

Buildings and Facilities

CONGRESSIONAL JUSTIFICATION
FY 2022

Department of Health and Human Services
National Institutes of Health

DEPARTMENT OF HEALTH AND HUMAN SERVICES

NATIONAL INSTITUTES OF HEALTH

Buildings and Facilities (B&F)

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Director's Overview

America's continuing leadership in biomedical research requires infrastructure and facilities capable of housing safe, reproducible research in compliance with all laws and regulations and conducive to cutting-edge research and research support. The National Institutes of Health (NIH) strives to ensure that its facilities enable scientists to discover new diagnostics, therapies, and cures. NIH continuously evaluates its property inventory to ensure that the buildings and infrastructure on its campuses are safe and reliable and to ensure that these real property assets evolve in support of science. These buildings include the Clinical Research Center (CRC), which includes 240 inpatient beds and 82 day-hospital stations, Biosafety Level 3 and 4 high containment facilities, biomedical research laboratories, a world-class Central Utility Plant (CUP), and buildings housing research support activities.

The Building and Facilities (B&F) program is essential to conducting safe, reproducible science for the Intramural Research Program (IRP). It is critical to ensuring patient safety in the NIH Clinical Center and the conduct of specialty research functions, such as infectious disease research, genomic sequencing, cellular therapy, and unique imaging capabilities. Today's biomedical research requires facilities capable of providing the proper mechanical, electrical, plumbing, fire protection, and architectural environment in which science can flourish. A major component of the B&F program is the Repair & Improvement (R&I) program, which enables NIH to maintain and improve the performance of existing facilities throughout their life cycle. As the responsible steward of its 261 facilities, a key aspect of NIH's strategy is to sustain the condition of existing facilities to prevent premature deterioration and the curtailment of research. These investments help reduce the likelihood and consequences of building emergencies associated with NIH's Backlog of Maintenance and Repairs (BMAR), estimated at nearly \$2.5 billion across all campuses as of the end of FY 2020. The President's Budget requests \$250.0 million for the B&F program.

As directed by Congress in the Consolidated Appropriations Act of 2017, NIH entered a contract with the National Academies of Science, Engineering, and Medicine (NASEM) to assess the condition of the facilities on the Bethesda Campus. An ad hoc committee comprised of medical, architectural, engineering, planning, and maintenance experts was established to conduct the analysis. On August 26, 2019, the committee's report was made public.¹ The report found that "The buildings and facilities at the NIH Bethesda Campus are in need of significant improvement and upgrading to sustain their current mission and ongoing functionality." The report highlights pressing campus-wide infrastructure needs and recommends improvements to NIH's capital planning and funding processes, including updating the B&F prioritization model and developing an annual budget request for BMAR reduction. It also suggests that NIH strengthen internal governance process by assigning and empowering a senior leader to manage capital planning. NIH is taking steps to address all 14 recommendations of the NASEM report. While the scope of the NASEM report was limited to the Bethesda Campus, the NIH facilities are in critical need of improvements at other sites in Maryland, Montana, and North Carolina.

¹ www.nap.edu/read/25483/chapter/1

NIH's highest priority construction project is the Surgery, Radiology, and Laboratory Medicine (SRLM) building. Currently, the surgery, radiology, and laboratory medicine functions on the Bethesda campus are housed in legacy facilities constructed in the 1980s that are both obsolescent and inefficient. Surgeons regularly experience leaks in operating rooms, requiring them to cancel important procedures. The configuration of the operating rooms precludes state-of-the-art hybrid procedures. The construction contract for the SRLM is expected to be awarded in early FY 2022, combining resources from the Nonrecurring Expenses Fund together with B&F appropriations to proceed with this high-priority project.

In FY 2022, NIH requests a \$50.0 million increase to the B&F account, raising its appropriation from \$200.0 million to \$250.0 million. In addition, the budget includes a general provision that would allow NIH to supplement the B&F account by transferring and merging up to one percent of other NIH appropriations, providing the transferred funds the five-year period of availability of the B&F account. NIH Institute and Center appropriations generally have a one-year period of availability, which is not sufficient for construction projects, and existing transfer authorities do not change the period of availability. Together, the B&F increase and transfer authority would enable NIH to dramatically improve the condition of its facilities and halt the growth of the BMAR. The COVID-19 pandemic has made biomedical research and the facilities that support it even more important than ever. Facilities will play an important role in NIH's ability to respond to future national and global health threats. This budget aims to adapt NIH buildings and infrastructure to a changing biomedical research landscape, while maintaining the safety and reliability of its buildings and infrastructure.

