NATIONAL MINORITY QUALITY FORUM

2025 ANNUAL REPORT



www.nmqf.org

PREPARED BY CENTER OF COMMUNICATIONS AND PUBLIC AFFAIRS

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MESSAGE FROM THE CEO

> Evidence is essential, but evidence *alone* cannot transform health outcomes. Progress requires researchers, clinicians, patients, community leaders, policymakers, and private-sector partners to act together.

Gary A. Puckrein, PhD
President & Chief Executive Officer



For more than 25 years, the National Minority Quality Forum has worked to ensure that data does more than document disparities. It must help us understand where health systems are failing, identify who is being left behind, and guide solutions that improve and extend lives.

In 2025, we took the next step in that work.

The theme of this year's National Annual Leadership Summit on Health Disparities—"From Data to Action: Uniting to Advance Evidence-Informed Solutions for Medically Underserved Communities"—captured both the urgency of this moment and the direction of our organization. Evidence is essential, but evidence alone cannot transform health outcomes. Progress requires researchers, clinicians, patients, community leaders, policymakers, and private-sector partners to act together.

Throughout the year, NMQF strengthened the connection between knowledge and implementation. We advanced research designed to detect disease earlier and improve participation in clinical studies. We brought health education, screenings, navigation, and resources directly into communities. We elevated patient and caregiver experience as a source of expertise and translated complex findings into information people can understand and use.

Across our centers and programs, these efforts shared a common purpose: building practical pathways from insight to action.

This report reflects an organization focused not only on identifying what must change, but on developing and expanding models for how that change can occur. Our work is grounded in data, strengthened by community voice, and carried forward through partnerships capable of turning promising ideas into lasting infrastructure.

The challenges remain significant. Shifting policies, declining trust, uneven access to innovation, and persistent gaps in care require sustained cooperation and a willingness to redesign systems around the people they are intended to serve.

We know where the gaps are. We are building the solutions. And together, we are moving from evidence to action.

Sincerely,
Gary A. Puckrein, PhD

LEADERSHIP: EXECUTIVE TEAM



Gary A. Puckrein, PhD

President & Chief Executive Officer



Brandon Garrett

Chief Operating Officer & Chief of Staff



Adjoa Kyerematen, MS

Vice President,
Center for Communications & Public Affairs (COMMS)



Akeia Blue, MPH, MS

President,
Center for Sustainable Health Care Quality & Equity (SHC)



Ernest Smiley, MS, MBA, CISM, CGEIT, CRISC, CDPSE

Chief Information Security Officer

Senior Vice President,
Center for Health Information Strategy & Services (HISS)



Gretchen Wartman

Vice President,
Center for Public Policy (CPP)

Director, Institute for Equity in Health Policy & Practice

Director, National Alliance for Brain Health and Awareness



Jenine Caulkins

Senior Vice President,
Center for Clinical & Social Research (CCSR)



Kelelaye Emiru, MBA

Vice President,
Center for Professional & Strategic Alliances (CPSA)



Laura Lee Hall, PhD

President Emeritus,
Center for Sustainable Health Care Quality & Equity (SHC)

LEADERSHIP: ADVISORY BOARD (1/2)



Chijioke Asomugha, MBA

Founder and Managing Director,
The Inkwell Group



Ulysses Burley III, MD

Founder,
UBtheCURE LLC



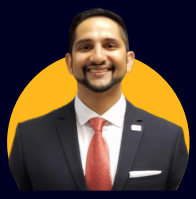
Michael R. Crawford, MBA, MHL

AVP for Strategy and Innovation at
Howard University



Kafui Dzirasa, MD, PhD

Professor,
Duke University Medical Center



Donney John, PharmD

Executive Director,
NOVA ScriptsCentral



Mia Keeys, MA, DrPH(c)

Director,
Federal Affairs, Hologic, Inc



Rosalyn Kumar

Senior Director,
Federal Government Affairs, Abbott



Javier Martinez

Director,
Federal Government Affairs, Davita



Michelle Mathey

Principal,
Capitol Counsel

LEADERSHIP: ADVISORY BOARD (2/2)



Kameron Matthews MD, JD, FAAFP

Chief Health Officer, Cityblock Health



Winta Menghis

Senior Manager, Government Affairs and Health Equity, Amgen



Suzanne Miyamoto, PhD, RN, FAAN

CEO of American Academy of Nursing



Ravyn Miller

Vice President, Portfolio Strategy and Business Development, Medtronic



LaTasha Seliby Perkins, MD

Georgetown University, School of Medicine



Jirair Ratevosian, DrPH, MPH

Candidate for Congress, CA-30



Loren Robinson, MD

Chief Medical Officer and Vice President of Medical Affairs, CHRISTUS Health



Shyrea Thompson

Founder and Principal, IRIS



Brandon Webb

Senior Manager of Public Policy, Amazon



Victor Yang

Chief Government Affairs Officer, NAPCA – National Asian Pacific Center on Aging

CORPORATE ROUNDTABLE

The National Minority Quality Forum (NMQF) convenes a Corporate Roundtable to address critical challenges in the era of health care reform. NMQF's Corporate Roundtable works to advise NMQF with federal, state, and local government through partnerships on events and activities.

In addition to the Annual Summit on Health Disparities, NMQF works with Corporate Roundtable members on a variety of events, including the Annual Legislative Conference Fall Health Braintrust, Community Health Clinics and Festivals, as well as various policy reports and research.



MEMBERS

abbvie
amazon
AMGEN
ardelyx
Baxter
Biogen
BlueCross BlueShield
Bristol Myers Squibb
CHA Catholic Health Association of the United States
CENTENE Corporation
DaVita
Dexcom CONTINUOUS GLUCOSE MONITORING
MERCK
Genentech A Member of the Roche Group
GILEAD
gsk GlaxoSmithKline
HCSC Health Care Service Corporation
HOLOGIC
ES INTEGRATIVE EMERGENCY SERVICES
Jazz Pharmaceuticals
Johnson&Johnson
IPSEN Innovation for patient care
keenova
novo nordisk
Pfizer
PhRMA RESEARCH PROGRESS HOPE
REGENERON
sanofi
Takeda
VERTEX

NATIONAL ANNUAL LEADERSHIP SUMMIT ON HEALTH DISPARITIES

Award Winners



The Honorable Yvette D. Clarke

Congressional Leadership Award



Dr. Michael L. Zollicoffer

Lifetime Achievement Award



The Honorable Kevin Chang

Congressional Staff Leadership Award



The Honorable Deborah H. Telman, JD

Congressional Corporate Leader Award



Alonzo Mourning

Booker T. Washington Award

NATIONAL ANNUAL LEADERSHIP SUMMIT ON HEALTH DISPARITIES

Award Winners



Daphne Ferdinand, PhD, RN

SHC
Health Equity Champion Award



Janice Desir, MD, MPH, CHCQM

CPSA
Outstanding Leadership Award



Gentzon Hall, MD

CPSA
Outstanding Leadership Award



Ruby Harford, PhD, MSN, RN

CPSA
Outstanding Leadership Award

NATIONAL ANNUAL LEADERSHIP SUMMIT ON HEALTH DISPARITIES

From Data to Action: Uniting to Advance Evidence-Informed Solutions for Medically Underserved Communities

April 28-29, 2025
The Conrad Hotel
Washington, DC

The **2025 National Annual Leadership Summit on Health Disparities**, From *Data to Action: Uniting to Advance Evidence-Informed Solutions for Medically Underserved Communities*, brought together **more than 700 clinicians, policymakers, patient advocates, researchers, industry leaders, and community members** to explore evidence-informed solutions for improving health outcomes in medically underserved communities.

Held for the first time at the **Conrad Washington, DC,** the Summit moved into a more modern and expansive setting, with larger continuing medical education (CME) rooms that supported deeper learning, discussion, and collaboration. The 2025 convening also marked the debut of **dedicated NMQF Center booths** and the inaugural **NMQF Poster Exhibit**, creating new opportunities for attendees to engage directly with NMQF teams and explore research, community-based initiatives, and emerging models from across the organization and its partners.

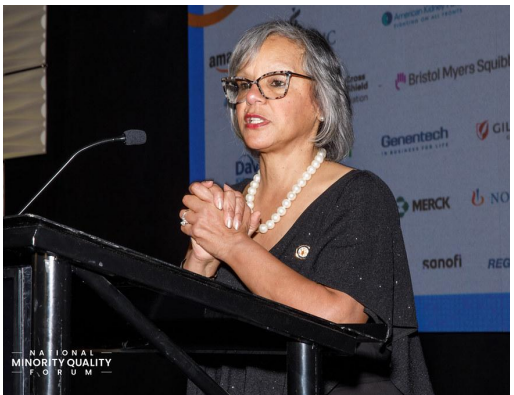
Experts from across the healthcare ecosystem addressed chronic disease, cancer, artificial intelligence, maternal health, clinical trials, and community-driven innovation. NMQF also welcomed its **11th Class of 40 Under 40 Leaders in Minority Health Honorees** and presented **Alonzo Mourning** with the **Booker T. Washington Award** in recognition of his leadership in advancing health and health equity.













NATIONAL ANNUAL LEADERSHIP SUMMIT ON HEALTH DISPARITIES

From Data to Action: Uniting to Advance Evidence-Informed Solutions for Medically Underserved Communities

Beyond the Main Stage: An Expanded Summit Experience

The Conrad's expanded footprint allowed the Summit to function as more than a series of sessions. Throughout the venue, attendees could engage directly with the research, digital tools, and community-based models developed across NMQF—turning time between sessions into opportunities for learning, dialogue, and collaboration.



Evidence in Action

The inaugural Poster Exhibit brought studies, data platforms, and implementation work into an open, accessible setting. Attendees could examine findings at their own pace, speak with the teams behind the work, and connect formal Summit discussions to practical applications in clinical and community settings.





Center Showcases

Dedicated booths made NMQF's full portfolio visible in one place. Teams demonstrated interactive data visualizations, NMQF AI Chat, surveys, and program resources while answering questions and identifying opportunities for collaboration. The exhibit area helped attendees understand not only what each Center leads, but how the Centers connect as One NMQF.



Immersive Community Engagement

COMMS invited attendees to use 360° VR headsets to experience the NMQF Connect health fair in Lumberton, North Carolina—bringing a community activation into the conference environment. SHC paired a live barber demonstration with vaccine education and a rolling video, modeling how trusted messengers and familiar settings can make health information more approachable and create space for candid questions.

40 UNDER 40

Leaders in Minority Health

Since 2016, NMQF has selected 40 minority health leaders under the age of 40 who have been leading the charge to better patient outcomes and build sustainable healthy communities.

These leaders are clinicians, patient advocates, researchers and policymakers. Despite the unexpected healthcare trials during the past couple of years, these 40 leaders persevered in strengthening their communities and reducing health disparities.

> We need the best leaders and real solutions for our most vulnerable communities and the healthcare infrastructure they depend on. I am confident that this class of health leaders will elevate the standard of care for patients and build a strong healthcare infrastructure for our country.
>
> **The Honorable Robin Kelly, PhD**
> Congressional Black Caucus Health Braintrust Chair



40 UNDER 40

Leaders in Minority Health (1/4)



David T. Zhu, BSc

School of Medicine
Virginia Commonwealth University



Bobby Wagner

Washington Commanders
American Heart & Stroke Association



Adrienne Trudell, PharmD

Gilead Sciences



Meagan Thompson, DNP

Advocate Health



Robel Tesfay, MPH

Meharry Medical College



Nupur Shah, MD, FACC

Atlantic Health System



Trinidad Solis, MD, MPH

Department of Public Health
Fresno County



Diana Rubio, MD

Robert Graham Center
Georgetown University Medical Center



Heather Ross BA, CBE

Genentech



Brennan Rhodes-Bratton, DrPH

United States Commission on Civil Rights

40 UNDER 40

Leaders in Minority Health (2/4)



Raghuram Reddy

Herbert Wertheim College of Medicine
Florida International University



Shani Ranell Scott, MD

Albert Einstein-Montefiore College of Medicine



Sujith Ramachandran, PhD

School of Pharmacy
University of Mississippi



Adrianna Nava, PhD, MPA, RN

National Association of Hispanic Nurses



Kia Monique Jones, DrPH, MS

Thrive



Brice Jones, MPH, MBA, PhD

Trinity Health and Rare Melanin



Carlos Irwin A. Oronce, MD, MPH, PhD

David Geffen School of Medicine
University of California Los Angeles



Christle Nwora, MD

School of Medicine
Johns Hopkins University



Ofole Mgbako, MD, MS

Grossman School of Medicine
New York University



Nzinga Lowe

Pygmalion Health

40 UNDER 40

Leaders in Minority Health (3/4)



Nelson Lin, ScB

UC Berkeley – UCSF Joint Medical Program



Jenna Lester, MD

University of California San Francisco



Jasmine Leonard, MPH

CareFirst BlueCross BlueShield



Hussain Lalani, MD, MPH, MSc

Brigham and Women's Hospital
Harvard Medical School



Ariana Hoet, PhD

Kids Mental Health Foundation



Cameron A. Golden, PharmD, BCACP, BC-ADM

Bayhealth



Congressman Maxwell Frost

U.S. House of Representatives



Christopher Ford, MD, FACEP

Emergency Medicine Specialists/Pulse Check
Wisconsin



Marlena C. Fisher, PhD, RN, CNL

National Institutes of Health



Chanee D. Fabius, PhD, MA

Johns Hopkins University

40 UNDER 40

Leaders in Minority Health (4/4)



Zsanai Epps, DrPH, MPH, CHES

Black Women's Health Imperative



Ashley Dedmon, MPH, CHES, DrPH(s)

Living Beyond Breast Cancer



Audrey Davis, LPC, PM-LPC

Cancer Support Community



Martha P. Cramer, J.D.

Attorney, Hooper, Lundy & Bookman, P.C.



Merije T. Chukumerije, MD

Cedars-Sinai Medical Center



Joshua Amit Budhu, MD, MS, MP

Memorial Sloan Kettering Cancer Center



Natasha Bhuyan, MD, FAAFP

Amazon One Medical



Devika Bhushan, MD

Stanford University



Steven Bradley, MD

USF Morsani College of Medicine/Moffitt Cancer Center



Anthony Awojoodu, Ph.D.

