DEPARTMENT OF HEALTH AND HUMAN SERVICES NATIONAL INSTITUTES OF HEALTH NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

MEETING SUMMARY OF THE NATIONAL ADVISORY ENVIRONMENTAL HEALTH SCIENCES COUNCIL

September 10, 2025

The 176th meeting of the National Advisory Environmental Health Sciences Council convened on September 10, 2025. Open session convened at 9:00 a.m. and ended at 2:50 p.m. on September 10, 2025. A closed session took place from 3:00 p.m. to 3:34 p.m. on September 10, 2025. Dr. Richard Woychik, Director, NIEHS, presided as chair. The meeting was virtual only and all participants attended via MS Teams. The meeting was also webcasted to the public.

Participating Council Members

Jayanta Bhattacharya, MD – Ex Officio Yulia Carroll, PhD – Ex Officio Stephania Cormier, PhD Olivier Deschenes, PhD Suzanne Fitzpatrick, PhD – Ex Officio Maureen Gwinn, PhD – Ex Officio Darryl Hood, PhD Keri Hornbuckle, PhD Gokhan Mutlu, MD

NIEHS Staff

Trevor Archer, PhD Irina Alva-Weinstein Camilo Asuncion Jennifer Baker David Balshaw, PhD Valerie Bartlett Krisalaun Battle Sharon Beard, MS April Bennett Abee Boyles, PhD Lt. Jonathan Burg, PhD Michelle Campbell, PhD Danielle Carlin, PhD Toccara Chamberlain, MA Jennifer Collins Yuxia Cui, PhD J'Zhane Dobson Christopher Duncan, PhD

Anika Dzierlenga, PhD

Sherry Eason

Edith Eaton

Nicole Garbarini, PhD

Amanda Garton, MSPP

Kimberly Gray, PhD

Jenny Greer

Michelle Heacock, PhD

Heather Henry, PhD

Jonathan Hollander, PhD

Michael Humble, PhD

Bonnie Joubert, PhD

Cindy Lawler, PhD

Victoria Ledbetter

John Maruca

Jacqueline Marzec, MS

J'Ingrid Mathis

Katherine McGinnis

Aubrey Miller, PhD

Latavia Miller

Nathan Mitchiner

Liam O'Fallon, MA

Sharmice Outen

Amelia Pearson, MHR

Eric Persaud, PhD

Clark Phillips

Ashlinn Quinn, PhD

Lingamanaidu Ravichandran, PhD

Francoise Santos

Christopher Schnur

Thaddeus Schug, PhD

Carol Shreffler, PhD

Varsha Shukla, PhD

Claudia Thompson, PhD

Brittany Trottier, PhD

Frederick Tyson, PhD

Ashley Vargas, PhD

Richard Woychik, PhD

Darryl Zeldin, MD

Alicia Zorn

OPEN SESSION

The meeting was open to the public on September 10, 2025, from 9:00 a.m. to 2:50 p.m. In accordance with the provisions set forth in Section 552b(c)(4) and 552b(c)(6), Title 5, U.S. Code and Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), the meeting was closed to the public on September

10, 2025, from 3:00 p.m. to 3:34 p.m. for consideration of grant applications. Notice of the meeting was published in the Federal Register. Dr. Richard Woychik presided as Chair.

I. Call To Order and Opening Remarks

NIEHS and NTP Director, Dr. Richard Woychik, welcomed attendees and called the meeting to order. He read the Government in the Sunshine Act guidance. DERT Director, Dr. David Balshaw, asked Council members present at the meeting to introduce themselves. Council members Dr. Tim Greenamyre, Dr. Patricia Nez-Henderson, Dr. Cathrine Hoyo, and Dr. Maria Savasta-Kennedy were unable to attend. Members of the NIEHS senior leadership team introduced themselves. Dr. Balshaw then reviewed the logistics for the meeting and reminded attendees of virtual meeting etiquette.

