



Preparing requestors to use the GEMS* online portal for the submission and ongoing management of Grant & Healthcare Funding requests

* Grants, External Studies and Managed Access System

Version 4.0
Effective Date : November 1st 2023

Introduction

- GEMS is a global cloud-based system for the submission and ongoing management of all Grants and Healthcare Funding requests.
- All requests must be submitted via the GEMS online portal accessed from www.novartis.com.
- GEMS is making it easier for applicants to submit and manage their requests and for Novartis to review and potentially approve them more quickly.
- This deck provides external requestors with the information they need to submit their requests in GEMS.

Benefits of GEMS

Easier
submission of
applications

Ability to
manage the
application
process in
one place

Quicker
review and
approval of
applications
by Novartis

Application
can be made
from any
device

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Section 1

Registering on the GEMS portal

Registering on the portal

GEMS
Grants, External Studies and
Managed Access System



NOVARTIS
Reimagining Medicine

First time user? [Create your password](#)

Please Log In

* E-mail Address:

* Password: [Show password](#)

LOG IN

[Forgot your password?](#)

Please note that you must have cookies and JavaScript enabled on your browser in order to successfully log in.

[Need Support?](#)

[TERMS OF USE](#) [PRIVACY AND COOKIES POLICY](#) [CONTACT US](#) Copyright © Novartis 2020

Step 1

- Click on **Create a Password** at the top of the screen

Registering on the portal

GEMS

Grants, External Studies and
Managed Access System



NOVARTIS

Reimagining Medicine

Step 2

- Select your **Region** (ie country) from the drop-down box
- Organizations located outside of *Australia, Canada, England and Wales, United States*, please select *Other* to proceed with the account registration.

Registration Information

* Please select the region in which you are located:

United States ▼

- United States
- Australia
- Canada
- England and Wales
- Other

* indicates required field

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Registering on the portal

PLEASE NOTE: Any field marked with a * (red asterisk) is mandatory for completion

For US organizations–It's not required to be a 501(c)(3) non-profit organization to submit a request. However, you must enter Tax ID.

If you cannot see the text correctly, please [click here](#) to view in PDF.

* Organization Country:

* First Name:

* Last Name:

* Telephone #:

* E-mail Address: Please enter your e-mail address, e.g. yourname@yourdomain.com. You will need your e-mail address to log in.

* Confirm E-mail Address: Please enter your e-mail address, e.g. yourname@yourdomain.com.

* Password: The password must be between 6 and 16 characters long and consist of letters, numbers, or any of the following special characters: '@!#\$%&'. The password 'password' is not valid.

* Confirm Password: The password must be between 6 and 16 characters long and consist of letters, numbers, or any of the following special characters: '@!#\$%&'. The password 'password' is not valid.

* Organization Name: Enter the legal name of the organization for which you are applying.

Zip/Postal Code:

IRS Information

Tax ID/Charity ID (if applicable): Enter the nine digit U.S. Tax ID of the 501(c)(3) non-profit organization for which you are applying. If you do not know the organization's Tax ID, please contact the business office of the organization or call the IRS toll-free at 1-877-829-5500. If your organization is not located in the United States or otherwise does not have a U.S. Tax ID number then leave this field empty.

Step 3

- Please include your local country code with your telephone number
- Complete the remaining **Registration Information**
- Click **Submit**
- An activation email will be sent to the email address you have given. This can be either your organization email address or a personal email address. Click on the link contained in the email to proceed and confirm your registration details
- If you do not see an activation email in your inbox, please check your Junk / Spam or Trash folder for a message from donotreply@cybergrants.com
- If you still cannot locate the activation email, please click on the link given on the registration page: **Click here to send a new activation email**

Registering on the portal

EDIT PROFILE

LOGOUT

Welcome, Khushboo Gupta

The organization you are currently associated with is **XYZ corporation**.

You can submit and manage your funding request(s) to Novartis via this portal. All submitted requests are immediately sent to Novartis for review and further consideration. Novartis will contact you for additional information as needed via impact report.

We recommend that you [familiarize yourself with the funding request submission process](#) before you begin.

If you submit requests on behalf of different organizations, make sure you have selected the correct profile. If you need to create an additional profile, [click here to add a new organization to your account](#).

To begin a new request, click on the appropriate funding category type button below. You can save a partially completed application and return to it later by clicking on the "Continue" button next to the associated Program Title.

If you face any technical difficulties or have any questions during submission, use the "Need Support" link located at the bottom of every page to contact our support team.

Welcome Page	Organization Information	Contact Information	Proposal Information	Requested Funding	Attachments	Attestation
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Click a button below to start a new application

Grants and Healthcare Funding

Step 4

- Once registered, you have access to your own **Welcome Page**.
- If you have made requests in the past, these will show on the dashboard on your Welcome Page. If you have not submitted any past requests, the dashboard will be blank.
- You can use the dashboard to manage all ongoing requests and submit new ones.

