

THE AMERICAN ASSOCIATION OF  
IMMUNOLOGISTS

May 15, 2015

**Response of the American Association of Immunologists (AAI) to the NIH Request for Information: Optimizing Funding Policies and Other Strategies to Improve the Impact and Sustainability of Biomedical Research**

(<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-084.html>)

*Submitted on behalf of AAI by Lauren G. Gross, J.D.,  
Director of AAI Public Policy and Government Affairs*

**1. Key issues that currently limit the impact of NIH's funding for biomedical research and challenge the sustainability of the biomedical research enterprise. We welcome responses that explain why these issues are of high importance.**

*a) Large-scale projects, contracts, and centers consume a large proportion of the NIH research budget:* Although many are important, efficient, and efficacious, it may be that certain large scale projects are not absolutely necessary in these difficult fiscal times. AAI urges NIH to carefully evaluate ongoing - and plans for future - large-scale projects, contracts, and centers for their need, efficacy, redundancy, cost, and likely impact on future research. Further, NIH should increase transparency by making its findings public and by consulting with the scientific community before new programs/projects/centers are created.

*b) Indirect cost rates should be re-examined:* According to the Government Accountability Office (GAO), almost 25% of NIH's extramural grant spending goes to indirect costs (<http://www.gao.gov/assets/660/658087.pdf>). In addition, between 2003 and 2012, indirect cost reimbursements increased at a faster rate than direct cost reimbursements, and 10% of institutions awarded grants received 70% of these funds, with indirect reimbursement rates between 46% and 69.5%.

AAI recognizes, however, that many of our members are faculty and students at institutions that receive indirect costs, and is aware that rate caps could result in cost-shifting within institutional budgets that would undermine any benefit from reducing rates. Although AAI is not recommending a specific reduction, AAI 1) supports the GAO recommendation that NIH assess the future impact of increased indirect costs on its ability to fund research grants, and 2) urges NIH to lower indirect cost rates to address perverse incentives or to correct historical or regional discrepancies that may no longer be warranted.

*c) An increasing percentage of investigator salary is charged to NIH grants:* This practice limits the impact of NIH's funding by 1) increasing the burden on researchers to obtain NIH grants to pay their own salaries, which also increases the number of applications and need for peer review; and 2) reducing the funds available to conduct research. Institutions should also be invested in the success of their researchers, and therefore should be required to provide adequate salary support. AAI encourages NIH to examine this issue in an effort to make more funds available for research, recognizing that any change in the percentage allocated must be phased in over time to avoid job loss or damage to ongoing research.

*d) Administrative burden on investigators is high:* According to a report by Decker *et al.* ([http://www.iscintelligence.com/archivos\\_subidos/usfacultyburden\\_5.pdf](http://www.iscintelligence.com/archivos_subidos/usfacultyburden_5.pdf)), faculty funded by federal research grants spent 42% of their time on administrative tasks (both pre- and post-award), which takes away from the time that they could be performing valuable research. Some of these administrative activities include progress reports, Institutional Review Board (IRB) protocols, and Institutional Animal Care and Use Committee (IACUC) protocols. In some cases, funded institutions have addressed these issues by hiring more administrative staff, which creates an increased financial burden that may further raise indirect costs. In order to maximize the productivity (and morale) of funded investigators, NIH should consider ways to reduce the administrative burden placed on investigators.

**2. Ideas about adjusting current funding policies to ensure both continued impact and sustainability of the biomedical research enterprise. We welcome responses that point to specific strengths or weaknesses in current policies and suggest how we can build or improve them.**

*a) NIH should consider reducing RFAs and other earmarked projects:* Many of today's translational successes have been built upon research that produced unexpected results and led the field in new directions. NIH funding makes many of these unforeseeable successes possible through a diverse portfolio of research project grants (RPGs) and investigator-initiated research. Requests for Applications (RFAs) limit the number of potential applicants, and funding for RFAs detracts from the budget available for other RPGs. Therefore, AAI recommends that NIH evaluate and publicly report the number and focus of RFAs, and consider limiting the funds allocated to these types of grants.

*b) NIH should evaluate the efficacy of giving*

These policies, which do not necessarily prevent well-funded investigators from receiving additional grants, may facilitate the best use a

high demand (<http://www.nature.com/news/wanted-staff-scientist-positions-for-postdocs-1.17303>). In addition to creating stable, well-paying positions for productive researchers, funding staff scientists would increase lab stability and thereby enhance the impact of NIH funding. In the form presented by NCI, individuals would have to submit competitive grant applications to fund their salaries as staff scientists; this process may put these researchers in the same position as those competing for R01s, decreas

---

9650 ROCKVILLE PIKE, BETHESDA, MARYLAND 20814-3994  
PHONE: 301-634-7178 \* FAX: 301-634-7887