DaVita

ONE NMQF: UNITED IN OUR MULTI-GENERATIONAL FIGHT FOR HEALTH ACCESS

Since our inception in 1998, the National Minority Quality Forum (NMQF) has grown to become the nation's largest minority-led healthcare research and education organization. From data to action, NMQF is now organized around a robust managing team and six interconnected centers:

NMQF Offices of the President

The National Minority Quality Forum's (NMQF) Offices of the President serve as a linchpin in the effective management of the organization, providing vital support to ensure the fulfillment of its mission and the success of its Centers.

Center for Clinical & Social Research (CCSR)

Advances equitable healthcare through rigorous scientific exploration, enabling data-driven generation of deep insights on the intersection between clinical and social determinants of health.

Center for Communications and Public Affairs (COMMS)

Promotes health equity through patient education, health communication, health advocacy, stakeholder partnerships, coalition building, and community events that educate on a variety of health topics.

Center for Health Information Strategy and Services (HISS)

Advances health equity through evidence-based, data-driven insights to reduce patient risk, eliminate disparities, and improve the quality of care & outcomes for vulnerable communities via our data warehouse and private cloud.

Center for Professional and Strategic Alliances (CPSA)

Serves as a central hub for professional groups, fostering collaboration, knowledge sharing, and joint initiatives that leverage data-driven insights and innovative strategies to tackle health disparities.

Center for Public Policy (CPP)

Provides leadership to advance changes to policies that impact the health of minoritized populations.

Center for Sustainable Health Care Quality and Equity (SHC)

Promotes healthy communities by working with health systems, faith leaders, barbers/stylists and pharmacists to deliver community interventions.

Why This Matters

Our expansion allows us to work with and support different types of healthcare organizations and leaders — in the delivery of appropriate healthcare to minoritized communities — including historically marginalized, low-income, and rural communities. More broadly, NMQF utilizes science and research to reduce patient risk in our healthcare system.

How We're Making a Difference

- Our mission is to reduce patient risk for hospitalizations, emergency room visits, disabilities, and death while conserving long lives, by assuring every individual has access to optimal care.
- NMQF partners with other healthcare-related organizations to work across a variety of healthcare issues such as public policy, diabetes, cancer, vaccination, heart disease, chronic disease, neuroscience, women's health, and clinical trial inclusivity.

NMQF OFFICES OF THE PRESIDENT

The National Minority Quality Forum's (NMQF) Offices of the President provide the operational backbone, strategic coordination, and funding stewardship that enable NMQF's Centers to function as "One NMQF." In 2025, the Offices supported grant-funded initiatives, institutional operations, and cross-center partnerships that moved trusted community models from planning to measurable action.

Through this work, the Offices of the President help NMQF's Centers scale effective models, reduce patient risk, and conserve high-quality long lives by ensuring people, partnerships, and resources move in the same direction.



Our Offices of the President include:

Operations & Business Management: Manages NMQF's internal infrastructure, including human resources, key advisory and sponsor relationships, administrative processes, and day-to-day organizational efficiency, enabling staff and programs to thrive.

Finance & Grants: Secures, manages, and optimizes NMQF's funding streams through diligent financial stewardship, grants management, and alignment with business operations — ensuring both sustainability and accountability across all Centers.

Special Projects: Leads cross-cutting initiatives and strategic partnerships that fall outside traditional Center-specific workstreams, positioning NMQF to respond to emerging health access challenges with trusted, community-rooted models.

Why This Matters

Durable community impact requires more than strong ideas — it requires infrastructure, stewardship, and trusted partnerships. The Offices of the President strengthen NMQF's ability to secure mission-aligned funding, align resources across Centers, and support targeted initiatives that address gaps broader systems often overlook.

NMQF OFFICES OF THE PRESIDENT

Uniting Our Centers as "One NMQF": Key Projects & Collaborations Index

CANCER		OTP	CCSR	COMMS	HISS	CPSA	CPP	SHC
Flint Cancer Feasibility Assessment — Environmental Justice Readiness	p. 29	✓						✓
Flint Community Engagement — Cancer Screening Outreach and CSSI Readiness	p. 78						✓	✓
CSSI (Cancer Stage Shifting Initiative) — Nationwide Cancer Care Equity Study: ARC Site Readiness	p. 33		✓					✓
CSSI — NMQF Community Health Biobank & Nationwide Cancer Study	p. 34		✓					✓
CSSI — Houston Fifth Ward Registry & Biorepository	p. 35		✓					✓
Support Our Sisters with mBC — Metastatic Breast Cancer Campaign Overview	p. 39			✓				✓
Support Our Sisters with mBC — LEV Patient Network & Story Bank	p. 40			✓				✓
Support Our Sisters with mBC — Patient Voice and Survey Findings	p. 41			✓				✓
Support Our Sisters with mBC — FYHN Patient and Caregiver Stories	p. 43			✓				✓
Support Our Sisters with mBC — Vineyard Vibes & Breast Health ConvHERsations Activation	p. 48			✓	✓			✓
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NMQF OFFICES OF THE PRESIDENT

Uniting Our Centers as "One NMQF": Key Projects & Collaborations Index

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NMQF OFFICES OF THE PRESIDENT

Special Projects: Building Trusted Pathways to Research & Prevention

Flint Cancer Feasibility Assessment

Laying the Groundwork for Environmental Justice

In Collaboration with MDHHS

The Flint Cancer Feasibility Assessment extends NMQF's community-centered prevention model into a city shaped by environmental harm. In partnership with MDHHS, the project examines cancer screening infrastructure and future study opportunities while keeping community trust at the center.



2025 Highlights:

- Advanced an Office-led model for environmental justice and community-based cancer prevention.
- Strengthened MDHHS partnership as the project's primary government and funding partner.
- Positioned NMQF to connect community engagement, screening access, and environmental cancer research in Flint.

Why It Matters

By centering community voice before study design, Flint creates a replicable framework for restoring trust and translating environmental justice concerns into prevention infrastructure.

National Lupus Outreach and Clinical Trial Education Program

Trusted Messengers in Action

With Support from OMH U.S. Department of Health and Human Services Office of Minority Health

NMQF's lupus education and clinical trial program translated trusted community relationships into research readiness. In Year 2, the program moved beyond awareness-building to train Health Champions, strengthen clinician pathways, and expand culturally responsive lupus education across the DMV.

2025 Highlights:

- Recruited 6 Faith Health Alliance churches and 14 barbers/stylists as Health Champions, meeting the 20 Health Champion enrollment target.
- Health Champions reached approximately 1,100 community members; FHA churches engaged nearly 2,000 individuals.
- Church-based education improved lupus knowledge from 60% to 80%.
- Beyond Lupus generated 157,659 TV impressions and fielded a 5,000-person survey of Black adults in the DMV.

Why It Matters

By pairing lived experience with clinical trial education, this model builds trust, strengthens research readiness, and helps communities historically excluded from research shape the pathway forward.

NMQF OFFICES OF THE PRESIDENT

Transforming Health: Our Journey Forward

The Office of the President provided the operational, financial, and grants-management infrastructure supporting cross-center work in FY 2025. For the fiscal year ended September 30, 2025, NMQF recorded **total revenue of $6,042,834**, comprising **$5,453,035 in program income** and **$589,799 in net special events income**.

That infrastructure supported flagship work such as the HHS Office of Minority Health-funded National Lupus Outreach and Clinical Trial Education Program, the MDHHS-supported Flint Cancer Feasibility Assessment, Eli Lilly's Health Affairs Blog editorial partnership, and Cytokinetics corporate giving. Together, these relationships reflect NMQF's value as a trusted platform for funders seeking measurable, community-grounded models that move from insight to implementation.



CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

The Center for Clinical and Social Research (CCSR) builds the research infrastructure needed to bring evidence generation closer to communities historically underrepresented in clinical and public health research. In 2025, CCSR's work focused on clinical trial readiness, community-based cancer research, longitudinal pandemic insight, lupus investigator development, and real-world evidence.

CCSR's primary activities in 2025 centered on four key programs:

ARC: The Alliance for Representative Clinical Trials is a national network of community-based clinicians — including clinicians at Federally Qualified Health Centers (FQHCs) and community clinics — being trained and supported to serve as Principal Investigators and clinical trial sites.

CSSI: The Cancer Stage Shifting Initiative (CSSI) embeds early-detection screening and community-driven biobanking within medically underserved cancer care communities to shift diagnoses to earlier, more treatable stages — built on a national registry and precision research framework.

MRCIS: The Minority and Rural Coronavirus Insights Study (MRCIS) is a five-year prospective study integrating participant surveys, electronic medical records, and biobanked specimens to examine SARS-CoV-2 infection, severity, outcomes, and social drivers.

HDEPs: CCSR's Healthcare Data Equity Projects (HDEPs) use large-scale healthcare data, including CMS claims data, to generate real-world evidence across therapeutic areas and identify disparities in disease burden, utilization, access, and outcomes.

Why This Matters

Representative research requires more than inclusive messaging. It requires trusted clinicians, prepared sites, community-rooted data infrastructure, and study models that allow evidence generation to happen where patient risk and access gaps are greatest.

CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

ARC: Building Access through Representative Clinical Trials

What ARC Does

Equipping trusted community clinicians to lead clinical trials and expand research access where it is needed most.

The Alliance for Representative Clinical Trials (ARC) equips community-based clinicians — including clinicians at Federally Qualified Health Centers (FQHCs) and community clinics — to become Principal Investigators and clinical trial hosts.

Through training, infrastructure, and site support, ARC brings high-quality research opportunities into communities historically underrepresented in clinical trials.

How ARC Advances Access

Principal Investigator Institute:

Provides a 13-hour training pathway for community clinicians and research staff, delivered by a leading global CRO, with CME/CNE eligibility.

Site Readiness & Capacity Building:

Uses feasibility assessments to identify equipment, personnel, workflow, and operational needs to prepare practices as research sites.

Good Clinical Practice Certification:

Supports Good Clinical Practice and Human Subjects Research training through the CITI Program, strengthening ethics, compliance, and trial readiness.

2025 Impact at a Glance

- **3 new sites** joined ARC in 2025.
- **6 research personnel** across newly added sites were trained through the PI Institute.
- **18 total sites** are now in the ARC program.
- **56 research personnel** have been trained to date.
- **10 community-based clinicians** completed training and participated in site feasibility assessment through HHS/FDA support.
- **ARC's FDA outcomes manuscript** was accepted by *Health Equity*, with publication pending. — which captured outcomes from FDA-supported work focused on preparing community-based clinicians and practices to serve as research investigators and clinical trial sites.

Therapeutic Areas Represented

ARC clinicians served across high-burden health areas in 2025:

Cancer, cardiovascular disease, lupus, infectious disease, cardiology, cardiac electrophysiology, OB/GYN, pediatrics, internal medicine, geriatrics, primary care, rheumatology, emergency medicine, pharmacy, and cardiometabolic care.



Key Supporters

MERCK · EXACT SCIENCES · FDA U.S. FOOD & DRUG ADMINISTRATION · OMH

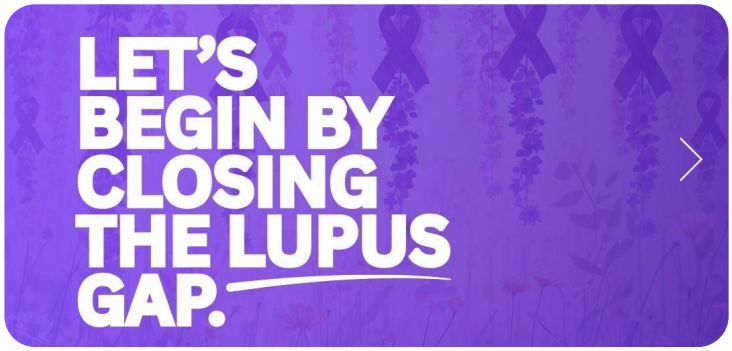
CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

ARC: Building Community-Based Investigator Pathways

National Lupus Outreach and Clinical Trial Education Program

The National Lupus Outreach and Clinical Trial Education Program is led by CCSR and mobilizes multiple NMQF Centers with support from the HHS Office of Minority Health. The program addresses a critical access challenge: lupus disproportionately affects Black communities, yet clinical trial awareness, trust, and participation remain limited.

In 2025, CCSR supported the program through ARC's clinical research infrastructure — helping build pathways for rheumatologists and lupus-treating specialists to become more connected to Principal Investigator training, trial-ready site development, and representative lupus research.



2025 Progress:

- Enrolled **2 community clinicians** in ARC Principal Investigator training through PPD/Thermo Fisher Scientific SiteCoach™.
- Conducted outreach to approximately **100 rheumatologists** in the DMV, with **50 email contacts** identified and multiple responses received.
- **Expanded outreach** beyond rheumatology to lupus-treating specialists, including internists and nephrologists.
- Established an MOU with **Lupus Therapeutics** to support trial-ready site identification and PI recruitment.
- Maintained a **10-member advisory board** to guide program implementation and clinician engagement.

Impact Spotlight

CANCER STAGE SHIFTING INITIATIVE

Nationwide Cancer Care Equity Study

The Cancer Stage Shifting Initiative (CSSI) is NMQF's effort to move cancer detection upstream in communities where cancer is too often found late, where environmental exposure concerns are high, and where traditional research infrastructure has been limited.

The study model combines registry enrollment, biospecimen collection, EHR-linked data, participant questionnaires, environmental exposure context, and longitudinal follow-up. ARC supports this broader model by strengthening the clinician and site-readiness infrastructure needed to make community-based cancer research possible.

In 2025, CSSI's Houston work generated early baseline data from the initiative's inaugural environmental justice study site, while ARC infrastructure supported the longer-term goal of preparing community-based clinicians and practices to participate in sponsor-ready research.



CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

CSSI: Earlier Detection through Community-Driven Cancer Research

What CSSI Does

CANCER STAGE SHIFTING INITIATIVE

Shifting cancer detection upstream by embedding screening and biobanking in underserved communities.

The Cancer Stage Shifting Initiative (CSSI) builds community-based research infrastructure to help shift cancer detection earlier in medically underserved and environmentally burdened communities.

CSSI connects registry enrollment, biospecimen collection, EHR-linked data, participant surveys, environmental exposure context, and long-term follow-up to improve pathways from screening to care.

