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Salary Cap Letter 2011

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October 11, 2011

The Honorable Tom Harkin
Chairman
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
Chairman
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 medical schools, teaching hospitals, and 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 finalize the Fiscal Year 2012 Labor, Health and Human Services, and Education, and Related Agencies Appropriations bill, we bring to your attention an issue of particular importance that we appreciate Congress having addressed in previous appropriations. Specifically, we urge you to retain the provision to maintain the salary cap imposed on extramural NIH researchers at Level I of the Executive pay scale, which equals $199,700 in 2011. Congress has recognized the importance of this issue by preserving the cap at Executive Level I in every appropriation since FY 2001.

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 cap 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. Additionally, this comes at a time when discretionary funds from clinical revenues and other sources are also increasingly constrained and less available to invest in research.

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.

Retaining the extramural salary cap at Executive Level I will allow our institutions to continue to attract and retain the best investigators in our research programs. In addition, maintaining the salary cap at Executive Level I will preserve a level playing field between extramural investigators and intramural NIH scientists who are eligible for Executive Level I salaries under the Senior Biomedical Research Service (SBRS).

We urge you to maintain the salary cap at the Executive Level I when you consider the FY 2012 Labor-HHS appropriation.

Sincerely,

American Academy of Dermatology Association
The American College of Medical Genetics
American Pediatric Society
American Psychiatric Association
The American Society for Microbiology
Arizona State University
Association for Academic Surgery
Association of American Medical Colleges
Association of American Universities
Association of Independent Research Institutes
Association of Medical School Pediatric Department Chairs
Association of Public and Land-grant Universities
Association of University Radiologists
Academy of Radiology Research
Albert Einstein College of Medicine
American Orthopaedic Association
Beth Israel Deaconess Medical Center
Boston University School of Medicine
Brigham and Women's Hospital
Case Western Reserve University School of Medicine
Cedars-Sinai Medical Center
Cleveland Clinic Lerner Research Institute
Columbia University
Cooper Medical School of Rowan University
Council on Governmental Relations
Creighton University School of Medicine

Duke University School of Medicine
Eastern Virginia Medical School
Emory University
Emory University School of Medicine
Florida State University College of Medicine
Georgia Health Sciences University
Hofstra North Shore-LIJ School of Medicine
Indiana University
The Johns Hopkins University
Le Bonheur Children's Hospital
Massachusetts General Hospital
Mayo Clinic
McLean Hospital
Medical College of Wisconsin
Medical University of South Carolina College of Medicine
Michigan State University
Montefiore Medical Center
Mount Sinai School of Medicine
New York University
North Shore-LIJ Health System
Northeast Ohio Medical University
Northwestern University Feinberg School of Medicine
Oregon Health & Science University
Partners HealthCare
Penn Medicine
Penn State College of Medicine
Rutgers, The State University of New Jersey
Saint Francis Hospital and Medical Center, Hartford, Connecticut
Saint Louis University
Sanford School of Medicine of the University of South Dakota
Society for Pediatric Research
Society of University Surgeons
Southern Illinois University School of Medicine
Stanford University School of Medicine
Stony Brook University
Texas A&M Health Science Center College of Medicine
Tufts University
Tufts University School of Medicine
UC Health
UMDNJ Robert Wood Johnson Medical School
Universidad Central del Caribe
University of Arkansas for Medical Sciences
University at Buffalo
University of California, Davis
University of California System
University of Chicago

University of Cincinnati
University of Cincinnati College of Medicine (UCCOM)
University of Colorado School of Medicine
University of Florida College of Medicine
The University of Iowa
University of Kansas School of Medicine- Wichita
University of Maryland School of Medicine
University of Massachusetts Medical School
University of Minnesota Medical School
University of Nebraska Medical Center
University of Nevada School of Medicine
University of North Carolina at Chapel Hill
University of Oklahoma Health Sciences Center
University of Pittsburgh
University of Rochester Medical Center
University of Southern California
University of Tennessee
UTHealth | The University of Texas Health Science Center at Houston
University of Texas School of Medicine, San Antonio
University of Texas System
University of Utah
University of Vermont College of Medicine
University of Virginia School of Medicine
University of Washington School of Medicine
University of Wisconsin School of Medicine and Public Health
Vanderbilt University
Virginia Commonwealth University
Wayne State University
Weill Cornell Medical College
Western Michigan University
Wake Forest University School of Medicine
Washington University in St. Louis
West Virginia University School of Medicine
Wright State University Boonshoft School of Medicine
Yale New Haven Health System
Yale-New Haven Hospital
Yale University School of Medicine