Date: 11. August 2023	
Your Name: Sophie Gottschalk_	

**Manuscript Title:** Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

Manuscript number (if known): APM-23-88-R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	_XNone	

4	Consulting fees	_XNone	
5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_XNone	
	financial interests		
	ase summarize the above co	onflict of interest in the f	ollowing box:

_X I certify that I have an form.	swered every question ar	nd have not altered th	e wording of any of th	e questions on this

Date: 11. August 2023
Your Name: Hans-Helmut König
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

Manuscript number (if known): APM-23-88-R1

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	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
	Advisory Board		
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	in other board, society,		
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Date: 08.08.2023

Your Name: Dr. Tina Mallon

**Manuscript Title:** Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

Manuscript number (if known): APM-23-88-R1

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3	Royalties or licenses	_XNone	

4 Consulting fees    X None				
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8 Patents planned, issued or pendingXNone	7	Support for attending	_XNone	
8 Patents planned, issued or pending  9 Participation on a Data  XNone  XNone		testimony		
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$\underline{X}$ I certify that I have answered every question and have not alt form.	ered the wording of any of the questions on this

Date:	_August 7, 2023
Your Name:	
Manuscript Tit	:le: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
interprofession	nal case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.
Manuscript nu	mber (if known): APM-23-88-R1

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3	Royalties or licenses	xNone	

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8	Patents planned, issued or	_xNone	
	pending		
9	Participation on a Data	x None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	x None	
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12	Receipt of equipment,	x None	
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13	Other financial or non-	x None	
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	declare no conflicts of interest.		
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_x I certify that I have answered every question and have not altered the wording of any of the que form.	estions on this

Date: 11. August 2023	
Your Name: Jan Weber_	

**Manuscript Title:** Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

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Date:_08.08.2023
Your Name:_Dr. Silke Böttcher
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
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10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	Nama	
11	Stock or stock options	xNone	
12	Receipt of equipment,	x None	
12	materials, drugs, medical	XNone	
	writing, gifts or other		
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I certify that I have form.	e answered every o	question and ha	ve not altered t	the wording of a	ny of the questi	ons on thi

Date:	07.08.2023		
Your Name:_	Uta Sekanina _		
Manuscript 1	<b>Fitle:</b> Cost-effecti	veness of a specialist palliative care nurse-patient consultation followed by an	

interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

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7	Support for attending meetings and/or travel	XNone	
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Date:	14.	08.23		_
Your Name:		Thomas	Asendort	-
Manuscript	Title: (	Cost-effectiveness of a	specialist palliative care nurse-patient consultation followed by an	

Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial. Manuscript number (if known): APM-23-88-R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initi	al planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None	G-BA grant 010SF18074
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: pas	at 30 months
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	DELEGICA CALLES
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	e interest of manageropy, we ask you to disclose of a set to the content of your named by the interest
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	amtion if the est a established seed amis
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Please summarize the above conflict of interest in the following box:

Funding was received order grant C-BA 01VSF18024 as stated in the	
manuscriet	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	_11.August 2023
Your Name:	Eva Hummers
Manuscript	Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
interprofess	ional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.
Manuscrint	number (if known): APM-23-88-R1

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	German Federal Joint Committee (Innovationsfonds des GBA)	Competitive, peer reviewed grant to the institution(s) to fund the KOPAL study
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X_None	

4	Consulting fees	XNone		
5	Payment or honoraria for	X None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X_None		
	testimony			
7	Support for attending	X_None		
	meetings and/or travel			
8	Patents planned, issued or	_XNone		
	pending			
9	Participation on a Data	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role in other board, society,	_X_None		
	committee or advocacy			
44	group, paid or unpaid	V AI		
11	Stock or stock options	X_None		
12	Descipt of equipment	V. None		
12	Receipt of equipment, materials, drugs, medical	_X_None		
	writing, gifts or other			
	services			
13	Other financial or non-	X None		
13	financial interests	<u>X</u> _None		
	ase summarize the above co	onflict of interest in the	e following box:	

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:August 16, 2023
Your Name: Michael Freitag
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.
Manuscript number (if known): APM-23-88-R1

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	German Federal Joint Committee (Innovationsfonds des GBA)	Competitive, peer reviewed grant to the institution(s) to fund the KOPAL study.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_xNone	
3	Royalties or licenses	xNone	

4	Consulting fees	xNone	
5	Payment or honoraria for	y None	
5	lectures, presentations,	xNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	xNone	
	pending		
9	Participation on a Data	xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_xNone	
4.0			
12	Receipt of equipment,	_xNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	x None	
	financial interests		
	ase summarize the above co	nflict of interest in the fo	ollowing box:

_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this	
form.	

