



June 24, 2025

SUBMITTED ELECTRONICALLY

The Honorable John Thune (R-ND)
Majority Leader
United States Senate
SD-511
Washington, DC 20510

The Honorable Mike Crapo (R-ID)
Chairman
Senate Finance Committee
239 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Chuck Schumer (D-NY)
Minority Leader
United States Senate
322 Hart Senate Office Building
Washington, DC 20510

The Honorable Ron Wyden (D-OR)
Ranking Member
Senate Finance Committee
221 Dirksen Senate Office Building
Washington, DC 20510

Re: Coalition to Preserve Rehabilitation and Habilitation Benefits Coalition Opposition to Proposed Medicaid Provisions in the Senate Budget Reconciliation Package

Dear Majority and Minority Leaders Thune and Schumer, and Chair and Ranking Member Crapo and Wyden:

The undersigned members of the Coalition to Preserve Rehabilitation (“CPR”) and Habilitation Benefits (“HAB”) Coalition write to express our deep concerns regarding the sweeping Medicaid cuts proposed in the Senate’s federal fiscal year (“FY”) 2026 budget reconciliation package. These cuts pose a serious and dangerous threat to the ability of Medicaid enrollees living with disabilities and other chronic conditions to access the medically necessary rehabilitation and habilitation services and devices they need to recover from injury or illness, regain function, and live as independently as possible.

CPR is a coalition of national consumer, clinician, and membership organizations that advocate for policies to ensure access to rehabilitative care so that individuals with injuries, illnesses, disabilities, and chronic conditions may regain and/or maintain their maximum level of health and independent function. The HAB Coalition membership includes national non-profit consumer and clinical organizations focused on securing and maintaining appropriate access to, and coverage of, habilitation benefits within the category known as “rehabilitative and

habilitative services and devices” in the essential health benefits (“EHB”) package under existing federal law.¹

Medicaid is the largest single payer for long-term services and supports (“LTSS”) in the United States. Along with Medicare, these programs are also the largest payers of medical rehabilitation and habilitation services and devices. For millions of enrollees, including children and adults with significant functional impairments, Medicaid is the only available coverage option for critical services provided in inpatient rehabilitation hospitals, skilled nursing facilities, home- and community-based service providers, and outpatient therapy provided in rehabilitation clinics and therapists’ offices. Reducing federal Medicaid funding or shifting costs to states will undoubtedly lead to service restrictions, provider payment cuts, and coverage limitations—all of which translate into delayed care, denied care, worse health outcomes, and higher long-term costs.

Regardless of how changes to Medicaid eligibility requirements are implemented, which are also included in the Senate package, millions of individuals across the country will lose access to essential healthcare coverage if these proposed cuts are finalized. That means real people, whether they are children, immigrants, pregnant women, frail seniors, or people with disabilities, will no longer have healthcare coverage and will go without timely health care, rehabilitation or habilitation therapy, assistive devices, or long-term services and supports—ultimately leading to worse outcomes and greater reliance on emergency care and institutional settings.

Medicaid funding reductions of the magnitude included in the draft Senate bill will disproportionately harm individuals living with disabilities who rely on rehabilitative and habilitative services and devices to keep, learn or improve skills and functioning or recover after stroke, traumatic brain injury, spinal cord injury, limb loss, and other disabling conditions. Contrary to many of these services being categorized under Medicaid as “optional” benefits, these services are anything but. They are essential to preserving good health and function as well as preventing long-term institutionalization and enabling people to return home, work, and participate in their communities. Limiting access to rehabilitation and habilitation services, which is the only realistic outcome from cuts of this scale, is not only counterproductive but inconsistent with the goals of cost-effective, patient-centered care that Congress has long supported.

CPR and the HAB Coalition strongly urge you and your Senate colleagues to reject these harmful Medicaid provisions and preserve access to rehabilitation and habilitation services across the continuum of care. We look forward to working with you to ensure that all Americans, particularly those with the greatest needs, continue to receive the care and supports they require to live fulfilling lives.

¹ Patient Protection and Affordable Care Act (“ACA”), Section 1302.

Thank you for consideration of our concerns. Should you have any further questions regarding this information, please contact Peter Thomas or Michael Barnett, coordinators for CPR and the HAB Coalition, by e-mailing Peter.Thomas@PowersLaw.com or Michael.Barnett@PowersLaw.com, or by calling 202-466-6550.

Sincerely,

The Undersigned Members of the Coalition to Preserve Rehabilitation and HAB Coalition

ACCSES*

ADVION

American Academy of Physical Medicine and Rehabilitation

American Association on Health and Disability

American Cochlear Implant Alliance

American Congress of Rehabilitation Medicine

American Medical Rehabilitation Providers Association

American Music Therapy Association

American Occupational Therapy Association*

American Physical Therapy Association*

American Speech-Language-Hearing Association*

American Spinal Injury Association

American Therapeutic Recreation Association*

Association of Academic Physiatrists

Brain Injury Association of America*

Center for Medicare Advocacy*

Child Neurology Foundation

Christopher & Dana Reeve Foundation*

Epilepsy Foundation of America

Falling Forward Foundation*

Lakeshore Foundation

Muscular Dystrophy Association

National Association for the Advancement of Orthotics & Prosthetics

National Association of Councils on Developmental Disabilities

National Association of Rehab Providers & Agencies

National Disability Rights Network

RESNA

Spina Bifida Association

The Arc of the United States*

United Spinal Association*

****Member of the CPR or HAB Coalition Steering Committee***