

Novartis Office of Grants & Education
Request for Proposal (RFP) - Professional Medical Education

The Novartis Office of Grants & Education supports independent high-quality medical educational programs which provide fair-balanced, evidence-based, current scientific information to healthcare professionals to positively improve patient care. Activities should have an educational focus, be independent of commercial bias and be non-promotional in nature. We will perform these duties in compliance with laws, regulations and guidelines as established by the ACCME, PhRMA Code, OIG, other regulatory agencies and in compliance with Novartis guidelines and policies

Key Dates:	RFP Issued: May 18, 2026 <i>Applications Due to Novartis: June 29, 2026 by 5 PM EST</i> Notification of Grant Decisions: By August 31, 2026 Educational Programming Starts: Before December 31, 2026
Therapeutic Area:	Sjögren's disease (SjD)
Educational Need:	Sjögren's disease (SjD) is a chronic systemic autoimmune condition affecting an estimated 3.1 million adults in the United States, characterized by lymphocytic infiltration of exocrine glands and wide-ranging systemic organ involvement that extends well beyond the hallmark sicca symptoms of dry eyes and dry mouth.^{1,2} Despite its prevalence, SjD remains a major scientific and clinical gap: the disease is biologically heterogeneous, difficult to phenotype, and not yet matched to a single FDA-approved systemic therapy.^{1,3} Patients present across a spectrum of gland-predominant, systemic inflammatory, and mixed phenotypes, yet are frequently managed with the same symptom-oriented approach regardless of underlying mechanism—a fundamental mismatch between disease biology and clinical practice that continues to impede meaningful therapeutic progress.^{1,5} Compounding this challenge, the field lacks a sufficiently precise framework for patient stratification and treatment-response assessment. Many clinical trials have failed or remained inconclusive due to overly broad inclusion criteria and outcome measures that do not consistently capture the domain being treated, whether dryness, fatigue, pain, or systemic inflammatory activity.^{1,3} Validated instruments such as the ESSDAI show meaningful variability over time, further complicating interpretation at the point of care.^{1,6} Diagnostic delays averaging 5 to 7 years from symptom onset remain common,^{7,8} during which systemic damage accrues and intervention opportunities are missed. Multidisciplinary care coordination across rheumatology, ophthalmology, oral medicine, pulmonology, nephrology, and neurology remains inconsistent in practice,^{4,7} leaving the 81% of patients who report significant emotional burden without the whole-disease support they require.⁹ For the clinicians on the front lines of this disease, the path forward demands more than awareness. Clearer frameworks for recognizing and stratifying disease beyond sicca symptoms, greater confidence in applying disease activity

	measures, and practical strategies for coordinating care across specialties are essential to closing the gap between current practice and optimal patient management. A working knowledge of emerging systemic therapies, including their mechanisms of action, clinical trial efficacy and safety profiles, and pathways for appropriate integration into practice once regulatory approval is achieved, is equally critical. High-quality, outcomes-driven continuing medical education has the potential to meaningfully bridge the gap between the evolving science of Sjögren's disease and the evidence-informed clinical practice that patients deserve. Reference: 1. Hu Y, Wen B, Zhang Y, et al. Sjögren's syndrome: epidemiology, classification criteria, molecular pathogenesis, diagnosis, and treatment. <i>MedComm</i> (2020). 2025;6(7):e70297. doi:10.1002/mco2.70297 2. Mariette X, Criswell LA. Primary Sjögren's syndrome. <i>N Engl J Med</i>. 2018;378(10):931-939. doi:10.1056/NEJMcp1702514 3. Arends S, Verstappen GM, de Wolff L, Pringle S, Kroese FGM, Vissink A, Bootsma H. Why do drug treatments fail in Sjögren's disease? Considerations for treatment, trial design and interpretation of clinical efficacy. <i>Expert Rev Clin Immunol</i>. 2023;19(10):1187-1194. doi:10.1080/1744666X.2023.2234641 4. Sjögren's Foundation. Clinical Practice Guidelines. https://sjogrens.org/researchers-providers/clinical-practice-guidelines. Accessed March 20, 2026. 5. Fox RI, Fox CM, McCoy SS. Emerging treatment for Sjögren's disease: a review of recent phase II and III trials. <i>Expert Opin Emerg Drugs</i>. 2023;28(2):107-120. doi:10.1080/14728214.2023.2209720 6. Gordon RA, Nguyen Y, Foulquier N, et al. The Sjögren's Working Group: The 2023 OMERACT meeting and provisional domain generation. <i>Semin Arthritis Rheum</i>. 2024;65:152378. doi:10.1016/j.semarthrit.2024.152378 7. British Society for Rheumatology. BSR guideline for the management of Sjögren's disease. Published 2024. https://www.rheumatology.org.uk/practice-quality/guidelines/sjogrens-disease. Accessed March 20, 2026. 8. Sandhya P, Jeyaseelan L, Scofield RH, Danda D. Diagnostic delay in primary Sjögren's syndrome: an analysis. <i>Int J Rheum Dis</i>. 2019;22(9):1768-1774. doi:10.1111/1756-185X.13627 9. Sjögren's Foundation. Living with Sjögren's. Published March 2022. https://sjogrens.org/sites/default/files/inline-files/LivingwithSjogrens-8.5x11-2022-Mar31_7pm.pdf. Accessed March 20, 2026.
Geographic Scope:	Primary geography of interest: United States (National, Regional, and/or Local) Note: Applications for this RFP must be US focused for the audience, expert faculty, educational needs, and standards of care.
Project Description:	The Novartis Office of Grants & Education has identified the need for innovative continuing medical education programs that strive to optimize patient outcomes through education on: • Recognize the systemic and heterogeneous nature of Sjögren's disease, including its diverse clinical phenotypes, organ manifestations, and distinguishing features from overlapping autoimmune conditions. • Understand the theoretical development of autoimmune response in Sjögren's Disease with a focus on B cells. • Emphasize the importance of early diagnosis, diagnostic tools like ultrasound, and recognize the utility of biomarkers in diagnosis.