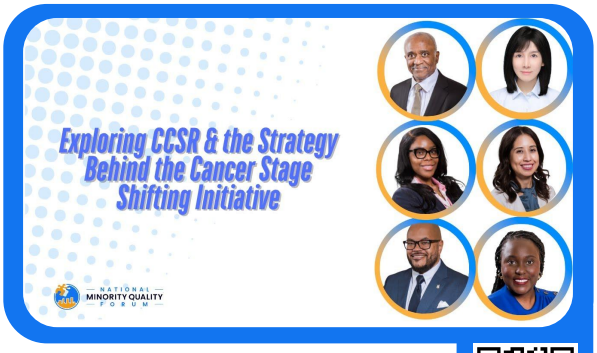
2025 Impact at a Glance

- **214 participants** enrolled in the Houston Fifth Ward CSSI registry.
- **188 participants** of the total 214 participants enrolled in the Houston biorepository arm.
- **Established CSSI's inaugural environmental justice registry and biorepository site** in Houston's Fifth Ward.
- **Built a study model** designed to enroll 100,000 adults ages 35+ across 10–20 clinical sites, with annual follow up for the first five years, followed by an additional five year long term follow up.
- **Captured a Houston cohort** that was 94% non-Hispanic Black, 59% female, with an average neighborhood residence of 36 years.
- **Strengthened Grace Clinic's study-site infrastructure** through lab setup, electronic data capture, specimen workflows, secure data systems, and 40 hours of staff training.

NMQF Community Health Biobank & Nationwide Cancer Study

In collaboration with Carolina BioOncology Institute and BioCytics

The NMQF Community Health Biobank is broader research infrastructure that supports CSSI and other high-burden disease studies by collecting biospecimens, clinical data, social drivers, and environmental exposure context from communities historically underrepresented in research.



Scan for webinar

Achievements include:

Houston Baseline Cohort: Created an early baseline cohort for environmental justice cancer research in Houston's Fifth Ward.

Community-Rooted Data: Generated data from residents with long neighborhood tenure, with cancer identified as the top reported health concern.

Study-Site Infrastructure: Supported Grace Clinic's transformation into a community-based research site.

Manuscript Development: Prepared Houston baseline data for manuscript development; publication status remains pending.

CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

CSSI: Early Detection Access and Community-Driven Cancer Research

Houston's Fifth Ward: Establishing the First CSSI Registry and Biorepository Site

In 2025, CSSI advanced its inaugural registry and biorepository work in **Houston's Fifth Ward** — an environmental justice community and state-designated cancer cluster following the decades of groundwater contamination and the 1974 explosion linked to unsafe disposal of wood-preserving chemicals by Union Pacific Railroad company.





The study enrolled **214 participants** in the registry, **188 participants** of which are enrolled in the biorepository arm, creating an early baseline dataset for understanding cancer risk, screening patterns, environmental exposures, and access barriers in a community historically underrepresented in biomedical research.

The Houston cohort reflected CSSI's core purpose: building research with communities most affected by environmental and access-related cancer risk. Participants were **94% non-Hispanic Black**, **59% female**, and had an **average neighborhood residence of 36 years**, grounding the study in lived community experience and long-term local exposure context.

Building Local Study Infrastructure

with GRACE CLINIC Walking in Grace Can Save Your Life *in Houston*



Grace Clinic served as the local clinical partner helping move CSSI from planning into community-based implementation.

With CCSR support, Grace Clinic strengthened the operational infrastructure needed to function as a research-ready community site — including laboratory setup, electronic data capture, specimen collection workflows, secure data systems, and 40 hours of staff training. These improvements helped the site support participant enrollment, biospecimen collection, standardized data capture, and long-term follow-up.

Why It Matters

Houston demonstrates CSSI's model in practice: pairing trusted local care infrastructure with CCSR research support to generate community-rooted data that can guide future screening, follow-up, and earlier detection strategies.

CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

MRCIS: Equity through Inclusive Longitudinal Pandemic Insight

What MRCIS Does

A longitudinal research platform illuminating how pandemics compound existing disparities.

The Minority and Rural Coronavirus Insights Study (MRCIS) is a multi-sponsor, community-based research platform investigating SARS-CoV-2 infection and outcomes.

Conducted over five years, MRCIS integrates self-reported biannual survey data, electronic medical records, and biobanked specimens to better understand infection, severity, long-term risk, and social drivers.

How MRCIS Advances Access

Community-Based Research Infrastructure:

Strengthens site capacity, staffing, and operational support for decentralized public health research.

Biobank & Data Integration:

Combines serum, whole blood, routine laboratory measures, EHR data, demographics, and social drivers of health.

Longitudinal Insight:

Maintains a data platform that supports continued analysis of COVID-19 susceptibility, disease severity, outcomes, and post-COVID risk.

2025 Impact at a Glance

- 3,669 participant samples maintained for future analysis.
- Serum and whole blood specimens collected and biobanked.
- Routine laboratory measures collected, including Hemoglobin A1c, CMP, CBC with differential, Vitamin D, and Lipid Panels.
- 3,511 total baseline enrollment.
- Biannual survey administered across California, Louisiana, and Florida.
- Participant follow-up to be continued through April 2026.

Scan for report

COVID-19 Disparities Research: Published in Population Health Management, the MRCIS baseline report examined COVID-19 infection patterns among minority and rural communities enrolled through five FQHC sites across Florida, California, Illinois, Ohio, and Louisiana.

MRCIS continued to generate peer-reviewed evidence through analysis of its longitudinal cohort and serum biobank. A published MRCIS analysis examined SARS-CoV-2 antibody assay performance among underserved populations, reinforcing the value of community-based biobanking and longitudinal data infrastructure for understanding pandemic-related disparities.

Sponsors & Collaborators

CENTENE Corporation · Roche · Quest Diagnostics

CENTER FOR CLINICAL AND SOCIAL RESEARCH (CCSR)

HDEPs: Access through Actionable Claims-Based Evidence

What HDEPs Does

Turning population-scale data into evidence that helps close care gaps.

CCSR's Healthcare Data Equity Projects (HDEPs) are CCSR's real-world evidence engine, using large-scale healthcare data — particularly CMS claims data — to identify disparities in disease burden, health outcomes, utilization, and access across therapeutic areas.

How HDEPs Advances Access

Policy-Relevant Data Insights:

Equips stakeholders with timely evidence on where disparities persist and how interventions can be targeted.

Health Services Research:

Examines utilization, outcomes, mortality risk, and access patterns across patient populations and therapeutic areas.

Evidence for Investment:

Helps funders, partners, and policymakers understand where targeted investment and structural change are needed.

2025 Impact at a Glance

In 2025, CCSR advanced three major health access studies through key collaborations with Merck and the Association of Black Cardiologists (ABC), alongside an additional claims-based atrial fibrillation mortality analysis:

Pulmonary Hypertension Care Utilization Study

In collaboration with Merck and ABC, CCSR used Medicare and Medicaid claims data to examine racial, ethnic, and access-related disparities in hospitalizations, emergency department visits, and mortality among pulmonary hypertension patients — generating evidence to inform earlier diagnosis, specialist access, and care coordination strategies.

Cardiology Physician Workforce Study

In collaboration with Merck and ABC, CCSR assessed the racial, ethnic, and gender composition of the U.S. cardiology workforce relative to population needs. The analysis compared 271 ABC-affiliated physicians with 25,726 non-ABC peers, highlighting workforce underrepresentation and the role of minority-serving cardiology providers.

AF Ablation Mortality Study

CCSR advanced a claims-based analysis evaluating regional and racial differences in 30-day mortality following atrial fibrillation catheter ablation among Medicare fee-for-service patients. The study uses real-world data to identify post-procedure mortality patterns that may not be fully visible in clinical trials, registries, or specialty-center datasets.

Key Sponsors

MERCK ABC

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

Communities of color continue to face barriers to timely, trusted, and actionable health information. COMMS helps NMQF address those barriers by translating research, patient experience, public health guidance, and community insight into culturally responsive communications, public education, storytelling, and engagement.

In 2025, the Center for Communications and Public Affairs strengthened NMQF's ability to connect with historically underserved communities, amplify patient and caregiver voices, shape public narratives, and move health information from awareness to action.

COMMS organized this work through four core platforms:

Lift Every Voice (LEV) Patient Network: Lift Every Voice Patient Network leverages the lived experience and voices of patients and caregivers to co-create culturally tailored education materials, amplify peer stories, support campaign development, and strengthen patient-centered communication.

For Your Health News (FYHN): For Your Health News operates as NMQF's digital health news, storytelling, podcast/vodcast, and newsletter platform, curating culturally relevant health content, expert perspectives, patient stories, and practical wellness information.

NMQF Connect: A hyper-local patient and community engagement program that brings health education, screenings, patient navigation resources, and trusted partners directly into underserved neighborhoods through health pop-ups, wellness events, cultural activations, and community partnerships.

Public Affairs: Public Affairs shapes strategic issue messaging, stakeholder education, media outreach, social listening, campaign reporting, and public-facing coordination across NMQF's campaigns and centers.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

From Awareness to Action: 2025 Campaign Ecosystem

In 2025, COMMS helped organize NMQF's public-facing campaigns into a connected communications ecosystem — pairing strategic messaging, patient voice, community activation, digital storytelling, media monitoring, and stakeholder education to move priority health issues from awareness to action.

Rather than operating as standalone campaigns, these efforts drew on COMMS' four core platforms: **NMQF Connect** for place-based engagement, **LEV** for patient and caregiver voice, **FYHN** for searchable public education and storytelling, and **Public Affairs** for issue framing, stakeholder outreach, campaign reporting, and message coordination.

Support Our Sisters with mBC

Advanced patient education, peer support, storytelling, and community engagement for Black and Hispanic/Latina women living with metastatic breast cancer and chronic conditions.

Every Child Leaves Protected

Advanced parent-centered education, stakeholder messaging, and public awareness around infant RSV prevention, immunization access, trusted terminology, and community-to-clinic communication.



Auntie Rona

Used humor, character-driven storytelling, social listening, and public education to cut through COVID-19 fatigue and misinformation while helping communities access trusted vaccine and prevention information.

Talk About Alzheimer's

Supported culturally relevant Alzheimer's awareness, caregiver engagement, early detection messaging, and storytelling to reduce stigma and increase understanding.

Health Not Hype

Supported patient education and public communication around GLP-1 medicines, obesity treatment access, patient safety, and risks related to compounded products.

National Minority Health Month

Served as a broad public education platform for prevention, early detection, chronic disease management, and community capacity-building.

Beyond Lupus

Supported lupus awareness, patient empowerment, clinical trial education, and culturally tailored resources as part of the National Lupus Outreach and Clinical Trial Education Program, led by NMQF's Offices of the President.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

Lift Every Voice: Empowering Patients Through Education, Storytelling, and Research Access

LEV Patient Networks and Story Banks

Sharing Stories. Driving Change. — Harnessing patient voice to transform education, advocacy, and research equity.

Lift Every Voice leverages the lived experience and voices of patients and caregivers to co-create culturally tailored education materials, amplify peer stories, and strengthen patient-centered communication. LEV helps NMQF build campaigns that reflect real patient priorities, communication gaps, and care experiences.

Patient Voice as Campaign Infrastructure

In 2025, LEV matured from a patient storytelling platform into a broader campaign infrastructure for patient insight, peer education, and co-created communication. Across COMMS campaigns, LEV helped move lived experience upstream — informing message development, story collection, community prompts, FYHN articles, Facebook group engagement, video concepts, and patient-facing resources before campaigns reached the public.

This progress strengthened NMQF's ability to develop campaigns with patients and caregivers, not simply about them. By centering lived experience early in the communications process, LEV helped make campaign education more relevant, emotionally grounded, and responsive to the real questions patients, parents, caregivers, and communities bring into healthcare decisions.

2025 Impact at a Glance

- Support Our Sisters with mBC reached 1.8 million estimated impressions and 1.2 million estimated reach through influencer engagement.
- The mBC campaign generated 217 posts and 78,000 engagements.
- Campaign content generated 1.4 million Instagram views, 60,000 Instagram likes, 131,000 TikTok views, and 10,000 TikTok likes.
- A 2025 breast cancer survey captured insights from 154 Black/African American and Hispanic/Latina women diagnosed with breast cancer, including 50.9% diagnosed with metastatic breast cancer.
- LEV extended patient and caregiver voice across Support Our Sisters with mBC, Auntie Rona, Beyond Lupus, RSV Health Equity, and FYHN storytelling.



Scan for info

Patient Networks & Story Banks

Lift Every Voice creates trusted, condition-specific communities where patients and caregivers can connect, share lived experience, and help shape culturally relevant education, research, and advocacy.

LEV's patient networks and story banks span:

- Lupus
- Metastatic Breast Cancer (mBC)
- RSV
- Women's Health
- Alzheimer's
- ATTR-CM
- COVID-19
- Hyperlipidemia
- Kidney Disease

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

Lift Every Voice: Empowering Patients Through Education, Storytelling, and Research Access

Lived Experience in Action

In 2025, LEV supported COMMS campaigns by bringing patient, caregiver, and community experience into campaigns — ensuring they were not only accurate, but human, culturally responsive, and grounded in the decisions people face every day.



Support Our Sisters with mBC

Support Our Sisters became the clearest example of LEV's role in 2025. Survey findings helped identify the lived realities of Black and Hispanic/Latina women managing metastatic breast cancer alongside chronic conditions. Among respondents, 44.3% reported mental health concerns, 40.6% reported high blood pressure, and 34.4% reported diabetes. A total of 68% reported one or two chronic conditions in addition to breast cancer.

These insights shaped campaign priorities around medication management, chronic disease burden, communication gaps, emotional wellness, and shared decision-making. They also informed patient-facing resources, peer education, story collection, FYHN articles, Facebook group engagement, and community activations.

Every Child Leaves Protected: RSV Prevention Access

LEV contributed to RSV planning through patient stories, video testimonials, and "digital tribe" concepts for Black and Hispanic mothers. This positioned peer-to-peer dialogue and authentic parent stories as a way to counter misinformation, support provider conversations, and build trust around RSV protection.



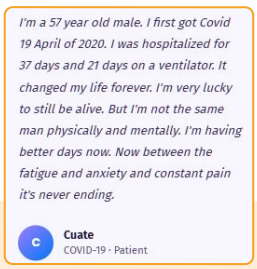
Talk About Alzheimer's

LEV supported the patient and caregiver voice needed to make Alzheimer's and brain health easier to discuss. The campaign promoted lived experience, creating opportunities to reduce stigma in favor of empathy, support caregiver engagement, encourage actionable early detection conversations, and frame brain health through trusted community communication.



Beyond Lupus

LEV supported Beyond Lupus by reinforcing patient empowerment, story sharing, and clinical trial education for people living with lupus. As part of the National Lupus Outreach and Clinical Trial Education Program, led by NMQF's Offices of the President, the campaign used culturally tailored resources to help patients better understand symptoms, diagnosis, family history, fertility, clinical trial participation, and conversations with care teams.



