



Support Rehabilitation Research

Federal Research Funding Facts

- Approximately 26% of Americans have a disabling condition, and the numbers are rising as the population ages, with enormous economic consequences. Rehabilitation research is needed to maximize the functional recovery and independence of those affected and lessen the economic toll of disability.
- Research funding supports state and local economies. For example, more than 80 percent of NIH funding flows back to the states through grants. This creates jobs at more than 3,000 universities, medical schools, teaching hospitals, and other research institutions in every state.
- Between 2003 and 2015, NIH funding fell by 22% due to budget cuts, sequestration, and inflation, as did the budgets of other federal research funding agencies. Since 2015, Congress has appropriated increased funds for the NIH, but funding remains behind 2003 levels in constant dollars, and other agencies lag farther behind.

IN 2019, RESEARCH CONDUCTED AT AAMC-MEMBER MEDICAL SCHOOLS AND TEACHING HEALTH SYSTEMS AND HOSPITALS GENERATED

\$33 billion

in gross domestic product



348,000

jobs



Medical rehabilitation seeks to maximize human functioning, independence, and quality of life in the face of temporary or long-term disabilities. Rehabilitation Research funding is provided by the following agencies:

- National Institutes of Health
- National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR, formerly NIDRR),
- The Department of Defense (through the Congressionally Directed Medical Research Program – CDMRP, and the Defense Advanced Research Projects Agency – DARPA),
- The Veterans Health Administration,
- The Patient Centered Outcomes Research Institute (PCORI), and
- other federal agencies.

SUPPORT MEDICAL RESEARCH

- ✓ Progress has been made and the AAP applauds Congressional action for improved funding. However, the progress must be sustained and expanded to other federal research funding agencies. AAP recommends at least \$51.3 billion for NIH in FY 2025, and increased rehabilitation research funding across the federal government.

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