Overall Budget Policy. The FY 2022 President's Budget request is \$250.0 million, an increase of \$50.0 million or 25 percent compared with the FY 2021 enacted level.

Summary of B&F Funding by Program Activity
(In thousands of dollars)

FY	Construction	Essential Safety and Regulatory Compliance	Physical Security	Repairs and Improvements	Renovations	Equipment/ Systems/ Enabling	Total
2011	-	1,127	-	48,773	-	-	49,900
2012	10,400	16,000	-	98,908	-	-	125,308
2013	7,350	16,250	-	94,509	-	-	118,109
2014	28,630	-	-	100,033	-	-	128,663
2015	78,210	-	-	50,653	-	-	128,863
2016	85,467	-	-	43,396	-	-	128,863
2017	3,200	-	-	125,663	-	-	128,863
2018	7,000	-	-	121,863	-	-	128,863
2019	70,750	-	-	128,563	-	-	199,313
2020	143,538	-	-	56,462	-	-	200,000
2021	74,925	-	-	125,075	-	-	200,000
2022	166,646	-	-	83,354	-	-	250,000

National Institutes of Health
BUILDINGS AND FACILITIES

For the study of, construction of, demolition of, renovation of, and acquisition of equipment for, facilities of or used by NIH, including the acquisition of real property, [200,000,000]250,000,000, to remain available through September 30, [2025]2026.

GENERAL PROVISIONS

SEC. [216]214. Not to exceed [\$45,000,000] 1 percent of funds appropriated by this Act to the offices, institutes and centers of the National Institutes of Health may be [used for alteration, repair, or improvement of facilities, as necessary for the proper and efficient conduct of the activities authorized herein, at not to exceed \$3,500,000 per project] *transferred to and merged with funds appropriated under the heading "National Institutes of Health-Buildings and Facilities": Provided, That the use of such transferred funds shall be subject to a centralized prioritization and governance process: Provided further, That the Director of the National Institutes of Health shall notify the Committees on Appropriations of the House of Representatives and the Senate at least 15 days in advance of any such transfer: Provided further, That this transfer authority is in addition to any other transfer authority provided by law.*

**NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities**

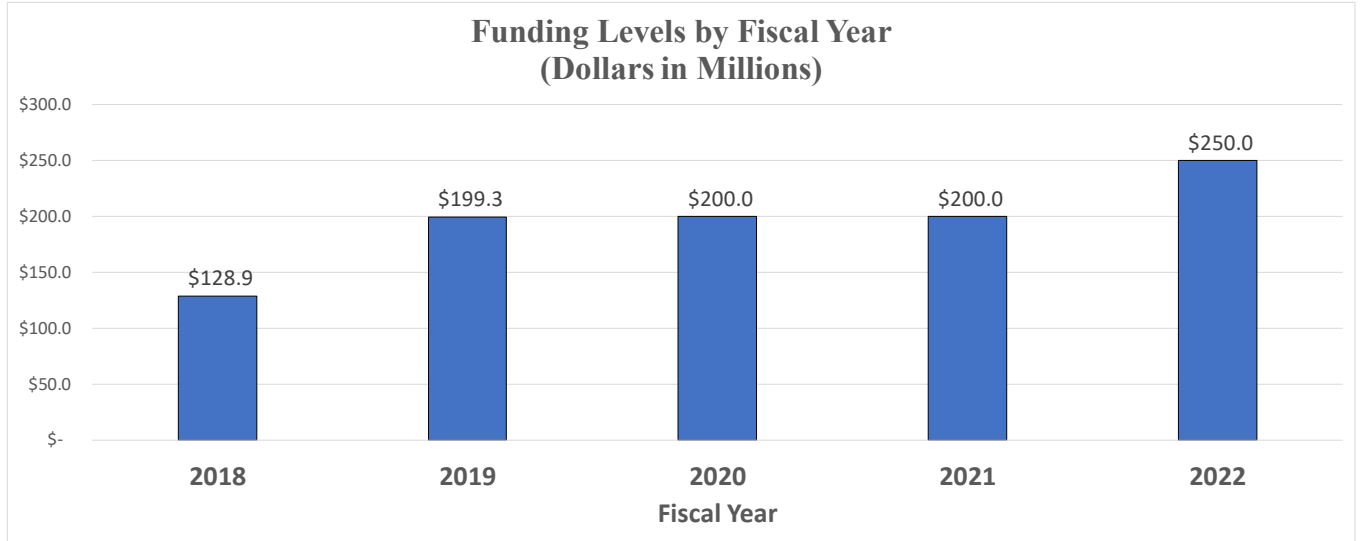
Summary of Changes

(Dollars in Thousands)

