REQUEST FOR INFORMATION (RFI)
Methods Recommendations for AD PACE Round 3

Issued by: UsAgainstAlzheimer's

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Response Deadline: March 30, 2026

UsAgainstAlzheimer's is seeking input from patient-centered outcomes researchers, psychometricians, health outcomes methodologists, and related experts to inform the next phase of work for the AD PACE (Alzheimer's Disease Patient and Caregiver Engagement) Initiative.

The AD PACE Initiative and the flagship What Matters Most (WMM) in Alzheimer's disease (AD) research program is a patient and caregiver-led collaboration of industry, academic researchers, government agencies and advocates building a durable platform for collection and effective use of patient and caregiver data to inform clinical research and care. Insights from AD PACE on patient preferences for treatment are designed to inform researchers and clinical product developers, healthcare payers, policymakers, and regulatory agencies. Following more than seven years of rigorous data collection, the AD PACE initiative is now expanding work to address crucial but unmet measurement needs for regulatory, clinical care, and research goals.

The purpose of this Request for Information (RFI) is to gather expert recommendations to guide methodological plans, research design, and stakeholder engagement strategies. Responses will help shape a subsequent Request for Proposals (RFP).

In recognition of the time required, up to two awards of $2500 will be made to organizations or individuals submitting information that is selected by the AD PACE project team for discussion by the AD PACE Executive Steering Committee to guide the scope of work for Phase 3.

This RFI is for planning purposes only and does not constitute a solicitation or obligation to procure further services. A formal RFP may follow. UsAgainstAlzheimer's appreciates your expertise and consideration.

Requested Input

Respondents are asked to provide recommendations addressing any or all of the following three topics. Responses should be high-level, limited to 3 pages not including references, and presented in narrative, graphic, and/or bullet point format. Please note that the Initiative will pursue item 1, below. Work on items 2 and 3 may occur pending additional input.

We may share parts of the different proposals with the Executive Steering Committee of AD PACE to guide their deliberations and therefore submitted proposal material may not remain confidential or proprietary.

1. **Development of Minimum Clinically Important Difference (MCID) Estimates**
    - Methodological approaches for estimating MCID using AD PACE Round 2 data, including statistical approaches for anchor-based and distribution-based analyses. See below for summary of the Round 2 data.

- Options for additional data collection to strengthen MCID estimates, used in conjunction with the Round 2 data.
- Recommendations are welcome about measure-specific MCID predicated on AD PACE work, as well as recommendations for cross-measure assessment to inform meaningful thresholds.

2. **Steps Toward Establishing a Clinical Outcome Assessment (COA) Tool**
    - Recommendations for steps needed to build on the Round 2 data and move the Initiative toward a COA that aligns with the FDA COA Qualification pathway.

3. Translation to Development of a Clinical Communication Tool

- Approaches for translating patient and caregiver priorities into a structured communication support resource for clinicians. Specifically, what additional information would need to be collected to supplement learnings from Round 2 to create a robust and scalable clinical decision tool?
- Recommendations on data sources, visualization formats, validation steps, and user testing protocols to ensure clinical usability and relevance.

Response Format and Submission
Responses should be no longer than three pages and include the following:

- Name and affiliation of respondent(s)
- Brief description of relevant experience
- Recommendations organized according to the three topic areas above
- Optional: examples of prior relevant work products (links acceptable)

Please submit responses electronically to Lori Frank, LFrank@UsAgainstAlzheimers.org by March 30, 2026.

Summary of Round 2 Quantitative Study: see publications below for more information about work to date.

Design: A mixed-methods, observational US-based study included qualitative interviews to inform a conceptual disease model, and a cross-sectional, web-based quantitative survey.

Study Participants: Participants were recruited by 5 severity levels:
Group 1: Non-clinically impaired AD (n = 134)
Group 2: MCI AD (n = 120)
Group 3: Mild AD (n = 121)
Group 4: Moderate AD (n = 133)
Group 5: Severe AD (n = 132)
A total of 640 participants completed the quantitative survey study: 375 person living with Alzheimer's disease (PLWADs) in Groups 1 to 3, and 265 care partners for PLWADs with moderate or severe AD in Groups 4 and 5.

