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Connecting you to Heritage Provider Network

FEATURE STORY

Turning Immune Cells Into Cancer Killers: 2025 Merkin Prize Honors CAR T Cell Therapy Pioneers

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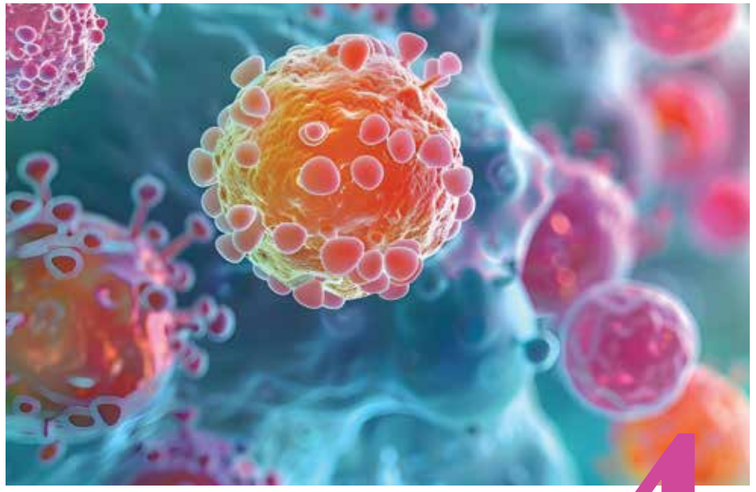

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Crossroads

With Dr. Richard Merkin

The unique perspective of Richard Merkin, M.D., as Innovation, Technology, Legislation and Care Delivery come together to impact the future of population health

From Vision to Impact

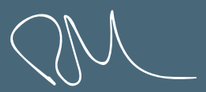
Progress in medicine is not just about discovery. It's about delivery. This issue highlights what happens when bold ideas are transformed into real-world care, whether in a research lab or a conversation between doctor and patient.

"As we mark the 50th issue of *TouchPoints*, it is a moment to reflect on how far we have come, and how much further we can go."

As we mark the 50th issue of *TouchPoints,* it is a moment to reflect on how far we have come and how much further we can go. From the earliest stories of pilot programs and emerging ideas to today's breakthroughs in gene editing, AI-driven care and cellular medicine, this publication has chronicled the evolution of healthcare innovation across our network and beyond.

This year, the Merkin Prize celebrates scientists who turned a powerful concept into CAR T cell therapies that are now saving lives. Their achievement is a reminder that the most profound innovations are those that reach people and improve the human condition.

Across our network, that same spirit is evident. Whether through artificial intelligence, community outreach or collaborative clinical models, our teams are advancing care with creativity and purpose. Innovation is not something we wait for. It is something we build, every day, in service of a healthier future.



Richard Merkin, M.D.
President and CEO of Heritage Provider Network

Richard Merkin, M.D.
Healthcare visionary Richard Merkin, M.D., has spent the last 40 years implementing a successful, workable business model to address the needs and challenges of affordable managed healthcare.

Turning Immune Cells Into Cancer Killers

Turning Immune Cells Into Cancer Killers

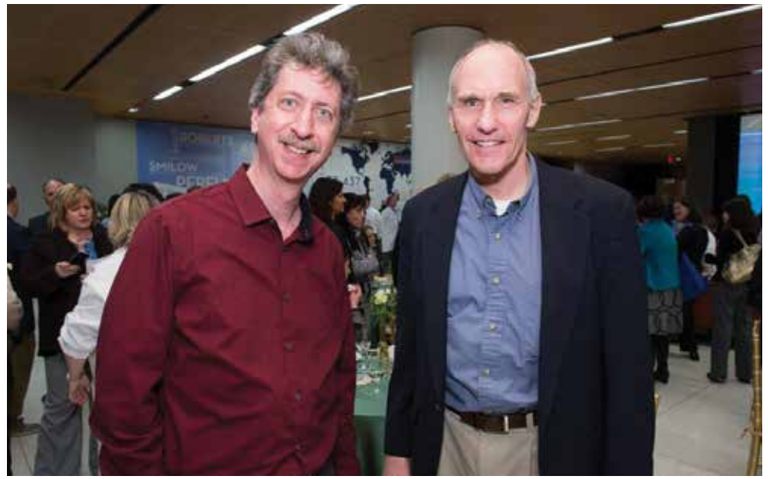
CAR T Cell Therapy Pioneers Honored With the 2025 Merkin Prize

In May 2025, the Broad Institute and the Richard N. Merkin Prize in Biomedical Technology honored four pioneering scientists whose work propelled CAR T cell therapy from a bold laboratory concept into a proven, lifesaving treatment. The honorees, Carl June, M.D., Bruce Levine, Ph.D., Isabelle Rivière, Ph.D., and Michel Sadelain, M.D., Ph.D., transformed medicine with a technology that reprograms patients' own immune cells to target and destroy cancer.