Section 2

Submitting a new request

Submitting a new request

EDIT PROFILE

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Step 1

- If you work with multiple organizations and you are making the first application for a new organization, please use the link **"click here to add a new organization to your account."** You will be asked to select the organization's region and complete basic registration information (refer to slide 7 & 8) .

Welcome Page

Organization Information

Contact Information

Proposal Information

Requested Funding

Attachments

Attestation

Click a button below to start a new application

Grants and Healthcare Funding

Submitting a new request

[EDIT PROFILE](#)[LOGOUT](#)

Welcome, Khushboo Gupta

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Click a button below to start a new application

[Grants and Healthcare Funding](#)

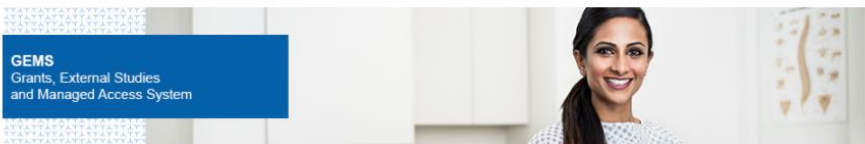
Step 2

- Click on the **Grants and Healthcare Funding** button at the bottom of your Welcome Page.

Grants and Healthcare Funding (HF)

Monetary or in-kind contribution to a reputable organization for supporting projects and initiatives related to medical/ scientific research, healthcare education (e.g., Independent Medical Education / Continuous Medical Education), policy initiatives, patient engagement related activities, and healthcare system strengthening, where Novartis will not receive any improper benefit in exchange.

Submitting a new request



LOGOUT

Welcome Page Organization Information Contact Information Proposal Information Requested Funding Attachments Attestation

Organization Information

* indicates required field

Please review your Organization information provided below and ensure it is up-to-date and reflects updated information (including organization type). Please note that the Requesting Organization will be the Payee if the funding request is approved.

* Organization Legal Name

* Country

* Address

Address 2

* City

Province

Zip/Postal Code

* E-mail Address

Step 3

- Review the auto-completed information (taken from the Registration Information) and edit or update any further information as required.
- Once complete, select **Save and Proceed** to move to the next tab. This will also ensure the content is saved should you need to return to the request.
- You will be able to see your progress on the dashboard shown at the top of each page. You can use the headings on the dashboard to move around within the application by clicking on them and you do not have to complete one section before moving to another. However, to avoid losing any information you have inserted on a page, you must click **Save and Proceed** before leaving any page.
- **IMPORTANT NOTE:** GEMS does not automatically save data, so it is important to click **Save and Proceed** when you complete any page.

Submitting a new request

GEMS
Grants, External Studies
and Managed Access System

LOGOUT

Welcome Page Organization Information **Contact Information** Proposal Information Requested Funding Attachments Attestation

Contact Information

Match: Check the box to associate this individual with this application.

Name: [KHUSHBOO GUPTA](#)
Telephone #: 23456
E-mail Address: khushboo.gupta@novartis.com
Contact Type: Executive Director

* indicates required field

SAVE AND PROCEED CREATE NEW

Step 4

- To create a new contact, click on **Create New** button.
- Provide contact information and save. Once saved, contact information will be displayed.
- Check/ Tick the box that relates to your **Contact Details**. There may be more than one box; in this case, ensure you select the correct box as these will become your primary contact details.
- Select **Save and Proceed** to move to the next tab.

Note: The contact information provided here can be used by Novartis to communicate with you if required. Therefore, provide the updated information for every request you submit.

Submitting a new request

Proposal Information

* indicates required field

* Country of Request Please indicate the country where the Request will be executed/fulfilled.

* Division (?) Please select Novartis Division (organizational unit) to which you would like to submit this request.

* Program Start Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)

* Program End Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)

* Source of Funding Support

* Currency of Request

* Amount of Request

* Total Estimated Program Cost Provide the total estimated cost of the program.

* Are there any Benefits provided to Novartis as a support of this request?

Step 5

- Complete all required information on the **Proposal Information** tab, including **Program Details** and **Event Details** (if appropriate).
- A (?) to the right of any field title indicates that further explanation of the field requirement is available by clicking on the (?) icon.
- **Program start date*** (US date format: MM/DD/YYYY): this is the planned “Day One” date when the activity for your program will start.
- **Program end date** (US date format: MM/DD/YYYY): this is the planned date you expect to close your program following completion.
- * Countries may require different lead time after request submission; the exact requirement is noted in the application when a country is selected.

Submitting a new request

Proposal Information

* indicates required field

* Country of Request Please indicate the country where the Request will be executed/fulfilled.

* Division (?) Please select Novartis Division (organizational unit) to which you would like to submit this request.

* Program Start Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)

* Program End Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)

* Source of Funding Support

* Currency of Request

* Amount of Request

* Total Estimated Program Cost Provide the total estimated cost of the program.

* Are there any Benefits provided to Novartis as a support of this request?

