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The Endocrine Society thanks the Subcommittee for the opportunity to submit the following testimony regarding Fiscal Year (FY) 2027 federal appropriations for biomedical research and public health programs. The Endocrine Society is the world's oldest and largest professional organization of scientists devoted to endocrine research and physicians who care for people with endocrine conditions. Our membership includes basic and clinical scientists who receive support from the National Institutes of Health (NIH) for research on endocrine diseases that affect millions of Americans, such as diabetes, thyroid disorders, cancer, infertility, aging, obesity, and bone disease. Our membership also includes clinicians who value federal prevention and treatment programs and depend on new scientific advances to treat their patients. **To support necessary advances in biomedical research to improve health, the Endocrine Society recommends the following FY 2027 appropriations:**

- NIH- $51.303 billion
- Centers for Disease Control and Prevention (CDC)- $11.581 billion for the topline funding level
- Title X program- $737 million

Endocrine Research Improves Public Health, the Economy, and Competitiveness

The United States' NIH-supported scientists drive fundamental biological discoveries and develop applied therapies that advance our understanding of, and ability to treat diseases, particularly common chronic diseases such as diabetes, obesity, and cancer, often at a fraction of the cost of managing these conditions. Endocrine research has led to new medical treatments, saved innumerable lives, reduced human suffering, and contributed billions of dollars to the US economy. NIH-funded research also provides opportunities to reduce healthcare costs. For example, osteoporosis, which is an endocrine-related chronic disease disproportionately affecting women, costs the U.S. $17 billion annually in direct care[1]. NIH-funded research has identified that one of the best predictors of osteoporosis in post-menopausal women is bone mineral density of the hip. Discovering predictive measures like bone mineral density can lead to improved diagnosis, savings in healthcare costs, and improved quality of life.

NIH provides extramural research funding to all fifty states, supporting investigator-initiated meritorious research that advances innovation and economic competitiveness. According to the most recent estimates, each dollar of NIH investment yields ~$2.57 of economic impact[2]. At a minimum, federal funding for NIH must keep pace with inflation; if NIH funding remains stagnant, Institute Directors will be forced to further reduce the number of funded grants, resulting in fewer opportunities for discovery and loss of economic performance. Flat funding will also threaten the future STEM workforce by dissuading future generations from pursuing research careers and cause the US to rapidly lose its global competitiveness and leadership.

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[1] Tran O, Silverman S, Xu X, Bonafede M, Fox K, McDermott M, Gandra S. Osteoporos Int. 2021 Jun;32(6):1195-1205. doi: 10.1007/s00198-020-05769-3. Epub 2021 Jan 7. Erratum in: Osteoporos Int. 2022 Aug;33(8):1835. PMID: 33411007; PMCID: PMC8128807.

[2] Annual Economic Report (2026) - United for Medical Research. (2026, March 30). United for Medical Research. https://www.unitedformedicalresearch.org/annual-economic-report/

Effective Progress Requires Consistent Support Across NIH

The endocrine system affects all areas of human health. Consequently, our members are funded by at least eighteen different Institutes and Centers (ICs) across NIH. For example:

- The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) funds researchers who are developing technologies such as a "bionic pancreas," which uses next-generation technology to automatically deliver insulin to those with Type 1 Diabetes[3].
- The National Institute for Child Health and Human Development (NICHD) funds researchers who are improving our understanding of how hormone levels affect pregnancy rates in patients with Polycystic Ovarian Syndrome (PCOS)[4].
- The National Institutes of Environmental Health Sciences (NIEHS) funds core facilities that help to identify the negative relationship between Per- and Polyfluoroalkyl Substances (PFAS), a class of endocrine disrupting chemical, and fertility in women[5].
- The National Cancer Institute (NCI), NIEHS, and the National Center for Advancing Translational Sciences (NCATS) funds researchers who are improving our understanding of the relationship between anti-inflammatory medication and breast cancer metastasis[6].
- The National Institute of Mental Health (NIMH) and Office of Research on Women's Health funds endocrine researchers address gaps in understanding of how sex differences contribute to mental illness[7]. Understanding such differences is critical to the reliability, reproducibility, and generalizability of research.