Auntie Rona

LEV helped extend Auntie Rona beyond character-driven COVID-19 messaging by connecting the campaign to lived experience, patient-story pathways, and FYHN public education. This gave the misinformation response a human layer, not just a social media voice.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

FYHN: Delivering Culturally Resonant Health News & Expert Voices

What FYHN Does

Your Health. Your News. Your Power. — Elevating trusted health stories and expert voices for communities of color.

For Your Health News operates as both a digital health news platform and podcast/vodcast series, curating culturally relevant health content, expert insights, patient perspectives, and wellness guidance. By spotlighting research, community voices, campaigns, and care experiences, FYHN fills critical information gaps and supports health literacy.

2025 Impact at a Glance

- FYHN organic Google search visibility grew in early 2025 to regularly exceeding 2,000 daily organic impressions.
- FYHN sustained elevated organic search performance for more than seven consecutive months.
- Organic clicks grew from almost none to regular daily activity, with peak days reaching 17 clicks.
- **For Your Health News weekly newsletter now reaches more than 25,000 subscribers.**
- FYHN strengthened its role as a cross-center platform for campaign content, patient stories, event visibility, policy storytelling, and public education.



Organic Search and Media Growth

FYHN's organic search visibility accelerated across 2025 and is expected to continue into 2026. Content began appearing on or near page one for relevant health topics, including some top 10 placements. FYHN stories also began surfacing in Google AI-generated summaries and Google Images, expanding how audiences discover NMQF's public education content.



Scan for more

Verified Media Source

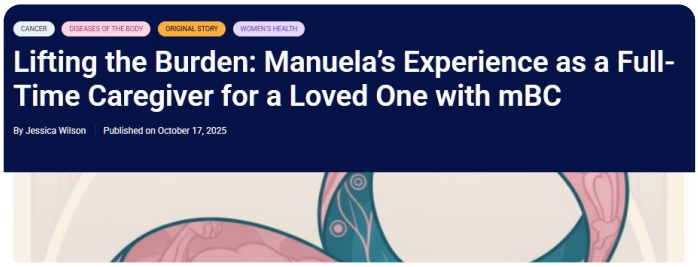
On September 2, 2025, FYHN became a verified media source within a major global media monitoring and news database, and began accepting press releases. This milestone established a new pathway for journalists, institutions, and partners to find trusted health announcements, while strengthening FYHN's visibility within media-monitoring and news-discovery workflows.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

FYHN: Delivering Culturally Resonant Health News & Expert Voices

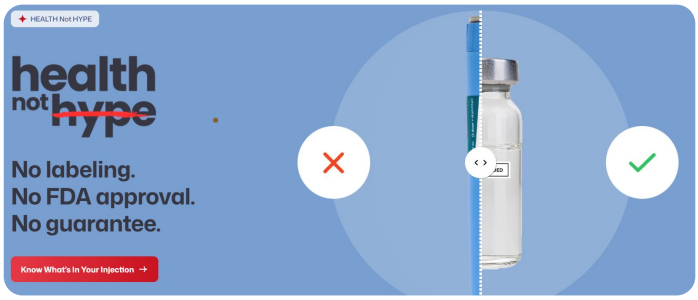
Turning Campaigns into Searchable Public Education

In 2025, FYHN served as COMMS' media and distribution platform — the part of the campaign ecosystem that made NMQF's stories, campaigns, and public education easier to find, understand, and share.



Support Our Sisters with mBC

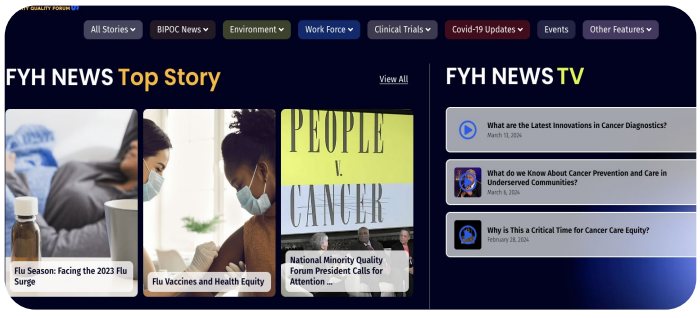
FYHN helped translate the Support Our Sisters campaign into patient-centered storytelling, including metastatic breast cancer caregiver and patient story development. Stories such as Maria's Journey of Resilience and Advocacy helped connect campaign themes to real experiences with chronic disease, lymphedema awareness, medication management, communication gaps, and the need for stronger support.



Health Not Hype

FYHN also supported campaign-driven public education around GLP-1 medications, patient safety, obesity treatment access, and risks related to compounded products. This showed how FYHN can connect public affairs priorities, patient education, and timely health policy storytelling.





Auntie Rona

FYHN provided a public education pathway for Auntie Rona, helping extend COVID-19 awareness and misinformation response beyond social-first character content into broader health communication.

Cross-Campaign Visibility

FYHN amplified COMMS campaign work across lupus, RSV, Alzheimer's and caregiver support, National Minority Health Month, clinical trial education, cancer, chronic disease, and community health priorities.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

FYHN: Delivering Culturally Resonant Health News & Expert Voices

Taking Health Storytelling Live

In 2025, For Your Health News expanded beyond its digital newsroom, newsletter, and podcast to capture timely conversations where health leaders and communities were already gathering. Through live broadcasting and on-site interviews, FYHN transformed major events into lasting, shareable health content.



40 Under 40: Voices Beyond the Stage

At the 2025 NMQF National Annual Leadership Summit on Health Disparities, FYHN recorded a seven-episode interview series featuring 2025 honorees and members of NMQF's broader 40 Under 40 network.

Released from May through June, the conversations explored nursing and Latino health leadership, early disease detection, kidney health and prevention, representation and chronic stress, investment in community-centered care, health literacy and language access, and patient-centered oncology.

The series extended the leaders' visibility beyond the awards program—giving them an evergreen platform to share their expertise, personal journeys, and practical ideas with broader audiences.



GLOBAL BLACK ECONOMIC FORUM

Scan for video

First Live Broadcast at Essence Festival

On July 4–5, FYHN produced its first live video podcast to **7,000 streaming viewers** and approximately **70 in-person attendees** from The Exchange at the 2025 Essence Festival of Culture in New Orleans, in collaboration with the Global Black Economic Forum.

The broadcast brought clinicians, advocates, public leaders, and cultural voices—including Dr. Joel Bervell, Dr. Mimi Sanders, Esosa Osa, Master P, and U.S. Representative Troy Carter—into real-time conversations about health misinformation, prevention, trust, culture, and access.

The interviews continued to reach audiences through FYH.News and NMQF's YouTube channel, extending the value of the activation beyond the festival.



Scan for video

Amplifying Trusted Voices Through Event-Based Health Journalism

FYHN demonstrated a scalable model for event-based health journalism: elevate trusted voices in the room, engage audiences in real time, and transform those conversations into searchable, shareable public education that continues working long after an event ends.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

Public Affairs: Coordinating Strategic Messaging, Campaigns, and Stakeholder Engagement

How Public Affairs Drives Access

Mobilizing Policy and Advocacy for Health Equity — Advancing legislation, coalitions, and campaigns that close care gaps.

Public Affairs shapes strategic issue messaging, stakeholder education, media outreach, campaign reporting, social listening, and public-facing coordination. Through message strategy, campaign infrastructure, and partner-facing communications, Public Affairs helps NMQF connect health priorities with audiences that can act on them.

Campaign Intelligence and Message Performance

In 2025, Public Affairs strengthened COMMS' ability to move from campaign execution to campaign intelligence.

Through social listening, media monitoring, stakeholder-ready messaging, and performance reporting, Public Affairs helped NMQF understand how health narratives were landing with audiences, identify misinformation patterns, refine public education strategies, and align messaging across web, social, FYHN, LEV, and community engagement channels.

This created a stronger feedback loop for COMMS: campaigns were not only launched and promoted, but monitored, interpreted, and translated into clearer strategy, stronger partner reporting, and more coordinated public engagement.



2025 Impact at a Glance

- Auntie Rona generated more than 1.2 million impressions, 25,000+ website views, and 7,521 users.
- Meltwater monitoring captured 71 Auntie Rona campaign mentions and 1.2 million total reach from April 21 to November 7, 2025.
- Auntie Rona campaign sentiment was 66% neutral, 28% positive, and 6% negative.
- NMQF's vaccine conversation analysis found 421,000 total vaccine mentions on X/Twitter and 80% negative vaccine mentions across analyzed platforms.
- Public Affairs supported COMMS campaign strategy, stakeholder education, media monitoring, issue framing, reporting, and message coordination across COVID-19, lupus, RSV, Alzheimer's and caregiver support, National Minority Health Month, metastatic breast cancer, GLP-1 patient safety and Medicaid coverage, and broader public health priorities.



CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

Public Affairs: Coordinating Strategic Messaging, Campaigns, and Stakeholder Engagement

Message Strategy, Reporting, and Public Action

In 2025, Public Affairs served as COMMS' strategy and coordination platform — the part of the campaign ecosystem responsible for issue framing, stakeholder-ready messaging, media monitoring, campaign reporting, and cross-platform alignment.

Auntie Rona

Pfizer

Grounded in ***COVID-19 Vaccine Sentiment in the Digital Age***, which found a highly negative online vaccine conversation, Auntie Rona used humor as a strategic entry point to cut through COVID-19 fatigue and reach the "movable middle." Public Affairs translated sentiment insights into character-driven storytelling, vaccine education, FAQs, misinformation resources, message strategy, reporting, and public education infrastructure.

Evidence Base: *COVID-19 Vaccine Sentiment in the Digital Age* analyzed 421,000 vaccine-related mentions on X/Twitter and helped explain why a humor-based, culturally familiar campaign voice was needed to counter fatigue, skepticism, and misinformation.



Scan for report



Scan for report

Support Our Sisters with mBC

Pfizer

Public Affairs supported the campaign's public narrative, press materials, partner-facing positioning, and message coordination around the needs of Black and Hispanic/Latina women living with metastatic breast cancer and chronic disease.

Get Involved. Save Lives.

Tell policymakers that vaccine for children coverage of the RSV immunization is needed to ensure equitable access for all!



Every Child Leaves Protected

sanofi

The ***RSV Health Access Action Report*** reframed infant RSV prevention as an access issue: too many newborns were missing protection before discharge, while many families faced barriers to follow-up care. Public Affairs translated that gap into parent-centered messaging, stakeholder education, and a clear action frame for inpatient RSV immunization before discharge.

Evidence Base: The report identified missed birth-hospital immunization opportunities and follow-up barriers, shaping NMQF's "every child leaves protected" message.

Beyond Lupus

OMH

For Beyond Lupus and the National Lupus Outreach and Clinical Trial Education Program, led by NMQF's Offices of the President, Public Affairs supported public-facing campaign translation: clinical trial education, patient-facing messaging, toolkit promotion, provider-facing materials, and communications that made research participation easier to understand.

National Minority Health Month

Public Affairs helped connect NMQF's broader access priorities to timely public education, awareness-building, and community-facing communications. The campaign served as a platform to elevate prevention, early detection, chronic disease management, and trusted health information across NMQF's audiences, while reinforcing COMMS' role in translating national observances into practical, culturally responsive engagement.

CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

NMQF Connect: Expanding Community Access and Engagement in Trusted Local Spaces

What NMQF Connect Does

NMQF connect

Access that Reaches You! — Delivering health equity through hyper-local screenings, education, and navigation.

NMQF Connect brings health education, screenings, and patient navigation services directly into underserved neighborhoods. By meeting people where they are, Connect builds trust, delivers preventive health resources, and guides residents toward ongoing care.



From Health Pop-Ups to Place-Based Access Infrastructure

In 2025, NMQF Connect advanced from a community engagement model into a more defined place-based access platform for COMMS campaigns. Through wellness events, cultural activations, senior engagement, breast health programming, and local partner coordination, Connect helped translate campaign messages into real-world touchpoints where residents could ask questions, receive screenings, access education, and connect to follow-up resources.

This progress strengthened COMMS' ability to pair culturally responsive messaging with practical access points. Rather than relying only on digital education or awareness campaigns, NMQF Connect created opportunities for campaigns to show up in community-rooted spaces with services, trusted messengers, and pathways to care.

2025 Impact at a Glance

- Activated NMQF Connect in New Orleans through the NOLA Wellness Festival at Xavier University of Louisiana, designed to reach 250–350 community members.
- Built the New Orleans activation around direct access points: COVID-19 education, vaccinations, blood pressure, glucose, BMI, breast, vision, and hearing screenings, mental health resources, autism awareness, chronic disease education, primary care referrals, and health passports.
- Coordinated a senior and caregiver COVID-19 education and vaccine confidence session for 12–15 participants to address misinformation in a trusted community setting.
- Extended COMMS campaign work into culturally relevant spaces, including Essence Fest, Lumbee/Lumberton engagement, and Vineyard Vibes & Breast Health ConvHERsations.
- Used NMQF Connect as the place-based arm of COMMS campaigns, helping move public education from digital content into real-world access, screening, navigation, and follow-up pathways.



CENTER FOR COMMUNICATIONS AND PUBLIC AFFAIRS (COMMS)

NMQF Connect: Expanding Community Access and Engagement in Trusted Local Spaces

Moving Public Education Into Community Spaces

In 2025, NMQF Connect supported COMMS campaigns by creating community-facing opportunities for residents to engage with health information in trusted, culturally relevant settings. Across campaigns, Connect helped move public education from awareness to access — pairing messages with screenings, referrals, navigation, health passports, partner engagement, and local dialogue



Auntie Rona: COVID-19 Awareness

NMQF Connect brought Auntie Rona's COVID-19 awareness and misinformation response into trusted community settings. In New Orleans, this included senior and caregiver engagement, wellness education, and vaccine-confidence outreach. At Cultural Coalition's 14th Annual MIKIZTLI: Día de los Muertos Festival, Phoenix and Mesa residents shared their COVID-19 experiences, booster perceptions, trusted information sources, and ongoing education and access needs.

Together, these place-based activations connected culturally responsive messaging with direct community listening.

NOLA Wellness Fest

NOLA Wellness Fest served as the clearest 2025 example of the NMQF Connect model in action. Hosted at Xavier University of Louisiana, the activation connected residents to COVID-19 education, vaccine access, screenings, mental health resources, autism awareness, chronic disease education, primary care referrals, and health passports.

The event positioned NMQF Connect as a practical access platform: not simply a community presence, but a coordinated engagement model that combined trusted health information with services and follow-up pathways.