Step 5 (Continued)

- In **“Currency of Request,”** select the local currency code and then enter **“Amount of Request.”**
- Enter **Total Cost of the Program.** Do not use any special character (for eg “,” “.”) when entering cost in this field.
- Select **Save and Proceed** to move to the next tab.

Submitting a new request

* Outcome Measurement Plan Describe the plan to measure the effectiveness of the program to meet the objectives.

(1000 character maximum)

* Is this request for an Independent Medical Education Program?

Educational Activity Details

* Will this Activity be certified for continuing education credits? Is this request for an activity that will be certified to provide Continuing Education credits for Health care Professionals?

* Do you have an Education Partner(s) associated with this program?

* Delivery of Format (?)

Step 5 (Continued)

- If the Grant and Healthcare Funding Request is for a medical education program, Select “Yes” for “**Is this Request for an Independent Medical Education Program**”.
- When “Yes” is selected, an additional Fields related to educational activity details will be displayed that needs to be completed

Independent Medical Education Program: An Independent Medical Education Program is generally defined as an educational program for health care professionals (HCPs) provided by an independent educational provider, such as a community hospital, academic center, society/association, or medical education and communication company.

Submitting a new request

Event Details

* Does this program include any Live Events?

* How many Live Events will take place?

* Event Venue 1

* Event Address 1

* Event City 1

* Event Country 1

[Need Support?](#)

[SAVE AND PROCEED](#)

Step 5 (Continued)

- If the program includes any Live Events, ie face-to-face meetings, summits, conferences, etc. select “Yes” for **Does this program include any Live Events?**
- When “Yes” is selected, an additional field will be displayed to provide additional information about the live event. Select the number of events and provide details such as Venue, Address, City, and Country for each event.

Please note, exclusive virtual events are not Live Event

Submitting a new request



Welcome Page Organization Information In Requested Funding Attachments Attestation

Requested Funding

Please fill in the request for

Administrative Services
Audience Recruitment
Content Development
Faculty Recruitment
Others
Program Management
Web Development

* indicates required field

do not just the portion of what's being requested.

Line Item	Category	Description/Details of Spend	Estimated Total Program Cost	Currency
1	Management Fees			USD
Grand Total			0	

[Add Line Item](#)

SAVE AND PROCEED

Step 6

- The next screen for completion will ask you for further detail around the breakdown of the total program cost.
- For every category of the spend all fields need to be completed.
- Select from the drop-down list appropriate category of spend.
- Depending on which category is selected, a selection of sub-categories will be provided in a drop-down list.
- An open field box is provided for **Description / Details of Spend**.
- Fill in the **Estimated Cost** for each category. Grant total for estimated cost must be equal to the **Total Program Cost** under **Program Details** in the Proposal Information section. Do not use any special character (for eg “,” “.”) when entering cost in this field.
- Should you wish to add a further line item, click **Add Line Item**.
- Click **Save and Proceed**.

Submitting a new request

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WELCOME PAGE | ORGANIZATION INFORMATION | CONTACT INFORMATION | PROPOSAL INFORMATION | REQUESTED FUNDING | **ATTACHMENTS** | ATTESTATION

LOGOUT

Attachments

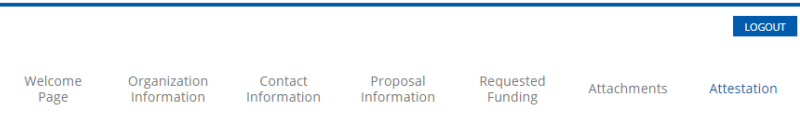
* indicates required field

- * Formal Letter of Request **UPLOAD FILE**
- * Full Program Proposal If your Full Program Proposal already includes Program Objectives, Agenda, Needs Assessment and Outcomes Measurement Plan, then there is no need to provide that information below as separate documents. **UPLOAD FILE**
- Program Objectives **UPLOAD FILE**
- Agenda **UPLOAD FILE**
- Needs Assessment **UPLOAD FILE**
- Outcomes measurement plan **UPLOAD FILE**
- Other Supporting Documents You may upload any other supporting documents. **UPLOAD FILE**
- CME Accreditation Certificate **UPLOAD FILE**
- Additional Comments

Step 7

- For Grant and Healthcare Funding request, mandatory upload of a **Formal Letter of Request (LOR)** as well as a **Full Program Proposal** is required.
- To upload a document, click the blue **Upload File** button. A pop-up window will appear with instructions on locating the correct file.
- Once located, click the **Upload File** instruction in the pop-up window to upload the selected file.
- Following upload, click **Close Window**.
- Any additional documents can be uploaded under **Other Supporting Documents**. If you would like to provide any additional information, use **Additional Comments**.

Submitting a new request



LOGOUT

Attestation

* indicates required field

I acknowledge that Novartis support must not in any way (directly or indirectly) be connected to or conditioned upon any prescribing, purchasing, or recommending any product manufactured or marketed by Novartis.