II. Review of Confidentiality and Conflict of Interest

Dr. David Balshaw read the conflict-of-interest statement. "This certifies that in the review of applications or projects conducted by the National Advisory Environmental Health Sciences Council on today's date, I absented myself and I did not participate in the discussion of, nor vote on, any applications or projects in which I or, to my knowledge, my spouse, minor child, or close professional associates have a financial interest nor on any applications or projects from an organization or institution where I am an employee, consultant, officer, director, or trustee, am negotiating for employment, or otherwise have a financial interest. In Council actions in which we voted on a block of applications or projects without discussing any individual one—the 'en bloc' actions—my vote did not apply to any applications from any institution fulfilling the criteria in the preceding paragraph." Members should sign the certification and email them to Valerie Bartlett today. Dr. David Balshaw also went over the use of MS TEAMS breakout rooms for members and attendees in conflict during closed session.

III. Consideration of Previous Meeting Minutes

Approval of the June 2025 meeting minutes was first moved to a vote by Dr. Keri Hornbuckle and seconded by Dr. Darryl Hood. Council voted to approve the minutes, with all in favor. Dr. David Balshaw mentioned the future Council meeting dates. The next Council meeting will be February 2026, and held virtually using MS TEAMS.

IV. Report of the NIEHS Director

Dr. Richard Woychik briefed Council on NIH and NIEHS developments that have occurred since the June 2025 Council meeting. Focusing on two main topics of interest; budget updates and congressional activities involving NIEHS' staff.

Dr. Richard Woychik presented a slide showing the NIEHS FY 2023-2026 Funding Summary. He showed that the FY2025 NIEHS budget remains at just over a billion dollars. This total is a result of combining both the NIEHS' Department of Health and Human Services (HHS) allocation and the NIEHS' Department of Interior (DOI) allocations for the Superfund and Worker Training Programs. The FY2026 President's budget contained around a 40 percent reduction in both NIEHS' HHS allocation and DOI allocations. The Senate Appropriations Committee kept the FY2026 NIEHS budget flat from the FY2025 budget. Just this past week, the House Appropriations Committee also kept the NIEHS budget relatively flat, with only reducing the DOI allocations from \$79.7 to \$51.8 million.

Dr. Woychik stated that there is also language in the President's budget to move NIEHS out of the NIH and into a new proposed agency called the Administration for a Healthy America (AHA) under HHS. In this language, NIEHS would be part the of the Environment Health account with NIOSH and other parts of CDC. AHA would additionally subsume the work of Office of Assistant Secretary of Health (OASH), Health Resources and Services Administration (HRSA), Substance Abuse and Mental Health Services Administration (SAMHSA), and several centers and programs formerly in the Center of Disease Control and Prevention (CDC). NIEHS' senior leadership team and staff are actively engaged to coordinate any and all roles that NIEHS could have in the AHA. NIEHS would be the only basic science organization that would become part of the new AHA, and Dr. Woychik acknowledges that there are several challenges that will need to be worked through if NIEHS were to move. In the President's budget there is also proposed reorganization of the other NIH Institutes and Centers. NIH currently has twenty-seven Institutes and Centers. Dr. Woychik reminded everyone that this is a proposal from the White House and is not final until Congress passes the budget, and that there may be additional changes made.

Dr. Richard Woychik talked about the NIEHS' recent congressional activities, including the weekly congressional staff "Lunch and Learns" hosted by NIH Office of Communications and Public Liaison, NIEHS employees have been very active in these "Lunch and Learns". Recently Dr. Richard Woychik educated congressional staff during a "Lunch and Learn" presentation on what NIEHS does overall, Dr. Darryl Zeldin and Dr. Mike Fessler presented on asthma, Dr. David Balshaw presented on microplastics, and Dr. Aubrey Miller, Dr. Ashlinn Quinn, and Dr. Steven Tuyishime presented on heat stress.

Dr. Woychik has been speaking publicly about collaborations with the NIH All of Us program, where he has discussed the importance of understanding that it is not only the genes you inherit from your parents but also the environment exposure can affect chronic disease in a person.

