

**Statement by the Ad Hoc Group for Medical Research on
FY 2027 Appropriations for the National Institutes of Health
Submitted for the Record to the Senate Appropriations Subcommittee on Labor, Health and
Human Services, Education, and Related Agencies – May 22, 2026**

Nearly 600 members of the [Ad Hoc Group for Medical Research](#), representing patients, scientists, health professionals, academic and research institutions, educators, and industry, recommend at least \$51.303 billion for the National Institutes of Health (NIH) for fiscal year (FY) 2027.

We are grateful for the Committee’s longstanding bipartisan support, including the FY 2026 federal investment, which underpins health advances benefiting Americans in every community. Additionally, we appreciate the concerns raised by Subcommittee members during recent hearings regarding proposed cuts to the NIH within the President’s FY27 budget request. NIH-supported research provides the foundation for nearly every preventive intervention, diagnostic, treatment, and cure in practice today. Each year, more than 300,000 researchers nationwide pursue the most promising ideas to address existing and emerging health threats, leading to breakthroughs in cancer, Alzheimer’s disease and related dementias, diabetes, Parkinson’s disease, chronic and autoimmune conditions, and many other diagnoses.

As health challenges persist and our understanding of medicine improves, the scope of scientific opportunity continues to expand, yet NIH is able to support only a fraction of proposals it receives, a gap worsened when budgets lag behind biomedical research inflation. To maximize discoveries, improve patient outcomes, strengthen U.S. global competitiveness, and cultivate the next generation of researchers, NIH funding must resume a trajectory of robust, sustained growth.

Federal investment in NIH fosters collaboration among institutions, maximizes taxpayer dollars, and strengthens research capacity nationwide. Beyond health benefits, NIH funding drives economic activity, supports high-quality jobs, spurs private sector investment, and bolsters U.S. leadership in biomedical innovation. Sustained support also enables early-career investigators to enter the workforce, ensuring a strong pipeline of scientific talent.

Global competitors, including China, are rapidly expanding investment in biomedical research. To avoid losing the scientific, economic, and commercial returns of new discoveries, the United States must maintain a strong, predictable commitment to NIH. Stable funding allows long-term research to progress uninterrupted, supporting transformative breakthroughs and addressing pressing health challenges.

For these reasons, we urge lawmakers to support the coalition’s recommendation of \$51.303 billion. Importantly, we also recommend a funding allocation for the Labor-HHS-Education Subcommittee in FY 2027 that allows for the necessary investment in NIH and other agencies that promote the health of our nation. Additionally, as described below, we urge lawmakers and the Administration to apply a measured approach to any forward funding strategies and to ensure that NIH can expend its current appropriation in a timely manner. Securing a reliable and robust budget trajectory without disruptions – including support for exploration of new ideas – is key to strengthening the nation’s research capacity, supporting the biomedical workforce, maintaining global leadership in science, and ensuring that promising scientific opportunities are not delayed or lost.

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. Through this collaboration, discoveries made in laboratories across the country are translated into the next generation of diagnostics, therapeutics, and cures. Nearly

82 percent of NIH's budget is competitively awarded through a rigorous merit-based process to support nearly 50,000 research and training grants to more than 300,000 researchers at over 2,500 universities, medical schools, and research institutions located in every state, Washington, D.C., and U.S. territories.

The federal government plays an essential and irreplaceable role in supporting medical research. NIH funds foundational and high-risk research, including studies of rare diseases and early stage basic science, that industry is often unwilling to support because the financial returns are uncertain. Federal investment also fosters collaboration among institutions nationwide and maximizes the reach of each taxpayer dollar.

For patients and their families, NIH is often referred to as the "National Institutes of Hope." The following examples highlight the many ways NIH-supported research continues to improve the nation's health.ⁱ

- Researchers supported by NIH uncovered new insights into Alzheimer's disease in 2025, including evidence that lithium deficiency may contribute to disease development and the identification of blood-based and imaging biomarkers that could improve early detection, prognosis, and disease monitoring.
 - Innovative therapies for rare childhood diseases emerged from NIH-supported research in 2025, including personalized gene-editing approaches and treatments that correct CoQ10 deficiency and reverse associated brain damage.
 - In 2024, NIH research supported the development of a blood test that identified Alzheimer's disease correctly in older adults with nearly 90 percent accuracy. Such tests assist in speedier diagnoses and improve access to earlier treatments – allowing a longer quality of life, reducing the burden on often unpaid caregivers, and reducing the overall costs to the U.S. economy.
- In 2020, the gene editing tool CRISPR was successfully used to treat the inherited blood disorders sickle cell anemia and beta-thalassemia, only eight years after the primordial bacterial immune system was harnessed for therapeutic use in the laboratory.