We urge Congress to provide at least $51.303 billion for NIH and ensure that any increase is applied proportionally across all ICs.

Congressional Action Needed to Ensure Funds are Spent as Intended

Funding for biomedical research has been a longstanding bipartisan priority. Our Society is extremely concerned that executive agencies may withhold or rescind granted funds appropriated by Congress to support biomedical research. We are also troubled by reports that entire programs supporting research training are being curtailed or eliminated. Such grants have been awarded after strict scrutiny through peer review, including ethical review and relevance to strategic plans set by the ICs consistent with long-term national priorities. Withholding appropriated funds would severely disrupt ongoing research projects, delaying discoveries or rendering entire

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[3] Bionic Pancreas Simplifies Management of Type 1 Diabetes. NIH Research Matters, National Institutes of Health. https://www.nih.gov/news-events/nih-research-matters/bionic-pancreas-simplifies-management-type-1-diabetes. Updated October 18, 2022. Accessed March 10, 2023.

[4] Chan, J. L., Legro, R. S., Eisenberg, E., Pisarska, M. D., & Santoro, N. (2024). Correlation of polycystic ovarian syndrome phenotypes with pregnancy and neonatal outcomes. *Obstetrics and Gynecology*, *144*(4), 543–549. https://doi.org/10.1097/aog.0000000000005702

[5] Cohen, N. J., Yao, M., Midya, V., India-Aldana, S., Mouzica, T., Andra, S. S., Narasimhan, S., Meher, A. K., Arora, M., Chan, J. K. Y., Chan, S., Loy, S. L., Minguez-Alarcon, L., Oulhote, Y., Huang, J., & Valvi, D. (2023). Exposure to perfluoroalkyl substances and women's fertility outcomes in a Singaporean population-based preconception cohort. *The Science of the Total Environment*, *873*, 162267. https://doi.org/10.1016/j.scitotenv.2023.162267

[6] Dwyer, A. R., Kerkvliet, C. P., Truong, T. H., Hagen, K. M., Krutilina, R. I., Parke, D. N., Oakley, R. H., Liddle, C., Cidlowski, J. A., Seagroves, T. N., & Lange, C. A. (2023). Glucocorticoid receptors drive breast cancer cell migration and metabolic reprogramming via PDK4. *Endocrinology*, *164*(7). https://doi.org/10.1210/endocr/bqad083

[7] Fish AM et al., Neuroimage. 2020 Jan 1;204:116122. doi: 10.1016/j.neuroimage.2019.116122. Epub 2019 Aug 27. PMID: 31470127; PMCID: PMC7485527.

programs of research unsustainable. Further, an entire generation of scholars may be lost without steady, stable support to provide the certainty that there will be federally supported programs for biomedical research scientists who will support lines of research that are not commonly studied by private industry. In recent years, Congress has protected NIH through the appropriations process, and we urge continuing these protections in the FY 2027 bill.

Multiyear Funding Creates Disruption and Hurts Early-Career Researchers: NIH grants are typically paid out through yearly allocations for 3 to 5 years; however, in FY 2026 the Administration attempted to mandate that all NIH grants be funded through "multiyear funding" where the entire award amount is provided up front in the first year. This policy caused a significant budget strain, limiting the agency's ability to fund as many researchers as before. While Congress prevented the imposition of this policy across the board, partial implementation led to an immediate reduction in the number of novel research projects supported. The reduced success rate was most pronounced for new investigators[8]. **We urge Congress to include language to protect NIH funding such that the proportion of multiyear grants awarded in FY 2027 is not increased compared with the proportion awarded in FY 2026 unless NIH awards the same total number of grants in FY 2027.**

Congress and Relevant Stakeholders Should Be Involved in Restructuring Efforts: The Administration has proposed plans to restructure NIH by collapsing the current structure of 24 Institutes and Centers (ICs) into eight institutes without describing how critical research priorities such as developmental biology or women's health research would be preserved in the new structure. Underinvestment in these priorities, which have been identified through strategic planning and input from Congress, patients, and scientists, risks jeopardizing the health of Americans and losing progress on longstanding public health objectives. **We welcome an opportunity to work together to revitalize medical research through NIH reauthorization; however, this should be done through a formal, bicameral authorization process with input including but not limited to scientists, health care providers, patients, hospitals and academic institutions**.

