🕛 NOVARTIS

Professional Medical Education Grants

Our mission is to support high quality educational programs for US HCPs that will improve patient care.

We will evaluate professional medical education grant requests that are independent of commercial bias and non-promotional in nature. Professional medical education grants can be requested to support a variety of different activities, including live events, web-based education, and enduring materials.

We will accept grant requests for professional medical education programs from the following types of organizations:

- Academic medical centers, medical universities
- Hospitals, community health centers
- Professional medical associations/societies
- Accredited continuing medical education providers
- Medical education companies

We will also evaluate grant requests in support of research fellowships and awards from academic medical centers, medical universities and professional medical associations/societies. Individual recipients of these fellowships/awards should not have already been selected and Novartis can have no role in the selection of the recipient. Further Novartis funds cannot be used towards the physical award (eg plaque, trophy, etc).

Submission Requirements

In order to be considered, a complete grant application package must be submitted via the online portal at least 60 calendar days prior to the event date. If the completed grant application package is not received at least 60 days prior to the event date, the grant request may be denied.

Grant submissions for post-congress reviews/highlights must be submitted at least 60 days prior to the start date of the medical congress.

Required documents for submitting a Professional Medical Education Grant request

- Detailed budget
- Proposal document: needs assessment, agenda, learning objectives, target audience, outcomes measurement plan, etc.
- Current W9 (signed and dated)

Following are examples of submissions that will not be accepted for a Professional Medical Education Grant request

- Requests received less than 60 days prior to the activity start date
- · Requests that are not within the identified therapeutic areas of interest
- · Grants to individuals
- Personal travel
- Expenses related to HCP attendance (other than faculty members) at major meetings
- Website development or mass media production not associated with an accredited provider $\frac{1}{7}$

- Entertainment
- Capital campaigns, building funds or operating expenses
- Professional career development (e.g. office/practice management skills, presentation skills, etc.)
- Events that do not have an educational focus
- Requests for programs that have already started or are in progress
- Service contracts
- Textbooks or equipment-related requests
- Promotional exhibit and display fees
- Recognition awards
- Charitable contributions
- Requests for meals only
- Travel costs for any non-faculty participants
- Clinical grants, including Investigator Initiated Trials (IITs). Additional information can be found here.
- Activities held in lavish venues/resort locations are strongly discouraged

List of Disease Areas

Novartis will receive and review professional medical education grant requests for the disease areas listed below. Please note that these areas are subject to change and funding availability may vary.

Non-Oncology

- Cardiovascular ASCVD
- Cardiovascular Hyperlipidemia
- Chronic Spontaneous Urticaria (CSU) / Chronic Inducible Urticaria (CindU)
- Complement-Mediated Kidney Diseases (C3G, aHUS, IC-MPGN)
- Hidradenitis Suppurativa
- IgA Nephropathy
- Multiple Sclerosis

Oncology

- Breast Cancer
- Hemolytic Anemias PNH/wAIHA
- Lymphoid Malignancies
- Myeloid Malignancies
- Neuroendocrine Tumors (NET)
- Non-Small Cell Lung Cancer (NSCLC)
- Platelet Disorders
- Prostate Cancer

Details for Non-Oncology Therapeutic Areas of Interest

Cardiovascular - Hyperlipidemia and ASCVD

- Screening, Diagnosis Increase knowledge on the role of Lipoprotein(a) as a risk factor for atherosclerotic cardiovascular disease and the importance of Lp(a) screening as part of a comprehensive ASCVD management strategy.
- Pathophysiology Increase knowledge of the pathophysiology of long-term exposure to elevated LDL-C levels and its impact as a causal risk factor for atherosclerotic cardiovascular disease (ASCVD).

- Treatment Increase knowledge of safety and efficacy of current and emerging lipid lowering treatments.
- Guidelines, Goals and Evidence-Based Medicine Increase knowledge of the need for patients to reach recommended evidence-based LDL-C goals and the importance of patient adherence to treatment.
- Care Approach Increase knowledge of the implementation of individualized patient-centered treatment plans for ASCVD patients with persistently elevated LDL-C levels.

Chronic Spontaneous Urticaria (CSU) / Chronic Inducible Urticaria (CindU)

- Pathogenesis Increase knowledge on the role of BTK in the pathogenesis of CSU and CIndU.
- Screening, Diagnosis Identify diagnostic and prognostic biomarkers for CSU and CIndU.
- Treatment Understand current and emerging treatments for CSU and CIndU.
- Guidelines and Evidence-Based Medicine Review the current international guidelines on CU.
- Quality of Life Understand the impact of CSU and/or CIndU on quality of life for patients.

