Request for Proposals

Improving Actionable Biomarker Testing Through Technology-Enabled Solutions

Competitive Grant Program – Quality Improvement Projects

Geographic Scope/Location of Project: United States

RFP Date Issued: September 15, 2025

Applications Due: October 16, 2025

Overview

Conquer Cancer®, the ASCO Foundation and Pfizer Inc. are collaborating to offer a Quality Improvement grant funding opportunity for healthcare systems, hospitals, cancer centers and other patient care delivery organizations to leverage digital technology to improve evidence-based biomarker testing and treatment practices, with a focus on colorectal, lung, and/or prostate cancer.

Successful applicants will submit proposals that include the following key elements at a minimum:

1. Baseline data or an outlined approach to execute diagnostics or obtain data regarding current performance gaps for healthcare professional (HCP) decision making based on biomarker data availability at the time of treatment selection within the institution or delivery system.

2. A technology team (internal to the organization or with an external vendor) with the capability to assess E.H.R., pathology, laboratory and external vendor testing results or other sources of patient data to identify opportunities for improvement.in the timely availability of biomarker testing results that determine treatment Solutions may incorporate technology, process, Artificial Intelligence (AI) or other approaches and resources as determined by assessment of the fit of the solution to the baseline identified gaps .. Applicants should consider established guidelines for the responsible use of AI in oncology in their project design, including but not limited to those published by ASCO and the NCI[1,2].

3. A project team that includes representatives of pathology, oncology care providers and health information that can use Quality Improvement methodology to implement sustainable changes within the organization, based upon the gaps in biomarker testing and patient care practices identified.

This grant awards program was purposefully developed in collaboration between Pfizer and EveryGrant powered by Conquer Cancer, the ASCO Foundation expressly to meet the needs of cancer patients and improve treatment outcomes. Conquer Cancer is the lead organization for the review and evaluation of applications. Grant funding will be provided directly from Pfizer.

Scope: Addressing gaps in biomarker-based testing and treatment

Background

This RFP intends to fund novel technology-centric quality improvement projects that identify gaps in actionable biomarker testing and targeted therapy and work to address those gaps. Proposals may have a pan-tumor focus but should include at least one of the following cancer types:

A. Colorectal Cancer

Biomarker testing is recommended for all metastatic CRC (mCRC) patients at the time of diagnosis. NCCN Guidelines® recommend testing patients for RAS oncogenes, BRAF, MMR, MSI and HER2 amplification. The goal of testing in this setting is to aid in treatment selection[3,4]. However, achieving actionable universal testing of mCRC patients remains a challenge due to a variety of factors including, but not limited to, access to

technology, long turnaround times, and economic barriers. Thus, patients without access to biomarker testing may not receive the optimal treatment[5].

B. Prostate Cancer

According to the NCCN Guidelines®, all patients with metastatic prostate cancer should be tested for HRR somatic and germline gene alterations. More specifically, testing for germline mutations is recommended for all PC patients with personal or a positive family history of certain cancers or familial cancer risk mutation (including individual with a first-degree or second-degree blood relative), very-high-risk localized, high-risk localized or regional (node positive) PC patients, and all metastatic PC patients. Testing for somatic HRR gene alterations is recommended at the time of metastatic prostate cancer diagnosis, and re-evaluation may be considered upon progression to mCRPC[6]. Somatic testing can be considered in patients with regional prostate cancer[7].

C. Non-small cell lung cancer (NSCLC)

Current guidelines recommend broad molecular testing for all patients with newly diagnosed advanced NSCLC, with the primary goal of guiding treatment decisions. There are a wide range of genetic markers that can be identified through Next-Generation Sequencing (NGS) and non-NGS testing methods[8]. However, not all patients have access to optimal testing due to limited access to NGS technology in the community setting and extended turnaround times, among other factors[9].

Areas of Interest

The underuse of or delays in the turnaround time of key diagnostic tests prevents patients from receiving the best care. This RFP will fund practice-based QI projects that will use evidence-based standards to deliver timely, high-quality, patient-centered care. This includes using a combination of technological solutions and established quality improvement approaches to close known gaps. Projects should:

- Use data to assess current levels of actionable biomarker and genetic testing and identify opportunities for improvement. Actionability means that the right test was ordered and the data was available and used to determine the treatment.
- Use data to assess the timeliness of test ordering and turn-around times and identify opportunities for improvement.
- Use data to assess adherence to guideline-based treatment plans for patients, based upon biomarker testing results and identify opportunities for improvement.
- Develop or improve the use of systematic approaches to conducting biomarker and genetic testing for patients.
- Improve access to treatment and diagnostics through improving adherence to NCCN and ASCO Guidelines.
- Implement sustainable and potentially transferable solutions that improve the quality of care.