Essence Fest and Beyond Lupus

NMQF Connect activity tied to Essence Fest, in collaboration with the Global Black Economic Forum, created a culturally relevant entry point for campaign visibility, including lupus awareness and clinical trial education connected to Beyond Lupus and the National Lupus Outreach and Clinical Trial Education Program, led by NMQF's Offices of the President.

Connect's role was to help translate campaign resources into public engagement — bringing education into a high-trust cultural setting where community members could encounter health information alongside celebration, identity, and shared experience.



Support Our Sisters with mBC

Through Vineyard Vibes & Breast Health ConvHERsations, NMQF Connect helped move Support Our Sisters with mBC from online education and peer storytelling into a community-facing breast health activation. The activation connected breast health messaging, patient voice, and trusted local engagement in a setting designed to support dialogue, awareness, and connection.



Lumbee Tribe: Lumberton Engagement

Through our Lumberton, NC engagement, NMQF Connect supported culturally specific community outreach focused on elder health, education, navigation, screenings, and service curation. This work reflected Connect's ability to adapt national campaign priorities to local community context, trusted partners, and culturally grounded engagement.

CENTER FOR HEALTH INFORMATION STRATEGY AND SERVICES (HISS)

The Center for Health Information Strategy and Services (HISS) provides data-driven insights to reduce patient risk, improve care quality, and support better outcomes for underserved communities.

In 2025, HISS strengthened NMQF's health data infrastructure by advancing secure cloud-based analytics, AI-enabled research tools, community data lake management, index assets, and cross-center data partnerships. HISS helps transform complex data into usable insight for clinical
and social research, health communications, community alliances, policy education, and partner strategy.

NMQF Private Cloud: A secure research and analytics environment built to support approved access to large-scale, de-identified health data through protected virtual workspaces.

ChatNMQF: A secure, AI-powered health intelligence platform that allows users to ask plain-language questions and generate structured, visual insights from NMQF's data environment.

My Patient Advocacy Learning Community (MyPALc): A HISS-led data and index platform that makes analytics more accessible for patient advocates, researchers, and partner organizations.

Health Equity Index Assets: Disease-specific and geographic analytic resources that help identify disparities in disease burden, access, utilization, cost, outcomes, and social drivers of health.

Data Engineering and Infrastructure Security: The systems, governance, storage, security, and cross-functional data partnerships that keep NMQF's analytics ecosystem reliable, protected, and actionable.

Why This Matters

The question is no longer whether data exists. The challenge is whether data can be used safely, ethically, and quickly enough to guide better decisions. HISS helps NMQF move from data ownership to data action—identifying disparities, targeting interventions, supporting community-centered research, and informing strategies that improve access to care.

CENTER FOR HEALTH INFORMATION STRATEGY AND SERVICES (HISS)

ChatNMQF: Accessing AI-Powered Community Data

What ChatNMQF Does

Turning Big Data Into Better Health for All

ChatNMQF is a secure, AI-powered, cloud-based data platform designed to help approved users ask plain-language questions and receive rapid, structured insights from NMQF's health data environment.

Instead of requiring users to navigate complex databases or write code, ChatNMQF allows researchers, clinicians, public health leaders, patient advocates, and policymakers to ask questions such as:

"How many Black women in Georgia have multiple myeloma?"

"Where is the greatest concentration of new breast cancer cases?"

"What is the cancer burden by ZIP code, county, or legislative district?"

By pairing artificial intelligence with NMQF's data infrastructure, ChatNMQF helps users identify disparities, visualize care gaps, and develop targeted research, education, and intervention strategies.

2025 Impact at a Glance

- **AI-Powered Access:** Advanced ChatNMQF as a secure, AI-enabled virtual research environment.
- **Plain-Language Queries:** Enabled users to ask health data questions without advanced coding skills.
- **Visual Insights:** Supported analysis across race, ethnicity, geography, disease condition, provider, intervention, and outcome.
- **Research and Strategy Support:** Positioned ChatNMQF for peer-reviewed research, quality improvement, value-based care analysis, and policy education.
- **Data Integration:** Continued connecting high-value datasets to support more precise community and clinical analysis.

How ChatNMQF Advances Access

Lowering the barrier to data use: Users can ask questions in plain language without needing advanced coding skills.

Improving targeting: Data can be examined by geography, demographics, condition, cost, outcomes, and social drivers of health.

Supporting trusted decision-making: Secure infrastructure and governance protocols help protect privacy while enabling real-world evidence generation.

Connecting insight to action: ChatNMQF helps partners move from identifying a disparity to designing a research, education, or care strategy around it.

CENTER FOR HEALTH INFORMATION STRATEGY AND SERVICES (HISS)

NMQF Private Cloud: Secure Infrastructure for Health Data Research

What the NMQF Private Cloud Does

PRIVATE CLOUD

Building the Backbone for AI-Enabled Health Insight

The NMQF Private Cloud is a secure research and analytics environment that gives approved users protected access to large-scale health data and analytic tools.

Built as a virtual research center, the Private Cloud supports secure data storage, analysis, visualization, collaboration, and advanced modeling. It is the infrastructure layer that enables HISS to support ChatNMQF, MyPALc, index management, research partnerships, and cross-center analytics.

2025 Impact at a Glance

- **Secure Research Environment:** Continued advancing NMQF's private cloud-based research and analytics infrastructure.
- **Large-Scale Data Access:** Supported approved access to billions of de-identified patient records.
- **Data Engineering:** Strengthened pipelines that support clinical, community, policy, and partner-facing work.
- **Flexible Analytics:** Expanded capacity for visualization, modeling, and cross-functional research.
- **Enterprise Collaboration:** Provided shared infrastructure for research, program design, community strategy, and partner engagement.

How NMQF Private Cloud Advances Access

Secure research environments: Approved users can work in protected virtual environments designed to safeguard sensitive data.

Data integration: The platform supports integration of claims, demographic, social drivers, clinical, laboratory, and other relevant datasets.

Flexible analytics: Users can analyze data through multiple applications and analytic approaches, from visualization to advanced modeling.

Cross-center collaboration: The Private Cloud supports NMQF's enterprise-wide work by providing a shared foundation for research, program design, community strategy, and partner engagement.

Why This Matters

Communities most affected by health disparities are often least visible in the data used to guide healthcare decisions. By strengthening NMQF's Private Cloud and data engineering systems, HISS helps ensure that research, interventions, and education strategies are grounded in data that better reflects the people and places NMQF serves.

CENTER FOR HEALTH INFORMATION STRATEGY AND SERVICES (HISS)

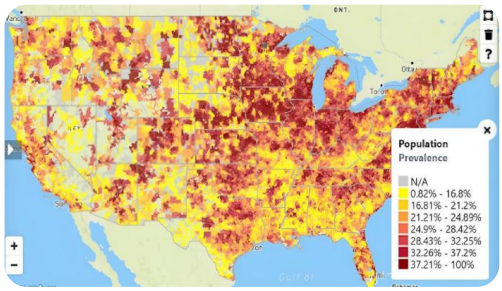
MyPALc and Health Equity Index Assets

What MyPALc Does

Making Data More Accessible for Advocates, Researchers, and Partners

My Patient Advocacy Learning Community (MyPALc) is a HISS-led data and index platform created to advance access to health data through open, understandable, and usable analytics.

MyPALc helps patient advocacy organizations, researchers, and partners use data to better understand disease burden, care gaps, access barriers, and geographic patterns. By translating complex datasets into clear visualizations and ZIP-code-level insights, MyPALc strengthens evidence-based education, research, and program planning.



What Health Equity Index Assets Offer

HISS maintains and manages disease-specific and geographic data assets that help partners understand disparities across:

- Disease prevalence and burden
- Access and utilization
- Cost and outcome trends
- Geography, including ZIP code, county, state, congressional district, and state legislative district
- Social drivers of health, including income, education, environmental risk, and access to community resources

2025 Impact at a Glance

- **MyPALc Management:** Continued managing MyPALc as a HISS-led data and index platform.
- **Index Asset Stewardship:** Maintained disease-specific and place-based analytic resources.
- **Platform Transition:** Advanced the shift from legacy index applications toward cloud-based and AI-enabled access models.
- **Advocate Access:** Supported patient advocates, researchers, clinicians, community partners, and policy education stakeholders.
- **Targeted Programming:** Strengthened NMQF's ability to identify high-burden communities and guide more focused action.

How These Advance Access

Evidence for advocates: Patient advocacy organizations can use data to strengthen education, research, and program strategy.

Geographic precision: ZIP-code and district-level analysis helps identify where interventions are most needed.

Disease-specific insight: Index assets help reveal disparities in disease burden, access, cost, and outcomes across populations.

Program design: Data visualizations and dashboards can help partners direct resources toward communities facing disproportionate risk.

CENTER FOR HEALTH INFORMATION STRATEGY AND SERVICES (HISS)

Data Security and Governance

What HISS Protects

Protecting Data While Expanding Its Use for Good

HISS manages the secure infrastructure behind NMQF's health data platforms, including the community data lake, Private Cloud, ChatNMQF, MyPALc, index assets, data warehousing, storage, system design, and cross-functional data partnerships.

As NMQF expands the use of large-scale health data and AI-enabled analytics, HISS ensures that data access remains governed, secure, and aligned with NMQF's mission to reduce patient risk.

2025 Impact at a Glance

- **Enterprise Security:** Continued managing data security across NMQF's health data ecosystem.
- **Protected Access:** Supported secure private cloud environments with authentication, encryption, and role-based controls.
- **Privacy-First Governance:** Maintained practices that protect sensitive health information and support responsible data use.
- **Cross-Center Workflows:** Strengthened data support for research, communications, community engagement, partner strategy, and policy education.
- **Responsible Analytics:** Advanced systems that identify disparities while protecting the communities represented in the data.

How These Advance Access

Governed access: Authentication, encryption, and role-based permissions allow approved researchers and partners to work with sensitive health data without exposing the individuals and communities represented in it.

Privacy-protective analysis: De-identification and privacy-first data handling let NMQF examine disparities at population scale while keeping patient identity protected.

Partner confidence: Documented governance, data-use standards, and secure infrastructure give health systems, funders, and community partners a reliable basis for sharing data with NMQF.

Dependable shared infrastructure: Consistent data engineering, storage, and system design keep protected datasets available for research, communications, community engagement, and policy work.

Why This Matters

Data can reveal where health systems are failing communities—but only if it is protected, governed, and used responsibly. HISS provides the infrastructure that allows NMQF to use health data as a tool for trust, accountability, and action.

CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

CPSA: From Launch to Implementation

In 2025, CPSA moved from establishing a new center to advancing a more mature professional alliance platform. Working across NMQF centers, CPSA supported initiatives that engaged clinicians, researchers, patient advocates, community organizations, policymakers, industry, and healthcare stakeholders across multiple high-burden disease areas.

CPSA's Mission

To serve as a central hub for professional groups, fostering collaboration, knowledge sharing, and joint initiatives that use data-informed insights, community perspective, and strategic partnerships to reduce health disparities and strengthen access to optimal care.

Professional Alliances Coordination:
Supports and manages professional alliances, working groups, and expert networks committed to strengthening healthcare access.

Research and Innovation:
Advances planning, consensus-building, and research collaborations in areas of unmet need, with an emphasis on practical and sustainable solutions.

Data-Informed Strategy:
Uses NMQF's data infrastructure, Social Drivers of Health insights, and partner expertise to identify gaps in care, guide outreach, and shape future programs.

Community Engagement:
Ensures patient, caregiver, clinician, and community perspectives inform program design, education, and implementation.

Why This Matters

CPSA helps NMQF convert trusted relationships into action. By aligning professional expertise, community insight, and data-informed strategy, the Center develops scalable models that translate planning into implementation across disease areas.

CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

The Center for Professional and Strategic Alliances (CPSA) advances NMQF's mission by building cross-sector partnerships that translate research, evidence, and community insight into practical action.

In 2025, CPSA advanced a portfolio spanning kidney disease, clinical research access, cardio-kidney-metabolic conditions, prostate health, sickle cell disease, and ATTR-CM—bringing together clinicians, researchers, community organizations, patient advocates, policymakers, and industry partners to strengthen access to care through education, collaboration, and community-centered implementation.

NEKC: The Nephrologists for Equitable Kidney Care (NEKC) is a national clinician-led alliance focused on strengthening access to optimal kidney care through professional collaboration, patient voice, public education, and evidence-informed stakeholder engagement.

Clinical Trial Learning Community (CTLC): The Clinical Trial Learning Community (CTLC), in partnership with Biogen, is designed to strengthen clinical trial awareness and access by connecting disease education, trusted community partners, bilingual resources, and patient and caregiver storytelling in lupus and Alzheimer's disease, with expansion into kidney disease planned for 2026.

CKM Health Collaborative: The Cardio-Kidney-Metabolic (CKM) Health Collaborative is a strategic partnership between NMQF and the Association of Black Cardiologists (ABC) designed to reduce disparities in cardio-kidney-metabolic (CKM) conditions through clinical practice, community engagement, policy and advocacy, and data-informed strategy.

Emerging Research & Specialty-Care Pipeline: CPSA advanced planning-stage initiatives in ATTR-CM, prostate health, and sickle cell disease using professional consensus-building, data-informed research design, and partnership development to position future access-focused initiatives for implementation.

CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

NEKC: Advancing Kidney Care through Policy, Patient Voice, and Collaboration

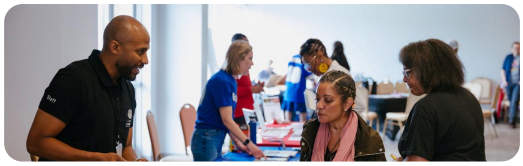
What NEKC Does

Uniting clinicians, patients, and partners to strengthen access to optimal kidney care.

Nephrologists for Equitable Kidney Care (NEKC) is a national clinician-led alliance advancing access to high-quality kidney care for historically underserved communities.

In 2025, NEKC expanded its reach through clinician engagement, patient storytelling, community education, and stakeholder collaboration—mobilizing nephrologists, advocates, community partners, and healthcare leaders to strengthen kidney care access and inform policy and practice.





How NEKC Advances Access

Clinical Leadership & Collaboration

Convening nephrologists, patient advocates, and healthcare stakeholders to identify challenges, share best practices, and strengthen equitable access to kidney care.

Patient Voice & Community Education

Elevating lived experiences through patient storytelling, public education, health fairs, webinars, and community outreach to increase awareness and inform decision-making.

Evidence-Informed Engagement

Leveraging research, policy analysis, and scholarly dissemination to examine how kidney care policy and payment decisions affect access to therapies and long-term outcomes.