I confirm that this proposal is unsolicited and has been developed independently with no (direct or indirect) influence or prior discussion with any Novartis associate.

Where Novartis has obligations to report transfers of value and/or direct and indirect payments to relevant authorities, I commit to provide accurate, and timely data to Novartis to comply with applicable laws, regulations, or codes.

I acknowledge that the information and responses provided in this application are truthful, accurate and complete to the best of my knowledge.

* I confirm/agree to the statements above Yes

* I acknowledge that any real, potential, or perceived conflicts of interest are described here. (?)

(4000 character maximum)

SAVE AND PROCEED

Step 8

- The final page is for the **Attestation**.
- An open field dialogue box is available for the declaration of any conflicts of interest.
- Click **Save and Proceed**.

Submitting a new request

GEMS
Grants, External Studies
and Managed Access System



Review Your Application

Please review the details carefully before you click on "SUBMIT" button. After clicking the Submit button, you will not be able to make any further changes.

If you need to change any information, click on the appropriate section link. You will then be re-directed to the appropriate section to make the changes. If you don't want to submit your request at this time, click the "Save Only" button. The request will then be saved under "In-progress Requests."

Organization Information

Please review your Organization information provided below and ensure it is up-to-date and reflects updated information (including organization type). Please note that the Requesting Organization will be the Payee if the funding request is approved.

* Organization Legal Name XYZ corporation
* Country India
* Address Bridge End
Address 2
* City Hyderabad
Province
Zip/Postal Code

Step 9

- The final page requests a review of the application information
- If there are no changes to be made, click **Submit**. Please note that once submitted, no further changes can be made to the request.
- The information submitted can be viewed by selecting **View** for the relevant request on the **Welcome Page**.
- Once the request is submitted, you will see a confirmation message on screen.
- Your funding request is successfully submitted to Novartis. You will be notified in due course about Novartis decision on your request.
- To print a copy of this request, press **Ctrl + P** on the keyboard and select the appropriate printer.

Section 3

Managing a request

Introduction

- This section covers:
 - Reviewing and approving your request
 - Providing further information
 - Reconciling your request

Reviewing and approving your request

Welcome Page	Organization Information	Contact Information	Proposal Information	Requested Funding	Attachments	Attestation
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Click a button below to start a new application

Grants and Healthcare Funding

Pending Impact Report

Action	Project Title	Report Type	Report Due Date
Due	vgfd	Grants Transparency Report	07/23/2021
Due	vgfd	Grants Transparency Report	08/09/2021
Due	vgfd	Grants Transparency Report	08/10/2021
Due	vgfd	Grants Outcome Report	08/10/2021
Due	vgfd	Grants Transparency Report	08/11/2021
Due	vgfd	Grants Outcome Report	08/11/2021
Due	Albania-Kosovo training	Grants Additional Information	10/21/2021
Due	Albania-Kosovo training	Grants Outcome Report	09/29/2022
Due	Test Australia demo	Grants Outcome Report	11/05/2022
Due	Test German-IR and FG	Grants Transparency Report	03/02/2022
Due	Test Scenario 1	Grants Transparency Report	09/08/2021
Due	Test-Impact report, funding grid - Snapshot	Grant Letter of Agreement	08/27/2021
Due	Test-Impact report, funding grid - Snapshot	Grants Transparency Report	03/02/2022
Due	Test-Impact report, funding grid - Snapshot	Grants Program and Educational Outcomes Report	03/02/2022
Due	Test-Impact report, funding grid - Snapshot	Grants Outcome Report	03/02/2022
Due	test- 5th April 2022	Grants Outcome Report	10/29/2022
Due	test-English	Grants Transparency Report	03/02/2022
Due	test-English	Grants Outcome Report	03/02/2022
Due	질병 강좌 프로그램	Grants Outcome Report	08/30/2022
Due	질병 강좌 프로그램	Grants Outcome Report	06/28/2023
Due	질병 강좌 프로그램 社団法人台湾生命之聲慈善協會	Grants Outcome Report	05/28/2022

In-progress Requests

Action	Project Title	Application Date	Proposal Type	Application Amount
Continue	Project Title	12/09/2021	Grants and Healthcare Funding	\$0.00
Continue	Project Title	10/17/2023	Grants and Healthcare Funding	\$0.00

Submitted Requests

Action	Project Title	Application Date	Proposal Type	Application Amount	Status
Display activity for year: 2023 2022 2021					
View	Test Bangladesh Oct2023	10/16/2023	Grants and Healthcare Funding	500,000.00 BDT	Under Review 12082192

- After the request is submitted, it will appear in the **Submitted Requests** section on your Welcome Page while it undergoes a formal review process.
- The status will show in the Status column with and include one of the following:
 - Submitted** meaning it has been received by Novartis but has not yet been assigned to a Novartis Request Owner
 - Under review** meaning it has been assigned to a Novartis Request Owner and the internal review is ongoing
 - Approved** meaning it has been approved
 - Declined** meaning it has been rejected
 - System will share auto notification at the time of request submission as well as once request is Approved and/ or Declined.

