

Access and Accelerate Grants October 2026 Cycle Application

Program Goal

The Massachusetts Life Sciences Center (MLSC) Access and Accelerate Grant Program is designed to help early-stage Massachusetts life science companies (Applicant) overcome critical go-to-market and commercialization barriers that are difficult to finance through traditional investment or research funding. Grant awards may be up to \$150,000 in non-dilutive funding to successful Applicants.

Many promising companies reach technical milestones but struggle to access specialized expertise, market validation, regulatory planning, reimbursement strategy, manufacturing planning, or commercialization support needed to attract follow-on investment and advance toward patients.

Unlike traditional R&D grants, Access and Accelerate focuses specifically on activities that reduce commercialization risk. Funding supports specialized expertise that often falls outside the scope of research grants but is essential for attracting investment and bringing innovations to market.

Our Q4 focus area is: **Funding Market Landscape Analysis for Medical Device/MedTech companies.**

Why this area? Medical devices approved by the FDA that are not already covered by payors take a median additional 5.7 years to reach a meaningful payment milestone. That is an extremely long time for a startup to survive. We are confident that by getting these insights earlier in their product development cycle, we can shorten that time lag for promising Massachusetts startups.

Eligibility Info

October 2026 Focus area: Medical Device Market Landscape Analysis

- This grant may only be used to fund a comprehensive market analysis to ensure eligible startups have a successful path to payer coverage for their product

Applicants must:

- Have more than 50% of their employees based in Massachusetts
- Have raised no more than \$5 million in dilutive investments (including SAFEs and Convertible Notes)

- Be a for-profit company

Required Documents for this form:

- Certificate of Good Standing from the Massachusetts Secretary of State
 - Certificate of Good Standing from the Massachusetts Department of Revenue
 - Company overview & business plan
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Company Information

1. Applicant Company Legal Name (as listed on your Certificate of Incorporation) (required)

2. Year Incorporated (required)

3. Name of Applicant and Title in Company (required)

4. Email of Applicant (required)

email@example.com

5. Applicant Company Web Address (required)

example.com

Business Address

6. Address of Business (required)

7. City/Town of Business (required)

8. Zip Code of Business (required)

 

9. Business Telephone (required)

 

Additional Company Information

10. What disease(s) or condition(s) does your company primarily address? Please choose up to three options. (required)

- | | |
|--------------------------|-----------------------------|
| ☐ | Autoimmune Disorders |
| <hr/> | |
| ☐ | Cancer |
| ☐ | Cardiology |
| ☐ | Chronic Illness/Disease |
| ☐ | Endocrinology |
| ☐ | Environmental Health |
| ☐ | Gastrointestinal (GI) |
| ☐ | Geriatrics & Gerontology |
| ☐ | Hematology |
| ☐ | Immunology/Inflammation |
| ☐ | Infectious Diseases |
| ☐ | Liver |
| ☐ | Maternal/Infant Health |
| ☐ | Metabolic Diseases |
| ☐ | Microbiome |
| ☐ | Neuroscience |
| ☐ | Nutritional Science |
| ☐ | Otolaryngology |
| ☐ | Orthopedics |
| ☐ | Pediatrics |
| ☐ | Psychiatry/ Mental Health |
| ☐ | Public Health/ Epidemiology |

- ☐ Rare Diseases
- ☐ Regenerative Medicine
- ☐ Reproductive Health
- ☐ Toxicology
- ☐ Other
- ☐ N/A

12. What modality/modalities does your company primarily employ?
Please choose up to three options. (required)

- ☐ Data Science
- ☐ Diagnostics
- ☐ Digital Health
- ☐ Drug Delivery
- ☐ Drug Discovery, Development & Validation
- ☐ Imaging
- ☐ Personalized/Precision Medicine
- ☐ Phototherapy
- ☐ Radiation Therapy
- ☐ Robotics
- ☐ Other
- ☐ N/A

13. What are tools and techniques used in your company? Please choose up to three options. (required)

- ☐ 3D printing
- ☐ AI/ML/Deep Learning
- ☐ Biomanufacturing
- ☐ Biomarker Identification
- ☐ Biomaterials/ Material Sciences
- ☐ Biosensor
- ☐ CT/MRI
- ☐ Data Optimization
- ☐ EEG&ECG
- ☐ FACS/ Flow Cytometry
- ☐ Genome Editing
- ☐ Liquid Chromatography
- ☐ Mass Spectroscopy
- ☐ Microscopy
- ☐ Nanotechnology
- ☐ Next-generation Sequencing
- ☐ NMR/MRS
- ☐ Organoid/ Organ-on-a-chip
- ☐ Pasteurization/ Sterilization
- ☐ Software & Algorithms

