

# 2026 CORPORATE PROSPECTUS

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**Gwenesta B. Melton MD,FACR** Vice President, Co-Chair Advocacy



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**Sheetal Desai MD, MSEd, FACR** Director

AWIR sincerely thanks our current partners who have sponsored our efforts to **promote** the science and practice of rheumatology, **foster** the advancement and education of women in rheumatology, and **advocate** access to the highest quality healthcare and management of patients with rheumatic diseases.

AWIR is the **only** Rheumatology Association in the country with a group of women-only leaders, all from diverse backgrounds that is focused on developing women as leaders in medicine and addressing the issues of diversity, equity and inclusion for clinicians and patients.

While AWIR is proudly 100% women-led, we welcome all to join us in transforming the way our members and community develop as leaders in academia, clinical and professional settings.

### CELEBRATING OUR 11<sup>TH</sup> YEAR

AWIR is a global organization with members in **100+ countries**.



In 2024, AWIR launched new Global Chapters across several markets, including the **United Kingdom**, **Ghana**, **Morocco**, **Vietnam**, and **Colombia**. The expansion of our global network supports the sharing of scientific information and the development of the next generation of leaders in Rheumatology.



### **OUR MISSION FOCUS IN 2026:**

- 1. Strengthen our Local Chapter and Global communities
- 2. Drive impactful research in rheumatology and its comorbidities
- 3. Empower the next generation of rheumatologists with leadership skills
- 4. Advocate for better health policies for clinicians and access to care for patients
- 5. Educate the rheumatology community with the latest science for improving outcomes
- 6. Promote the importance of equity, diversity, and inclusion for all populations
- 7. Build a network of rheumatologists that will develop future leaders.

More and more, of our trainees are women. But what we find is that when you look in positions of leadership, those positions are less likely to be filled by women.

PRIYA REDDY MD, FACR

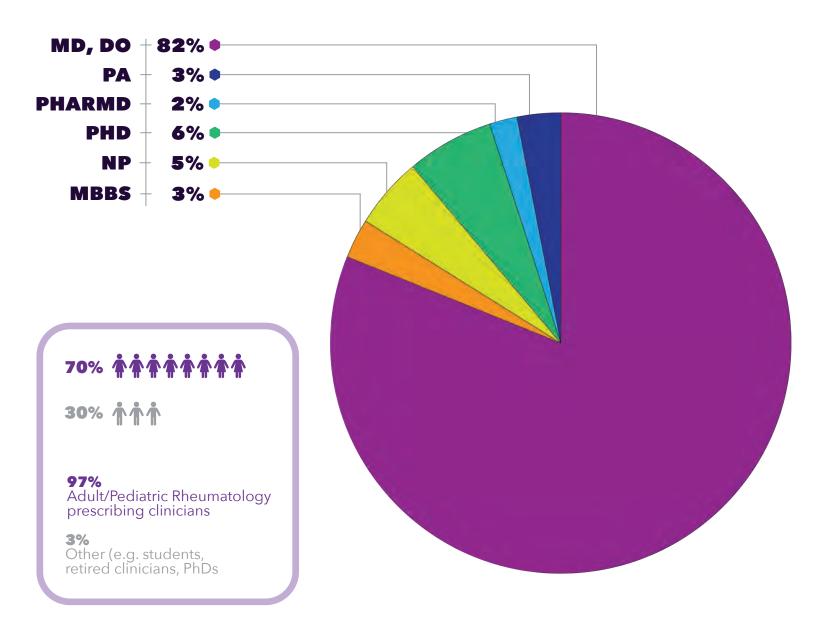
AWIR SECRETARY & TREASURER



### **Strengthening our Local Chapter and Global Communities**

AWIR's core strength is its membership and the community we build together with shared objectives to promote women and men as leaders, equity in all aspects of care and for providers, and to improve patient outcomes.

### AWIR MEMBERSHIP BREAKDOWN



# **Support Impactful Research in Rheumatology and Co-morbid Diseases**

Led by the President of AWR, Gail Kerr, MD, Sharon Dowell, MD, Director of the AWR, Grace C. Wright, MD, PhD, President of AWIR

The Association of Women in Research is led by Dr. Gail Kerr, President of the Association of Women in Research, Dr. Grace Wright, and Dr. Sharon Dowell

Over the past 3 years, the AWR Alliance has initiated **more than 9** ongoing clinical studies.

