



## Support \$22 million for the MS Research Program and \$7.5 million for the VA MS Centers of Excellence in FY24.

The MS Research Program (MSRP) and the VA MS Centers of Excellence were established by Congress to address gaps in MS research, education, and care.

### MSRP

- Congress established the MS Research Program (MSRP) in FY09 and it remains the **only federal research funding stream specifically for MS**.
- MSRP gives researchers the funding and flexibility they need to address **urgent gaps and/or novel discoveries that could make an immediate impact for people affected by MS**.
- The MSRP was funded at **\$20 million in FY23**. A \$2 million increase would allow for increased funding in all focus areas, including promoting repair, neuroprotection and remyelination and account for inflation.
- MSRP funds research based on the input from people with MS. To date, it has resulted in **an FDA breakthrough device designation for an MS blood biomarker test, six pilot clinical trials, 170 publications and \$39.3 million in follow-up funding for 55 new grants**.

### Veterans Affairs (VA) MS Centers of Excellence

- The two VA MS Centers of Excellence were established in 2003 to further the understanding of MS and its impact on Veterans.
- The VA MS Centers of Excellence **serve almost 50,000 veterans with MS annually**. Over half have “service-connected” MS.
- They are currently funded at \$4.5 million for FY23. There is no line item for these Centers within the VA’s budget.
- Funding for the Centers has been largely stagnant at \$2.5 million since they were established. While Congress provided an additional \$2 million in FY23 to support the work of the Centers, additional funding is still needed to catch up.
- A lack of funding has significantly limited the activities that the Centers can undertake to support veterans with MS.
- The Society is working in partnership with other patient advocacy groups to support all the Neurology Centers of Excellence at the VA.

### MS and military service-related relevance and impact

- MS has a higher incidence in military service members than in the general population.<sup>1</sup>
- Nearly 70,000 American veterans live with MS.<sup>2</sup>
- Between 2009 and 2018 more than 2,400 active duty and reserve and National Guard Service members received a new diagnosis of MS.<sup>3</sup>
- During that time frame the Military Health System had more than 21,000 new cases of MS (this includes military retirees and former service members and family members).<sup>3</sup>
- Additionally, more than 36,000 Department of Defense beneficiaries had over 1.1 million outpatient encounters and 537,000 hospital bed days for MS.<sup>3</sup>
- The Society has a memorandum of understanding with the VA MS Centers of Excellence to improve care and expand resources for veterans with MS and their families.

### What is multiple sclerosis (MS)?

- MS is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information between the brain and body. Early treatment minimizes disease progression.
- Symptoms range from numbness and tingling to blindness and paralysis.
- The progress, severity, and specific symptoms of MS in any one person cannot yet be predicted.
- Nearly 1 million people in the United States live with MS.

1. Eussing EC, et al. Estimated incidence of multiple sclerosis among United States Armed Forces personnel using the Defense Medical Surveillance System. *Mil Med.* 2012 May;177(5):594-600.
2. Bebo B, Cintina I, LaRocca N, Ritter L, Talente B, Hartung D, Ngorsuraches S, Wallin M, Yang G. The Economic Burden of Multiple Sclerosis in the United States: Estimate of Direct and Indirect Costs. *Neurology.* 2022 May 3;98(18):e1810-e1817. doi: 10.1212/WNL.0000000000200150. Epub 2022 Apr 13. PMID: 35418457; PMCID: PMC9109149.
3. Data includes both direct care (care received at Military Treatment Facilities) and purchased care (care received at Civilian facilities that is covered by TRICARE). Data does not include care received while deployed, or any care received outside of the Military Health System that was not processed through TRICARE.