	• Understand the burden of the disease and its systemic manifestations, recognizing that Sjögren's is a serious, B-cell driven inflammatory disease with multi-system manifestations that require urgent recognition and treatment. • Recognize the urgency to treat with Sjögren's-specific systemic therapies beyond just symptom control. • Describe the mechanisms of action, efficacy, and safety profiles of emerging investigational systemic therapies for Sjögren's disease and their potential role in future clinical practice. • Describe the burden of Sjögren's disease across daily living, work, psychological, physical, and social domains. • Develop an individualized, multidisciplinary care plan for patients with confirmed SjD that integrates specialist collaboration, structured follow-up intervals, and assessment of patient-reported outcome. • Apply a systematic, evidence-based framework for evaluating and stratifying patients with confirmed SjD to guide appropriate management decisions, including specialist referral and disease activity monitoring. The Novartis Office of Grants & Education is seeking to fund accredited programs across a range of formats, which may include: • Independent satellite symposia at national congresses with enduring component • Local and regional conference support • Educational curriculum, including case-based or simulation-based multidisciplinary workshops for various specialty care teams • Community practice quality improvement collaborative Additional reinforcement tools may include: • Clinician practice and diagnostic toolkits • Podcasts Outcome measurement may include: • Self-reported or objective Moore's Outcomes Level 5 Note: All aspects of the Program(s) including location and placement are independent of Novartis. Partnership with a non-profit organization is preferred but not required.
Target Audience:	Rheumatologists, rheumatology nurse practitioners and physician assistants, ophthalmologists, gynecologists, dentists, immunologists, primary care physicians, pharmacists, managed care clinicians, fellows, and any other HCPs who treat patients with Sjogren's Disease. Educational providers should include target number of participants. Further, please include details on proposed audience recruitment. Please note: Novartis will not participate in the distribution of invitations to the CME/CE event(s).

Available Funding:	Multiple single-support or multi-support initiatives may be funded; The total amount of funding available for this RFP is \$400,000, however, individual initiative should be capped at \$300,000.
Submission Requirements:	Grant applications must be submitted by the Accredited Provider (or the Office of CME if from an Academic Institution) electronically via the Novartis Grants Central Station website: www.ngcs.novartis.com by 5 PM EST on June 29, 2026 to be considered. The grant application should include “RFP Response” within the Program Title [example: “RFP Response: <i>Program Title</i>”]. Proposals that include collaborations with third parties, including (but not limited to), medical societies, health education companies/centers, not-for-profit organizations, and academic institutions, are encouraged, as appropriate.
For grant request submission information, FAQs, and eligibility criteria, please visit: https://www.novartis.us/corporate-responsibility/external-funding If you have any questions regarding this RFP, you should only contact The Novartis Office of Grants & Education via email at: grants.office@novartis.com and sofia.yang@novartis.com. [Please title the subject of your email: “RFP SJD 2026”]. **Please submit under Sjogrens Disease in the Grants System**	