# Request for Application (RFA) – Reissuance NCI Community Oncology Research Program

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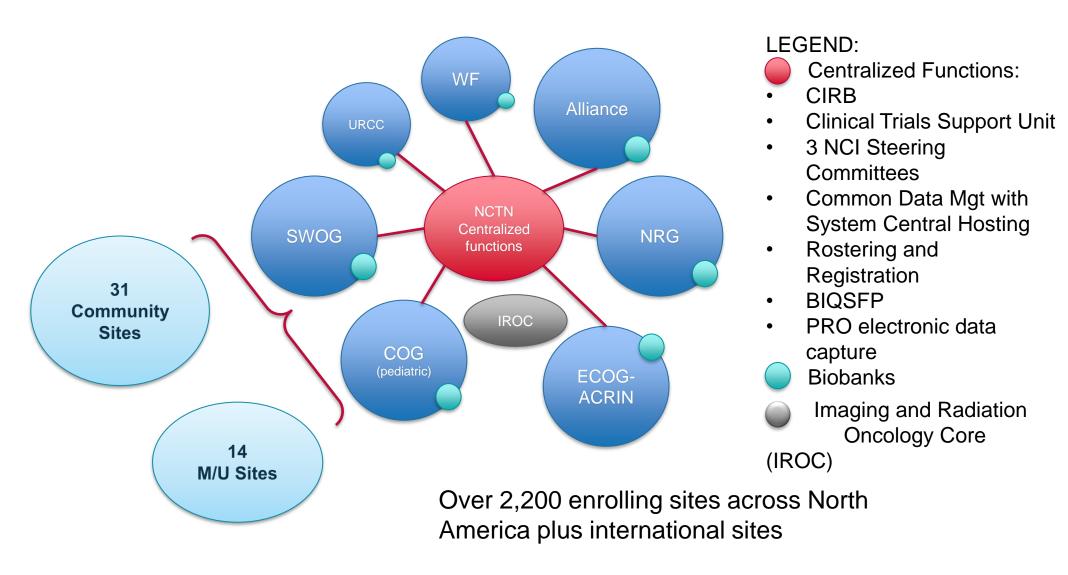
In collaboration with the Divisions of Cancer Treatment & Diagnosis & the Center to Cancer Health Equity



#### **NCORP** Objectives

- Design and conduct clinical trials/human subject studies for adults and children in cancer prevention and control and cancer care delivery, quality-of-life studies embedded within treatment trials;
- Incorporate the needs of diverse populations into studies and takes steps to enhance participation of these groups;
- Enhance patient and provider access to treatment and imaging trials conducted under the National Clinical Trials Network (NCTN);
- Integrate cancer disparities research within the community network.
- Understand and address cancer care delivery challenges in the community; and
- Disseminate knowledge gained from trials throughout the community.

#### **Current NCORP Infrastructure**



#### **NCORP Growth 2019-2024**

Metric	2019	<b>2024</b> (8/27/2024)	% increase
Number of physicians	4,104	4,274	4%
Number of non-physician investigators	309	1,292	418%
Registered Research Staff	4,399	4,791	9%
Number of Affiliate and sub-affiliate sites	990	1,019	3%
Number of Affiliate and sub affiliate sites that accrued to CPC and Treatment Trials	565	685	21%
Treatment Accrual	3,298	3,531	7%
Cancer Prevention and Control Accrual (including TMIST)	15,690	22,831	46%
Qualify as High Performance Site (>200 accruals)	15	21	40%
Number of Affiliate and sub-Affiliate Sites that participated in CCDR Trials	351	559	59%

## **Proposed Improvements without Budgetary Impact**

- Change M/U to MUR and Increase the Minority or Rural % required by MUR Sites to 40% combined catchment
- Require a trial-specific recruitment and retention plans
- Require plain language summaries with protocol submission
- Enhanced tracking of OEWG timelines
- Enhanced tracking of slow accruing trials and amendment timelines
- Restructure RPPR submission to collect outcomes and understand workload

## **Proposed Improvements with Budget Impact**

- Fund increased per case reimbursement consistent with NCTN
- Fund the expansion of the NCORP affiliate and sub-affiliate network so it can accrue at its full potential including staffing for CCDR
- Re-evaluate High Performance status (>200 accrual per year) every 2 years
- Fund increased per case reimbursement to Lead Academic Participating Sites for accrual to CPC trials meeting high performance metrics
- Workforce Development
- Create a linkage within the NCTN biobanks with QoL data to study symptom mechanisms

## **Proposed Expansion with Budgetary Impact**

- Fund the FY 2026 program for 7 years instead of 6 to create separation between the NCTN and NCORP. Future NCORP RFAs will return to 6 years.
- Allow limited Research Base Member Site participation in CCDR trials
- Fund ePRO contract to support remote data capture and enhanced data sharing

## NCORP Budget Request (in \$ Millions)

		FY25		\$	
	FY24	extension	Proposed Increase	increase(M)	FY26-32
			25% increase dedicated to support patient accrual including treatment accrual reimbursement rate; 25% increase in CPC patient reimbursement; 37.5% staffing at		
Community Sites/ MR	CO 7	72	affiliate and sub-affiliate sites including high	20	02
Sites (UG1)	69.7	/3	performance transitions; 12.5% CCDR Increase in staff support to protocol development, stats, translation, and data	20	93
Research Base (UG1)	44.64	47.4	sharing; increase in non-NCORP Site capitation	7.6	55
U24 supplements	3.3	3.3	Increase for the biobanks	.7	4
Contract Funding (including NCTN)			Re-competition increases; Electronic PRO capture system in place for use with increased		
Centralized Functions)	8.925	8.925	expense and data sharing.	4	13
Total Cost	126.565	132.625		32.375	165
% increase					24.7%

#### **BSA Committee Review and Feedback**

- MUR change
  - How to address potential overlap in these populations?
  - Definition of Rural
  - Change in Race definition for 2030 Census
- High-performance site
- Workforce development
- Community Engagement
- Prevention portfolio expansion

#### Honoring Dr. McCaskill Stevens



Worta McCaskill-Stevens, M.D., M.S.

NCORP Director

PAR-24-153 (K12)

#### **New Funding Opportunity**

NCI Worta McCaskill-Stevens
Career Development Award
for Community Oncology and
Prevention Research



www.cancer.gov/espanol