AWIR's focus is on independent research to address the unmet need in rheumatic diseases and ways to improve patient outcomes.

We strive to increase diversity and equity amongst both investigators and patients in clinical trials.



Grace C. Wright MD, PhD



Gail Kerr, MD & Sharon Dowell, MD





## Support Impactful Research in Rheumatology and Co-morbid Diseases

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- 1. Increasing Advocacy Awareness in Early Career Rheumatologists: A Web-Based Educational Tool. *Published*
- 2. Geographic Variation in Disease Burden and Mismatch in Care of Rheumatoid Arthritis Patients in the United States. *Published*
- 3. Associations of Cost Sharing on Rheumatoid Arthritis Disease Burden. *Published*
- 4. Ethnic differences and Regional Variability in Psoriatic Arthritis Disease: Examining Disparities in Patient Burden and Physician Care. Ongoing
- 5. Characteristics, Social Determinants of Health and Health Equity: Determinants of Inequity in bDMARD Utilization in Psoriatic Arthritis patients in the United States:

  Opportunities for Intervention. Ongoing

- 6. Administrative Barriers to Access to bDMARD and Outcomes in Psoriatic Arthritis patients. In development
- 7. Understanding the Definition of Equity in Health Care: Patients and Provider Perspectives. In development
- 8. Contributors of SLE Disease Flares and Hospitalizations. *In development*
- 9. Optimizing the Rheumatology Workforce:The impact of Clinical Settings on PatientOutcomes. In development





AWIR is committed to growing the number of trained clinicians in Rheumatology; we actively support our Trainees and Fellows to participate in clinical research, Local Chapters and at our Annual Conference.

#### WE INVEST IN THE NEXT GENERATION OF LEADERS.

AWIR is committed to building a bridge to the future for our upcoming Leaders by providing them with leadership skills.

Launched in 2024, almost **70 Local Chapter Leaders** attended the training and we expect a similar number in 2025.

- Each year we support trainees and fellows from the **United States**, **Canada** and **Mexico** to attend the Annual Conference for networking, hands on training, education, and opportunities to present original research.
- In 2024 we introduced Poster Tours for trainees and fellows in addition to oral presentations at our Annual Conference. **More than 60** trainees and fellows attended AWIR 2024 in-person.
- In 2025, AWIR received **more than 100** abstracts from AWIR trainees and fellows to present at our Annual Conference.
- Each year we hold workshops specifically designed to support the career paths and education of trainees and fellows.
- To assist in networking we hold several events each year; including at the: AWIR Annual Conference; Local Chapter meetings; ACR and EULAR, and numerous conferences around the globe.

 AWIR provides mentoring for AWIR trainees and fellows via our leadership and Local Chapters.





AWIR Championed Advocacy Efforts at the Federal and State Level in 2024

Led by Drs Gwen Melton and Stephanie Ott

### PRESCRIPTION DRUG AFFORDABILITY BOARDS (PDABS)

AWIR strengthened its efforts to address challenges posed by Prescription Drug Affordability Boards (PDABs) by countering policies enacted by state PDABs and sought to influence related legislation.

- AWIR opposed bills proposing the establishment of new PDABs, including meeting with Illinois' bill
  sponsor to voice concerns. Their efforts contributed to the bill's eventual failure to pass, reflecting AWIR's
  commitment to preserving patient access and physician involvement in drug affordability initiatives.
- AWIR led a grassroots campaign leveraging the **Virginia Local Chapter** to help win support to oppose **SB 274**, which **ended up being vetoed by the governor**.
- Provided detailed comments on **Maryland's** *Draft Upper Payment Action Plan* and highlighted concerns about **Colorado's PDAB policies**, specifically regarding the potential unintended consequences of setting an Upper Payment Limit and limitations on local physicians' participation in meetings.

### **PBM REFORM**

AWIR, as a founding member of the **Alliance for Transparent and Affordable Prescriptions** (ATAP), intensified its advocacy for PBM reform, emphasizing rebate pass-through and delinking policies at both federal and state levels.

