Association of
American Medical Colleges
655 K Street, NW, Suite 100, Washington, DC 20001-2399
T 202 828 0400
aamc.org

February 5, 2021

The Honorable Edward Markey
U.S. Senate
Washington, DC 20510

The Honorable Thom Tillis
U.S. Senate
Washington, DC 20510

The Honorable Gary Peters
U.S. Senate
Washington, DC 20510

The Honorable Susan Collins
U.S. Senate
Washington, DC 20510

Dear Senators Markey, Tillis, Peters, and Collins:

On behalf of the Association of American Medical Colleges (AAMC), thank you for re-introducing the Research Investment to Spark the Economy (RISE) Act, authorizing $25 billion for federal research agencies to mitigate disruptions related to the Coronavirus Disease 2019 (COVID-19) pandemic and to help restore pre-pandemic momentum in the nation's scientific enterprise. The AAMC is pleased to endorse this important legislation.

The AAMC is a not-for-profit association dedicated to transforming health through medical education, health care, medical research, and community collaborations. Its members are all 155 accredited U.S. and 17 accredited Canadian medical schools; more than 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and their more than 179,000 full-time faculty members, 92,000 medical students, 140,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

Medical schools and teaching hospitals are leading centers of medical research, with scientists at these institutions conducting over 50% of extramural research funded by the National Institutes of Health (NIH); they also engage with a number of other federal science agencies. This partnership has led to many of the world's most important medical advances – from fundamental science that lays the foundation for future diagnostics and therapies, to life-changing preventive interventions and treatments resulting in sharp declines in death from heart disease and stroke, new cancer immunotherapies that are dramatically improving survival rates for some cancers, and new technologies like CRISPR and other gene-editing tools that hold great potential to yield treatments for diseases that currently have none. Most recently, the benefits of this longstanding commitment to research has been prominently revealed through the approval of two mRNA vaccines against SARS-CoV-2, the technology behind which was developed over nearly a decade of federally funded, curiosity-driven science. Furthermore, the federal investments in medical research have enabled medical schools and teaching hospitals to play an instrumental role in the nation's COVID-19 response, developing much-needed diagnostic and serological

tests and therapeutics, while continuing to provide expert patient care for patients, informed by the latest innovations in basic and clinical research.

Since the start of the pandemic nearly one year ago, many labs pivoted to pandemic-related research to accelerate global efforts to combat COVID-19. As you know, however, to promote social distancing and safety, institutions nationwide were initially forced to suspend other research activities that required access to laboratories and research facilities, leading the vast majority of labs and clinical research, including clinical trials, nationwide to shut down or scale back operations substantially. Progress on conducting new experiments was and continues to be delayed for many, and pre-pandemic research that was suspended mid-stream may never be recovered.

As labs have resumed their non-COVID-19 research operations cautiously and with protections to safeguard personnel, institutions have incurred substantial expenses to support the research workforce, and existing funding will not be sufficient to address pandemic-related disruptions without displacing new research. In testimony before a Senate committee, for NIH alone, NIH Director Francis Collins, MD, PhD, estimated at least $10 billion in research that will be lost as a result, to say nothing of the impact on patients, who will be forced to wait longer for progress on a wide array of health threats, and the impact on the research workforce pipeline, as early stage investigators may be forced to choose different career paths.

Your legislation takes an important step in preserving our nation's investment in research across federal science agencies and in ensuring that we do not lose ground in innovation and discovery or turn away a generation of future biomedical researchers. Research relief will be key to supporting the research enterprise and its workforce in resuming operations and completing research studies that have already received substantial federal investments. The U.S.'s economic vitality and global competitiveness are both favorably enhanced by the federal commitment to research, and a thriving, diverse national science agenda also is essential to help the nation address the current crisis and build resilience against future threats. We are grateful that you are championing these needs as a key priority and for your ongoing efforts to secure funding support.

Thank you again for your leadership. Please do not hesitate to contact AAMC Chief Public Policy Officer Karen Fisher, J.D. (kfisher@aamc.org) or AAMC Senior Director Tannaz Rasouli (trasouli@aamc.org) with any questions. We look forward to continuing to work with you.

Sincerely,

David J. Skorton, MD
President and Chief Executive Officer
Association of American Medical Colleges