MEETING SUMMARY

Advisory Panel on Clinical Trials Meeting Summary

July 31, 2020

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Overview

On July 31, 2020, the PCORI Advisory Panel on Clinical Trials (CTAP) held its 15th meeting virtually.

CTAP's 15 members include patient representatives and experts in clinical trials, biostatistics, epidemiology, and ethics. Two members of PCORI's Methodology Committee serve ex-officio on CTAP. The meeting was open to the public via webinar, and meeting materials were posted to the PCORI website.

During this meeting, CTAP was pleased to learn that Congress has reauthorized PCORI for another 10 years. Nakela L. Cook, M.D., M.P.H., PCORI's new Executive Director, introduced herself to CTAP. She described PCORI's plans to respond to the COVID-19 pandemic by enhancing existing awards, soliciting new awards, and encouraging investigators to adapt their existing projects. To address the need for amendments to many PCORI-funded studies because of the COVID-19 pandemic, CTAP suggested that these investigators consult their institutional review boards (IRBs) and data and safety monitoring boards (DSMBs), review guidance for clinical trials and clinical practice to be issued by the American Society of Clinical Oncology (ASCO), and use various methodological approaches (e.g., post hoc power calculations, simulations, validation substudies) to assess the potential effects of different amendments.

PCORI Reauthorization Update

Andrew Hu, M.P.P., Director of Public Policy and Government Relations at PCORI, announced that Congress has reauthorized PCORI for another 10 years. The annual funding amount will be similar to the amount that PCORI has received over the last 10 years. PCORI will continue to receive funding through statutory appropriations from the Department of the Treasury's General Fund and a fee assessed on private insurance and self-insured health plans (the PCOR Trust Fund fee). However, the PCOR Trust Fund will no longer receive income from transfers from the Centers for Medicare & Medicaid Services trust funds. Congress has increased its appropriations to PCORI to make up for this loss.

The reauthorizing legislation added two new research priorities for PCORI: (1) maternal mortality and (2) intellectual and developmental disabilities. Congress has also instructed PCORI to reflect in its research funding a balance of short- and long-term priorities, as well as responses to changes in medical evidence and treatments. Where appropriate, PCORI-funded studies may now capture data on potential burdens and economic effects of the use of medical treatments, items, and services for all stakeholders. Finally, the legislation adds up to two more payers or purchasers to PCORI's Board of Governors.

Because PCORI's annual funding is not subject to the appropriations process, its annual budget is pre-established and not subject to the uncertainty faced by many programs that depend on discretionary spending. PCORI will continue to conduct the same types of research as in the past, but it will also collect evidence to support more immediate decisions by, for example, funding systematic reviews, horizon scans, or emerging technology reports. PCORI's decisions about which new research to fund on maternal mortality and on intellectual and developmental disabilities will be driven by

stakeholders. CTAP might offer advice on the types of data that PCORI should collect on burdens and economic impacts when PCORI seeks stakeholder feedback on this topic.

Introduction to PCORI's New Executive Director

Dr. Cook is PCORI's new Executive Director. She was previously the senior scientific officer and chief of staff at the National Heart, Lung, and Blood Institute at the National Institutes of Health.

Dr. Cook recognized CTAP's accomplishments, including its proposal of standards for patient-centered recruitment, accrual, and retention; guidance on pragmatic trial designs in comparative clinical effectiveness research (CER); and advice on sharing aggregate study data with participants. Dr. Cook then discussed PCORI's unique opportunity to leverage innovations—including digital health technologies, big data, and precision medicine—for PCORI-focused research.

PCORI chose three priority areas related to the COVID-19 pandemic that align with its mission: healthcare delivery, vulnerable populations, and the healthcare workforce. The institute is supporting critical work in these areas and others through enhancements and adaptations of existing awards as well as solicitations of new awards. PCORI has approved more than 90 projects for COVID-19 enhancement funding.

PCORI 2.0, PCORI's next phase, will offer opportunities to advance patient outcomes and patient-centered learning health care, reduce disparities, and disseminate and implement scientific findings. PCORI will conduct a virtual listening tour to gather input from stakeholders, advance its response to the COVID-19 pandemic, establish national priorities, develop a research agenda and strategic plan, and address other priorities from PCORI's reauthorization legislation.

To contribute to the PCORI 2.0 agenda, CTAP might hold a discussion at a future meeting on approaches to research using big data, digital health technologies, and other innovations to improve the quality of PCORI's clinical trial data and the efficiency of PCORI-funded clinical trials.

During the discussion with CTAP, Dr. Cook clarified that the congressional reauthorizing legislation allows PCORI to capture the full range of appropriate outcomes data, including on patient-centered costs and burdens related to various healthcare services. These outcomes might include, for example, out-of-pocket medical costs or health plan benefit and formulary designs. PCORI will not fund cost-effectiveness analyses, but it will collect data that might be useful for value assessments, analyses of policy questions, and payer decisions.

Capturing COVID-19 Changes in PCORI's Funded Research Portfolio

Jason Gerson, Ph.D., Senior Program Officer at PCORI, described the adaptations that PCORI is considering for active PCORI-funded studies in response to the COVID-19 pandemic. For example, protocols might be amended to address suspensions of in-person encounters. Each research team will work with PCORI staff to develop a proposal for study changes of various kinds.

Dr. Gerson asked for CTAP's advice to Awardees on how to handle protocol deviations and changes in study conduct because of pandemic-related restrictions. General guidance for study data management that could be shared with all awardees would be particularly valuable for ensuring study integrity and interpretability of results.

CTAP offered the following suggestions for PCORI to share with investigators leading PCORI-funded studies:

- Involve study participants in decisions about protocol adaptations
- Consult IRBs, DSMBs, and the Office for Human Research Protections at the Department of Health and Human Services about planned study changes.
- Use various methodological approaches (e.g., post hoc power calculations, simulations, validation substudies) to assess potential effects of different study adaptations.

- Pool data from several studies on the same intervention or in the same medical area.

Other CTAP suggestions for PCORI were as follows:

- Issue flexible policies for protocol adaptations to accommodate the variability among sites and studies.
- Review the ASCO recommendations on clinical trials and clinical practice in the COVID-19 era.
- Consult CTAP members about proposed study adaptations.

Acknowledgement of Retiring Panel Members

Dr. Trontell thanked the CTAP members whose terms were ending: Dr. Halladay; Hartley Jones, M.B.A.; Dr. Page; Dr. Troxel; Kevin Weinfurt, Ph.D.; and Todd Wetzel, M.D. PCORI will send each departing member a plaque in recognition of their service.

Based on CTAP's feedback during these members' time on the panel, PCORI has issued a large funding opportunity for Phased Large Awards for Comparative Effectiveness Research. These awards will have an initial feasibility phase, and the findings from this phase will enable rapid advancement to a second phase involving the conduct of a full-scale or main research study.