



Consideration of Concept Plan for Patient Support Program

BACKGROUND

The mission of the California Institute for Regenerative Medicine (CIRM) is to accelerate world class science to deliver transformative regenerative medicine treatments in an equitable manner to a diverse California and the world. The regenerative therapies supported by CIRM are designed to address unmet medical needs that may be curative with a single or limited treatment course in some cases.

Clinical trials for cell and gene therapies are becoming more demanding for patients throughout the entire clinical trial process, from screening and enrollment to long-term follow-up. In particular, increasing financial expenditures by enrolled study participants require added support beyond routine costs for patients and their families. As a result, service providers (for-profit and non-profit) have emerged to provide a range of services to support patients to meet the new demands of cell and gene therapy trials.

Originating in traditional call centers, Patient Support Programs (PSPs) have grown into highly successful programs that place greater emphasis on providing services to patients throughout the course of their treatment plan. Overwhelming evidence indicates a positive impact of PSPs on clinical trial accrual rates, study participation by minority groups, trial adherence, humanistic outcomes, reduction in healthcare utilization costs, and quality of life. Best-in-class PSPs also provide services related to the needs of the whole patient and may include support with financial stressors and psychosocial, practical, and emotional support. FDA-approved medicines will not be commercially launched in the U.S. without a PSP.

In addition to providing direct patient support, these programs increase the likelihood of trial enrollment, completion of CIRM-supported clinical trials, and protecting the California investment in this research. Due to the high demands of clinical trials, dropout rates can be as high as 30%, which may be attributed to financial costs, long-distance traveling, family commitments, and lack of incentives for study completion. Currently, 85% of clinical trials fail to retain sufficient patients, 37% are terminated before testing even begins due to under-enrollment, 11% fail to recruit a single patient, and 30% of patients who enroll will drop out

before the trial is complete. Today, patients enrolled in gene and cell-edited therapies require support that is specifically customized to their treatment.

Proposition 71, the California Stem Cell Research and Cures Initiative (November 2004), enacted the California Stem Cell Research and Cures Act. This established CIRM for the purpose of making grants and loans for stem cell research and research facilities, and appropriated \$3 billion in general obligation bonds to be governed by the Independent Citizens Oversight Committee (ICOC), a distinguished body appointed by California constitutional officers and public university chancellors.

Proposition 14, the California Stem Cell Research, Treatments, and Cures Initiative (November 2020), authorized an additional \$5.5 billion in new bonds to continue CIRM funding of stem cell and other medical research and training, stem cell therapy, and delivery of treatments to patients, research facility construction and administrative expenses.

Under these initiatives, CIRM grantees have revenue-sharing requirements for funds they receive from licensing or self-commercializing inventions or technologies that arise from CIRM-funded research. Prop 14 requires that these revenues be deposited into an interest-bearing account in the General Fund, to be spent on “offsetting the costs of providing treatments and cures arising from institute-funded research to California patients who have insufficient means to purchase such treatment or cure, including the reimbursement of patient-qualified costs for research participants.” Currently, the CIRM Licensing Revenues and Royalties Fund has a balance of \$15.6 million derived from royalty payments.

OBJECTIVE

The overall objective of this funding opportunity is to establish a statewide Patient Support Program (PSP) with financial and logistical support to all patients being evaluated or enrolled in CIRM-supported clinical trials to improve access, identification, enrollment, and retention with an emphasis on underserved populations. These services include but may not be limited to:

- Clinical trial navigation, directing patients to appropriate CIRM-supported clinical trials based on trial criteria/eligibility for appropriate determination/potential selection.
- Evaluating California patient/family needs for financial support for non-covered services or products associated with CIRM-supported trials and directing reimbursements based on Federal Poverty Level (FPL) criteria. FPL will be assessed utilizing a third-party screening tool (e.g., Experian or TransUnion) to validate patient claims of income and household size.
- Assessing patient/family needs regarding logistical/travel support and administering reimbursements for CIRM-enrolled patients for attending

required medical appointments. This support includes transportation/travel expenses, such as gasoline, tolls, parking, airfare, taxi, train, lodging, and meals during travel.

