

**AMENDMENT TO LABOR, HHS, EDUCATION
APPROPRIATIONS BILL
OFFERED BY MS. DELAURO OF CONNECTICUT**

Page 49, line 15, strike the dollar amount and insert
“\$5,589,294,000”.

Page 49, line 23, strike the dollar amount and insert
“\$3,338,150,000”.

Page 50, line 5, strike the dollar amount and insert
“\$445,276,000”.

Page 50, line 10, strike the dollar amount and insert
“\$1,948,283,000”.

Page 50, line 15, strike the dollar amount and insert
“\$1,821,739,000”.

Page 50, line 20, strike the dollar amount and insert
“\$4,963,588,000”.

Page 50, line 24, strike the first dollar amount and
insert “\$1,572,184,000”.

Page 51, line 7, strike the dollar amount and insert
“\$1,435,965,000”.

Page 51, line 11, strike the dollar amount and insert
“\$767,823,000”.

Page 51, line 16, strike the dollar amount and insert
“\$743,268,000”.

Page 51, line 19, strike the dollar amount and insert
“\$1,670,054,000”.

Page 51, line 24, strike the dollar amount and insert
“\$580,878,000”.

Page 52, line 5, strike the dollar amount and insert
“\$453,546,000”.

Page 52, line 8, strike the dollar amount and insert
“\$156,951,000”.

Page 52, line 13, strike the dollar amount and insert
“\$501,550,000”.

Page 52, line 16, strike the dollar amount and insert
“\$1,155,818,000”.

Page 52, line 19, strike the dollar amount and insert
“\$1,663,433,000”.

Page 52, line 23, strike the dollar amount and insert
“\$556,036,000”.

Page 53, line 5, strike the dollar amount and insert
“\$372,149,000”.

Page 53, line 10, strike the dollar amount and insert
“\$140,326,000”.

Page 53, line 15, strike the dollar amount and insert
“\$299,705,000”.

Page 53, line 19, strike the dollar amount and insert
“\$75,480,000”.

Page 53, line 23, strike the dollar amount and insert
“\$375,184,000”.

Page 54, line 9, strike the dollar amount and insert
“\$707,334,000”.

Page 54, line 17, strike the dollar amount and insert
“\$1,707,345,000”.

At the end of the bill (before the spending reduction
account), insert the following:

1 SEC. _____. (a) SHORT TITLE.—This section may be
2 cited as the “Accelerating Biomedical Research Act”.

3 (b) FINDINGS.—Congress makes the following find-
4 ings:

5 (1) The National Institutes of Health (referred
6 to in this section as the “NIH”) is the leading bio-
7 medical research entity in the world. It supports sci-
8 entists in every State who are pursuing treatments
9 and cures to prevent and reduce human suffering.

1 (2) Thanks in large part to NIH-funded re-
2 search, Americans today are living longer and
3 healthier lives. Life expectancy in the United States
4 has jumped from 47 years in 1900 to nearly 79
5 years today. Deaths from heart attack have fallen by
6 more than 60 percent over the past 40 years, and
7 deaths from cancer are falling about 1 percent each
8 year.

9 (3) NIH is vital to the United States economy.
10 The NIH extramural program supports around
11 50,000 competitive research grants and 300,000 sci-
12 entists and research personnel at more than 2,500
13 universities, medical schools, and other research in-
14 stitutions across our 50 States.

15 (4) Economists have estimated that every \$1
16 invested in NIH generates more than \$2 in local
17 economic growth. Bioscience companies in the
18 United States, many of which depend on basic re-
19 search conducted by NIH, directly employ 1.6 mil-
20 lion people, and indirectly support another 6.2 mil-
21 lion jobs.

22 (5) NIH research is critical to the Nation's
23 long-term fiscal health. Alzheimer's disease currently
24 costs the United States an estimated
25 \$200,000,000,000 a year. If no progress is made to

1 cure or delay the onset of this disease, the cost will
2 rise to well over \$1,000,000,000,000 a year in to-
3 day's dollars by 2050.