As Richard Merkin, M.D., observed, "This year's honorees created more than a therapy. They created a foundation for future generations of medicine. Their work restores hope in places where there was once none."

From Immunology Concept to Clinical Reality

In the world of biomedical innovation, few breakthroughs have had the sweeping impact of CAR T cell therapy. This cutting-edge treatment reprograms a patient's own immune cells, specifically T cells, to recognize and attack cancer. Scientists extract these cells, genetically engineer them to express special receptors called chimeric antigen receptors (CARs), and then infuse them back into the patient. Once inside the body, the modified T cells act as targeted cancer fighters, homing in on malignant cells and destroying them.



Once considered a radical idea, CAR T cell therapy has now become a powerful tool in the treatment of certain blood cancers, offering hope and healing to patients who once faced devastating odds.

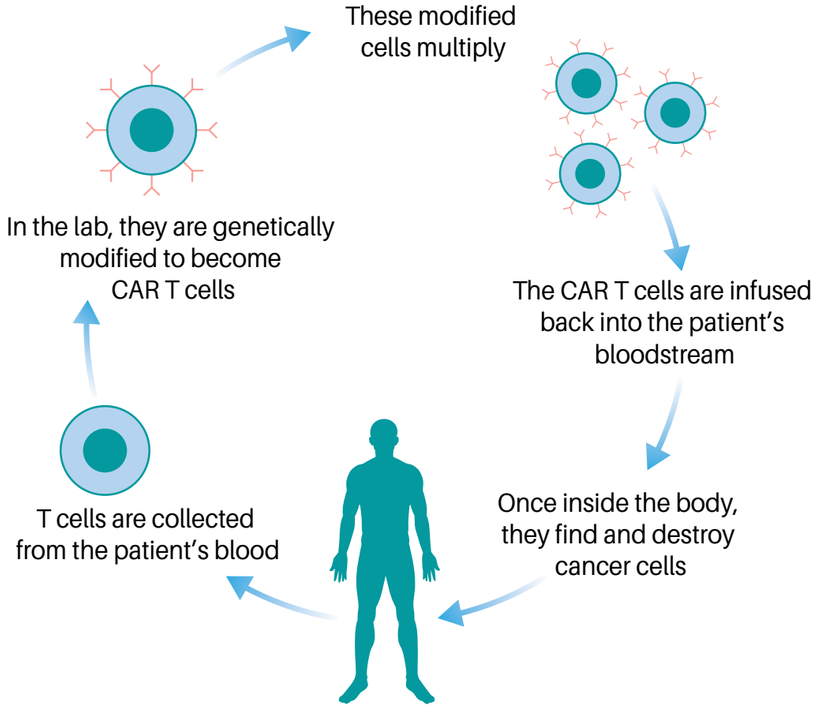
The concept of genetically instructing T cells to attack cancer dates back decades. In the mid-1990s, Dr. Sadelain at Memorial Sloan Kettering designed CARs by fusing antibody fragments with T cell signaling machinery and targeting CD19 on malignant B cells. He remarked that while the concept originated in the 1980s, it took about 20 years before it reached patients. His work laid the foundation for CAR T cells to be able to eliminate cancer cells and persist in the body.

Diving further into early persistence, Dr. June at the University of Pennsylvania showed engineered T cells could survive and trigger therapeutic responses in humans, first studying HIV patients. He described this durability as a turning point: "Our initial work with engineered T cells in HIV patients revealed that these cells could persist in the body far longer than anticipated. This unexpected durability sparked the realization that we could harness the immune system to combat cancer in a profound way." That insight helped propel CAR T cell therapy toward clinical application.

