Bundesministerium
für Gesundheit

Public funding announcement from the Federal Ministry for Health (BMG) on the topic

“Research and strengthen needs-based care around the long-term consequences of COVID-19 (Long COVID)”

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1. Aim of the funding

Long COVID and the post-COVID syndrome as long-term consequences of COVID-19 (hereinafter: Long COVID) are currently major health and social challenges. They do not represent a uniform clinical picture, are extremely heterogeneous and can affect several organs. Illnesses with similar symptoms such as myalgic encephalomyelitis / chronic fatigue syndrome (ME/CFS) also pose a challenge, including as a possible manifestation of Long COVID.

The complex symptoms of Long COVID are often very different in their intensity and duration, vary over time and are often difficult to distinguish from other illnesses. These burdens can not only have far-reaching health consequences for each individual, but can also have social and economic consequences for society as a whole.

To date, no causal therapy for Long COVID is available. Due to the large number of different symptoms that can be assigned to different medical disciplines, new care concepts appear necessary in order to clearly diagnose and treat the complex clinical picture. Due to the complex symptoms and the resulting difficult differentiation from other diseases, a quality-assured differential diagnosis is necessary. Interdisciplinary and cross-sector care pathways must be defined and regulated transitions between outpatient and inpatient care must be created. At the end of 2023, the Federal Joint Committee (G-BA) issued a new “Guideline on cross-professional, coordinated and structured care for insured persons with suspected long-COVID and illnesses that have a similar cause or manifestation of the disease” (hereinafter: long-term COVID-19). COVID guidelines) Requirements for the care of the corresponding patients, defined and care paths described. The Long COVID policy is scheduled to come into force during 2024. It must be taken into account when designing the model projects. Care elements that go beyond or specify those defined in the Long COVID Guideline must be identified.

The aim of the funding is to develop novel and transferable care approaches and to integrate them into existing offers, to generate knowledge and to network skills in order to achieve a sustainable improvement in the care of those affected by Long COVID in Germany.

2. Subject of funding

The aim of this announcement is, among other things, to promote model projects for integrated or coordinated care specifically for Long COVID patients. Integrated or coordinated care in the sense of patient-oriented, interdisciplinary medical and, if necessary, nursing care through close cooperation between different service providers (e.g. general practitioners and specialists, non-medical service providers as well as corresponding networks, hospitals, medical care centers, preventive and rehabilitation facilities) is achieved aimed for. The projects, especially if they are model projects, should cover as many different thematic focuses as possible in order to address the multitude of starting points as broadly as possible. It is also desirable that the model projects be carried out in different regions with different population densities and / or demographic structures (e.g. densely populated metropolitan areas, sparsely populated rural regions, large cities in the catchment area of a university clinic, regions with a comparatively low or high proportion of younger people , among others).

The subject of the funding are projects for four modules. A clear allocation to one of the modules must be made in the project descriptions. The modules are:

2.1 Module 1: Model projects for integrated or coordinated care

In the model projects, regionally suitable multidisciplinary care structures must be developed in which care is specifically adapted to the individual needs of the patients (age, disease burden, gender, socioeconomic background, etc.). Those affected and, if possible and sensible, their relatives must be involved in both the planning and implementation of the model projects and also taken into account in the evaluation (e.g. Patient-Reported Outcome / Experience Measures (PROMs/PREMs)). The model construction of additional and expansion of existing outpatient clinics and similar structures is also conceivable in this context in order to create and evaluate needs-based integrated care structures.

The model projects in this module are intended to examine approaches to improving integrated or coordinated care for patients with Long COVID of all ages. Projects can also address or take into account illnesses with similar symptom complexes such as ME/CFS, even independently of COVID-19 illness, and complaints related to a COVID-19 vaccination.

