

Community Oncology Research Program

Study Chair:

Gelareh Sadigh, MD

EAQ222CD/COSTCOM

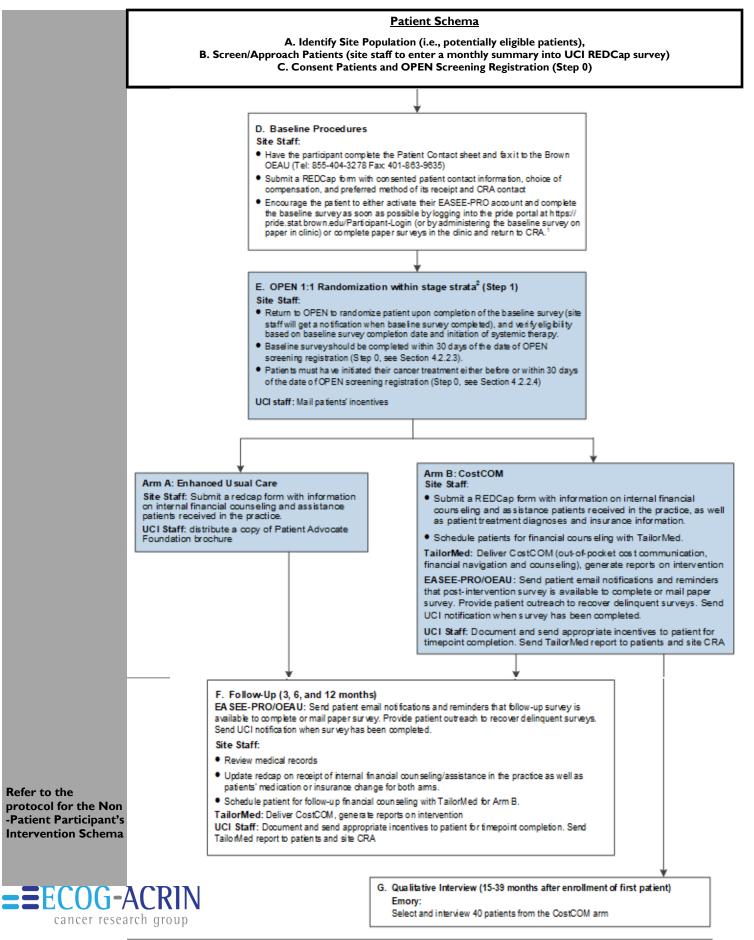
## For Patients with Any Newly Diagnosed Solid Cancer

## EAQ222CD Available Through ECOG-ACRIN Cancer Research Group Effectiveness of Out-of-Pocket Cost COMmunication and Financial Navigation (COSTCOM) in Cancer Patients Methodology Plan **Patient Population** See Section 4 for Complete Eligibility Details See Section 6 for Methodology Details Non-Patient Participants: Subset of study coordinators, Site leadership will complete an electronic survey via oncology providers, and practice financial counselors/social REDCap with information on the number of new solid workers/financial navigators/pharmacists (n=~40) from a cancer patients visited annually, their payer mix, zipcode minimum of 15 participating NCORP subsites mix, etc. (this will be updated annually) Must speak English; must be employed at NCORP site Participating NCORP subsites will work with TailorMed for at least 6 months to launch the estimator and navigation platform Must have provided care/been in contact (in the last 3 (training to be completed after study activation prior to months) to a patient on the CostCOM arm and who first patient enrollment) completed the $\geq$ 6 month study follow-up 15 months after first patient enrollment, site leadership Patient Eligibility- Step 0 (Screening Registration): will distribute a survey to eligible candidates (distributed Age $\geq$ 18 years; must be fluent in written and spoken every 3 months). The goal is to identify **non-patient** English or Spanish participants who are interested in participating in the qualitative interviews (20-30 minutes long) ECOG PS $\geq$ 3 (or must not be deemed medically una-**Patient Participant:** ble to participate) Enhanced Usual Care (Arm A): UCI study coordinator Must be within 120 days of a new diagnosis of any solid will send the patient an introductory package of Patient cancer of any stage at the time of Step 0; must have Advocate Foundation (PAF) financial navigation services had their first oncology visit at the time of Step 0 CostCOM (Arm B): NCORP CRA will use TailorMed Must have initiated oral or IV cancer systemic therapy price estimator and financial navigation platform and or have received a prescription order with stated inschedule patients for a 1-hour one-on-one session with tent to initiate within 30 days following Step 0 consent a remote financial counselor at TailorMed (4 sessions-Must not have indolent cancer undergoing observation 30 days after randomization, and 3, 6, and 12 months) alone; must not be received palliative or hospice care $\Diamond$ UCI study coordinator will mail patients a study alone overview/contact info for TailorMed Must not be undergoing curative surgery alone or radi- $\Diamond$ Each session covers OOPC communication, a ation therapy alone, unless they are receiving systemic review of insurance benefits, and financial navigatherapy (must be receiving systemic therapy) tion/assistance/counseling. After each session Must not be enrolled in 1) treatment clinical trials TailorMed will generate a report with information where cancer systemic therapy is provided at no cost; discussed 2) EAQ221CD/S1912CD; 3) trials where OOPC com-Patients will complete a 5-minute postmunication/financial navigation is offered intervention survey after each session Patient Eligibility- Step I (Randomization): For both arms: follow-up EASEE-PRO surveys at 3, 6, Must have completed Baseline Survey within 30 days of and 12 months OPEN registration (Step 0) Note: gift cards are distributed per protocol Must have initiated cancer treatment either before or within 30 days of Step 0 **Patient Enrollment** All Sites: Oncology Patient Enrollment Network (OPEN) https://open.ctsu.org

Protocol Information

ECOG-ACRIN Operations-Boston: 857-504-2900, <u>http://ecog-acrin.org</u> (Member Login)

## Please Enroll Your Eligible Patients!



Footnote: Please note the study sample size is recruitment of 720 patients to Step 1.

<sup>1.</sup> It is encouraged for completion of consent, baseline survey, and randomization to occur on the same day.

Stage stratification is based on early vs. metastatic stage.