Data: Measures used included the 5-level EQ-5D (EQ5D5L), the Quality of Life in Alzheimer's Disease (QOL-AD), and the Cognitive Function Index (CFI). Participants also completed a 5 point impact rating scale for 50 concepts, organized into the following domains: General Independence, Thought Processing, Communication, Daily Activities, Emotions, and Social Life/Activities.

What Matters Most Publications and Presentations as of January 2026

AD PACE Manuscripts

1. DiBenedetti DB, Slota C, Wronski SL, et al. Assessing what matters most to patients with or at risk for Alzheimer's and care partners: a qualitative study evaluating symptoms, impacts, and outcomes. *Alzheimer S Research & Therapy*. 2020;12(1):90. https://doi.org/10.1186/s13195-020-00659-6.
2. Hauber B, Paulsen R, Krasa HB, et al. Assessing what matters to people affected by Alzheimer's disease: a quantitative analysis. *Neurology and Therapy*. 2023;12(2):505-527. https://doi.org/10.1007/s40120-023-00445-0.
3. DiBenedetti DB, Menne H, Paulsen R, et al. Technical review of clinical outcomes assessments across the continuum of Alzheimer's Disease. *Neurology and Therapy*. 2023;12(2):571-595. https://doi.org/10.1007/s40120-023-00443-2.
4. Callahan LF, Samsell B, DiBenedetti D, et al. Evaluating Elements of the Care Partner Experience in Individuals Who Care for People with Alzheimer's Disease Across the Severity Spectrum. *Neurology and Therapy*. 2023;13(1):53-67. https://doi.org/10.1007/s40120-023-00558-6.
5. Paulsen R, Romano C, Frangiosa T, et al. How do we put meaning into meaningful benefit? Perspectives from the lived experience. *Alzheimers Dement. (TRCI)*. 2025;11(2). https://doi.org/10.1002/trc2.70095.

AD PACE Posters and Presentations

1. Alzheimer's Disease Patient and Caregiver Engagement Initiative: Determining What Matters Most to Alzheimer's Patients and Caregivers to Inform the Development of New

Therapies, Payment and Coverage Determinations, and Delivery of Care Services. Poster presented at Alzheimer's Association International Conference; July 2018; Chicago, IL.

2. Identifying What Matters to People with and at Risk for Alzheimer's Disease and their Care Partners: Concept Elicitation and Item Reduction. Poster presented at Clinical Trials on Alzheimer's Disease; December 2019; San Diego, CA.
3. Findings from the Alzheimer's Disease Patient and Caregiver Engagement Initiative's What Matters Most Qualitative Study. Poster presented at Alzheimer's Association International Conference; July 2019; Los Angeles, CA.
4. Hartry A, Menne H, Wronski S, et al. Evaluation of What Matters Most in Existing Clinical Outcomes Assessments in Alzheimer's Disease. Poster presented at Alzheimer's Association International Conference; July 2020; virtual.
5. Hauber B, Paulsen R, Callahan L, et al. Quantifying What Matters Most Patients and Care Partners in Alzheimer's Disease. Poster presented at Alzheimer's Association International Conference; July 2020; virtual.
6. Majid T, Paulsen R, Callahan L, et al. The Importance of Care Partner Input in Alzheimer's Disease Drug Development. Poster presented at Alzheimer's Association International Conference; July 2020; virtual.
7. Romano C, Slota C, Bratlee-Whitaker E, et al. Measuring "What Matters Most" to People Living with Alzheimer's Disease and Care Partners: A Next Generation Conceptual Model of Alzheimer's Disease. Poster presented at Alzheimer's Association International Conference; July 2023; Amsterdam, Netherlands.
8. Romano C, Bratlee-Whitaker E, Herring W, et al. Measuring What Matters Most to People Living with Alzheimer's Disease and Care Partners: What Matters Most Qualitative Research. Poster presented at Clinical Trials on Alzheimer's Disease; October 2023; Boston, MA.
9. Romano C, Bratlee-Whitaker E, Hartry A, et al. Measuring What Matters Most to People Living with Alzheimer's Disease and Care Partners: What Matters Most Quantitative Research Development. Poster presented at Alzheimer's Association International Conference; July 2024; Philadelphia, PA.
10. Romano C. Finding Meaning by Measuring What Matters Most in Alzheimer's Disease. Presentation at: Alzheimer's Association International Conference; July 2025; Toronto, Canada.
11. Romano C, Bratlee-Whitaker E, Hartry A, et al. Priority Ranking: What Matters Most to People Living with Alzheimer's Disease and Care Partners. Poster presented at: Alzheimer's Association International Conference; July 2025; Toronto, Canada.
12. Herring W, Romano C, Houghton K, et al. Quality of Life and Utility Values Across the Alzheimer's Disease Spectrum: Results from the What Matters Most™ Survey. Presentation at: ISPOR Europe; November 2025; Glasgow, Scotland.
13. Romano C, Mogle J, Gold A, et al. Best-Fit Clinical Outcomes Assessment Measures to Evaluate What Matters Most in Alzheimer's Disease: Identifying a Core Outcomes Set from Existing Measures. Poster presented at: Clinical Trials on Alzheimer's Disease; December 2025; San Diego, CA.
14. Herring W, Romano C, Houghton K, et al. What Matters Most™ Across the Alzheimer's Disease Spectrum: Quality of Life Results from a Diverse, Representative Sample. Presentation at International Pharmaco-Economic Collaboration on Alzheimer's Disease; November 2025; Glasgow, Scotland.