Projects could include the following goals:

- Development and implementation of quality-assured, standardized concepts for interdisciplinary, home-based forms of care and/or quality-assured approaches for integrated treatment paths for accelerated access to care facilities and diagnostics, for example by providing various diagnostic and therapeutic services from a single source,

addressing existing information needs, by defining Coordination responsibility and coordinated treatment paths or through pilots. The approaches can be cross-sectoral or focus on one sector (outpatient or inpatient sector, outpatient and inpatient rehabilitation facilities, care). For example, the research focus may be on early detection and treatment of Long COVID to avoid worsening of the disease and prognosis;

- Networking specialized centers or outpatient clinics with regional networks or with other clinics and/or practices for treatment as close to home as possible and, where appropriate, integrating specialized rehabilitation facilities;
- Networking of general practitioners and specialists, specialist practices and non-medical service providers;
- Establishment of interdisciplinary boards to accelerate a well-founded differential diagnosis of Long COVID;
- Development and implementation of new concepts for integrated or coordinated care (e.g. possibility of interdisciplinary teleconsultations between outpatient clinics and practicing doctors, telemedicine, outpatient care).

The list is not exhaustive. Those interested in funding are expressly encouraged to pursue further questions that have a reasonable connection to the goals of this module. To carry out telemedicine services, technical services and procedures should generally be used that are already used in statutory health insurance.

In addition to the integrated or coordinated care of those affected, the dissemination of findings is also becoming increasingly important. Therefore, the model projects must also take into account how the results are disseminated in a way that is appropriate for the target group - and, if appropriate, also understandable to laypeople.

The model projects should also include an evaluation of the respective approach and work actively with the higher-level coordination office (see No. 2.3) as well as the other funded model projects in the funding priority. For this purpose, resources must be explicitly taken into account in the work and financing plans.

2.2 Module 2: Innovations in care

In order to enable improved clinical characterization of Long COVID, projects should be funded to develop novel, innovative instruments for diagnostics and therapy support as well as for better monitoring of the quality of care. Projects can also address or take into account illnesses with similar symptom complexes such as ME/CFS, even independently of COVID-19 illness, and complaints related to a COVID-19 vaccination.

Examples of innovations in care include:

- Establishment of differential diagnostic criteria;
- Development of methods for accelerated differential diagnosis;
- Development and testing of AI-supported applications to support differential diagnosis and care;
- Derivation of approaches for personalized therapy options based on genetic diagnostics
- Development and testing of symptom-specific survey methods for more targeted stratification of patients;
- (Further) development of apps with feedback mechanisms, calculation of scores, symptom tracking and communication of coping strategies (clinical tests of medical device software as part of clinical assessment as a central component of the conformity assessment procedure are not the subject of funding);
- Company health management for the adequate reintegration of patients into everyday working life;
- Conception and testing of training and further education measures on diagnostics and therapy for medical staff in the practices of general practitioners and specialists, in emergency services, for nursing staff in hospitals and in the

The list is not exhaustive. Those interested in funding are expressly encouraged to pursue further questions that have a reasonable connection to the goals of this module.

In this module, it should also be taken into account that, where thematically appropriate, the results should be disseminated in a way that is understandable to laypeople (see 2.1).

2.3 Module 3: Research into the care situation and the disease process

In order to obtain as complete a picture as possible, the current care situation and the disease process should also be researched. In this context, health care research can be funded in particular with questions about epidemiology, the use and utilization of care services, the attitudes of the population, service providers and other interest groups, as well as health economic analysis. The subject of research in these projects can be the clinical picture Long COVID as well as diseases with similar symptom complexes such as ME/CFS, even independent of a COVID-19 disease, and Long COVID-like complaints in temporal connection with a COVID-19 vaccination. Examples of possible content and methodological research approaches are:

- Research on the use of and possible barriers to various medical, therapeutic and nursing care offers (in different regions and by different groups of people, also outside the primary healthcare market);

- epidemiological research e.g. B. on prevalence and incidence and their development over time, possible risk factors, disease burden as well as geographical and demographic differences and the course of the disease;

- Typing of the sick (e.g. according to key symptoms and severity of the limitation);

- Qualitative or quantitative surveys on the perspective of service providers, those affected and other interest groups with regard to the most suitable forms of care;

- Comparative studies on similarities with and differences from similar clinical pictures;

- Secondary analyses, meta-analyses, modeling, network analyzes and systematic reviews.

The list is not exhaustive. Those interested in funding are expressly encouraged to pursue further questions that have a reasonable connection to the goals of this module.

