

Protocol TrainingFor Participating Clinicians and Site Staff

Version 3.0, December 2023

ALZ-NET Operations Team Office Hours

Every Tuesday from 12pm-2pm EST Every Wednesday from 2pm-4pm EST

Click to
Join ALZ-NET
Office Hours



Connect with the ALZ-NET Operations Team at the American College of Radiology (ACR)

Topics include, but are not limited to:

- Study start-up assistance
- Protocol review*
- Contract support
- IT support
- Database support
- Regulatory guidance
- General operations
- Billing and reimbursement guidance

*To schedule a formal site protocol training, email <u>alz-net@acr.org</u>.





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ALZ-NET Overview

Background
Protocol Aims
Clinical Care vs Research
Coverage with Evidence Development (CED)



What is the Alzheimer's Network for Treatment and Diagnostics (<u>ALZ-NET</u>)?

• A national provider-enrolled patient network for patients being treated with novel U.S. Food and Drug Administration (FDA)-approved therapies* for Alzheimer's disease (AD).

*Refers to drugs approved as treatments for AD by the U.S. FDA since 2021

- ALZ-NET will:
 - Collect longitudinal clinical data from patients.
 - Track long-term health outcomes associated with the use of these therapies in real-world settings.
 - Assess therapy-specific safety data in the long term through the capture of therapy-related events and adverse events.
 - Serve as a resource for evidence gathering, information sharing, and education across clinical and research communities.





Why is ALZ-NET Important?

ALZ-NET will be used to build real-world evidence for approved treatments and to support drug discovery programs.

With ALZ-NET data, we may be able to:

- Study longitudinal change across treatment duration.
- Identify responders and non-responders and predictors of response and non-response.
- Compare aggregated data on outcomes across mechanism of action and classes of therapeutics.



Protocol Aims

Aim 1	Establish the necessary network infrastructure for database development, image repository and biorepository.
Aim 2	To develop mechanisms to co-enroll participants in affiliated trials.
Aim 3	Collect data to evaluate long term safety, clinical use and outcomes.
Aim 4	Merge and compare ALZ-NET data with existing databases to further understand patient outcomes and resource utilization.
Aim 5	Establish and implement infrastructure for sharing of de- identified data, images and biosamples.



ALZ-NET: Clinical Care vs Research

Sites enrolling patients into ALZ-NET will follow standard clinical care procedures AND engage in research-specific procedures.

Clinical Care

- Clinician office visits.
- Management of ongoing patient care plans, including:
 - Diagnostic and evaluation procedures.
 - Treatment decisions.
 - Applicable safety imaging and monitoring.

Research

- Obtain patient informed consent.
- Data submission, including:
 - Case report forms (CRF).
 - Clinical care data and adverse event (AE) reporting.
 - Brain image archival.
 - Patient contact for future research studies (patient may opt-in).
- ALZ-NET Team will collect participants' health insurance claims.



ALZ-NET Affiliated Coverage with Evidence Development (CED) Study

What is CED?

 A program whereby Medicare covers items and services on the condition that they are provided in the context of approved clinical studies or with the collection of additional clinical data.

Is ALZ-NET a CED Study?

 Yes. ALZ-NET was approved as a CED study by the Centers for Medicare and Medicaid Services (CMS).

What does this mean for my patients?

 Patient registration into ALZ-NET is a pathway to Medicare coverage for anti-amyloid Alzheimer's therapies* that have received traditional FDA approval.

Additional CED Details		
Study Title	Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease Following Appropriate Use Recommendations in a Medicare Population: A Coverage with Evidence Development Study	
Sponsor	The American College of Radiology	
ClinicalTrials.gov Number	NCT06170268	
CMS Approval Date	January 29, 2024	
*Current list of CED applicable therapies	LEQEMBI® (lecanemab)	





Getting Started

Site Activation
Institutional Review Board
Data Applications



Review Participating Site Requirements

Each participating site must demonstrate the use of a multi-disciplinary dementia care team and optimal medical management.

