



Medical Education and Grants

Request for Proposals
Independent Medical Education
June 17, 2026

Key Information for Applicants	
Independence requirement	Education must be designed and controlled by the educational provider. Summit will not control content, faculty selection, educational format, or delivery methods.
Applicable standards	ACCME Standards for Integrity and Independence; PhRMA Code; OIG guidance; FDA regulations.
What Summit is seeking	Independent medical education (IME) activities (accredited/non-accredited) that address clear scientific or educational needs affecting healthcare professionals and patient care.
General Educational Interest Area	EGFR mutated non-small cell lung cancer (EGFRm NSCLC)
Funding	Up to \$150,000 per initiative
Submission	Submit applications through email to grants@smmttx.com . Please ensure documents are in PDF format.
Deadline for submission	July 8, 2026 5PM Pacific Time
Questions	Direct inquiries only to: grants@smmttx.com

Purpose

This Request for Proposals serves to inform the public of Summit's commitment to funding independent medical education (IME) projects within a specific topic area that demonstrates clear scientific and/or educational needs affecting healthcare professionals and patient care.

Clinical Context and Educational Need:

EGFR-mutated NSCLC represents a subset of lung cancers, with EGFR tyrosine kinase inhibitors (TKIs) established as standard first-line therapy.¹ However, resistance to EGFR-TKIs remains an obstacle in the clinical management of EGFRm NSCLC, with primary or acquired resistance to these agents emerging from diverse mechanisms.^{2,3} This resistance underscores the dynamic plasticity and complexity of tumor evolution under therapeutic pressure.² Furthermore, patients with EGFR-mutated NSCLC have a higher likelihood of developing brain metastases. Brain metastases are associated with substantial morbidity and mortality, with median overall survival declining significantly following CNS involvement, and their management remains a significant clinical challenge.⁴

Following progression on EGFR-TKIs, potential avenues for overcoming resistance include mechanism-based strategies, as well as mechanism-agnostic approaches.^{1,3} As more scientific studies and therapeutic options emerge in EGFRm NSCLC with patients who have progression on EGFR-TKIs, optimal treatment selection and sequencing become increasingly complex and tailored to individual risk factors, prior treatment in the first line setting, patient preferences, disease biology, and the pattern of disease progression, such as development and/or progression of brain metastases.¹⁻³ This complexity creates knowledge gaps in keeping up to date on emerging data, particularly in community settings where a majority of oncologists report feeling overwhelmed by the pace of innovation and report difficulty keeping up with evolving guidelines.⁵ This highlights a critical need for education to support community-based clinicians in integrating rapidly evolving oncology advances into clinical practice.⁵

Educational Scope and Focus

General Educational Interest Area: EGFR-mutated non-small cell lung cancer (EGFRm NSCLC)

This educational area of interest is provided for informational purposes only. All determinations regarding educational scope, content emphasis, and clinical focus must be made independently by the accredited provider based on identified educational needs.

Intended Learners (Provider-Determined): Applicants must independently identify the appropriate learner population(s) based on their needs assessment. Learner selection must be determined solely by the accredited provider and may include any healthcare professionals for whom the education is justified and appropriate. Providers are encouraged to tailor content and format to the specific roles, practice settings, and learning needs of the proposed audience.

Applicants should independently determine the appropriate geographic scope based on their needs assessment. Activities may focus on U.S.-based learners where educational need is demonstrated.

Proposals with broader geographic reach may be considered where appropriate and compliant with local regulations, provided the content is relevant to the intended audience and aligned with the stated educational objectives.

Independence of Education & Eligibility Criteria

In your proposal, you should address several key requirements to ensure compliance and quality:

1. Describe how your organization will independently develop content, select faculty, and deliver the educational activity, clearly confirming that Summit will not influence content, speaker selection, format, or delivery methods, and outlining safeguards for educational independence.
2. Explain your approach to selecting and validating evidence, ensuring fairness, balance, and mitigation of bias throughout the activity.
3. Clearly state measurable learning objectives and link them directly to your evaluation plans to demonstrate improvements in learners' knowledge, competence, or performance.
4. Provide details about your organization's type and governance structure, emphasizing your independence as an eligible educational entity. If offering CME or CE credits, list the

accrediting body and your current accreditation status, and confirm that your organization is in good standing with accrediting bodies by including an attestation of no active sanctions if applicable.

5. Demonstrate your experience in delivering independent medical education by briefly providing relevant examples and outcomes, if available.

Eligible Educational Formats: Providers should recommend educational format(s) based on their needs assessment and an understanding of the target audience's roles, practice settings, and learning preferences. A variety of educational formats will be considered. The proposed format should be appropriate to the educational objectives, target audience, and scope of the activity.

