

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

**9 February 2023
12:05 p.m.–1:05 p.m. EST
Virtual Meeting**

SUMMARY

Subcommittee Members

Dr. Anna D. Barker, Chair
Dr. Luis Alberto Diaz, Jr. (absent)
Dr. Andrea Hayes Dixon (absent)
Dr. Scott W. Hiebert

Dr. Nikan Khatibi
Mr. Patrick McGarey, Executive Secretary
Dr. Electra D. Paskett
Dr. Ashani T. Weeraratna

Other Participants

Dr. Francis Ali-Osman, NCAB
Dr. Monica M. Bertagnolli, Director, National
Cancer Institute (NCI)
Dr. John D. Carpten, NCAB
Dr. Philip E. Castle, NCI
Dr. James H. Doroshov, NCI
Dr. Howard J. Fingert, NCAB
Dr. Christopher R. Friese, NCAB
Dr. Paulette S. Gray, NCI
Dr. Amy B. Heimberger, NCAB
Dr. Douglas R. Lowy, NCI

Ms. Anne Lubenow, NCI
Ms. Thu Nguyen, NCI
Dr. Diane Palmieri, NCI
Mr. Ricardo W. Rawle, NCI
Dr. Dinah S. Singer, NCI
Dr. Susan Thomas Vadaparampil, NCAB
Dr. Karen M. Winkfield, NCAB
Ms. Joy Wiszneaukas, NCI
Dr. Amanda Cename, The Scientific
Consulting Group, Inc., Rapporteur

Welcome and Updates

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

Dr. Anna D. Barker, Subcommittee Chair, called the meeting to order at 12:05 p.m. EST. In her opening remarks, Dr. Barker reminded the participants that the Subcommittee's charge is to advise and assist the NCI Director and her staff on issues involving the budget process and planning for the National Cancer Program. Among other activities, the Subcommittee can provide advice on NCI's annual budget and review the *NCI Annual Plan and Budget Proposal* at the discretion of the NCI Director. The subcommittee meets three to four times a year, at the appointed times of the NCAB meetings.

Dr. Barker highlighted a [recent report](#) by the American Cancer Society that detailed a 33 percent decline in overall cancer mortality between 1991 and 2020. She remarked that these data are impressive and underscore the impact of NCI funding over the past three decades. She noted, however, that further progress is needed, particularly for specific cancers where mortality rates have not improved. Much of the decline in mortality rates is attributable to cessation of smoking. Dr. Barker emphasized that recent activities (e.g., screening) and scientific advancements (e.g., genomics, epigenomics, metabolomics, multi-cancer early detection [MCED] testing) offer potential for future progress against all cancers. Dr. Barker cautioned that cancer is becoming increasingly relevant within aging populations as the prevalence and death from infectious diseases have declined. She emphasized that the NCI must consider the challenge of achieving the President's goal of reducing cancer by 50 percent in 25 years in the face of the aging and changing demographics in the United States.

Dr. Barker announced that Mr. Patrick McGarey, Subcommittee Executive Secretary, is retiring from the NCI. She expressed appreciation to Mr. McGarey for his public service over the years.

Budget Status

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

Mr. McGarey presented an update on the NCI budget status, highlighting the grant results from fiscal year (FY) 2022, as well as the outlook for FY 2023 and FY 2024.

FY 2022 Grant Results

Mr. McGarey stated that a steady increase in the number of awards is expected in major grant categories (e.g., R01, R37, R21) and that the NCI total grant count could exceed 7,500 awards for the first time. Final FY 2022 grant results will be available on 9 March 2023. Mr. McGarey reminded the participants that paylines for FY 2022 were kept at the levels from the previous year, yet the number of NCI-awarded grants rose.

FY 2023 Outlook

Mr. McGarey detailed total appropriations for FY 2023, which include an increase of \$408 million (M) (5.9%) and \$3 billion (B) (6.5%) for the NCI and NIH, respectively. This amount includes an increase of \$22 M for the 21st Century Cures Act Cancer MoonshotSM programs, as well as \$150 M targeted for NCI competing and continuing grants. The NIH total budget for FY 2023 includes \$1.5 B for the Advanced Research Projects Agency for Health (ARPA-H). The U.S. Department of Health and Human Services transferred the ARPA-H funding to the NIH on 13 January 2023. Mr. McGarey reminded the participants that the ARPA-H budget for FY 2022 was \$1.0 B.

For FY 2023, the NCI has raised its R01 payline from the 11th to 12th percentile (for established and new investigators) and 16th to 17th percentile (for early-stage investigators). The payline for the R21 exploratory grants will remain at the 9th percentile, which is consistent with the previous year. Noncompeting grants will be funded at 98 percent, with targeted exceptions. Mr. McGarey noted that the NCI is also applying 2 percent reduction to the internal programs of NCI divisions, offices, and centers. Further information on NCI's grant funding policies for FY 2023 can be found on the [NCI website](#). He reminded the participants that cost commitments for grants compound over time because new competing grant awards include 4 additional years of continuing grant costs. Higher costs for research due to inflation are also a factor.