Dr. Richard Woychik has been meeting with several staff from HHS leadership. Meetings included direct meetings with Secretary Kennedy on the role of the environment in health and chronic disease, Dr. William 'Reyn' Archer, Chief Advisor to the Secretary on Health, on PFAS, Micro and Nanoplastics, EMRs, Dr. Dorothy Fink, Acting ASH on the National Toxicology Program, and Dr. Jay Bhattacharya and Dr. Matt Memoli in the bi-weekly IC Director's meeting.

Dr. Woychik reviewed Dr. Bhattacharya's vision for NIH, called Building Blocks to Improving Health. These building blocks are to improve population health, ensure reliable results, make big advances, maintain safety and transparency, and encourage academic freedom.

Dr. Woychik talked about New Approach Methodologies (NAMs). This is a major focus for both the NIH Director and Congress. NAMs offer unique advantages that can enhance research capabilities. NAMs allows research to focus on human specific data, streamline the research process, and reduces the reliance on animal testing. NIH intends to develop, validate, and scale the use of NAMs. All new Notices of Funding Opportunity (NOFOs) that relate to animal models must now also support human focused approaches such as clinical trials, real world data, or NAMs.

Dr. Woychik recognized NIEHS and NTP staff that have received awards. These recognitions include Dr. Mike Fessler who was elected to the Association of American Physicians (AAP). Dr. Carmen Williams was awarded the Society for the Study of Reproduction Research Award. Dr. Benedict Anchang was awarded the Presidential Early Career Award for Scientists and Engineers (PECASE).

V. Report of the DERT Director

Dr. David Balshaw began his presentation to Council about DERT developments since the June 2025 Council meeting, including a staffing update. Dr. Balshaw announced that Dr. Daniel Shaughnessy who was a Program Officer in the Exposure, Response, and Technology Branch has retired. During Dr. Shaughnessy time in DERT he managed several of the high visibility programs including DNA repair and carcinogenesis, Biomarker discovery and validation, NAMs, and small business innovation. We wish him the best in retirement. DERT has had the opportunity to onboard a new staff member, Lieutenant Jonathan Burg PhD. He is an Officer in the Public Health Service Ready Reserve Corps where he has served as a Safety Officer and as an Executive Officer for the Maui Wildfires Medical Mission.

Dr. Balshaw reviewed grant policy updates, including current foreign subaward guidance. The best way to stay informed with NIH Policies is to go to grants.NIH.gov, then under Notices of NIH Policy Changes, click on NIH Guide for Grants and Contracts.

Dr. David Balshaw highlighted the use of AI in grant applications. NIH will not consider applications that are either substantially developed by AI or contain sections substantially developed by AI. All applications must be original ideas of the applicants. Dr. Balshaw also informed Council about the new application cap. NIH will only accept six new, renewal, resubmission, or revision applications from an individual principal investigator, program director, or multiple principal investigators for all council rounds in a calendar year. This does not include T, R13, or R25. The application cap is effective September 25, 2025, receipt date and for the January 2026 Council round.

Dr. Balshaw notified the Council that the NIH Guide for grants and contracts will no longer post Notices of Funding Opportunity (NOFOs). All NOFOs will be posted and searchable on grants.gov. Additionally, Dr. Balshaw announced that NIH efforts for reduction in the number of NOFOs has prompted the creation of a new system which is called Highlighted Topics. Highlighted Topics will be made publicly available and will inform the research community about NIH areas of scientific interest.

