Talquetamab (relapsed and refractory multiple myeloma, at least 3 prior therapies)
Restriction of the authority to supply care

Resolution of: 18 July 2024 Valid until: unlimited
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Restriction of the authority to supply care according to Section 35a, paragraph 3b, sentence 2 SGB V

For the active ingredient talquetamab in the treatment of:

"adult patients with relapsed and refractory multiple myeloma, who have received at least 3 prior therapies, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody and have demonstrated disease progression on the last therapy"

the authority to supply care according to Section 35a, paragraph 3b, sentence 2 SGB V is limited to those care providers who participate in the required routine practice data collection.

Care providers within the meaning of this resolution are physicians participating in SHI-accredited medical care, medical care centres and facilities according to Section 95 SGB V as well as hospitals approved for care provision according to Section 108 SGB V.

Care providers who are not authorised to supply the medicinal product may exceptionally prescribe the medicinal product at the expense of the statutory health insurance, provided that the prescription is made exclusively for the purpose of further prescribing the medicinal product and ensuring the success of the therapy after prior consultation with the care provider authorised to supply care and the same continues to be responsible for data collection, thus not jeopardising the purpose of the restriction of the authority to supply care, namely to obtain valid data from the supply of medicinal products to insured persons.

Participation in the required routine practice data collection is ensured by the proper (proven in writing) participation of the (approved) healthcare provider in the data collection for the required routine practice data collection on the basis of the confirmed study protocol of the pharmaceutical company.

The coordination of the unauthorised care provider with the authorised care provider should be documented in the patient record of the unauthorised care provider.