

October 29, 2025

Chair Shelley Moore Capito

Senate Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies 170 Russell Senate Office Building Washington, DC 20510

Ranking Member Tammy Baldwin

Senate Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies 703 Hart Senate Office Building Washington, DC 20510

Chair Robert Aderholt

House Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies 272 Cannon House Office Building Washington DC 20515

Ranking Member Rosa DeLauro

House Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies 2413 Rayburn House Office Building Washington DC 20515

RE: Disability and Rehabilitation Research Coalition (DRRC) Funding Concerns

Dear Chairs Moore Capito and Aderholt and Ranking Members Baldwin and DeLauro:

The undersigned members of the Disability and Rehabilitation Research Coalition (DRRC) write to express our serious concerns with the sustainability of funding and staffing for critical disability and rehabilitation research programs across the federal government. We urge you to continue your long-standing leadership in support of these and other critical programs across the federal agencies before real harm comes to individuals these programs are designed to help. We believe your committees have invested in disability and medical rehabilitation research in previous appropriation bills to the great benefit of Americans living with disabilities, and we sincerely thank you for your leadership on these efforts. We urge you to fully fund these programs in FY 2026 L-HHS appropriations bill as expeditiously as possible.

The DRRC is a coalition of national non-profit organizations committed to improving the science of medical rehabilitation, disability, and independent living. The DRRC focuses on increasing and leveraging federal resources devoted to medical rehabilitation, disability, and independent living research. Our goal is to improve the ability of individuals with disabilities to function and live as independently as possible.

Disability and rehabilitation research is essential national infrastructure that drives innovation in assistive technologies, informs evidence-based policies, advances medical treatments, and improves quality of life for the more than 70 million Americans living with disabilities. Federal investment in disability research has yielded transformative breakthroughs, from communication

devices that give voice to the nonverbal, to workplace accommodations that enable full economic participation, to treatments that restore function and independence.

We are particularly concerned about the impact of proposed cuts on the following vital programs:

- <u>NIDILRR</u>: National Institute on Disability, Independent Living, and Rehabilitation Research Supports research that improves outcomes for individuals with disabilities across the lifespan. The House bill cuts funding from \$119 million to \$100 million while the Senate bill maintains level funding at \$119 million.
- <u>NCMRR</u>: NIH's National Center for Medical Rehabilitation Research Advances rehabilitation science and research on physical disabilities.
- <u>CDC</u>: Disability and Health Programs within the Centers for Disease Control and Prevention Monitors and seeks to improve health status for people with disabilities.
- <u>DOD</u>: Department of Defense Research Programs—Funds medical rehabilitation research relevant to both active-duty personnel and civilians at the direction of Congress.

In addition to program funding, we are very concerned about significant cuts to staff and programs at agencies that conduct and support disability and rehabilitation research. These cuts not only eliminate institutional knowledge but also dismantle research infrastructure that has taken decades to build. Experienced researchers, program officers, and scientific staff cannot be easily replaced, and their loss has the potential to set back disability and rehabilitation research for years to come.

The consequences of these funding and staffing cuts extend far beyond budget spreadsheets and result in:

- Delayed or abandoned research into treatments, technologies, and interventions that could transform lives;
- Diminished capacity to track health disparities and address preventable secondary conditions;
- Fewer evidence-based practices reaching educators, healthcare providers, and employers;
- Weakened infrastructure to respond to emerging challenges, such as long COVID and its disproportionate impact on people with disabilities;
- Lost opportunities for people with disabilities to participate fully in education, employment, and community life.

We remain hopeful that Congress can return to good faith negotiations and find a path forward that limits damage to disability and rehabilitation research and services. The disability community has always been bipartisan, and we know there is common ground to be found in supporting research that improves lives and reduces long-term costs to federal programs.

We respectfully urge you to resume appropriation negotiations with a commitment to protecting disability and rehabilitation research funding. We request that you reject proposals that would significantly reduce staff at agencies conducting disability and rehabilitation research. We also ask you to consider the long-term human and economic costs of cutting investments that promote independence and reduce reliance on more expensive interventions.

Our coalition stands ready to work with you to identify solutions that honor fiscal responsibility while maintaining our nation's commitment to research and services that serves the needs of individuals with disabilities. We would welcome the opportunity to meet with your staff to discuss these concerns in greater detail at your earliest opportunity.

Thank you for your consideration of these critical issues. If you have any questions or if the DRRC can assist you and your colleagues, please do not hesitate to contact Peter Thomas and Natalie Keller, DRRC Co-Coordinators, at Peter.Thomas@PowersLaw.com and Natalie.Keller@PowersLaw.com, or call 202-349-4251.

Sincerely,

DRRC Members

American Academy of Physical Medicine & Rehabilitation

American Academy of Orthotists & Prosthetists

American Association on Health & Disability*

American Congress of Rehabilitation Medicine

American Medical Rehabilitation Providers Association

American Music Therapy Association

American Occupational Therapy Association*

American Orthotic & Prosthetic Association

American Physical Therapy Association*

American Spinal Injury Association

American Therapeutic Recreation Association

Amputee Coalition

Association of Academic Physiatrists*

Association of Rehabilitation Nurses

Clinician Task Force

Brain Injury Association of America*

NARRTC*

National Association for Advancement of Orthotics & Prosthetics

Paralyzed Veterans of America

VisionServe Alliance

^{**}Indicated DRRC Steering Committee Member