FY 2024 Outlook

President Joseph R. Biden will release the proposed FY 2024 budget on 9 March 2023, and many details are still unknown. Mr. McGarey noted that a new Congress has been elected, and a change of party occurred in the House. He also noted that President Biden has reaffirmed his commitment to advancing cancer research over the past several years. He noted that the Biden–Harris administration has announced a plan to reauthorize the National Cancer Act, which will secure additional funding for U.S. cancer research and care systems. Additionally, the administration will work with Congress to secure its investment in cancer research through the Cancer Moonshot.

Discussion

Dr. Barker asked about strategies to help the NCI meet its goal of reaching an R01 payline of 15 percent by 2025. Mr. McGarey responded that additional Moonshot funding likely would be needed to achieve

this outcome. Dr. Barker spoke on the importance of this challenge. More information will be available in March 2023.

Dr. Barker asked about approaches for applying realistic inflation numbers to grant funding. Mr. McGarey explained that a 40 percent budget increase has occurred over the past 7 years, which exceeds the rate of inflation during this period. He added that inflation might pose a concern in the next several years and that careful monitoring of this issue is needed. Dr. Barker remarked that many biotechnology, pharmaceutical, and health care technology companies are reducing their staffs in anticipation of a recession in the second half of 2023 and early 2024.

NCI Annual Plan and Budget Proposal for FY 2024

Dr. Diane Palmieri, Director, Center for Research Strategy, NCI

Dr. Diane Palmieri, Director, Center for Research Strategy, NCI, presented an overview of the *NCI Annual Plan and Budget Proposal for FY 2024* (previously called the Bypass Budget). She noted that the plan was released on 15 September 2022 and includes a director's message, professional judgment budget, stories of cancer research, NCI's research portfolio, and highlights of scientific opportunities. An at-a-glance document can be downloaded from the [NCI website](#).

NCI's proposal for a significant budget increase in FY 2024 is designed to capitalize on scientific opportunities to pursue the goal of ending cancer as we know it. The professional judgment budget communicates NCI's best professional judgment on the optimum funding needed to make the most rapid progress against cancer. The annual plan provides an opportunity to present aspirational areas of science and functions as a dynamic annual strategic plan.

Highlighted scientific opportunities relate to MCED testing (e.g., Cancer Screening Research Network), harnessing cell therapy to treat solid tumors (e.g., Cancer Adoptive Cellular Therapy Network), improving cancer outcomes in underserved and poor populations, and tackling traditionally "undruggable" cancer targets with new approaches to drug design (e.g., the RAS Initiative).

Dr. Palmieri briefly outlined the NCI research portfolio, which relates to understanding the biology of cancer; preventing cancer; detecting and diagnosing cancer; treating cancer; advancing public health in cancer; strengthening the cancer research enterprise (e.g., workforce, infrastructure); and understanding, preventing, and mitigating cancer disparities.

The NCI has proposed a budget of \$10 B in FY 2024, representing a \$2.7 B increase from the previous year's enacted budget. This increase is being requested to accomplish several outcomes: (1) Capitalize on scientific opportunities to pursue the goal of ending cancer as we know it, (2) support investigator-initiated research, (3) expand and modernize cancer clinical trials, (4) advance health equity and ensure rapid dissemination and delivery of standards of care, and (5) build on the successes of the Cancer Moonshot. She emphasized the importance of sustained budget increases to fund emerging opportunities in cancer research.

Dr. Palmieri concluded by highlighting key messages of the *NCI Annual Plan and Budget Proposal for FY 2024*. First, NCI's proposal for a significant budget increase in FY 2024 is designed to capitalize on important scientific opportunities to pursue the goal of ending cancer as we know it. Additionally, investigator-initiated research is the engine of innovation in the nation's biomedical research enterprise, and sustained increases in funding are needed to increase the number of new awards over time. Furthermore, the Cancer Moonshot has accelerated progress in cancer research, and the NCI is building on its successes, with the goal of changing the meaning of a cancer diagnosis and delivering hope for a brighter future.

Discussion

Dr. Barker challenged the Subcommittee to propose ways in which the Subcommittee can advise and assist as appropriate in NCI’s ongoing efforts to plan and develop budgets for its portfolio of funding mechanisms, infrastructure, and initiatives that will be needed to achieve progress in cancer research in the next several years. In response, Dr. Electra D. Paskett suggested that the Subcommittee should focus on funding the changes recommended in the recent report to address critical needs in cancer research and further emphasized the need to adopt this strategy across the overall cancer research community. Dr. Barker pointed out that the President, in his State of the Union Address, emphasized a need to bring the cancer research infrastructure into the 21st century and suggested that the Subcommittee could determine what that might mean in terms of funding. She also requested that the members (Subcommittee and all NCAB members) send her ideas on how the Subcommittee could support and help the NCI in its planning and budget efforts.

Ongoing and New Business, Other Items, and Future Agenda Items

Dr. Monica M. Bertagnolli, Director, NCI, underscored the importance of further discussions and engagement with this Subcommittee on future plans for the NCI budget. She remarked that strategies and approaches must be defined, and she emphasized the complexity of this topic for achieving progress in cancer research. Dr. Barker remarked that she will forward any feedback from the Subcommittee to Dr. Bertagnolli.

Adjournment

Dr. Barker thanked the attendees and invited them to send follow-up comments to her. She adjourned the Subcommittee meeting at 1:05 p.m. EST.

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Dr. Anna D. Barker Chair	Date	Mr. Patrick McGarey Executive Secretary	Date