Congress Passes Sixth CR to Fund Government in FY2011

Absent final FY2011 appropriations, on March 17 the Senate followed the House in approving a sixth short-term Continuing Resolution (CR) to fund most government programs at the FY2010 level. This latest CR, which expires on April 8, includes $6 billion in funding cuts, following $4 billion in cuts in the previous CR, achieved through the elimination of earmarks and acceleration of some program cuts proposed in the President’s FY2012 budget request. None of these cuts affect NIH/NEI funding.

However, in February, the House Republican leadership introduced H.R 1 (see funding chart), proposed to reduce NIH and NEI funding by 5.3 percent to the FY2008 level. For NEI, this would have meant more than a $30 million cut and 43 fewer research grants—any one of which, as NAEVR has stressed on Capitol Hill, could hold the key to saving and restoring vision. H.R. 1 was rejected by the Senate, as was a Senate version of the bill that flat-funded NIH, on procedural votes where both measures failed to garner the 60 votes necessary to avoid a filibuster.

NAEVR has joined with the medical research advocacy community in opposing any reduction in NIH funding since it would slow research progress and squander invaluable scientific opportunities.

Obama Budget Proposes FY2012 NIH Increase of $745 Million

On February 14, President Obama released his FY 2012 budget proposal which includes a $745 million, or 2.4% increase (compared to FY2010), in NIH funding, from $31 billion to $31.7 billion. The NEI would receive an increase of $12.4 million, or 1.8 percent increase (as compared to FY2010), to a level of $719.06 million from $706.7 million. The NEI has posted its Congressional Justification on its Web site.

NIH Moving Quickly on a Centralized Translational Research Center

NIH has accepted the recommendation from its Scientific Management Review Board (SMRB) that it create a centralized translational research center. NIH has posted on its dedicated feedback.nih.gov Web site its plans for the creation of the National Center for Advancing Translational Sciences (NCATS) and has actively sought input through that site and numerous conference calls with stakeholders. Twice during SMRB deliberations, NAEVR cautioned that any centralized authority should not stifle the creativity of mid- to small-sized Institutes and Canters (I/Cs) in pursuing innovative translational research approaches, as the NEI has done with partnerships within NIH, the Department of Health and Human Services (DHHS), with other government agencies, and with private funding organizations. In mid-February, ARVO submitted comments that specifically addressed NIH’s plan to abolish the National Center for Research Resources (NCRR)—the portfolio of which includes the Clinical and Translational Science Awards (CTSAs)—and move its other funding programs into other I/Cs. ARVO urged NIH to carefully analyze the potential implications of this action to prevent conflicts of interest during grant review that can result from moving programs from a Center with a diverse mission to I/Cs with more defined missions.

Per the NIH Reform Act of 2006, the NIH must still present its official NCATS proposal to key Congressional committees for review [House Energy and Commerce (E&C), Senate Health, Education, Labor, and Pensions (HELP), House and Senate Labor, Health and Human Services, and Education (LHHS) Appropriations Subcommittees], to include an analysis of the programmatic and budgetary implications.