Dr. Balshaw shared DERT-specific activities and highlights of upcoming events from now until the end of the year. The Centers on Children's Environmental Health Research and Translation Grantee Meeting will be held on September 16-18, 2025, in Washington, D.C. The Worker Training Program Disaster Meeting on building local capacity and bridging training and gaps in disaster preparedness and response for workers and communities will be held in Virgina Beach, VA, on September 17-18, 2025. NHLBI, NIEHS, and NIAID are hosting a virtual workshop on the topic Lung as the Gateway for Environmental Exposures, on October 14-15, 2025. The NIEHS Environmental Health Sciences Core Centers Annual Meeting will be held on October 27-30, 2025, in Lexington, Kentucky. The Pediatric and Reproductive Environmental Health Scholars and Pediatric Environmental Health Specialty Units Grantee Meeting will be held in Decatur, GA, on November 12-14, 2025. The Cohorts for Environmental Exposures and Cancer Risk Grantee Meeting hosted by the University of Michigan will be held on December 4-5, 2025. NIEHS staff are hoping to see you at these upcoming events.

VI. Break

VII. NIEHS Scientific Concept 1: Pediatric and Reproductive Environmental Health Scholars

Dr. David Balshaw introduced Mr. Liam O'Fallon from DERT Population Health Branch and introduced Dr. Stephania Cormier and Dr. Gokhan Mutlu as the assigned Council Reviewers on the concept.

Mr. Liam O'Fallon briefed Council on the scientific concept, Pediatric and Reproductive Environmental Health Scholars (PREHS) Program, that was originally launched in 2021 and now requires new council concept approval to move forward.

Mr. O'Fallon introduced the program team including himself, Dr. Mike Humble, and Jenny Collins, the grants management team which includes LaTavia Miller and Grants Management Branch Chief Jenny Greer, and colleagues Drs. Linda Hansen and Kimberly Spencer with the Agency for Toxic Substances and Disease Registry within the CDC, and Dr. Manthan Shah with the Office of Children's Health Protection within the EPA.

The presentation included how the program started and rationale behind the program. DERT staff saw an opportunity to build upon a past training model that enabled pediatricians to work with Pediatric Environmental Health Specialty Units (PEHSUs) on outreach and communication efforts and to learn about ongoing research on pediatric environmental health. They also saw the benefit to strengthen the program with coordination with other federal agencies including Office of Capacity Development and Applied Prevention Science within the CDC and Office of Child Health Protection within the EPA. The partnership with PEHSUs provided the education for health professionals, outreach and education for communities, consultations on environmental exposures, and referrals for evaluation and necessary services.

The PREHS program was designed to meet identified gaps and opportunities by providing scholars with personally tailored, state-of-the-art environmental health training that blends academic research and practice-based applications in real world settings. Scholars also receive supervised research career development opportunities to assist them as they progress in their careers. The program has expanded the pathway for healthcare professionals who are researchers, resources, and leaders in pediatric and reproductive environmental health.

Mr. O'Fallon highlighted the 19 scholars and some of their accomplishments over the first 4 years of this program. These included six from Mount Sinai School of Medicine, Drs. Nicole Ramsey, Dania Valvi, Dinesh Barupal, Aderonke Akinkugbe, Sarah McCuskee, and Chelsea DeBolt, eight from Emory University, Drs. Carmen Dickinson-Copeland, Liliana Aguayo, Nasim Katebi, Belise Livingston-Burns, Ashley Ruiz, Abby Mutic, Zahra Barandouzi, and Mattie Wolf, and five from University of Washington, Drs. Mary Croker, Jonika Hash, Lizzie Reznikov, Ayana De Gaia, and Tristan Nicholson. O'Fallon emphasized the unique clinical backgrounds the scholars bring to the program and how they have been instrumental in developing educational materials for healthcare professionals on topics from wildfire smoke and respiratory health to sweeteners and oral health, contributing to the scientific literature, and building the capacity of new

healthcare professionals. For example, one scholar has already begun integrating environmental health content into her training course for nurses.

Fostering scholar interaction through scholar networks is important to this program for a few reasons. It is an opportunity for scholars to learn from one another, it enables them to learn from current leaders in the field, and it promotes an identity as a "PREH Scholar". In November the scholars will be coming together for the annual PEHSU National Meeting, in Decatur, GA. They will be participating in a panel to share their experiences and accomplishments.