2025 Impact at a Glance

- Connected with **500+ community participants** through educational events, webinars, stakeholder convenings, and access-focused initiatives.
- Engaged **70+ nephrologists** nationwide through membership and collaboration activities.
- Provided kidney health education to **100+ at-risk individuals** through health fairs and community outreach.
- Collected and amplified **88+ patient stories** focused on ESRD payment policy impacts.
- Generated **40,000+ combined webinar views and digital impressions** through national education and public engagement campaigns.
- Presented an abstract at **ASN Kidney Week 2025** highlighting NEKC's scalable, community-centered kidney health model.

Scan for report

NEKC Model at ASN Kidney Week 2025: Presented a peer-selected abstract at ASN Kidney Week 2025 focused on NEKC's scalable, community-centered kidney health model.

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CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

CTLC: Closing Gaps in Clinical Research Participation

What CTLC Does

Building trust, awareness, and access to clinical research through community-rooted education.

The Clinical Trial Learning Community (CTLC), in partnership with Biogen, strengthens awareness of and access to clinical research by combining disease education, trusted community partnerships, bilingual resources, patient and caregiver stories, and digital engagement

In 2025, CTLC sustained lupus programming in the DMV region and expanded Alzheimer's education and clinical trial awareness in Queens and the Bronx—helping patients and caregivers better understand lupus, Alzheimer's disease, and research participation as part of the care journey. Building on this work, CTLC is expanding into kidney disease in 2026.

How CTLC Advances Access

Trusted Community Education

Engaging patients, caregivers, Health Champions, and community partners through workshops, webinars, resource guides, and bilingual materials that make clinical research easier to understand.

Patient and Caregiver Storytelling

Elevating lived experiences to build trust, reduce stigma, and help families see research participation as a care option, not a last resort.

Culturally Tailored Outreach

Using digital campaigns, local partnerships, and disease-specific education to reach communities affected by lupus and Alzheimer's disease with relevant, accessible information.

2025 Impact at a Glance

- Engaged **500+ patients, caregivers, and community members** through second-quarter lupus and Alzheimer's activities
- Captured and disseminated **5 patient/caregiver stories**.
- Generated **614,075 Meta ad impressions**, reached **111,778 individuals**, generated **1,565 web clicks**, and produced **3,825 engagement events**.
- Reached **21,270 households** through TV advertising.
- Sent **14,509 emails** with a **33.7% open rate**.
- Presented the CTLC model at the **Patients as Partners 2025 Conference** in Boston.
- With support from NMQF's COMMS and SHC, developed culturally tailored lupus and Alzheimer's DRIVE toolkits and English/Spanish resource guides, including **"Heart to Heart: Let's Talk About Alzheimer's"** patient and caregiver materials.

Sponsor

Biogen

CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

CKM Health Collaborative: Advancing Coordinated CKM Care

What CKM Health Collaborative Does

CKM Health Collaborative

Advancing coordinated solutions across the cardio-kidney-metabolic care continuum.

The CKM Health Collaborative is a strategic partnership between NMQF and the Association of Black Cardiologists (ABC) focused on addressing the interconnected burden of cardiovascular, kidney, and metabolic conditions.

In 2025, CPSA advanced Phase I discovery through research, data review, expert consultation, stakeholder engagement, and coalition-building to establish the collaborative's mission-aligned strategic foundation. Phase II will validate, prioritize, and translate that foundation into action.

How the CKM Health Collaborative Advances Access

Coordinated Care Framework

Developing an integrated approach that addresses prevention, screening, diagnosis, treatment access, care coordination, and implementation gaps across the CKM patient journey.

Cross-Sector Collaboration

Bringing together clinicians, researchers, patient advocates, and community stakeholders to align expertise around practical, patient-centered solutions.

Data-Driven Strategy

Combining NMQF's data infrastructure with ABC's clinical leadership to identify care gaps and inform future implementation, education, and policy priorities.



2025 Impact at a Glance

- **Phase I Discovery:** Completed research, data review, expert consultation, and partner discussions to establish the foundation for the collaborative.
- **Strategic Roadmap:** Developed the framework for a national CKM collaborative designed to strengthen prevention, care coordination, and access.
- **Strategic Framework:** Through four strategic pillars—Data, Community Engagement, Policy/Advocacy, and Clinical Practice—the CKM Health Collaborative focuses on closing the implementation gap by translating evidence into action.
- **Next Phase Preparedness:** Established the rationale and strategic direction for a Phase II CKM Action Roundtable and Strategic Action Brief.

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CENTER FOR PROFESSIONAL AND STRATEGIC ALLIANCES (CPSA)

Emerging Research & Specialty-Care Pipeline: Extending the Alliance Model

What the Emerging Research & Specialty-Care Pipeline Does

Building the next generation of specialty-care collaborations through data, consensus-building, and partner alignment.

CPSA advanced a set of emerging and planning-stage initiatives that extend NMQF's professional alliance model into specialty care, data-driven research, and future implementation opportunities.

In 2025, this pipeline included work in prostate health, sickle cell disease, and ATTR-CM—moving priority concepts from early opportunity identification toward structured partnerships and evidence-informed implementation pathways.

How the Pipeline Advances Access

Structured Alliance Development

Converting early-stage health priorities into organized collaborations with defined partners, governance needs, research questions, and implementation pathways.

Data-Informed Research Design

Using claims data, geospatial analytics, Social Drivers of Health indicators, and partner expertise to better understand where gaps in care occur and who is most affected.

Specialty-Care Implementation Readiness

Preparing emerging initiatives for partnership and implementation by grounding them in evidence, clearly defined access needs, and practical next steps.

2025 Impact at a Glance

- **Prostate Health Consensus-Building:** Advanced planning, contracting, governance design, and partner alignment for the BPH Imaging Consensus Initiative in collaboration with Olympus Corporation of America and PhRMA.
- **Sickle Cell Research Planning:** Developed the foundation for a research collaboration with The University of Texas at Austin and Virginia Commonwealth University using Medicaid claims data, geospatial analytics, and Social Drivers of Health indicators.
- **ATTR-CM Development:** Advanced partner meetings, preliminary data analysis, concept notes, and stakeholder outreach to explore gaps in early identification, diagnosis, genetic testing, treatment access, and long-term management.
- **Future Implementation Readiness:** Positioned emerging specialty-care priorities for future implementation by aligning data, partners, clinical experts, and community perspectives.

CENTER FOR PUBLIC POLICY (CPP)

The NMQF Center for Public Policy advances a health system design that is measurable in long-recognized health status metrics; supports essential business sectors; and is responsive to structural and systemic change in the authorizing environment. CPP values a system of care that assigns the highest priority to research designs that assure the statistically significant inclusion of all population cohorts; treatment and payment paradigms that provide maximum flexibility in responding to all patient cohorts, and a pricing paradigm that incentivizes innovation.

CPP operates through 3 portals of engagement:

The Institute for Equity in Health Policy and Practice: IEHPP is a sponsored partnership that supports members efforts to advance equity in a manner that is responsive to the health concerns of all population cohorts within the context of essential business imperatives. The Institute facilitates the exchange of information, supports educational efforts, and launching consensus-building initiatives that focus on forward-looking policy.

The National Alliance for Brain Health and Awareness: NABHA is a sponsored initiative in recognition of the need for collaboration across the domains of brain health to design and implement initiatives regarding the prevalence of brain diseases and the assurance of quality health services for individuals with brain disease. NABHA facilitates educational efforts, policies, regulations and access models that are supportive of a health system that reduces patient risk, and sustains the health and well-being of families and communities.

Focused Initiatives and Collaborations: Partnerships with national and regional patient, provider, policy, and research organizations to develop consensus regarding structural challenges and solutions, and to educate and inform collectively regarding shared policy interests at the federal and state levels.

Initiative Spotlight

BCBSA/NMQF Data Equity Coalition

CPP continued co-leadership of the Data Equity Coalition, advancing policy solutions and data standards that support improved measurement, accountability, and outcomes across population cohorts.

Policy Issue Spotlight

Most Favored Nation vs. Human Sustainability

NMQF released a 2025 issue brief examining how federal drug pricing models may affect timely access to care, biomedical innovation, and patient risk.

CENTER FOR PUBLIC POLICY (CPP)

Pillars of Systemic Quality, Human Value, and Structural Order

The CPP team assesses the potential impact of public policy engagement opportunities through the lens of a foundational social contract made manifest as tangible, measurable **Pillars of Systemic Quality, Human Value, and Structural Order**.

These pillars support a health services system that assigns priority to research designs that assure statistically significant inclusion of all population cohorts; treatment and payment paradigms that provide maximum flexibility in care delivery; and pricing paradigms that incentivize innovation.

Pillar 1

A system of care that assigns the highest priority to **patient risk mitigation** rather than financial risk mitigation.

Pillar 2

Diagnosis, treatment and payment paradigms that provide the health services delivery system with maximum flexibility in responding to **patient needs**.

Pillar 3

Research designs that assure the statistically significant and robust **inclusion of all** population and patient cohorts.

Pillar 4

Enhanced data collection, monitoring and evaluation of the outcomes associated with promulgated policy and regulation.

Why This Matters

Policy change is essential in addressing persistent systemic barriers that prevent medically underserved communities from accessing quality health care. Without policy interventions, these communities continue to encounter obstacles that worsen outcomes and perpetuate existing inequalities.

CPP's policy construct gives NMQF a framework for assessing whether proposed policies, regulations, payment models, research structures, and commercial business models reduce patient risk — or unintentionally deepen it.

CENTER FOR PUBLIC POLICY (CPP)

Overview of CPP Activity: 2025

CPP's 2025 portfolio advanced a shared policy imaginary that prioritizes the **reduction of patient risk**; is informed by precise assessments of the American health services research, delivery, and financing system; and can be institutionalized through public policies, commercial business models, data standards, reimbursement structures, and accountability mechanisms.

2025 Select Issues and Policy Work Accomplishments

Policy Area	
340B Advocacy and Education	CPP continued policy education and access analysis related to the 340B program, with attention to safety-net providers, eligible patients, comprehensive health services, and patient risk.
Alliance for Cancer Care Equity (ACCE): NMQF, ACS CAN, and NCCN	CPP continued engagement through ACCE to inform forward-looking positioning on policy, regulatory, and commercial-sector issues affecting cancer care access and patient risk.
BCBSA/NMQF Data Equity Coalition: Co-Leadership — OMB Statistical Policy Directive No. 15 Focus	CPP continued co-leadership of the Data Equity Coalition, with a focus on OMB Statistical Policy Directive No. 15 and data standards that support improved measurement, accountability, and outcomes.
Centering Equity Initiative: 2026 Centering Equity Survey in progress	CPP continued Centering Equity Initiative and Centering Equity Survey work, supporting analysis, stakeholder engagement, and policy approaches that center patient risk reduction.
ICD-10-CM Coding for Neuropsychiatric Symptoms of Dementia and Stages of Severity of Alzheimer's Disease (October 1, 2022 Effective Date)	CPP led collaborative work to establish ICD-10-CM codes supporting more precise recognition, diagnosis, research, payment, quality measurement, and accountability for dementia symptoms and Alzheimer's disease stages.
ICD-10-CM Coding for Triple Negative Breast Cancer (October 1, 2024 Effective date)	CPP led collaborative work to establish ICD-10-CM coding for triple-negative breast cancer, strengthening policy infrastructure to support disease identification, research, diagnosis, and accountability for this cancer subtype.

CENTER FOR PUBLIC POLICY (CPP)

Overview of CPP Activity: 2025

Policy Area	
Government Price Setting and Access Policy (IRA, MFN, 340B, Medicaid PDABs)	CPP engaged on government price-setting and affordability policies, including IRA drug price negotiation implementation, Most Favored Nation analysis, 340B policy education, and state Medicaid Prescription Drug Affordability Boards. Activities included roundtables, testimony, public comments, and policy analysis focused on patient access, innovation, safety-net capacity, and patient risk.
Keenova (formerly Mallinckrodt) Advocacy Advisory Council	CPP continued engagement through the Keenova Advocacy Advisory Council, bringing NMQF's patient-risk framework to policy discussions focused on access, treatment needs, patient advocacy, and care delivery.
Rare Kidney Disease Engagement: Unknown Cause Kidney Disease Coalition / New ERA Coalition for Rare Kidney Disease	CPP continued engagement through rare kidney disease policy coalitions, including work related to IgA nephropathy, focal segmental glomerulosclerosis, and APOL1-mediated kidney disease.
Project PAUSE: Psychoactive Appropriate Use for Safety and Effectiveness	CPP continued policy infrastructure/ collaboration related to clinical, regulatory, and legislative issues in long-term care.
The 119th Congress — Tri-Caucus Health Equity and Accountability Act: Title IX Lead (Accountability & Evaluation)	CPP continued Title IX leadership focused on accountability, evaluation, transparency, civil rights protections, and reporting on how government addresses health disparities and inequities.
URAC/NMQF Equity Accreditation Standards — Standards Completed with Ongoing Monitoring	CPP continued monitoring and engagement connected to the URAC/NMQF Equity Accreditation Standards.

Why This Matters

CPP's 2025 work shows policy infrastructure in motion: translating NMQF's patient-risk construct into issue areas where research design, data standards, pricing, reimbursement, regulation, and accountability determine whether access to optimal care is structurally supported — or structurally constrained.

CENTER FOR PUBLIC POLICY (CPP)

Spotlight on Selected CPP Accomplishments: 2025

Blue Cross Blue Shield Association/NMQF Data Equity Coalition

The mission of this partnership with one of the largest payers in the country is to develop and recommend policy solutions that advocate for race, ethnicity, language, sexual orientation, and gender identity standards in support of health outcomes.

The Data Equity Coalition built off of its 2024 activity, being a highly visible component of a successful multi-year effort to update the Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity, also known as OMB Statistical Policy Directive No. 15, for the first time since 1997.

The revised SPD-15 created a new implementation environment for federal data collection. In 2025, CPP continued co-leadership of the Data Equity Coalition with a focus on protecting the progress made through SPD-15, supporting timely compliance, and expanding the policy conversation beyond race and ethnicity to include more inclusive data mandates.

Scan for webinar

The Data Equity Coalition convenes quarterly meetings with its membership of more than 25 patient and policy organizations and is managed by a joint Core Team and LangCo Partners.

Most Favored Nation vs. Human Sustainability: Drug Pricing Analysis



In 2025, NMQF released **Most Favored Nation vs. Human Sustainability: How Federal Price Controls Fight Biology—and Americans Lose**, an issue brief examining the potential harms of the federal government's Most Favored Nation drug pricing model.