Additionally, sites must:

- ✓ Have clinical expertise AND an infrastructure to provide novel FDA-approved AD therapies consistent with the safety monitoring outlined in applicable FDA approved labels.
- ✓ Have access to:
 - Accredited and appropriate radiological services for diagnostic and safety brain imaging
 - Infusion services
 - Emergency services
 - Standard cognitive, behavioral, and functional assessments used in dementia care



Complete the Site Feasibility and Registration Questionnaire

- All interested sites must complete a site feasibility and registration questionnaire to receive an invitation from ALZ-NET to participate.
- Participating sites will be recruited and invited to participate on a rolling basis.
- Contact <u>alz-net@acr.org</u> to check your application status.



Sites will be identified via the IDEAS Study network, affiliations with the Alzheimer's Association and partnering organizations, applicable national societies, as well as national media outreach.



Complete Site Start-up Activities

Every Tuesday from 12pm-2pm EST Every Wednesday from 2pm-4pm EST

Join ALZ-NET Office Hours

Complete the Site Activation
Checklist after your site
receives an official welcome
invitation email from the ALZNET Operations Team.

Click to view the full

Site Activation Checklist

Note: All steps can occur simultaneously to expedite the start-up process.

- ✓ Fully execute the ALZ-NET Research Agreement*
- ✓ Obtain Advarra Institutional Review Board (IRB) Approval (Slide 15)
- ✓ Complete <u>Human Subject Protections Training</u>
- ✓ Complete Staff Registration Form for each staff member (Slide 14)
- ✓ Register for access to data applications (Slide 16)
 - ✓ Case Registration (RMS)
 - ✓ Electronic Data Capture (<u>Medidata Rave</u>)
 - √ Image submission, if applicable (TRIAD)
- ✓ Complete Protocol Training Acknowledgement Form, as applicable:
 - For Principal Investigators
 - For Site Support Staff
- ✓ Send <u>Site EFT Vendor Information</u> and <u>W-9</u> to ALZ-NET Operations Team at <u>alz-net@acr.org</u>.

*included in welcome email



Complete the Staff Registration Form

Prior to completing the Staff Registration Form, please ensure the following information is available to you:

- Site ID number (in welcome packet)
- For each staff member AND site investigator:
 - First and Last Name
 - Email address
 - Human Subjects Protections Training
 - Data application access needs (<u>Slide 16</u>)
- For each site investigator:
 - National Provider Identification Number (NPI)
 - Type of provider
 - Board certifications, subspecialties and fellowship training
 - Proportion of time devoted to dementia care
 - Years of experience in dementia care
 - Experience with novel FDA therapies
 - Patient Enrollment Chain and Ownership System (PECOS) status



Central IRB Overview



Referring physician sites **must use Advarra IRB as the IRB of record.**Local IRBs **cannot** be the ALZ-NET IRB of record.

- Advarra IRB protocol number for ALZ-NET: Pro00064645
- Prior to full site activation, a site must:
 - Obtain site-level IRB approval
 - Receive approval of site-specific informed consent form (ICF)
- During the study, a site must:
 - Notifying ACR AND Advarra IRB if any revisions are made to their ICF.



Read More on the IRB
Approval and Informed
Consent Process



Data Applications

Tip: ALZ-NET staff submitting data should save web browser bookmarks for the following ACR applications:



Research Management System

View Training Module

- Consent verification
- Eligibility verification
- Demographic data
- Patient identifiable information (PII)



View Training Module

Electronic Data Capture (EDC) for all study timepoints (e.g., baseline visit, 6-month visit, etc.).



View Instructions

Transfer of brain images and associated radiology reports.





