

ONE HUNDRED NINETEENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115

Majority (202) 225-3641  
Minority (202) 225-2927

June 22, 2026

The Honorable Dr. Jay Bhattacharya  
Director  
National Institutes of Health  
9000 Rockville Pike  
Bethesda, MD 20892

Dear Director Bhattacharya:

We write regarding the Office of Management and Budget (OMB) proposed overhaul of the Uniform Guidance for Federal Assistance published in the Federal Register on May 29, 2026, that would affect all federal grants, including science, housing, agriculture, transportation, and defense.<sup>1</sup> This rule would grant political leadership final authority over discretionary National Institutes of Health (NIH) award decisions, threatening to undermine science as we know it by replacing science with politics.<sup>2</sup> The damage of this obvious power grab by political leadership in the Trump Administration threatens to inflict severe harm on the nation's biomedical research enterprise by usurping the critical role of scientific experts in the approval and funding of grants at NIH. We fear this rule will lead to fewer cures, fewer clinical trials, and more exposure to dangerous public health hazards.

NIH is the largest public funder of biomedical research in the world. Of its roughly \$47.5 billion in enacted appropriations for fiscal year (FY) 2026, approximately 83 percent flows to extramural research and training at universities, medical centers, and other institutions.<sup>3</sup> For decades, NIH has used a system that has relied on scientific judgment in awarding extramural funding. This process protects taxpayers by ensuring spending is used to advance the public health interests of Americans and not treated as personal spending accounts for the interests of political leaders. This OMB proposal would dismantle this well-established system.

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<sup>1</sup> Office of Management and Budget, *Regulation for Federal Financial Assistance*, 91 Fed. Reg. 32198 (May 29, 2026) (proposed rule).

<sup>2</sup> MSN, *Researchers say this new Trump rule could destroy American science as we know it. They're fighting back* (<https://www.msn.com/en-us/news/politics/researchers-say-this-new-trump-rule-could-destroy-american-...> (accessed June 22, 2026)).

<sup>3</sup> AAMC, *Tracking NIH Awards in FY 2026 (Oct. 1-March 20)* (Mar. 24, 2026).

The proposed rule would, among other things, permit political appointees to decide which science gets funded; sideline peer review; wastefully cancel grants at any point—without warning and without regard to the impact on patients enrolled in clinical trials; eliminate fixed-amount (lump-sum) award instruments; create a preference favoring institutions with lower indirect cost rates; and restrict the use of award funds for publishing and disseminating federally funded research. The proposed rule will inject partisanship into agency decisions at an unprecedented level, undermining your repeated promises to “depoliticize NIH.”<sup>4</sup> Allowing senior political appointees not affiliated with the granting agency to review and approve all grants prior to their awards gives members of the Trump Administration license to align NIH spending with their political preferences instead of the funding’s promise of scientific merit. This new proposed rule will also dramatically increase administrative burden, which should serve as a giant red flag for an Administration that likes to project an image of fighting waste, fraud, and abuse.<sup>5</sup>

These changes arrive on the heels of NIH’s attempt to impose a uniform 15 percent indirect cost rate, an action struck down by a federal district court and that threatened to grind American science to a halt.<sup>6</sup> For example, clinical trials and high-containment infectious disease research are critical areas of research that require expensive infrastructure that drives up institutions’ indirect cost rates, but may also be best equipped to conduct research that could push breakthroughs and save lives. The proposed rule also follows the agency’s abrupt shift to forward-funding multiyear awards, which by NIH’s own count has meant hundreds of fewer grants that could crowd out promising new studies and initiatives.<sup>7</sup> When bipartisan members of our Committee met with you on June 4, 2026, you were asked directly by Ranking Member Pallone about this proposed rule. You stated that your team was “still reviewing” it but that you “were the final approval on grant funding” and would “quit the job” if told how to approve grants within NIH funding purview. However, the proposal outlined by OMB Director Russell Vought directly threatens your authority over NIH grantmaking and your ability to maintain a process that protects scientific integrity and merit-based review. Rather than repeatedly undercutting the ability of your own agency to fulfill its mandate, we implore you to demand OMB rescind the proposed rule.

