



# ONCOPOWER: DIGITAL HEALTH SOLUTION

How the app OncoPower is taking on care access, clinical trial recruiting, and financial challenges in cancer care, and building a loyal following along the way

## CHALLENGES IN CANCER: FINANCIAL BURDENS, SLOW RESEARCH, CARE ACCESS

## Financial Burdens

Receiving a cancer diagnosis brings many scary uncertainties, sometimes the biggest of which are the financial questions: Will my treatment be covered? How will I afford medications that can cost upwards of \$150,000/year? Will my family go bankrupt? Approximately 42% of cancer patients deplete their entire life's savings within two years of diagnosis, 62% will go into debt for their treatment, and 3% will file for bankruptcy.¹ The financial burden of cancer is very real.

### Slow Research

Couple the high costs of brick and mortar care with the high costs of innovation. Research in the cancer clinical trial and drug development space has been exploding, however it still takes 6-8 years for clinical trials to occur and 55% of clinical trials will fall-out due to lack of enrollment.<sup>2</sup> Engaging patients to understand clinical trials earlier and helping to speed up the recruiting process is critical to improve the pace of innovation, as well as expand treatment options to broader demographics.

## ONCOPOWER IS THE SOLUTION

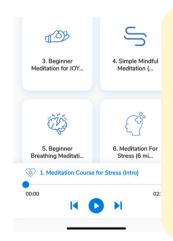
The team at OncoPower saw these challenges and decided to build a digital health solution that serves the supportive care needs of the patient while solving these larger systemic problems in a creative way. OncoPower is an app- and web-based platform that patients and their caregivers can download for free. Once they've joined the OncoPower community, they gain access to the following beneficial tools and resources:

### <u>Improved Care Access</u>

 Emphasis and encouragement to participate in meditation and wellness activities, proven in many clinical research studies to improve cancer-related symptoms, sleep, quality of life, etc.

### Care Access

Unfortunately, social determinants of health such as lower income and education levels within a community continue to drive differential outcomes in cancer care. Cancer care necessitates an integrated team and supportive services that help the patient through topics like side effect management, understanding herbs and supplements, legal questions, and much more. Patients struggle to find the right expertise in these areas and often have to research on their own. Coordinated supportive care can help mitigate emergency room visits and drive down total cost of cancer care for patients. 4



"I am so amazed at how meditation has helped me tremendously! A week ago, I began meditating 3-4 times a day and I cannot believe how much it has helped me in not only sleeping but also feeling anxious at times... OncoPower is a big part of my life and I'm forever grateful."

Anonymous
OncoPower Patient

- RDs on staff to answer questions on general oncology nutrition and nutritional management of side effects
- Subscription to 24/7 healthcare professional support with our Ask-a-Doc tool
- Only feature behind a paywall: \$19.99/mo if billed annually, less than the cost of a specialist copay
- Panels specific to cancer type to ensure expert specialist and top of license responses from RNs, RDs, LCSWs, MDs, DOs, etc.

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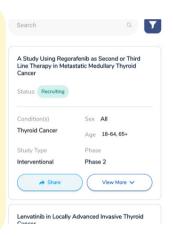
## ONCOPOWER IS THE SOLUTION (CONT.)

### **Emphasis on and Support for Clinical Trials**

- Utilize ClinicalTrials.gov API for vetted and updated active trials in real time
- Auto filter trials to those that the user is qualified for (based on their profile inputs) and allow them to add additional filters as needed
- One on one hand holding with a certified oncology nurse to further navigate them through process and coordinate with both primary oncologist and sponsor
- Introduction of Clinical Trial tool early in sign up process
- Education Library videos which help to answer FAQs about clinical trials

"Great news! My dad's quarterly scan reports came yesterday. No evidence of disease!! Yes, NED after extensive SCLC, his doctor is amazed to say the least. He was given 6 months in Sept 2021. Thanks to doctors right here, a clinical study with an experimental drug adebrelimab with carboplatin + etoposide saved him."

