

FIELD STUDY 01 · PUBLIC DISCLOSURE REVIEW

Ariadne Connection Index

Why Ariadne? In Greek myth, Ariadne gave Theseus a thread to help him find his way out of the labyrinth. We use it as a symbol for the path from referral to support that helps.

Measure the connection, not the distribution.

A five-step benchmark of whether a patient can understand, enter, and complete a connection to support. This review scores what programs make visible in public patient-facing materials.

5.5 / 10 PUBLIC-MATERIALS REVIEW MEDIAN	20 PROGRAMS REVIEWED	1 of 20 SHOWED ANY PUBLIC FEEDBACK EVIDENCE
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What the scores show

Top score: J&J withMe, 9/10. Pfizer Oncology Together follows at 8/10.	Third-place tie: IncyteCARES, Dexcom CARE, and EYLEA4U each score 7/10.
Bottom three: Gilead Advancing Access, Omnipod Patient Support, and UCBCares tie at 4/10.	Median: 5.5/10. Ten programs score 5 or lower; ten score 6 or higher.
Outcome check: no program publicly showed a specific “did this connection help?” question. J&J earned 1 point for published patient-survey feedback, not a connection-specific prompt.	Interpretation: these are disclosure scores, not ratings of care quality or patient outcomes.

The 0–2 rubric

STEP	0 POINTS	1 POINT	2 POINTS
Explain the service	Only a name or contact	Broad purpose described	Specific help and expectations explained
Introduce the provider	No person or team	Role/team and route named	Provider introduced or assigned with direct route
Ask permission	No choice or permission visible	Enrollment authorization	Explicit opt-in before proactive outreach
Assign follow-through	No owner or next step	Next step or route given	Accountable owner with timed follow-up or closed loop
Ask whether it helped	No public feedback evidence	Generic feedback/satisfaction	Asks whether this connection helped

Source of insight: credited to Matt Toresco’s October 19, 2026 Building the Noise conversation with patient advocate Megan Claire-Chase. The discussion described finding an oncology social worker through a handout, and Matt’s question: “Who confirms that a referral becomes an actual connection to support?”

Scope: one public-facing patient support or hub pathway per company; selected pathways appear on pages 2–4. Sources were reviewed October 19, 2026. A zero means the step was not evidenced in the reviewed public materials, not that the practice is absent. Pages that were gated or unreadable were not treated as proof of absence; only accessible public details were scored.

THE LEADERBOARD

Twenty programs, one public standard

Rank uses total score. Programs with the same score share rank; names are alphabetized within ties. S1–S5 follow the rubric on page 1. Source links open the official program material reviewed.

RANK	COMPANY · PROGRAM	S1	S2	S3	S4	S5	TOTAL	SOURCE
1	Johnson & Johnson · J&J; withMe	2	2	2	2	1	9/10	Open
2	Pfizer · Pfizer Oncology Together (ELREXFIO pathway)	2	2	2	2	0	8/10	Open
3	Dexcom · Dexcom CARE	2	1	2	2	0	7/10	Open
3	Incyte · IncyteCARES (JAKAFI pathway)	2	2	1	2	0	7/10	Open
3	Regeneron · EYLEA4U	2	2	1	2	0	7/10	Open
6	Agios · myAgios Patient Support Services	2	2	1	1	0	6/10	Open
6	Amgen · Amgen SupportPlus	2	2	1	1	0	6/10	Open
6	Genentech · Genentech Access Solutions	2	2	1	1	0	6/10	Open
6	Otsuka · JYNARQUE Patient Experience Program	2	2	1	1	0	6/10	Open
6	Takeda · EntyvioConnect	2	2	1	1	0	6/10	Open
11	AbbVie · myAbbVie Assist	2	1	1	1	0	5/10	Open
11	AstraZeneca · AZ&Me; Patient Assistance	2	1	1	1	0	5/10	Open
11	BMS · BMS Access Support	2	1	1	1	0	5/10	Open
11	Lilly · Lilly Oncology Support Center	2	1	1	1	0	5/10	Open
11	Merck · Merck Patient Assistance (Merck Helps)	2	1	1	1	0	5/10	Open
11	Novartis · Novartis Patient Support Portal	2	1	1	1	0	5/10	Open
11	Sanofi · Sanofi Patient Connection	2	1	1	1	0	5/10	Open
18	Gilead · Gilead Advancing Access (HIV treatment/PrEP)	2	1	0	1	0	4/10	Open
18	Insulet · Omnipod Patient Support	2	1	0	1	0	4/10	Open
18	UCB · UCBCares	2	1	0	1	0	4/10	Open