Educational activities should be grounded in peer reviewed evidence and designed for practical application in clinical practice.

Proposal Components

It's recommended to include the following components in your proposal (at minimum):

- Executive summary
 - e.g. Purpose, audience, format(s), reach, timeline, outcomes approach
- Needs assessment
 - e.g. Evidence-based gaps supported by data/literature; rationale for topic
- Audience & recruitment plan
 - e.g. Defined learner groups and dissemination approach
 - All audience identification and recruitment strategies must be determined independently by the accredited provider and may not be influenced by Summit
- Learning objectives
 - e.g. Specific, measurable objectives aligned to gaps
- Educational design
 - e.g. Methods, faculty approach, interactivity, accessibility Outcomes measurement plan See below
- Timeline
 - e.g. Development, delivery, and reporting milestones
- Itemized budget
 - e.g. costs with rationale; note any co-funding if applicable

Outcomes Measurement

Grant applicants are required to include an outcomes measurement and reporting plan as part of their proposal. At a minimum, proposals should describe how the activity will assess changes in learner knowledge and/or competence related to the stated educational objectives.

Measurement of higher-level outcomes, such as performance or practice change, is encouraged when appropriate based on the educational design, audience, and format.

To support ongoing assessment of educational impact, Summit expects grant recipients to implement a longitudinal outcomes measurement and reporting approach appropriate to the scope, format, and duration of the activity.

This is expected to include:

- An initial outcomes assessment shortly following activity launch or first learner engagement (where appropriate)
- Periodic interim outcomes updates at defined intervals throughout the activity lifecycle (e.g., approximately every 3–6 months, as appropriate)
- A comprehensive final outcomes report submitted within 30 days following completion or expiration of the activity

Providers should propose an outcomes measurement and reporting cadence aligned with the educational design, learner engagement patterns, and anticipated timelines for demonstrating impact.

Review and Decision Process

All proposals will be reviewed in accordance with Summit’s internal policies and procedures without preference for any provider. Review and decision making will be strictly based on quality, relevance, scientific rigor, and compliance.

Process Timeline		
Step	Summit Action	Applicant action
1. Submit		Submit by July 8, 2026 5PM Pacific Time and include all proposal components.
2. Review	Internal review for quality, relevance, scientific rigor, and compliance, per Summit policies.	Be prepared to clarify items if contacted by the grants office.
3. Decision	Summit may approve, partially fund, decline, or modify/cancel the RFP.	Await notification; submission does not guarantee funding.
4. Agreement	Funding is confirmed only after a formal agreement is executed.	Complete contracting requirements if selected.
5. Delivery & Outcomes Reporting		Implement the activity independently and complete outcomes reporting.

Summit reserves the right to approve, partially fund, or decline any proposal, or to cancel or modify this RFP at any time. Submission of a proposal does not guarantee funding.

Terms, Conditions, and Submission Instructions

Summit is not responsible for costs incurred in proposal preparation. Only the designated Medical Education and Grants office may be contacted regarding this RFP. Grant funding will not be confirmed until a formal agreement is executed. Funded activities may be subject to transparency and disclosure reporting requirements.

Proposals must be submitted electronically via email to grants@smmmtx.com in PDF format. The deadline to submit a proposal is July 8, 2026 5PM Pacific Time. If you have any questions, please reach out to grants@smmmtx.com.

References

1. Pan K and Ramalingam SS (2025) Rapidly evolving therapeutic advances for classical EGFR-mutant NSCLC. *Front. Oncol.* 15:1732467. doi: 10.3389/fonc.2025.1732467
2. Zhao J, Xu W, Zhou F, Zhang X, Zhou M, Miao D, Yu L, Zhang Y, Fan J, Zhou C, Li W, Mok T, Le X, Li M, Xia Y. Navigating the landscape of EGFR TKI resistance in EGFR-mutant NSCLC - mechanisms and evolving treatment approaches. *Nat Rev Clin Oncol.* 2026 Jan;23(1):63-83. doi: 10.1038/s41571-025-01085-z. Epub 2025 Nov 11. PMID: 41219394.
3. Zhou, F., Guo, H., Xia, Y. et al. The changing treatment landscape of EGFR-mutant non-small-cell lung cancer. *Nat Rev Clin Oncol* 22, 95–116 (2025).
4. Zhao W, Zhou W, Rong L, Sun M, Lin X, Wang L, Wang S, Wang Y, Hui Z. Epidermal growth factor receptor mutations and brain metastases in non-small cell lung cancer. *Front Oncol.* 2022 Nov 15;12:912505.
5. Health & Pharma. Oncology care index reveals innovation overload in cancer care. Published 2025.