



Protocol Training

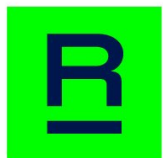
For Participating Clinicians and Site Staff

Protocol Version 4.0
January 10, 2025

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**



American College
of Radiology™
Center for Research and Innovation

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 alz-net@acr.org.***



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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 (ALZ-NET)?

- 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	Collect data to evaluate long term safety, clinical use and outcomes .
Aim 3	To develop mechanisms to co-enroll participants in affiliated trials
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 paradigm whereby Medicare covers items and services on the condition that they are furnished 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	<i>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</i>
Sponsor	<i>The American College of Radiology</i>
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

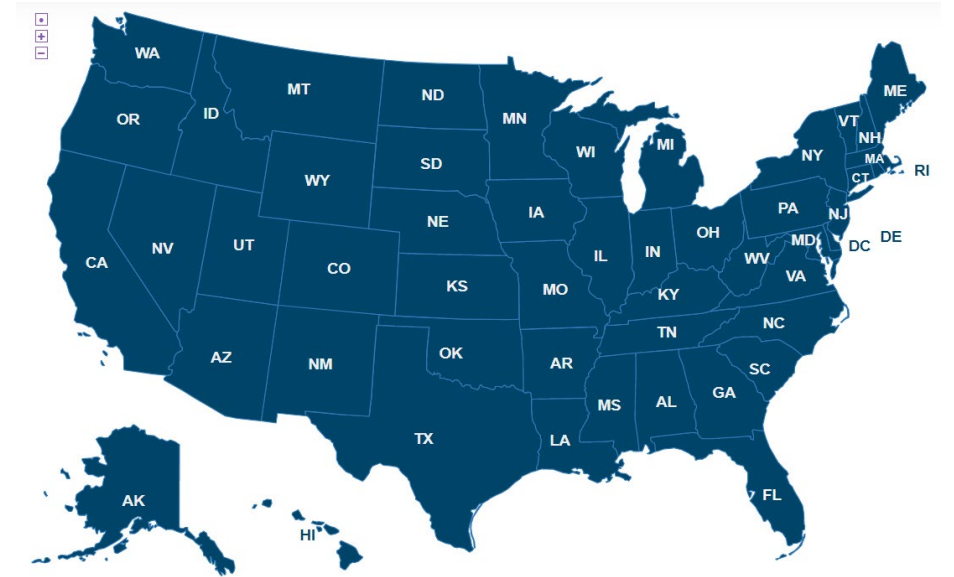
Each participating site **must** demonstrate the **use of a multi-disciplinary dementia care team** and **optimal medical management**.

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 Form** to receive an invitation from ALZ-NET to participate. [Join the Network](#)
- Participating sites will be recruited and invited to participate **on a rolling basis**.
- Contact alz-net@acr.org 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

Complete the Site Activation Checklist *after* your site receives an official welcome invitation email from the ALZ-NET Operations Team.

**Download the
Site Operations Toolkit**

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 [Human Subject Protections Training](#)
- ✓ Complete Staff Log in ALZ-NET Portal to add practice staff (Slide 14)
- ✓ Register for access to data applications (Slide 16)
 - ✓ Case Registration ([ALZ-NET Portal](#))
 - ✓ Electronic Data Capture ([Medidata Rave](#))
 - ✓ Image submission, if applicable ([TRIAD](#))
- ✓ Complete Protocol Training Acknowledgement Form, as applicable:
 - [For Principal Investigators](#)
 - [For Site Support Staff](#)
- ✓ Send [Site EFT Vendor Information](#) and [W-9](#) to ALZ-NET Operations Team at alz-net@acr.org.

**included in welcome email*

Complete the Staff Registration Form

Prior to completing the Staff Log in the ALZ-NET Portal please ensure the following information is available to you:

Note: Information collected is solely for study operations.

- **For each staff member AND site investigator:**
 - First and Last Name
 - Email address
 - Human Subjects Protections Training
 - Medidata Rave data application access needs
- **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:

ALZ-NET Portal

[View Training Module](#)

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

medidata Medidata RAVE

[View Training Module](#)

