

Ruth L. Kirschstein National Research Service Award Program Policy Changes for FY 2007: Implementation and Implications

Background

Since 1974, the NIH's Ruth L. Kirschstein National Research Service Award (NRSA) program has supported research training of graduate students and postdoctoral scholars in the biomedical, behavioral, and clinical sciences through institutional training grants and individual fellowship awards. The program is administered by the NIH Institutes and Centers (ICs) with central oversight and policy guidance from the Office of Extramural Research. In FY 2007, NIH devoted approximately 3 percent of its budget (\$764 million) to the NRSA program and supported the research training of about 17,500 pre- and postdoctorates.

The NRSA program is designed to meet the nation's needs for biomedical, behavioral, and clinical investigators by contributing to the preparation of doctoral-level scientists in these fields. NRSA institutional training grants awarded to universities, teaching hospitals, and research centers provide stipends to offset the cost of living for graduate students and postdoctoral scholars pursuing research training, as well as funds toward the costs of tuition, fees, health insurance, and travel.

Program Changes

Since the mid-1990s, NRSA training grants and fellowships across the NIH have been governed by a formal, NIH-wide tuition reimbursement policy. Initially, that policy covered 100 percent of educational costs up to \$2,000, and 60 percent of costs exceeding that threshold. In FY 2000, that policy was modified to cover 100 percent of requested tuition, fees, and health insurance costs up to \$3,000 and 60 percent of the costs above that level.

Over time, however, further increases in tuition, fees, and health insurance began to limit the number of trainees that the NIH could support, and in November 2005, NIH convened a "Town Hall" meeting to gather comments on NRSA funding policies. The Town Hall meeting drew more than 100 participants from universities, hospitals, scientific societies, and professional associations – a testament to the widespread interest in this topic.

Following the Town Hall discussion, NIH announced it would begin testing a new funding policy for NRSA training grants in FY 2007. Under this pilot policy, announced in the *NIH Guide for Grants and Contracts*, August 18, 2006:

- The NRSA program would cover 60 percent of each predoctoral trainee's tuition and fees up to a cap of \$16,000 per year (\$21,000 for dual-degree students), and

60 percent of each postdoctoral trainee's tuition and fees up to a cap of \$4,500 per year.

- Health insurance was moved to a different training grant cost category – training-related expenses – and training grants were provided an additional \$2,000 per predoctoral trainee, per year, and an additional \$4,000 per postdoctoral trainee, per year for training-related expenses.
- Training grant directors were reminded of the existing NRSA training grant policy allowing the rebudgeting of training grant funds between the stipend and tuition categories (i.e., reducing the number of trainees in order to direct more funds to tuition and fees) without prior NIH approval, provided that any rebudgeting was reported in their annual progress reports.

Evaluating Program Changes

This evaluation focused on the rebudgeting option of the NRSA pilot policy, and assessed the extent to which institutions took advantage of the opportunity to transfer training grant funds between stipends and tuition and fees. To make that assessment, an expert in NIH grants management practices and policies reviewed all FY 2007 progress reports for the most common type of NRSA institutional training grants (i.e., T32s): 1,514 in all.

Primary Findings

Of the 1,514 NRSA T32 institutional training grants eligible to rebudget funds between stipends and tuition/fees in FY 2007, 10 reported doing so (.66 percent). Among the training grants exercising that option, several rebudgeted modest amounts of funding that became available when a training appointment ended early or a postdoctoral trainee was appointed at a lower experience level than anticipated.

Three of the ten training grants that reported rebudgeting made multiple 10-month appointments for first-year graduate students beginning their studies in September and redirected the remaining funds for tuition. To determine whether this practice reflected an institutional policy of making academic – rather than calendar – year training appointments, additional data analyses were conducted, but there was no indication that 10-month appointments were standard practice at these three institutions.

Related Findings

In the course of assessing the implementation of the NRSA pilot policy, the evaluator also noted a number of budgetary requests and practices that departed from expected norms for NRSA training grants:

Unconventional Practices

- 7 training grants took advantage of IC-specific “T32 supplemental slot” programs to add trainees from diverse backgrounds to the research training program

- The award notices for some of these training grants incorrectly cited NIH's program of Research Supplements to Promote Diversity in Health-Related Research as the program supporting the additional trainees

Practices Inconsistent with NRSA Policy

- 25 training grants requested funds typically associated with employment, rather than research training: (a) disability, malpractice, or life insurance, (b) Medicare, Social Security, or FICA contributions, or (c) "fringe benefits" for trainees
- 15 training grants requested salary and fringe benefits for the Program Director (or other faculty) in excess of the standard amount allotted for training-related expenses
- 4 training grants described plans to split stipends into less than 9-month appointment periods
- 2 training grants requested mid-year increases to stipend levels

Practices Violating NRSA Regulation

- 15 training grants requested funding for undergraduates, primarily for short-term summer appointments
 - 1 of these training grants also requested funds for undergraduate housing

Conclusions and Recommendations for the NRSA Pilot Policy

This evaluation did not find widespread rebudgeting of stipend funds for tuition: only 10 of the more than 1,500 NRSA T32 training grants active in FY 2007 reported doing so. Moreover, for those ten grants, the amounts rebudgeted were typically less than a full training slot. Ultimately, the option to rebudget NRSA training grant funds between stipend and tuition/fee categories appears to provide useful flexibility to training program directors in instances when stipend funds unexpectedly become available, and should continue to be offered.

Given the comprehensive nature of this review of rebudgeting practices in the first year of the NRSA pilot funding policy, there may be no need for further assessment before finalizing the policy. However, ongoing monitoring of increases in tuition and health insurance costs and the ways in which NRSA training programs are utilizing awarded slots should facilitate future NRSA planning and management.

Additional Recommendations for Improving NRSA Stewardship

Soon-to-be published updates to the NIH Grants Policy Statement should serve to remind both the NIH and extramural communities of appropriate practices for NRSA training grants, by clarifying that payments for disability insurance are not an allowable cost for training grants, and that charges for malpractice insurance are only appropriate when interaction with patients is an integral part of the training. Similarly, the transition to electronic training grant applications in January 2010 and the increasing use of the xTrain

electronic appointment system should prevent any inappropriate involvement of undergraduates in graduate-level training grants in the future.

Further steps worth considering might include:

General

- Discussing the evaluation findings with members of the NIH Extramural Program Management Committee, Training Advisory Committee, and/or Grants Management Advisory Committee

Diversity Supplements

- Developing formal, NIH-wide guidelines for the use of supplemental slots for diversity candidates on T32 training grants

Excess Training-Related Expenses

- Revising the text of NRSA funding opportunity announcements and the NIH Grants Policy Statement to more clearly indicate the limitations on the allowability of Program Director (or other faculty) salaries and fringe benefits under training-related expenses
- Considering an increase in NRSA training-related expenses

Short-term Undergraduate Training

- Developing new avenues for NIH ICs to support science education and/or research training at the undergraduate level