Delayed Release of Notice of Funding Opportunities Stalls Research: The NIH announces discretionary funding opportunities via Notices of Funding Opportunity (NOFOs), through which scientists may apply for grant funding. Besides general Parent Announcements, NOFOs allow ICs to guide research toward targeted strategic goals, congressional projects, or specialized training programs. Scientists rely on these announcements to ensure that their proposals are consistent with NIH's mission and the objectives of each IC. Our members are concerned that there has been a significant decrease in the number of NOFOs issued this past year. Many expected NOFOs remain listed as "Forecasted" on Grants.gov, with anticipated deadlines having already expired. **We ask Congress to use its oversight authority to ensure NOFOs are released promptly.**

Failure to Fill NIH Advisory Council Vacancies Delays Release of Funding: Grants submitted to NIH are evaluated through a peer review process in which the most meritorious applications undergo a second level of review by advisory councils at each IC before approval. In addition to their role providing oversight of the grant portfolio, advisory council members provide NIH leadership with expert insights and community perspectives needed to align scientific objectives

[8] Kaiser, J. (2026, February 20). *NIH research grant funding rates plummeted in 2025*. Science. Retrieved March 24, 2026, from https://www.science.org/content/article/nih-research-grant-success-rates-plummeted-2025

with public health priorities. Advisory council members are nominated by each IC and approved by HHS. Only one new member has been appointed to an advisory council since January 2025 while the number of vacancies continues to rise as terms expire[9]. **We are extremely concerned that vacancies in advisory councils will interfere with the ultimate release of grant funds. We urge Congress to exercise its oversight authority to ensure that advisory council vacancies are filled in a timely manner.**

Adequate Funding of CDC Programs Is Necessary to Protect the Public's Health

We urge Congress to support the CDC with an appropriation of at least $11.581 billion and protect the work of the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). We specifically urge Congress to support $42.5 million for the National Diabetes Prevention Program in FY 2027. The CDC is actively working to address chronic diseases including diabetes and obesity. Since addressing chronic disease is a priority of this Administration, then this funding should be prioritized. It is critically important to ensure that CDC has the capacity to protect the public's health.

Title X Funding Provides Necessary Services and Reduces Healthcare Costs

Title X is an important source of funding for ensuring reproductive health benefits including both contraceptive and preventive services to women. Offering affordable access to contraception can have a measurable impact on healthcare costs. For every public dollar invested in contraception, short-term Medicaid expenditures are reduced by $7.09 for the pregnancy, delivery, and early childhood care related to births from unintended pregnancies, resulting in savings of $7 billion to federal and state governments[10]. Title X is the main point of care for low income, under- or un-insured, adults and adolescents for affordable contraception, cancer screenings, sexually transmitted disease testing and treatment, and medically accurate information on family planning options. However, to provide these services to the over four million people who depend on Title X-funded centers, Title X is significantly underfunded. We recommend you provide at least $737 million for Title X in FY 2027.

Conclusion

The future of the nation's health and economy depends on robust biomedical research and public health funding. We strongly encourage Congress to create a budget that supports the nation's priorities and ensures that non-defense discretionary spending, including health and biomedical research funding, continues to receive increases at or beyond inflation. Flat funding is a cut and will mean that there will be fewer research grants, Americans will have less access to health and prevention services, and the U.S. will lose its status as a leader in medical research. The Endocrine Society respectfully asks the Subcommittee to support our funding recommendations for the NIH, CDC, and Title X in its FY 2027 appropriations bill and to protect NIH by ensuring that money appropriated to NIH is distributed without interference through the slow approval of NOFOs, advisory council vacancies, or increasing the proportion of multiyear funding awards.

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[9] Molteni, M. (2026, January 23). Unfilled vacancies have depleted NIH advisory councils, key players in grant approvals. *STAT*. Retrieved March 24, 2026 from https://www.statnews.com/2026/01/22/nih-advisory-council-vacancies-raise-questions-funding-politicization/

[10] Frost JJ, et al., Publicly Funded Contraceptive Services at U.S. Clinics, 2015, New York: Guttmacher Institute, 2017.