This RFP will NOT support clinical research projects evaluating the efficacy of therapeutic or diagnostic agents.

Quality Improvement Framework

The goal is to fund projects intended to produce a measurable increase in the appropriate and timely use of these technologies. Grant proposals must outline a project that will:

- Utilize QI Methodology: Employ a formal framework like Plan-Do-Study-Act (PDSA) cycles to structure the project.
- Conduct a Root Cause Analysis: Identify specific local barriers to testing (e.g., workflow, provider knowledge, patient education).
- Implement a Targeted Intervention: Design a practical solution, such as EMR alerts, patient navigation pathways, or streamlined ordering processes.
- Track Key Metrics: Monitor specific, measurable outcomes that align with established quality measures (e.g., testing rates, turnaround times).

The rationale for this structure is to provide the funding and framework necessary to build a sustainable culture of quality improvement, directly aligning the project's outputs with evidence-based standards.

The quality improvement projects should be designed to meet the standards of evidence-based, patient-centered oncology quality care certification/accreditation models[10].

To further elaborate how quality improvement projects differ from research projects, quality improvement (QI) projects are systematic, data-guided, sustainable activities designed to bring about immediate, positive changes in the delivery of healthcare in particular settings[11,12]. Quality improvement seeks to standardize structure and processes to reduce variation, achieve predictable results, and improve outcomes for patients, healthcare systems, and organizations. Structure includes things like technology, culture, leadership, and physical capital. The process includes knowledge capital (e.g., standard operating procedures) or human capital (e.g., education and training)[13].

QI projects systematically apply what is already known into the local practice, intended to quickly improve patient care within a specific setting. The goal of QI projects is to close a gap in performance at a specific health care system. The “performance” is a standard in health care that is not efficiently/appropriately/ consistently being done[14]. For these reasons, QI focuses on translating existing knowledge into programs or practices to immediately improve the quality of services to individuals and populations within a local institution or setting[15]. The risk of participation in QI is the same as the risk of receiving standard clinical care[16] since the standard of care remains the same for all patients.

In contrast, research projects use a systematic approach to discover something that is unknown. Research projects add new knowledge to what was previously unknown in literature through testing of a hypothesis or a scientific question[14]. Research aims to generate knowledge with broad applications, often through controlled studies. The subjects may or may not benefit directly from the knowledge gained. Research studies aim to evaluate an innovation, study something new, or analyze a process not yet rigorously studied[16].

Project Budget and Duration

This opportunity is intended to support quality improvement projects with an approximate 12-month duration, and a maximum grant budget of $250,000. Please refer to Expected Approximate Monetary Range of Grant Applications below for additional details.

Project Outcomes and Sustainability

This RFP seeks to support initiatives that demonstrate clearly defined, measurable outcomes and robust plans for long-term sustainability. Preference will be given to proposals that articulate specific success metrics and proactively address how their programs will remain viable. Applicants are also encouraged to consider how insights and learning from their projects may be transferable to other institutions or healthcare systems.

Application Details

Applicant Eligibility Criteria

- The following organization types may apply: academic Institutions, healthcare systems, hospitals, cancer centers and other patient care delivery organizations.
- Only organizations are eligible to receive grants, not individuals.
- Collaborations within institutions (e.g., between departments and/or inter-professional), as well as between different institutions, organizations, and associations, are encouraged. Please note all partners must have a relevant role and the requesting organization must have a key role in the project.
- The applicant must be the Project Lead or an authorized designee of such an individual (e.g., the Project Lead's grant/research coordinator).
- The Project Lead must be an employee or contractor of the requesting organization.
- For projects offering continuing education credit, the requesting organization must be the accredited provider.

Review Process

Conquer Cancer will convene a Scientific Review Committee that will serve as the Expert Review Panel (ERP). The ERP will be composed of subject matter experts who will perform an independent and confidential peer review of all in-scope proposals. The ERP's collective recommendations will define which proposals are awarded funding. Funding allocations are at the discretion of the ERP and based upon their expert knowledge of relevant implementation factors.

Reviews will be based on the following criteria:

- Relevance of the project focus on addressing the needs of cancer patients (focusing on NSCLC, mCRC, and/or prostate cancer patients).
- Strength of the proposal, feasibility, and likelihood of improving the quality and delivery of biomarker-based care for patients.
- Appropriateness, feasibility, and adequacy of the proposed project design.
- Availability of environmental and institutional resources to support the proposed project, including appropriate collaborations.
- Prior quality improvement experience and accomplishments of the applicant, study team and collaborators.

- Projects that are both measurable and have sustainable impact will be favored by the selection committee.

Expected Approximate Monetary Range of Grant Applications

The total available budget related to this RFP is **$1 million**.

