

May __, 2012

The Honorable Tom Harkin
Chair
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Richard Shelby
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Dennis Rehberg
Chair
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

Dear Chairmen Harkin and Rehberg and Ranking Members Shelby and DeLauro:

The undersigned organizations and institutions, representing the nation's research institutions, researchers, and physician-scientists, thank you and your subcommittees for your continued support of the National Institutes of Health (NIH), which has resulted in immense benefits for the health of the American people. As you begin consideration of the Fiscal Year 2013 Labor, Health and Human Services, and Education, and Related Agencies Appropriations bill, we bring to your attention an issue of particular importance. Specifically, we urge you to restore the salary limit imposed on extramural NIH researchers to Level I of the Executive pay scale.

Division F, Section 203 of the Consolidated Appropriations Act, 2012 (P.L. 112-74) reduced the salary limit to Executive Level II and extended it to all HHS funding agencies. This change represents a cut of \$20,000 (10 percent), and comes at a time when research institutions' discretionary funds from clinical revenues and other sources are increasingly constrained and less available to invest in research. As institutions and departments divert funds to compensate for the reduction in the salary limit, they will have less funding for critical activities such as providing bridge funding to investigators who may be between grants, and to provide seed grants and start-up packages for young investigators.

A high priority for the nation's medical research effort, affirmed by the Congress, is strengthening clinical and translational research. The dynamic health needs of the nation call for ensuring the recruitment and retention of the nation's most talented and productive group of investigators including Ph.D. trained scientists and physician scientists. The extramural salary limit particularly disadvantages the most productive investigators who likely dedicate the majority of their time in research and who have a sustained track record in breakthrough discoveries and will have a chilling effect on gifted new investigators. Moreover, it disproportionately affects physician investigators and serves as a deterrent to their recruitment into research careers at a time when the United States is committed to improving the health of

the nation and remaining globally competitive in research and technology. Since the Federal government imposed the salary cap on extramural researchers in 1990, medical schools and teaching hospitals have been increasingly forced to bear more of the costs of physician-scientists' and other investigators' salaries.

It is essential to our nation's long-term health and standing in the global environment that we not disincentivize research careers and that we adopt policies to ensure that America retains the most talented, productive, and diverse group of biomedical and behavioral researchers. Medical research continues to produce major breakthroughs in the search for cures and treatments to a wide array of diseases and disorders. This is not the time to step back.

Restoring the extramural salary limit to Executive Level I will allow our institutions to continue to attract and retain the best investigators in our research programs. We urge you to restore the salary limit to the Executive Level I when you consider the FY 2013 Labor-HHS appropriation.

Sincerely,