LEGISLATIVE SCORECARD ISSUE: FY2014 NIH/NEI FUNDING

President Proposes No Growth in FY2014 NEI Budget

On April 10, President Obama sent to Congress a $3.77 trillion FY2014 spending plan that proposes to replace the sequester’s $1.2 trillion in mandatory budget cuts over ten years with $1.8 trillion in alternative spending cuts and new revenue. The proposal increases NIH funding by $471 million, or 1.5 percent over the FY2012 level of $30.6 billion to $31 billion. Since the budget proposes to eliminate the sequester moving forward, it would restore the FY2013 sequester cut.

In addressing research priorities, NIH plans to spend $40 million on research collaborations with academic institutions, the private sector, and other government agencies through the new Brain Research through Application of Innovative Neurotechnologies (BRAIN) Initiative; $80 million additional funding for Alzheimer's disease research within the National Institute on Aging (NIA), bringing total funding to $562 million; $40 million more than FY2012 for the Cures Acceleration Network (CAN), bringing total funding for this National Center for Advancing Translational Sciences (NCATS) program to $50 million; and focusing on ways to improve NIH's ability to visualize, manipulate, and mine many of the large and complex digital datasets of information, known as “Big Data.”

Although the proposal also restores NEI's FY2013 sequester cut, it would reduce NEI’s budget by $2.1 million or 0.3 percent from the FY2012 level to $699.2 million. The loss is primarily driven by an $8.9 million reduction due to the conclusion of the NEI-sponsored clinical trials known as the Studies of the Ocular Complications of AIDS (SOCA) studies, meaning that the NIH Office of AIDS Research will no longer contribute. Per NEI’s Congressional Justification, RPPs, which represent $450 million or 64 percent of the NEI budget, will total 1,081, a net decrease of 15 from the FY2012 level, driven by 35 fewer competing grants.

Visit the NIH/NEI funding section of NAEVR’s Web site at www.eyeresearch.org for full details

NAEVR to Congress: Improve On The President’s Budget for NEI

“NAEVR applauds the President’s continued support for biomedical research through an FY2014 budget proposal that restores sequester cuts and grows the NIH budget. However, the proposal does not grow the NEI budget at such a pivotal time for eye and vision research, especially after the devastating impact of the sequester cut in FY2013. The NEI budget cut is especially alarming since the first wave of the 78 million Baby Boomers has started turning age 65 and is at greatest risk from aging eye disease. This will have a direct impact on healthcare costs, productivity, independence, and quality of life.

Through its Audacious Goals Initiative, the NEI has identified new and compelling scientific ideas to advance research to save and restore vision that could be jeopardized due to inadequate funding. This is especially frustrating for the vision community, as NIH Director Dr. Collins has acknowledged publically the NEI’s long tradition of leadership in the biomedical research arena. That leadership, and the concomitant promise it holds for the sight of all Americans, is at risk.”

NAEVR Commends Senate LHHS Allocations

On June 20, the Senate Appropriations Committee approved its 302(b) allocations for the twelve FY2014 appropriations bills. The Senate’s allocations are based on the $1.058 trillion discretionary spending cap mandated by the Budget Control Act of 2011 and adopted in the Senate-passed FY2014 budget resolution. This is significantly higher than the $967 billion cap passed by the House, meaning a difference of approximately $90 billion between the two chambers in making its allocations. The Committee defeated a substitute offered by Ranking Member Richard Shelby (R-AL) that would have capped spending at the House’s level.

The Senate allocates $164.33 billion for the LHHS appropriations bill, which funds NIH. The House Appropriations Committee approved its allocations on May 21 with a significantly lower $121.8 billion level for the LHHS bill, which translates to an estimated 18.6 percent cut below the FY2013 post-sequester level. The actual program levels for the NIH will not be determined until the markups by the LHHS Subcommittees and full Appropriations Committees of the House and Senate, respectively, the latter of which is expected in mid-July.

Chairman Harkin and Dr. Collins: “Perilous and Pivotal Moment for NIH”

On May 15, the Senate LHHS Appropriations Subcommittee held a hearing entitled NIH: Exceptional Opportunities in 2014 with Dr. Collins and several I/C Directors. Chairman Tom Harkin (D-IA) said that it is currently a “perilous” moment for NIH and the U.S. biomedical research leadership due to final FY2013 funding with sequester cuts. He stated, “Although I want to do everything I can to boost NIH funding, the House leadership still supports the sequester and its deep cuts to nondefense discretionary spending, which includes the NIH. As a result, I am concerned about pitting NIH against other worthwhile programs in the LHHS bill, such as the CDC, which I will not do.”

In his opening statement, Ranking Member Senator Jerry Moran (R-KS) said that now is not the time for Congress to waiver on its commitment to the NIH, especially since China has pledged a 26 percent increase in its biomedical research spending. “The NIH is the catalyst behind Americans living longer and having healthy lives,” he said, adding that “one of the NIH’s most significant contributions is reducing the cost of disease, especially for the aging population.”

In his testimony, Dr. Collins acknowledged that NIH has lost 22 percent of its purchasing power over the past ten years and could lose up to $19 billion over the next ten years if sequester cuts continue. He described recent developments in cancer research, embryonic stem cells, and the BRAIN Initiative as providing a “pivotal” moment in biomedical research, but lamented the paradox that this time of great scientific leadership is concurrent with a “dwindling” of funding support. As in past testimony, he cited the projected double-digit growth in biomedical research funding planned in China, India, South Korea, Japan and even budget-challenged Germany, noting that only the U.S. and France projected reductions in research funding. He ended his formal comments by reading an email from a young investigator that he trained stating that “I can’t erase the fear that this [difficulty in getting funded] is my future.”

Previously, on April 29, NAEVR submitted written comments to the Subcommittee requesting that it improve on the President’s FY2014 budget proposal, which had no NEI budget growth.