

# 2024 Independent Medical Education Request for Proposals

Issue Date: August 14, 2024

The *Independent Medical Education team at Genentech, a member of the Roche Group,* invites accredited educational providers to submit applications for independent, certified medical education grants subject to the terms described below. This Request for Proposals (RFP) provides public notice of the availability of funds in a general topic area for activities for which recognized scientific or educational needs exist and funding is available.

<u>Purpose</u>: As part of Genentech's scientific mission, Genentech supports grants for independent medical education that aim to improve patient care by focusing on the improved application of knowledge, competence, and performance among healthcare professionals. This mission is achieved by supporting quality independent education that addresses evidence-based, bona fide educational gaps in accordance with the ACCME, AMA, PhRMA Code, OIG and FDA guidance.

Notification: Genentech RFPs are made available through our online Genentech Funding Request System (gFRS) site (<a href="http://funding.gene.com">http://funding.gene.com</a>) along with the websites for the Alliance for Continuing Education in the Health Professions (ACEhp). In addition, an email is distributed to all registered gFRS users who have previously applied for support of an independent education activity. The email distribution list may not always be up to date. Please periodically check our online Genentech Funding Request System (gFRS) site (<a href="http://funding.gene.com">http://funding.gene.com</a>) to stay informed on current funding priorities. There have been no predetermined approvals, nor any identified preferred educational providers. All submissions will be reviewed equally and thoroughly.

#### **Terms and Conditions**

- 1. All grant applications received in response to this RFP will be reviewed in accordance with all Genentech policies and policy guidelines. (Please refer to the publicly available criteria on <a href="http://funding.gene.com">http://funding.gene.com</a>)
- 2. This RFP does not commit Genentech to award a grant or pay any costs incurred in the preparation of a response to this request.
- 3. Genentech reserves the right to approve or deny any or all applications received as a result of this request or to cancel, in part or in its entirety, this RFP.
- 4. For compliance reasons, and in fairness to all providers, all communications about this RFP must come exclusively to Genentech's department of Medical Education and Research Grants. Failure to comply will automatically disgualify providers.
- 5. Failure to follow the instructions within this RFP may result in a denial.

#### **Instructions**

Eligibility Criteria	<ul> <li>U.S. based education provider</li> <li>Registered account in gFRS</li> <li>Accredited to provide CME/CE and in good standing (e.g. ACCME, ANCC, ACPE, etc.)</li> </ul>
Geographical Scope	<ul> <li>Educational initiatives must be U.Sbased only</li> </ul>



Submission Directions	Application Process	Deadlines
Step 1	Providers who meet the eligibility criteria and are interested in submitting a response to this RFP will have 5 weeks to complete a <b>full grant proposal</b> through <u>funding.gene.com</u> . When submitting the application, please be sure to:  • Select the Therapeutic Area (Oncology), and Disease State (Hepatocellular Carcinoma)  • Include "RFP Aug 2024 [Insert Program Title]" in the program title of the grant	September 18, 2024
Step 2	Grant decisions will be made by Genentech by September 20th and decision notifications will be issued to the accredited educational provider through gFRS.	September 25, 2024
Step 3	If your grant is approved, one activity within the program must launch before November 20, 2024.	November 20, 2024

### **Additional Considerations**

Provider(s) who are awarded grants are encouraged but not required to:

- 1. Demonstrate key findings via outcomes analysis and report the extent to which the education met the stated objectives and other key findings.
- 2. Describe how learners demonstrated competence, performance, or improved patient outcomes as a result of the educational activity.
- 3. Summarize (through written analysis) the provider's understanding and interpretation of the outcomes data and identify any persistent educational gaps, unanticipated barriers and/or activity/outcomes limitations.



## **Currently Available RFP Focus Area:**

Focus	Opportunity	
Therapeutic Area: Oncology Disease Areas:	The complexity of treating HCC in the context of cirrhosis requires a nuanced understanding of both oncology and hepatology principles. The interplay between tumor progression and liver function poses significant therapeutic challenges that necessitate specialized education.	
Hepatocellular	onanongos anat nososonate oposianizoa saasaasini	
Carcinoma	Regardless of treatment, bleeding from esophageal varices is a known complication in patients with HCC and underlying cirrhosis. An EGD is the gold standard for detecting gastroesophageal varices in patients with cirrhosis, and is recommended by several guidelines to be carried out in all patients with	
Primary Learning Audiences: US-based Community Cancer	cirrhosis, though evaluation of varices may vary from one institution to another. Guideline adherence underlines the importance of a multidisciplinary approach to managing HCC patients with cirrhosis and evaluation of varices.	
Teams Medical Oncologists Hepatologists Gastroenterologists	Genentech is requesting proposals for independent medical education programs that incorporate multidisciplinary collaboration frameworks and assess the objective performance of learners. To improve the quality of care for patients with HCC, proposals should address the educational gaps for community cancer teams in diagnosing, treating, and managing the challenges of cirrhosis.	
Secondary Learning Audience: Primary Care	References:	
Providers	<ol> <li>Garcia-Tsao G, Bosch J. Varices and Variceal Hemorrhage in Cirrhosis: A New View of an Old Problem. Clin Gastroenterol Hepatol. 2015 Nov;13(12):2109-17</li> <li>Lim J, Kim HI, Kim E, Kim J, An J, Chang S, Kim SO, Lee HC, Lee YS, Shim JH. Variceal bleeding is</li> </ol>	
Regional Considerations: Areas with high	aggravated by portal venous invasion of hepatocellular carcinoma: a matched nested case-control study. BMC Cancer. 2021 Jan 5;21(1):11.  3. Mähringer-Kunz A, Steinle V, Düber C, Weinmann A, Koch S, Schmidtmann I, Schotten S, Hinrichs JB, Graafen D, Pinto Dos Santos D, Galle PR, Kloeckner R. Extent of portal vein tumour thrombosis in patients with hepatocellular carcinoma: The more, the worse? Liver Int. 2019 Feb;39(2):324-331.	
incidence of HCC, including CA, TX, NY, PA, NC	<ol> <li>National Cancer Institute: Surveillance, Epidemiology, and End Results (SEER) Program. Cancer stat facts: liver and intrahepatic bile duct cancer. Available online at: https://seer.cancer.gov/statfacts/html/livibd.html.</li> <li>Richardson E, Arastu S, Halegoua-DeMarzio D. PRO: Esophagogastroduodenoscopy Is the Preferred</li> </ol>	
Support Available:	Modality to Screen for the Diagnosis of Esophageal and Gastric Varices When the Diagnosis of Cirrhosis Is Made. Clin Liver Dis (Hoboken). 2020 Sep 4;16(2):43-47	
Up to \$350,000		