AD PACE Public Comment Submissions

1. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development: Guidance 1—Collecting Comprehensive and Representative Input; Public Workshop; Request for Comments. Docket ID: FDA-2017-N-5896. February 2018. https://www.regulations.gov/comment/FDA-2017-N-5896-0028.
2. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development: Developing and Submitting Proposed Draft Guidance Relating to Patient Experience Data; Public Workshop; Request for Comments. Docket ID: FDA-2017-N-6312. May 2018. https://www.regulations.gov/comment/FDA-2017-N-6312-0006.
3. UsAgainstAlzheimer's. Comments on Early Alzheimer's Disease: Developing Drugs for Treatment; Draft Guidance for Industry; Availability. Docket ID: FDA-2013-D-0077. May 2018. https://www.regulations.gov/comment/FDA-2013-D-0077-0065.
4. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development: Collecting Comprehensive and Representative Input Guidance for Industry, Food and Drug Administration Staff, and Other Stakeholders; Draft Guidance. Docket ID: FDA-2018-D-1893. September 2018. https://www.regulations.gov/comment/FDA-2018-D-1893-0038.
5. UsAgainstAlzheimer's. Response to FDA Standard Core Clinical Outcome Assessments and Endpoints. Notice Number: NOT-FD-18-014. October 2018.
6. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development Guidance: Methods To Identify What Is Important to Patients and Select, Develop, or Modify Fit-for-Purpose Clinical Outcome Assessments; Public Workshop; Request for Comments. Docket ID: FDA-2018-N-2455. December 2018. https://www.regulations.gov/comment/FDA-2018-N-2455-0044.
7. UsAgainstAlzheimer's. Comments on Characterizing the Food and Drug Administration's Approach to Benefit- Risk Assessment Throughout the Medical Product Life Cycle; Public Meeting; Request for Comments. Docket ID: FDA-2019-N-1468. June 2019. https://www.regulations.gov/comment/FDA-2019-N-1468-0009.
8. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development: Methods To Identify What Is Important to Patients; Draft Guidance for Industry, Food and Drug Administration Staff, and Other Stakeholders; Availability. Docket ID: FDA-2019-D-4247. December 2019. https://www.regulations.gov/comment/FDA-2019-D-4247-0028.
9. UsAgainstAlzheimer's. Comments on Patient-Focused Drug Development: Incorporating Clinical Outcome Assessments Into Endpoints for Regulatory Decision-Making; Draft Guidance for Industry, Food and Drug Administration Staff, and Other Stakeholders; Availability. Docket ID: FDA-2023-D-0026. July 2023. https://www.regulations.gov/comment/FDA-2023-D-0026-0062.
10. UsAgainstAlazheimer's. Comments on Early Alzheimer's Disease: Developing Drugs for Treatment; Draft Guidance for Industry. Docket ID: FDA-2013-D-0077. May 2024. https://www.regulations.gov/comment/FDA-2013-D-0077-0091.