2.4 Module 4: Higher-level coordination office and overall evaluation

As a supplementary element of the research projects and care innovations in modules 1, 2 and 3, targeted, structured and regular networking of all funded research projects is planned. This is intended to exchange experiences and best practice approaches and to prevent any undesirable developments. In addition, this should promote the development of a sustainable network structure. In order to make these processes possible, a higher-level coordination point is essential.

In addition, common specifications and standards should be defined and established at an early stage specifically for the model projects in Modules 1 and 2.

The coordination office should, among other things, implement the following points:

- Close networking of research projects through the coordination office, including networking meetings;

- Supporting the model projects in making their research and supply data available to one another in a secure and legally compliant manner and making it reusable for third parties;

- Definition of or support in the use of existing standards for data collection, phenotyping, etc. within the framework of the model projects;

- Overall evaluation of the funding priority with a particular focus on the model projects;
- Knowledge transfer through the networking of research and care.

The overall evaluation should separately consider care elements that go beyond or specify those defined in the Long COVID Guideline. This is intended to support their further development by the G-BA and to avoid any duplication in view of its obligation to evaluate.

General information

Those responsible for the funded projects are asked to take the cross-sectional topics of "quality of care" (e.g. appropriate measures to ensure compliance with the standards specified in the model projects) and "patient participation" into account when planning and implementing them. Convincing transfer concepts must also be presented, especially in modules 1 and 2, in order to ensure long-term security of the results for healthcare practice. The model projects funded in modules 1 and 2 are intended to test their ideas in practice and thus generate knowledge about the feasibility of innovative, interdisciplinary care approaches. In the spirit of best practice, they should develop a role model character and make concrete suggestions for implementation in practice. Modules 1 to 2 must also show whether and how the data collected or used can be made available for subsequent use in a safe, interoperable and legally compliant manner in the interests of sustainable impact and independent reproducibility. Regulatory framework conditions that apply or will become effective in the medium term must be taken into account at an early stage and throughout. In particular, the currently applicable legal framework with regard to data protection and established IT security concepts must be consistently adhered to. It is important that the model projects in particular have a clear practical relevance and are oriented towards the needs of the patients. Elements for the participation of the target group in the research projects are expressly desired and, if provided, should be explained as components of the work plan.

The following cannot be funded:

- Development of novel therapeutic procedures;
- preclinical studies on therapeutic procedures in the field of pharmaceuticals and medical technology procedures;
- clinical studies to demonstrate the effectiveness of drugs and medical technology procedures. This also includes studies comparing effectiveness, e.g. B. two therapies;
- clinical trials of medical devices or clinical performance studies of in vitro diagnostic medical devices as part of clinical assessment or clinical performance assessment as a central part of the conformity assessment procedure;

- Projects for which there is a primarily commercial interest (product development and testing);
- exploratory or confirmatory studies for primary prevention;
- Health Technology Assessment Reports (HTA);
- Studies to exclusively test the safety of medical devices.

3. Beneficiaries

Institutions and providers with relevant experience in the field of healthcare, state and non-state (technical) universities, non-university research institutions and non-profit corporations (e.g. registered associations, foundations and non-profit GmbHs) as well as commercial companies with research and development are eligible to apply. (R&D) capacity in Germany.

Small and medium-sized enterprises or "SMEs" within the meaning of this funding announcement are companies that meet the requirements of the European Union (EU)[1] definition of SMEs.

The recipient of the grant declares to the granting authority its classification in accordance with Annex I of the General Block Exemption Regulation (GBER)[2] or the European Commission's SME Recommendation, as part of the written application.

For the conditions as to when state aid is/is not present and to what extent aid-free funding can be provided, see the R&D&I Union framework[3].

Research institutions that receive basic funding jointly from the federal and state governments, as well as departmental research institutions, can only receive funding for their additional project-related expenses under certain conditions.