Through the 2000s, Drs. June and Levine constructed the infrastructure required to produce CAR T cells at therapeutic scale. Meanwhile, Drs. Sadelain and Rivière honed receptor design and regulatory-grade manufacturing required for clinical trials.

ABOUT THE HONOREES: From left to right: Drs. Isebelle Riviere and Michel Sadelain at a screening of "Living Drugs" in Toronto, part of Gairdner Science Week 2024; Drs. Bruce Levine and Carl June

Reflecting on their earliest human trial, Dr. Rivière described a pivotal moment: After treating the first patient with CD19-targeted CAR T cells, leukemic cells were undetectable in the bone marrow just weeks later. They ran the test three times to confirm. "We treated our first patient with CD19 CAR T cells back in 2007. We could not detect leukemic cells in the patient's bone marrow just three weeks after administering the CAR T cells. We ran the assay three times to convince ourselves that the tumor cells were indeed



gone. That was the 'eureka' moment — a moment of total marvel when we contemplated such an outcome."

Dr. Levine has described how the clinical data began to tell a revolutionary story. As CAR T cells expanded in patients and leukemia receded, "what once was a dream gave us hope for patients with relapsed and refractory blood cancers." He has also shared enthusiasm for next-generation approaches: capsule-ready mRNA-based CAR delivery via lipid nanoparticles, streamlining manufacturing and reducing cost, and treating autoimmune diseases, infectious diseases or even age-related conditions, all without ex vivo cell processing.

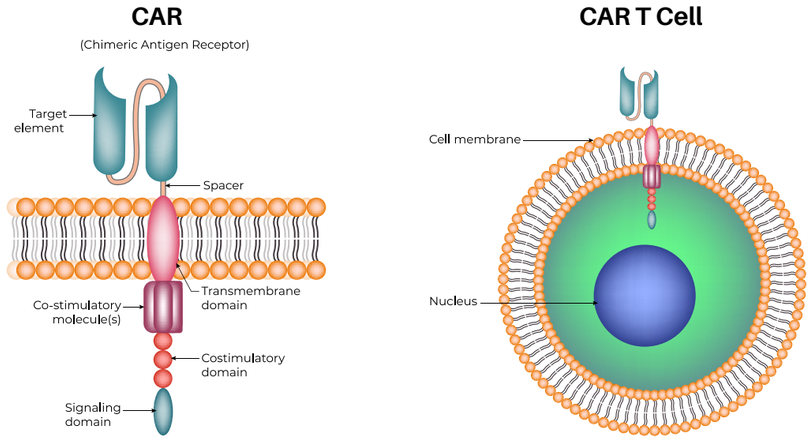
Impact That Resounds

These four researchers' contributions led to several Food and Drug Administration approved CAR T cell therapies, administered to tens of thousands of patients worldwide, many of whom had exhausted all other options and achieved lasting remissions. Their work has become a blueprint for how cutting-edge science can move from academic theory to clinical practice and, ultimately, to saving lives.

That path, from bench to bedside, is exactly what the Richard N. Merkin Prize in Biomedical Technology was created to honor. Unlike many scientific accolades that recognize discovery in its early stages, the Merkin Prize shines a light on technologies that have already reshaped medicine and are poised to do even more.

"This prize was born from a belief that impact matters," said Dr. Merkin. "We're not just looking for great ideas. We're recognizing the people who turn those ideas into realities that change lives."

Awarded annually by the Broad Institute and the Merkin Institute at Caltech, the prize recognizes innovation that has crossed the threshold from potential to proof. It celebrates biomedical technologies that have



delivered real improvements in human health — whether by transforming care, changing outcomes or opening entirely new frontiers.

As Harold Varmus, M.D., who chaired this year's selection committee, commented, the work of Drs. June, Levine, Rivière, and Sadelain "laid the foundation for a whole new class of treatments" and "opened doors for future innovations that will continue to transform human health."

For Dr. Merkin, the choice to honor CAR T cell therapy in 2025 was clear. "This team didn't just advance cancer treatment," he said. "They proved that cellular medicine could be real, reliable and repeatable. That's not just progress, it's a turning point."

What Comes Next

CAR T cell therapy is no longer confined to leukemia and lymphoma. Researchers around the world are pushing into solid tumors and autoimmune disorders. Advanced gene-editing, universal "off-the-shelf" cell products and automated manufacturing processes are rapidly evolving. Dr. Levine himself has said that in vivo CAR delivery methods could eliminate the need for personalized cell engineering entirely.