FY 2021 Enacted	\$200,000
FY 2022 President's Budget	\$250,000
Net change	\$50,000

	FY 2021	FY 2022	FY 2021 +/- FY 2022
<u>Increases</u>			
<u>A. Program:</u>			
Surgery, Radiology and Lab Medicine Building (SRLM)	4,000	29,600	25,600
Electrical Switching Station & Emergency Generators 59/59A	-	87,116	87,116
NIAID VRC 40A	4,000	12,000	8,000
NIAID Support Facility (Bldg J), RML	-	5,000	5,000
Electrical Power Reliability for the CCC	-	5,000	5,000
Repair Parking Garages, Bethesda	-	10,715	10,715
Total Increases	\$ 8,000	\$ 149,431	\$ 141,431
<u>Decreases</u>			
<u>A. Program:</u>			
Bldg. 10 CC Radiopharmacy & Biologics Radiolabeling Facility	21,454	-	(21,454)
Replace R22 Refrigerant Chillers	20,000	-	(20,000)
Clinical Center E Wing Renovation	15,000	15,000	-
Building 51 NIH Fire House	1,872	-	(1,872)
B38 NLM 1st Floor Renovations (Phase 1)	8,599	-	(8,599)
Electrical Reliability for Bldg 38A	3,500	-	(3,500)
Repairs & Improvements	121,575	85,569	(36,006)
Total Decreases	192,000	100,569	(91,431)
Total Changes	\$ 200,000	\$ 250,000	\$ 50,000

Budget Graph



**NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities**

**Budget Authority by Activity
(Dollars in Thousands)**

	FY 2020 Final		FY 2021 Enacted		FY 2022 President's Budget		FY 2022 +/- FY 2021 Enacted	
	<u>FTE</u>	<u>Amount</u>	<u>FTE</u>	<u>Amount</u>	<u>FTE</u>	<u>Amount</u>	<u>FTE</u>	<u>Amount</u>
<u>Detail</u>								
Bldg. 10 CC Radiopharmacy & Biologics Radiolabeling Facility	-	-	21,454	-	-	-	-	(21,454)
Surgery, Radiology and Lab Medicine Building (SRLM)	62,600	-	4,000	-	29,600	-	-	25,600
Electrical Switching Station & Emergency Generators 59/59A	3,908	-	-	-	87,116	-	-	87,116
RTP Site Utility Loop	5,500	-	-	-	-	-	-	-
Replace R22 Refrigerant Chillers	20,000	-	20,000	-	-	-	-	(20,000)
Electrical Substation 17	14,680	-	-	-	-	-	-	-
Replacement of Direct Buried Steam Pipe Along Convent Dr	6,850	-	-	-	-	-	-	-
Clinical Center E Wing Renovation	30,000	-	15,000	-	15,000	-	-	-
NIAID VRC 40A	-	-	4,000	-	12,000	-	-	8,000
Building 51 NIH Fire House	-	-	1,872	-	-	-	-	(1,872)
B38 NLM 1st Floor Renovations (Phase 1)	-	-	8,599	-	-	-	-	(8,599)
NIAID Support Facility (Bldg J), RML	-	-	-	-	5,000	-	-	5,000
Electrical Power Reliability for the CCC	-	-	-	-	5,000	-	-	5,000
Repair Parking Garages, Bethesda	-	-	-	-	10,715	-	-	10,715
Electrical Reliability for Bldg 38A	-	-	3,500	-	-	-	-	(3,500)
Repairs & Improvements	56,462	-	121,575	-	85,569	-	-	(36,006)
TOTAL		200,000		200,000		250,000		50,000

Justification of Budget Request

Buildings and Facilities

Authorizing Legislation: Section 301 and title IV of the Public Health Services Act, as amended.