Eligibility and Screening

Patient Eligibility
Informed Consent Process
Expectations for Study Participants

ALZ-NET Patient Inclusion Criteria

Prior to participant registration, the site must confirm ALL the following inclusion criteria are TRUE:

- 1. The patient or patient's legally authorized representative (LAR) or proxy has the ability to understand the purpose and risks of ALZ-NET, including providing signed and dated informed consent and authorization to use protected health information (PHI).
- 2. Patient is at least 18 years or older at time of informed consent.
- 3. Patient has a diagnosis of Mild Cognitive Impairment (MCI) or dementia with clinical suspicion of AD as contributing pathology AND 1) is being evaluated for treatment OR 2) will be initiating treatment OR 3) has already initiated treatment with novel FDA-approved AD therapies in real world clinical practice.
- 4. If treatment is initiated at time of consent, patient meets appropriate label requirements and treatment follows appropriate use recommendations for novel FDA-approved AD therapy/therapies.
- 5. Patient's treating clinician has made the decision to treat the patient with novel FDA-approved therapy for AD independent of the purpose of ALZ-NET and has already or will be initiating treatment.



CED Cohort Inclusion Criteria

Effective January 29, 2024, enrollment into ALZ-NET permits coverage of traditionally approved* monoclonal antibodies treatments directed at AD for Medicare beneficiaries.

ALZ-NET Billing Guidance for CED

Therapies that are covered under this CED approval include: LEQEMBI™ (Lecanemab)

Patients may be eligible to be a part of the CED Cohort if they meet the following inclusion criteria:

- 1. Enrollment into the ALZ-NET Protocol.
- 2. Medicare beneficiary with primary insurance of Medicare Part B (traditional Medicare) or Part C (Medicare Advantage plan). Dual-eligible Medicaid coverage is allowed.
- 3. Being treated with a beta-amyloid targeting monoclonal antibody that has received traditional FDA approval for the treatment of AD.



Informed Consent Process Overview

Before discussion, provide patient/LAR with a copy of Informed Consent Form (ICF)



Site investigator determines participant's ability to consent.



Review and discuss ICF with patient/LAR.



Site
Investigator or
authorized
staff AND
patient/LAR
sign ICF AND
initial optional
components.



Site provides a copy of the fully executed ICF to the patient/proxy **AND** keep original in ALZ-NET records.

ICF **must** be in the patient's or Legally Authorized Representative (LAR)'s **preferred** language.

LAR or proxy allowed per local and state regulations.

Face to face, inperson is best
practice.
Remote/electronic*
consent permitted

LAR must sign and date where required AND provide LAR's initials on optional components.

*See Slide 21



Obtaining Electronic Signatures and Remote Consent

If planning complete any of the following consent activities, confirm you are complying with Advarra IRB's regulations:

Click to Review
Guidance for
Electronic and
Remote Informed
Consent

Handwritten Signatures in a Digital Format:

- The signer's identity needs to be verified.
- Signatures obtained in-person; not over email/video call.
- The signature must be done in such a way that cannot be excised, copied, or otherwise transferred to falsify an electronic record by ordinary means.

Obtaining Electronic Signatures:

Determine if your site is using any electronic or digital signature that falls under the eConsenting Category.



Submit a modification to Advarra IRB for Electronic Signature Use *prior* to obtaining consent.



Follow Advarra
Guidance for
Obtaining
Electronic
Signatures.

Obtaining Signatures Remotely:

- 1. Site fax/email ICF to patient.
- 2. Patient completes ICF sections and fax/emails it to site.
- 3. Site complete ICF discussion by phone/videocall.
- 4. Site must document:
 - How ICF was transmitted to the participant (e.g., email, fax, mail, etc.).
 - How the participant's signature was obtained (e.g. Electronic signature, scanned and emailed, faxed, or mailed; photograph of signature/signature page sent to site).



Expectations for Study Participants

ALL participants who consent to participate in ALZ-NET are consenting to:

SOME participants may **OPT IN** on the ICF to be contacted about other research opportunities:

Allow the **clinical site to provide ALZ-NET**:

- •Clinical and brain imaging data related to dementia care for the duration of participation.
- •Personal Identifiable Information including name, address, social security number, health insurance identification number, date of birth, and contact information.

Continue to visit treating clinician and receive care as would normally be provided outside of participation in ALZ-NET.

