Bristol-Myers Squibb
Independent Medical Education

Request for Educational Support (RFE)

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| RFE Requestor Information | Name: Linda Raichle, PhD, FACEHP  
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Phone: 609-302-3770 | |
| RFE Code           | RFE-18-ONC-101 |
| Therapeutic Area   | Oncology      |
| Areas of Interest  | Immunotherapy treatment in the management of various cancers in a managed care setting. |
| Educational Design | Comprehensive, engaging, interactive and innovative live and/or enduring education initiative. |
| Intended Audience  | Interdisciplinary teams of managed care medical directors and payer physicians, nurse case managers, oncology nurses, and other Health Care Professionals (HCPs) in Managed Care settings. |
| Budget/Budget Range| The anticipated activity is expected to be achieved with a BMS budget of no more than $150,000.  
Single- and/or Multi-supported initiatives will be considered. |
| Geographic Coverage| United States |
| Deadline for Submission (Date and Time) | Thursday, April 19, 2018 by 5pm ET |

**Background and Educational Needs**

The field of oncology is evolving at a rapid pace resulting in the development of a vast number of novel agents, including molecularly targeted therapy, immunotherapy, chemotherapy, and hormonal therapy. Combinations of these agents have provided the opportunity to increase efficacy, and in some cases, overcome resistance to standard treatment approaches. As a result, responsibilities of clinicians in team-based interdisciplinary models of cancer care are growing rapidly.
More information and education is needed for professionals in managed care settings and healthcare professionals around the country on the use of cancer immunotherapy in a variety of cancers, specifically as it relates to the integration of current and novel therapies based on clinical data, evidence and guidelines. More education is needed in understanding the key mechanisms and terminology of tumor immunology and immunotherapy, along with awareness and understanding of the latest emerging research, clinical data, and mechanisms of immunotherapies as it relates to various cancers. Furthermore, there is a need for further education on optimal cost management of cancer immunotherapy that would be realized by many healthcare professionals throughout the oncology space and more education is needed around adverse events found with immunotherapies, and strategies to manage and mitigate these events. While knowledge is improving around immunotherapies, there is still a great need in understanding the evolving treatment paradigm, as more and more options become available.

Oncologists, practicing physicians, managed care medical directors and payer physicians, nurse case managers, oncology nurses, and other HCPs manage hundreds of thousands of patients with cancer and are not always aware of the most up to date research related to novel therapies, especially as it relates to immunotherapies. Significant developments have taken place in the treatment paradigm with immunotherapies over the past few years which have created knowledge gaps for translating these developments into managed care and clinical decision making. There is a compelling need to re-engage and re-educate managed care professionals on these significant developments in immunotherapy in the management of patients with cancer to optimize care. With the recent explosion of immunotherapies in the management of cancer, managed care professionals and clinicians have struggled to optimize cost as it relates to cancer immunotherapy. With an array of new immunotherapies becoming available, HCPs must know the best ways to optimize cost management and choose the best options for individualized therapy, with the goal of improving patient outcomes. It is critical to know how to choose the appropriate therapy based on individualized patient factors, cost, efficacy and safety and how clinicians and managed care professionals must integrate these new therapies into the oncology treatment paradigm.

The volume of new information rapidly emerging creates almost insurmountable obstacles for multi-disciplinary providers in managed care settings, hence there is a clear need for educational activities that present, distill and provide perspectives on emerging data from US meetings. To this end, access to the latest oncology developments and expert viewpoints in both live and enduring formats will assist HCPs by providing them with up-to-date clinical management strategies and the timely application of new research findings to optimize patient care.

**Specific Areas of Interest**
BMS is seeking grant applications for a well-designed, innovative, interactive and engaging live and enduring activity. The proposals in response to this RFE must be focused on immuno-oncology therapies for various cancers.
The content and/or the format of the accredited activity and its related materials must be current and designed in such a way that it addresses the educational needs, goals and learning objectives of the intended audiences as described in this RFE. Clinical resources, tools and practice-aids that can help HCPs communicate with or better manage their patients with these cancers should be included. Patient tools and resources are also encouraged. Presentations and content must give a scientifically sound, evidence-based, fair and balanced overview of new and emerging therapeutic options currently available or in development to manage these diseases.