Date: 11. August 2023	
Your Name: Nils Schneider	
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an	

interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

Manuscript number (if known): APM-23-88-R1

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	German Federal Joint Committee (Innovationsfonds des GBA)	Competitive, peer reviewed grant to the institution(s) to fund the KOPAL study.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	_XNone	

4	Consulting fees	_XNone	
5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_XNone	
	financial interests		
	ase summarize the above co	onflict of interest in the f	ollowing box:

_X I certify that I have an form.	swered every question ar	nd have not altered th	e wording of any of th	e questions on this

Date:_11 AUG 2023		 _
Your Name:_Tim Friede_	 	 _

Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial. Manuscript number (if known): APM-23-88-R1

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	Federal Joint Committee (G-BA)	Grant number 01VSF18024, funding period: 06/2019 – 05/2022; grant to institution
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Deutsche Forschungsgemeinschaft European Commission	Grants to institution  Grants to institution
3	Royalties or licenses	_XNone	

4	Consulting fees	Bayer, CSL Behring, Immunic, RECARDIO	Statistical consultancies; personal fees
		Galapagos, Minoryx, Vifor, Servier	Statistical consultancies; personal fees
		Novartis, LivaNova, Relaxera, BMS, KyowaKirin	Statistical consultancies; personal fees
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Fresenius Kabi	JUMPstart: Research grant program in clinical nutrition
6	Payment for expert testimony	_XNone	
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or pending	_XNone	
9	Participation on a Data Safety Monitoring Board or	Novartis, Enanta, Aslan, PPD, IQVIA, Galapagos	DSMB; personal fees
	Advisory Board	Bayer, BiosenseWebster, VICO Therapeutics	DSMB; personal fees
		Janssen, Roche, Galapagos, Recordati	DSMB; personal fees
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_XNone	
11	Stock or stock options	_XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_XNone	
13	Other financial or non- financial interests	_XNone	

# Please summarize the above conflict of interest in the following box:

This work was supported by the Federal Joint Committee (G-BA, grant number 01VSF18024, funding period: 06/2019 – 05/2022). The funding source takes no part in the collection, analysis and interpretation of data, in the writing of the manuscript or in the decision to submit the manuscript for publication. T. Friede reports personal fees from Aslan, Bayer, BiosenseWebster, Bristol Myers Squibb, CSL Behring, Enanta, Fresenius Kabi, Galapagos, Immunic, IQVIA, Janssen, Johnson & Johnson Medical, KyowaKirin, LivaNova, Minoryx, Novartis, RECARDIO, Recordati, Relaxera, Roche, Servier, Viatris, VICO Therapeutics and Vifor for statistical consultancies including data monitoring committees, all outside the submitted work.

Please place an "X" next to the following statement to indicate your agreement:					
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.					

Date:	16.08.2023	
Your	Name: Friedemann Nauc	k

**Manuscript Title:** Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.

Manuscript number (if known): APM-23-88-R1

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
		<u> </u>	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
4.2	services	V N	
13	Other financial or non-	XNone	
	financial interests		
Dlar	ase summarize the above co	nflict of interest in the	allowing hove
FIE	ase summanize the above co	minict of interest in the i	ollowing box.
	lone.		
'	ione.		

form.			

Date:_16.08.2023
Your Name:_Prof. Dr. Martin
Scherer
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
nterprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial.
Manuscript number (if known): APM-23-88-R1

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	xNone	
4	Consulting fees	xNone	

5	Payment or honoraria for	x None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	xNone	
	testimony		
7	Support for attending	xNone	
	meetings and/or travel		
8	Patents planned, issued or	xNone	
	pending		
9	Participation on a Data	x_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x_None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	y News	
11	Stock or stock options	xNone	
12	Receipt of equipment,	x None	
12	materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	_xNone	
	financial interests		

Please summarize the above conflict of interest in the following box:

None.			

Please place an "X" next to the following statement to indicate your agreement:

\_X\_ I certify that I have answered every question and have not altered the wording of any of the questions on this



form.

Date: 11. August 2023
our Name: Gabriella Marx
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
nterprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL trial

Manuscript number (if known): APM-23-88-R1

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	_XNone	

4	Consulting fees	_XNone	
5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_XNone	
	financial interests		
	ase summarize the above co	onflict of interest in the f	ollowing box:

_X I certify that I have an form.	swered every question ar	nd have not altered th	e wording of any of th	e questions on this

Date:08.08.2023
Your Name:Judith Dams
Manuscript Title: Cost-effectiveness of a specialist palliative care nurse-patient consultation followed by an
interprofessional case conference for patients with non-oncological palliative care needs: results of the KOPAL tria
Manuscript number (if known): APM-23-88-R1

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All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.		German Federal Joint Committee (Innovationsfonds des GBA)	Competitive, peer reviewed grant to the institution(s) to fund the KOPAL study						
Time frame: past 36 months									
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone							
3	Royalties or licenses	xNone							

4	Consulting fees	xNone	
5	Payment or honoraria for	xNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	x_None	
	testimony		
-		N.	
7	Support for attending meetings and/or travel	xNone	
8	Patents planned, issued or	xNone	
	pending		
9	Participation on a Data	xNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	xNone	
12	Descipt of aguinment	v None	
12	Receipt of equipment, materials, drugs, medical	_xNone	
	writing, gifts or other		
	services		
13	Other financial or non-	x None	
	financial interests		
	ase summarize the above co	onflict of interest in the fo	llowing box:

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