

SCORECARD LEGISLATIVE ISSUES

	FY2017 Senate	FY2017 House
National Institutes of Health	\$34.1 B	\$33.3 B
National Eye Institute	\$740.8 M	\$735.6 M
Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative	\$250 M	\$195 M
Cancer Moonshot	\$550 M	\$195 M
Precision Medicine Initiative	\$300 M	\$300 M
Antibiotic Resistance	\$463 M	\$413 M
Clinical and Translational Science Awards (CTSA)	\$520.7 M	\$511.5 M
Institutional Development Award (IDeA) program	\$333.4 M	\$333.3 M

Congress Passes Short-Term CR; NAEVR Urges Final FY2017 Appropriations

On September 28, Congress passed—and the President signed on September 29—a Continuing Resolution (CR) which funds the government at the Fiscal Year (FY) 2016 level through December 9—with a roughly 0.5 percent across-the-board cut to comply with the FY2017 budget cap. It also provides \$1.1 billion to combat the Zika virus.

NAEVR issued the following statement:

“NAEVR is pleased that Congress avoided the potentially disastrous impact of a government shutdown by passing this short-term CR, as the Alliance had urged in its September advocacy activities on Capitol Hill. We continue to call upon Congress to return following the election to complete FY2017 appropriations that includes the \$2 billion NIH funding increase to \$34.1 billion, as proposed by the Senate Appropriations Committee, which reflects real growth above biomedical inflation.

Although the CR is short-term, it could still impede the progress of research, especially since it reflects a net funding level slightly below that of FY2016 during this period. As a result, grants may be approved but not funded, jeopardizing labs and their employees. In some cases, investigators may require bridge funding from private funding foundations or institution philanthropic funding to continue the momentum of research and retain trained personnel. Research does not have a ‘pause button.’”

Congress returns the week of November 14 for its post-election lame-duck session, and will have only twelve legislative days before the CR expires on December 9. It may need to pass another short-term CR in order to finalize an FY2017 omnibus spending bill, which is more likely than a series of “minibuses” that package a few bills at a time. Congress also has the option of passing a full-year CR which would not increase NIH funding unless it is designated as an anomaly and funded at a higher level than in FY2016.

NAEVR/ARVO Host Delegations at Fourth Annual Rally for Medical Research Advocacy Day

NAEVR co-hosted the Texas delegation, which included retinal regeneration researcher Sai Chavala, M.D. (University of North Texas Health Science Center), right, bone researcher Babatunde Oyajobi, Ph.D. (University of Texas Health Science Center at San Antonio) representing the American Society for Bone and Mineral Research, left, and Lisa Hall, patient advocate for the Pulmonary Fibrosis Foundation, center



On September 21 and just a week after NAEVR hosted 22 *Emerging Vision Scientists* in Capitol Hill visits (see story inside), NAEVR and ARVO co-sponsored and participated in the fourth annual *Rally for Medical Research Advocacy Day*. NAEVR hosted clinician-scientist Sai Chavala, M.D. (University of North Texas Health Science Center), who is an NEI-funded investigator into retinal regeneration and was nominated by NAEVR/ARVO Board Member Thomas Yorio, Ph.D. NAEVR’s James Jorkasky co-hosted the Texas delegation, while NAEVR’s David Epstein co-hosted the California delegation and ARVO’s Matt Windsor, Ph.D. co-hosted the Wisconsin delegation.

The largest and most diverse group of *Rally* advocates yet, the nearly 350 participants from more than 125 different organizations came together from 37 states and the District of Columbia to make more than 250 visits with Congressional offices. Researchers described their breakthroughs, while patient advocates emphasized how this emerging research is saving lives and improving the quality of life. Consistent with NAEVR’s prior message, advocates urged that Congress enact a short-term CR, then finalize FY2017 appropriations before year’s end that includes the \$2 billion NIH increase.

Dr. Chavala commented on his participation as a *Rally* advocate:

“I shared with staff that I did not initially intend to become a researcher, but in my clinical practice I saw patients who were going blind from retinal degeneration—including many elderly patients who had just retired and wanted to enjoy their free time. Frustrated, I wanted to do more to help these patients and decided to begin my research into retinal regeneration. Federal funding support through the NIH and NEI is vital to my work, and I wanted to do my part in expressing to the Texas delegation Members that robust, sustained, and predictable funding increases are necessary for the NIH/NEI. I enjoyed advocating with my colleagues and thank NAEVR for hosting me at this important event, which enabled me to see how important it is for scientists to educate policymakers about the impact of their research on patients.”

NEI/NIH Announce FY2016 Funding for Key Programs

Audacious Goals Initiative: On September 1, the NEI awarded \$12.4 million over three years to six projects engaged in identifying biological factors that affect neural regeneration in the retina.

Brain Research through Advancing Innovative Technologies (BRAIN) Initiative: On October 13, the NIH announced its third round of BI awards, bringing its total FY2016 investment to just over \$150 million. The awards expand NIH’s efforts to develop new tools and technologies to understand neural circuit function and capture a dynamic view of the brain in action. Although the amount of FY2016 awards to vision researchers or those studying the brain through the visual route is not yet known, these researchers have done well in the first two rounds, having been awarded \$31 million.