

**National Cancer Advisory Board (NCAB)  
Subcommittee on Planning and Budget**

**September 1, 2020  
3:30–4:30 p.m. EDT  
Virtual Meeting**

**SUMMARY**

Subcommittee Members

Dr. Anna D. Barker, Chair  
Dr. Peter C. Adamson (absent)  
Dr. Deborah Watkins Bruner  
Dr. Yuan Chang (absent)  
Dr. Andrea A. Hayes-Jordan (absent)  
Dr. Scott W. Hiebert  
Dr. Timothy J. Ley  
Mr. Patrick McGarey, Executive Secretary  
Dr. Margaret R. Spitz

Other Participants

Dr. Francis Ali-Osman, NCAB  
Dr. Melissa D. Antman, National Cancer Institute (NCI)  
Dr. L. Michelle Bennett, NCI  
Dr. Robert T. Croyle  
Dr. Howard J. Fingert, NCAB  
Dr. Satish Gopal, NCI  
Dr. Paulette S. Gray, NCI  
Dr. Nikan Khatibi, NCAB (pending)  
Dr. Douglas R. Lowy, NCI  
Dr. Electra D. Paskett, NCAB  
Dr. Nancy J. Raab-Traub, NCAB  
Mr. Ricardo Rawle, NCI  
Dr. Norman E. Sharpless, NCI  
Dr. Dinah S. Singer, NCI  
Ms. Joy Wiszneauckas, NCI  
Dr. Amanda Cennamo, The Scientific Consulting Group, Inc., Rapporteur

**Introductions and Subcommittee Meeting Goals**

*Dr. Anna D. Barker, Chief Strategy Officer, Lawrence J. Ellison Institute for Transformative Medicine, University of Southern California*

Dr. Anna D. Barker, Subcommittee Chair, called the meeting to order at 3:30 p.m. EDT. In her opening remarks, Dr. Barker reflected on the impact of the coronavirus disease 2019 (COVID-19) pandemic on NCI's planning and budget efforts. She asked the Subcommittee members to consider three questions: (1) how can the NCAB assist in expanding support for the FY 2021 budget and Budget Proposal for 2022 budget, (2) how to assess the impact of COVID-19 on cancer research and its budget implications, and (3) how the NCI might partner with other non-profit cancer research organizations (as was done recently with Cancer Research UK). In addition, Dr. Sharpless requested that the Subcommittee offer guidance on how to address the issue of funding needed to increase the R01 payline.

Dr. Barker reminded the attendees that affected communities (cancer survivors/advocates, professional associations) can advocate to policymakers for increases to the NCI budget. The COVID-19 pandemic has already had major economic and human impacts for cancer research and the pandemic continues. The scope and economic impact of COVID 19 on cancer research will also continue. Dr. Barker recalled that in 1998, THE MARCH Research Task Force recommended a twofold budget increase in 1999 and a subsequent 20 percent increase until 2004. It was a good model in 1998 – and it's a model for how Congress should view the critical need to adequately fund cancer research.

Dr. Norman E. Sharpless, Director, NCI, explained that the meeting is intended to allow the NCAB to assist the NCI in exploring and advising the NCI on budgetary issues. He emphasized that the COVID-19 pandemic has created new challenges for the NCI. He also noted that long-term funding trends create challenges and opportunities for the NCI. He conveyed that the meeting's discussions would provide insight on NCI's budget prioritization.

## **Budget Overview**

*Mr. Patrick McGarey, Associate Director for Finance and Legislation, NCI*

Mr. Patrick McGarey, Associate Director for Finance and Legislation, NCI, presented an overview of NCI's budget. He spoke on three areas: the current budget, budget history, and a look into the future. He noted that current trends reflect fiscal year (FY) 2019; final FY 2020 grant results will be available in fall 2020. About 75 percent of the NCI total budget is allocated to extramural funding; the remaining 25 percent is allocated to intramural research (16%), research management and support (8%), and buildings and facilities (0.3%).

Research project grants compose 43 percent of the total budget. The NCI issues numerous awards; R01 grants compose 60 percent of research project grant funding. Centers and Specialized Programs of Research Excellence (SPORES) compose 10 percent of the total budget.

NCI's budget growth since 2013 (up about 20%) has not matched the simultaneous growth in R01 applications during this period (up about 50%). Mr. McGarey explained that, as a result of these trends, application success rates and paylines have declined accordingly. An increase in funding from the U.S. Congress for FY 2020 will partly offset the research community's increased demand for NCI grants, but this issue remains a concern in the research community and in the U.S. Congress. For FY 2020, the U.S. Congress has appropriated a funding increase of more than \$295 million (M). Of this increase, NCI plans to allocate more than \$210 M of additional funds to the NCI for research and training.

In April 2020, the NCI received \$306 M in supplemental funding from the U.S. Congress to develop, validate, improve, and implement COVID-19 serological testing and associated technologies. Mr. McGarey explained that the NCI maintains a longstanding serological laboratory and has conducted extensive serology research to support our vaccine research related to HPV and other viruses associated with cancers. For this reason, Congress dedicated \$306 M to NCI. Much of the \$306 M will support the NCI SeroNet, which has important components that include Serological Sciences Capacity Building Centers, Centers of Excellence, and serological sciences projects.

NCI's response to the COVID-19 pandemic has included flexibility on deadlines, salaries and stipends, project periods and reporting, and early stage investigator and training eligibility. Additionally, the NCI has issued guidance on repurposing grant funds for COVID-19 research and has expedited timeframes for funding decisions. Mr. McGarey noted that community discussions on these and other concerns are ongoing.

