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NPA Comments to the NIH NRSA Proposed Policy Changes

In November 2005 NPA Executive Director Alyson Reed attended the NIH Town Hall meeting to present the NPA's recommendations for necessary changes to the Ruth L. Kirschstein NRSA funding mechanism (http://www.nationalpostdoc.org/atf/cf/%7B89152E81-F2CB-430C-B151-49D071AEB33E%7D/NRSA_Town_Hall.pdf). The NIH considered all comments that were received prior to and at the Town Hall meeting and developed proposed changes to the NRSA awards with respect to tuition, fees, and health insurance at both the institutional and individual award levels. The NIH has invited stakeholders to comment on the resulting proposed NRSA policy changes, and the NPA responded by submitting the following comments.

(Please note that these comments are formatted according to the online submission process required by the NIH. While the NPA commends the NIH for endeavoring to provide quality NRSA awards with as minimal an expense as possible to the number of awards granted, the NPA has concerns regarding the proposed changes to what the NIH defines as "training related costs." Because the NIH's feedback form required an absolute response of "support" or "do not support" for each of the topics listed, the NPA was compelled to choose "do not support," and provide further explanatory comments.)

NIH: Please provide feedback on the proposed policy revisions to help offset the costs of *tuition and fees* associated with institutional and individual NRSA awards:

I support

I do not support

Comments:

NPA: While the National Postdoctoral Association (NPA) appreciates the NIH's desire to provide as many NRSA awards as possible under the current funding situation, the NPA endorses policies that seek to improve the quality of each fellowship, even if that quality comes at the expense of the number of positions. Under the current estimations, it appears as though the NIH has developed a formula that will reduce the decline in the number of NRSA positions awarded over the next 10 years, while still preserving the current quality of the awards. However, the current estimations do not distinguish predoctoral from postdoctoral awards and whether the number of positions that will still be lost will be evenly distributed between pre- and postdoctoral pools or if one will realize a greater loss of awards on a percentage basis.

In all areas of analysis, the NPA believes that predoctoral and postdoctoral NRSA awards should be handled as separate entities to better assess the unique needs of postdoctoral fellows supported on NRSA training grants. The quality and number of postdoctoral NRSA awards should not suffer due to strain on the system by predoctoral awards and respective institutional costs, and vice versa. For future evaluation, separation of the two award pools would provide for better data collection regarding the burden of each pool on the current system. Adjustments to the current formula could then be made accordingly if one pool is stressing the available funds to a greater degree than the other.

NIH: Please provide feedback on the proposed policy revisions to help offset the costs of health insurance associated with institutional and individual NRSA awards:

I support

I do not support

Comments:

NPA: The NPA commends the NIH for recognizing the necessity of adequate health insurance for postdoctoral fellows. However, the health insurance allowance should be contained in a category of its own.

For institutional training grants, grouping health insurance in the same category as "training related expenses" does not ensure that the institution uses the health insurance allowance specifically for health insurance. Conversely, combining these two categories of allowances also provides the institution with the ability to use more than the allotted health insurance allowance for health insurance, thereby resulting in inadequate monies left over to provide necessary actual "training related expenses" such as travel to meetings, research supplies, and equipment. Segregation of the two categories of allowances would ensure that institutions use the health insurance allowance for health insurance and training related allowances for training-related expenses such as travel and equipment. Likewise, for individual postdoctoral fellowships, health insurance should remain separate from institutional allowance to ensure that the postdoctoral fellow receives the maximum level of health insurance compensation allowable and that his/her health insurance allowance is not used by the institution for other purposes.

The NPA appreciates the foresight of the NIH in stressing the need to biennially reevaluate the current proposed formula. While the NPA does support placing a cap on institutional allowances, the NPA recommends that the NIH be prepared adjust the cap as necessary should health insurance costs rise to an extent that the current formula does not provide adequate funds for health insurance under the current cap.

NIH: Additional comments on the NRSA proposed policy modifications:

NPA: The current 10-year projection of the number of awards lost does not account for stipend increases. While the NPA understands the use of static stipend levels for simplicity in creating

the 10-year projection, it also hopes that the NIH realizes that to provide a quality training period, stipends will have to increase along with increases in the cost of living.

In summary, as stressed above, in all cases it is important that the NIH keep predoctoral and postdoctoral populations segregated, as well as keep tuition/fees and health insurance allowances segregated.