



Identifying the Effects of GLP-1 Medications Among Individuals with Cardiovascular, Kidney and Metabolic (CKM) Disease

Key Dates

RFP Posted:	Dec 1, 2025
Letter of Intent	Jan 19, 2026
Invitations to submit application	Jan 26, 2026
Application Deadline	March 23, 2026
American Heart Association Peer Review:	April, 2026
Notification of Awards:	May 15, 2026
Award Start Date:	July 1, 2026

Overview

Glucagon-like peptide-1 and glucose-dependent insulintropic polypeptide receptor agonists (GLP-1/GIP agonists) are novel drugs for the treatment of cardiovascular kidney metabolic (CKM) syndrome. A rapidly growing body of evidence suggests that these therapies have favorable effects on cardiovascular, metabolic, kidney, and liver outcomes. While the GLP-1/GIP agonists offer promise for both the primary and secondary prevention of CKM syndrome, the potential for improving population health appears to vary by demographic, clinical, and healthcare factors. Understanding whether there is variation in CKM risk response to the drugs will be crucial for pinpointing population heterogeneity in their impact.

The purpose of this Request for Proposal (RFP) announcement is to fund research focused on the potential contribution of GLP-1/GIP agonists to reducing the CKM burden in the coming years.

We invite proposals for a research project focused on evaluating the effects of GLP-1 and/or GIP agonists among individuals with cardiovascular, kidney, and metabolic disease (CKM) and/or obesity.

Proposals are welcomed from researchers with experience in causal inference methods, machine learning, and cardiovascular research. Collaborative proposals involving multidisciplinary teams are encouraged.

Proposals are encouraged to leverage data sources including de-identified claims data, electronic health records and prospective cohort studies.

A successful application will address one or more of the following:

1. Examine GLP-1/GIP medication initiation, adherence, dose escalation, and/or discontinuation among individuals living with CKM disease and/or obesity, and assess how these patterns vary across

population subgroups disproportionately affected by obesity.

2. Develop and apply causal inference approaches (e.g., target trial emulation, quasi-experimental designs, marginal structural models) to examine the effect of GLP-1/GIP medications with CKM risk reduction or hepatic outcomes in diverse populations.
3. Identify and quantify heterogeneity in the effects of GLP-1/GIP medications on CKM outcomes according to demographic, clinical, and healthcare factors using causal inference and/or machine learning methods to identify heterogeneous treatment effects.
4. Develop and apply population modeling approaches (e.g., validated state-transition or microsimulation, models) to project the population health burden of CKM syndrome and examine the effect of GLP-1/GIP therapies on health outcomes, health care spending, and/or societal productivity losses. For example, models may examine the population health impact and/or cost-effectiveness of these therapies under alternative scenarios of uptake and adherence, alone and/or in combination with other preventive and therapeutic strategies. Models may also examine the projected effect on health inequities under varying scenarios of access and uptake.

The AHA will fund up to five awards. Each award will be for 2 years, with a total funding amount of \$300,000 (including 10% indirect costs).

- The American Heart Association offers the use of the Precision Medicine Platform to all researchers. It is not a requirement. For example, if investigators are accessing data through a third party, the data may not be allowed out of the secure environment of the third party.
- For researchers using the American Heart Association Precision Medicine Platform, an additional Amazon Web Services (AWS) service credit (up to \$30,000) may be provided for computational time, use of AWS tools and infrastructure, and storage. Credit amount will be determined based on estimated need over the duration of the grant.

Before you apply

- The project lead at each site must be an American Heart Association professional member.
 - Join or renew when preparing an application in Proposal Central, [online](#) or by phone at 301-223- 2307 or 800-787-8984.
 - Membership/Partnership processing takes 3 to 5 days; do not wait until the application deadline to renew or join.
- Projects can include collaborators from multiple areas of expertise; however, the project proposal must be submitted by a project lead representing an academic or non-profit organization based in the United States.
- Applicants are encouraged to leverage the best data sources to address the hypotheses, including de-identified claims data, electronic health records and epidemiological studies. Many options exist for researchers to work with third-party data vendors including but not limited to Dandelion Health, Truveta, and Komodo Health.
- Preference will be given to applicant organizations that are institutes of higher education, public entities, or nonprofits that are tax exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or Type III supporting organizations. Other types of nonprofit and for-profit organizations are also eligible to apply. The American Heart Association may require additional documentation.

- Organizations that are currently funded through other American Heart Association funding mechanisms can apply.
- Investigators can submit multiple proposals. Each proposal requires a separate letter of intent.

