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US Senate likely to pass budget

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Ted Agres

Email: tedagres@lycos.com

The US Senate appears likely to approve a [\\$328.1 billion omnibus measure](#) to fund discretionary spending at 11 departments and numerous agencies, including the National Institutes of Health (NIH) and the National Science Foundation (NSF).

The House approved the measure in December but many senators - Republicans and Democrats alike - [refused to rush the bill through](#). Republicans had hoped to vote to approve the fiscal year (FY) 2004 consolidated budget bill on the Senate's first day in session from holiday recess yesterday (January 20), but failed to muster the 60 votes needed to invoke cloture and bring the bill to a vote. Still, Senate Minority Leader Tom Daschle (D-SD) yesterday predicted the Senate would pass the delayed budget bill within the next week or two, despite reservations concerning such politically contentious provisions as country of origin food labeling, overtime rules, and television station ownership.

Republicans yesterday warned that the unpalatable alternative to passing the budget bill would be to have a yearlong continuing resolution freezing spending for the fiscal year that began October 1, 2003, at the previous year's levels. "The alternatives before us are to pass this appropriations bill or by the end of the month, if we are not successful, to have a continuing resolution for the course of the year," warned Senate Majority Leader Bill Frist (R-Tenn.). Should that happen, Frist said, the NIH stands to lose around \$1 billion.

The FY 2004 consolidated conference bill (HR 2673) would give the NIH \$27.98 billion, a 3.7% increase of \$1 billion over last year's appropriation and \$318.6 million more than the White House had requested. NSF would receive \$5.6 billion, an increase of \$300 million over last year and \$130 million more than requested by the White House. These amounts are before an across-the-board 0.59% budget cut imposed on most programs and projects. After the reduction, NIH's net increase would be around \$800 million.

"I think we'll see a little bit of street theatre here for a week or so," said David Moore, associate vice president of government relations for the Association of American Medical Colleges. But, he added, "I don't see the Democrats winning this battle."

Meanwhile, the FY 2005 budget is already under consideration. The White House will submit its budget request for FY 2005 to Congress in early February. Sources in the biomedical community expect the administration to request a 2.5% increase for NIH for the fiscal year beginning October 1, 2004. FY 2005 "promises to be another really tough year," Moore told us. "If the administration comes in with a 2.5% increase, that will mean some tough choices for the individual institutes."

"This level of funding will immediately begin to erode the foundation for discovery provided by the recent doubling of the NIH budget," states the Federation of American Societies for Experimental Biology (FASEB) in its budget recommendations for FY 2005. A 2.5% increase would result in 600 fewer research grants being funded next year than the 10,400 projected to be funded in FY 2004, said Howard Garrison, FASEB's public affairs director.

This is due to a combination of factors, including the recycling of fewer grants made in FY 2001, increasing grant expenses, and congressionally mandated transfers from the NIH budget that have reduced available program funding, Garrison told us.

Instead, FASEB recommends NIH should receive a 10% budget increase over the pending FY 2004 number, bringing its FY 2005 appropriations to \$30.6 billion, FASEB states in its annual budget recommendation to be released tomorrow (January 22). For NSF, FASEB is recommending a 13.3% increase that would bring its budget to \$6.39 billion. That level would support the effort to double NSF's budget by FY 2008.

In a related development, an alliance of health funding advocates is urging a 12% budget increase in discretionary spending for Public Health Service programs in FY 2005. According to the Campaign to Increase Function 550, a coalition including the American Cancer Society, the Coalition for Health Funding, the American Heart Association, and nearly 40 other organizations, more than \$330 million stands to be cut from public health programs in FY 2004. Function 550 in the federal budget includes most direct healthcare services programs.

"Underfunding any of these programs seriously compromises our nation's health defenses," the coalition states in a [letter to the White House and Congress](#). "Saving and safeguarding American lives through prevention, treatment, and cure of diseases only will be achieved by making sufficient and sustained funding of public health programs a national priority."

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