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NIH breakdown: Massachusetts research grants top \$2.5B, concentrate in Longwood Medical Area (again)

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Massachusetts hospitals and life sciences researchers had a good year in 2015 — a record year, in fact — when accounting for total grant funding offered by the National Institutes of Health, the nation's preeminent source of federal dollars in support of health-care innovation.

The state's \$2.5 billion in funding last year ranked second nationally behind only California (\$3.6 billion) and marked the first time that the commonwealth's total haul had surpassed that dollar threshold since 2012, when stimulus money from the American Recovery and Reinvestment Act sent total NIH receipts to record, albeit unsustainable, highs.

According to NIH, Massachusetts accounted for 10 percent of NIH funding to all states and U.S. territories in 2015, on par with prior years. However, its share of total grants awarded slipped slightly, falling to 9.4 percent of all U.S.



awards from 9.7 percent in 2013. The Bay State (4,914 total grants) also ranked second behind California (7,765) in total grants awarded last year.

The state's total funding in 2015 marked a slight increase from 2014's take of \$2.4 billion, while total grants received dipped by 10 awards on a year-over-year basis. The result was a near 5 percent increase in the Bay State's average grant size, which rose to just over \$510,000 in 2015.

Much of the state's year-over-year growth in funding was concentrated among the area's largest health care providers, particularly ones operating in Boston's Longwood Medical Area. Statewide, some 72 percent of the NIH funds doled out in Massachusetts last year were concentrated in Boston proper, while another 14 percent was in Cambridge.

Massachusetts General Hospital was the state's big winner in 2015, posting 23 percent and 26 percent growth in total NIH grants and funding, respectively. With 967 grants and \$409 million in total NIH and related agency funding in 2015, MGH retained its long run as the state's largest beneficiary of NIH appropriations.

According to Dr. Harry Orf, senior vice president for research at MGH, NIH's grant total for calendar year 2015 differs from the care provider's internal records, which track funding by fiscal years ending in September. Nonetheless, he acknowledged that MGH is bearing fruit from its decision about a year ago to bring all of its research under the roof of the newly created MGH Research Institute.

"We definitely did get a bigger piece of the pie, and we are being more competitive," Orf said. "Our early numbers are ahead of budget ... it's helping us. It's contributing to that uptick in applications being put in, and it's definitely helping in the activity we're having in industry (collaborations)."