Phase 1 of the award will collect intelligence on the status of patient support programs, launch basic services to meet the needs of regenerative clinical trial patients, and identify additional potential patient services for AAWG consideration.

Phase 2 will scale additional patient support services, which may include ongoing nurse navigator support for the psychosocial, emotional, and practical needs of patients and their families.

AWARD INFORMATION

How the Program Is Structured?

The first phase of the program will award an organization having suitable expertise with a grant to provide patient support services. These will address the financial and logistical bottlenecks often experienced by patients and their family members enrolling in or participating in CIRM-funded cell and gene therapy trials. The awardee is expected to have demonstrated expertise in the services of standard patient support programs using a HUB service model:

- Maintaining a call and support center:
 - Provide live support to handle inbound inquiries during normal program hours. The call center shall operate Monday through Friday from 8:00am to 5:00pm Pacific Time, exclusive of recognized holidays.
 - Provide individualized customer service to callers pursuant to the business rules documents (“BRD”), standard operating procedures (“SOPs”) and specific operational process flows (“PFs”).
 - The HUB vendor will obtain patient and/or health care provider authorization and consent for participation in the program using CIRM-approved language that is compliant with HIPAA and all other applicable laws and regulations.
- Assessment of eligibility for financial assistance:
 - The HUB vendor will utilize BRD to determine approval or denial and provide resulting reimbursement *via* debit card for expenses related to non-covered services or products as a result of the associated CIRM-support trial.
 - The HUB vendor will utilize BRD to determine approval or denial and provide resulting reimbursement *via* debit card for expenses for logistical/travel support based on clinical trial appointments, testing, and related requirements.

- The HUB vendor shall provide CIRM with access to standard and customized reports. Access to the reports should be available 24/7 from anywhere that internet access is available to the user.

After granting the award, Phase 1 of the program will entail preparing BRD, SOPs, PFs, compiling educational materials, creating standard metric reports and staff recruitment and training. When the operational system, BRD, SOPs, PFs are in place, system testing will be implemented to assess operational readiness.

Phase 1 services will be activated post-testing and staff training. The program will be communicated and advertised through Alpha Clinics and the CIRM website. Real-time monitoring will occur at the time of activation to identify any gaps or opportunities for additional services.

Phase 2 of the program will include further expansion of patient services and initiation of additional patient financial services based on real-time metrics reporting provided by the HUB vendor, ongoing internal gap analysis, and patient experience surveys. Call center metric reporting, and real-time gap analysis results for trial participants will be provided to the Accessibility and Affordability Working Group (AAWG) members.

How Funding is Provided?

The PSP will be chosen through a competitive RFP process and awarded to a for-profit or not-for-profit organization that can provide patient support services and other requirements according to the concept plan proposed by the AAWG members and approved by the CIRM Board.

During a 5-year period, the program is expected to support hundreds of patients in need as they participate in the growing number of CIRM-supported clinical trials.

How the Program will be Monitored?

Metrics used to evaluate the program will include industry-standard monthly reports on contact volume and type, speed to access to clinical trials, enrollment metrics, type and frequency of reimbursement requests, the average time to reimbursement, and average time to case fulfillment. These metrics will be used to evaluate the impact of the program and assist the patient enrollment processes of CIRM-supported clinical trials:

- 3rd Party vendor/call center telephony metrics: speed to answer, hold time, and service turnaround time
- Case insights
- Financial assistance services demographics and utilization
 - Non-covered services
 - Logistics/travel
- Alpha Clinic referral
- Benefit investigations

- Program dashboard
- Quality metrics of case managers
- Clinical trial recruitment and retention scores
- Patient satisfaction surveys

Throughout the 5-year period, CIRM will monitor pre-defined metrics and deliverables that indicate the impact of this Fund on patient access to clinical trials and/or treatments arising from CIRM programs. These outcomes will be reported to the CIRM AAWG and ICOC.

