CTSA Steering Committee Meeting Summary
January 12, 2026; 2:30-3:30 PM ET

Steering Committee Attendees:

Grace McComsey, Co-Chair	Mike Holinstat	Mark Schleiss
	Fasiha Kanwal	Marisa Spann
	Mimi Kim	Eric Vilain
Elmer Bernstam	Gerry Moeller	Sarah Wiehe
Steven Bernstein	Elizabeth Ofili	Karen Wilson
Andrea Carnegie	Reynold Panettieri	Theodore Wun
Manisha Desai	Dominic Reeds	
Vesna Garovic	Robert Toto	

NCATS Attendees:

Audie Atienza	Jamie Doyle	Francisco Levya
Heather Baker	Stephanie Ezequiel	Joan Nagel
Kristopher Bough	Stacia Fleisher	Katherine Patel
Patrick Brown	Gallya Gannot	Thomas Radman
Dale Burwen	Brittany Gibbons	Erica Rosemond
Soju Chang	Christopher Hartshorn	
Jennie Conroy	Rebecca Katz	

Invited Guests:

Doris Rubio

CCOS: Lauren Fitzharris, Kerry James, Amanda Scott

Welcome and Introductions (Slides 2-4)

Speakers: Grace McComsey, Erica Rosemond

Grace and Erica greeted SC members and informed the group that Mike K. was out on medical leave and would not be attending the call. Lauren F. went over the 2026 roster and provided new steering committee members with an opportunity to introduce themselves.

New Working Group Topics (Slides 5-6)

Speakers: Lauren Fitzharris, Kerry James, Amanda Scott

CCOS staff outlined the process for reviewing and updating working group topics, requesting feedback from pod leads and committee members via a poll, and clarified the mechanisms for proposing additional topics and revising existing topics to fit NIH priorities.

Pod Spotlights and Scheduling (Slides 7-10)

Speaker: Lauren Fitzharris, Amanda Scott

Presentation Summary:

Lauren and Amanda introduced the new Pod Spotlight feature, assigning each pod a date to present a focused discussion annually, and provided logistical details and instructions for pod leads regarding slide preparation.

Action Items:

- Amanda will send link to poll by email.
- Pod leads will solicit input during pod meetings and share the poll link for feedback by January 20.
- SC members will discuss within their hubs and share the link for feedback by January 20.

ENACT Report Out (Slides 11-30)

Speaker: Robert Toto

Presentation Summary:

Bob Toto presented an overview of the ENACT network, detailing its capabilities for real-world data analysis, federated research, and clinical decision support, followed by an in-depth discussion with SC members on technical features, comparison with other networks, and implementation considerations.

Key Questions & Responses:

- *Q (Steven B.):* It sounds like ENACT has visit-level data, but does it have patient-level data? Can we do longitudinal studies?
  A (Robert T.) Yes. Longitudinal (patient-level) data can be collected via queries to the ENACT network. The example shown in the presentation was cross-sectional, but longitudinal analyses are feasible.

- *Q (Fasiha K.):* There are multiple data resources (e.g. NCATS-supported N3C and ENACT). How do we figure out which is better for which purpose? Are there clear distinctions? data?
  A (Robert T.)

- ENACT is generally friendlier and quicker for cohort-style queries and preliminary data; it does not require transferring large data sets for initial cohort identification.

- N3C is centralized and often more informatics-driven; it may include more data depending on which sites has contributed.

- Choice depends on immediate needs, the question, and workflow preference-you might use ENACT for preliminary findings, then move to ENACT's enclave or N3C for larger/complex analyses.

A (Elmer B.)

- ENACT is disease-agnostic; N3C began as COVID-focused and is expanding but is not fully disease-agnostic.
- N3C and All of Us are centralized; ENACT and PCORnet are distributed.
- PCORnet uses the PCORnet CDM and a different approval process; All of Us collects additional data (e.g., genomics) beyond routine HER.
- The example shown in the presentation was cross-sectional, but longitudinal analyses are feasible.

Adjourn (Slide 31-32)

The next SC meeting is scheduled for Monday, January 26.