Awarding Process, Awarding Criteria, and Characteristics of Extramural Grants Made with Recovery Act Funding

Why GAO Did This Study
The American Recovery and Reinvestment Act of 2009 (Recovery Act) included $10.4 billion in funding for the National Institutes of Health (NIH), an agency of the Department of Health and Human Services (HHS). Of the NIH Recovery Act funding, $8.2 billion was to be used to support additional scientific research and $400 million for comparative effectiveness research, including extramural research at universities and research institutions. NIH is comprised of the Office of the Director (OD) and 27 Institutes and Centers (IC), 24 of which make grant funding decisions.

GAO was asked to report on how NIH awarded Recovery Act funds for scientific research and the information that NIH made available about the award of these funds. This report describes the (1) process and criteria NIH used to award extramural grants using Recovery Act funding, and (2) characteristics of Recovery Act extramural grants and the information made publicly available about these grants. GAO interviewed NIH officials in the OD and the three ICs that received the largest proportion of Recovery Act funds, and reviewed related documents, such as NIH guidance on awarding grants using Recovery Act funds. GAO also obtained and analyzed NIH data on all Recovery Act grants awarded as of April 2010. Appendix I of this report contains information provided by NIH about 45 randomly selected nonrepresentative Recovery Act extramural grants, ranging from about $13,000 to about $7.2 million.

What GAO Found
NIH used its standard review processes—peer review, which comprises two sequential levels of review by panels of experts in various fields of research, or administrative review—to award extramural grants using Recovery Act funds. These standard review processes were used for three categories of extramural grant applications: (1) new grant applications from Recovery Act funding announcements; (2) existing grant applications that had not previously received NIH funding; and (3) administrative supplements and competitive revisions to current active grants. For new grant applications submitted in response to Recovery Act funding announcements, NIH followed its standard peer review process. For existing grant applications, which had already undergone the peer review process, each of the three ICs GAO reviewed—National Cancer Institute (NCI), National Institute of Allergy and Infectious Diseases (NIAID), and National Heart, Lung, and Blood Institute (NHLBI)—selected additional applications for Recovery Act funding based in part on the amount of this funding available to each IC. To award administrative supplements, NIH conducted its standard administrative review at the IC level, and for competitive revisions NIH followed its standard peer review process. In reviewing applications, NIH used its standard criteria—scientific merit, availability of funds, and relevance to scientific priorities—plus three criteria for Recovery Act grants. These criteria were the geographic distribution of Recovery Act funds, the potential for job creation, and the potential for making scientific progress within a 2-year period.

NIH's Recovery Act grant awards varied across three grant categories and other characteristics, and NIH made a variety of information about the grants publicly available. NIH data show that as of April 2010, about $7 billion of the $8.6 billion in Recovery Act scientific research and comparative effectiveness research funds had been awarded for 14,152 extramural grants. NIH awarded nearly $2.7 billion to make extramural grants for existing grant applications that had not previously received funding, slightly over $2.4 billion for new grant applications, and about $1.9 billion for administrative supplements and competitive revisions. NIH officials reported that the remaining Recovery Act scientific research funds will be awarded by the end of fiscal year 2010. At the three ICs GAO reviewed, the distribution of Recovery Act funds to the three categories of Recovery Act extramural grants varied significantly. For example, GAO found that as of April 2010, NIAID used 69 percent of its Recovery Act funds for existing grant applications that had not previously received NIH funding, while NCI used 31 percent for these existing grant applications. The average NIH Recovery Act extramural grant award was about half a million dollars, and about 25 percent of grantees were awarded $623,000 or more. Through NIH's Web sites, NIH and the ICs communicated a variety of information to the public about Recovery Act extramural grant awards, such as information about grantees and awarding ICs.

HHS provided technical comments on a draft of this report, which GAO incorporated as appropriate.