O'Fallon emphasized the many accomplishments achieved in under four years since the program was established in 2021, and that NIEHS staff are requesting council concept approval for the continuation of the program with the same vision, purpose, and format with minor updates. Leveraging the scholars' healthcare knowledge and skills, building new capacities in research, translation, and communication, increasing their environmental health literacy, and in the end, contributing to a larger, stronger network of PREHS leaders.

O'Fallon turned the presentation over to assigned Council reviewers, Dr. Stephania Cormier and Dr. Gokhan Mutlu, for comment:

Dr. Stephania Cormier first commended O'Fallon and NIEHS for a very visionary program. She states there is a need for this program especially in rural areas, where a lot of the doctors are not trained in environmental health. Dr. Cormier thinks this is critical and especially for children, maternal, and reproductive environmental health, because it has long lasting economic effects of the community providing that healthcare. Dr. Cormier is strongly in favor of continuing the PREHS program. Noting that it is a critical gap in training for clinical professionals, it is focused on exposures, and the outcomes are very timely and relevant to the United States and to all communities in general.

Dr. Gokhan Mutlu commented that the PREHS program is very innovative, but more the more important part of the program is the research to better understand the impact of prenatal and early life exposure. With the program training future scholars, who study the impact of the environments of the maternal, fetal, and child health, this will also contribute to the knowledge on keeping adults healthy as well. The strength in this program is the collaborations of different institutes and universities. Dr. Mutlu stated overall the program is great, and that he is in favor of continuing the PREHS program.

Question and Answer portion of the presentation:

 Question: Dr. Olivier Deschenes asked about tracking the impact of the training, particularly by collecting patient data from those that are cared for by previous PREHS fellows vs. other clinicians without PREHS training. Getting results distinguishing the differences of infant's health for those with trained healthcare professionals compared to those who did not have trained healthcare professionals.

 Answer: O'Fallon stated in terms of evaluation elements, that is something they are planning to do in the future. The program has only been in existence four years, and has not been established long enough to process that range of data.

Dr. David Balshaw called for a motion to approve the concept. Dr. Stephania Cormier first moved the concept to a vote, and Dr. Gokhan Mutlu seconded the motion. The Council members voted to approve the motion, with all in favor.

VIII. Lunch

IX. NIEHS Scientific Concept 2: Community-Engaged Research for Environmental Health

Dr. David Balshaw reintroduced Mr. Liam O'Fallon from the DERT Population Health Branch and introduced Dr. Darryl Hood and Dr. Keri Hornbuckle as the assigned Council Reviewers on the concept.

O'Fallon briefed Council on the scientific concept, Community-Engaged Research for Environmental Health, which builds upon a prior program "Research to Action (R2A)". The R2A program originally started in 2009 and requires new council concept approval to continue.

O'Fallon acknowledged the program staff for their scientific insights, the grants management staff who helped to navigate awards management, the scientific review staff who have organized exceptional peer reviews, and the many community and academic partners who have worked tirelessly together to meet the environmental public health needs in the community.

NIEHS established the Research to Action (R2A) funding opportunity in 2009 to advance its scientific support of community-engaged research aimed at preventing or reducing exposure to harmful environmental contaminants and improve the health of a community. R2A required multi-disciplinary, collaborative research approaches to investigate the potential health risks of environmental exposures of concern to the community, to stimulate research translation and dissemination to community members, public health professionals, and decision makers, and to ultimately inform an action that will reduce exposures and improve the overall health of the community.

There were three required elements in the previous R2A Program. The first required element was authentic community engagement. Communities had to have a role in

identifying the environmental health risks that are of greatest importance to the community, community partners received financial support to conduct the research project in partnership with investigators, and investigators collaborated with their community partners in developing effective strategies to mitigate exposures to improve health outcomes. The second required element was research. The objective of this element was to support research that would increase knowledge of how environmental exposures impact health and disease in communities. The third required element of the previous R2A program was public health action. This included campaigns, programs, and interventions intended to elicit a change in behavior or practice that would help reduce or eliminate exposures, prevent disease and disability, and promote the health of a population. Public health action could be targeted at the individual, neighborhood, or community level, or developed as models that have national public health application.

