

NAEVR SCORECARD LEGISLATIVE ISSUES

	FY2014 FINAL*	FY2015 FINAL**	FY2016 FINAL**	FY2017 FINAL	FY2018 FINAL	FY2019 FINAL	FY2020 FINAL
NIH	\$30.07 B +3.5%	\$30.3 B +0.5%	\$32.1 B +6.6%	\$34.08 B +6.2%	\$37.08 B +8.8%	\$39.08 B +5.4%	\$41.68 B +6.7%
NEI	APPROP: \$682.1 M +3% OPERATIONAL NET: \$675.6 M	APPROP: \$684.2 M +0.31% OPERATIONAL NET: \$676.8 M	APPROP: \$715.9 M +4.6% OPERATIONAL NET: \$708 M	APPROP: \$732.6 M +3.5% OPERATIONAL NET: \$731.2 M	APPROP: \$772.3 M +5.6% OPERATIONAL NET: \$770.5 M	APPROP: \$796.5 M +3.1% OPERATIONAL NET: \$793.8 M	\$824.09 M +3.5%

* NEI Operational Net reflects \$6.9 M transferred back to NIH Central of Studies of Ocular Complications of AIDS (SOCA) funding and Secretary transfer.

** NEI Operational Net reflects \$7.4 M transferred back to NIH Central of SOCA funding.

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FY2021 Appropriations: President Proposes NIH/NEI Cuts, NAEVR Requests Increases

On February 10, the White House released its \$4.8 trillion FY2021 budget request which increases defense spending while deeply cutting that for domestic programs. The budget proposes a 9 percent, or \$9.5 billion, discretionary spending cut to the DHHS, down from the \$106 billion Congress provided in final FY2020. Reductions in domestic spending include the CDC (although the President has revised proposed spending upwards in light of COVID-19) and NIH/NEI, with the latter as follows:

- NIH program level funding of \$38.69 billion (with \$37.7 billion in discretionary budget authority for the Agency), which reflects a \$3 billion, or more than a 7 percent cut, below final FY2020 funding of \$41.68 billion.
- NEI program level funding of \$749 million, a cut of \$75 million, or 9.1 percent, below the FY2020 funding level of \$824.1 million. The proposed cut would mean that NEI would be funded below its final FY2018 level.

In response to the proposed budget, NAEVR supported the Ad Hoc Group for Medical Research statement that the President's FY2021 budget proposal would "devastate the Agency's ability to pursue promising new science to improve and save lives."

NAEVR Submits House Testimony Requesting NIH/NEI Funding Increases

On March 20, NAEVR submitted written testimony to the House LHHs Appropriations Subcommittee after it held its March 4 hearing with NIH Director Francis Collins, MD, PhD and several Institute Directors. NAEVR has requested:

- NIH funding at \$44.7 billion, a \$3 billion or 7.2 percent increase over the FY2020 funding level of \$41.7 billion; and
- NEI funding of \$875 million, a \$51 million or 6.2 percent increase over the FY2020 funding level of \$824.1 million.

NAEVR's request, having been released in late January and used during both the February 7 ARVO Advocacy Day (see middle page) and February 26 American Glaucoma Society Advocacy Day (see far right page), is in line with the Ad Hoc Group for Medical Research's NIH funding request, which has been endorsed by more than 340 member organizations, including NAEVR. Regarding NEI, NAEVR recognizes that despite FY2016-2020 funding increases, NEI's FY2020 enacted funding of \$824.1 million is just 21 percent greater than the pre-sequester FY2012 funding of \$702 million. Averaged over those eight years, the 2.6 percent annual growth rate is still less than the average annual biomedical inflation rate of 2.8 percent, thereby eroding purchasing power.

NAEVR will submit testimony to the Senate LHHs Appropriations Subcommittee by its May 22 due date.

Impact of COVID-19 on Appropriations

Congress Passes Three Supplementals, Considers Further Supplementals and FY2021 Appropriations

Prior to its Easter recess, Congress passed three supplemental packages that include additional funding for the NIH and Centers for Disease Control and Prevention (CDC) for COVID-19 vaccine development and related surveillance activities. Congress is not expected to return earlier than May 4 except to pass emergency legislation—if the House and Senate can reach agreement.

Although Congressional leaders have announced an intention to proceed with a "regular-order" appropriations process in which it passes all twelve FY2021 spending bills before the August recess, how it plans to hold Subcommittee and Committee hearings and markups remains to be determined. Although Congress has been accelerating consideration of options for remote voting and hearings, each chamber will need to consider its unique rules and the ultimate constitutionality of the actions it takes if not through on-site sessions. In an election year appropriations process in which staff had already been anticipating a Continuing Resolution (CR) or series of CRs that fund the government in FY2021 at the FY2020 level, rumors of a full-year CR are gaining traction, especially if further COVID-19 supplementals take the majority of time. Although a CR could identify each the NIH and CDC as an "anomaly" and fund at a higher level than that in FY2020, the research advocacy community is concerned about the immediate and long-term impact on grantees and has taken the following actions:

- In March 19 and April 7 letters to Congressional leaders, the Association of American Universities, the Association of Public and Land-Grant Universities, the Association of American Medical Colleges, and the American Council on Education called on Congress to include a supplemental appropriation for major research agencies over the next four months, including the NIH, to ensure grantee funding in the research ramp-down and ramp-up activities, as well as laboratory maintenance activities. The April 7 letter requested \$26 billion.
- In an April 4 letter, the Coalition for Health Funding (CHF), to which NAEVR belongs, emphasized to Congress the need for supplemental appropriations for numerous scientific agencies in light of COVID-19. Within the NIH section, CHF included an NEI example provided by Prevent Blindness as follows:

"NEI support to address possible increased rates of myopia likely to increase due to the use of e-learning platforms and smart phone technology throughout the remainder of this school year, and potentially into the next. This would provide data necessary to address this issue and ensure children are receiving vision care during their developmental and learning years."

- In an April 10 letter to Congressional leaders, the Ad Hoc Group for Medical Research (to which NAEVR belongs) urged Congress to not limit NIH funding within the FY2021 Labor, Health and Human Services, and Education (LHHS) bill to the spending caps agreed to by Congress in the *Bipartisan Budget Act of 2019*. More broadly, in an April 16 letter, CHF and 370 other organizations (including NAEVR) urged Congress to exempt science and health-related agencies from the FY2021 spending caps. These letters arrived at Congress just as the House issued its "302b allocations" or top-line spending levels to its Subcommittee Chairs to begin writing the FY2021 bills.
- On April 6, Congs. Jared Huffman (D-CA), Jan Schakowsky (D-IL), and Diana DeGette (D-CO) led a letter with ten additional signatories urging Department of Health and Human Services (DHHS) Secretary Alex Azar to remove Trump Administration restrictions on NIH-funded human fetal tissue research and to "prioritize science during an unprecedented global health emergency," arguing that NIH is unable to explore all possible options to develop vaccines and therapeutics against COVID-19. This follows the April 1 introduction of the *Protecting Cures Act of 2020* (H.R. 6417) by Congs. Schakowsky and Mark Pocan (D-WI) that ensures all biomedical research tools—including fetal tissue—are available to develop vaccines and treatments against COVID-19.