[1] See Annex to the Commission Recommendation of 6 May 2003 on the definition of micro, small and medium-sized enterprises, published under reference number K (2003) 1422 (2003/361/EC) (OJ L 124, 20.5.2003, p. 36)
[2] Commission Regulation (EU) No 651/2014 of 17 June 2014 determining the compatibility of certain categories of aid with the internal market in application of Articles 107 and 108 of the Treaty on the Functioning of the European Union (OJ L 187 of 26 June 2014 , p. 1), in the version of Regulation (EU) 2017/1084 of June 14, 2017, (OJ L 156 of June 20, 2017, p.), Regulation (EU) 2020/972 of July 2, 2020 amending Regulation (EU) No 1407/2013 as regards its extension and amending Regulation (EU) No 651/2014 as regards its extension and relevant adjustments (OJ L 215, 7.7.2020, p. 3) and Regulation (EU) 2021/1237 of 23 July 2021 amending Regulation (EU) No 651/2014 determining the compatibility of certain categories of aid with the internal market in application of Articles 107 and 108 of the Treaty on the Functioning of the European Union (OJ . L 270 of July 29, 2021, p. 39) and Regulation (EU) 2023/1315 of June 23, 2023 amending Regulation (EU) No. 651/2014 determining the compatibility of certain categories of aid with the internal market in application Articles 107 and 108 of the Treaty on the Functioning of the European Union (OJ L 167 of June 30, 2023, p.1).
[3] Communication from the EU Commission (2022/C 414/01) of October 28, 2022 (OJ C 414 of October 28, 2022, p. 1).

At the time of payment of a grant, the existence of a permanent establishment or branch (company) or other facility that serves the non-economic activity of the grant recipient is required in Germany.

4. Funding requirements/grant requirements

Self-interest is assumed. This must be made clear by contributing your own contribution (own funds or contributions) amounting to at least 10% of the financial expenses associated with the project. When making donations to companies, the European Union's state aid guidelines may have to be observed.

Collaborations

To carry out projects with more than one national or international partner, the applicants form a network. The alliance partners must regulate their rights and obligations arising from the project in a written cooperation agreement. Further details can be found in the “Information sheet on the cooperation agreement for joint projects”. The project description, which is submitted in the first stage of the two-stage process (see Section 8.2 Procedure), initially only needs to be accompanied by informal declarations of cooperation.

All network partners, including research institutions within the meaning of Article 2 (number 83) GBER, ensure that no indirect aid flows to companies as part of the network. To this end, the provisions of number 2.2 of the European Commission's communication on the Union framework for state aid to promote research, development and innovation (OJ C 198 of June 27, 2014, p. 1) must be observed.

Interoperability

It must always be taken into account that concepts and demonstrators developed within the framework of corresponding research projects pursue interoperable approaches and that corresponding internationally recognized technical, syntactic and semantic standards as well as binding specifications must be applied at the national level in order to enable collaboration and interaction with other current or future ones products or systems without restrictions on access or implementation.

Selection criteria

The selection within the modules takes place in an open competition with the involvement of external experts according to the funding criteria mentioned below.

a. Scientific quality

The proposed project must take into account the current state of research and be based on it.

b. Methodological quality

The project description must be of high methodological quality.

c. Feasibility

It must be demonstrated that the project objectives and reliable statements on the questions can be achieved within the total funding period (see 5. Scope of funding). Accordingly, the work schedule and schedule must be realistic and feasible within the duration of the project. The human resources necessary for project implementation must be available for the entire duration of the project.

d. Research infrastructure and cooperation partners

In order to address the topics addressed in a targeted manner, access to appropriate care facilities or access and use of necessary secondary data may need to be possible. Cooperation partners relevant to the project must be included in the project. Informal declarations of cooperation must be submitted.

e. Expertise and previous experience

Those interested in funding must have relevant experience and preparatory work on the topic.

f. Sustainability

The project description must explain how the implementation of the findings from the model projects can be ensured in the standard care of the German health system after federal funding expires. The project description must also contain ideas for the further use of the findings, experiences and, if necessary, data from the development of the structures and the evaluation after the project has been completed. This must be sufficiently addressed in the project description. It must also be shown how the results of the project will be made accessible to the specialist public and other interested parties.

g. Gender aspects

Gender aspects must be taken into account throughout project planning, implementation and evaluation.

h. Participation

Target groups relevant to the project must be included in the implementation of the project to an appropriate extent, provided that this contributes to the quality of the project.

In order to carry out success checks within the meaning of administrative regulation number 11a to § 44 BHO, the grant recipients are obliged to promptly provide the BMG or the institutions commissioned with this with the data necessary for the success check. The information is used exclusively as part of the success control and the following evaluation, is

treated confidentially and published anonymously so that it is not possible to draw conclusions about individual people or organizations.