O'Fallon highlighted six projects that were or are currently supported by the R2A program to show the different questions, research approaches, and public health actions achievable by a community-engaged research program.

- Collaborative Research and Action: Empowering an Exposed Community
- Solutions for a Changing World
- A University-community Partnership to Reduce Exposure to Disinfection Byproducts in Appalachia
- Wildland-Urban Interface Fire Exposures, Effects, and Interventions: A Collaborative Research-to-Action Partnership with Firefighters
- Gigiigooinaan (Our Fish): A New Advisory to Promote Anishinaabe Health and Wellness
- PFAS-REACH (Research, Education, and Action for Community Health)

The Collaborative Research and Action: Empowering an Exposed Community project built on the Michigan Polybrominated Biphenyl (PBB) Registry, an initiative established in 1976 to study the health of thousands of people exposed to brominated flame retardants. Community members wanted to know if it was possible to remove PBBs from people that have been exposed, they had concerns about heritable effects from PBB on their children and grandchildren, and continuing health concerns beyond those related to reproduction. This R2A study, collaboratively developed by scientists, community partners, and public health officials, addressed these major concerns.

Solutions for a Changing World focused on reducing hazardous occupational exposures and associated health outcomes including respiratory, cardiovascular, neurological, and cancer among small businesses that employ Latino workers. The project team found that air filter interventions reduced VOC exposures for beauty salon workers.

A University-community Partnership to Reduce Exposure to Disinfection By-products in Appalachia is working to improve population health through systemic prevention. The team is collaborating with local water managers and community members to develop models and tools that can be used to respond to conditions that may contribute to higher DBPs in drinking water.

The Wildland-Urban Interface Fire Exposures, Effects, and Interventions: A Collaborative Research-to-Action Partnership with Firefightersis studying exposures, toxic effects, and exposure reduction interventions at wildland-urban interface (WUI) fires. The team is using silicone wristbands and targeted urinary analyses (hydroxylated PAHs) to help them identify high exposure settings and activities that can guide exposure reduction interventions. This project was timely in terms of responding to the recent conflagration in Los Angeles.

The Gigiigooinaan (Our Fish): A New Advisory to Promote Anishinaabe Health and Wellness project is improving fish consumption advice for Native American communities living in and around the Great Lakes. Ongoing concern about the presence of persistent bioaccumulative toxics (PBTs) in the Great Lakes has led to numerous fish consumption advisories. Fish are an important part of the Anishinaabe diet and culture. Therefore, the team has been working to communicate the health benefits of fish, enable cultural practices, but not increase the risks of PBT exposure. As part of this R2A project, the team updated and tested the effectiveness of an interactive, culturally tailored mobile application called Gigiigooinaan. The mobile app delivers personalized consumption advice on species of fish commonly consumed by the tribal communities and addresses key concerns related to environmental health and education for the Anishinaabe.

The PFAS-REACH (Research, Education, and Action for Community Health) project established the PFAS Exchange, which is an online resource center for PFAS impacted communities. With a large number of US communities discovering PFASs in their drinking water, communities are now seeking guidance for interpreting blood and water test results, information on health effects, water treatment, remediation, and other strategies to engage local officials. The website puts together knowledge and innovative resources to address the multitude of questions and challenges that impacted communities face, covering everything from health effects and exposure reduction to mapping contamination sites, accessing and interpreting blood tests, and educating clinicians to improve patient care. The website is centered on the needs of community members in communities across the US. The success of these projects is due to the time, listening, respect, and authenticity that academics and researchers brought with them as they engaged with their community partners.

