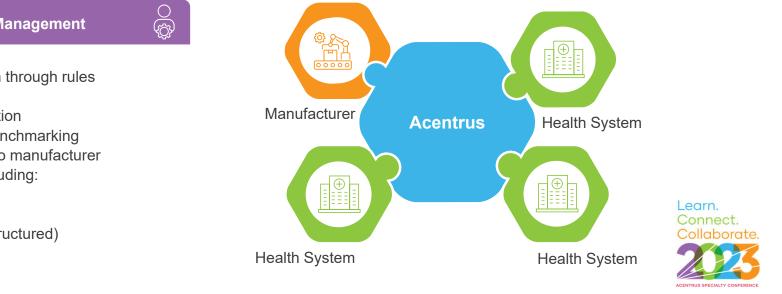
Full Data Submissions

A Manufacturer Perspective

Data is submitted by all network participants including data for prescriptions filled by contract pharmacies.

Patient Health Informationcompliant Processes

 Fully compliant processes protect PHI during inbound and outbound data sharing, as well as internal data processing.



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Robust Data Capabilities And Management

- Data intake
- Formatting and data validation through rules
- Quality check and assurance
- De-identification and tokenization
- Further verification through benchmarking
- Aggregation and submission to manufacturer
- Comprehensive data sets including:
 - Dispensing
 - Case Management
 - EMR (structured and unstructured)

BeiGene/Acentrus Partnership Data in Action

BTKI Dispensing data ~50 Health Systems and Medical Centers

- Identify product uptake and utilization patterns by indication
- Understand HCP prescribing behavior
- Better forecast our product usage for future quarters, in a specialty distributor-based distribution model
- · Provide insights around market share in certain regions and health systems
- · Identifying access barriers for Health Systems
- · Partner to improve specialty pharmacy coordination of care

EMR data ~25 Health systems

Real world evidence

~50

- Outcome-based studies
- Total cost of care insights
- Partner to improve outcomes while lowering the total cost of care



Learn.

BeiGene/Acentrus Partnership 2023







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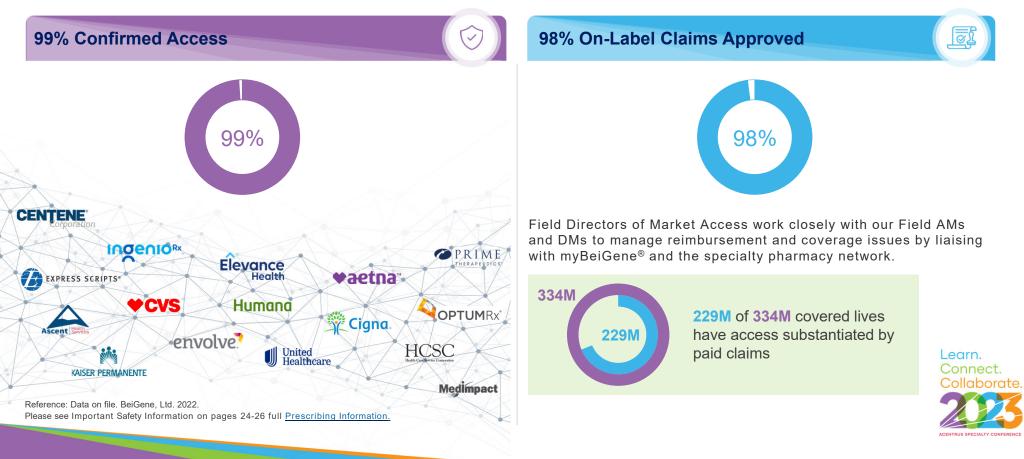


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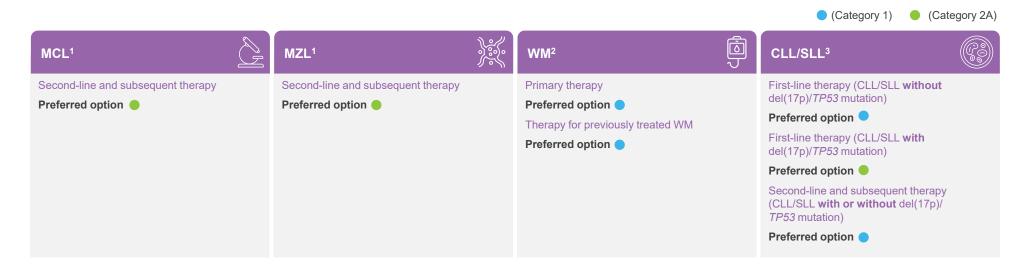
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Appendix

BRUKINSA is well covered with access substantiated by paid claims



NCCN recommendations for zanubrutinib (BRUKINSA)



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NCCN = National Comprehensive Cancer Network® (NCCN®).

References: 1. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines[®]) for B-Cell Lymphomas V.1.2023. © National Comprehensive Cancer Network, Inc. 2023. All rights reserved. Accessed January 25, 2023. To view the most recent and complete version of the guideline, go online to NCCN.org. 2. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines[®]) for Waldenström Macroglobulinemia/Lymphoplasmacytic Lymphoma V.1.2023. © National Comprehensive Cancer Network, Inc. 2022. All rights reserved. Accessed January 25, 2023. To view the most recent and complete version of the guideline, go online to NCCN.org. 3. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines[®]) for Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma V.2.2023. © National Comprehensive Cancer Network, Inc. 2023. All rights reserved. Accessed January 25, 2023. To view the most recent and complete version of the guideline, go online to NCCN.org. 3. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines[®]) for Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma V.2.2023. © National Comprehensive Cancer Network, Inc. 2023. All rights reserved. Accessed January 25, 2023. To view the most recent and complete version of the guideline, go online to NCCN.org.



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