Providing further information

- During the review process, the Novartis Request Owner may require further information from you.
- There are two ways in which this might happen:
 - By using the **Return to Applicant** functionality and requesting further information.
 - By triggering a **Grants Additional Information Impact Report**.
- We explain the process for both in the following slides.

Return to Applicant

Click a button below to start a new application

Grants and Healthcare Funding

Pending Impact Report

Action	Project Title	Report Type	Report Due Date
Due	vgfd	Grants Transparency Report	07/23/2021
Due	vgfd	Grants Transparency Report	08/09/2021
Due	vgfd	Grants Transparency Report	08/10/2021
Due	vgfd	Grants Outcome Report	08/10/2021
Due	vgfd	Grants Transparency Report	08/11/2021
Due	vgfd	Grants Outcome Report	08/11/2021
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Due	test-English	Grants Transparency Report	03/02/2022
Due	test-English	Grants Outcome Report	03/02/2022
Due	질환 강좌 프로그램	Grants Outcome Report	08/30/2022
Due	질환 강좌 프로그램	Grants Outcome Report	06/28/2023
Due	질환 강좌 프로그램 社團法人台灣生命之聲慈善協會	Grants Outcome Report	05/28/2022

In-progress Requests

Action	Project Title	Application Date	Proposal Type	Application Amount
Continue	Project Title 🗨	12/08/2021	Grants and Healthcare Funding	\$0.00
Revise	질환 강좌 프로그램	09/04/2023	Grants and Healthcare Funding	500.00 USD

Comments: (No comments provided)

- If the Novartis Request Owner uses the **Return to Applicant** functionality, you will receive an automated email and the request will move to the **In-progress Requests** section. It will also include a comment explaining why it has been returned to you.
- To provide the information, click on the blue **Revise** link and follow the on-screen instructions.

Grants Additional Information Impact Report

Click a button below to start a new application

Grants and Healthcare Funding

Pending Impact Report

Action	Project Title	Report Type	Report Due Date
Due	vgfd	Grants Transparency Report	07/23/2021
Due	vgfd	Grants Transparency Report	08/09/2021
Due	vgfd	Grants Transparency Report	08/10/2021
Due	vgfd	Grants Outcome Report	08/10/2021
Due	vgfd	Grants Transparency Report	08/11/2021
Due	vgfd	Grants Outcome Report	08/11/2021
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Due	Test-Impact report, funding grid - Snapshot	Grants Program and Educational Outcomes Report	03/02/2022
Due	Test-Impact report, funding grid - Snapshot	Grants Outcome Report	03/02/2022
Due	test- 5th April 2022	Grants Outcome Report	10/29/2022
Due	test-English	Grants Transparency Report	03/02/2022
Due	test-English	Grants Outcome Report	03/02/2022
Due	질환 강좌 프로그램	Grants Outcome Report	08/30/2022
Due	질환 강좌 프로그램	Grants Outcome Report	06/28/2023
Due	질환 강좌 프로그램 社團法人台灣生命之靈慈善協會	Grants Outcome Report	05/28/2022

In-progress Requests

Action	Project Title	Application Date	Proposal Type	Application Amount
Continue	Project Title	12/08/2021	Grants and Healthcare Funding	\$0.00
Revise	질환 강좌 프로그램	09/04/2023	Grants and Healthcare Funding	500.00 USD

Comments: (No comments provided)

- If the Request Owner triggers a **Grants Additional Information Impact Report**, it will appear in this section along with the date by which it needs to be completed.
- To access the report, click on the relevant blue **Due** link.
- Once completed, the Impact Report will no longer appear on this list.

Grants Additional Information Impact Report

The screenshot shows the Novartis web interface for the 'Grants Additional Information Impact Report'. At the top left is the Novartis logo. A horizontal navigation bar contains three tabs: 'Welcome Page', 'Request Information' (which is highlighted with a blue underline), and 'Impact Information'. In the top right corner of the page, there is a blue 'LOGOUT' button. Below the navigation bar, the 'Request Information' section is active. It contains three input fields: 'Program Title' with the value 'test', 'Program Start Date' with the value '03/02/2020', and 'Program End Date' with the value '03/03/2020'. A small red asterisk icon with the text '* Indicates required field' is positioned to the right of the input fields. At the bottom of the form, there is a blue button labeled 'SAVE AND PROCEED'.

- When you click on the blue **Due** link, you will be taken to the **Request Information** tab, which includes the program title, and start and end dates per your original request.
- Click **Save and Proceed** to continue.

Grants Additional Information Impact Report



WELCOME TO THE GRANTS PORTAL

LOGOUT

Welcome Page Request Information **Impact Information**

Impact Information * indicates required field

Additional Comments (4000 character maximum)

Additional Documents

[Need Support?](#)

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- This takes you to the **Impact Information** tab.
- Provide information as requested by Novartis.
- Additional supporting documents can be uploaded by selecting **Upload File**.
- Select **Save and Proceed** to continue.