PD, Switzerland





- Ability to ask oncologists treatment-related questions or second opinions for less than the cost of a copay
- Wellness resources available for free, helping to manage quality of life issues with less medication and fewer trips to the doctor
- Medication Savings and Pill Reminder tools help to improve costs associated with prescriptions and OTC medications, as well as improve adherence and outcomes, resulting in fewer doctor and ER visits
- Leverage partnerships with advocacy organizations (ex. Triage Cancer) to provide more resources directly to patients on managing all aspects of care, including the financial and legal challenges of care

## IMPACT OF ONCOPOWER

Traditional Cost of Care:

Registered Dietitian Visit: \$125

Yoga Class: \$35

Meditation App: \$70/yr

Second Opinion Consult: \$2000



Cost of Care on OncoPower:
\$0 Registered Dietitian Access
\$0 Yoga for Cancer Care
\$0 Meditation for Cancer Care
\$240/yr Expert Healthcare Provider
Access (MDs, RDs, RNs, etc.)

Most importantly, OncoPower partners with the best to ensure quality resources are available to patients in-app for free.

Trustworthiness, High Quality Information, Support Where You Need It:

Priceless



## ONCOPOWER: DIGITAL HEALTH SOLUTION

OncoPower Cancer Care - Revolutionized

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## KEY TAKEAWAYS

OncoPower is committed to improving the experience of the cancer patient, both on a day to day level with our supportive care features and systemically with our focus on reducing costs and research burden. We are dedicated to serving patients in the following ways:

- Enriching traditional medical care with access to allied health providers and educational videos on a variety of topics to answer everyday questions
- Saving patients money though medication savings, inexpensive access to second opinions, and leveraging partner-provided resources on care navigation issues such as managing the financial toxicity of cancer
- Improving clinical research with one on one guidance through the recruitment process and normalizing exploring trials as a primary way to treat cancer rather than the last option



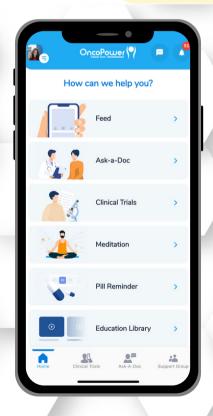
Kaoutar Tlemcani, MD answered Laura's consult.

Q.1.i am 45 yo with a family history of breast cancer. I was diagnosed with locally advanced (dinical Stage III Triple-Negative breast cancer in 2019. I had Doxorubicin + Cytoxan + weekly Pacifixael and then underwent mastectomy. As further follow up my doctor added Carboplatin. I was stable to fourteen months and then had a fracture and also ended up in hospital because of seizure and liver lesions. Since June 2021, I have been on Trodely's since then. Last month I was back in the hospital because low WBC. My treatment is continued with Neupogen. What are my options if my cancer progresses further.

Thanks for you inquiny, If Trodelyy ceases to control the cancer, I suggest the following: 1-Obtain a new biopsy and send for Genomic Testing and PDL-1 testing 2 + IP PDL 1 is positive (CPS score 10 or higher) consider carboplatin+ gemcitabine + pembrolizumab This combination is only approved as a first line therapy for metastatic or recurrent disease however your Doctor may be able to get it even at this time. 3- if genomics show any Targetable mutation, it would be an option to add to the list ( such as NTREK fusion or even a somatic BRCAATM...) 4- repeat HER2 status on the new biopsy, If HER2 positive by standard criteris, the management is clear but even if HER 2 is LOW (meaning 14

"I am a HER2 negative, ER positive stage IV breast cancer patient. Last year, the wonderful doctors here suggested for me to test for PIK3CA mutation (cobas® PIK3CA Mutation Test). It was found positive. My Newport Beach oncologist put me on Piqray + Faslodex combo [starting] nine months [ago]. I got test reports back two months in a row. THANK GOD, my tumor is stable! Thank you doctors!"

JS, Virginia



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#### References:

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4.Hui D, Hoge G, Bruera E. Models of supportive care in oncology. Current Opinion in Oncology. 2021;Publish Ahead of Print. doi:https://doi.org/10.1097/cco.000000000000033