



December 19, 2025

SUBMITTED ELECTRONICALLY

The Honorable John Thune
Majority Leader
United States Senate
511 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Chuck Schumer
Minority Leader
United States Senate
322 Hart Senate Office Building
Washington, DC 20510

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

Dear Majority Leader Thune and Minority Leader Schumer:

On behalf of the undersigned members of the Coalition to Preserve Rehabilitation (“CPR”), we write to respectively urge you to expeditiously pass the bipartisan federal fiscal year (“FY”) 2026 Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) Appropriations bill in the anticipated upcoming federal funding package. This language contains critical funding for programs that are essential to individuals with disabilities, chronic conditions, and injuries who rely on access to high-quality rehabilitation services across the care continuum.

CPR is a coalition of more than 50 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 the maximum level of health and independent function. CPR is comprised of organizations that represent patients—as well as the providers who serve them—who are frequently inappropriately denied access to rehabilitative care in a variety of settings.

The Senate FY 2026 Labor-HHS Appropriations bill provides stable—and in several cases strengthened—funding for programs that support rehabilitation and disability research, workforce development, patient protection, and community living. These include the National Institute on Disability, Independent Living, and Rehabilitation Research (“NIDILRR”); the Traumatic Brain Injury (“TBI”) State Partnership and Protection & Advocacy programs; the Administration for Community Living (“ACL”); key Centers for Disease Control and Prevention (“CDC”) disability and injury prevention initiatives and the National Institutes of Health (NIH). Sustaining and enhancing these programs is crucial to ensuring that people with disabilities receive the medical, rehabilitative, and long-term services they need to recover, maintain function, and live independently.

In contrast, the House FY 2026 proposal would make significant cuts to core disability, rehabilitation, public health, and aging programs at a time when demand for these services

continues to grow. These reductions would undermine the nation's rehabilitation infrastructure, strain state systems, and threaten access for millions of beneficiaries to evidence-based supports that help individuals return to work and remain active in their communities. CPR strongly opposes such harmful reductions and urges the Senate to reject any efforts to bring House-level cuts into final negotiations.

Passage of the Senate's Labor-HHS bill is also essential to avoiding a long-term continuing resolution that would freeze federal funding at FY 2025 levels. Many rehabilitation and disability programs are already operating under ongoing resource constraints, and any further delay in FY 2026 appropriations threatens the stability of programs that depend on annual federal investment. The Senate's Labor-HHS bill offers a bipartisan, responsible path forward that protects vulnerable populations and maintains national commitments to rehabilitation access, scientific advancement, and disability rights.

For these reasons, CPR respectfully urges Senate leadership to bring the FY 2026 Senate Labor-HHS bill to the floor and work toward swift and final enactment. Individuals with disabilities and chronic conditions—as well as the clinicians and providers who serve them—are counting on Congress to ensure continuity and strength in these essential federal programs.

CPR commends you for your leadership and continued commitment to supporting the patients who rely on rehabilitation therapy services and disability programs. We stand ready to assist in any way as the FY 2026 appropriations process moves forward. Should you have any further questions regarding this information, please contact Peter Thomas or Michael Barnett, coordinators of the CPR, 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

ACCSES
ALS Association
American Academy of Physical Medicine & Rehabilitation
American Association of People with Disabilities (AAPD)
American Association on Health and Disability
American Congress of Rehabilitation Medicine
American Medical Rehabilitation Providers Association
American Music Therapy Association
American Occupational Therapy Association
American Physical Therapy Association
American Spinal Injury Association
American Therapeutic Recreation Association
Association of Academic Physiatrists
Association of Rehabilitation Nurses
Brain Injury Association of America*
Child Neurology Foundation

Christopher & Dana Reeve Foundation*

Falling Forward Foundation*

Lakeshore Foundation

Muscular Dystrophy Association

National Association for the Advancement of Orthotics and Prosthetics

National Association of Social Workers (NASW)

National Athletic Trainers' Association

National Council on Independent Living

National Multiple Sclerosis Society*

RESNA

Spina Bifida Association

United Cerebral Palsy

United Spinal Association*

****Indicates CPR Steering Committee Member***