As the science matures, the challenge ahead is scaling production and ensuring global access. Dr. Levine's public commentary has emphasized that only a fraction of eligible patients currently receive CAR T cell treatment, and innovation must include broadening access.

A Prize That Marks a Turning Point

By honoring Drs. June, Levine, Rivière and Sadelain, the Merkin Prize underscores how a small group of scientists transformed an idea into a therapeutic revolution. From individual lab benches to real-world cures, their collective journey stands as a testament to decades of persistence, collaboration and belief in what science can achieve.

Beyond celebrating this moment, the prize aims to inspire others: The next bold discovery may already be underway, waiting for visionary minds to bring it to life.

ABOUT THE HONOREES

Dr. Carl June

Carl June, M.D., is the Richard W. Vague Professor in Immunotherapy at the Perelman School of Medicine at the University of Pennsylvania and director of the Center for Cellular Immunotherapies. A pioneer in the field of cancer immunotherapy, Dr. June led the first successful clinical trials using CAR T cell therapy, demonstrating its potential to produce long-term remissions in patients with advanced leukemia. His work helped usher in a new era of cellular medicine.

Dr. Isabelle Rivière

Isabelle Rivière, Ph.D., is director of the Cell Therapy and Cell Engineering Facility at Memorial Sloan Kettering Cancer Center and professor of Immunology in Medicine at Weill Cornell Medical College. She played a key role in developing and optimizing CAR constructs and advancing GMP-compliant manufacturing for early clinical trials. Her contributions have helped make cell therapy safer, more effective and more accessible.

Dr. Bruce Levine

Bruce Levine, Ph.D., is the Barbara and Edward Netter Professor in Cancer Gene Therapy at the University of Pennsylvania and founding director of the Clinical Cell and Vaccine Production Facility. He developed many of the critical processes and platforms that made large-scale, clinical-grade CAR T cell manufacturing possible. His work has been instrumental in translating laboratory discoveries into real-world treatments for patients around the globe.

Dr. Michel Sadelain

Michel Sadelain, M.D., Ph.D., is director of the Center for Cell Engineering at Memorial Sloan Kettering Cancer Center and a founding figure in CAR T cell research. He was among the first to design chimeric antigen receptors that redirected T cells to target cancer, laying the scientific foundation for the field. His research continues to shape next-generation immunotherapies for both hematologic and solid tumors.

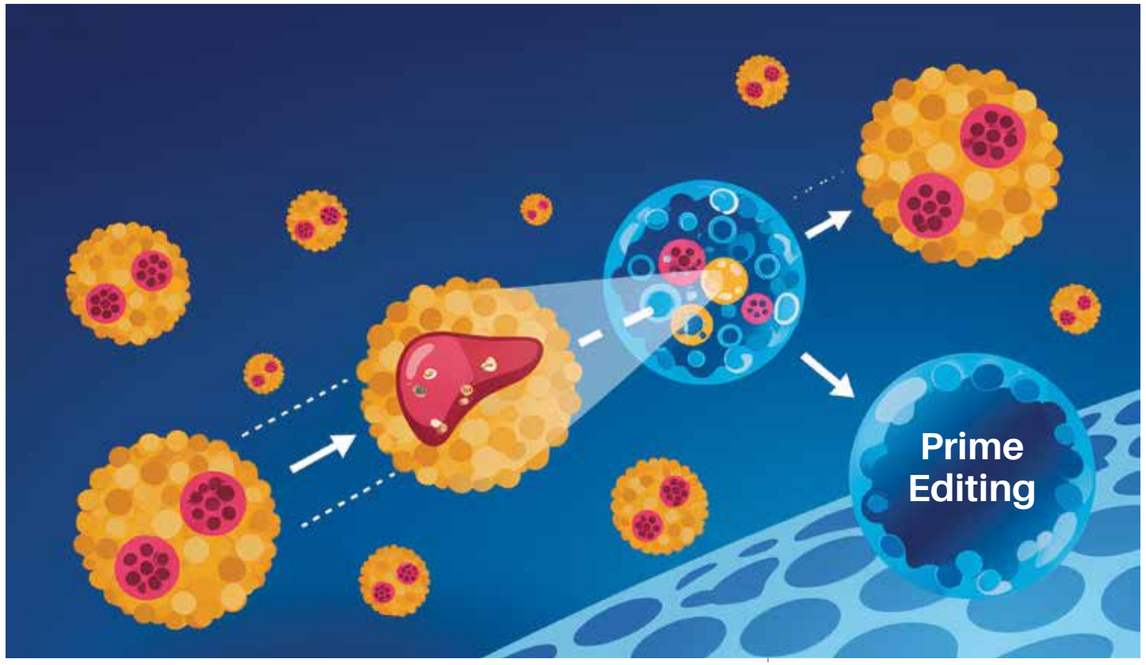
A New Era in Gene Editing: Prime Medicine Unveils Landmark Clinical Breakthrough

