

NIH Success Rate Definition

Last Updated February 2009

DEFINITION:

Success rates are defined as the percentage of reviewed grant applications that receive funding. They are computed on a fiscal year basis and include applications that are peer reviewed and either scored or unscored by an Initial Review Group. Success rates are determined by dividing the number of competing applications funded by the sum of the total number of competing applications reviewed and the number of funded carryovers¹. Applications having one or more amendments in the same fiscal year are only counted once.

Some grants are jointly funded by two or more NIH Institutes or Centers (ICs). Usually, the IC that contributes the most dollars to the grant receives the award count.

NIH Institutes and Centers: Beginning in Fiscal Year 2007, the success rates for the Research Project Grants category included grants funded by the National Library of Medicine and the National Cancer Institute's Cancer Control budget category.

Excluded from the calculation of success rates are those applications that are withdrawn by an applicant prior to review, or returned or administratively withdrawn by the NIH Center for Scientific Review, or a NIH IC² and not peer reviewed by an Initial Review Group.

¹**Funded carryovers** are those applications which were reviewed and not funded in the review year, but were funded in the next year. In the review year, the application is counted only in the success rate denominator (reviewed), but in the next year when the application is funded it is included in the success rate numerator (awarded) and denominator (reviewed).

²**Reasons for returning or withdrawing an application prior to review** include, but are not limited to, the application was late or its budget request exceeded guidelines, or the applicant or his or her institution was ineligible.

REPORTING CATEGORIES:

Budget Mechanism and Activity Codes: Success rates are shown by specific activity codes (e.g., R01, T32) and budget mechanisms (e.g., Research Project Grants, Other Research).

Award types: Success rates are shown for all competing grants combined, and broken down by new, continuation and supplements grants. New competitive awards (Type 1) are comprised of projects that have not yet been funded. The continuation category includes competitive

renewal awards (Type 2), the subset of extension awards (Type 4) that were competitive, and competitive renewals that had a change of NIH IC or Division from one competitive segment (or time period) to the subsequent segment (Type 9). Change of grantee or institutions awards (Type 7) that occurred in the same year as competitive new awards (Type 1) are classified as new grants. Change of grantee or institutions awards (Type 7) that occurred in the same year as a competitive renewal award are classified as continuation grants. The supplements category (Type 3) include only the subset that were competed.

Budget Authority: NIH receives a majority of its budget authority through multiple appropriations provided annually under the jurisdiction of the Labor/HHS/Education Appropriations Subcommittee. NIH also receives resources from the Superfund Research account under the jurisdiction of the Interior Appropriations Subcommittee as well as the Special Type 1 Diabetes mandatory appropriation and reimbursements from other federal agencies. Beginning in Fiscal Year 2008, success rates for grants funded from the Superfund Research appropriation are reported separately from success rates calculated for grants funded from Labor/HHS/Education appropriations. Prior to Fiscal Year 2008, the success rates for the “Other Research” budget mechanism category included grants funded from reimbursable agreements. This treatment is no longer used beginning in Fiscal Year 2008.