We also request additional information on NIH’s involvement, review, and any potential forecasting of the impact of this proposed rule. Please respond to the following requests by July 7, 2026:

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<sup>4</sup> Nature, *NIH chief stands by funding cuts to ‘politicized science’ at tense hearing* (June 11, 2025) (<https://www.nature.com/articles/d41586-025-01827-0>).

<sup>5</sup> Association of American Universities, *OMB Proposes Major Changes to How the Federal Government Funds Scientific Research* (June 5, 2026) (<https://www.aau.edu/newsroom/leading-research-universities-report/omb-proposes-major-changes-how-federal-government>).

<sup>6</sup> Opinion, *Commonwealth of Massachusetts et al v. National Institutes of Health et al* (Jan. 5, 2026) 1<sup>st</sup> Cir. (No. 25-1343); The Scientist, *Indirect Cost Caps: A Hidden Threat to American Science* (Feb. 2, 2026) (<https://www.the-scientist.com/indirect-cost-caps-a-hidden-threat-to-american-science-74035>).

<sup>7</sup> Inside Higher Ed, *NIH Is Funding More Grants Up Front, a Risk to Research and University Budgets* (May 27, 2026) (<https://www.insidehighered.com/news/government/science-research-policy/2026/05/27/nihs-use-multiyear-funding-grants-poses-research>).

1. What was NIH's involvement in the development, drafting, review, and finalization of the proposed rule? Please provide the Committee with all correspondence, memoranda, and other documents and communications relating to NIH's involvement in developing the proposal.
2. Identify every NIH official, office, title, Center, Institute, and component that drafted, reviewed, or weighed in on any provision, and the nature of each contribution.
3. When did NIH first learn that OMB intended to rewrite 2 CFR Part 200, and when, if at all, did NIH first provide substantive input?
4. What structure, if any, existed (including, for example, interagency review, Department of Health and Human Services (HHS) coordination, or direct contact with OMB or the Executive Office of the President) to provide this input?
5. Did you personally, or did anyone in your immediate office, provide input, recommendations, or edits on any provision of the proposed rule?
6. Which provisions did NIH support, oppose, or seek to change, and why? For each, state NIH's position and the justification it gave. If NIH provided any feedback on prior drafts of the rule, please produce those documents and/or correspondence, including all metadata, redlines, and track changes.
7. Since the May 29 posting, has NIH analyzed how the rule would affect its grantees, award volume, paylines, or research output? If yes, please produce that analysis. If not, please explain if NIH plans to conduct one, and if so, by when.
8. The proposed rule's pre-issuance review provision (§ 200.205(b)(3)) would seemingly favor applicants with lower indirect cost rates. Did NIH contribute to the development of or provide feedback to this provision?
9. Has NIH evaluated how the provision to prioritize institutions with lower indirect cost rates would affect institutional awardees? What, if any, engagement has NIH had with institutions to collect an impact assessment?
10. The proposed rule requires that senior political appointees review all proposals prior to award to demonstrate that they demonstrably advance the President's policy priorities.
  - a. Did NIH contribute to the development of or provide feedback to this provision?
  - b. Will NIH play a role in ensuring that senior political appointees have requisite scientific training to review highly technical biomedical research proposals?

11. The proposed rule would let agencies pause or terminate discretionary awards that no longer align with “agency priorities” or the “national interest.” Does NIH support this provision? What standards, procedures, and appeal rights would govern termination, and what prevents this authority from being used to punish disfavored science or institutions?

12. What is NIH’s assessment of the risk of mid-project termination authority to ongoing clinical trials and human research participants, and what safeguards would protect participant safety and data integrity?

13. Has NIH assessed the impact of this new rule on the timing and efficiency of award issuance?

If you have any questions about this request, please contact the Committee Democratic staff at (202) 225-2927.

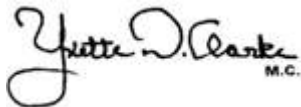
Sincerely,



Frank Pallone, Jr.  
Ranking Member



Diana DeGette  
Ranking Member  
Subcommittee on Health



Yvette Clarke  
Ranking Member  
Subcommittee on Oversight and  
Investigations