Mr. McGarey provided an overview of budget trends for FY 2021. He noted that appropriations are often delayed in election years. He conveyed that funding trends for the NIH and NCI have been strong in recent years, but continuation of this trend is uncertain. Mr. McGarey concluded his presentation by providing links to additional resources related to the NCI budget and COVID-19.

## **NCI's Annual Plan, Professional Judgement Budget (2022)**

*Dr. L. Michelle Bennett, Director, Center for Research Strategy, NCI*

Dr. L. Michelle Bennett, Director, Center for Research Strategy, NCI, delivered a presentation on NCI's Annual Plan and Professional Judgment Budget. The National Cancer Act of 1971 established the procedure for submitting NCI's annual budget (i.e., the "bypass budget"). Dr. Bennett explained that the budget proposal provides an opportunity to communicate NCI's best professional judgment on the optimum funding needed to make the most rapid progress against cancer.

The NCI Annual Plan provides opportunities to present aspirational areas of science and allows for flexibility as needed. The major goals of the Annual Plan are as follows: understanding the mechanisms of cancer, preventing cancer, detecting and diagnosing cancer, treating cancer, advancing public health in cancer, and strengthening the cancer research enterprise (e.g., workforce and infrastructure). The Annual Plan also challenges the NCI to envision scientific opportunities for the future. In recent years, NCI's focus has shifted to a more focused approach on selected topics (e.g., cancer drug resistance, molecular diagnostics for cancer treatment, obesity and cancer, and survivorship). NCI leadership selects topics of interest by anticipating upcoming research questions and needs.

The Professional Judgment Budget proposal is available online; the proposal details a substantial increase in the R01 research project grant budget, \$50 M to the Childhood Cancer Data Initiative, and authorization of Cancer Moonshot<sup>SM</sup> funding. Dr. Bennett explained that the Professional Judgment Budget is developed based on current needs, opportunities, and challenges. Last year, the NCI proposed a large budget increase to counter recent payline decreases. A 1 payline percentile increase per year was proposed, with a goal of reaching the 15th percentile by FY 2025. Dr. Bennett concluded her presentation by emphasizing that NCI's stories are portrayed through patient experiences and cancer research.

## **Discussion: Questions, Suggestions, and Issues for Future Meetings**

*Dr. Barker, Mr. McGarey, and Dr. Bennett*

Dr. Barker commented that the Professional Judgment Budget, and the associated plan, has always presented a powerful mechanism to compile research every year. She noted that the 2022 plan and budget's emphasis on paylines and targeted areas of cancer research are compelling. Dr. Bennett stated that NCI leadership is committed to cultivating its research enterprise through investment in the best science. Dr. Sharpless added that, from a communications standpoint, addressing paylines resonate with policymakers and the cancer advocacy communities.

Dr. Douglas R. Lowy thanked the Subcommittee and the NCAB for their contributions to discussions on raising the payline. He emphasized the issue requires a concerted, multiyear effort. Dr. Barker affirmed the importance of communicating messages about paylines to the advocacy community, and the significance of the NCAB supporting this goal.

Dr. Lowy spoke on the discrepancy between NCI's increase in grant applications and the available budget, noting that cancer research offers opportunities for progress that are unmatched in other biomedical areas. Dr. Sharpless expressed that new investigators offer new and valuable perspectives to cancer research; the NCI must respond to that demand with increased funding capabilities.

Dr. Barker noted that the COVID-19 pandemic has resulted in major financial losses for Cancer Centers, and wondered if these would be considered in future legislative actions. Dr. Sharpless commented that the NCI is anticipating significant research expenses resulting from the pandemic including laboratory research, clinical trials, and impact on the NCI's Cancer Centers. Mr. McGarey noted that supplemental

funds can help with immediate issues, but the core issues of sustained multi-year funding to address needs both before the pandemic and after will be needed.

Dr. Nancy Raab-Traub commented that the pandemic has created major obstacles for productivity and financial stability. She noted that she previously recommended extending the grant periods. Dr. Sharpless agreed and noted that relevant resources (e.g., fund carryover, flexibility to training grants) are detailed on NCI's website. He added that most of the costs resulting from the pandemic will emerge in the upcoming fiscal year. He reiterated that the NCI is closely monitoring congressional decisions on funding. Dr. Tim Ley commented that supporting strategies that increase the paylines for RPGs was recommended by the Subcommittee in the past, and Dr. Barker commented that this remains a viable strategy that can be supported by the members of the NCAB.

Based on the impact of the pandemic and the associated financial unknowns for both 2020 and 2021, Dr. Barker recommended that (1) the Subcommittee reconvene at the beginning of the next fiscal year, (2) the Subcommittee consider strategies for assisting the advocacy/survivorship communities and professional organizations in communicating the current financial status of the 2020 and future NCI budgets, (3) the NCAB formally express its support the 2022 Annual Plan and Budget Proposal which focuses on increasing payline to the 15th percentile, and (4) the Subcommittee consider strategies for establishing relationships with other cancer research organizations that could serve as partners to fund additional programs of joint interest.

### **Adjournment**

Dr. Barker thanked the attendees and adjourned the Subcommittee meeting at 4:34 p.m. EDT.

<u>                    /s/                    </u>	<u>                    9/3/2020                    </u>	<u>                    /s/                    </u>	<u>                    9/3/2020                    </u>
Dr. Anna Barker	Date	Mr. Patrick McGarey	Date
Chair		Executive Secretary	