Complement-Mediated Kidney Diseases (C3G, aHUS, IC-MPGN, IgA Nephropathy)

- Pathogenesis Educate on the role of pathogenesis in rare glomerular kidney disease
- Treatment Increase knowledge of current and emerging treatments for rare glomerular kidney disease
- Screening/Diagnosis Educate on the current approach to testing and diagnosis of rare glomerular kidney disease
- Clinical Trials Increase knowledge of ongoing and published clinical trials in rare glomerular kidney disease
- Coordination of Care Educate on best practices in an integrated team approach to health care and the importance of timely referrals for specialty care.

Hidradenitis Suppurativa

- Pathogenesis, Disease Progression Educate on the role of pathogenesis and disease progression in HS.
- Screening, Diagnosis Educate on the current diagnostic criteria for HS.
- Treatment Increase knowledge of the current and emerging treatments for HS.
- Clinical Trials Educate on recent and ongoing clinical trials in HS.
- Quality of Life and Comorbidities Increase knowledge of the impact of HS on quality of life for patients and common comorbidities.

Multiple Sclerosis

- Diagnosis Educate on current diagnostic criteria for timely diagnosis of biomarker-based strategies to assess MS activity and treatment response.
- Treatment Educate on how to identify patients for whom high-efficacy DMTs are appropriate; discuss the risks and benefits; provide strategies to lower any barriers to HET adoption.
- Treatment Increase knowledge of the mechanisms of action of current and emerging immunotherapies, their relevance to treatment decisions, and the relative risks and benefits of immunotherapeutic options.
- Special Patient Populations Educate on how to identify patients with pediatric-onset MS & patients in underserved populations; determine appropriate treatment; assess available data on approved disease-modifying therapies for treatment.
- Care Approach Increase knowledge of cognitive impairment and fatigue, recommend optimal screening, monitoring, and treatment strategies; address barriers to optimal management and increase clinician and patient awareness about the prevalence, impact, and appropriate management of cognitive symptoms.
- Care Approach Educate on treatment optimization approaches to balance cost with patient outcomes.

Details for Oncology Therapeutic Areas of Interest

Breast Cancer

- Educate on the sequencing of therapies and the treatment recommendations for combination therapy for HR+/HER2- in pre- and post-menopausal patients with neoadjuvant, adjuvant or advanced breast cancer
- Educate on the relevance and importance of next generation sequencing, molecular testing, testing in tumor vs blood in metastatic HR+/HER2- breast cancer
- Educate on adverse event management strategies to ensure optimal patient outcomes and adherence with the use of treatments for metastatic HR+/HER2- breast Cancer

Hemolytic Anemias

- Educate on current and emerging treatment landscape of PNH, including targeting the proximal complement pathways
- Educate on adverse event management strategies with PNH therapies to ensure optimal patient outcomes and adherence

Lymphoid Malignancies

- Educate the medical community the current and emerging treatment landscape of T-Cell therapies in the treatment of B-Cell malignancies, including r/r DLBCL and FL, and pALL
- Educate community HCPs on the value of CAR-T therapy and the importance of timely referral and broad access to treatment for patients in need
- Educate community HCPs on differentiation of T-Cell therapies, appropriate patient selection/eligibility, and optimal management of patients undergoing CAR-T therapy

Myeloid Malignancies

- Educate on the current and emerging treatment landscape in third line CML
- Educate on the sequencing of treatments
- Educate on the unmet medical needs (resistant mutations such as T315I) in CML patients in later lines of treatment
- Educate on the MOA of CML treatments
- Educate on the healthcare resource utilization (HCRU) in CML patients in later lines of treatment
- Educate on the clinical benefits of molecular monitoring/mutation testing, treatment milestones per NCCN guidelines and deep molecular response (DMR)/ Treatment free remission (TFR) for patients with CML
- Educate on how to manage adverse events, dose optimization and adherence to treatments to ensure optimal patient outcomes

Neuroendocrine Tumors (NETs)

- Recognize the challenges with the accurate diagnosis and management of NETs/Gastroenteropancreatic neuroendocrine tumors (GEP-NETs)
- Understand the impact of NETs/GEP-NETs on patient quality of life (QOL)
- Understand evolving data regarding diagnosis and imaging modalities for NETs/GEP-NETs
- Recognize the importance of early intervention upon clinical or radiological progression of NETs/GEP-NETs
- Explain the importance of appropriate treatment sequencing and selection for NETs/GEP-NETs
- Discuss the current and emerging treatment landscape for NETs/GEP-NETs
- Consider the appropriate patient type and tumor origin/characteristics when determining individual

treatment selections

- Consider the use of guidelines for the diagnosis and treatment of NETs/GEP-NETs
- Apply a multidisciplinary approach to the management of NETs/GEP-NETs