4 (6) Cancer remains the leading cause of death
5 by disease for children in the United States. More
6 than 60 percent of children with cancer participate
7 in NIH-funded clinical trials.

8 (7) NIH enhances our national security by
9 funding research on medical countermeasures for
10 bioterrorism, new and emerging diseases, and deadly
11 pandemics.

12 (8) The historic, 5-year doubling of Federal
13 funding for NIH ended in fiscal year 2003. Despite
14 the widely recognized benefits of NIH-funded re-
15 search, NIH funding has declined by nearly 25 per-
16 cent since then, when adjusted for inflation.

17 (9) The success rate of applications for NIH
18 funding is near an all-time low. Fifteen years ago,
19 NIH funded about 1-in-3 meritorious research pro-
20 posals. Today, that rate has fallen to about 1-in-6,
21 meaning that thousands of promising research ideas
22 proposed every year are never pursued.

23 (10) The decline in the NIH success rate has
24 been especially challenging for young researchers. In
25 1980, a researcher could expect to receive her first

1 R01 grant at age 38. Today, the average investi-
2 gator must wait until age 45, a delay that is causing
3 many of our brightest young scientists to leave the
4 field.

5 (11) America's global scientific leadership is
6 now at risk. Between 2004 and 2012, the United
7 States share of global investment declined by about
8 13 percent while the share of Asian economies grew
9 by 7 percent. The Organisation for Economic Co-op-
10 eration and Development projects that China will
11 outspend the United States on research and develop-
12 ment by 2020.

13 (12) Budget cap adjustments are used by Con-
14 gress to prioritize spending that produces economic
15 growth and reduces costs that contribute to the Fed-
16 eral debt.

17 (c) CAP ADJUSTMENT.—

18 (1) IN GENERAL.—Section 251(b)(2) of the
19 Balanced Budget and Emergency Deficit Control
20 Act of 1985 (2 U.S.C. 901(b)(2)) is amended—

21 (A) by redesignating subparagraph (D) as
22 subparagraph (E); and

23 (B) by inserting after subparagraph (C),
24 the following:

1 “(D) NATIONAL INSTITUTES OF
2 HEALTH.—

3 “(i) IN GENERAL.—If a bill or joint
4 resolution making appropriations for a fis-
5 cal year is enacted that specifies amounts
6 for the National Institutes of Health at the
7 Department of Health and Human Serv-
8 ices (75–9915–1–1–552), then the adjust-
9 ments for that fiscal year shall be the
10 amount of additional new budget authority
11 provided in that Act for such programs for
12 that fiscal year, but shall not exceed—

13 “(I) for fiscal year 2016,
14 \$3,000,000,000 in additional new
15 budget authority;

16 “(II) for fiscal year 2017,
17 \$6,300,000,000 in additional new
18 budget authority;

19 “(III) for fiscal year 2018,
20 \$8,450,000,000 in additional new
21 budget authority;

22 “(IV) for fiscal year 2019,
23 \$10,740,000,000 in additional new
24 budget authority;

1 “(V) for fiscal year 2020,
2 \$13,160,000,000 in additional new
3 budget authority; and

4 “(VI) for fiscal year 2021,
5 \$15,730,000,000 in additional new
6 budget authority.

7 “(ii) DEFINITIONS.—As used in this
8 subparagraph:

9 “(I) ADDITIONAL NEW BUDGET
10 AUTHORITY.—The term ‘additional
11 new budget authority’ means the
12 amount provided for a fiscal year, in
13 excess of \$29,369,000,000, in an ap-
14 propriation Act and specified to sup-
15 port the National Institutes of Health.

16 “(II) NATIONAL INSTITUTES OF
17 HEALTH.—The term ‘National Insti-
18 tutes of Health’ means the appropria-
19 tions accounts that support the var-
20 ious institutes, offices, and centers
21 that make up the National Institutes
22 of Health.”.

Amend the report accordingly.