- ☐ Ultrasound/Energy Delivery Technologies
- ☐ Other
- ☐ N/A

14. Stage of Development (required)

- ☐ Concept
- ☐ Laboratory R&D
- ☐ Early Prototype
- ☐ Initial (Alpha) Testing
- ☐ Initial (Beta) Testing
- ☐ Pre-clinical Studies
- ☐ Clinical Studies
- ☐ Regulatory Approval/Clearance
- ☐ Other

15. Have you engaged a reimbursement consultant or have reimbursement expertise on your team? If yes, please provide details, including if the expert/consultant is based in Massachusetts. If you have not engaged an expert, please describe how you plan to select one. (required)

Please limit your answer to no more than 150 words.

16. Number of Employees (company-wide) (required)

What is the current total number of FTE (full-time equivalent) employees (company-wide)? Consultants, 1099 employees, or interns do not count as part of this number. For purposes of this program, employees are considered to be full-time equivalent if they work 35 hours or more per week for this company.

17. Number of Employees in Massachusetts (required)

What is the current total number of FTE (full-time equivalent) employees in Massachusetts? Consultants, 1099 employees, or interns do not count as part of this number. For purposes of this program, employees are considered to be full-time equivalent if they work 35 hours or more per week for this company.

Program eligibility stipulates that the Company must have **the majority of its FTEs** (full-time-equivalent employees, >35 hours per week) **based in Massachusetts** and must have a minimum of 1 FTE.

18. Is the company pre-revenue? If no, please provide the revenue for the last year below. (required)

☐ Yes

☐ No

19. Total dilutive capital (from angel investors, venture capitalists, institutional investors, etc.) raised to date (required)

\$

USD

20. Describe the funding type (i.e. SAFE, priced round, convertible note, etc.), amount of funding raised and key terms (cap, discount, etc.), AND year of dilutive capital raised to date. Include all types of dilutive capital including SAFE notes, Convertible Notes, priced rounds, etc. (required)

Please limit your answer to no more than 75 words.

21. Total non-dilutive capital (from federal, philanthropic, institutional investors, competitions etc.) raised to date (required)

\$ USD

22. Describe the funding vehicle (SBIR/STTR, loan, etc.), total amount, AND year of non-dilutive funds (e.g., SBIR/STTR, other grants, loans, or other types of nonequity financing) received to date. (required)

Please limit your answer to no more than 75 words.

Overview of the Team

23. Leadership Team: please describe the roles of the C-level leadership team in the company, including all responsibilities, and provide LinkedIn or other online profiles if available. (required)

Limit: 400 words

Please limit your answer to no more than 400 words.

24. Are the leadership team members currently working full-time (more than 35 hours per week) and exclusively for the company?

(required)

☐ Yes

☐ No

Program eligibility stipulates that the **CEO or equivalent position (e.g., President) spending >35 hours per week** working for the Company and **cannot be employed more than 15 hours by other organization(s)** at the time of the award. The Applicant does not need to collect a salary from the Company.

25. Leadership Team Education and Relevant Experience (required)

Limit: 150 words

Please limit your answer to no more than 150 words.

Technology and Company Overview

26. Company Summary (abstract) (required)

Limit: 400 words

Please limit your answer to no more than 400 words.

27. Please describe the disease or condition your technology addresses, including its prevalence, incidence, mortality, morbidity, and overall impact on the affected population. Include quantifiable metrics, unmet needs, or disparities your solution aims to address.

(required)

Limit: 200 words

Please limit your answer to no more than 200 words.

28. What is the current state of the art or standard of care for the above market/patient population? (required)

Limit: 100 words

Please limit your answer to no more than 100 words.

29. What is your competitive advantage? (required)

Limit: 100 words

The recommended number of words for this answer is: 100 words.

30. Who is the typical buyer? (required)

Limit: 75 words

Please limit your answer to no more than 75 words.

31. What are your pricing and reimbursement strategies? (required)

Limit: 75 words

Please limit your answer to no more than 75 words.

32. What is the regulatory pathway for your product? (required)

Limit: 75 words

The recommended number of words for this answer is: 75 words.

33. What is the IP strategy and what is the current IP status?

(required)

Limit: 75 words

Please limit your answer to no more than 75 words.

