



DRAFT

November 25, 2025

Majority Leader John Thune

United States Senate
511 Dirksen Senate Office Building
Washington, DC 20510

Minority Leader Chuck Schumer

United States Senate
322 Hart Senate Office Building
Washington, DC 20510

Chair Shelley Moore Capito

Senate Committee on Appropriations
413 Dirksen Senate Office Building
Washington, DC 20510

Ranking Member Patty Murray

Senate Committee on Appropriations
154 Russell Senate Office Building
Washington, DC 20510

RE: **Support for Senate Passage of the FY 2026 Appropriations Bill for Labor, Health and Human Services, Education, and Related Agencies**

Dear Majority Leader Thune and Minority Leader Schumer, Chair Collins and Ranking Member Murray:

The undersigned members of the Disability and Rehabilitation Research Coalition (DRRC) write to express our strong support for passage of the bipartisan Senate Committee on Appropriations Labor, Health and Human Services, Education and Related Agencies (L-HHS) fiscal year (FY) 2026 appropriations bill that includes sustained investment in disability and medical rehabilitation research programs that greatly benefit Americans living with disabilities. We urge you to fully fund these programs for the remainder of FY 2026 to continue the research 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.

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.

The Senate L-HHS bill includes sustained funding for critical research programs including the:

- **National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)** at \$119 million, level funding with FY 2025. NIDILRR supports research that improves outcomes for individuals with disabilities across the lifespan.

- **National Institutes of Health (NIH)** and the **National Center for Medical Rehabilitation Research (NCMRR)** at \$48.7 billion, an increase in investment of \$400 million from FY 2025. NIH is the premier biomedical research enterprise in the world and NCMRR focuses on advancing rehabilitation science, research on physical disabilities, and improving function in the disability population.
- **Centers for Disease Control and Prevention (CDC)** at \$9.1 billion, an increase of \$70 million above FY 2025. CDC monitors and seeks to improve the health status of all Americans including people with disabilities and chronic conditions. We also support CDC's:
 - **National Center on Birth Defects and Developmental Disabilities** at \$205 million, approximately level funding with FY 2025;
 - **National Center for Injury Prevention and Control** at \$761 million, level funding with FY 2025; and,
 - **National Center for Chronic Disease Prevention and Health Promotion** at \$1.4 billion, approximately level funding with FY 2025.

The Senate bill also funds rehabilitation and disability service programs within the Administration for Community Living, research programs we support at the Department of Education, and workforce training programs for people with disabilities at the Department of Labor. Passage of a full year funding bill is particularly important to allow disability and rehabilitation agencies the time and ability to plan and execute their grantmaking work for FY 2026. It is also important to establish these funding levels in preparation for conferencing the bill with the House's version of this critical legislation.

We remain hopeful that Congress can return to regular order and find a path forward that limits damage to disability and rehabilitation research and service programs. The disability community has always been bipartisan, and we know there is common ground to be found in supporting research that improves lives, has a strong return on investment, and reduces long-term costs to federal health care and other disability programs.

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-Coordination, at Peter.Thomas@PowersLaw.com and Natalie.Keller@PowersLaw.com, or call 202-349-4251.

Sincerely,

DRRC Members

*****Indicated DRRC Steering Committee Member***