- AWIR took to the Hill and met with Congress in November to champion legislation such as S. 2973, the
   Modernizing and Ensuring PBM Accountability Act, and S. 3430, part of the Mental Health, Lower Cost
   Drugs, and Extenders Package. These initiatives aim to increase transparency and ensure that rebates
   benefit patients directly, thereby improving access to affordable medications.
- Supported **California's SB 966**, which, despite passing both legislative chambers was ultimately vetoed by the governor. These ongoing efforts reflect AWIR's commitment to **advancing fair and transparent pharmacy**





### **COPAY ACCUMULATOR ADJUSTMENT PROGRAMS**

AWIR continued its efforts to combat Copay Accumulator Adjustment Programs at both the State and Federal levels.

- As a member of the **All Copays Count Coalition (ACCC)**, AWIR actively participated in their **State** subgroup to coordinate strategic actions and provide a voice for rheumatology through **Federal letter campaigns to limit patient's out of pocket payment**.
  - o Supported the HELP Copays Act at the Federal level during Hill Day where attendees **engaged with over 25 congressional offices to educate them on the impact of copay accumulators**.
  - o Launched grassroots campaigns at the State level advocating for legislative change, contributing to the passage and signing into law of bills in **Oregon** and **Vermont** that address these programs.

#### **OTHER ADVOCACY INITIATIVES AND POLICY SUCCESSES**

- The organization championed reforms to **step therapy protocols in New Mexico and Vermont**, resulting in bills being signed into law.
- Supported **lowa's Non-medical Switching bill, HF262**, which became law, and contributed to legislative efforts in **Kentucky** that led to the enactment of **white bagging** legislation.
- Organized grassroots campaigns to address **Medicare payments**, opposing further reimbursement cuts in the physician fee schedule for rheumatology practices. AWIR submitted comments to **CMS** on the draft rule, aiming to address the Medicare cuts.

When we're in the room with the patients, it's a one on one experience. If we can't provide the medications that we are prescribing because patients can't afford them, then what good are they?

TEHRANI MEHRANI MD, FACR



In line with our mission AWIR seeks to develop educational content to support:

- 1) Clinical Competence in Rheumatology and comorbidities
- 2) Cultural Consciousness to improve patient outcomes and reduce disparities amongst patients and clinicians
- 3) Collaborative Care to promote a holistic approach to care and improve patient outcomes across multiple specialties that impact our patient's lives
- CME and non-CME HCP education
- Content specific to the needs of Advanced Practice Providers
- Partnership with other organizations to disseminate relevant content in meetings, as digital content, and as web-hosted material

# Promote the importance of equity, diversity, and inclusion for all populations

AWIR highlights diversity, equity, and inclusion gaps and recommendations in its publications and in educational programming with a goal of fostering change in the clinical community and patient outcomes.



Corporate Membership Benefits	<b>AMETHYST</b> \$100,000+	<b>SAPPHIRE</b> \$75,000	<b>RUBY</b> \$50,000	<b>EMERALD</b> \$30,000
Corporate meeting (In-person or Virtual) with members of the Board at AWIR 2026				
Podium recognition at all conferences	•	•		
Company name and logo and recognition of support on Association's website				
Opportunity to host a 2- or 4-hr Advisory Meeting with AWIR Board at an Annual Conference or in-person meeting**				
Collaborate on clinical trials				
Right of refusal on all additional sponsorships (e.g. Product Theaters)**	FIRST RIGHT	SECOND RIGHT		
Opportunity to collaborate with AWIR to educate clinicians in the AWIR network about sponsor's ongoing clinical studies and/or recruitment challenges as appropriate.  Via AWIR's email campaigns and up to 3 times in a year (requires Board approval)				
Invites to AWIR's ACR and EULAR receptions	10	8	6	4

<sup>\*\*</sup> Additional cost required



### **Quarterly Webcast Promotion** \$15,000 each quarter

- Promote your online/on demand educational programming via our newsletter of over 14,000+ subscribers with embedded banners and copy to our readership
- Copy and banners must be approved prior to submission to AWIR; layout and distribution is managed by AWIR
- AWIR's newsletter has over a **50%** open rate
- Subscribers includes US and global HCPs (MD, DO, NP, PA, Pharm D and RN) across specialties but treating patients with Rheumatic disease.
- Available to Corporate Partners





# Virtual 3-hr Summits with Community Watch Parties

Looking for opportunities to educate HCPs on your products benefits and improve patient outcomes? AWIR's virtual Summits with Community Watch Parties are the perfect solution with consistent HCP audiences.

In 2024 through Q2 of 2025, AWIR successfully held 6 Summits with an average of 20 Watch Parties for each Summit. We averaged 400 - 480 inperson and virtual registrants at each Summit.