Grants Additional Information Impact Report



[Review Your Impact Report](#)

Please review your impact report information. If you are not ready to submit your impact report at this time, click the "Save Only" button. The impact report will then be available to edit from the Welcome page. Clicking the Submit button will immediately send the report to Novartis and you will then be unable to perform further editing.

[Request Information](#)

Program Title Return applicant Aug 24

Program Start Date 08/25/2020

Program End Date 08/25/2020

[Impact Information](#)

* Indicates required field

Additional Comments Additional Information is uploaded

Additional Documents • [Test.docx \(11.24 k\), uploaded by Kathy Hartmann on 08/28/2020](#)

[SUBMIT](#) [SAVE ONLY](#)

[Need Support?](#)

- This takes you to the **Review Your Impact Report** tab.
- Review the information you have submitted carefully before submitting.
- If any changes are to be made, click on **Impact Information** link and update as necessary.
- Once you are ready to submit, click **Submit**. After submitting, no further changes can be made.

Reconciling your request

- When your program is completed, you will need to reconcile your request by completing further **Impact Reports**.
- There are three in total and these are explained on the next slide.
- Your Welcome Page includes a section for **Pending Impact Reports** (see slide 28).
- When an Impact Report becomes due, it will appear in this section along with the date by which it needs to be completed.
- To access the report, click on the relevant blue **Due** link.
- You have 90 days from the date of notification to complete any Impact Report.
- Once completed, the Impact Report will no longer appear on this list.

Impact Reports for Reconciliation

Name of report	Required for	Purpose	When triggered
Transparency Report	As per country's requirements	To confirm how the funds were used and if funding was given to other individuals or organisations	Sent automatically by GEMS once the Program End Date is reached
Outcome Report	All Grant and Healthcare Funding requests	To confirm how much money has been spent and if any refund may be due	Sent automatically by GEMS once the Program End Date is reached
Program and Educational Outcomes Report	Grant and Healthcare Funding requests involving educational activities	To confirm whether the educational outcomes for the project were achieved	If applicable, sent automatically by GEMS once the Program End Date is reached

Transparency Report



LOGOUT

Welcome Page

Request Information

Impact Information

Request Information

* indicates required field

Program Title Test

Program Start Date 07/08/2020

Program End Date 07/08/2020

SAVE AND PROCEED

[Need Support?](#)

- When you click on the blue **Due** link, you will be taken to the **Request Information** tab, which includes the Program title, and start and end dates per your original request.
- Click **Save and Proceed** to continue.

Transparency Report

NOVARTIS

LOGOUT

Welcome Page Request Information **Impact Information**

Impact Information

Were any Novartis funds from this request used for transfer of value and/or direct and indirect payments that require reporting to relevant authorities?

No
Yes

SAVE AND PROCEED

Impact Information

Were any Novartis funds from this request used for transfer of value and/or direct and indirect payments that require reporting to relevant authorities? Yes

Search:

Action	Recipient Type	Organization Name	Tax ID/EIN	Contact First Name	Contact Middle Name	Contact Last Name	Contact Suffix
--------	----------------	-------------------	------------	--------------------	---------------------	-------------------	----------------

Showing 0 to 0 of 0 entries
[Create New](#)

- This takes you to the **Impact Information** tab.
- Answer the question by selecting either **No** or **Yes** from the drop-down list.
- If the answer is **Yes**, you are required to provide further information.
- To do this, select **Create New**.
- This brings up the **Spend Detail Information Window**. Complete all details and click **Save**.
- This returns you to the Impact Information tab, where you click **Save and Proceed** to continue.

Transparency Report



[Review Your Impact Report](#)

Please review your impact report information. If you are not ready to submit your impact report at this time, click the "Save Only" button. The impact report will then be available to edit from the Welcome page. Clicking the Submit button will immediately send the report to Novartis and you will then be unable to perform further editing.

[Request Information](#)

Program Title Test

Program Start Date 07/08/2020

Program End Date 07/08/2020

- This takes you to the **Review Your Impact Report** tab.
- Review the information you have submitted carefully before submitting.
- If any changes are to be made, click on **Impact Information** link and update as necessary.
- Once you are ready to submit, click Submit. After submitting, no further changes can be made.

Outcome Report



LOGOUT

Welcome Page

Request Information

Impact Information

Spend Details

Request Information

* indicates required field

Program Title Test

Program Start Date 07/06/2020

Program End Date 07/07/2020

SAVE AND PROCEED

- When you click on the blue **Due** link, you will be taken to the **Request Information** tab, which includes the project title, and start and end dates per your original request.
- Click **Save and Proceed** to continue.