Component key: S1 explain the service · S2 introduce the provider · S3 ask permission for outreach · S4 assign follow-through · S5 ask whether the connection helped. All results are limited to evidence visible to the public.

PUBLIC EVIDENCE

Evidence notes · 1–10

Each note records the public evidence behind the score and the main limit. The linked program page is the source anchor; supporting public FAQs, enrollment descriptions, and patient guides were also reviewed where available.

Johnson & Johnson · J&J; withMe

S1–S5: 2 · 2 · 2 · 2 · 1 | 9/10 | rank 1

The public guide describes Care Navigators, patient consent, scheduled support, and treatment-start/continuation help. It reports patient survey results about preparedness and comfort, supporting general feedback (1), but does not show an explicit question asking whether the connection itself helped.

Official source

Pfizer · Pfizer Oncology Together (ELREXFIO pathway)

S1–S5: 2 · 2 · 2 · 2 · 0 | 8/10 | rank 2

The ELREXFIO pathway describes an assigned Patient Access Navigator and personalized support. The public sign-up requires opt-in and the pathway states when the navigator will contact the patient and how support continues. No explicit question about whether the connection helped is shown.

Official source

Dexcom · Dexcom CARE

S1–S5: 2 · 1 · 2 · 2 · 0 | 7/10 | rank 3

Dexcom CARE describes educator-led classes with specific setup topics and lets patients choose a topic and save a spot; that is a patient-initiated opt-in and scheduled next step. A specific educator is not introduced in advance, and no post-session helpfulness check is shown.

Official source

Incyte · IncyteCARES (JAKAFI pathway)

S1–S5: 2 · 2 · 1 · 2 · 0 | 7/10 | rank 3

The JAKAFI FAQ explains insurance, affordability, delivery coordination, and one-to-one representative support. The public video says a team member calls after enrollment and the FAQ describes annual renewal reminders. The authorization is enrollment-based; no helpfulness question is shown.

Official source

Regeneron · EYLEA4U

S1–S5: 2 · 2 · 1 · 2 · 0 | 7/10 | rank 3

The patient brochure identifies an EYLEA4U Support Specialist and explains eligibility, enrollment, confirmation letters to patient and doctor, and shipment to the doctor's office. The enrollment authorization is not presented as an optional outreach choice; no helpfulness question is shown.

Official source

Agiros · myAgiros Patient Support Services

S1–S5: 2 · 2 · 1 · 1 · 0 | 6/10 | rank 6

Public materials name the Agios Care Educator and Patient Support Manager roles and explain how patients can connect with them; enrollment authorization is part of the service. The public flow does not state a closed-loop follow-up schedule or a patient outcome check.

Official source

Amgen · Amgen SupportPlus

S1–S5: 2 · 2 · 1 · 1 · 0 | 6/10 | rank 6

SupportPlus identifies Nurse Partners and Access Specialists and describes product-specific access and treatment support. The reviewed public landing materials provide enrollment/contact routes but no explicit optional outreach step, scheduled follow-up commitment, or helpfulness question.

Official source

Genentech · Genentech Access Solutions

S1–S5: 2 · 2 · 1 · 1 · 0 | 6/10 | rank 6

Access Solutions describes coverage and financial help and identifies patient support specialists. Public registration and authorization are available, but the reviewed materials do not show a named individual assigned to each patient, a defined follow-up timing, or a helpfulness check.

