

NIH'S ROLE IN SUSTAINING THE U.S. ECONOMY

2016 Update

Research funded by the National Institutes of Health (NIH) saves lives, improves health and offers hope to people affected by disease. It also supports more than 350,000 jobs across the United States and contributes some $60 billion annually in economic activity. Research funded by the NIH is an engine for both medical and economic progress.

In 2015, the NIH provided just over $22.8 billion in extramural research funding to scientists in all 50 states and the District of Columbia. These researchers are working on some of our most urgent and chronic health problems. Their work also has significant economic ripple effects. Using the Regional Input-Output Modeling System (RIMS II) developed by the Department of Commerce, United for Medical Research calculated the impact of NIH research funding in 2015 on jobs and the economy.

As seen in the table on the next page, NIH research funding in 2015 directly and indirectly supported **352,349 jobs nationwide**. Thirteen states have employment of 10,000 or more supported by NIH research funding. The median state has just over 3,200 jobs due to NIH activity. Additionally, the income generated by these jobs, as well as by the purchase of research-related equipment, services and materials, when cycled through the economy, produced **$60.171 billion in new economic activity** in 2015. Seventeen states experienced an economic gain of $1 billion or more.

NIH Research Supports 10,000+ Jobs in 13 States

California	54,176
Massachusetts	29,214
New York	25,543
Texas	21,535
Pennsylvania	20,724
North Carolina	17,186
Maryland	16,789
Illinois	12,984
Washington	12,386
Florida	11,727
Ohio	11,092
Georgia	10,336
Michigan	10,058

The NIH is the world's premier health research agency, fueling life-changing discovery and helping to maintain American output, employment and a globally competitive life sciences industry. The numbers in this report underscore the importance of not just providing the NIH strong funding, but of ensuring steady and sustainable growth in the NIH budget over the long term.

A note about this data: Since 2011, United for Medical Research has provided an analysis of the employment and economic activity attributable to NIH extramural research spending. We rely on the RIMS II model maintained by the Bureau of Economic Analysis, which is part of the U.S. Department of Commerce. Using the updated model released by BEA in November 2015 to calculate the numbers in this report led to a reduction in the number of jobs over previous years associated with NIH research activity despite a small uptick in overall funding in FY15. This 2016 update, and each of the previous analyses, was conducted by Dr. Everett Ehrlich of ESC Company.