How to apply: Letter of Intent (required)

1. Letters of Intent are mandatory and are due Jan 19, 2026, at 3 pm CT via [ProposalCentral](#).
2. All Letters of Intent will be reviewed. Those responsive to the RFP will be invited to submit a full application.
3. Your letter of intent (2-page limit) should include the following information about the proposed project:
 - Project title
 - Name and contact of project lead
 - Names, titles, affiliations, relevant expertise of co-investigators
 - Names of any collaborating organizations
 - Data to be used, statistical plan and power calculations
 - Approximate budget for the study
 - Planned approach and activities to achieve the goals

How to apply: Invited Proposal

Proposals must be submitted using [ProposalCentral](#), the American Heart Association's online submission portal. The online application requires you to provide information and answer questions beyond what is captured in this document. **Deadline is March 23rd, 2026 at 3 pm CT.**

Only invited Applicants may submit a full proposal. Applications invited to submit a proposal are chosen from the Letters of Intent. See [application resources](#) for additional guidance.

A review will take place with a diverse group of experts. Committee members will include data scientists and public health experts.

- 1. Research plan can be up to 6 pages (12-point font, single space, 1-inch margins on all sides)**
 - **Specific Aims (1 page)**
 - **Research and Methods and Operational plan to achieve the aims (3-4 pages).**
 - **Expected outcomes and deliverables, potential limitations, a timeline, and project success milestones. (1 – 2 pages)**
- 2. Works Cited** (pages for Works Cited are not included in 6-page limitation) **(1 page)**
- 3. Budget information including:**
 - a. Salary and fringe benefits of the project lead, mentor, collaborating investigators, and other participating research staff or faculty.
 - b. Project-related expenses including access to data from a third party, travel, and publication costs in accordance with institutional and American Heart Association policies. Please note that the American Heart Association does not fund the costs of program implementation or operations beyond what is established in an approved budget.

- c. Maximum of 10% institutional indirect costs may be claimed on the award.

Details and requirements

Duration

- Up to 2 years of funding from date of funding, contingent upon milestones and timelines being met.

Number of Awards

- The American Heart Association anticipates awarding up to 5 grants at a total of \$300,000 per award (including 10% indirect costs).
- The American Heart Association reserves the right to determine the final number of awardees.

Precision Medicine Platform, research environment, trial workspace

Each team may be eligible to use Amazon Web Services credits for computational time (up to \$30,000), use of tools and infrastructure, and storage within a secure and private workspace on the American Heart Association's Precision Medicine Platform to enable investigators in each team to collaborate and analyze data securely.

Data analysis is enabled in secure workspaces by a web interface that allows researchers to code in various languages, including R and Python, and to use statistical software including but not limited to SAS and R studio. The most up-to-date machine learning and artificial intelligence software available from Amazon Web Services is also included.

Researchers are also able to install their own tools.

The American Heart Association asks that the grantees also accelerate collaboration through the sharing of data and code as well as the coordination for interoperability of data to facilitate findability and sustainability. The American Heart Association fully supports the FAIR (Findable, Accessible, Interoperable and Reusable) guiding principles of data stewardship.

The Platform is HIPAA compliant. Learn more about the [Platform's Security Information](#).

To learn more about the Precision Medicine Platform:

- [Overview](#)
- [Full list of available analytical tools](#)
- [Register here](#) for a 60-day complimentary trial workspace to use during the application period.
- Once registered, login and go to the Data page and click Request Workspace (do not select any datasets).
- Within the form, please include the following text for your Researcher Purpose: **GLP- RFP**

Progress reports

Awardees must submit two progress reports: halfway through the award and at the conclusion of the award. Progress reports may take the form of a required written report in addition to video conferencing, phone calls, and/or face-to-face visits. Reporting will be focused on achievement of stated milestones as indicated in the project timeline. The American Heart Association reserves the right to request additional updates, site

visits, or reporting.

Public access

The American Heart Association's public access policy requires that all journal articles resulting from American Heart Association funding be made freely available in PubMed Central and attributed to a specific American Heart Association award within 12 months of publication. It is the responsibility of the awardee to ensure journal articles are deposited into PubMed Central.

The American Heart Association encourages researchers to submit their research for consideration in one of our [journals](#).

Open Data

Any factual data that is needed for independent verification of research results must be made freely and publicly available in an AHA-approved [repository](#) as soon as possible, and no later than the time of an associated publication or the end of the award period (and any no-cost extension), whichever comes first. In addition to fulfilling this requirement, awardees can also choose to make their data available in the American Heart Association's Precision Medicine Platform.

Additional Requirements

- The projects submitted can have no scientific or budgetary overlap with other work funded by the Heart Association or any other source.
- Any inventions, intellectual property, and patents resulting from this funding are governed by the association's [Patent, Intellectual Property and Technology Transfer Policy](#).
- The applicant/awardee and institution are responsible for compliance with all Heart Association research award policies and guidelines for the duration of any awards they may receive.
- Visit the Research Programs Awards Policies page for more information on this topic: American Heart Association [Policies Governing All Research Awards](#).

For questions and assistance: datascience@heart.org