- Individual projects requesting up to **$250,000** will be considered.
- The amount of the grant awarded by Pfizer for any project will depend upon the external review panel's evaluation of the proposal and the costs involved and will be stated clearly in the grant agreement.
- Award amounts include direct costs, institutional overhead costs (capped at 28% per Pfizer policy), and indirect costs.
- If an increase in staffing is proposed, please include a plan for the sustainability of the position beyond the life of the grant.

Key Dates

- RFP Release Date: September 15, 2025
- **Full Proposal Due Date: October 16, 2025**
    - Please note the deadline is 23:59 Eastern Standard Time (e.g., New York, GMT -5).
- Review of Full Proposals by ERP: October - November, 2025
- Anticipated Full Proposal Notification Date: Mid-November, 2025
- Grants will be distributed following a fully executed agreement and submission of Final Protocol, documentation of IRB/IEC approval, regulatory approval (if applicable), exemption or waiver.
    - Anticipated approximate project timeframes (suggesting 1 year project timelines): December 2025 – December 2026

How to Submit

Note: Please read this section carefully since applications submitted not following these instructions will not be accepted and will be cancelled.

- Please go to https://www.cybergrants.com/pfizer/QI and sign in. First-time users should click "Create your password". *[Note: there are individual portals for each grant application type. Please be sure to use the URL above.]*

In the application:

- For the question "Are you replying to a Request for Proposal as part of the Competitive Grant Program?" select Yes
- Select the following Competitive Grant Program Name: **2025 ONC US CCF ASCO QI Technology Solutions Biomarker Testing**

Requirements for submission:

- Complete all required sections of the online application and upload your project proposal (see Appendix) in the Full Proposal Submission field.
- If you encounter any technical difficulties with the website, please click the "Technical Questions" link at the bottom of the page.

IMPORTANT: Be advised applications submitted after the due date will not be reviewed.

Questions

- If you encounter any technical difficulties with the website, please click here or the "Technical Questions" link at the bottom of the page in CyberGrants.

- Please click here to view "Frequently Asked Questions" regarding the Competitive Grant Program.
- If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Amanda Stein (Amanda.J.Stein@pfizer.com) and Conquer Cancer Director of Scientific Review, Andrew L. Smith, PhD (andrew.smith@conquer.org) with the subject line "Technology Solutions QI RFP".

Grant Agreements

If your grant is approved, your institution will be required to enter into a written grant agreement with Pfizer. Please **click here** to view the core terms of the agreement.

- Under Pfizer's competitive grant program, modifications to grant agreements will not be reviewed unless a genuine conflict exists between applicable law and the terms of the relevant grant agreement. The applicant is encouraged to share the core terms with counsel for approval before applying.

Mechanism by which Applicants will be Notified:

- All applicants will be notified via email by the dates noted above.
- Applicants may be asked for additional clarification during the review period.

About Pfizer External Research & Grants

Pfizer External Research & Grants (ER&G) supports the global healthcare community's independent initiatives (e.g., research, quality improvement or education) to improve patient outcomes in areas of unmet medical need that are aligned with Pfizer's medical and/or scientific strategies.

Pfizer's ER&G competitive grant program involves a publicly posted Request for Proposal (RFP) that provides details regarding a specific area of interest, sets timelines for review and approval, and uses an expert review panel (ERP) to make final grant decisions. Organizations are invited to submit an application addressing the specific gaps in practice as outlined in the specific RFP.

For all quality improvement grants, the grant requester (and ultimately the grantee) is responsible for the design, implementation, and conduct of the independent initiative supported by the grant. Pfizer must not be involved in any aspect of project development, nor the conduct or monitoring of the quality improvement program.

About Conquer Cancer, the ASCO Foundation

Conquer Cancer®, the ASCO Foundation, funds research for every cancer, every patient, everywhere. Since 1984, its Grants & Awards program has awarded more than $203 million through more than 9,800 grants and awards to improve cancer care and accelerate breakthroughs in clinical and translational oncology research. For more information visit CONQUER.ORG.

Powered by Conquer Cancer, the ASCO Foundation, EveryGrant is a comprehensive grant management service that blends decades of grantmaking success with a global network of experts to help organizations design innovative funding programs—all without navigating the complexities of building them in-house.

References:

1.) https://cdn.bfldr.com/KOIHB2Q3/as/g5jsnp7g2b6m28j67j97smff/2025-ASCO-AI-Principles

2.) https://www.cancer.gov/research/resources/ai-cancer-research/resources-tools

3.) National Comprehensive Cancer Network. NCCN clinical practice guidelines in oncology. Colon cancer. Version 1. 2024

4.) National Comprehensive Cancer Network. NCCN clinical practice guidelines in oncology. Rectal cancer. Version 1. 2024

5.) Lewis MA, Stansfield L, Kelton JM, et al. Biomarker testing trends in patients with metastatic colorectal cancer who live in rural areas and urban clusters in the US. Oncologist. 2023;28(11):e1118–e1122.