Budget Authority:

	FY 2020 Final	FY 2021 Enacted	FY 2022 President's Budget	FY 2022 +/- FY 2021
BA	\$200,000,000	\$200,000,000	\$250,000,000	\$50,000,000
Obligations	108,708,000	310,254,000	250,000,000	-60,254,000

Program Descriptions

NIH plans to execute various modernization and repair projects in its research hospital; replace research animal facilities with a centralized and more efficient facility; improve facilities that advance computational and data science; replace temporary and obsolete administrative support facilities with permanent buildings; improve the energy and water efficiency of buildings; and, overall, support the co-evolution of science and buildings. The FY 2022 request would support the projects detailed below.

Renovation of Building 10 E-Wing, Bethesda

The renovation of the E-wing in Building 10 is the conversion of 217,285 gross square feet of former patient care and laboratory areas on Floors 2 through 13 to build out laboratory, laboratory support space, and offices for 664 personnel in the clinical research programs of numerous Institutes and Centers (ICs). This project comprises the final phase of a phased master plan to renovate the E- and F-wings. The implementation plan is to renovate the E-wing in three separate construction phases consisting of four floors, each starting in 2015 with completion in 2022. This will also include specialty lab programs, including the relocation of laboratories that support the Clinical Center's Department of Transfusion Medicine (DTM) Program and the relocation of DTM's patient and donor apheresis. Additionally, a specialty cell processing current Good Manufacturing Practices (cGMP) facility will be constructed to meet all United States Pharmacopeia (USP) qualifications, as well as additional preconstruction work.

Surgery, Radiology, and Laboratory Medicine Building (SRLM)

The Ambulatory Care Research Facility (ACRF), a major component of the Clinical Center Complex (CCC), opened in 1982 and houses the Departments of Perioperative Medicine, Interventional Radiology, Radiology & Imaging Sciences and Laboratory Medicine. These Departments utilize advanced and technology-dependent cutting-edge programs supporting NIH's translational research initiatives to improve the nation's health.

The project will construct an 8-story, 547,290 gross square feet (GSF) addition, as well as repurpose and renovate two floors (82,150 GSF) of the west laboratory wing of the CRC. The new SRLM Building will include the Clinical Center's (CC) Surgical (Department of Perioperative Medicine and Interventional Radiology – DPM/IR), Radiology (Radiology and Imaging Sciences – RADIS) and the Laboratory Medicine (Department of Laboratory Medicine - DLM) departments now located in the ACRF's S and T wings and the National Cancer Institute's research laboratories located on floors 1W and 3W of the CRC West laboratory wing. These departments are involved in some of the most advanced programs supporting NIH's Translational Research initiatives, which is the cornerstone of the ability for the NIH to perform its fundamental mission of clinical research. The addition will also house the National Heart, Lung, and Blood Institute's Catheterization Laboratory.

Recent reports have determined a high degree of risk to patient safety based on deteriorating infrastructure conditions of the 1982-era ACRF. This project will mitigate several major deficiencies such as undersized and unreliable infrastructure systems (normal and emergency power, communication systems, heating, cooling and ventilation) as well as inefficient routes of circulation and limitations restricting the flexibility and adaptability to address growth and change. This project will also address structural problems that have caused unacceptable vibration levels in various areas of the building and functional space inadequacies and inefficiencies.

The total cost of the construction contract for the SRLM project is \$492.0 million. The current target for issuing the solicitation for a Design-Build Contract is May 2021, with the target date for awarding the contract in the first quarter of FY 2022. The \$29.6 million request for the SRLM in FY 2022 will cover construction contingency, construction quality management (CQM) services, and commissioning.

Electrical Power Reliability for the Clinical Center

The Clinical Center Complex (CCC), located on the Bethesda Campus, is composed of three major structures, including the original Building 10, the ACRF, and the CRC, built in 1952, 1980, and 2005 respectively. This project will replace failing and unreliable electrical power systems and consists of three major initiatives to achieve electrical power reliability, including new electrical risers and associated equipment, electrical vault decommissioning, and upgrades to existing vaults.

Eight new normal and 13 new emergency electrical distribution risers of varying ampacity in the A, B, C, D, G, H, and J wings of Building 10 will be installed and allow transfer of all distribution equipment in the original Building 10 for service, replace various panel boards that were determined not suitable to function in the new distribution, and provide new lighting panels and life safety panels on every floor of each distal wings. This project will fully decommission and remove existing equipment in these electrical vaults (V): V1, V2, V4, and V5, including environmental requirements for removal of PCB contaminated transformers. Specifically, vaults and supporting equipment which are original to the building will be removed and replaced with new vaults and new supporting equipment. It will also replace and upgrade electrical vaults V6,

V7, V8, V9, and V10, one vault at a time, while maintaining full functional service to the ACRF facility.

