

August 19, 2026

Jay Bhattacharya, M.D., Ph.D.
Director, National Institutes of Health
9000 Rockville Pike
Bethesda, Maryland 20892

Re: Request for Information on Measuring and Rewarding Scientific Impact
[\[NOT-OD-26-087\]](#)

Dear Director Bhattacharya,

Thank you for the opportunity to respond to the National Institutes of Health's [Request for Information on Measuring and Rewarding Scientific Impact](#).

The [Bayh-Dole Coalition](#) is a group of innovation-oriented organizations and individuals committed to celebrating and protecting the Bayh-Dole Act, a 1980 law that allows universities, small businesses, and federal laboratories to partner with the private sector to translate federally funded research into real-world products.

We applaud NIH for undertaking the important effort of accurately measuring the impact of federally funded research. Key academic metrics like publications and citations are important measures of scientific productivity and dissemination. But such metrics only tell part of the story—a promising finding may be published and widely cited without ever becoming a therapy, diagnostic tool, or product.

To understand a discovery's true impact, the NIH must consider whether a discovery ultimately reaches patients and consumers. We therefore urge the NIH to recognize commercialization and technology transfer metrics as key indicators of success.

Lawmakers have previously recognized the importance of technology transfer and commercialization. Before 1980, when the government retained the patent rights to federally funded discoveries, research institutions regularly made important breakthroughs—but

those discoveries rarely reached consumers. The government licensed less than [5% of its 28,000](#) patents to private companies. Promising discoveries were left on laboratory shelves.

In response, Congress passed the Bayh-Dole Act, which empowered research institutions to patent and license those federally funded discoveries. That framework for technology transfer and commercialization has since allowed [thousands](#) of federally funded discoveries to move from universities and federal labs into the private sector for development—and eventually, to reach patients and consumers.

The NIH ought to reward and preserve this framework. It should therefore recognize metrics that capture patenting efforts and industry collaboration, including issued patents and patent quality, licensing activity, startup and spinout formation, follow-on private investment, and industry partnerships.

It should also measure the longer term impacts of discoveries. Many of the most important biomedical breakthroughs take years—or [decades](#)—to reach patients even after licensing. The NIH should incorporate measures that capture downstream outcomes, such as clinical development milestones, FDA approvals, and adoption by patients, physicians, or healthcare systems. The NIH should also include longer-term economic indicators like job creation and regional growth.

Including such metrics will help ensure that researchers do not feel that patenting, licensing, entrepreneurship, and industry collaboration is viewed as less valuable than publishing another paper.

To that end, the NIH should also pay close attention to the growing use of Other Transaction Agreements (OTAs). While OTAs are an important part of the R&D system, designed to bring innovative companies into government projects without invoking the onerous requirements of the Federal Acquisition Regulations, it appears that some agencies are misusing them as a workaround the Bayh-Dole Act—denying academic institutions the rights guaranteed them by Congress which are critical for commercializing critical government funded medical research. That is particularly wrong headed at a time when China is going all out to eclipse [our lead](#) in the life sciences—a lead we enjoy because

Bayh-Dole helps transform NIH funded research into useful products protecting and improving lives here and around the world.

The Bayh-Dole Act transformed federally funded research by creating a pathway for universities, small businesses, and federal labs to turn early-stage discoveries into real products. The NIH's evaluation framework should similarly recognize that the ultimate measure of scientific impact is not only what researchers publish, but what reaches patients and grows the economy.

Thank you again for taking on this important effort, and for the opportunity to comment.

Sincerely,



Joseph P. Allen
Executive Director
Bayh-Dole Coalition