Each watch party will have a host with a link to project the program on a screen at their location. AWIR provides the location, food and beverage for each Watch Party.

### Partners have the opportunity to have up to 6 company representatives attend individual watch parties - limit one attendee / watch party.

Of Note: To hold a Summit Product Theater and/or Educational Symposia partners must also secure a Magenta Summit meeting support.

In 2026 AWIR will hold 3 virtual Summits that will livestream content to AWIR Community Watch Parties and others registered; creating a hybrid experience but with fewer logistical hurdles that limit audience participation.

#### To hold a virtual Summit AWIR:

- Builds out a customized virtual platform for attendee interaction and live streaming for the Watch Parties and all viewers registered
- Give partners the opportunity to hold a 30-minute Product Theater or Medical Symposia at a Summit. Available to Corporate Sponsors at the Amethyst and Sapphire levels





### **Summit Opportunities**

**Magenta** \$30,000

- Three banner ads in AWIR newsletters to promote a Product Theater or Educational Symposia (partner supplies art files)
- Corporate Roundtable 5- minute presentation
- 5-minute pre-recorded video played before and during the breaks on the live stream
- 6 attendees at Community Watch Parties limit one attendee / watch party
- Recognition of support at the event
- Opportunity to purchase Product Theater or medical symposia\*

#### SAMPLE AGENDA

12:00 - Educational Symposium

12:30 - Opening Remarks and AWIR updates

13:00 - CME Session

14:30 - Break and Corporate

Roundtable

15:00 - Educational Symposium

15:30 - AWIR Update & Closing

Remarks

**Lavender** \$20,000

- 5-minute pre-recorded video
- 4 attendees at Community Watch Parties limit one attendee / watch party

**Product** \$50,000

- 30-minute Scientific Podium presentation or Product Theater, presented by a creden tialed Speaker (topic and Speaker to be approved by the Board)
- Summit support at the Magenta level is required
- Partners have the option to provide AWIR with a promotional banner to be included in AWIR newsletters
- Inclusion of the Product Theatre in AWIR marketing and promotion in digital media and our newsletter
- Please discuss topic and Speaker prior to submission (grace.wright@awirgroup.org)

\*Open to Amethyst and Sapphire Corporate **Sponsors** 



### Summit CME Session

**\$275,000** per segment

### **AWIR'S SUMMIT SERIES: PROVEN, SCALABLE, AND IMPACT-DRIVEN**

**For over a decade**, AWIR's Summit Series has united rheumatology and cross-specialty providers for high-impact, accredited education and networking.

 Our Virtual Summit + Local Watch Party model blends the convenience of online learning with in-person connection - drawing 500+ U.S. and global HCPs per event.

Each Summit includes a 1.5-hour accredited session that delivers practical, evidence-based strategies for improving outcomes in complex rheumatic disease.

In partnership with myCME, each session becomes a high-quality enduring activity, extending visibility and reach. Last year alone, AWIR's content on myCME reached 20K visitors and 7K learners.

Using AMA data and medical claims, myCME precisely targets clinicians who actively manage rheumatic conditions, ensuring relevance and engagement.

### **2026 DATES**

### March 7

IgG4-Related Disease: Burden, Presentation, Mechanisms of Action, and Treatment

### **September 26**

CAR T-Cell Therapy: Evidence, Adaptation, and Deployment in Rheumatology

### October 24

PsA and Obesity:
Inflammatory Pathways,
Impact on Outcomes,
and New Treatment
Strategies



### **Medical Education Opportunities**

**Immunology Bootcamp** \$60,000 per podcast **Podcast Series** 

A series of 30-minute podcasts exploring the immunologic pathways and unmet need of various diseases, with two speakersAWIR Leaders (MDs, DOs, NPs and PAs) with case-based patient presentations on:

- 1. Sjogrens signaling pathways and current and upcoming treatment options
- 2. Rheum and GI: Inflammatory burdens in the joint and the gut
- 3. Obesity and inflammatory burden in Rheumaology
- 4. HS management from the dermatology and Rheumatology perspectives.

Podcasts to be accredited and hosted via the AWIR Website and myCME (see page 16 for more information on myCME), marketed by AWIR via our social media channels, AWIR's digital newsletter to more than 14,000 subscribers, a direct email campaign with a purchased list of clinicians, and presented at Local Chapter Meetings.