O'Fallon, on behalf of NIEHS, stated he is requesting council concept approval for the Community-Engaged Research for Environmental Health program that will possess the

same vision, purpose, and format of the Research to Action Program with minor updates. O'Fallon expects that the key elements and requirements will remain the same, but he notes the program name change to emphasize the research approach. O'Fallon noted that there is growing support for community engaged research approaches across the NIH, in the context of potential research topics, which is why he is recommending the new program title "Community-Engaged Research for Environmental Health".

Mr. Liam O'Fallon turned the presentation over to assigned Council reviewers, Dr. Darryl Hood and Dr. Keri Hornbuckle, for comment:

Dr. Darryl Hood commented that he is highly supported of the R2A program. They use this program in Columbus, Ohio and the authenticity is a prerequisite for public engagement. This helps give communities the data and resources they need to actually impact policy at the local level. That is a major perk with this program.

Dr. Keri Hornbuckle commented one of the items that is great with the R2A program is the timeliness of response in funding. That can be a real challenge with other programs that are eager to help communities. With the R2A program the quick response makes a real difference in the health of a community when crisis occurs. Dr. Hornbuckle is supported of this concept.

Question and Answer portion of the presentation:

There were no questions asked concerning this concept.

Dr. David Balshaw called for a motion to approve the concept. Dr. Keri Hornbuckle first moved the concept to a vote, and Dr. Darryl Hood seconded the motion. The Council members voted to approve the motion, with all in favor.

X. Break

XI. NIH Director's Keynote Presentation

Dr. Richard Woychik introduced NIH Director, Dr. Jayanta Bhattacharya, who became the 18th Director of the National Institute of Health on April 1, 2025. Dr. Bhattacharya earned his M.D. and Ph.D. from Stanford University where he also was a tenured professor in the medical school. While at Stanford, Dr. Bhattacharya held a senior fellow appointment at Standford's policy institutes and brought deep experience at the intersection of clinical care, health economics, and public policy. He has led multidisciplinary teams, published widely, and has advised health systems and government partners. His experience shows in his commitment to gold standard methods, open data, and results that make a real difference in people's lives. Dr. Bhattacharya is leading the NIH toward a unified strategy that aligns priorities and

funding, so NIH can support the most meritorious science, tackle urgent health needs, and sustain a strong research workforce. Dr. Woychik thanked Dr. Bhattacharya for taking time out of his busy schedule to present the mission of NIH to Council.

Dr. Jayanta Bhattacharya thanked Dr. Richard Woychik for the kind words before beginning his presentation to Council. Dr. Bhattacharya began with by sharing how important NIEHS is to the mission of NIH and to the Make America Heathy Again priorities.

Dr. Bhattacharya highlighted his vision of NIH and NIEHS. Starting with the importance of environmental health sciences, the effects of environmental exposures on biological systems across a person's lifespan, and how early intervention empowers disease prevention strategies. He noted three specific topics of interest. First is exposomics which is to measure, analyze, and identify exposures over the lifespan. Second is precision environmental health which is tailored prevention and intervention strategies. The third is mechanistic biology and toxicology. Dr. Bhattacharya's vision for NIH is improve population health, ensure reliable results and have reproducible science, make large advances in science, to maintain research safety and transparency, and to encourage academic freedom for the scientists. He also stated four priorities for the NIH, which were Novel Alternative Methods (NAMs), gold standard science plan, support for early career investigators, and a unified strategy to fund research projects.

Dr. Bhattacharya started with the first NIH priority, NAMs. By prioritizing NAMs, NIH aims to make sure that the biological sciences that NIH supports translates over to human health. NIH will no longer publish NOFOs that rely solely on animal testing and will ensure research models are aligned with human biology.

The second NIH priority is gold standard science plan. Gold standard science is reproducible, transparent, communicative of error and uncertainty, collaborative and interdisciplinary, skeptical of its findings and assumptions, structured for falsifiability of hypotheses, subject to unbiased peer review, accepting of negative results as positive outcomes, and without conflicts of interest. The NIH's new gold standard science implementation plan is defined by scientific integrity and builds upon the NIH's longstanding commitment to rigorous, credible research, aligning with broader HHS and government frameworks for scientific excellence.

