UACT
UNION FOR AFFORDABLE CANCER TREATMENT

1621 Connecticut Avenue NW
Suite 500
Washington, DC 20009
Tel.: 202.332.2670
www.uact.org

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Joseph Jimenez, CEO
c/o Novartis Pharmaceuticals
One Health Plaza
East Hanover, NJ 07936-1080
United States
Email: joseph.jimenez@novartis.com

Dear Joseph Jimenez,

The Union for Affordable Cancer Treatment (UACT), created in 2014, is a union of people affected by cancer, their family members and friends, people who take care of people with cancer, health care professionals and cancer researchers committed to increasing access to effective cancer treatment and care. We are particularly concerned about the rapidly escalating cost of cancer medication and seek to fight for cancer treatment and care to be affordable and available, everywhere, for everyone who needs it.

We are writing to ask questions about the company's costs of developing chimeric antigen receptor T-cell (CAR T) treatments for cancer, the number of people you anticipate will benefit from this treatment, and the steps that each company will take to ensure equitable and affordable access. The questions are as follows:

1. What are the specific costs that your company has incurred or you anticipate will incur to bring a CAR T treatment to market, including, in particular, the actual research and development costs, as opposed to and distinct from the costs of acquiring a company that holds CAR T patents?

2. What is the expected manufacturing and delivery cost of a CAR T treatment, including specifically the costs your company will incur to provide the treatment to a patient? In estimating the manufacturing costs, we ask that you identify the components of costs that are related to infrastructure that can have dual uses, or can be reused for other projects.

3. What will be the expected costs to the patient incurred by related health care providers, such as the entities receiving and injecting cells into the patient, and monitoring and caring for the patient during and after delivery of the cells?

4. Which patents and patent applications are currently held by and/or licensed to the company for CAR T, and in which countries are these patents filed or expected to be filed?

5. For the patents listed in question 4, which patents have rights by the United States or any other government?

6. Which grants, research contracts, CRADAs, tax credits and other subsidies from governments and nonprofit entities were relevant to the development of the CAR T treatment?

7. How many patients will potentially benefit from CAR T treatment in the United States, in other high income countries, and in developing countries?

8. What steps will your company take to ensure equitable and affordable access to CAR T treatments in the United States, in other high income countries, and in developing countries?

9. Will your company enter into negotiations with the Medicines Patent Pool to license CAR T technologies in developing countries?

We look forward to receiving your responses. Thank you.

Sincerely,

Manon Ress, Acting Director, UACT
manon.ress@cancerunion.org

Jordan Donn Jarvis, Member, UACT Board of Directors

Ophira Ginsburg, MD, Member, UACT Expert Advisory Board

Gilberto de Lima Lopes Jr., MD, MBA, FAMS, Member, UACT Expert Advisory Board

Ruth Lopert, MD, Member, UACT Expert Advisory Board

Ilze Aiszelniece, Member, UACT Organizing Committee

CC:
Paul Barrett, Global Head of External Communications, paul.barrett@novartis.com
Eric Althoff, Global Media Relations, eric.althoff@novartis.com