Outcome Report

The screenshot shows the 'Impact Information' tab of a Novartis web application. The page has a blue header with the Novartis logo and a 'LOGOUT' button. Below the header is a navigation bar with four tabs: 'Welcome Page', 'Request Information', 'Impact Information' (which is active), and 'Spend Details'. The main content area is titled 'Impact Information' and contains several required fields marked with a red asterisk. The fields are: 'Did your Program occur?' (a dropdown menu), 'Please describe the Actual Results of the program' (a text area with a 4000 character maximum limit and a green checkmark icon), 'Please describe the objectives fulfilled' (a text area with a 4000 character maximum limit), 'Are there any payments required to be disclosed under Sunshine Act Payment?' (a dropdown menu), and 'Are there any future activities Planned?' (a dropdown menu). Below these fields is a 'Supporting Documents' section with the text 'Please upload supporting documents.' and an 'UPLOAD FILE' button. At the bottom of the form is a 'SAVE AND PROCEED' button. A small red asterisk icon with the text '* indicates required field' is located in the top right corner of the form area.

- This takes you to the **Impact Information** tab.
- Complete all fields marked with a red asterisk.
- Depending on the answers given, additional details may be required. Complete these as necessary.
- While not mandatory, you can upload additional supporting documents by selecting **Upload File**.
- Click **Save and Proceed** to continue.

Outcome Report



LOGOUT

Welcome Page

Request Information

Impact Information

Spend Details

Spend Details

* Indicates required field

Requested Funding						Novartis Entries		
#	Category	Sub-Category	Description/Details of Spend	Estimated Cost	Currency	Novartis Support Category	Novartis Total Approved Amount	Actual Cost
1	Honoraria	Others	test	10000	EUR	Yes		<input type="text"/>
Grand Total				10000				0

SAVE AND PROCEED

- This takes you to the **Spend Details** tab.
- Enter the **Actual Cost** of the spend category in the field to the right-hand side.
- Once completed, select **Save and Proceed** to continue.

Outcome Report



[Review Your Impact Report](#)

Please review your impact report information. If you are not ready to submit your impact report at this time, click the "Save Only" button. The impact report will then be available to edit from the Welcome page. Clicking the Submit button will immediately send the report to Novartis and you will then be unable to perform further editing.

[Request Information](#)

Program Title	Test
Program Start Date	07/06/2020
Program End Date	07/07/2020

[Impact Information](#)

* Indicates required field

- * Did your Program occur? Yes
- * Please describe the Actual Results of the program test
- * Please describe the objectives fulfilled test
- * Are there any payments required to be disclosed under Sunshine Act Payment? Yes
- * Are there any future activities Planned? No

Supporting Documents

[Spend Details](#)

* Indicates required field

- This takes you to the **Review Your Impact Report** tab.
- Review the information you have submitted carefully before submitting.
- If any changes are to be made, click on **Impact Information** link and update as necessary.
- Once you are ready to submit, click Submit. After submitting, no further changes can be made.

Program and Educational Outcomes Report



LOGOUT

Welcome Page

Request Information

Impact Information

Request Information

* Indicates required field

Program Title Test Philippines

Program Start Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)
11/04/2020

Program End Date Dates are displayed in Month / Day / Year format (MM/DD/YYYY)
12/24/2020

SAVE AND PROCEED

[Need Support?](#)

- When you click on the blue **Due** link, you will be taken to the **Request Information** tab, which includes the project title, and start and end dates per your original request.
- Click **Save and Proceed** to continue.

Program and Educational Outcomes Report

Impact Information

* Indicates required field

* Provide actual numbers for the Target Audiences for which this activity was certified

<input type="text"/>	Allied Health Professionals
<input type="text"/>	Caregivers
<input type="text"/>	Dietitians
<input type="text"/>	General Public
<input type="text"/>	Health Care Administrators
<input type="text"/>	Nurse Practitioners
<input type="text"/>	Nurses
<input type="text"/>	Patients
<input type="text"/>	Payers
<input type="text"/>	Pharmacists
<input type="text"/>	Physician Assistants
<input type="text"/>	Physicians - Primary Care
<input type="text"/>	Physicians - Specialty
0.00 Total	

* Please indicate the highest number of education outcomes achieved, based on Moore's levels

* Approximately what percentage of learners indicated there was no bias within this IME Activity?

* Approximately what percentage of learners stated the educational objectives for the activity were achieved?

* Approximately what percentage of learners indicated they learned something new as a result of this educational activity?

* Approximately what percentage of learners indicated they intend to change behaviors by applying new learning/knowledge or skills in clinical practice?

* Approximately what percentage of learners indicated they did change their behaviors as a result of this educational activity?

* Were any new findings, barriers, or insights gained by learners as a result of the IME activity?

If measured, please indicate the approximate number of patients that learners indicated would benefit from them having participated in this IME activity.

Supporting Documents Please upload supporting documents.

UPLOAD FILE

SAVE AND PROCEED

- This takes you to the **Impact Information** tab.
- Complete all fields marked with a red asterisk.
- Depending on the answers given, additional details may be required. Complete as necessary.
- While not mandatory, you can upload additional supporting documents by selecting **Upload File**.
- Click **Save and Proceed** to continue.