Non-Small Cell Lung Cancer (NSCLC)

- Educate on the clinical value of up-front, multi-modal diagnostic testing to improve outcomes in patients with NSCLC using targeted therapies as first line therapy
- Educate on optimal testing methodologies (tissue and liquid biopsy) to identify actionable oncogenic drivers in metastatic NSCLC (including METex14 mutations)
- Educate on the importance of METex14 as an oncogenic driver associated with poor prognosis in NSCLC
- Educate on the role of pro-tumor inflammation (PTI) inhibition in Lung cancer and strong understanding of MOA and the potential role of IL-1 β

Platelet Disorders

- Educate on the current and emerging treatment landscape in first line and second line settings of immune thrombocytopenia
- Educate on long term management strategies with persistent/chronic ITP to endure optimal patient outcomes and adherence
- Educate on the various pathways in treating ITP

Prostate Cancer

- Discuss the role of prostate-specific membrane antigen (PSMA) as a diagnostic and prognostic Biomarker for Prostate Cancer
- Discuss the utility and appropriate use of novel imaging modalities including interpretation of the imaging results for advanced PC
- Understand the mechanism of action (MOA) of radioligand therapy (RLT) for Metastatic Castration-Resistant Prostate Cancer (mCRPC)
- Differentiate current and evolving PC treatments (ex. systemic vs targeted) for mCRPC
- Understand the current and emerging treatment landscape in mCRPC
- Explain the importance of appropriate treatment sequencing and selection for treatment of mCRPC
- Consider patient types that are most appropriate for current and emerging mCRPC treatments
- Utilize a multi-disciplinary team and collaborative approach for the diagnosis and treatment of mCRPC
- Consider the patient's perspective and quality of life when formulating a treatment plan for Prostate Cancer
- Recognize barriers to optimal care for diverse and minority populations due to lack of awareness of Prostate Cancer disease incidence, burden and diversity in clinical trials.

Fellowships

Novartis considers funding for established fellowship programs with non-profit organizations including medical societies, academic institutions and organizations that align with the Novartis mission of addressing identified education gaps in particular therapeutic areas of interest currently listed online.

Requirements for seeking fellowship funding

Fellowships must have established both eligibility and selection criteria for fellows and an independent committee for fellowship selection. Fellows cannot have been selected at the time support is sought. To seek funding support, the following documents must be submitted:

- Organizational W-9
- Budget
- · Program objectives or specified research priorities
- Program agenda or timeline
- Needs assessment
- Letter of request and outcomes measurement/evaluation plan

The fellowship term may be for up to 1 year. Organizations can apply for the additional years if needed. Novartis funding cannot go towards any overhead including admin expenses, insurance, lodging, etc.

Funding requests that will not be supported

- Requests received less than 60 days prior to the activity start date
- Requests that are not within the identified therapeutic areas of interest
- · Requests for textbooks or equipment-related requests only
- Recognition awards
- Requests for meals only
- · Requests for travel or conference registration fees only

Requests for Proposals (RFPs)

• Complement-Mediated Kidney Diseases (C3G, aHUS, IC-MPGN)

Submission Portal

Submit your education grant request

Disclaimer

Please do not consider any request approved until you have received written documentation from Novartis that your application has been approved for funding and all of the required paperwork, including a counter-signed original Letter of Agreement, has been received by you. Any expenses incurred prior to receiving written support of the program by Novartis are taken at your own risk.

Previous support by Novartis does NOT guarantee future support as each request is evaluated on individual merit. If you have any questions, please contact a member of the US Professional Medical Education or Patient Advocacy Teams. Please do NOT contact your sales representative, medical science liaison, regional scientific director, or marketing personnel regarding the status of a request.

Novartis will review each submission in a timely manner. Your prompt response to requests for any additional information is critical to this process and appreciated.

Novartis is aware of the growing need for education and support for the medical and patient/caregiver communities. Many more requests are received than can be funded and we regret that we cannot accommodate every request. However, your submission will receive a fair and thorough review. In return, please take time to consider how your program fits within the therapeutic areas of interest for Novartis and the established regulations, laws and guidelines before submitting a request.

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