Program Requirements

All applications for this funding opportunity will be required to provide statements describing:

1. General Information

- a. The organizational structure for supporting this program, your experience with providing exceptional management to organizations for specific programs, and the average size and scope of your typical/average HUB program that you are currently servicing.
- b. If you currently provide services to any company that might be determined to be a direct competitor.
- c. If you have any such arrangements, provide details if the contracts were terminated by either party.
- d. State your lead time requirements for the operationalization of a HUB as outlined.

2. Capabilities and Experience

- a. Hours of operation, after-hours protocol, time zone management.
- b. Team structure includes the number of call center agents (reimbursement counselors, patient care coordinators, case managers, etc.) and the number of call center supervisors and/or managers in each service location.
- c. The percentage of staff that works from home vs. working out of an office. Please describe this structure and, if applicable, how you determine who works from home.
- d. Explain your HIPAA compliance management process.
- e. Indicate your years of experience with clinical trial patients, rare diseases, and the types of programs geared towards rare disease patients, including overall program size and disease areas.
- f. Process and turnaround times for verifying insurance benefits.
- g. Please describe all quality measures (efficiency and effectiveness) utilized for program operations.

- h. Please describe your reimbursement/stipend payment process for patients that are approved for funding.
- i. Describe current in-house design functionality or partnerships with other third-party vendors to administer aspects of your services.
- j. List the number of programs for which you provide travel, lodging, and transportation.
- k. What is your process for uninsured patient screening, and how do you support patients who qualify for insurance but have not yet applied.
- l. Describe the non-English language capabilities of patient-facing staff by language and role.
- m. Describe technology tools utilized and any innovations in development to improve access solutions, recruitment, retention offerings, and how they are delivered.

3. Data and Technology

- a. List all systems used in the collection, aggregation, and delivery of required data sets (internal or commercial systems) with system scalability to meet product growth over the program lifecycle.
- b. Describe maintenance of historical data, including audit trails.
- c. Indicate the de-identification process and compliance with HIPPA/HITECH legislation.
- d. Describe the process for quality control and how you ensure that data is delivered timely with >99% completeness and accuracy. Describe your current performance metric for quality and timeliness.
- e. Describe your data security measures in place today. List all security certifications.
- f. Please describe your standard reporting package and provide an example of the types of reports that are considered customized.
- g. Please describe your phone technology and specifically what unique capabilities you offer.

What Activities will CIRM Fund?

CIRM funds will support the following activities under this opportunity:

- Clinical trial navigation to support steering patients to appropriate clinical trials based on trial criteria/eligibility for appropriate determination/potential selection.
- Assessing patient/family needs regarding financial support and administering supplemental reimbursements based on federal poverty level (FPL) criteria. Some of the reimbursements will include but not be limited to:

- travel expenses
- lodging
- loss of income
- childcare
- meals
- additional medical expenses
- participation payments
- Travel expenses to and from trial:
 - gasoline
 - parking
 - tolls
 - taxi
 - car service (Uber/Lyft)
 - airfare
 - subway card
 - train
- Accommodations during trial
 - lodging (hotel, Airbnb™)
- Childcare
 - babysitter
 - additional daycare
- Additional medical expenses

The Award Amount and Duration

The California Institute for Regenerative Medicine has allocated \$15.6 million for five years, with \$600,000 in 2022-23, \$2 million in 2023-24, \$3 million in 2024-25, and \$5 million in 2024-25 and 2025-26. The entire \$15.6 million will be allocated to the patient support program. Operational costs will be allocated from CIRM's administrative budget.

CIRM will fund a PSP for up to 5 years.

Each year, the program will be audited to assess the overall impact of the program and its level of performance. Real-time data will be used to identify additional patient services and brought to the attention of the AAWG for consideration.

ELIGIBILITY

What types of projects are eligible for funding?

Who can Apply

For-profit and not-for-profit organizations capable of meeting the defined needs of the CIRMs Patient Assistance Program. Applications may include partnerships between multiple organizations.

Applicants must be able to initiate services within 120 days of final contracting.

Each applicant must have an appropriate California operating license.

All applicants must have demonstrated a robust track record of providing patient support services and activities and be in good regulatory standing.

Applicants must have robust data and technology services with multiple backup capabilities.

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