NIAID Support Facility (Bldg J), Rocky Mountain Labs (RML)

Construction of Building J, to house a Microscopy/Acquisition Management and Operations Branch (AMOB)/Intramural Administrative Management Branch (IAMB)/Office of Cyber Infrastructure and Computational Biology (OCICB)/NIH Police Facility, is critical to supporting the clinical research mission of NIH. Construction of Building J will enable these programs to accomplish their NIH missions. Overall, the facilities housing the critical support functions of these programs have remained unchanged for many years, while the scientific structure being supported continues to expand. The current deficient facilities negatively affect the ability to provide the central support functions and consequently negatively affect the scientific mission of NIH at RML.

Currently, the functions performed by Microscopy/AMOB/IAMB/OCICB/NIH Police Facility are housed throughout the RML Campus. The Microscopy work force are in Building 5 and 13B. Both areas are challenged with electromagnetic interference and very compact work areas. This effort would provide area for four large electron microscopes supporting a broader NIH initiative. In recent years the services and functions of AMOB and IAMB have expanded as the workload supporting the broader NIH mission has moved “West” with support of a more affordable and stable workforce. This large influx of staff is housed in various locations across the RML campus. Similarly, growth has also occurred for OCICB and NIH Police. Moreover, the NIH Police department is presently located in Building 30 on the property fence line of the RML campus. Not only is this siting unsafe, but the space is inadequate to support the current functions of the NIH Police. New space is necessary not only to provide a safer siting of the function, but to provide sufficient office space, a training room, armory, secure storage, K-9 facilities, and a locker room/shower area.

NIAID VRC Lab Expansion Bldg 40A North, Bethesda

The NIAID Vaccine Research Center (VRC) is in the forefront of developing vaccines for infectious disease threats, including coronaviruses (SARS-CoV-2, MERS-CoV, SARS-CoV), influenza, HIV-AIDS, and Ebola. The VRC is frequently called upon to address biodefense threats and global pandemic emerging infectious disease (EID) threats.

The current VRC Building 40 research space is not sufficient to support the surge in research aimed at protecting against global health threats. Building use is currently 35 percent to 45 percent over designed capacity. Its space allocation of approximately 130 Net Assignable Square Feet (NASF) per person is well below the NIH intramural utilization metric of 200 NASF per person, stressing personnel workflow and VRC infrastructure, potentially compromising laboratory safety, and constricting the VRC’s ability to recruit and retain mission-critical expertise to create new programs. Additional space is urgently needed to alleviate overcrowding and to help accelerate development, manufacturing, and clinical study of vaccines and biologics against pandemic health threats. Additionally, the added space would allow NIAID to move

costly off-campus research space located in contract facilities back to federally owned facilities on the Bethesda campus.

The B&F appropriations for the VRC will be used together with \$165 million from the Coronavirus Aid, Relief, and Economic Security (CARES) Act to fund the total costs of the VRC expansion.

Electrical Switching Station & Emergency Generators (59/59A)

The primary normal power supply to the NIH Clinical Center Complex (CCC) is located in Building 59 (switching station) and the emergency power supply to the Clinical Research Center (CRC) is located in Building 59A (generators). The 15,000-volt electrical switchgear in Building 59 has reached a stage where additional sections cannot be added to the switchgear due to the physical size limitations and space constraints of the building. Hence, new loads, such as the new SRLM Building, cannot be powered from Building 59. Additionally, the equipment in Building 59 is reaching the end of its normal life cycle.

This project will provide a new switching station and emergency generator station that replaces and improves the functionality of the existing switching station and auxiliary equipment located in Building 59 and the emergency generation equipment located in Building 59A. The project will provide the CCC with new and expanded switchgear and emergency generator equipment that will significantly decrease the chances of failure of the emergency power distribution system.

This upgrade will result in a reliable system that will meet the 10-second emergency electrical power availability requirement of the National Fire Protection Association (NFPA) 101 and the standards of The Joint Commission, an independent, not-for-profit organization that accredits and certifies more than 20,500 health care organizations and programs in the United States.

