Dear Speaker Pelosi, House Minority Leader McCarthy, Senate Majority Leader McConnell, and Senate Minority Leader Schumer:

On behalf of the Ad Hoc Group for Medical Research, thank you for your continued efforts to respond to the Coronavirus Disease 2019 (COVID-19) outbreak caused by the SARS-CoV-2 virus, including support for the National Institutes of Health (NIH) provided through the supplemental appropriations bills enacted to date. As you consider additional legislation to promote the nation’s physical, health, and economic resilience to this and future pandemics, we write to urge the inclusion of $31 billion in additional emergency supplemental investments in the NIH.

The Ad Hoc Group for Medical Research is a coalition of over 330 patient and voluntary health groups, medical and scientific societies, academic and research organizations, and industry that support enhancing the federal investment in the biomedical, behavioral, and population-based research conducted and supported by the NIH.

We are grateful for Congress’s ongoing commitment to NIH as a top national priority through the regular appropriations process. The extraordinary research currently underway to identify and develop potential COVID-19 vaccines, anti-virals, and other medical countermeasures is all built on the scientific foundation enabled by the federal investment in NIH. Additionally, the emergency supplemental resources provided to NIH in the recently enacted COVID-19 packages are playing an important role in identifying therapies and vaccines, as well as improving testing and diagnostic methods.

As the pandemic progresses and our understanding of it continues to evolve, the urgency to expand existing, and initiate new and responsive biomedical research has only increased. At the same time, the COVID-19 pandemic is imposing unique challenges on the biomedical research
community. Financial pressures resulting from the pandemic are undermining the ability of non-federal organizations, including philanthropic foundations, non-profits, clinical entities, and others, to supplement the federal investment in research in the same way as they historically have.

To maximize our nation’s capacity to quell the current crisis, prevent a recurrence of COVID-19 or the emergence of future pandemics, and sustain momentum across the broad array of research supported by NIH, the Ad Hoc Group encourages Congress to enact additional measures to support the biomedical research enterprise. The Ad Hoc Group recommends $31 billion in emergency supplemental funding for the NIH as part of future emergency packages Congress enacts to help America recover from the COVID-19 pandemic. Our recommendations address both the immediate and long-term impacts to NIH-supported medical research and span the following categories:

- Opportunities to fund additional COVID-19-related research activities;
- Near-term response to support ramping up of NIH-supported research activities and preserve the momentum of the nation’s investment in biomedical research;
- Long-term investments to rebuild the biomedical research enterprise; and
- Enabling continuation of robust and necessary investments through regular appropriations.

Additional details on these recommendations are included below.

**Opportunities to Fund Additional COVID-19-Related Research Activities**

*Provide additional supplementary funding to NIH for new COVID-19 research.*

To address the current pandemic and to better prepare the country for future outbreaks, we believe that more research will be key to better understand all aspects of the pandemic, from basic virology and disease dynamics, natural history and epidemiology, and improved preventive measures, diagnostics, and other therapeutics, to the impact of the pandemic on vulnerable populations and the mental health of all Americans. A tenet of basic research is that discoveries can come from anywhere and in unexpected ways. We encourage Congress to expand NIH’s capacity to support multidisciplinary, cross-cutting COVID-19 research throughout the agency and through public-private partnerships by providing additional emergency supplemental funding for these activities.

**Near-Term Response to Support Ramping Up of NIH-supported Research Activities and Preserve the Momentum of the Nation’s Investment in Biomedical Research**

*Provide supplementary funding to NIH to support the research workforce during lab closures and to ease ramp up of projects once the pandemic subsides.*

Researchers in every state have been forced to suspend many laboratory activities for their own personal safety and to comply with social distancing guidelines as a result of the COVID-19 pandemic. The closure of many research facilities is impacting trainees, technicians, early-stage investigators, and established investigators alike, preventing the research workforce from maintaining momentum toward better prevention, treatments, diagnostics, and cures for cancer, Alzheimer’s Disease, heart disease, Parkinson’s Disease, and so many more conditions.

NIH has provided helpful administrative flexibility to allow institutions to continue providing salaries and benefits to researchers while these individuals are unable to perform experiments
in the lab. However, substantial costs have been incurred for the shut-down, and there will be significant costs for the eventual ramp-up of research activities, which, as you know, will not occur overnight once physical distancing restrictions are loosened. For example, labs will need to replace personal protective equipment that they have donated to support the critical work of first responders and health care providers and will also need to rejuvenate experimental models. Additionally, core facilities, such as those that provide DNA sequencing and flow cytometry services, support cross-disciplinary research efforts across federally funded research labs. These facilities are also closed or functioning below capacity to ensure readiness for any ongoing COVID-19 research efforts, and they also need support.

To help preserve the momentum of the nation’s investment in biomedical research and aid in ramping up labs to their prior research capacities, the Ad Hoc Group supports providing emergency supplemental funding of at least 30% of NIH’s extramural research budget, which would roughly offset costs associated with three to four months of decreased activity in labs.¹ Support to complete current commitments would promote continued balance across NIH’s broad array of portfolios, laying the foundation to combat unknown future threats as new investments in targeted areas increase. Not only will additional support be crucial for resuming our nation’s research progress across the full range of NIH’s portfolios as quickly as practical, it also will especially help early career investigators who are particularly susceptible to career disruptions as a result of the pandemic.