6.) Veda N. Giri et al. Germline and Somatic Genomic Testing for Metastatic Prostate Cancer: ASCO Guideline Clinical Insights. *JCO Oncol Pract* **0**, OP-25-00186

7.) NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for prostate cancer. V1.2026

8.) NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for non-small-cell lung cancer. V.2.2023

9.) Schwartzberg, L., Daniel, D., Vaena, D., Slater, D., Staszewski, H., Fang, B., … Ma, E. (2023). Improving biomarker testing in advanced non-small-cell lung cancer and metastatic colorectal cancer: experience from a large community oncology network in the USA. *Future Oncology*, *19*(20), 1397–1414.

10.) https://www.asco.org/practice-patients/quality-improvement/quality-programs

11.) Baily MA, et al., Hastings Cent Rep 2006.

12.) Lynn J, et al., Ann Intern Med 2007.

13.) Centers for Medicare & Medicaid Services, Page Last Modified: 09/10/2024.

14.) Jackson C, Research Quality Manager, Office of Research and Scholarship University of Maryland, Baltimore School of Nursing.

15.) COLUMBIA UNIVERSITY INSTIUTIONAL REVIEW BOARD GUIDANCE FOR THE CLASSIFICATION OF QUALITY IMPROVEMENT ACTIVITIES VERSUS RESEARCH WITH HUMAN SUBJECTS. Effective Date: December 1, 2023.

16.) Newhouse et al., J Nurs Adm. 2006.

Appendix A: Full Proposal Instructions

Applications will be accepted via the online portal listed in the How to Submit section. Combined full proposal documents should be no longer than 10 pages in length (12-point font and 1-inch margins). When uploading your Full Proposal please ensure it addresses the following sections:

Goals and Objectives

- Briefly state the overall goal of the project. Also describe how this goal aligns with the focus of this program to improve the care of patients, as well as the goals of the applicant organization(s).
- List the overall objectives you plan to meet with your project, both in terms of practice improvements and patient outcomes. Objectives should describe the target population as well as the patient outcomes that would define success for the project.

Assessment of Need for the Project

- Please include a quantitative baseline data summary, initial metrics (e.g., quality measures), or a project starting point (please cite data on gap analyses or relevant patient-level data that informs the stated objectives) in your target area. Describe the source and method used to collect the data. Describe how the data was analyzed to determine that a gap existed. If a full analysis has not yet been conducted, please include a description of your plan to obtain this information.

Target Audience

- Describe the primary audience(s) targeted for this project. Also indicate whom you believe will directly benefit from the project outcomes. Describe the overall population size and the size of your sample population.

Project Design and Methods

- Describe the planned project and how it addresses the established need.
- If your methods include educational activities, please describe succinctly the topic(s) and format of those activities.

Innovation

- Explain what measures you have taken to ensure this project idea is original and does not duplicate other projects or materials already developed.
- Describe how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institution or other institutions related to this project.
- Describe how these proposed approaches, if successful, would be sustained long term.

Evaluation and Outcomes

- In terms of the metrics used for the needs assessment, describe how you will determine if the practice gap was addressed for the target group (i.e. how will success be defined). Describe how you expect to collect and analyze the data.
- Quantify the amount of change expected from this project in terms of your target audience.
- Describe how the project outcomes will be broadly disseminated.

Anticipated Project Timeline

- Provide an anticipated timeline for your project including project start/end dates.

Additional Information

- If there is any additional information you believe the ERP should be aware of concerning the importance of this project, please summarize here.

Organization Detail

- Describe the attributes of the institutions / organizations / associations that will support and facilitate the execution of the project and the leadership of the proposed project. Articulate the specific role of each partner in the proposed project.

Budget Detail

- The budget amount requested must be in U.S. dollars (USD).
- While estimating your budget please keep the following items in mind:
    - General organizational running costs such as legal fees, insurance, heating, and lighting etc. should be included in an Institutional Overhead (if required). These costs are not specific to a grant request and therefore should not appear as line items in budgets. However, costs that are specific to the study (e.g., some countries require insurance to be taken out on a per-study basis for clinical research) would be acceptable to be included as line items.
        - The inclusion of overhead costs cannot cause the amount requested to exceed the budget limit set forth in the RFP.
    - Pfizer does not provide funding for capital purchases (infrastructure expenses such as equipment, purchases of software or software licenses, technology or bricks and mortar). Equipment hire/leasing is acceptable and may be included in the project budget.
    - It should be noted that grants awarded through ER&G cannot be used to purchase Pfizer therapeutic agents (prescription or non-prescription).
- Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for independent studies and projects. Please click here for details.