



Independent Medical Education (IME) / Quality Improvement (QI)

Request for Proposals (RFP):

RFP Title	Improving Care Coordination, Referral Pathways, BioMarker Testing and Trial Access in HNSCC
Grant Amount	Up to \$400,000 (Multi-support preferred)
Targeted Learners	Multidisciplinary care teams including: <ul style="list-style-type: none"> • Medical oncology • ENT/surgery • Radiation oncology • Clinical trial coordinators • Community oncology networks and health systems
RFP Requirements	<ul style="list-style-type: none"> • Summary • Needs Assessment <ul style="list-style-type: none"> ○ Root Causes Detailed • Educational Objectives (if applicable) • Agenda • Intended Audience • Outcomes level and description of intended outcomes plan/delivery • Description of Partnership and why (If Applicable) • Description of why chosen locations were prioritized for education (If a live activity or applicable).
RFP Posting Date	May 29, 2026
Submission Deadline	June 26, 2026 Genmab Grants & Giving Portal (steeprocks.com)
RFP Decision	July 10, 2026
Expected Launch Date	Q4 2026
Interim Outcomes	6 months post launch
Final Outcomes	
Educational Program Design	Preference will be given to proposals that: <ul style="list-style-type: none"> • Focus on systems-level changes, not just education • Address workflow inefficiencies at transition points

	<ul style="list-style-type: none">• Include measurable QI interventions and KPIs• Demonstrate scalability across care settings
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Statement of Purpose:

In HNSCC, gaps in patient care are frequently driven by inefficiencies in care coordination rather than lack of clinical knowledge alone.

Key challenges include:

- Unclear ownership of biomarker testing
- Utilization of biomarkers in HNSCC (PD-L1 and HPV testing)
- Inconsistent multidisciplinary handoffs
- Limited clinical trial pre-screening and referral
- Delays in time-to-specialist care
- Inconsistent integration of HPV-related (p16+) versus HPV-unrelated disease pathways into MDT workflow design and care plans
- Limited workflow support for mechanism-aware sequencing decisions across emerging therapeutic classes

Studies have demonstrated that delays in diagnosis, referral, and treatment initiation in HNSCC are associated with worse clinical outcomes. Additionally, lack of standardized workflows across multidisciplinary teams contributes to variability in care delivery and reduced access to clinical trials.

Optimizing care pathways, improving communication between specialties, and implementing structured referral and workflow systems have been shown to enhance efficiency and patient outcomes.

Genmab is interested in supporting QI initiatives that address these systemic barriers by improving care coordination and workflow efficiency across the HNSCC continuum.

References:

1. Murphy CT, Galloway TJ, Handorf EA, et al. Survival impact of increasing time to treatment initiation in HNSCC. *J Clin Oncol*. 2016; 34:169–178.
2. Graboyes EM, Kompelli AR, Neskey DM, et al. Association of treatment delays with survival for patients with HNSCC. *JAMA Otolaryngol Head Neck Surg*. 2019; 145:166–177.
3. van Harten MC, de Ridder M, Hamming-Vrieze O, et al. The impact of treatment delay on survival in head and neck cancer. *Oral Oncol*. 2015; 51:283–290.

4. O'Sullivan B, Huang SH, Su J, et al. Development and validation of a staging system for HPV-related oropharyngeal cancer. *J Clin Oncol*. 2016; 34:2375–2383.

5. Dilts DM, Sandler AB. Invisible barriers to clinical trials: the impact of structural, infrastructural, and procedural barriers. *Cancer*. 2006; 107:1957–1965.

RFP Evaluation:

Genmab welcomes submissions for IME grants from educational providers who can meet the associated deadlines for the RFP as outlined above.

All submissions will be reviewed in accordance with internal Genmab Policies and Procedures. Genmab does not support the costs associated with responding to this RFP and adheres to Fair Market Value (FMV) for those areas of the budget, when relevant. Genmab holds the right not to support any submissions based upon our internal review criteria.

All submissions to the RFP should be accredited by the relevant body (i.e. ACCME). Genmab observes and follows all external guidelines and policies related to the support of Continuing Medical Education including but not limited to the ACCME, OIG, and FDA.

Applications for this RFP should place any educational interventions within the stated targeted community oncology setting(s). No preferred educational intervention, partnership, or community oncology setting has been identified, nor will one be used to evaluate submissions to this RFP.

Genmab reserves the right to cancel all or part of this RFP at any time. In the event of cancellation, Genmab will communicate the cancellation to all applicants.

Contact:

For more information, please contact Cody Ortmann, Associate Director of Independent Medical Education at coor@genmab.com