The third NIH priority is support for early career investigators. Studies show that the majority of new scientific ideas are only pursued by scientists in the first ten years of an investigator's career, but that most NIH funding comes later at the middle/end of careers. NIH is making it a priority to support early career investigators to publish their research, to help bring new ideas and science to NIH.

The last and fourth NIH priority Dr. Bhattacharya presented was a unified strategy to fund research projects. Previously, many NIH's institutes and centers (ICs) used a fixed percentile or "payline" to make funding decisions. Under the NIH's updated and unified strategy, paylines will not be the primary driver for funding decisions. The NIH's institutes and centers new funding criteria will still consider peer-review scores and comments in conjunction with three other critical factors. These factors include whether the proposal aligns with the NIH's institute or center's mission and strategic plans, how the proposals contribute within the IC's overall research portfolio, and the investigator's career stage and sustainability of the biomedical research workforce.

Dr. Jayanta Bhattacharya thanked Dr. Richard Woychik and Council for inviting him to share the research of the NIEHS is tremendously important part of NIH.

Question and Answer portion of the presentation:

- Question: Dr. Keri Hornbuckle asked about adding a code to analyze the data generated and published so that the work that's described can indeed be completely reproduced.
 - Answer: Dr. Jayanta Bhattacharya shared that NIH is diligently working to get that vision a reality.
- Question: Dr. Darryl Hood asked about the challenge that the Ohio State has is in terms of convergence science. Having younger scientist working with the senior scientist.
 - Answer: Dr. Jayanta Bhattacharya shared that NIH has to keep supporting teams of scientist that represent a broad range of perspectives that are relevant to the ideas you are trying to advance.

Dr. Richard Woychik thanks Dr. Bhattacharya again for taking the time out of his demanding schedule to present to Council the NIH and NIEHS visions.

XII. Adjournment of Open Session

Dr. Richard Woychik thanked the Council members for their work on the meeting, and all attendees for their participation. Dr. David Balshaw added his thanks to the Council members for its engagement and important advice. Dr. Richard Woychik adjourned the open session of the meeting at 2:50 p.m., September 10, 2025.

CLOSED SESSION

This portion of the meeting was closed to the public in accordance with the determination that it concerned matters exempt from mandatory disclosures under Sections 552b(c)(4) and 552b(c)(6), Title 5, U.S. Code and Section 10(d) of the Federal Advisory Committee Act, as amended. Additionally, Section 492(b)(2) of the PHS Act. The closed session adjourned at 3:34 p.m., September 10, 2025.

I. ACCEPTANCE OF NIEHS INTRAMURAL RESEARCH BOARD OF SCIENTIFIC COUNSELORS REPORT

This portion of the closed session is concerning the NIEHS Intramural research only. The most recent NIEHS Intramural Divisions' Board of Scientific Counselors (BSC) reports was provided to the Council members and concurrence was achieved for acceptance of the report.

II. REVIEW OF APPLICATIONS

This portion of the closed session is concerning the Extramural Division only. Members absented themselves from the meeting during the discussion of, and voting on, applications from their own institutions or other applications in which there was a potential conflict of interest, real or apparent. Members were asked to sign a statement to this effect. The Council considered and recommended 222 primary applications requesting \$154,833,307 in total costs. For the record, it is noted that secondary applications were also considered en bloc.

CERTIFICATION:

Richard P. Woychik -S

Digitally signed by Richard P. Woychik -S Date: 2025.10.24 09:46:15 -04'00'

Richard Woychik, PhD Chairperson National Advisory Environmental Health Sciences Council

Attachment: Council Roster DAVID M. BALSHAW -S Digitally signed by DAVID M. BALSHAW -S Date: 2025.10.24 08:32:41 -04'00'

David Balshaw, PhD
Executive Secretary
National Advisory Environmental
Health Sciences Council