Backed by visionary leadership from Dr. Richard Merkin, new clinical data from Prime Medicine marks a turning point for prime editing — ushering in a future where precise genetic correction may transform care for countless patients.

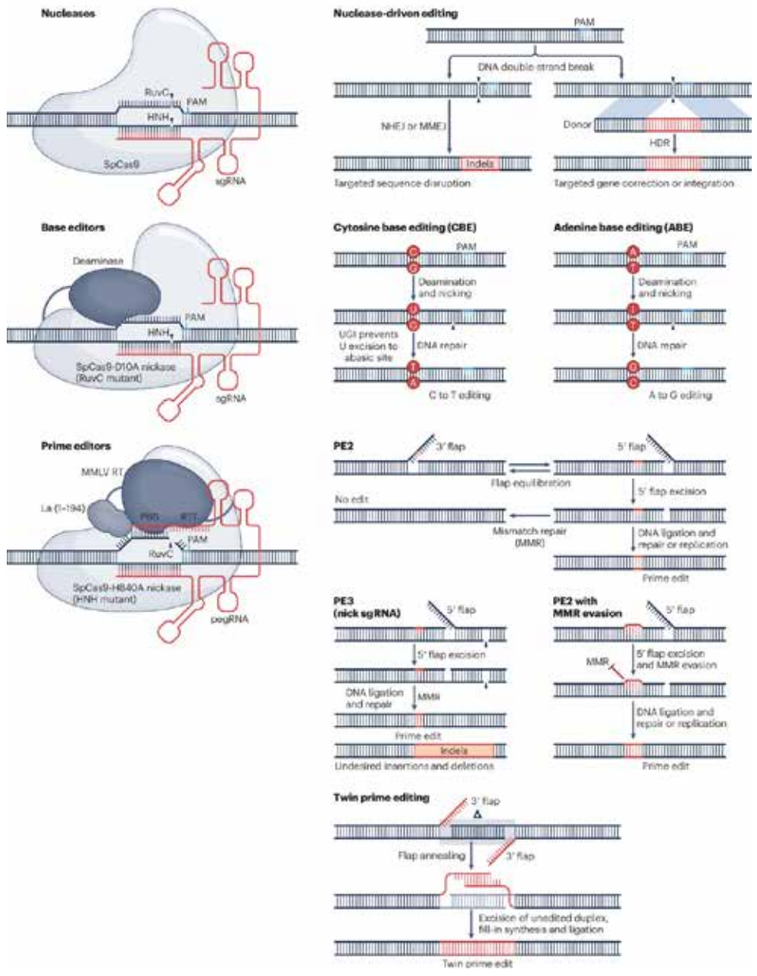
Prime Medicine has announced early clinical data that could mark a turning point in the treatment of rare genetic diseases. After receiving a single infusion of PM359, an investigational therapy developed using prime editing, a patient with chronic granulomatous disease (CGD) showed rapid and sustained restoration of immune function. The results represent the first clinical proof that prime editing can successfully correct a disease-causing mutation inside a patient's own cells.

CGD is a rare inherited condition that affects the body's ability to fight infections. In people with this disease, white blood cells called neutrophils cannot produce the chemicals needed to kill certain bacteria and fungi. This leads to frequent infections, chronic inflammation and potentially life-threatening complications. The disease is often diagnosed in early childhood and managed with long-term antibiotics, antifungal medications, and in some cases, bone marrow transplants. Until now, there has been no way to directly correct the root cause of CGD — the faulty gene itself.