Available to Corporate Partners



**Video Series** \$175,000 per segment

### NUTS AND BOLTS OF RHEUMATOLOGY CARE: ON-DEMAND VIDEO LIBRARY FOR APPS, FELLOWS, AND EARLY CAREER RHEUMATOLOGISTS

● More than 6,000 HCPs Reviewed Phase I Activities on RA and AXSPA

In 2024 with generous support from our partners, AWIR launched the first phase of Nuts and Bolts on myCME's website as an enduring program.

The goal of the program is to educate and expand the rheumatology workforce, by providing ongoing education for APPs and early career clinicians/Fellows.

**Phase 1** has been widely disseminated via my CME, featuring an AWIR Learning Center with short video modules on RA and AXSPA.

MyCME's targeted ads to HCPs either prescribing medications and/or using diagnosis codes for rheumatic diseases widened the reach of Phase I to include 1500+ Primary Care Clinicians and APPs treating patients with Rheumatic disease.

In addition to AWIR's marketing to its 14K list serv, this program will be accredited and also marketed by myCME.

myCME™ is a medical education website that delivers certified CME/CE activities (https://www.mycme.com/) and it is one of the largest online providers of accred-ited content; currently they have more than 100 courses on offer for NPs/PAs.

myCME uses claims data to target the APP community and other HCPs treating patients with rheumatic disease.





### **Medical Education Opportunities**

### NUTS AND BOLTS OF RHEUMATOLOGY CARE: ON-DEMAND VIDEO LIBRARY FOR APPS, FELLOWS, AND EARLY CAREER RHEUMATOLOGISTS (CONT'D)

MyCME statistics for the past 12 months include 629,697 registered members; 7,373,045 page views; and 300,000 completed exams.

### **2024 Phase 1: Landing Page** (Completed)

- 1. Rheumatoid Arthritis
- 2. Spondyloarthritis

Video segments are 1-hr each.

AMIR Advertisition AWIR IN PARTNERSHIP WITH MYCME PRESENT: THE **NUTS & BOLTS** OF RHEUMATOLOGY APP RESOURCE CENTER A \*NEW\* On-DEMAND VIDEO LIBRARY FOR NPS, PAS, EARLY-CAREER RHEUMATOLOGISTS AND FELLOWS

### 2026 Phase II: Learning & Resource Center with additional videos

(Final Topics TBD dependent on sponsorship)

- 1. Lupus/SLE Novel MOAs on the horizon
- 2. Sjogrens It is more than just dry eyes and dry mouth
- 3. When it is not just the joint; Identifying and treating skin conditions across skin colors (HS, PSO, AD)
- 4. PMR/GCA
- 5. Obesity and inflammatory burdens in Available to Corporate Partners. SPA patients (Videos; 1-hr)

- 6. Patient-Centered Strategies in IgG4 Related Diseases (Videos: 1-hr)
- 7. Promise of CAR-T in rheumatic diseases (Video; 1hr)





**4-hour Advisory Board** \$45,000 **2-hour Advisory Board** \$35,000

Held in advance of our **Annual Conference (4 available)** and January before an AWIR Board Meeting (2 available); this is an opportunity to add on a 4- or 2-hour advisory board with the AWIR Board of Directors.

AWIR provides meeting space, ability to utilize our AV partner on-site at our Annual Conference, and faculty members already in attendance, with no additional travel or hotel costs.

Dependent on the sponsor requirements, additional AV, logistics and/or support costs will be the responsibility of the sponsoring company

Available for Corporate Sponsors.





# Strengthening our Local Chapter Community & Membership

Led by **Dr. Gwenesta B. Melton**, AWIR Vice-President & Co-Chair, Local Chapters & **Teraneh Mehrani**, AWIR Co-Chair, Local Chapters

**Membership\*** 

\$100,000

\*limited availability

Available to Amethyst Corporate Sponsors only

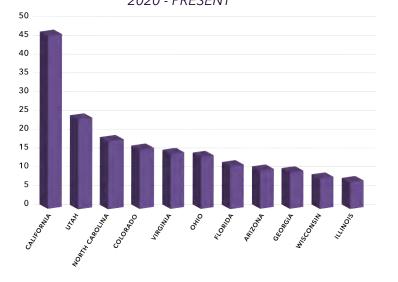
Your opportunity to educate our members with speaker programs and/or roundtables; as well as networking in small intimate group settings.

