



American Society of Human Genetics

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The Honorable Jon R. Lorsch, PhD
Deputy Director for Extramural Research
National Institutes of Health
Office of Extramural Research
6705 Rockledge Drive
Bethesda, Maryland 20892

August 3, 2026

Re: NOT-OD-26-086 – Request for Information: Proposal to Cap the Number of Simultaneous Research Project Grants per Principal Investigator to Support More Researchers and Maximize Scientific Productivity and Innovation

We note that these comments have been submitted electronically in accordance with the instructions provided for this request for information.

Dear Dr. Lorsch:

On behalf of the American Society of Human Genetics (ASHG), thank you for the opportunity to provide comments on the NIH Request for Information [NOT-OD-26-086](#), "Proposal to Cap the Number of Simultaneous Research Project Grants per Principal Investigator to Support More Researchers and Maximize Scientific Productivity and Innovation." We appreciate NIH's efforts to explore policies aimed at broadening participation across the biomedical research enterprise and strengthening the long-term sustainability of the research workforce.

As the world's largest professional organization for human genetics and genomics research, we offer these comments informed by a range of perspectives from the research community. Feedback from ASHG members reflects a broad, nuanced spectrum of opinions regarding this proposal, with investigators across career stages and institutional settings identifying both potential benefits and concerns related to its implementation and unintended consequences. As written, we oppose a hard cap on the number of RPGs for which an investigator may serve as a PI or MPI and encourage NIH to pursue alternative approaches that better account for differences in grant mechanisms, investigator effort, and total funding levels.

Policy Merits and Concerns

Broadening participation in biomedical research fosters innovation, accelerates discovery, and strengthens the United States' global leadership. While the policy aims to increase funding opportunities and support more early-stage and emerging investigators, the proposed cap will discourage team science, create disincentives for collaborative leadership, and disproportionately affect investigators who oversee shared resources, core facilities, or lead community-based research programs.

Many scientific advances, particularly in human genetics and genomics, increasingly rely on multidisciplinary collaborations that require shared leadership across institutions, disciplines, and investigators. A policy that treats all PI and MPI roles equally may create incentives to avoid collaborative arrangements, even when they are scientifically appropriate. As written, the policy risks constraining collaborative research and multi-institutional consortia. NIH should provide greater clarity regarding whether MPI awards would be counted identically to single-PI awards and whether partial credit or alternative weighting approaches would be used for collaborative grants or Co-PI roles.

Strengths and Limitations of the Proposed Implementation Strategies

The phased implementation approach is preferable to an immediate transition because it minimizes disruption to ongoing research. However, significant uncertainty remains regarding how MPI awards, U-series cooperative agreements, consortium grants, and multidisciplinary, long-term research programs (e.g., P01s) will be counted against any caps. Greater clarity is needed to ensure implementation does not inadvertently penalize collaboration or essential shared research infrastructure.

Potential Unintended Consequences and Policy Loopholes

Not all grant mechanisms are equivalent; significant differences in scope, oversight responsibilities, and PI commitment suggest that a one-size-fits-all approach could be detrimental to the research enterprise. If NIH proceeds with a cap, four R01s may be a more appropriate threshold, with U01s, MPI awards, R21s, and pilot grants excluded. As written, the policy may encourage nominal PI reassignments and discourage participation in MPI awards and collaborative research.

The proposal also appears inconsistent with NIH's longstanding emphasis on funding scientific merit, innovation, and potential impact as the primary determinants of funding decisions. By establishing a numerical limit on investigator participation, the policy could restrict highly meritorious research projects based on administrative thresholds rather than scientific quality, potentially preventing NIH from supporting the strongest applications and most promising opportunities for discovery.

It is also important to acknowledge that many research programs depend on highly specialized personnel whose technical expertise and salaries often cannot be supported by a single grant. Larger, well-funded laboratories also tend to attract top trainees by offering a broader scientific environment, greater collaboration opportunities, and increased funding stability. In the current highly competitive funding landscape, investigators often must rely on multiple grants to maintain personnel, infrastructure, and research continuity. Limiting the number of grants a PI may hold could undermine laboratory stability, weaken training opportunities, and disrupt productive research programs.

Additional Comments

Training grants (e.g., T32s) and career development awards should not count toward any limit. These programs play a distinct role in developing the next generation of biomedical researchers, and policies should not create disincentives for mentorship or training leadership.

Finally, NIH may wish to consider alternative approaches that address total investigator funding rather than limiting the number of awards, as grant mechanisms differ substantially in scope, budget, and management requirements. Exceptions to the grant limit can be considered if there are outstanding scientific reasons for exceeding the limit, subject to approval by Council and the Institute or Center Director.

We look forward to continued collaboration with NIH and to providing any additional information or perspective that may be helpful. Should you have any questions or require further information, please contact Karina Miller, PhD, (Kmillier@ashg.org) at ASHG.

Sincerely,



Susan A. Slaugenhaupt, PhD
ASHG President