Frequently Asked Questions for: RFA-CA-25-032 "Cancer Intervention and Surveillance Modeling Network (CISNET) (U01 Clinical Trial Not Allowed)"

Please contact NCI_DecisionModelingPriorities@mail.nih.gov if other questions arise.

Question: Is a recording of the webinar available to view?

Answer: The full recording of the session is now available here.

Question: Are there other priorities applicants should consider? For example, can applicants propose to investigate health disparities?

Answer: In addition to the 9 target priority areas identified in the NOFO, please see NIH Director statement "Advancing NIH's Mission Through a Unified Strategy" for helpful information on priorities.

You may also want to consider viewing NCI Director's presentation at the December 2, 2025 National Cancer Advisory Board Meeting. You can access it here.

Question: Are foreign components and/or foreign consultants allowed in this NOFO?

Answer: Please see the NOFO Part 2 Section III Eligibility section under the subheading "Foreign Organizations/International Collaborations" which details eligibility.

Official definitions for terms including "foreign component" and "consultant" can be found in the glossary section of the NIH Grants Policy Statement.

Also please see NOT-OD-25-098 about foreign justification:
https://grants.nih.gov/grants/guide/notice-files/NOT-OD-25-098.html

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Question: When is a "Foreign Justification" attachment required?

Answer: Please see: NOT-OD-25-098. If your application includes paid (or unpaid) foreign consultants, or any other type of activities or collaborations (paid or unpaid) outside the United States, then you must include a Foreign Justification attachment to describe special resources or characteristics of the research project (e.g., human subjects, animals, disease, equipment, and techniques), including the reasons why the facilities or other aspects of the proposed project are more appropriate than a domestic setting.

Question: Are small businesses eligible to apply?

Answer: Part 2 Section III: Eligibility Information of the NOFO includes small businesses among eligible organizations.

Please note: This NOFO is not part of the Small Business Innovation Research program. For more information on NCI SBIR, please see: https://sbir.cancer.gov/

Question: Are NIH intramural staff eligible?

Answer: Please see NOFO Part 2 Section III sub-section “Applications Involving the NIH Intramural Research Program” for information on how intramural staff can participate. It includes information on budget.

Question: Can proposals include more than one cancer site? Can proposals include pan-cancer or multi-cancer models?

Answer: Applicants should focus the vast *majority* of their comparative modeling activities on one of the 10 specified cancers only. The 10 specified cancers in the NOFO are bladder, breast, cervix, colon/rectum, esophagus, gastric, multiple myeloma, lung, prostate, and uterine.

Analyses involving comparative multi-cancer or cross-CISNET cancer site modeling could be included as part of the application in the “Rapid Response” section, for example. Comparative multi-cancer modeling could also be included as a small component of proposal if well justified.

Please note that cross-cancer site activities in general are expected as part of participation in the CISNET Consortium. Examples include collaborative projects with other CISNET awardees of different cancer types as well as working groups on common issues such as model accessibility.

Question: Will additional financial support be made available for the development of shared resources like software code and documentation for a new risk factor generator?

Answer: Promoting the accessibility of resources like risk factor generators that have applicability across one CISNET site and also beyond CISNET is strongly encouraged. Such activities could be included in an application budget as needed.

Question: Do you have any guidance on drafting the resource sharing plan?

Answer: For more information on the resource sharing plan, please refer to NIH guidance that can be found here.

Note: Please include the “Model Accessibility Plan” as an “Other Plan” separate from the “Data Management and Sharing Plan.”

Question: Can you clarify the term "established models”?

***Expanded* Answer:** In Section 1 under the “Purpose” heading, the NOFO states that “applicants must have established models for the cancer type with a demonstrated history of comparative modeling among the modeling teams for the selected cancer type.”

In this context, the term “established model” refers to a model that has been built, documented, validated and applied in comparative modeling analyses with a publication history at the time of the application. Please note that the comparative modeling history should be demonstrated through peer-reviewed publications where the results of the multiple models included in the application are compared and contrasted, and differences in results across models are discussed and explained.

A model/modeling group need not currently or previously have participated in CISNET to meet the criteria to be an “established” model. An established model is distinguished from a “de novo” model that would need to be built from scratch should the application be funded. This NOFO does not support development of new models from scratch (please see the section on non-responsive applications).

Applicants should also refer to the “Key Terms” and “General Requirements and Expectations” sections for additional information about characteristics of CISNET models in particular.

Question: Should Attachment 2 contain its own list of references? If so, would those count against the page limit (10 pages for all 3 attachments)?

Answer: From the NOFO, the specific instructions for Attachment 2 are:

> “Provide a table summarizing the prior modeling analyses. The table should use rows for prior model analyses and columns to describe important attributes such as model groups participating, key findings and related publications/products. Analyses can be clustered area of coverage in the cancer control continuum (e.g., prevention, screening, diagnosis, treatment, surveillance, end-of-life) as applicable.”

As noted, the attachment should highlight associated publications and products from the prior analysis. Applicants should determine how best to cite and format references to fit within the page constraints for the attachments and provide enough detail so that the attachment could be a standalone document and readers can assess impact. For example, applicants may wish to include a subset of identifying information like author(s), journal, year, and PMID/PMCID for a publication.

The combined page limit for the 3 attachments is 10 pages total.

Question: Can a modeling group include investigators at more than one institution? Can there be multiple PIs from the same institution?

Answer: Applicants should propose a multi-PI structure in response to this NOFO. Please see the “research strategy” subsection in the NOFO Section IV and the Cooperative Agreement Terms and Conditions in Section VI. The application should detail and justify the leadership team structure including the responsibilities and functions. The budget and budget justification should also reflect and describe the team structure.