5. Scope of funding

In principle, a non-repayable grant can be granted through project funding for a period up to the end of 2028 to support the projects in modules 1 to 4. The projects are scheduled to start in autumn 2024.

Eligible for funding are project-related additional expenses such as personnel, material and travel resources as well as (exceptionally) project-related investments that are not part of the basic equipment. Task packages can also be assigned to third parties. Expenses for publication fees that arise during the term of the project for the open access publication of the results can generally be reimbursed. Expenses for basic funded permanent staff and nursing staff in Module 4 (superior coordination office) are not eligible for funding.

It is possible to submit separate applications in several modules. Possible synergies should be highlighted. However, it is not possible to submit an application for Module 4 “Higher coordination body and overall evaluation” if one or more applications for Modules 1 to 3 are also submitted.

The need for the funds requested must be evident from the application.

The assessment basis for (technical) universities, research and scientific institutions and comparable institutions that do not fall into the area of economic activities are the eligible project-related expenses (in the case of the Fraunhofer Society and, if applicable, the Helmholtz centers, the eligible project-related costs). can receive individual funding of up to 100%, taking into account the state aid requirements.

The assessment basis for grants to commercial companies and for projects by research institutions that fall into the area of economic activities are the eligible project-related costs. As a rule, these can be financed share-financed up to 50%, taking into account the state aid requirements (see appendix). The calculation of the respective funding quota must take the AGVO into account (see appendix).

6. Legal basis

Funding is granted in accordance with this funding announcement, Sections 23 and 44 of the Federal Budget Code (BHO) and the relevant administrative regulations. The applicant has no legal right to receive a grant. Rather, the BMG decides based on its dutiful discretion within the framework of the available budget resources.

Components of the grant notices are the General Additional Provisions for Grants for Project Funding (ANBest-P, ANBest-P Costs in the currently valid version) or the General Additional

Provisions for Grants for Project Funding to Local Authorities and Mergers of local authorities (AN-Best-GK in the currently valid version).

According to this funding notice, state aid will be granted on the basis of Article 25(2)(a) to (c) of the GBER of the European Commission. The funding is carried out in compliance with the common provisions set out in Chapter 1 GBER, in particular taking into account the definitions listed in Article 2 of the regulation (see the appendix to the state aid requirements for the funding announcement).

7. Notes on usage rights

It is in the interest of the BMG to make the results of the project available to all interested parties in the health system. Although the copyright and usage rights for the results and developments achieved within the framework of the funding generally lie with the recipient of the funding, in addition to this, the BMG and its subordinate authorities have a non-exclusive, non-transferable, free-of-charge right of use for all types of use of the results and developments project. The right of use is unlimited in terms of space, time and content. These principles also apply if the recipient of the grant transfers the rights of use to third parties or grants or sells rights of use to third parties. The following passage must therefore be included in contracts with cooperation partners or corresponding business partners: “The BMG and its subordinate authorities are granted a non-exclusive, non-transferable, free-of-charge right of use for all types of use of the results and developments of the project. The right of use is unlimited in terms of space, time and content."

Accessibility

The EU adopted Directive (EU) 2016/2102 of the European Parliament and of the Council of October 26, 2016 on barrier-free access to the websites and mobile applications of public bodies, which entered into force on December 23, 2016. It was implemented into national law with the amendment to the Disability Equality Act (BGG) of July 10, 2018 (see https://bik-fuer-alle.de/eu-richtlinie-barrierefreie-webangebote-oeffentlicher-stellen.html).

The federal authorities are therefore obliged to make their (all) content on the Internet (and social media) barrier-free. The files published in connection with this project including attachments such as: B. tables, interview guides, flyers, manuals, press articles, etc.) must be made available to the BMG in an accessible form. The barrier-free design of all documents for the project must be financed from approved funds.

Open access publication, registration and publication requirements

If the funding recipient publishes the results of the research project as an article in a scientific journal, this should be done in such a way that the public can access the article electronically (open access) free of charge. This can be done by publishing the article in an electronic

journal that is accessible to the public free of charge. Possibly relevant legal registration and publication obligations must also be observed.