Allow **ALZ-NET researchers** to:

- •Collect and analyze health insurance claims data for five (5) years prior to enrollment AND for the duration of participation in ALZ-NET.
- •Share de-identified data with external researchers for use in future dementia related research

Alzheimer's Association TrialMatch™ staff will contact a patient who consents to future research to confirm participant's interest in specific affiliated studies for which they may qualify and explain who may be contacting them for each specific affiliated study. Note: Participation in any affiliated study is independent from participation in ALZ-NET.





Data Collection

Data Submission
Additional Measures
Imaging Submission
Co-enrollment
Reportable Events
Claims Data Collection



Data Collection Schedule

Timepoint	Data Collected	Data Application
Study Start-up	Participating Site CharacteristicsSite Investigator (Prescribing Clinician) Characteristics	Site Feasibility and Registration FormStaff Registration Form
Case Registration	Informed ConsentEligiblity AssessmentPatient Demographics	RMS Research Management System
Baseline and Follow-up *designates optional at follow-up.	 Concurrent Study Enrollment Patient Characteristics* Medical History Lifestyle Data* Vital Signs Clinical Features of Co-pathology Additional Measures (cognitive, functional, behavioral) Concomitant Medications AD Diagnosis, Characteristics and Biomarkers Brain Imaging Clinical Date of AD Treatment and Dosin Log MRI Assessment Health Encounters (Hospitalizations and ER Visits) Adverse Events End of Participation (Deat Lost to Follow-up, Conse Withdrawn) if applicable Brain Image(s) Transmission 	## medidata Medidata RAVE



Data Entry Requirements

The participating site should complete the following tasks for each patient who consents to participate in ALZ-NET:

Standard Clinical Care

- Patient's clinician prescribes treatments at clinician's discretion.
- Patient's treating clinician monitors patient according to patient needs and local standard of care (SoC).
- Clinician office schedules patient visits per the treating clinician's standard timelines.

Note: Refer to **detailed table of data elements (Slide 24)** and the **case report form packet** indicate which data should be captured in participants' medical records.

ALZ-NET Data Entry

- Submit participant registration data in RMS at:
 - Baseline
- Submit clinical visit data in Medidata Rave at:
 - Baseline
 - 6 months
 - 12 months
 - 18 months
 - 24 months
 - Annually thereafter until participation endpoint is met
- Submits images to TRIAD, when available.



Additional Measures

Required data elements must be collected by authorized clinical staff during standard of care clinical visit AND documented in the patient's medical record.

Baseline: Report on the most recent assessments performed. (Note: select "not completed" if not available at time of registration)

Follow-Up: Report on all assessments performed during the reporting period.

Required Assessments

- Mini-Mental State Evaluation (MMSE)*
- Montreal Cognitive Assessment (MoCa)*
- Functional Activities Questionnaire (FAQ)

Optional Assessments

- AD8 Dementia
 Screening
- Neuropsychiatric Inventory (NPI)*

ALZ-NET sites are authorized to use the <u>Functional Activities</u> <u>Questionnaire (FAQ)</u> and <u>AD8</u> at alz.org.

*ALZ-NET does not currently provide forms for the cognitive and additional assessments. ALZ-NET is seeking a national license for MoCA/MMSE and NPI-Q, that would make the assessments available to sites that are participating.



Brain Imaging in ALZ-NET

All diagnostic and safety monitoring imaging procedures should be conducted per local practice, applicable procedure standards and appropriate use guidelines.

Participating sites are expected to:

- Obtain brain images and accompanying reports from the imaging facility that provides the imaging services.
 - Brain images to be transferred include amyloid PET, Tau PET, FDG PET, and MRI
- Provide images and reports to ALZ-NET via ACR TRIAD



View ALZ-NET resources and recommendations for:

- Training
- Acquisition
- Scanners
- Sequencing
- Reporting guidelines and templates



Co-Enrollment in Affiliated Studies

Patients registered in ALZ-NET may co-enroll in an ALZ-NET affiliated study.

The following must occur for co-enrollment (when applicable):

- Separate patient informed consent authorization for each affiliated study.
- Separate patient registration process.
- One time data entry for any overlapping data collected in the ALZ-NET protocol.
- Sites and patients should refer to applicable affiliated study protocols and informed consent forms for additional information.



