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COMPTROLLER GENERAL OF THE UNITED STATES
WASHINGTON D.C. 20548

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May 14, 1981

The Honorable Orrin G. Hatch
Chairman, Committee on Labor
and Human Resources
United States Senate

Dear Mr. Chairman:

At your request we are providing [comments on Senate
Bill 290, 97th Congress].

The bill would amend the Public Health Service Act to require the Secretary of Health and Human Services to establish, through the National Institute of Neurological, Communicative Disorders, and Stroke (NINCDS), a Reye's Syndrome Coordinating Committee. It would authorize the Committee to award research grants and contracts and to establish and dispatch Reye's mobile research teams. The bill would require the Secretary, within 6 months after the end of the Committee's 3-year authorization, to report to the Congress on the Committee's activities, accomplishments, research findings, and recommendations for further action.

Special coordinating committees have previously been established by the Public Health Service Act to combat diabetes, arthritis, and digestive diseases. However, S.290 would be precedent-setting in the following ways.

First, the existing coordinating committees are not authorized to award research grants and contracts. Such grants and contracts are awarded by several institutes within the National Institutes of Health (NIH). The fiscal year 1982 budget justification for NINCDS states that NINCDS has solicited applications for research projects to study Reye's Syndrome. The justification states also that NINCDS intends to make at least one program project grant to a group of researchers at the same institution to work on projects related to Reye's Syndrome. An NIH official told us that proposals for Reye's Syndrome research have started to arrive and that research funding in this area probably will increase in the coming years.

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Second, authorizing the proposed coordinating committee to award grants and contracts could result in a significant deviation from the established NIH peer review system for competitively awarding research grants and contracts.

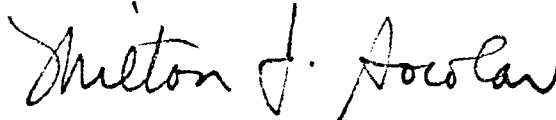
Third, the bill would authorize separate appropriations for research grants and for the mobile research teams. Separate appropriations are not authorized for NIH-supported research on any other disease of low incidence.

We also noted the following technical problems with the language of the bill.

1. The bill would amend Title XI of the Public Health Service Act. Title XI authorizes programs on genetic diseases, hemophilia, and sudden infant death syndrome, none of which are operated by NIH. NIH's institutes and programs are authorized under Title IV of the Act.
2. Although the language on page 3 of the bill would provide for the proposed coordinating committee to make grants and enter into contracts, the language in the proposed appropriation authority on page 4 does not mention contracts.

We trust that these comments will be useful in your consideration of the bill.

Sincerely yours,



Acting Comptroller General
of the United States