Sustaining Scientific Momentum Requires Sustained Funding Growth. Historically, NIH leadership and its Institutes and Centers have engaged the broader scientific community to identify emerging research opportunities and urgent health needs. Sustained and predictable funding increases are necessary to ensure NIH can pursue these opportunities and support the most promising scientific ideas.

Even with recent investments, NIH currently funds only about one in five research proposals submitted by scientists. This means that many highly rated projects with the potential to produce life-saving discoveries go unfunded each year.

One long lasting impact of sustained NIH funding is its effect on the next generation of scientists. Stable and predictable funding allows early career researchers to pursue careers in biomedical science and strengthens the nation's research workforce. Funding uncertainty or reductions can discourage talented young scientists from entering or remaining in research careers, weakening the future of the biomedical enterprise.

NIH's Funding Model Maximizes Scientific Opportunity. In addition to the direct impact of the proposed cuts, proposals to fully frontload research projects in FY 2027 threaten to reduce substantially the number of ideas and people funded in the next fiscal year.ⁱⁱ Most research projects supported by NIH span multiple years, often between three and five years. When NIH approves a research grant, the agency commits to the total amount of funding required for the full project period. The availability of new awards for innovative ideas is determined annually and depends on the level of appropriated funds.

This approach enables NIH to competitively fund the highest-quality and most promising research each year, while maximizing its capacity to fund new investigators and projects. By allocating funds on an annual basis, the agency can maintain flexibility in managing its portfolio and ensure that promising new ideas from scientists across the country continue to receive support.

On occasion, NIH provides forward funding of multiyear awards by providing the full amount for the entire project period during the first year to institutions. While this approach may be appropriate in limited circumstances, dramatically expanding the use of forward funding, as the administration is proposing, would require NIH to obligate a much larger share of its budget to a smaller number of awards in any given year. As a result, fewer research proposals could be funded, reducing opportunities for investigators to secure NIH support. Expanded use of forward funding also could have unintended consequences for the research workforce. In the year a multi-year award is committed, it may require a disproportionate share of the NIH budget, potentially reducing the number of new grants available to early career investigators and other scientists seeking to establish or sustain research programs.

Additionally, while the Ad Hoc Group's focus exclusively is on top-line agency-wide funding for the NIH, many of the organizations that participate in the coalition actively engage in discussions around proposals regarding structural or policy changes to the agency. To the extent lawmakers or the administration wish to explore changes in NIH's structure or policies, the Ad Hoc Group urges them to seek robust stakeholder input before implementing any major reforms. Policy changes that weaken essential research support and undermine critical research infrastructure or reorganize the agency's functions have substantial implications that should be informed with expertise on the impacts, potential disruptions, and scientific expertise.

NIH is Critical to U.S. Competitiveness. The United States continues to lead the world in biomedical research and innovation. However, this leadership is not guaranteed. Other nations are increasing their investments in science and technology. From 2019 to 2023, China's research and development spending grew at an average annual rate of nearly 9 percent, compared with about 4.7 percent in the United States. When adjusted for cost, China's total R&D spending in 2023 was estimated to exceed \$1.8 trillion, more than double the U.S. total.ⁱⁱⁱ

China's biotechnology sector is also expanding rapidly. Annual revenue from drugs originating in China is projected to reach \$34 billion by 2030 and \$220 billion by 2040, with Chinese companies expected to account for a growing share of U.S. Food and Drug Administration drug approvals.^{iv}

Robust and sustained support for NIH allows the United States to attract and retain the world's top research talent and ensures that the scientific, economic, and health benefits of new discoveries remain in the United States.