Scan for brief

While intended to lower medication costs by capping U.S. prices at the lowest rates paid in other wealthy countries, the MFN model risks prioritizing foreign price benchmarks over patient-centered care and personalized medicine.

The brief warns that such approaches may undermine biological realities, threaten biomedical innovation, and reduce access to lifesaving therapies — particularly for Medicaid beneficiaries and underserved communities.

Through this work, CPP advanced NMQF's position that affordability policy must be measured not only by cost reduction, but by whether it protects timely access to care, sustains innovation, and reduces patient risk across population and patient cohorts.

CENTER FOR PUBLIC POLICY (CPP)

Spotlight on Selected CPP Accomplishments: 2025

The Health Equity and Accountability Act: 119th Congress Development

During the 119th Congress, CPP supported NMQF's continued work on the Health Equity and Accountability Act (HEAA) through NMQF's co-leadership of the HEAA Community Working Group.

This 2025 work built on CPP's previous role as Lead on Title IX: Accountability and Evaluation for the 117th and 118th Congresses. HEAA has represented the consensus of the Congressional Tri-Caucus since the 108th Congress in 2003.

Role of CPP in HEAA

In 2025, CPP continued HEAA work connected to Title IX: Accountability and Evaluation, building on its previous role as Title IX Lead for the 118th and 117th Congresses.

As Title Lead, CPP collaborated with hundreds of partner organizations and led efforts to expand civil rights protections for anyone operating with federal financial assistance; ensure populations in correctional facilities receive care; promote transparency in enforcement; and require reports on how the government is addressing health disparities and inequities.

This Title IX foundation supported NMQF's continued engagement in the newest HEAA effort, particularly around accountability, evaluation, transparency, and federal reporting.

Ten Titles of HEAA

HEAA is organized into ten titles:

Title I: Data Collection and Reporting

Title II: Culturally and Linguistically Appropriate Care

Title III: Health Workforce Diversity

Title IV: Improvement of Healthcare Services

Title V: Improving Health Outcomes for Women, Children, and Families

Title VI: Mental Health

Title VII: Addressing High-Impact Minority Diseases.

Title VIII: Health Information Technology.

Title IX: Accountability and Evaluation

Title X: Addressing Social Determinants and Improving Environmental Justice



CENTER FOR PUBLIC POLICY (CPP)

Spotlight on Selected CPP Accomplishments: 2025

The Centering Equity Initiative and Annual Survey

The NMQF Centering Equity Initiative (CEI) was launched in 2020 under the umbrella of CPP's Institute for Equity in Health Policy and Practice.

CEI was established in response to concerns that the extant system of knowledge and intervention development, financing and insurance, and health care services delivery was not designed — was never intended — to create and sustain health for all population and patient cohorts in the United States.

The three components of CEI are a literature review completed in February 2022; the Thought Leaders in Equity Roundtable; and the Centering Equity Survey.

Design and Impact of CEI

The Centering Equity Survey was designed by CPP staff to collect information that provides insight into structural processes that increase patient risk by creating, perpetuating, or exacerbating inequities in health services, care, and outcomes.

CPP continued Centering Equity Survey work in 2025 as part of a multi-year survey effort, with survey activity spanning 2023, 2024, and a 2026 survey cycle in process.

This ongoing work advances NMQF's broader effort to identify reforms that can be institutionalized through public policy, commercial business models, measurement systems, and accountability frameworks — with the goal of reducing patient risk across all population and patient cohorts.

340B Drug Pricing Program: Protecting Safety-Net Access and Reducing Patient Risk

CPP also continued **340B Advocacy and Education** as part of its access-oriented policy portfolio.

The 340B Drug Pricing Program enables eligible covered entities to stretch scarce federal resources, reach more eligible patients, and provide more comprehensive services. For CPP, 340B policy education fits within NMQF's broader concern that access policy must account for the safety-net providers, eligible patients, and community-based care structures most affected by federal and state policy change.

CPP's 340B work applies NMQF's patient-risk framework to policy conversations affecting covered entities, care continuity, comprehensive services, and access for medically underserved communities.

CENTER FOR PUBLIC POLICY (CPP)

Spotlight on Selected CPP Accomplishments: 2025

ICD-10-CM Coding for Triple-Negative Breast Cancer, and for Neuropsychiatric Symptoms of Dementia and Stages of Severity of Alzheimer's Disease

An essential component of policy to support more precision in research, diagnosis, and payment is the availability of coding based upon the International Classification of Diseases (ICD), which is published by the World Health Organization.

The United States expands upon the periodic, numbered releases of the WHO ICD by creating a clinical modification that is used in the United States, currently the ICD-10-CM. The process to create and maintain this coding system is managed by the National Center for Health Statistics, Centers for Disease Control and Prevention.

CPP led successful collaborative efforts to establish ICD-10-CM codes for neuropsychiatric symptoms of dementia and stages of severity of Alzheimer's disease, which became effective in October 2022, and for triple-negative breast cancer, which became effective in October 2024.

The collaborations included representatives of organized clinical specialists in psychiatry and neurology, as well as coding specialists.

In 2025, these coding accomplishments continued to serve as policy infrastructure for more precise research, diagnosis, payment, quality measurement, and accountability.

Project PAUSE (Psychoactive Appropriate Use for Safety and Effectiveness)

CPP is a member of Project PAUSE: Psychoactive Appropriate Use for Safety and Effectiveness, a coalition of national patient and professional organizations collectively advocating on clinical, regulatory, and legislative issues in long-term care.

Project PAUSE aims to educate policymakers and the public on effective solutions for improving clinical care in long-term care settings by advocating for streamlined clinical surveyor training; improved quality measures to appropriately determine antipsychotic drug use in long-term care settings; and other solutions aimed at improving the diagnosis and management of neuropsychiatric symptoms in dementia.

Project PAUSE is convened by the Alliance for Aging Research and the American Society of Consultant Pharmacists.

In 2025, CPP continued engagement with Project PAUSE as part of its broader policy infrastructure work around long-term care, dementia-related conditions, quality measurement, and patient risk.

CENTER FOR PUBLIC POLICY (CPP)

Spotlight on Selected CPP Accomplishments: 2025

The Alliance for Cancer Care Equity (ACCE)

There is a dearth of coordinated efforts and strategic partnerships that focus on the disproportionate impact of racial and ethnic disparities and inequities, as well as their root causes, across all cancers in the United States today.

The **National Minority Quality Forum**, the **American Cancer Society Cancer Action Network**, and the **National Comprehensive Cancer Network** jointly launched the **Alliance for Cancer Care Equity (ACCE)** — a coalition of patient advocacy organizations and medical, legal, and public health stakeholders working to support policies, promote practices, and create systems that prioritize the elimination of racial and ethnic disparities and inequities across all cancers.

ACCE Focus Areas

ACCE focuses on the following policy issues:

1. **Enhancing advocacy efforts** to eliminate racial and ethnic disparities and inequities in prevention, screenings, incidence, early detection, and outcomes of care.
2. **Expanding access to quality, timely cancer care** through patient navigation.
3. **Bolstering efforts** to expand access to and significantly increase the diversity in cancer clinical trials.

Role of CPP in ACCE

The membership meets quarterly, and the founding partners meet bi-weekly. The founding partners have assigned responsibilities based upon the partners' organizational strengths.

Accordingly, CPP informs and advances ACCE's forward-looking positioning on federal legislative proposals, executive branch rules and guidance, and commercial-sector perspectives on cancer care access; and provides leadership on policy-related educational engagements for ACCE sponsors and members.

In 2025, CPP continued ACCE engagement as part of its broader external alliance strategy, using the partnership to support forward-looking policy education, consensus-building, and cross-sector attention to structural barriers across the cancer care continuum.

CENTER FOR PUBLIC POLICY (CPP)

External Alliances and Collaborations

CPP's partnerships with national and local patient and provider organizations develop consensus regarding structural challenges and solutions, and educate and inform collectively regarding shared policy interests at the federal and state levels.

Such partnerships involve improvements in chronic disease prevalence and treatment initiatives, long-term care reimbursement, Medicare and Medicaid coverage policy, health technology and value assessment approaches, cancer care access, rare disease, brain health, data standards, and other issues of national import.

Key External Partnerships

- **CMS Coverage Policy Task Force (Alliance for Aging Research)**
- **HIV Patient Value Task Force**
- **L.E.A.D. Coalition (Leaders Engaged on Alzheimer's Disease)**
- **National Health Council**
- **NephCure New ERA Coalition**
- **Innovation and Value Initiative**
- **Alliance for Cancer Care Equity**
- **Project PAUSE (Psychoactive Appropriate Use for Safety and Effectiveness)**
- **Unknown Cause Kidney Disease Coalition (American Kidney Fund)**
- **Improving Maternal Immunizations Task Force**
- **Keenova (formerly Mallinckrodt) Advocacy Advisory Council**

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

The Center for Sustainable Health Care Quality and Equity (SHC) builds community-rooted infrastructure that helps trusted local partners, clinicians, pharmacists, faith leaders, Health Champions, and community health workers deliver culturally responsive health education, prevention, and quality improvement in underserved communities.

In 2025, SHC advanced work across influenza, RSV, shingles, lupus, Alzheimer's, kidney health, transplantation, ATTR-CM, community pharmacy, and community health workforce development. Across this portfolio, SHC combined trusted messengers with clinical quality improvement, provider education, and community engagement — creating scalable pathways from awareness to action.

Community Pharmacists Ambassadors (CPA): CPAs serve as trusted health educators beyond the pharmacy, supporting prevention, immunization, and community health education in person and virtually. In 2025, SHC expanded the broader CPA network to 312 Community Pharmacist Ambassadors.

Health Champions and Community Health Workers: SHC trains and supports Health Champions, trusted community members including small business owners, barbers, hairstylists, and community advocates, to share culturally relevant health education and connect individuals to trusted resources. In 2025, Health Champions conducted outreach on lupus, kidney health, RSV, influenza, ATTR-CM, diabetic retinopathy, and Type 1 diabetes. A select group also completed Community Health Worker (CHW) certification to strengthen their community impact.

Demonstrating Real Improvement in Value and Equity (DRIVE): DRIVE is SHC's quality improvement and education platform, supporting clinical teams and community partners with toolkits, training, implementation resources, and outreach models. In 2025, DRIVE supported work in flu vaccination, Alzheimer's clinical research, culturally appropriate transplant care, and shingles vaccination.

Faith Health Alliance (FHA) and Advocacy Council: FHA is a national network of pastors, churches, and faith-based health leaders advancing trusted health education and services in underserved communities. In 2025, FHA included 29 churches and three regional networks and supported flu vaccination, RSV education, kidney and transplant outreach, and health advocacy training.

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

Building Community Trust Into Sustainable Health Infrastructure

In 2025, SHC expanded its work through community partner training, CHW certification support, faith-based outreach, advocacy training, webinars, Community Pharmacist Ambassador engagement, and quality improvement technical assistance.

SHC's work focused on six connected areas:

Respiratory and Vaccine-Preventable Disease

Sustaining flu vaccination access, vaccine confidence, and RSV education through DRIVE, FHA, clinical partners, and community-based outreach.

Maternal and Infant Health

Using faith-based networks to increase awareness of RSV prevention among pregnant women, families with infants, caregivers, and grandparents.

Kidney Health and Transplant Access

Building community and provider education around chronic kidney disease, transplantation, living donation, and culturally appropriate transplant care.

Clinical Research Access

Supporting lupus and Alzheimer's education through trusted messengers, provider training, and clinical trial awareness resources.

Rare Cardiovascular Disease

Advancing ATTR-CM awareness through multi-city listening sessions, clinical expert engagement, and culturally responsive education.

Community Infrastructure

Strengthening FHA, Health Champions, CHWs, pharmacists, and Flint-based community partnerships to support future NMQF and CSSI implementation.

Why This Matters

SHC's model works because trusted community voices can reach people traditional health systems often miss. By pairing those voices with quality improvement tools, clinical education, and data-informed community engagement, SHC helps communities move from information to action.

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

Respiratory Diseases: Making a Difference

Respiratory Diseases: Building Trust for Vaccine Access

SHC's respiratory disease work in 2025 centered on sustaining trusted, community-based vaccination and education infrastructure at a time of declining public health investment, vaccine misinformation, and growing mistrust.

2025 Impact at a Glance

- NYC Health + Hospitals/Elmhurst administered **23,547 patient flu vaccinations** and **5,118 employee flu vaccinations** in 2025–26 — the highest totals in six consecutive years of participation.
- Elmhurst achieved a **67.7% overall vaccination rate** for primary care patients, compared with a **51.1% NYC H+H system average**.
- Daily Planet Health Services administered **1,665 influenza vaccines** across all sites.
- Faith Health Alliance delivered **2,500+ flu vaccines** across **62 events**, with **29 churches** and three regional networks participating.
- Flu Ready NOLA generated **1M+ campaign impressions** and contributed to increased Orleans Parish flu vaccinations during the campaign window.
- SHC's RSV education initiative reached an estimated **4,000–7,000 congregants and community members** through **25 predominantly Black churches**.

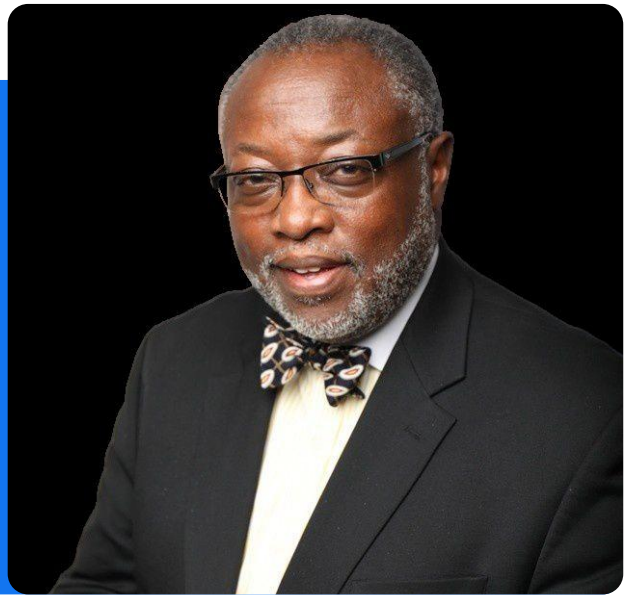
FAITH HEALTH ALLIANCE
AN NMQF HEALTH CHAMPION NETWORK

Voices from the Community

"

The COVID-19 pandemic, which hit our communities so hard, also proved that partnering with trusted individuals and organizations like Black churches can lead to improved health care access and outcomes. We cannot go backwards.