Repair Parking Garages, Bethesda

The NIH Bethesda Campus hosts 27 Institutes and Centers (ICs), employs more than 10,000 employees, and houses more than 20,000 patients and visitors every day. To meet the parking needs of the NIH community, parking surface lots, parking garages, and metered spaces are offered across the Bethesda campus. As part of this parking system, there are several multi-level parking (MLP) garages; all at full capacity and experiencing high traffic volume, especially during weekday working hours between 8:00 a.m. and 5:00 p.m.

The MLP garages on the Bethesda campus were constructed at different times, so their condition and service life vary. However, all have common issues -- the structures are deteriorating at an alarming rate. Several engineering inspections and condition assessments have been performed in the parking structures, dating back to 2012. Assessment results have identified deficiencies and critical issues that are causing failing conditions that make it difficult to maintain and service the garages. Notably, adding to major deterioration problems, recently discovered pieces of falling delaminated concrete from the underside of garage deck slabs are posing serious safety risks to garage users, including visitors, patients, and NIH staff and contractors. To correct and

mitigate garage deterioration and safety issues, the NIH is proposing a garage repair/restoration program that will provide for a complete remediation of the parking structures (including stair towers) to include concrete and drainage repairs, as well as any other repair necessary to ensure the safety and structure integrity of the parking garage system.

Repairs & Improvements (R&I)

The Repairs & Improvements (R&I) program will address the physical plant, building structures, utility systems, roads, and grounds at all NIH sites. These projects will help sustain efficient and effective performance of NIH's real property assets to meet ongoing and projected research requirements and to offset the deterioration and obsolescence caused by age and use.

Projects for the R&I program are identified using NIH facilities and program staff recommendations, various facilities studies, and ongoing facilities assessments performed on each building on a three-year cycle by a firm experienced in facility assessment methodology. Once NIH identifies potential projects, NIH's B&F Board ranks the projects using a decision model with input from program officials and subject matter experts to ensure NIH focuses on the most critical projects within available resources. The R&I Board, comprised of senior facilities personnel, makes final project selections. Facilities infrastructure improvements are necessary to meet shifting research priorities and to meet NIH and HHS goals for improving the condition of NIH buildings. Such efforts include upgrading building systems, extending utility infrastructure, and implementing other capital repairs to the buildings and infrastructures to extend their useful life.

These projects support the continued repair and upgrade of deteriorated infrastructure, including steam and chilled water distribution systems; structural repairs to older buildings that NIH may continue using effectively; upgrading plumbing systems; repairing elevators; upgrading heating, ventilating, and air conditioning systems; replacing deteriorated fan coil units in multiple facilities; and address evolving research requirements.

Additionally, this program supports a comprehensive series of repairs and improvements to ensure compliance with stringent Association for the Assessment and Accreditation of Laboratory Animal Care standards.

The FY 2022 request for B&F is critical to NIH's long-term effort to provide the necessary funding for stewardship of NIH facilities. The conduct of safe, reproducible science depends heavily on the provision of safe, reliable buildings. The requested increase will enable NIH to provide its scientists with the facilities and infrastructure that they need to preserve and enhance the NIH's position as the world's premier biomedical research organization.

FPAA Number and Project Title	Fiscal Year(s)
N-11-003 Renovation of Building 10 E-Wing, Bethesda	FY 2022
N-15-009 Surgery, Radiology and Lab Medicine Building (SRLM)	FY 2022, FY 2023, FY 2024, FY 2025
N-15-011 Electrical Power Reliability for the CCC	FY 2022, FY 2023, FY 2024
N-16-009 NIAID Support Facility (Bldg J), RML	FY 2022
N-17-005 NIAID VRC Lab Expansion Bldg 40A North, Bethesda	FY 2022, FY 2023
N-18-004 Electrical Switching Station & Emergency Generators 59/59A	FY 2022
N-20-008 Repair Parking Garages, Bethesda	FY 2022, FY 2023, FY 2024

**NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities**

Appropriations History

Fiscal Year	Budget Estimate to Congress	House Allowance	Senate Allowance	Appropriation
2011	\$125,581,000		\$125,420,000	\$50,000,000
Rescission				\$100,000
2012	\$125,581,000	\$125,581,000	\$125,581,000	\$125,581,000
Rescission				\$237,348
2013	\$125,308,000		\$125,308,000	\$125,343,652
Rescission				\$250,687
Sequestration				(\$6,291,389)
2014	\$126,111,000		\$125,308,000	\$128,663,000
Rescission				\$0
2015	\$128,663,000			\$128,863,000
Rescission				\$0
2016	\$128,863,000	\$132,640,000	\$128,863,000	\$128,863,000
Rescission				\$0
2017	\$128,863,000			\$128,863,000
Rescission				\$0
2018	\$98,615,000	\$128,863,000	\$128,863,000	\$128,863,000
Rescission				\$0
2019	\$200,000,000	\$200,000,000	\$200,000,000	\$200,000,000
Rescission				\$0
2020	\$200,000,000	\$200,000,000	\$300,000,000	\$200,000,000
Rescission				\$0
2021	\$200,000,000	\$200,000,000	\$200,000,000	\$200,000,000
Rescission				\$0
2022	\$250,000,000			

NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities

Authorizing Legislation

	PHS Act/ Other Citation	U.S. Code Citation	2020 Amount Authorized		FY 2021 Enacted	2021 Amount Authorized		FY 2022 President's Budget
Research and Investigation	Section 301	42§241	Indefinite	}	\$200,000,000	Indefinite	}	\$250,000,000
Buildings & Facilities	Section 401(a)	42§281	Indefinite			Indefinite		
Total Budget Authority					\$200,000,000			\$250,000,000

**NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities**

**Amounts Available for Obligation
(Dollars in Thousands)**

Description	FY 2020 Final	FY 2021 Enacted	FY 2022 President's Budget
Appropriation	\$200,000	\$200,000	\$250,000
Secretary's Transfer	\$0	\$0	\$0
Recovery for prior year obligations	\$1,313	\$0	\$0
Unobligated balance, start of year	\$17,661	\$110,254	\$0
Subtotal, adjusted budget authority	\$218,974	\$310,254	\$250,000
Unobligated balance, end of year	-\$110,254	\$0	\$0
Unobligated balance lapsing	-\$12	\$0	\$0
Total obligations	\$108,708	\$310,254	\$250,000

**NATIONAL INSTITUTES OF HEALTH
Buildings & Facilities**

Budget Authority by Object Class
(Dollars in Thousands)

OBJECT CLASSES	FY 2021 Enacted	FY 2022 President's Budget	FY 2022 +/- FY 2021
Personnel Compensation			
11.1 Full-Time Permanent	0	0	0
11.3 Other Than Full-Time Permanent	0	0	0
11.5 Other Personnel Compensation	0	0	0
11.7 Military Personnel	0	0	0
11.8 Special Personnel Services Payments	0	0	0
11.9 Subtotal Personnel Compensation	\$0	\$0	\$0
12.1 Civilian Personnel Benefits	0	0	0
12.2 Military Personnel Benefits	0	0	0
13.0 Benefits to Former Personnel	0	0	0
Subtotal Pay Costs	\$0	\$0	\$0
21.0 Travel & Transportation of Persons	0	0	0
22.0 Transportation of Things	0	0	0
23.1 Rental Payments to GSA	0	0	0
23.2 Rental Payments to Others	1	1	0
23.3 Communications, Utilities & Misc. Charges	0	0	0
24.0 Printing & Reproduction	0	0	0
25.1 Consulting Services	984	1,002	18
25.2 Other Services	13,820	14,068	249
25.3 Purchase of goods and services from government accounts	665	677	12
25.4 Operation & Maintenance of Facilities	23,388	23,388	0
25.5 R&D Contracts	0	0	0
25.6 Medical Care	0	0	0
25.7 Operation & Maintenance of Equipment	108	110	2
25.8 Subsistence & Support of Persons	0	0	0
25.0 Subtotal Other Contractual Services	\$38,965	\$39,245	\$280
26.0 Supplies & Materials	0	0	0
31.0 Equipment	20,000	58,781	38,781
32.0 Land and Structures	141,035	151,973	10,938
33.0 Investments & Loans	0	0	0
41.0 Grants, Subsidies & Contributions	0	0	0
42.0 Insurance Claims & Indemnities	0	0	0
43.0 Interest & Dividends	0	0	0
44.0 Refunds	0	0	0
Subtotal Non-Pay Costs	\$161,035	\$210,754	\$49,720
Total Budget Authority by Object Class	\$200,000	\$250,000	\$50,000