PM359 takes a new approach. It is based on prime editing, a highly precise form of genome editing that can rewrite a single DNA letter without breaking the DNA strand. The technology was co-developed by David Liu, Ph.D., who also serves as the Richard Merkin professor and director of the Merkin Institute of Transformative Technologies in Healthcare at the Broad Institute of MIT and Harvard. Prime editing has long shown promise in the lab.



How Prime Editing Differs From Nuclease and Base Editing Methods



Unlike nuclease-based editing, which cuts both DNA strands, or base editors that swap a single letter, prime editing uses a Cas9 nickase and reverse transcriptase to write in new genetic information without double-stranded breaks. PM359, the therapy used in Prime Medicine's CGD trial, is based on this technique.

Now, for the first time, it has shown real potential in the clinic.

Just two weeks after treatment, the patient's immune cells regained DHR positivity — a key lab marker that signals restored cell function in CGD. In simple terms, this means the therapy worked. The patient's immune system, once unable to protect against infection, had begun functioning properly again.

"This scientific milestone is a glimpse into the future of medicine," said Richard Merkin, M.D., president and CEO of Heritage Provider Network. "These results reaffirm the promise of prime editing and also demonstrate how far we've come in translating bold ideas into life-changing realities for patients."

Dr. Merkin continued, "To see a technology with such breadth and precision begin to fulfill its clinical promise is profoundly moving. It speaks to the power of persistent innovation, rigorous science, and above all, a patient-first vision."

The implications go far beyond a single disease. Prime editing could one day be used to treat a wide range of genetic disorders, offering targeted and lasting solutions without the need for invasive procedures or permanent alterations that carry greater risk. For patients with CGD and other inherited diseases, this breakthrough is not just a hopeful sign. It is a meaningful step toward a future where editing the root cause of illness becomes a real option.

At High Desert Medical Group (HDMG), collaboration between Heritage Provider Network affiliates is leading to tangible improvements in patient care. Following a 2025 Heritage Health Care conference, HDMG leadership took inspiration from a successful model implemented by Heritage Victor Valley Medical Group to streamline diabetic retinal screenings for seniors.

At Victor Valley, patients identified during Senior Wellness visits as needing eye screenings are sent directly to optometrist Curtis Hoggarth, O.D., whose office is located next to the Senior Wellness Center. This same-day service has helped the group earn five-star ratings for two consecutive years while delivering a more convenient and coordinated experience for patients.

Motivated by the success at Victor Valley, HDMG launched a similar initiative. The group welcomed optometrist Tom Thamsopit, O.D., who now provides on-site retinal diagnostics as part of HDMG's Senior Wellness exam process. Dr. Thamsopit brings 10 years of clinical experience along with a deep familiarity with the Antelope Valley region, having served communities such as Lancaster, Palmdale, Victorville and Adelanto throughout his career.

"I've worked in the High Desert my entire career," said Dr. Thamsopit. "I understand the unique needs of our patients and am proud to be part of a team that is making care more accessible."

Anthony Dulgeroff, M.D., associate medical director at HDMG, emphasized the clinical value of the change. "Bringing optometry services on-site improves both quality and efficiency," he said. "It increases screening completion rates for diabetic retinopathy and other vision issues while giving patients a smoother, more coordinated experience."

He added that performing the screenings during a routine wellness visit supports HDMG's goal of consistent five-star performance. It reduces the need for external referrals and allows immediate review of diagnostic images.

The success of this initiative reflects the broader mission of Heritage Provider Network: to share best practices, support clinical innovation and raise the standard of care across all affiliates. In this case, collaboration across groups has made it easier for seniors to access the vision care they need, right when they need it.

> "Bringing optometry services on-site improves both quality and efficiency. It increases screening completion rates for diabetic retinopathy and other vision issues while giving patients a smoother, more coordinated experience."
>
> ~ Dr. Anthony Dulgeroff, Associate Medical Director at HDMG

HealthCare Partners, IPA in New York Launches ‘Call Me First’ to Empower Smarter Care Decisions

HealthCare Partners, IPA is the largest physician-owned and led IPA in the Northeast since 1996, serving the five boroughs, Long Island and Westchester. Their network includes more than 8,000 primary care and specialist physicians delivering services to over 175,000 members enrolled in commercial, Medicare and Medicaid products.