— Bishop J. L. Carter, Senior Pastor, Ark Church; Founding Chair, Faith Health Alliance



Respiratory Diseases: Notable Campaigns

DRIVE Flu

Powered by sanofi

SHC's DRIVE Flu program, supported by Sanofi, continued to operate as a nationally coordinated, equity-focused platform for influenza vaccination improvement. Through clinical quality improvement, community health champions, faith-based outreach, digital education, and national coalition leadership, DRIVE reached hundreds of thousands of individuals and helped raise vaccination rates at partner sites.





Sustained Immunization Infrastructure

With continued support from **Sanofi**, SHC maintained DRIVE as one of the few nationally coordinated, community-based flu vaccination improvement efforts active during a period of dramatically reduced federal and state resources for community immunization.

Campaign Spotlight



RSV Advocacy and Education Initiative

In collaboration with sanofi

SHC's Faith Health Alliance RSV Advocacy and Education Initiative used trusted faith-based networks to increase awareness of RSV prevention among pregnant women, families with infants, caregivers, and Black communities disproportionately affected by health disparities.

From October 2025 and continuing through March 2026, SHC has already partnered with **25 predominantly Black churches** through FHA. Churches integrated RSV education into sermons, newsletters, text campaigns, ministry gatherings, health events, and community outreach. The initiative reached an estimated **4,000–7,000 congregants and community members**, delivered approximately **60–75 RSV education and messaging activities**, and conducted approximately **45–55 outreach and community engagement events**.

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

Immunization & Clinical Research Access: Making a Difference

Bridging Prevention and Research Access Gaps Between Communities and Local Providers

The Center for Sustainable Health Care Quality and Equity (SHC) is helping close long-standing gaps in prevention, disease education, and clinical research access by connecting trusted community voices with local providers, pharmacists, health systems, and culturally responsive tools.

In 2025, SHC's work across shingles, lupus, and Alzheimer's disease showed how community-rooted infrastructure can strengthen adult vaccination, disease awareness, and clinical research readiness. By pairing clinical quality improvement with Health Champions, Faith Health Alliance leaders, community health workers, pharmacists, and provider education, SHC moved trusted health education beyond traditional clinical settings and into community spaces.

2025 Impact at a Glance

- **Shingles Vaccine Uptake:** One-dose shingles vaccination at NYC Health + Hospitals/Elmhurst increased from 728 to 5,471 patients, a 650% increase.
- **Shingles Series Completion:** Two-dose completion increased from 312 to 3,444 patients, more than a 1,000% increase.
- **Adult Immunization Follow-Through:** Among 18,024 eligible adults, shingles vaccine completion improved from 43% to 63%.
- **Lupus Education & Workforce:** SHC-supported lupus education reached approximately 1,100 community members and supported certification of eight Community Health Workers.
- **Alzheimer's Research Access:** Alzheimer's education and clinical research awareness reached approximately 449,000 individuals and trained 39 healthcare professionals at NYC Health + Hospitals/Elmhurst.



Campaign Spotlight

DRIVE SHINGLES

Powered by GlaxoSmithKline

Building on work active in 2024, DRIVE for Sustained & Equitable Vaccination Through Quality Improvement Intervention: Shingles used SHC's DRIVE framework to address shingles vaccination disparities among adults ages 50 and older through provider education, pharmacist engagement, bilingual patient resources, and systems-level quality improvement.

At NYC Health + Hospitals/Elmhurst, this approach translated education and quality improvement into measurable gains: one-dose uptake **increased from 728 to 5,471**, two-dose completion **increased from 312 to 3,444**, and completion among eligible adults **improved from 43% to 63%**.

Immunization & Clinical Research Access: Notable Campaigns

Campaign Spotlight

DRIVing Equity in Alzheimer's Clinical Research

In collaboration with Biogen

SHC expanded the Clinical Trial Learning Community model into New York City through **DRIVing Equity in Alzheimer's Clinical Research**, developing the Alzheimer's DRIVE Toolkit, delivering provider and community education, and increasing awareness of Alzheimer's disease and clinical trial participation among Black, Hispanic/Latino, immigrant, and other underserved communities.

The initiative reached approximately **449,000 individuals,** generated **125,726 digital impressions**, **1,565 website clicks**, and **3,825 engagement actions**, and delivered provider training to **39 healthcare professionals** at NYC Health + Hospitals/Elmhurst.

National Lupus Outreach and Clinical Trial Education Program

Supported by OMH U.S. Department of Health and Human Services Office of Minority Health and Biogen

The National Lupus Outreach and Clinical Trial Education Program, led by the NMQF Offices of the President, advances trusted community education around lupus, clinical research participation, and access to optimal treatment. SHC supported the program by training Faith Health Alliance leaders and Health Champions across Washington, DC, Maryland, Virginia, and New York to deliver lupus education and clinical trial awareness through churches, senior centers, community events, and one-on-one outreach. In 2025, SHC's support reached approximately **1,100 community members** and supported certification of **eight Community Health Workers**, strengthening long-term community capacity for lupus education and clinical trial awareness.



Community-Centered Impact

Through Health Champions and Faith Health Alliance partnerships, trained community leaders used culturally responsive educational resources to answer questions, address mistrust, and guide conversations about lupus, Alzheimer's disease, and clinical research participation.

This community-centered approach helped transform clinical research from an unfamiliar concept into a trusted conversation led by people residents already know.

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

Kidney Health, Transplant Access, and ATTR-CM: Making a Difference

Expanding Trusted Education Into Specialty Care

SHC is expanding its trusted education model into specialty care areas where awareness gaps, mistrust, and provider-community disconnects can delay diagnosis, treatment, transplantation, and donation.

In 2025, SHC's work across kidney health, transplant access, living donation, and ATTR-CM paired clinical expertise with Faith Health Alliance leaders, Health Champions, provider training, community listening, and culturally responsive resources.

These efforts helped move specialty-care education into trusted community settings while bringing community insight back into provider education, outreach, and resource development.

2025 Impact at a Glance

- **Kidney Community Reach:** More than 200 community members reached through kidney health, transplant, and donation outreach.
- **Trusted Messenger Training:** Approximately 50 Faith Health Alliance leaders and Health Champions trained on kidney health, transplantation, and donation.
- **Provider Education:** More than 30 transplant clinical staff engaged in cultural humility and implicit bias training.
- **Houston Outreach:** Approximately 10 community outreach and education events supported through tabling, educational sessions, church events, and community-based engagement.
- **Digital Engagement:** 3,100+ LinkedIn impressions and 500+ combined LinkedIn and YouTube video views generated through kidney education.
- **ATTR-CM Listening:** More than 30 community members participated in a multi-city ATTR-CM listening session connecting Baltimore, Chicago, and New Orleans.

Stories from the Community

Training Put Into Action
Berlinda Franklin, a Health Champion in Houston, used the initiative's training and resources when she learned of a local individual in need of a kidney transplant whose potential donor lived in California.

Drawing from the training, she helped provide guidance on transplant logistics and financial assistance resources for donor recovery support — showing how trusted education can translate into real-world advocacy beyond formal outreach events.



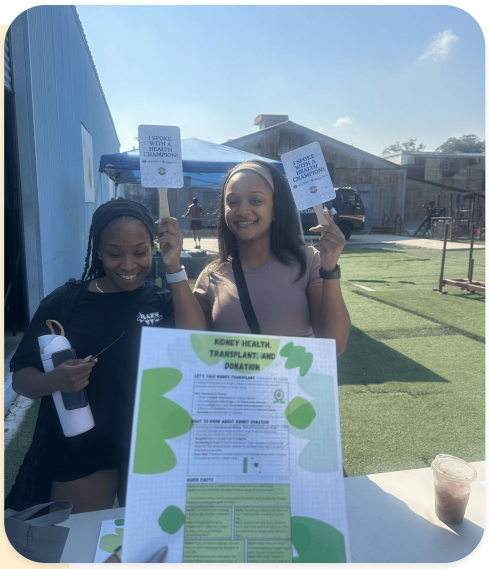
Kidney Health, Transplant Access, and ATTR-CM: Notable Campaigns

Kidney Health, Transplant, and Donation Initiative

In collaboration with sanofi

In 2025, SHC launched its first kidney-focused initiative to address disparities in kidney transplant education and access among Black and Brown communities. SHC partnered with Houston Methodist Transplant Center, Faith Health Alliance, Health Champions, and clinical experts to deliver culturally responsive education, provider training, community outreach, and transplant access resources.

The initiative strengthened both sides of the care connection: community partners were trained to share kidney health, transplant, and living donation education, while transplant professionals received cultural humility and implicit bias training to support more equitable, patient-centered communication.





ATTR-CM Community Engagement and Education Initiative

Powered by bridgebio

SHC's ATTR-CM Community Engagement and Education Initiative addressed gaps in awareness, diagnosis, and treatment of transthyretin amyloid cardiomyopathy, a progressive and often underdiagnosed cardiovascular disease that disproportionately affects Black communities.

In January 2025, SHC convened a multi-city ATTR-CM Town Hall Listening Session connecting participants in Baltimore, Chicago, and New Orleans in real time. Community members, faith leaders, clinicians, caregivers, patients, and industry partners shared insights that informed culturally relevant educational materials, messaging strategies, and the development of the NMQF ATTR-CM Resource Center.

CENTER FOR SUSTAINABLE HEALTH CARE QUALITY AND EQUITY (SHC)

Building Trusted Pathways to Earlier Detection and Care: Making a Difference

Preparing Cities for Action

SHC strengthens the local infrastructure that allows NMQF programs to enter communities with trust, trained partners, and implementation pathways already in place.

In 2025, SHC expanded Faith Health Alliance engagement, Health Champion and CHW training, advocacy education, community pharmacist activation, survey-driven community insight, and Flint-based partner development. Together, this work helped prepare trusted local networks to support disease education, prevention, screening, vaccine access, and future CSSI implementation.

2025 Impact at a Glance

- **Faith-Based Activation:** FHA mobilized 29 churches and three regional networks across flu, RSV, kidney, transplant, and advocacy work.
- **Community Insight Infrastructure:** SHC gathered 648 total survey responses from church leaders, congregants, and community members nationwide.
- **Survey-Driven Health Priorities:** Respondents elevated hypertension, diabetes, arthritis, obesity, cardiovascular disease, asthma, kidney disease, mental health, and dementia.
- **Advocacy Capacity Building:** SHC launched FHA's first Health Advocacy Training Workshop, connecting health education to action on vaccines, medication costs, kidney transplantation, diabetes, and obesity.
- **CSSI Community Readiness:** SHC built Flint partnerships with healthcare, faith, advocacy, and community organizations to support future CSSI implementation.
- **Pharmacist-Led Education:** The 2nd Annual CPA Summit engaged 98 registrants, 97 attendees, and a broader network of 312 Community Pharmacist Ambassadors.



Scan for report

Faith Health Alliance Survey and Report

For the first time, SHC expanded data collection beyond FHA leaders to include congregants and community members. The survey gathered feedback from **600+ respondents nationwide**, identifying chronic health conditions affecting respondents and families, including hypertension, diabetes, arthritis, obesity, cardiovascular disease, asthma, kidney disease, mental health, and dementia.

Respondents also identified mistrust, health information challenges, costs, transportation, and limited access to health information as barriers to better health.

Impact Spotlight

CANCER SHIFTING / STAGE INITIATIVE

Flint Community Engagement

SHC's Flint community engagement work helped **prepare trusted local pathways** for future CSSI implementation by connecting clinical partners with neighborhood voices residents already know.

In 2025, SHC engaged Hurley Medical Center, Michigan United, Blood Cancer United, Meridian Health, St. Mark Baptist Church of Flint, Life in 3D, and other local partners while developing **grassroots canvassing to build awareness** around cancer screening, vaccine access, and early detection opportunities.

This groundwork supports CSSI's larger goal of generating community-based data to **expand access to presymptomatic disease detection** in highly impacted communities — helping position Flint residents to participate in a model designed to move detection earlier, when intervention may be more effective.

CLOSING WORDS FOR 2025

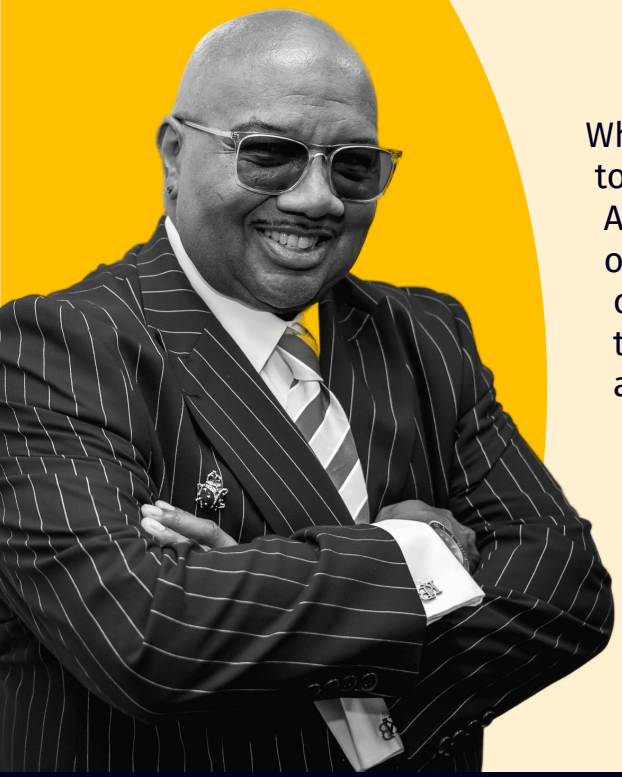
You cannot see the patient from a computer. Put it down. Look at their faces, look at their hearts, and look at their souls.

Michael L. Zollicoffer, MD

Founder, Life Care Plus

2025 NMQF Lifetime Achievement Award





While America's health care delivery system struggles to balance health quality with fee-for-service, the African American community is blessed to have an organization of medical science professionals that is committed to solving in a culturally competent way the challenges to health quality experienced by poor and disadvantaged communities.

Keith "KB" Stallworth

Founder, NCAATL and Black Caucus Foundation of Michigan

Recognizing NMQF President and CEO, Gary A. Puckrein, PhD, as 2025 Vanguard Leadership Award Honoree

NMQF has taken the lead in bringing people together for stakeholder conversations around cancer and other really big health topics — and





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