NIH: An Answer to Challenging Times. Beyond the direct health benefits for patients, NIH funded research also drives economic growth across the nation. NIH funding supports hundreds of thousands of jobs and stimulates local and regional economic activity. In FY 2025, NIH funded research supported nearly 391,000 jobs nationwide and generated more than \$94 billion in economic activity. Every \$1 of NIH funding produces approximately \$2.57 in economic output, demonstrating the strong return on investment associated with federal support for biomedical research.^v

Federal investment in medical research through NIH amounts to roughly \$138 per American each year, yet the return has been substantial. NIH supported research has contributed to dramatic declines in deaths from heart disease, cancer, and stroke, while also improving treatments for countless other conditions.

Programs such as the Institutional Development Award (IDeA) initiative help ensure that research capacity grows in states that historically receive less federal research funding, supporting innovation and economic development in communities across the country.

Disruptions in NIH Funding Hurts Patients. We also urge the Administration to act with urgency to eliminate any disruptions, delays, and unnecessary administrative barriers that may prevent NIH from fully and expeditiously expending its current appropriations on the most promising, meritorious research proposals approved through the merit review process. According to a recent analysis of publicly available data from NIH, as of March 20 – halfway through the fiscal year – obligations lagged far behind previous fiscal years. New awards specifically remain far below those awarded during the same period in the previous five fiscal years, with 63% fewer awards than historically expected at that point in the fiscal year.^{vi} The most recent analyses show that as of May 15, overall obligations lag behind historical funding levels, with a significant decrease in the number of new and competing research grants.^{vii}

We recognize that a variety of drivers have contributed to this lag; however, the slow pace is sparking concerns across the community that disruptions similar to the delays in FY 2025 will be repeated. We are confident that NIH is capable of obligating its appropriation fully again in FY 2026 by September 30 – the key will be the pace at which it does so. Disbursing over half of the research funding in the final three months of the fiscal year not only puts an avoidable burden on the agency, it also forces expanded use of the forward funding mechanism, which, as described above, results in fewer ideas and fewer people being funded overall.

Patients feel the impacts of delayed funding most acutely. These disruptions may lead to fewer clinical trials, reduced investment in fundamental discovery research, and slower progress in delivering new treatments and cures to patients and families who cannot afford delays. Every day the administration delays is another day patients must wait for life-saving breakthroughs.

The Ad Hoc Group’s members recognize the significant fiscal challenges facing our nation and the difficult decisions Congress must make in allocating federal resources. However, robust support for the National Institutes of Health remains one of the most effective investments the federal government can make to improve the health, economic strength, and global leadership of the United States. Therefore, the Ad Hoc Group for Medical Research recommends at least \$51.303 billion in base funding for NIH in FY 2027 to sustain the momentum of scientific discovery, strengthen the nation’s medical research enterprise, and continue delivering new hope to patients and families across the country.

ⁱ National Institutes of Health. NIH Research Matters 2025.

<https://www.nih.gov/news-events/nih-research-matters/2025-nih-research-highlights-human-health-advances>. Accessed April 13, 2026.

ⁱⁱ ACT for NIH. *Increased Use of Multi-year Funding Reduces Chances of Research Ideas Being Funded, Postponing Cures & Therapies* https://www.researchamerica.org/wp-content/uploads/2025/11/ACT-for-NIH-Multi-Year-Funding-One-Pager_October-2025.pdf. Accessed April 16, 2025.

ⁱⁱⁱ Information Technology and Innovation Foundation. (2025, April 9). *China catching up: R&D may have already pulled ahead*. <https://itif.org/publications/2025/04/09/china-catching-up-rd-may-have-already-pulled-ahead/>

^{iv} Morgan Stanley. The Innovation Boom in China Biotech.

<https://www.morganstanley.com/insights/articles/china-biotech-boom-generics-to-innovators>. Accessed April 12, 2026.

^v United for Medical Research. NIH’s Role In Sustaining The U.S. Economy.

https://www.unitedformedicalresearch.org/wp-content/uploads/2026/03/UMR_2026-Annual-Economic-Report-FY2025.pdf. Accessed April 13, 2026.

^{vi} National Institutes of Health. *NIH RePORTER*. Accessed May 18, 2026.

^{vii} Ibid.