

NATIONAL ALLIANCE FOR EYE AND VISION RESEARCH (NAEVR) LEGISLATIVE UPDATE

	FY2021 Final	FY2022 Final	FY2023 Final	FY2024 NAEVR Request	FY2024 President's Budget	FY2024 House Budget	FY2024 Senate Budget
NIH	\$42.93 B +3%	\$44.96 B +4.72%	\$47.46 B +5.6%	\$50.924 B +7.3%	\$48.27 B +1.7%	\$44.7 B -6%	\$49.22 B +.7%
NEI	\$835.71 M +1.4%	\$863.9 M +3.4%	\$896.55 M +3.8%	\$975 M +8.7%	\$896.14 M -0%	\$896.55 M +0%	\$896.55 M +0%

- The FY2023 budget includes funding for ARPA-H within NIH and includes an increase of \$500 million to \$1.5 B
- The House FY2024 budget proposal decreases ARPA-H by \$1 B to \$500 M while the Senate proposal keeps ARPA-H level funded
- The Fiscal Responsibility Act of 2023 (Debt Ceiling Agreement) put caps on federal spending for FY2024 and FY2025

The current House and Senate appropriations bills are likely to see comparable funding to FY2023 for the National Institutes of Health (NIH), with most institutes, including the National Eye Institute (NEI) being level-funded as well. The current Continuing Resolution that the government is operating on (more on that below) maintains FY2023 funding for NIH and NEI into January, however, the lack of full-year funding puts institutes in difficult positions to determine funding for new awards without knowing their final budgets.

NAEVR has partnered to support multiple lobby days in support of NEI and NIH, including our own Emerging Vision Scientists Lobby Day (more on pages 4-5), submitted testimony to the House and Senate, and submitted a sign-on letter from partner organizations to the Senate Appropriations Committee advocating for NEI.

On November 14th, the House passed an “innovative ladder” Continuing Resolution (CR) that (pending Senate action and the President’s signature) keeps the government funded with a clean continuation of FY2023 levels for the government.

The CR was passed by a similar margin to the earlier CR that was passed in September that cost Speaker McCarthy his speakership with 336 in favor and 95 against.

On November 15th, the Senate voted to pass the measure by a vote of 87-11, clearing the CR to be signed before the previous CR shutdown deadline on November 17th. President Biden signed the CR into law on November 17th, marking the second CR that has been utilized for FY2024 funding.

The new CR will extend government funding to January 19 for some federal agencies and programs, and February 2 for the remainder. The first deadline consists of appropriations for less contentious agencies, including the Ag-FDA, Energy and Water, MilCon-CA, and THUD. Funding for the eight remaining spending bills (including for the Labor, Health and Human Services bill which includes funding for the National Institutes of Health and the National Eye Institute) will expire in February, hopefully giving Congress more time to secure funding for the remainder of FY2024 which started on October 1, 2023 and expires September 30, 2024.

The CR will extend funding through January 19 for several health programs that expired on September 30 and were extended through November 17 under the current CR:

- Community Health Center Fund, which provides the bulk of federal funding for community health centers

- National Health Service Corps, which provides scholarships and loans to medical students
- Teaching Health Center Graduate Medical Education Program
- Special Diabetes Program
- Special Diabetes Program for Indians
- Personal Responsibility Education Program
- Sexual Risk Avoidance Education Program

The House continues to debate its Labor-H bill, and the Senate is considering a proposal from

Senator Susan Collins to pass over 70% of the discretionary spending bills in a package well before the CR deadlines.

Under the Debt Limit Agreement passed in May this year, annual appropriations levels for 2024 were capped at \$6772.7 billion which is \$1.3 billion above the FY2023 levels, however non-defense discretionary funding levels outside of Veterans' medical care was capped at \$651.6 billion which is \$1 billion below the FY2023 amount.

Nondefense discretionary (NDD) funding levels in the 2023 debt limit agreement

Comparing nondefense discretionary spending levels under the debt limit deal for fiscal year 2024 with the levels for fiscal year 2023.

	2023	2024	Difference
NDD Funding	\$772.4B	\$772.7B	+\$0.3B
NDD base/cap*	\$743.9B	\$703.7B	-\$40.2B
Agreed-upon adjustments:			
CHIMPs**	\$15.0B	\$25.0B	+\$10.0B
Emergencies***	\$13.5B	\$23.0B	+\$9.5B
Rescissions****		\$21.0B	+\$21.0B
Components of NDD			
Veterans Affairs (VA) medical care	\$118.7B	\$121.0B	+\$2.3B
NDD outside VA medical care	\$653.6B	\$651.6B	-\$2.0B

Note: The authors modified the 2023 funding level in the Center on Budget and Policy Priorities source to include emergency CHIPS and Science Act funding and to reflect Veterans Affairs medical care estimates from the congressional Appropriations committees.

*This refers to the statutory cap level for 2024 specified in the Fiscal Responsibility Act and the comparable level for 2023 at the time of the enactment of the bill.

** CHIMPs stands for "CHanges In Mandatory Programs" made in annual appropriations bills. The table reflects additional NDD funding offset by CHIMP savings.

*** Funding that is designated as an emergency is not subject to the caps.

**** Rescissions are provisions that repeal funding enacted in prior years that government agencies have not yet used. The table reflects additional NDD funding offset by rescissions.

SENATE CONFIRMS MONICA BERTAGNOLLI AS DIRECTOR OF NIH

On November 7, the Senate confirmed Monica Bertagnolli, MD, as Director of the National Institutes of Health (NIH), two weeks after the Senate Health, Education, Labor and Pensions (HELP) committee approved her nomination. The vote was 62-36.

Dr. Bertagnolli had previously served as Director of the National Cancer Institute (NCI) before President Biden nominated her to lead the NIH. She will be the 17th NIH Director and replaces Francis Collins, MD, PhD, who served as Director from 2009 until December 2021. Lawrence A. Tabak, DDS, PhD, has been Interim Director since Dr. Collins left the NIH.

Before her arrival at the NCI, Dr. Bertagnolli was a surgeon at the Dana-Farber Brigham Cancer Center in Boston, where she was Chief of Surgical Oncology for a decade.