34. Where did the technology originate? If a license to practice and/or develop is required, has it been in-licensed and from whom?

(required)

Limit: 75 words

The recommended number of words for this answer is: 75 words.

35. What are the key challenges to successful commercialization and what is your strategy for mitigating the risk they introduce?

(required)

Limit: 150 words

Please limit your answer to no more than 150 words.

36. What milestones will this grant enable over the next 6-18 months? List at least 1 major milestone. Please outline key use of funds. (required)

Limit: 100 words

Please limit your answer to no more than 100 words.

37. Do you plan to stay and grow in Massachusetts? Please explain. (required)

Limit: 75 words

Please limit your answer to no more than 75 words.

38. What will your company accomplish with up to \$150,000 in grant money? Please include a high level budget for proposed use of funds and provide detail around expected deliverables such as: (1) coding landscape, (2) Medicare + commercial coverage landscape, (3) payment economics, (4) competitor/analog reimbursement benchmark, and (5) payer evidence requirements and recommended reimbursement roadmap. Please Note: The MLSC has sole discretion to decide the number and size of award(s) based on the quality of applicants. (required)

Limit: 200 words

Please limit your answer to no more than 200 words.

If you have a letter of support or quote from a consultant/vendor that will provide the work, please upload a copy.

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

39. Please indicate if you are willing to share the market landscape analysis with the MLSC after it is completed. The MLSC has a public interest in making the research it funds available to others (after an agreed-upon time for exclusive use by the Applicant) to more broadly benefit the life science ecosystem. Sharing the analysis is not a requirement to be eligible for the grant. (required)

Please limit your answer to no more than 25 words.

Document Uploads

40. Please upload a company overview deck to supplement your application. In addition to an overview of the company, market, and milestones you expect to achieve, please also include information on your board of directors, any advisors/scientific advisory board, awards, and participation in any accelerator/incubator programs.

(required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf, .txt, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff, .ppt, .pptx, .zip

Limit: 35 slides including appendix

41. Please upload your Certificate of Good Standing from the Massachusetts Secretary of State. This document must be dated after January 1, 2026 to be eligible. (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

If you do not yet have the certificate, please upload proof that you have requested it from the Massachusetts Secretary of State.

42. Please upload your Certificate of Good Standing from the Massachusetts Department of Revenue. This document must be dated after January 1, 2026 to be eligible. (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

If you have not yet received the certificate, please upload proof that you have requested it from the Massachusetts Department of Revenue.

Signature

43. Authorized Signature and Acceptance (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .jpg, .jpeg, .png

I verify that I am authorized to commit my organization and to make this application on behalf of the organization. I certify that the above information is correct and that the statements made herein, including all attachments and exhibits, are true and correct to the best of my knowledge. The submission of false information to the Massachusetts Life Sciences Center (MLSC) is subject to prosecution under the False Claims Law at M.G.L. c. 12, sections 5A – 5O.

I understand that this Access and Accelerate Grant Application may be disqualified if it does not contain all required information or if the Applicant does not meet the eligibility criteria required under the Program. I specifically acknowledge that all of the terms and conditions of the Solicitation are mandatory.

On behalf of the applicant, I understand and acknowledge that all materials submitted as part of this application are subject to disclosure under the Massachusetts Public Records Law. Furthermore, I understand and acknowledge that I have followed the procedures set forth in the Confidentiality Section of the Access and Accelerate Grant Solicitation for any documents that I believe may be proprietary in nature and that may fall within the parameters of the MLSC's Trade Secrets Exemption; and that the MLSC's receipt of such documents does not represent a finding by the MLSC of the Supervisor of Public Records that such documents fall within the Trade Secrets Exemption.

I acknowledge and agree that the MLSC has sole discretion to determine which applicants receive benefits under the Program.

Confidentiality Section can be found here:

<https://www.masslifesciences.com/programs/access-and-accelerate-grant/>

44. How did you hear about the program? (required)

- ☐ Social Media
- ☐ MLSC Newsletter/Website
- ☐ Program Manager
- ☐ Sponsors or Coaches
- ☐ Third Party (MassBio, MassMedic, etc.)

☐ Other (specify below)

☐ **Select to receive email notices and updates from MLSC**

You may unsubscribe at any time.

**We look forward to reviewing your application and working together. If you have any questions or need assistance, please get in touch with our team at:
mlscindustryprograms@masslifesciences.com**

Save Draft

Submit Form

Drafts may be visible to the administrators of this program.