Official source

Otsuka · JYNARQUE Patient Experience Program

S1–S5: 2 · 2 · 1 · 1 · 0 | 6/10 | rank 6

Public JYNARQUE materials identify a Patient Education Liaison and specialty-pharmacy support, with enrollment and reminder steps. They do not publicly establish a named owner for referral follow-through or ask whether the support connection helped.

Official source

Takeda · EntyvioConnect

S1–S5: 2 · 2 · 1 · 1 · 0 | 6/10 | rank 6

The public materials describe coverage and cost help, a Nurse Educator, and treatment reminders; enrollment is the visible route into support. They do not show a named, scheduled patient-level follow-up or a question asking whether the connection helped.

Official source

PUBLIC EVIDENCE

Evidence notes · 11–20

Each note records the public evidence behind the score and the main limit. The linked program page is the source anchor; supporting public FAQs, enrollment descriptions, and patient guides were also reviewed where available.

AbbVie · myAbbVie Assist

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

The program explains medication assistance for eligible patients and provides application and contact routes. The reviewed public materials do not identify an assigned support professional, an optional outreach choice, a scheduled handoff, or a patient feedback question.

Official source

AstraZeneca · AZ&Me; Patient Assistance

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

AZ&Me; describes free-medicine eligibility and the application/review process, including patient and prescriber paperwork and a contact route. The reviewed materials do not introduce an assigned support provider or a patient-facing feedback loop.

Official source

BMS · BMS Access Support

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

The site explains benefits, prior-authorization, and financial-support services and gives a patient contact route. The public materials reviewed do not show a dedicated provider introduction, optional outreach preference, or a scheduled follow-up/feedback loop.

Official source

Lilly · Lilly Oncology Support Center

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

The site explains insurance and financial assistance and notes personalized support for some products, with a contact route. The public pages do not show an individual provider introduction, an optional outreach choice, a timed handoff, or a patient helpfulness question.

Official source

Merck · Merck Patient Assistance (Merck Helps)

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

Merck Helps explains eligibility for medication assistance and provides application and contact routes. No assigned support provider, explicit optional outreach choice, accountable follow-up timing, or patient question about whether support helped was visible in the reviewed pages.

Official source

Novartis · Novartis Patient Support Portal

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

The portal describes Patient Navigators, treatment-related help, product-access support, and a first-dose notification option based on preferences. It does not publicly show a provider assigned to each patient, a patient-specific permission step before outreach, or an outcome question.

Official source

Sanofi · Sanofi Patient Connection

S1–S5: 2 · 1 · 1 · 1 · 0 | 5/10 | rank 11

The site describes financial eligibility, coverage, and resource assistance, and gives a staffed phone route. Patient stories are visible, but the reviewed pages do not show an assigned provider, defined follow-up, or a patient feedback prompt about the connection.

Official source

Gilead · Gilead Advancing Access (HIV treatment/PrEP)

S1–S5: 2 · 1 · 0 · 1 · 0 | 4/10 | rank 18

The site explains coverage and financial options and lists a program-specialist phone line. Support is publicly presented as patient-initiated; no outbound permission step, assigned follow-up owner, scheduled next contact, or feedback prompt is visible.

Official source

Insulet · Omnipod Patient Support

S1–S5: 2 · 1 · 0 · 1 · 0 | 4/10 | rank 18

Omnipod publicly explains product help, training, and customer-care contact routes. The reviewed materials leave patients to initiate contact and do not show an assigned support person, proactive outreach permission, a closed-loop handoff, or a patient feedback prompt.

Official source

UCB · UCBCares

S1–S5: 2 · 1 · 0 · 1 · 0 | 4/10 | rank 18

The patient page describes UCBCares as a place to get information and support and gives direct phone/email routes. The reviewed materials rely on patients initiating contact and do not show an assigned provider, outreach consent, closed-loop follow-up, or patient feedback question.

Official source