United for Medical Research

Economic Impact of NIH Research Activity by State FY2015

State	NIH AWARDS ($M)	Jobs Created per $1M NIH Awards	Intrastate Jobs	Added Interstate Activity (%)	Interstate Jobs	TOTAL EMPLOYMENT	ECONOMIC ACTIVITY ($M)
Alabama	$280.1	12.9255	3,621	20.3%	735	4,356	668.5
Alaska	$13.5	11.7961	160	126.3%	202	361	54.0
Arizona	$150.6	14.971	2,254	48.6%	1,095	3,349	493.5
Arkansas	$39.3	12.7123	500	98.4%	492	992	138.1
California	$3,474.2	13.4766	46,820	15.7%	7,356	54,176	9,627.6
Colorado	$328.8	15.1942	4,996	21.8%	1,091	6,087	965.3
Connecticut	$461.3	10.16	4,686	15.5%	725	5,411	1,074.4
Delaware	$36.4	7.9568	290	51.6%	150	440	103.0
District of Columbia	$193.4	2.5243	488	22.1%	108	596	358.5
Florida	$521.8	15.946	8,321	40.9%	3,406	11,727	1,639.3
Georgia	$507.0	16.6467	8,440	22.5%	1,896	10,336	1,468.9
Hawaii	$48.4	13.3149	644	46.0%	297	941	138.4
Idaho	$10.5	11.7608	124	185.5%	229	353	54.8
Illinois	$735.9	14.3185	10,537	23.2%	2,447	12,984	2,233.6
Indiana	$214.5	12.9256	2,772	41.6%	1,152	3,924	609.6
Iowa	$160.0	12.1646	1,946	33.2%	646	2,592	378.3
Kansas	$85.7	11.7355	1,006	49.8%	501	1,507	247.4
Kentucky	$160.7	12.9582	2,082	34.1%	711	2,793	417.7
Louisiana	$129.5	13.8442	1,793	53.0%	951	2,744	385.7
Maine	$84.1	13.9673	1,175	19.9%	233	1,408	190.3
Maryland	$1,292.8	12.1303	15,682	7.1%	1,106	16,789	3,015.6
Massachusetts	$2,424.5	11.4899	27,858	4.9%	1,357	29,214	5,661.4
Michigan	$622.8	13.5672	8,449	19.0%	1,609	10,058	1,613.8
Minnesota	$496.7	12.9548	6,435	16.0%	1,030	7,465	1,291.9
Mississippi	$47.7	12.584	601	69.1%	415	1,016	143.0
Missouri	$471.6	12.1388	5,725	16.3%	932	6,656	1,148.2
Montana	$28.5	13.5357	386	48.3%	187	573	74.9
Nebraska	$89.8	13.1253	1,178	36.7%	433	1,611	228.5
Nevada	$25.0	11.9684	299	155.3%	465	764	122.8
New Hampshire	$103.4	10.7293	1,109	20.1%	224	1,333	244.5
New Jersey	$225.1	12.3079	2,771	60.0%	1,661	4,432	832.1
New Mexico	$90.5	11.7739	1,066	31.1%	331	1,397	218.1
New York	$2,046.8	10.5353	21,564	18.5%	3,979	25,543	5,082.5
North Carolina	$1,055.2	14.599	15,404	11.6%	1,782	17,186	2,627.6
North Dakota	$15.6	10.7606	168	113.4%	190	358	56.2
Ohio	$670.1	13.5479	9,078	22.2%	2,015	11,092	1,812.1
Oklahoma	$86.2	14.4572	1,246	58.6%	730	1,975	271.9
Oregon	$288.6	13.6984	3,953	21.7%	856	4,809	708.0
Pennsylvania	$1,500.3	12.4386	18,662	11.1%	2,062	20,724	3,786.7
Rhode Island	$132.5	11.1262	1,474	12.8%	188	1,662	276.2
South Carolina	$152.5	15.112	2,304	33.9%	781	3,085	426.6
South Dakota	$20.5	12.1335	249	71.0%	177	426	59.3
Tennessee	$443.1	13.3177	5,901	17.6%	1,037	6,939	1,141.3
Texas	$1,004.4	15.6829	15,752	36.7%	5,783	21,535	3,380.2
Utah	$159.5	16.752	2,671	21.7%	581	3,252	444.0
Vermont	$49.2	12.8212	631	18.7%	118	750	106.6
Virginia	$322.5	11.1473	3,595	38.7%	1,392	4,987	947.5
Washington	$885.3	12.4095	10,987	12.7%	1,400	12,386	2,137.8
West Virginia	$21.0	11.4371	240	117.2%	281	521	78.0
Wisconsin	$403.4	13.2189	5,333	21.3%	1,134	6,467	947.8
Wyoming	$10.5	10.4272	109	143.5%	157	266	39.4
50 states plus DC	$22,821.3		293,535	20.0%	58,814	352,349	$60,171

United for Medical Research is a coalition of leading research institutions, patient and health advocates, and private industry that have joined together to seek steady increases in funding for the National Institutes of Health. UMR members include: AdvaMed, Alzheimer's Association, American Association for the Advancement of Science, American Cancer Society Cancer Action Network, American Heart Association, Association of American Universities, Association of Public and Land-grant Universities, BD, Biotechnology Industry Organization, Boston University, Corning, FasterCures, Harvard University, Johns Hopkins University, Massachusetts Institute of Technology, Melanoma Research Alliance, Northwestern University, Pancreatic Cancer Action Network, PhRMA, Research!America, Stanford University, Thermo Fisher Scientific, University of Pennsylvania, Vanderbilt University & Vanderbilt University Medical Center and Washington University in St. Louis.

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