8. Procedure

8.1. Involvement of a project sponsor, project description and other documents

The BMG has commissioned the following project sponsor to handle the funding measure:

German Aerospace Center V. (DLR)
DLR Projektträger
Heinrich-Konen-Straße 1
53227 Bonn

Telephone: 0228 3821-5684
Email: LongCovid-BMG@dlr.de

8.2. Proceedings

The process is structured in two stages. In the first stage, project descriptions are selected. Formal funding applications are only submitted in the second stage. In the first stage of the process, DLR is the project sponsor

by **May 21, 2024, 12:00 p.m.** for modules 1 and 4 and by **April 29, 2024, 12:00 p.m.** for modules 2 and 3 at the latest

to submit a project description in English and in electronic form (PDF file) at:

https://ptoutline.eu/app/long-covid-bmg

The project description should not exceed 15 pages (DIN A4 format, “Arial” or “Times New Roman” font size 11, 1.5 lines) and must be structured in accordance with the “Guidelines for creating a project description”. The guide can be accessed from the DLR project management agency under the following link:

https://projekttraeger.dlr.de/sites/default/files/documents/documents/foerderangebote/leitfaden-long-covid.docx

The project description must contain all the information required for an appropriate assessment and it must be understandable on its own, without reading the literature cited.

Offer an information event

Those interested in funding are offered the opportunity to take part in an information event in the form of a web seminar on April 11, 2024 from 10 a.m. to 12 p.m. This seminar explains the content of the funding announcement as well as the process and procedure for submitting an application. Information about this web seminar is available online here:

https://projekttraeger.dlr.de/de/foerderung/foerderangebote-und-programme/foerderaufruf-long-covid

The project descriptions submitted will be evaluated with the help of a group of independent experts, taking into account the criteria mentioned above (see also 4. Funding requirements). Based on the assessment, the project suitable for funding is then selected. The selection results will be communicated to those interested in writing. No legal entitlement to funding can be derived from submitting the project description.

If it is intended that the project will be submitted jointly by several scientific partners (joint project), a responsible contact person must be named who will coordinate the submission (coordinator). For a joint project, a coordinated, joint project description must be submitted by the joint coordinator.

In the second stage of the process, the authors of the positively assessed project description are asked in writing to submit a complete, formal funding application in German, stating a date. Contacting the DLR project manager is recommended. Application forms, instructions for completion and additional provisions are made available to applicants. For joint projects, funding applications must be submitted in coordination with the joint coordinator. Content or funding requirements must be observed and implemented in the formal funding application. No claim to funding can be derived from the request to submit an application.

After final examination of the formal funding application, the BMG decides on the approval of the submitted application based on the available budget resources and according to the criteria mentioned. It is recommended to contact the responsible DLR project management agency for application advice.

8.3. Regulations to be observed

The administrative regulations for §§23, 44 BHO and the general administrative regulations issued therefor as well as the § Sections 48 to 49a of the Administrative Procedure Act, unless deviations are permitted in this guideline. The Federal Audit Office is authorized to audit in accordance with Section 91 BHO.

9. Period of validity

This funding announcement comes into force on the day of publication at www.service.bund.de. The term of this funding announcement is limited until the expiry of its state aid basis, the GBER, plus an adjustment period of six months, i.e. until June 30, 2027. If the

temporal application of the GBER is extended without relevant substantive changes affecting the aid scheme, the term of this funding announcement will be extended accordingly, but not beyond December 31, 2032. If the GBER is not extended and replaced by a new GBER, or if relevant changes to the content of the current GBER are made, a successor funding announcement corresponding to the then applicable exemption provisions will come into force until at least December 31, 2032.

Berlin, March 20, 2024

Federal Ministry of Health
On behalf

Dr. David Herr

Appendix: General funding requirements

The following state aid regulations apply to this funding announcement:

A. Aid under the GBER ("General Block Exemption Regulation")

1. General funding requirements

The legality of the aid is only given if, in accordance with Article 3 GBER, all the conditions of Chapter 1 GBER and the conditions of Chapter 3 applicable to the specific group of aid are met. It should be noted that, according to the case law of the European Courts, national courts are obliged to order recovery when state aid has been granted unlawfully.

State aid based on the GBER will not be granted if there is a reason for exclusion in accordance with Article 1 paragraphs 2 to 5 GBER. This applies in particular if the company has not complied with a recovery order following a previous Commission decision declaring aid inadmissible and incompatible with the internal market.

