Association of Academic Physiatrists
MENTOR. DISCOVER. LEAD.

www.physiatry.org

10461 Mill Run Circle, Suite 730
Owings Mills, MD 21117

P: 410.654.1000
F: 410.654.1001

Re: Public Comments on Proposed Revisions to Uniform Guidance for Federal Financial Assistance

The Association of Academic Physiatrists (AAP) appreciates the opportunity to comment on the proposed revisions to the Uniform Guidance governing federal financial assistance.

AAP is an international professional medical society representing more than 3,000 academic physiatrists - physicians specializing in Physical Medicine and Rehabilitation (PM&R) - including clinicians, educators, researchers, trainees, and leaders in rehabilitation medicine. Our members are committed to advancing research, education, innovation, and patient care for individuals living with disability, injury, and chronic illness.

As an academic organization, we are especially concerned that several proposed changes to the Uniform Guidance could have serious unintended consequences for rehabilitation research, scientific innovation, and the future academic workforce in physiatry.

AAP strongly supports maintaining rigorous, independent peer review as the foundation for evaluating grant applications and awarding federal research funding [200.205]. Peer review helps ensure federal resources are directed toward the most promising and impactful scientific work. In rehabilitation medicine, research is often interdisciplinary, translational, and closely tied to real-world patient outcomes. Reducing the role of peer review or expanding administrative or political discretion in funding decisions risks weakening confidence in funding decisions and limiting support for research that could meaningfully improve patient care.

AAP is also concerned about provisions that could unintentionally restrict the scope or focus of federally funded research [200.300, 200.218, 200.205]. Rehabilitation research often examines complex real-world factors that influence access to care, functional outcomes, disability, recovery, and quality of life across diverse patient populations. Policies that narrow the types of research considered fundable - or discourage study of

differences in outcomes, care delivery, or population needs - risk limiting the development of clinically relevant, patient-centered evidence. We encourage OMB to preserve flexibility so researchers can pursue scientifically rigorous studies that reflect the complexity and diversity of the patients and communities they serve.

We are also concerned about provisions that could create uncertainty around grant continuity or allow active awards to be terminated based on shifting policy priorities [200.340]. Rehabilitation research often requires years of sustained work, including long-term patient follow-up, multicenter collaboration, and significant institutional investment. Sudden funding interruptions can disrupt research teams, stall innovation, waste prior federal investment, and delay treatments and interventions that patients and families depend on.

AAP also urges OMB to preserve flexibility in allowable grant expenditures related to research dissemination, professional development, and scientific collaboration [200.461, 200.454, 200.432]. Conference attendance, abstract/ poster presentations, professional society membership, and scholarly collaboration are essential to scientific progress. These activities enable researchers to share findings, receive peer feedback, refine methodologies, and build collaborations that strengthen scientific rigor.

For many academic physiatrists (and particularly trainees, fellows, early-career researchers, and junior faculty) grant support for conference participation and professional membership provides access to scientific meetings, journals, mentoring, and collaborative networks that might otherwise be out of reach. Restricting these expenditures would disproportionately affect the next generation of physician-scientists at a critical stage in their careers.

We are further concerned that policies discouraging international collaboration or limiting subawards may hinder scientific progress [200.202]. Rehabilitation medicine relies on global and interdisciplinary partnerships to address complex challenges such as neurorecovery, disability outcomes, aging, assistive technology, equitable access to care, and more. We believe scientific advancement is strengthened by the open exchange of ideas across institutions, disciplines, and borders.

AAP also encourages OMB to ensure that concepts such as "Gold Standard Science" are implemented in a manner that supports - not constrains - scientific inquiry [200.205]. While rigor, reproducibility, and methodological quality are essential principles, such terminology should not be interpreted in ways that narrow research priorities, discourage investigation of real-world populations, or diminish the role of expert peer review. Rehabilitation research often requires pragmatic, implementation-focused, and

patient-centered approaches that may not fit narrow methodological definitions but are critical to improving care.

AAP respectfully urges OMB to ensure that any final revisions to the Uniform Guidance:

- Preserve independent peer review as the cornerstone of grant evaluation and award decisions **[200.205]**;
- Preserve flexibility in research scope and support scientifically rigorous, patient-centered inquiry across diverse populations **[200.300, 200.218, 200.205]**;
- Maintain stability and predictability for awarded grants **[200.340]**;
- Protect allowable expenditures supporting research dissemination, conference participation, and professional development **[200.461, 200.454, 200.432]**;
- Support scientific collaboration, including interdisciplinary and international partnerships **[200.202]**; and
- Promote transparent, objective funding processes grounded in scientific merit **[200.205]**.

Behind every federal research award are clinicians striving to improve care, investigators pushing scientific boundaries, and patients hoping for better outcomes.

Thank you for the opportunity to provide comments. AAP is ready to support policies that strengthen scientific research, academic medicine, and high-quality patient care in physiatry.

Sincerely,

Christopher Visco, MD

President, Association of Academic Physiatrists