### **BY THE END 2024**

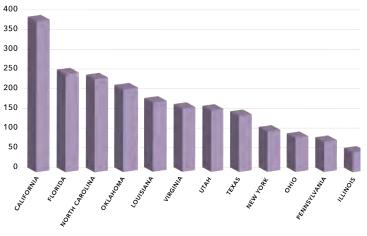
95+ Local chapter leaders100+ Local chapters meetings held1000+ attendees



### TOP 11 STATES 2020 - PRESENT



### MEETING ATTENDEES TOP 12 STATES 2020 - PRESENT



# **Strengthening our Local Chapter Community & Membership** (cont'd)

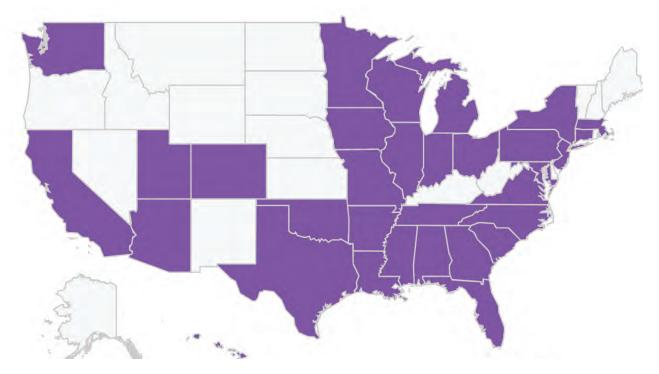
### **BENEFITS:**

- The opportunity to have an educational company sponsored event/speaker program, on a topic and date mutually agreed on by the Local Chapter Leader and supporting partner
- Additional costs required for meals and AV as required by the partner
- Company personnel must be invited to attend and/or participate in the in-person meetings, in consultation with Dr. Gwenesta Melton and the Local Chapter Leader
- Industry participation for speaker engagements is at the discretion of the Local Chapter Leader

### **ATTENDEES:**

Prescribing clinicians within the Rheumatology Community (MD, DO, NP, PA, and Allied Professionals) from the local chapter area.

### **AWIR LOCAL CHAPTERS**





### **Clinical Research Opportunities**

Led by the President of AWR, **Gail Kerr, MD, Sharon Dowell, MD,** Director of the AWR, **Grace C. Wright, MD, PhD,** President of AWIR

We welcome all our Corporate Partners to collaborate with our Leaders on mutually agreed upon research endeavors.

Individual independent research grants are budgeted based on objectives determined by AWR and submitted via grant portals to our partners.

AWIR has leaders with expertise in conducting observational and clinical studies, and surveys.

AWIR also has Global Chapters in many markets with large numbers of biologicnaive patients and looking to become more educated on conducting clinical trials and/or already engaged in trials.





### **AWIR Advocacy**

#### WHY PARTNER WITH AWIR?

The Association of Women in Rheumatology advocates for access to the highest quality healthcare and management of patients with Rheumatic diseases. We believe in creating a strong network of advocates that will support AWIR policy priorities at both the state and federal level.

#### WHAT DOES AWIR DO IN ADVOCACY?

Our advocates are working on the frontline of healthcare and have first-hand knowledge of the struggles our patients endure. To help provide support for our advocates and encourage more to participate, AWIR has created on-line education, and provides in-person virtual training for upcoming Rheumatologists and others in the clinical community.

### STATE & FEDERAL ADVOCACY

AWIR focuses on educating legislators, government officials and the corporate community on the impact that policy/procedural changes may have to the patient's quality of care and disease management options.

AWIR also collaborates with patient organizations and other national societies to elevate awareness and provide a forum for an exchange of ideas, fostering a collaborative environment.