The same applies to the granting of aid to companies in difficulty as defined in Article 2(18) GBER. The only exceptions to this ban are companies that were not already in difficulty on December 31, 2019, but became companies in difficulty in the period from January 1, 2020 to December 31, 2021 in accordance with Article 1 paragraph 4 letter c GBER.

Funding received can be examined by the European Commission in individual cases in accordance with Article 12 GBER. The recipient of the funding further agrees that the BMG will retain all documents relating to aid granted, which demonstrate compliance with the requirements stated here, for ten years after the aid has been granted and will hand them over to the European Commission upon request.

This funding notice only applies in connection with aid that has an incentive effect in accordance with Article 6 GBER. The aid application required in this context must contain at least the following information:

a. name and size of the company,

b. Description of the project with details of the start and completion, location of the project,

c. location of the project,

d. the costs of the project, as well

e. the type of aid (e.g. grant, loan, guarantee, repayable advance or capital injection) and the amount of public financing required for the project.

By applying for funding under this funding announcement, the applicant agrees to:

- to help ensure compliance with state aid regulations;
- to submit requested information and/or evidence to prove creditworthiness and compliance with state aid law;
- to participate in proceedings (at) the European Commission.[4]

The recipient further agrees that:

- the BMG stores all documents relating to aid granted, which prove compliance with the conditions stated here, for 10 years after the aid was granted and hands them over to the European Commission upon request;
- the BMG publishes aid over 100,000 euros on the EU Commission's transparency database[5].

Within the framework of this funding announcement, state aid is granted in the form of grants in accordance with Article 5 paragraphs 1 and 2 GBER.

The GBER limits the granting of state aid for economic activities in the following areas to the following maximum amounts:

- 55 million euros per project for basic research (Article 4(1)(i)(i) GBER)
- 35 million euros per industrial research project (Article 4(1)(i)(ii) GBER)
- 25 million euros per company and project in experimental development (Article 4(1)(i)(iii) GBER).

When checking whether these maximum amounts (registration thresholds) have been met, the cumulation rules in accordance with Article 8 GBER must be observed. The maximum amounts may not be circumvented by artificially splitting up projects that are related in terms of content. Partial approval up to the notification threshold for aid requiring notification is not permitted.

2. Scope/amount of donations

The following requirements of the GBER apply to this funding announcement, in particular with regard to eligible costs and aid intensities; The eligible costs and aid intensities listed

[4] For example, as part of a case-by-case assessment by the European Commission in accordance with Article 12 GBER.

[5] The European Commission's transparency database can be accessed at the following link: https://webgate.ec.europa.eu/competition/transparency/public?lang=de. The information required by Annex III to Commission Regulation (EU) No. 651/2014 of June 17, 2014 is relevant for this publication. This includes, among other things, the name or company of the aid recipient and the amount of the aid.

below provide the maximum framework within which the granting of eligible costs and funding quotas for projects with economic activity can take place.

Article 25 GBER – Aid for research and development projects

The funded part of the research project must be completely assigned to one or more of the following categories:

- Basic research;
- industrial research;
- experimental development;

(see Article 25 paragraph; terms in accordance with Article 2 number 84 ff. GBER).

For the classification of research work into the categories of basic research, industrial research and experimental development, please refer to the relevant information in paragraph 79 and footnotes 59, 60 and 61 of the R&D&I Union framework.

The eligible costs of the respective research and development project must be assigned to the relevant research and development categories.

Eligible costs are:

a) Personnel costs: costs for researchers, technicians and other personnel, insofar as they are used for the project (Article 25 paragraph 3 letter a GBER);

b) Costs for instruments and equipment, to the extent and for as long as they are used for the project. If these instruments and equipment are not used for the life of the project, only the depreciation during the life of the project, determined in accordance with sound accounting principles, will be eligible for aid (Article 25(3)(b) GBER);

c) Costs for buildings and land, insofar as and as long as they are used for the project. For buildings, only the reduction in value determined in accordance with the principles of proper accounting during the duration of the project is considered eligible for aid. In the case of real estate, the costs of the economic transition or the actual capital costs incurred are eligible for aid (Article 25(3)(c) GBER);

d) costs for contract research, knowledge and patents acquired directly or under license from third parties in compliance with the arm's-length principle, as well as costs for advice and equivalent services used exclusively for the project (Article 25 paragraph 3 letter d GBER);

e) additional overheads and other operating costs (including, but not limited to, materials, supplies and the like) directly incurred by the project (Article 25(3)(e) GBER).

