

Background & Context for Minnesota's SCI/TBI Research Grant Program May 15, 2025

The MN SCI TBI Research Grant Program was established back in 2015 for \$1 million after almost 4 years of community organizing and direct advocacy to the MN legislature and governor.

In 2017, the Senate Committee on Higher Education (OHE) recommended and passed into law an increase in funding to \$6 million <u>- because it had been so effective</u>. Much of this was due to the attention generated by the <u>EStand trial</u> and then later by the <u>Cell Top trial</u> as well as the return on investment from securing federal and private dollars from seed projects.

The MN SCI TBI Research Grant Program is built on a fairly straightforward set of elements:

- 1. Competitive grant process modeled by other peer review panels like NIH and SCIRP
- 2. Low indirect cost cap, in our Bill's case at 8%
- 3. Targeting and prioritizing projects that seek to 'transform the nature and course of the injury' by restoring function i.e, Cures
- 4. Inclusion of people with lived experience on the review panel alongside research and clinical experts

These elements of our Bills are why they work and why we fight so hard to keep them intact. But there are other considerations that we don't always control. And here we need to articulate the two seemingly minor changes that the MN House members have proposed:

- 1. Moving the program out of OHE and into the Department of Health and Human Services
- 2. Restricting grants to non profit entities

We purposely sought out the OHE to host our program for a few reasons:

- Most of this research takes place in academic settings, with some overlap in healthcare systems—such as hospitals—that are actively pursuing discoveries with the potential to transform spinal cord injury (SCI) treatment.
- OHE in MN has a long track record of academic research grants so they have both the understanding and the infrastructure to execute this program
- OHE has an explicit interest in the investments in the local research economy both for training and attracting new scientists as well as incubating startups in the biotech / device sector.
- We purposely wanted to open up the granting process to any entity (for-profit or non-profit) doing research that fits our criteria, including companies. Part of the problem with translating discoveries to clinical readiness is the lack of investment and profitability

in the current landscape. So, we wanted to entice companies into collaboration with academic researchers to shrink this gap.

Second, we intentionally wanted to keep our program out of the Department of Health and Human Services. This might seem counterintuitive but here it is in the simplest of terms:

- 1. MDH's mission is to protect, maintain and improve the health of all Minnesotans. We are intimately familiar with the needs of our community, which are overwhelming. We do not want to directly compete with those needs within an agency that cannot keep up with the demands for improving the access and delivery of healthcare today with our strategy to transform the care of SCI tomorrow.
- 2. Further, MDH is accustomed to funding research in public health and epidemiology and much less in the realm of innovative scientific discovery.

This is why keeping these elements intact are essential to a government program that works as intended.

If you have any questions, feel free to reach out to myself or Jason Stoffer at: matthewrodreick@unite2fightparalysis.org, jasonstoffer@unite2fightparalysis.org, jasonstoffer@unite2fightparalysis.org,