Discontinuation or Change of Treatment

Participants who switch treatments, or discontinue treatment altogether, will continue participating in ALZ-NET unless informed consent is withdrawn.

- Treating clinician records the primary reason for drug change or discontinuation, including any Adverse Events (AE) leading to the decision.
 - Information will be collected at **routine clinical visits** as per the protocol for the extent of the patient's participation in the study.
- If treatment change or discontinuation occurs due to a safety event that may be specific
 to a novel FDA-approved AD treatment, information will be collected through resolution
 of that event.



Transfer of Care

Patients who decide to transfer their care from one prescribing clinician to another while participating in ALZ-NET are able to continue their participation if the new treating clinician is an approved ALZ-NET investigator.





The new treating clinician may be at the same participating site or at another site that is also participating in ALZ-NET.

If a patient is transferring care to a new ALZ-NET site, the participant must be re-registered by that site.



Participation End Points

ALZ-NET has no defined End Visit for patient participation.

ALZ-NET participants will continue to receive care and data collection will continue, unless one of the following conditions are met:

- Patient withdraws consent. Patients may withdraw consent to participate in ALZ-NET at any time with no effect on their medical care or access to treatment.
- Patient is lost to follow-up. Patients will be considered lost to follow-up if they miss 3 consecutive data collection timepoints (for assessment by the prescribing clinician or site staff) and are unable to be contacted by the participating ALZ-NET site.
- Patient death
- Termination of the current provider site's participation in ALZ-NET
- Closure of ALZ-NET



Adverse Events Reporting

Sites must follow standard FDA reporting procedures as outlined on applicable FDA labels of prescribed novel AD therapeutics.

Reporting procedures may include directly contacting the applicable pharmaceutical company and/or the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Submission of adverse event data to ALZ-NET **does not** satisfy any other regulatory requirements for reporting.

An **Adverse Event (AE) Form** must be submitted at all follow-up time points for registered patients who experienced a reportable event. Submission is required if at least one of the following criteria is met:

- Expected AEs per FDA label of the prescribed novel AD therapeutic.
- Unexpected AEs that are considered to be possibly, probably, or definitely related to a novel FDA-approved AD therapeutic.
- AEs that cause a change in management of the prescribed novel FDA-approved AD therapeutic.
- Events associated with the prescribed novel FDA-approved AD therapeutic(s), in the opinion of the site investigator using attribution categories of possible, probable, and definite.
- All serious adverse events (SAEs).





Protocol Violations

If a protocol deviation is identified, **the site must**:

- Immediately email <u>ALZNET-Regulatory@acr.org</u>.
- Report the violation to the IRB of record within 2
 weeks (10 business days) from the time the violation
 was identified.
 - Redact all PHI from submission
 - Include:
 - Case ID #
 - Advarra Protocol #
 - Description of the violation
 - Corrective Action Plan (CAPA)
- Save IRB acknowledgement* and additional documentation with patient file. (*Note: If review is required, the IRB will review at the next quarterly review period).

Examples:

Changing of protocol/consent without IRB approval

Use of noncurrent ICF to consent patients

Failure to consent patient who is enrolled.

Breach of confidentiality

For additional guidance, email ALZNET-Regulatory@acr.org.



Health Insurance Claims Data

The ALZ-NET ICF authorizes:

- Collection and analysis of patient health insurance claims data for a period of five (5) years prior to their enrollment in ALZ-NET and throughout their participation, unless consent is withdrawn.
 - Collection and analysis will be completed by the American College of Radiology (ACR) Center for Research and Innovation (CRI) Data Management Center and Brown University Statistical Center.
 - Claims data will be collected directly from applicable insurance companies.

Important Reminders:

- Claims data collection from insurance companies is specific to the data analysis purpose of ALZ-NET.
- No claims data will be stored in the primary data set of ALZ-NET that will be used for external data sharing and future research.
- Participating sites <u>do not</u> have any responsibility in tracking or reporting of claims data.





ALZ-NET Operations Team

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