

NIH SUCCESS RATES

Definition

Success rates are defined as the percentage of reviewed grant applications¹ that receive funding (i.e., the likelihood of a project getting funded). They are computed on a fiscal year basis and include applications that are peer reviewed, either scored or unscored by an Initial Review Group (IRG). Applications subjected to a streamlined review process are included. 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and the number of funded carryovers.² Excluded from the calculation of success rates are those applications that are withdrawn by an applicant prior to review, returned or administratively withdrawn by the NIH³.

If there are multiple versions of the same project submitted in one year then only one of them is counted. For example, if an R01 application is unfunded and its corresponding R56 application is funded, the R56 is counted towards the application and the award, and R01 is excluded from the count to prevent over-counting the application. In cases where both an R01 application is funded and its corresponding R56 application is funded, both get the count (numerator and denominator).

Tethered Applications/Grants - When applications are submitted collaboratively the applications are associated and reviewed as a single project. If selected for funding, each application will receive a separate award to fund the collaborative project. The awards may be linked together through special terms and conditions. Note this term may also apply when a single consolidated application is submitted involving multiple components that ultimately receive separate but linked awards. Most tethered applications are counted. An exception is made for certain NCATs U54 linked awards, where the linked awards that are made in addition to the U54 are not counted.

Some grants are jointly funded by two or more NIH Institutes or Centers (ICs). If the administrative IC has contributed \$1 towards funding, the administrative IC gets the count for both the application and award. For unfunded applications, the admin IC usually gets the count.

Reporting Categories

Budget Mechanism and Activity Codes: Success rates are shown by ICs for 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,

¹ Applications having one or more submissions for the same project in the same fiscal year are only counted once.

² **Funded carryovers** are those applications which were reviewed and not funded in the review fiscal year but were funded in the next fiscal 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).

³ **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, the applicant or his or her institution was ineligible, or the prior application was chosen for funding.

continuation and revision (formerly known as competing 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 revisions category includes only the subset of Type 3 awards that was competed.

Budget Authority: NIH receives most of its budget authority through multiple appropriations provided annually under the jurisdiction of the Labor/HHS/Education Appropriations Subcommittee. NIH's main appropriation is called direct budget authority. 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 have been 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. The NIH Research Project Grant success rate provided annually to Congress is based on activities funded from Labor/HHS/ Education appropriations and the Special Type 1 Diabetes mandatory account. Success rates for other budget mechanisms and by type of funding source (e.g., Direct Budget Authority from Labor/HHS/Education and SpecialType1 Diabetes mandatory account; Superfund; and non-Direct Budget Authority (Reimbursables/Gift Fund/CancerStamp Fund/Inter-Departmental Delegation of Authority/COVID Supplemental Fund)) are available in some reports.

Historical NIH Institutes and Centers: Beginning in Fiscal Year 2007, the success rates for the Research Project Grants (RPG) category included grants funded by the National Library of Medicine (NLM) and the National Cancer Institute's (NCI) Cancer Control budget category. The National Center for Research Resources (NCRR) was dissolved in Fiscal Year 2012, so no success rates for this Center will be reported for 2012 and beyond. The National Center for Advancing Translational Sciences (NCATS) was established in Fiscal Year 2012, so success rates for this Center will be reported for 2012 and beyond. Beginning in Fiscal Year 2012, success rates were reported for two programs moved to the NIH Office of the Director (OD), the Office of Research Infrastructure Programs (ORIS), and the Science Education Partnership Awards (SEPA). In Fiscal Year 2018, the SEPA awards were moved to the National Institute of General Medical Sciences (NIGMS) and success rates are reported separately there. From FY2023 SEPA awards are no longer reported separately.