**In addition to the Letter of Request (LOR) Application, you are encouraged to include a Grant Proposal with the following information:**

- **Executive Summary:** The Executive Summary should consist of 1-2 pages and highlight the key areas as described below.
- **Needs Assessment/Gaps/Barriers:** Needs assessment should be referenced and demonstrate an understanding of the specific gaps and barriers of the target audiences. The needs assessment must be independently developed and validated by the educational provider.
- **Target Audience and Audience Generation:** Target audience(s) for the educational program must be identified within the proposal. In addition, please describe methods for reaching target audience(s) and any unique recruitment methods that will be utilized. The anticipated or estimated participant reach should also be included, with a breakdown for each modality or format included in the proposal, as applicable (e.g., number of participants for the live activity, webcast, and other enduring activities).
- **Learning Objectives:** The learning objectives must be written in terms of what the learner will achieve as a result of attending. The objectives must be clearly defined, measurable, attainable, and address the identified gaps and barriers.
- **Educational Design and Methods:** Describe the approach used to address knowledge, competence, and performance gaps that underlie identified healthcare gaps. The proposal should include strategies that ensure reinforcement of learning through use of multiple educational interventions and include practice resources and tools, as applicable.
- **Communication and Publication Plan:** Provide a description of how the provider will communicate the progress and outcomes of the educational activity to the supporter. It is highly recommended to describe how the results of the activity will be presented, published, or disseminated.
- **Innovation:** Describe how this project is innovative and engages the learners to improve knowledge, competence and/or performance. Further describe how this project might build on existing work, pilot projects or ongoing projects developed either by your institution or other institutions related to this topic.
- **Program Evaluation and Outcomes Reporting:** Description of the approach to evaluate the reach and quality of the educational program. Describe methods used for determining the impact of the educational program on closing identified healthcare gaps.
  - Please refer to “Guidance for Outcomes Report” (on the BMS grants website) for a
detailed explanation of preferred outcomes reporting methods and timelines.
  o Knowledge-, performance- and competency- based outcome measures, according to Moore’s Levels 4 & 5, are required. Level 6 outcomes are highly favored and recommended when possible.

- **Budget:** Include a detailed budget with rationale of expenses, including breakdown of costs, content cost per activity, out-of-pocket cost per activity, and management cost per activity.

**Note:** The accredited provider and, if applicable, the medical education provider (MEP) or other third party executing the activities, are expected to comply with current ethical codes and regulations. They must have a conflict-of-interest policy in place to identify and resolve all conflicts of interest from all contributors and staff involved in developing the content of the activity prior to delivery of the program, and must have a separate company providing/accrediting independent medical education if they are also performing promotional activities.

*If your organization wishes to submit an educational grant request, please use the online application available on the Bristol-Myers Squibb Independent Medical Education website.*

http://www.bms.com/responsibility/grantsandgiving

**References**

7. Harrington K, Ferris RL, Shaw JW, et al. Patient-reported outcomes in recurrent or metastatic squamous cell carcinoma of the head and neck treated with nivolumab or investigator’s choice: CheckMate 141. Oral presentation at, the 41st European Society for Medical Oncology (ESMO) Annual Meeting; October 7-11, 2016; Copenhagen, Denmark


34. Reardon DA, Sampson J, Sahebjam S, et al. Safety and activity of nivolumab monotherapy and nivolumab in combination with ipilimumab in recurrent glioblastoma: Updated results from CheckMate 143. Presented at the 52nd Annual Meeting of the American Society of Clinical Oncology (ASCO); June 3–7, 2016; Chicago, IL, USA.

42. Ben-Aharon O, Magnezi R, Leshno M, Goldstein DA. Association of Immunotherapy with Durable Survival as Defined by Value Frameworks for Cancer Care. JAMA Oncol. Published online December 28, 2017