The Ad Hoc Group for Medical Research is a coalition of more than 300 patient and voluntary health groups, medical and scientific societies, academic and research organizations, and industry. We appreciate the opportunity to submit this statement in support of strengthening the federal investment in biomedical, behavioral, social, and population-based research conducted and supported by the National Institutes of Health (NIH) through a recommendation of at least $41.6 billion for NIH in FY 2020.

As a result of the strong, bipartisan vision of Senate and House Labor-HHS-Education Appropriations Subcommittees over the last four years, Congress has helped the agency regain some of the ground lost after years of effectively flat budgets. This renewed investment in NIH has advanced discovery toward promising therapies and diagnostics, reenergized existing and aspiring scientists nationwide, and restored hope for patients and their families.

In FY 2020, the Ad Hoc Group recommends at least $41.6 billion for the NIH, a $2.5 billion increase over the NIH’s program level funding in FY 2019. This funding level, supported by more than 315 stakeholder organizations, would allow for meaningful growth above inflation in the base budget that would expand NIH’s capacity to support promising science in all disciplines in addition to special initiatives. It also would ensure that funding from the Innovation Account established in the 21st Century Cures Act would supplement the agency’s base budget, as intended, through dedicated funding for specific programs.

In addition, we recognize that the impractical budget caps imposed by the Budget Control Act of 2011 undermine necessary investment in the full range of critical federal priorities. The Ad Hoc Group is among the nearly 850 organizations urging a bipartisan budget deal to increase the caps
for nondefense discretionary spending and joins the Coalition for Health Funding, Coalition on Human Needs, Committee for Education Funding, and Campaign to Invest in America's Workforce in advocating a significant increase in the subcommittee’s 302(b) allocation in FY 2020.

We believe that science and innovation are essential if we are to continue to meet current and emerging health challenges, improve our nation’s physical and fiscal health, and sustain our leadership in medical research. As the Subcommittee has recognized, to remain a global leader in accelerating the development of life-changing cures, pioneering treatments, and innovative prevention strategies, it is essential that Congress sustain robust increases in the NIH budget.

**NIH: A Partnership to Save Lives and Provide Hope.** The partnership between NIH and America’s scientists, medical schools, teaching hospitals, universities, and research institutions is a unique and highly-productive relationship, leveraging the full strength of our nation’s research enterprise to translate this knowledge into the next generation of diagnostics, therapeutics, and cures. More than 80 percent of the NIH’s budget is competitively awarded through nearly 50,000 research and training grants to more than 300,000 researchers at over 2,500 universities and research institutions located in every state and Washington, D.C. The federal government has an essential and irreplaceable role in supporting medical research. No other public, corporate or charitable entity is willing or able to provide the broad and sustained funding for the cutting edge basic research necessary to yield new innovations and technologies of the future.

NIH has supported biomedical research to enhance health, lengthen life, and reduce illness and disability for more than 100 years. The following are a few of the many examples of how NIH research has contributed to improvements in the nation’s health.

- Breakthroughs in the treatment of depression came in early 2019 with FDA approval of two new drugs – one for treatment-resistant depression and the first ever treatment for postpartum
depression. These approvals follow nearly three decades of research funded by the NIH to identify novel mechanisms of drug action.

- The NIH has supported research on sickle cell disease (SCD) since 1948, and the disease currently affects about 100,000 Americans. Today, an ongoing multi-center clinical trial is using gene therapy to replace the defective gene that causes SCD, beta globin, in patient’s blood cells and effectively curing them of disease.

- In 2007, induced pluripotent stem cells (iPSC) were discovered when adult cells were re-engineered into early non-differentiated versions of themselves. Today, researchers have used iPSCs to successfully treat a major cause of blindness - age-related macular degeneration - in animal models and are awaiting FDA approval to begin the first iPSC clinical trial in the U.S.