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

TRIAD[®] ACR IMAGE AND INFORMATION EXCHANGE

[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.**

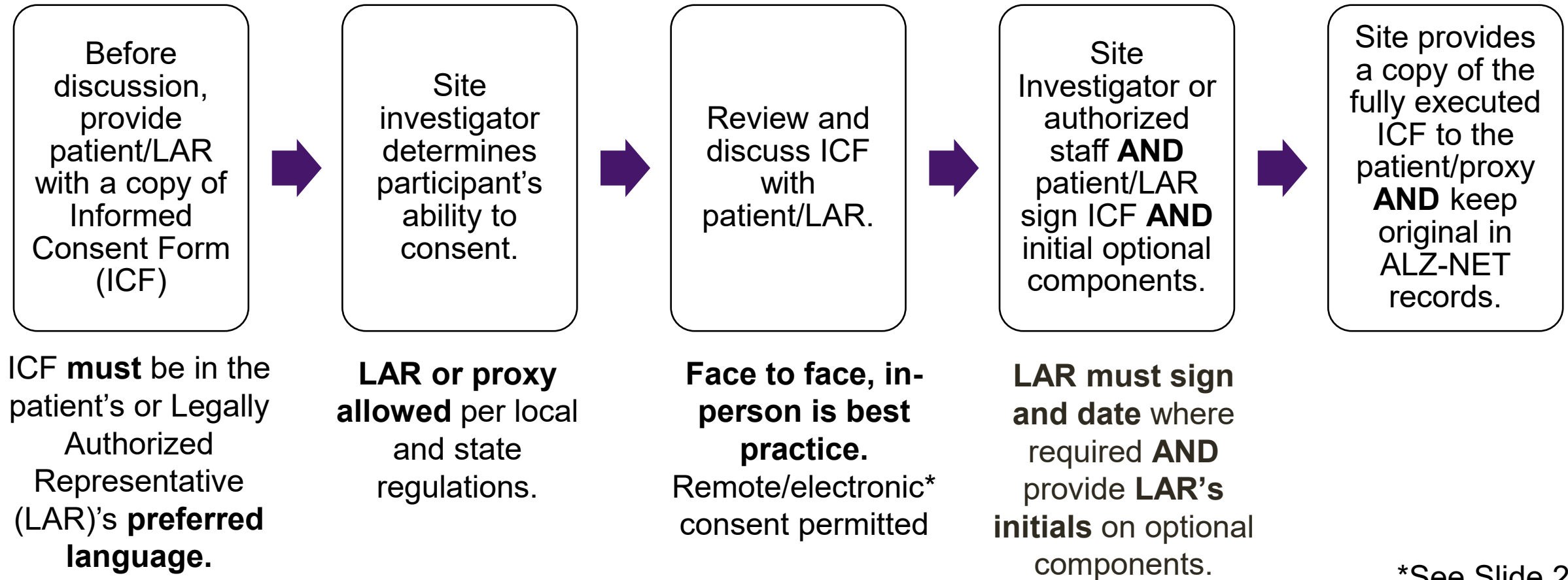
ALZ-NET Billing Guidance for CED

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

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



*See Slide 21

Obtaining Electronic Signatures and Remote Consent

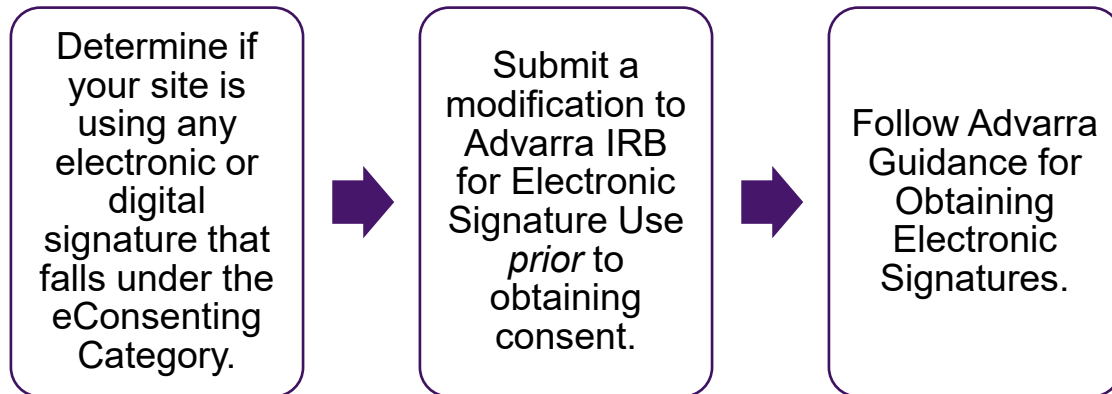
If planning complete any of the following consent activities, **confirm you are complying with Advarra IRB's regulations:**

[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:



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:

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




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

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	<ul style="list-style-type: none"> Participating Site Characteristics Site Investigator (Prescribing Clinician) Characteristics 		<ul style="list-style-type: none"> Site Feasibility and Registration Form
Case Registration	<ul style="list-style-type: none"> Informed Consent Eligibility Assessment Patient Demographics 		
Baseline and Follow-up *designates optional at follow-up.	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Brain Imaging Clinical Data AD Treatment and Dosing Log MRI Assessment Health Encounters (Hospitalizations and ER Visits) Adverse Events End of Participation (Death, Lost to Follow-up, Consent Withdrawn) if applicable 	
	<ul style="list-style-type: none"> Brain Image(s) Transmission 		

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 registration data in ALZ-NET Portal 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 [Functional Activities Questionnaire \(FAQ\)](#) and [AD8](#) 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:

- 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** ALZNET-Regulatory@acr.org.
- **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 **non-
current 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 ahead, **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 do not have any responsibility in tracking or reporting of claims data.*

Site and Case Payment Schedule

Time Point	Payment or Data Due Date	Accrued Compensation
Site Activation	Payment remitted within thirty (30) days following the close of the month of full activation	\$2,500
Site Milestone Payment	Site milestone payment (one time payment upon a site's 10 th patient enrollment)	\$5,000
Case Registration Form Submission	Data due after documented informed consent is provided by research participant	\$0
Baseline (one time) Data Submission	Data due after case registration is completed. Payment remitted within thirty (30) days following the close of the month of data entry.	\$300
Follow Up Data Submission(s)	Data due in accordance with the follow up schedule outlined within the Protocol. Payment remitted within thirty (30) days following the close of the month of data entry.	\$150
Imaging Data Submission(s)	Data due in accordance with the protocol. Payment made for each brain scan submitted with complete set of DICOM data and accompanying radiology report.	\$50 each



ALZ-NET Operations Team

American College of Radiology (ACR)
Center for Research and Innovation (CRI)

alz-net@acr.org

215-574-3181



American College
of Radiology™

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