### **AWIR's 2025 Policy Priorities**

- Accumulator Adjustment **Programs**
- Prescription Drug Affordability Boards
- PBM Reform
- 340B Reform
- Health Equity
- Gender Pay Gap

- Workforce Shortage
- Medicare Reimbursement
- Step TherapyNon-Medical Switching
- Prior Authorization
- Biomarkers
- White Bagging



Advocacy Partnership Opportunities	<b>PLATINUM</b> \$90,000	<b>GOLD</b> \$70,000	<b>SILVER</b> \$50,000
Acknowledgement of support at Hill Day and AWIR's Annual Conference			
Access to quarterly newsletter updates			
Includes registrations for advocacy personnel to the Annual Conference	2	1	1
Monthly meetings with Advocacy Leadership on issues at both the state and federal level			
Opportunity to meet with AWIR advocacy committee at the Annual ACR Conference			
Includes attendees at the Annual AWIR Hill Day pre-meetings	2	1	
Company logo on AWIR website as recognition of Platinum Level Partnership			
Opportunity to meet with the advocacy committee at the Annual Conference			



Educational Webinars for Change

\$25,000

- Partner with AWIR to support the education of small groups (6-8) of AWIR's Local Chapter leaders and members via up to 4 one-hour webinars in a 12 month period.
- The goal is to better prepare our up and coming leaders at the community level to be advocates for themselves and their patients.
- Partners are welcome to collaborate with AWIR on the educational objectives.
   Partner will be invited to attend the webinars hosted by AWIR to hear first-hand what the challenges are amongst providers striving to get access to care and treat ments across the U.S.

Building Foundations for Advocacy Leadership

\$25,000

- Partner with AWIR to provide in person policy education and support best practice sharing amongst our Local Chapter Leaders and members looking to hone their skills in advocacy.
- The objective is to arm these future leaders with information to grow as experts in advocacy and share experiences at the Federal and State level when interacting with legislators and Committees.
- Supporting partners are welcome to collaborate with AWIR on the topics of interest for the 3-hr in person seminar, hosted by AWIR.
   Includes an invitation to participate in the seminar in Washington, D.C.

Seminar Enduring Material

\$15,000

• Creation of enduring material of the seminar to be hosted on the AWIR websites for members.

### **Fellows Funding**

AWIR is seeking to fund **two-year Fellowship programs** at accredited US medical institutions. AWIR is requesting support from several corporate entities. AWIR hopes to continue the program over the next 5 years

### **FUNDING LEVELS**

- Platinum \$150,000
- Gold \$100,000
- Silver \$75,000
- Bronze \$50,000

More than 54 million people in the U.S. are affected by arthritis. The U.S. Rheumatology workforce is drastically declining, creating a disparity between patient access to specialized care for rheuma- tologic diseases and the availability of a diverse Rheumatology workforce. The American College of Rheumatology 2015 Workforce Study evaluated availability and projected the supply and demand for rheumatology care from 2015 through 2030.1

In the 2015 study there were **4,497 full time clinical Rheumatologists**, but the demand for rheumatologists required **5,615 full time physicians**, **36% more than available supply**. By 2030, that number was projected to **decline further by 31%**. The study emphasized that even at a 100% position fill rate per year and no reductions in the number of fellow positions offered, the average number of clinical Rheumatologists would not meet demand.





Funding Rheumatology fellowship training programs is especially important in underserved areas of this country, where patients may not have access to lifesaving treatments that can prevent disability and decrease the risk of life-threatening comorbidities related to rheumatic diseases.

According to the National Resident Matching Program (NRMP) Match Data from 2018, there were 104 credentialed Adult Rheumatology fellow positions unfilled.<sup>2</sup> The main reason for unfilled Fellow positions was the lack of funding. AWIR's goal is to enhance the diversity in Rheumatology providers and in so doing enhance care to a diverse and underserved patient population.

A Rheumatology fellowship involves a 2-3-year training period and the costs of funding a fellow is \$100,000 per year on average.

AWIR would like to provide funding to credentialed rheumatology training programs, who are unable to support Fellows and will create a process where credentialed 2-year Rheumatology Fellowship Academic programs with unfulfilled available slots would be invited to apply for this opportunity.



- 2015 American College of Rheumatology Workforce Study: Supply and Demand Projections of Adult Rheumatology Workforce, 2015-2030. Battafarano DF, et al. Arthritis Care Res (Hoboken). 2018 Apr; 70(4): 617-626.
- NRMP Results and Data Specialties Matching Service, 2018 Appointment Year Report. National Resident Matching Program, Washington, DC. 2018.



### **Payments**

### **EFT TRANSFERS:**

JPMorgan Chase Bank, N.A. P O Box 182051 Columbus, OH 43218 -2051 Please contact AWIR for banking details.

### **MAIL CHECKS TO:**

Attn: Grace Wright, MD PhD, 345 E 37th St, STE 303c, NY, NY 10016