*Extend period of disbursement for multi-year awards.*

Grant deadlines that expire during or close to this period of inactivity will pose particular challenges for multi-year awards. RF1, UF1, and other multi-year award recipients could lose current funding during this time of inactivity in the lab. We encourage Congress to allow cost extensions of the period of disbursement for these multi-year grants so researchers can complete the work they intended to conduct using the funding as awarded.

**Long-Term Investments to Rebuild the Biomedical Research Enterprise**

*Support facility upgrades to ensure access to cutting-edge technologies and laboratory infrastructure.*

NIH researchers in both the extramural and intramural programs are continually innovating and working toward bold medical research discoveries. These discoveries occur at an increasingly fast pace, and the ability to conduct cutting-edge research relies upon access to state-of-the-art technologies and the appropriate physical infrastructure to support these technologies and corresponding research. Specifically related to NIH’s intramural facilities, the National Academies of Sciences, Engineering, and Medicine published a 2019 report recommending $1.3 billion in new funding to address needed buildings and facilities upgrades to catch-up on maintenance and repair backlogs on NIH’s main campus,² a need that rises to $1.9 billion when NIH’s other campuses and the fact that NASEM’s report is based on 2018 dollars are taken into account. Extramural research institutions also need to ensure that researchers have access to

¹ This recommendation is consistent with, and a subset of, the request of the broader scientific community to provide an estimated $26 billion for all major federal research agencies, including the NIH. The Ad Hoc Group’s $31 billion recommendation for NIH includes NIH’s share of the broader scientific community’s recommendation, as well as funding for the additional priorities identified in this letter related specifically to NIH.

cutting-edge facilities and infrastructure, especially now as NIH and the nation are calling on our biomedical research enterprise to significantly increase research capacity to accelerate the pace of innovation to combat COVID-19.

The Ad Hoc Group encourages Congress to invest now in federal and non-federal physical infrastructure improvements for all medical researchers supported by NIH to foster continued efforts toward cutting-edge, foundational, and translational medical research discoveries and to ensure the U.S. research enterprise maintains its global competitiveness. Recent investments in interconnected data repositories, core facilities with shared instrumentation, and specialized research spaces such as biosafety level 3+ laboratories have facilitated the research community’s ability to quickly develop and implement research plans with money provided by Congress through the supplemental spending bills to date. Investments in research infrastructure such as high-speed computation, greater data repository capacity, and cutting-edge research facilities will contribute to greater resiliency during pandemics and will better prepare the research community – and the nation – to respond to future outbreaks.

Support the long-term health of the nation’s biomedical research workforce.

Aside from the immediate impacts that COVID-19 is having on slowing non-pandemic-related research progress, temporarily halting the research enterprise is expected to have long-lasting effects on the research workforce. Graduate students, postdoctoral researchers, and early-stage investigators of today and the workforce pipeline for the near future face additional hurdles to launching their careers without additional support during these crucial and vulnerable times in their career development. The Ad Hoc Group recommends that supplemental funds support additional graduate student, postdoctoral, and early-stage investigator training grants and awards. Trainees who are facing interruptions to their development at crucial moments may be forced into other fields and lost to the research community forever.

In addition, cutting-edge medical research in the future will also rely on collaboration between individuals with diverse skill sets, including an increasing reliance on computer science, engineering, artificial intelligence, and other computational capabilities. The Ad Hoc Group encourages Congress to increase its investments in NIH support for a diverse medical research workforce through activities to revitalize education and career preparation in Science, Technology, Engineering, Mathematics, and Medicine (STEMM).

Enabling Continuation of Robust and Necessary Investments Through Regular Appropriations

Exempt key Labor-HHS agencies from FY 2021 budget caps.

As we learn more about the novel coronavirus, it will be critical to ensure that appropriators have the necessary flexibility to invest in the entire medical research enterprise without risking underinvestment in other core elements of our public health infrastructure, or in research on the diseases which continue to afflict Americans every day, including cancer, heart disease, Alzheimer’s, etc. As noted in our April 10 letter to appropriators, the Ad Hoc Group supports the bipartisan proposal to exempt key health programs, including NIH, from the fiscal year (FY) 2021 budget caps. We encourage Congress to include statutory language to this effect in the next comprehensive COVID-19 supplemental spending bill, and also to maintain a robust commitment to NIH through the regular appropriations process.
Conclusion

Thank you for your consideration of our recommendation for $31 billion in emergency supplemental funding for NIH. As you know, NIH-funded research can help us address the current coronavirus crisis, as well as all other diseases and conditions that afflict Americans. This life-saving work, which is conducted in every state and Washington, D.C., drives local and national economic activity, creating skilled, high-paying jobs and fostering new products and industries, and catalyzes increases in private sector investment. In FY 2019, NIH-funded research supported more than 476,000 jobs across the U.S. and generated more than $81 billion in new economic activity. A $1 increase in public basic research stimulates an additional $8.38 investment in the private sector after eight years. A $1 increase in public clinical research stimulates an additional $2.35 in private sector investments after three years. Congress’s actions to ensure a speedy return to research as labs reopen not only will be critical to the near-and long-term health of all Americans and the research enterprise, it also will play a role in strengthening the nation’s fiscal health during this challenging time.

The Ad Hoc Group appreciates Congress’s historical commitment to ensuring robust NIH funding to catalyze cures, drive science, accelerate innovation, and support local economies. To ensure that the U.S. maintains its ability to provide new and better cures, diagnostics, and treatments for patients everywhere, additional support for NIH and its grantees is essential in this critical time.

Sincerely,

Tannaz Rasouli
Executive Director
Ad Hoc Group for Medical Research

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