

## 2025 Independent Medical Education Request for Proposals

**Issue Date: June 6, 2025**

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.

**Purpose:** 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 (<http://funding.gene.com>) 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 (<http://funding.gene.com>) 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 <http://funding.gene.com>)
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 disqualify providers.
5. Failure to follow the instructions within this RFP may result in a denial.

**Instructions**

Eligibility Criteria	<ul style="list-style-type: none"> <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 style="list-style-type: none"> <li>● Educational initiatives must be U.S.-based 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 8 weeks to complete a <b>full grant proposal</b> through <a href="https://funding.gene.com">funding.gene.com</a> . When submitting the application, please be sure to: <ul style="list-style-type: none"> <li>• Select the Therapeutic Area (Oncology), and Disease State (<b>Small Cell Lung Cancer</b>)</li> <li>• Include "RFP June 2025 [Insert Program Title]" in the program title of the grant</li> </ul>	August 1, 2025
Step 2	Grant decisions will be made by Genentech by August 15, 2025 and decision notifications will be issued to the accredited educational provider through gFRS.	August 15, 2025
Step 3	If your grant is approved, one activity within the program must launch before October 13, 2025.	October 13, 2025

**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
<p><b>Therapeutic Area:</b> Oncology</p> <p><b>Disease Areas:</b> Small-Cell Lung Cancer</p> <p><b>Primary Learning Audiences:</b> Community Cancer Teams</p> <p>Community Oncologists</p> <p>Oncology NPs/PAs</p> <p>Oncology Pharmacists</p> <p><b>Support Available:</b> Up to \$350,000</p>	<p>Small cell lung cancer (SCLC) is an aggressive malignancy with a poor prognosis, especially in the extensive-stage (ES) setting. Recent advances in therapeutic options are changing the ES-SCLC treatment landscape, creating educational gaps for community oncologists. These gaps include limited knowledge of the efficacy and safety of new therapies and new therapeutic combinations.</p> <p>To optimize patient outcomes, Genentech is seeking proposals for programs that address the educational needs of community oncologists concerning new treatment options in ES-SCLC.</p> <p><b>References:</b></p> <ol style="list-style-type: none"> <li>1. Rudin CM, Brambilla E, Faivre-Finn C, Sage J. Small-cell lung cancer. <i>Nat Rev Dis Primers</i>. 2021 Jan 14;7(1):3. doi: 10.1038/s41572-020-00235-0</li> <li>2. Reck M, Dziadziuszko R, Sugawara S, Kao S, Hochmair M, Huemer F, de Castro G Jr, Havel L, Bernabé Caro R, Losonczy G, Lee JS, Kowalski DM, Andric Z, Califano R, Veatch A, Gerstner G, Batus M, Morris S, Kaul M, Cuchelkar V, Li H, Danner BJ, Nabet BY, Liu SV. Five-year survival in patients with extensive-stage small cell lung cancer treated with atezolizumab in the Phase III IMpower133 study and the Phase III IMbrella A extension study. <i>Lung Cancer</i>. 2024 Oct;196:107924. doi: 10.1016/j.lungcan.2024.107924.</li> <li>3. Paz-Ares L, Chen Y, Reinmuth N, Hotta K, Trukhin D, Statsenko G, Hochmair MJ, Özgüroğlu M, Ji JH, Garassino MC, Voitko O, Poltoratskiy A, Musso E, Havel L, Bondarenko I, Losonczy G, Conev N, Mann H, Dalvi TB, Jiang H, Goldman JW. Durvalumab, with or without tremelimumab, plus platinum-etoposide in first-line treatment of extensive-stage small-cell lung cancer: 3-year overall survival update from CASPIAN. <i>ESMO Open</i>. 2022 Apr;7(2):100408. doi: 10.1016/j.esmoop.2022.100408.</li> <li>4. Chakraborty S, Sen U, Ventura K, Jethalia V, Coleman C, Sridhar S, Banerjee A, Ozakinci H, Mahendrarvarman Y, Snioch K, de Stanchina E, Shields MD, Tomalin LE, Demircioglu D, Boyle TA, Tocheva A, Hasson D, Sen T. Lurbinectedin sensitizes PD-L1 blockade therapy by activating STING-IFN signaling in small-cell lung cancer. <i>Cell Rep Med</i>. 2024 Dec 17;5(12):101852. doi: 10.1016/j.xcrm.2024.101852. Epub 2024 Dec 9. Erratum in: <i>Cell Rep Med</i>. 2025 Feb 18;6(2):101944. doi: 10.1016/j.xcrm.2025.101944.</li> </ol>