

## Policy Update

### Budget Cuts May Pinch NIH

By Grant Olan

Congress missed the March 1, 2013, deadline for replacing the \$1.2 trillion in federal budget cuts (sequestration) mandated by the Budget Control Act of 2011. As a consequence, federal defense and domestic programs, including the National Institutes of Health (NIH), are facing an across-the-board cut—or “sequester”—of \$85 billion in Fiscal Year (FY) 2013. This translates to an approximately 9 percent budget cut for the NIH and other “nonexempt nondefense programs” (nonexempt defense programs will see a cut of approximately 13 percent). Congress deemed a few agencies “exempt,” including Medicare (with cuts capped at 2 percent) and the Department of Veterans Affairs (which is completely exempt from cuts). The remaining \$1.1 trillion in cuts mandated by the Budget Control Act of 2011 will be implemented between 2014 and 2021.

NIH recently sent letters to current grantees notifying them of these steep cuts. The agency intends to prioritize administrative costs and current obligations over new research. However, all noncompeting continuation awards are currently being funded at a level below that indicated on the most recent notice of award (generally up to 90 percent). Although some awards may possibly be restored to higher levels, they probably will not reach the full FY 2013 commitment level.

According to NIH, “Plans for new grants and contracts may be re-scoped, delayed, or canceled depending on the nature of the work and the availability of resources.” The agency also sent a letter to current contractors about cuts that may affect them. NIH Director Francis S. Collins, MD, PhD, instructed each NIH institute and center to put together their own plans for applying the cuts in ways

that minimize the scientific impact. The plans will be announced soon. Links to those announcements will be available on the NIH extramural financial operations page at <http://grants.nih.gov/grants/financial/index.htm>.

#### Possible ripple effect

The ASN leadership is concerned about the ripple effect these budget cuts will have on the future of research and on investigators and patients. The society has been actively advocating for a balanced approach to deficit reduction instead of indiscriminate cuts to all programs.

**NIH Director Francis S. Collins, MD, PhD, instructed each NIH institute and center to put together their own plans for applying the cuts in ways that minimize the scientific impact.**

“Medical research is a smart investment. It doesn’t make sense to cut a program that creates jobs, saves lives, and drives down health care costs,” said John R. Sedor, MD, ASN Research Advocacy Committee Chair. “Congress needs to sustain funding for NIH, which has benefited from longstanding, bipartisan support from presidents and Congress alike.”

ASN collaborates with a number of coalitions of patient groups and health professional organizations opposed to sequestration. The society has par-

ticipated in a number of rallies, briefings, and Hill Day meetings with congressional offices. ASN also launched the society’s first-ever grassroots campaign last fall. Through calls, emails, and district office meetings with their members of Congress, hundreds of ASN members have answered the call to action.

You can help by sending a letter to the editor and helping build public support for sustained medical research funding. Please visit ASN’s website at <http://www.asn-online.org/policy/> for a sample letter to the editor you can send to your local newspapers.

The next opportunity to replace sequestration with a rational plan comes in May when Congress must reach a deal to raise the federal debt ceiling, the legal limit of how much debt the United States can assume.

In the meantime, the president will release his 2014 budget recommendations in April. The House and Senate have been working on their 2014 budgets.

Given that—at least for the time being—sequestration does not seem to be going away, ASN is working to ensure that NIH has the most robust baseline budget possible from Congress in 2014. The society is collaborating with the Coalition for Health Funding in support of \$65 billion for discretionary public health and health research programs in FY 2014. During the society’s third Annual ASN Hill Day on April 25, ASN Council, Board of Advisors, and Public Policy Board members will meet with scores of congressional offices in both the House and Senate to discuss the importance of sustained funding for NIH and innovative kidney research in particular. Last year ASN met with nearly 60 congressional offices, including half a dozen members of Congress who sit on committees with jurisdiction over the society’s key issues. ●



## CJASN for iOS and Android

Access the latest research and commentary published in the Clinical Journal of the American Society of Nephrology from anywhere in the world.



Download these and other ASN apps at [www.asn-online.org/media](http://www.asn-online.org/media).