HealthCare Partners has launched a new initiative aimed at reducing unnecessary emergency room visits while helping patients make informed care choices. The program, called Call Me First, encourages members to start with their primary care physician (PCP) before seeking urgent or emergency care.

The idea is simple: Give patients the tools and support they need to better understand where to go for care and when. While still in its early stages, Call Me First is already showing promise. Initial feedback from both patients and providers has been overwhelmingly positive.

The program began by identifying members who had frequent emergency room visits over the past year. Many of these visits, it was found, could have been addressed more efficiently with a visit to a PCP or urgent care center. Using this information, HealthCare Partners’ Customer Engagement Center reached out directly to these members, providing personalized education on when to contact their doctor, visit urgent care or go to the emergency room.

By reducing avoidable ER visits and promoting coordinated care, HealthCare Partners is helping to make the healthcare experience more personal, more efficient and more effective for everyone.

To support this message at home, members received a customized refrigerator magnet featuring their PCP’s name and contact information. The magnet serves as a convenient, everyday reminder: When in doubt, call your doctor first. Materials are available in English, Spanish and Chinese.

Providers are also equipped with helpful tools to continue the conversation in the office. Educational posters in waiting rooms reinforce the role of the PCP as the best first point of contact. Tear-off guides offer patients clear examples of when and where to seek care, empowering them to make decisions based on the urgency and nature of their symptoms.

Call Me First is more than an outreach effort — it is part of a broader goal to strengthen the provider-patient relationship and ensure that members receive timely, appropriate care. By reducing avoidable ER visits and promoting coordinated care, HealthCare Partners is helping to make the healthcare experience more personal, more efficient and more effective for everyone.

Providers interested in learning more or requesting additional materials can contact the Call Me First team directly.

INNOVATION IN ACTION:

Desert Oasis Healthcare Elevates Community Care With AI-Powered Tools

For nearly 45 years, Desert Oasis Healthcare (DOHC) has championed a vision of community-centered care across the Coachella Valley and Morongo Basin, blending innovation, education and compassion. As DOHC nears its 45th anniversary, its most recent advancements highlight a new era: using artificial intelligence (AI) to better support both patients and providers.

Over the past year, DOHC expanded its use of AI and predictive analytics to flag high-risk patients sooner and help care teams intervene more proactively. These tools now help reduce hospitalizations, close gaps in chronic disease management, and support medication adherence with greater precision and personalized follow through.

Perhaps most impressive is how accessible the technology is: DOHC now offers AI-driven platforms patients can use at home for symptom tracking, remote monitoring and daily health guidance. These tools offer a safe alternative to often confusing or unreliable internet information sources, and each service is rigorously vetted to ensure accuracy, security and alignment with DOHC's standards.

Associate Director of Technology Thomas Brazeal, Pharm.D., points out that DOHC has partnered with more than 15 AI platforms since 2005, building one of the most advanced digital care portfolios in the region. Lindsey Valenzuela, Pharm.D., VP of Population Health Integration, emphasized that these tools are designed to support — not replace — clinicians, offering insights that help providers prioritize patient needs while delivering compassionate care.

The impact extends beyond technology. In-house media initiatives like "The Pulse," DOHC's original TV show airing on CBS Local 2, help demystify healthcare topics, from Medicare enrollment to behavioral health, for thousands of viewers each week. By merging education with care delivery, the program reflects DOHC's dedication to health literacy and community empowerment.

Recently, DOHC was named Large Business of the Year by the Greater Coachella Valley Chamber of Commerce, recognizing not only operational excellence but also its deep community roots. Over the past five years, the organization has donated more than $1 million to local nonprofits and education efforts, reinforcing its mission to uplift the region both medically and socially.

With its AI tools integrated into clinical workflows and patient lives, DOHC is proving that innovation can be equitable, effective and deeply human. As it celebrates decades of service, the organization's most impactful chapter may still lie ahead.

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Recognition of Commitment and Excellence

The recognition we have received demonstrates our practices in excellence. We're proud to be awarded for our commitment to our members and our community.

- Wellness Excellence Award in Health Education — Southern California Foundation for Health Care
- Top Ten Physician Medical Networks in California by America's Physician Groups
- NCQA Certification for Utilization Management and Credentialing
- Elite Status of Excellence for the Standards of Medical Care by America's Physician Groups
- Recognized by the Integrated Healthcare Association for our diabetic registries

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