- NIH-supported researchers continue to work toward strategies to better prevent, identify, and treat pain and substance use disorders through the HEAL (Helping to End Addiction Long-term) Initiative. HEAL aims to support research into new, non-addictive medication and to establish public and private partnerships to develop best practices in communities.

- The widespread use of the measles vaccine since its development in the 1960s led to a 99.9% decrease in annual cases of the disease compared to pre-vaccine levels, officially eliminating the disease in the U.S. in 2000. Every $1 spent on routine childhood vaccinations, including against measles, is estimated to save $5 in direct costs, and $11 in broader costs to society.

- Today, treatments can suppress HIV to undetectable levels, and a 20-year-old HIV-positive adult living in the U.S. who receives these treatments is expected to live into his or her early 70s, nearly as long as someone without HIV.

- NIH funding supported research that contributed to all of the 210 new drugs approved by the FDA between 2010 and 2016.
The death rate for all cancers combined has been declining since the early 1990s for adults and since the 1970s for children. Overall cancer death rates have dropped by nearly 27 percent with more than 2.6 million deaths avoided in total between 1991 and 2016. Research in cancer immunotherapy has led to the development of several new methods of treating cancer by restoring or enhancing the immune system’s ability to fight the disease.

Deaths from heart disease fell 68 percent from 1969 to 2015, through research advances supported in large part by NIH. The Framingham Heart Study and other NIH-supported research have identified risk factors for heart disease, such as cholesterol, smoking, and high blood pressure. This work has led to new strategies for preventing heart disease.

For patients and their families, NIH is the “National Institutes of Hope.”

**Sustaining Scientific Momentum Requires Sustained Funding.** The leadership and staff at NIH and its Institutes and Centers have engaged the broader community to identify emerging research opportunities and urgent health needs and to prioritize precious federal dollars to areas demonstrating the greatest promise. Sustained robust increases in NIH funding are needed if we are to continue to take full advantage of these opportunities to accelerate the development of pioneering treatments and innovative prevention strategies.

One long-lasting potential impact of investments in NIH is on the next generation of scientists. The federal commitment to NIH sends a strong signal to these aspiring researchers about the stability of a long-term career in medical research. Of particular interest is maintaining a cadre of clinician-scientists to facilitate translation of basic research to human medicine. Even with the recent investment in NIH, nearly 4 of every 5 research ideas that are proposed to NIH every year cannot be funded. Additional funding is needed if we are to strengthen our nation’s research capacity, ensure a
medical research workforce that reflects the racial and gender diversity of our citizenry, and inspire a
passion for science in current and future generations of researchers.

**NIH is Critical to U.S. Competitiveness.** Our country still has the most robust medical
research capacity in the world; however, other countries have significantly increased their investment
in biomedical science, which leaves us vulnerable to the risk that talented medical researchers from
all over the world may return to better opportunities in their home countries. We cannot afford to lose
that intellectual capacity, much less the jobs and industries fueled by medical research. The U.S. has
been the global leader in medical research because of Congress’s bipartisan recognition of NIH’s
critical role. To continue our dominance, we must reaffirm this commitment to provide NIH the
funds needed to maintain our competitive edge.

**NIH: An Answer to Challenging Times.** Research supported by NIH drives local and
national economic activity, creating skilled, high-paying jobs and fostering new products and
industries, and catalyzes increases in private sector investment. A $1 increase in public *basic* research
stimulates an additional $8.38 investment from 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.
According to a United for Medical Research [report](#), in 2018, NIH-funded research supported more
than 433,000 jobs across the U.S. and generated more than $74 billion in new economic activity.

The Ad Hoc Group’s members recognize the tremendous challenges facing our nation and
acknowledge the difficult decisions that must be made to restore our country’s fiscal health.
Strengthening our commitment to medical research, through robust funding of the NIH, is a critical
element in ensuring the health and well-being of the American people and our economy. Therefore,
for FY 2020, the Ad Hoc Group for Medical Research recommends that NIH receive at least a $41.6
billion to continue the momentum in our nation's investment in medical research.