The aid intensity per aid recipient may not exceed the following rates:

- 100% of the eligible costs for basic research (Article 25(5)(a) GBER);
- 50% of the eligible costs for industrial research (Article 25(5)(b) GBER);
- 25% of the eligible costs for experimental development (Article 25(5)(c) GBER).

The aid intensities for industrial research and experimental development may be increased to a maximum of 80% of the eligible costs, provided that the conditions set out in Article 25(6) of the GBER are met:

- by 10 percentage points for medium-sized companies;
- by 20 percentage points for small companies;
- by 15 percentage points if one of the following conditions is met:

  a) the project involves effective cooperation

     - between undertakings, at least one of which is an SME, or is carried out in at least two Member States or a Member State and a Party to the EEA Agreement, with no single undertaking covering more than 70% of the eligible costs,

       or

     - between an undertaking and one or more research and knowledge dissemination organizations which bear at least 10% of the eligible costs and have the right to publish their own research results;

  b) the results of the project are widely disseminated through conferences, publication, open access repositories or through royalty-free software or open source software;

  c) the recipient of the aid undertakes to promptly grant non-exclusive licenses for use by third parties in the EEA at market prices on a non-discriminatory basis for research results from funded research and development projects that are protected by intellectual property rights;

  d) the research and development project is carried out in an assisted area that meets the requirements of Article 107(3)(a) TFEU;

- by 5 percentage points if the research and development project is carried out in an assisted area that meets the conditions of Article 107(3)(c) TFEU;

- by 25 percentage points if the research and development project

  a) has been selected by a Member State following an open procedure to become part of a project jointly designed by at least three Member States or Parties to the EEA Agreement;

  and

  b) involves effective cooperation between undertakings in at least two Member States or Parties to the EEA Agreement if the recipient of the aid is an SME, or in at least three Member States or Parties to the EEA Agreement if the recipient of the aid is an SME big company,

  and

  c) at least one of the following two requirements is met:

     - the results of the research and development project are widely disseminated in at least three Member States or contracting parties to the EEA Agreement through conferences, publication, open access repositories or through royalty-free software or open source software

       or

     - the recipient of the aid undertakes to promptly grant non-exclusive licenses for use by third parties in the EEA at market prices on a non-discriminatory basis for research results from funded research and development projects that are protected by intellectual property rights.

General information

In accordance with Article 7(1) of the GBER, the eligible costs must be supported by written documents which must be clear, specific and up-to-date.

The amounts before deducting taxes and other charges are used to calculate the aid intensity and the eligible costs.

3. Accumulation

When complying with the maximum permissible aid intensity, the cumulation rules in Article 8 GBER must be observed in particular. The cumulation of several grants for the same eligible costs/expenses is only permitted under the following regulations or exceptions:

When Union funds that are centrally managed by Union institutions, bodies, joint undertakings or other bodies and are not directly or indirectly under the control of the Member States are combined with State aid, when determining whether the notification thresholds and maximum aid intensities or maximum aid amounts are complied with: only State aid is taken into account, provided that the total amount of public resources granted for the same eligible costs does not exceed the most favorable financing rate established by the relevant provisions of Union law. Aid exempted under the GBER for which the eligible costs can be determined may be cumulated with

a. other state aid, provided that these measures concern different, determinable eligible costs;

b. other State aid for the same, partially or fully overlapping eligible costs, but only if such cumulation does not exceed the maximum aid intensity or aid amount applicable to that aid under this Regulation.

Aid for which the eligible costs cannot be determined may be cumulated with other state aid for which the eligible costs cannot be determined either, up to the upper limit for total financing relevant to the respective situation, which is determined in each individual case in the GBER or in a decision of the European Commission.

State aid exempted under the GBER may not be cumulated with de minimis aid for the same eligible costs if this cumulation exceeds the aid intensities or maximum aid amounts set out in Chapter 3 GBER.