Program and Educational Outcomes Report



[Review Your Impact Report](#)

Please review your impact report information. If you are not ready to submit your impact report at this time, click the "Save Only" button. The impact report will then be available to edit from the Welcome page. Clicking the Submit button will immediately send the report to Novartis and you will then be unable to perform further editing.

[Request Information](#)

Program Title Test Philippines
Program Start Date 11/04/2020
Program End Date 12/24/2020

[Impact Information](#)

* indicates required field

* Provide actual numbers for the Target Audiences for which this activity was certified

- Allied Health Professionals 10.00
- Caregivers 10.00
- Dieticians 12.00
- Health Care Administrators 10.00
- Pharmacists 1.00

Total 43.00

* Please indicate the highest number of education outcomes achieved, based on Moore's levels

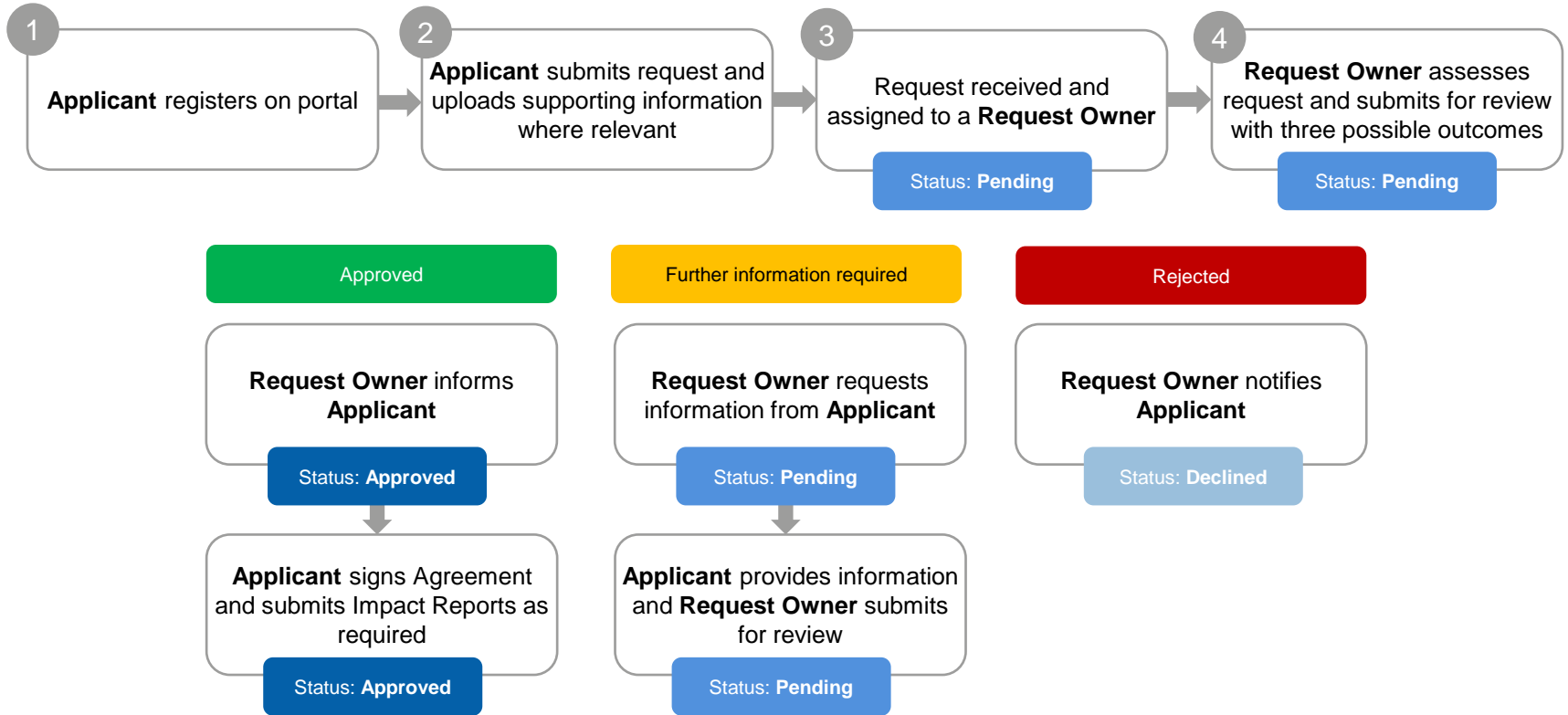
Level 4 - Competency

- This takes you to the **Review Your Impact Report** tab.
- Review the information you have submitted carefully before submitting.
- If any changes are to be made, click on **Impact Information** link and update as necessary.
- Once you are ready to submit, click Submit. After submitting, no further changes can be made.

Section 4

Additional information

Approval workflow





Thank you