Alliance of Specialty Medicine

Sound Policy. Quality Care.

July 13, 2026

The Honorable Russell Vought, Director
Office of Management and Budget
The White House
Washington, DC 20500

*Submitted electronically via [www.regulations.gov](http://www.regulations.gov)*

**RE: OMB Regulation for Federal Financial Assistance (OMB-2026-0034)**

Dear Director Vought,

The Alliance of Specialty Medicine (the "Alliance") represents more than 100,000 specialty physicians across 15 specialty and subspecialty societies who are committed to improving access to specialty medical care by advancing sound health policy. On behalf of the undersigned members, we appreciate the opportunity to comment on the aforementioned proposed rule, which would make sweeping revisions to the regulations governing federal financial assistance, including federal grants, cooperative agreements, and other forms of assistance.

Although OMB's stated goal is to strengthen oversight and accountability for federal assistance and limit discrimination and administrative burden, the Alliance is extremely concerned that this rule, if finalized, could substantially affect the conduct of medical research in the U.S., and ultimately the care of our patients, by weakening the integrity of the scientific peer review process, discouraging national and international scientific collaboration, and interfering with scientific journal independence. Specialists and the patients they serve rely on federally-funded research and projects not only for new and improved treatments and cures, but for continuous learning on how to care for patients most safely, effectively, and efficiently. The proposals in this rule will have an unprecedented negative effect on scientific discovery and the clinical outcomes of our patients. **The Alliance believes it is absolutely critical that decisions regarding the allocation of federal funds are guided by science rather than political considerations. We strongly encourage OMB to withdraw the rule and collaborate with the research community to come up with policies that improve transparency and reduce burden while preserving the role of the scientific community.**

Specific aspects of the rule that are of top concern to the Alliance are outlined below:

- **Requiring that new federal grant programs be designed with goals that explicitly align with administration policies and priorities (§200.202), including "gold standard science," which is referenced multiple times, but not clearly defined (§200.205).** The Alliance strongly opposes structuring federal agency grant solicitations and awards around a political agenda, which will cause uncertainty with every change of an administration. Federal research awards—especially

those pertaining to clinical trials and other medical research—often support multi-year projects that span changes in administrations and evolving policy priorities. Research that is scientifically meritorious when awarded should not become vulnerable to shifting political priorities or changing interpretations of the national interest over the life of an award. This process should instead center on scientific merit, statutory mandates, and the input of relevant scientific experts.

- **Requiring senior political appointees to review discretionary funding awards prior to approval, while limiting the weight given to recommendations from other parties, such as peer reviewers. Under this proposal, peer review recommendations would be strictly advisory, and political appointees would be required to "use their independent judgement" and prohibited from deferring to the recommendations of others (§200.205).** The Alliance is deeply concerned that this proposal will give political appointees the authority to override the scientific community's judgment at will, with no sufficient evidence. While the independent expert peer review process is not without its limitations, it remains a foundational mechanism for validating research and ensuring methodological rigor across the scientific community. We encourage OMB to work with stakeholders to improve current peer review processes and to explore alternatives that might bring more transparency and balanced expertise to these processes, rather than consolidating power in the hands of a few who may lack the technical expertise to make such decisions.
- **Expanding the government's authority to terminate a grant at any time and for any reason (§200.340).** The Alliance is concerned that this proposal could disrupt critical research and stymie progress on long-studied cures, outcomes, and other innovations. Interruptions to clinical trials, longitudinal studies, disease registries, public health surveillance, and basic research will compromise data integrity, participant retention, researchers' ability to fulfill their ethical obligations to study participants, and scientific progress overall. Less predictable long-term federal funding could also interfere with public health initiatives by reducing access to essential services for vulnerable patient populations and communities. Awardees take on staff and make commitments to participants under the security of a years-long funded grant. If these funding sources are suddenly terminated, it also puts at risk jobs, trainee pathways, and clinical capacity to deliver timely, high-quality patient care.
- **Prohibiting the use of federal funds for bilateral or multilateral collaboration with "covered foreign countries" or affiliated entities (§200.220) and adopting a domestic-first framework requiring that any international element in a federally funded grant be affirmatively justified on a case-by-case basis by agency officials (§200.202(e)).** The Alliance is concerned this could disrupt international partnerships and discourage international scientific collaboration, which provide U.S. researchers with important opportunities to gain access to specialized expertise, unique datasets, diverse patient populations, and advanced research infrastructure that enhance scientific discovery.
- **In reviewing risks posed by applicants, federal agencies may "consider an applicant's affiliations with organizations engaged in activities that violate Federal law, undermine public safety or national security, or advocate for the overthrow of the United States Government" (§200.206).** The Alliance is concerned this proposal could be broadly interpreted to disqualify researchers affiliated with public health advocacy organizations that translate evidence-based research into policies that protect vulnerable populations and promote long-term community wellness. Moreover, these and other terms throughout the proposed regulation are left largely undefined. With no defined threshold for what counts as a disqualifying affiliation, grant applicants may be rejected for arbitrary reasons that have nothing to do with the scientific merit of their research. We request that OMB work with stakeholders to clearly define what

constitutes a "disqualifying affiliation" and establish objective, transparent standards for its application. This will help to preserve the government's ability to prevent federal funding from going to organizations engaged in unlawful or dangerous activities, while ensuring that researchers are not unfairly penalized because of legitimate affiliations with public health, scientific, or advocacy organizations.

- **Prohibiting the use of federal funds for any messaging that promotes or opposes a "particular social, political, or public policy position unrelated to the statutory objectives" of the award (§200.450).** The Alliance is concerned this proposal could be deployed to bar researchers from speaking publicly about their federally funded findings on certain important subjects, such as public health and equity research, which are critical components of ensuring high quality health care.
- **Stipulating that costs for attending conferences are allowable only if participation in the conference is expressly approved by the federal agency and included in the terms and conditions of the award. This revision would clarify that recipients are not authorized to attend conferences using Federal funds that do not serve to advance program outcomes (§200.432).** While the Alliance recognizes the need to ensure that taxpayer funds are used appropriately, government pre-approval for conference attendance would put unprecedented power in the hands of the government to determine who can and cannot present their research findings at scientific meetings or otherwise gain value from such a meeting. Scientific meetings are a critical forum for bringing together experts to educate each other on the latest breakthroughs in medicine; share data on clinical best practices, including patient safety and outcomes; and formulate ideas about future research to target gaps in care. Pre-approval of such funds also assumes that applicants can predict ahead of time what future conferences might be of value and write these into their awards ahead of time, which is not always the case.
- **Requiring prior approval for use of federal funds for professional society membership, which would only be allowable if necessary to fulfill the award requirements. The use of such funds to cover the cost of membership in organizations whose primary purpose is lobbying, or issue advocacy would be expressly prohibited, as would the use of funds to cover subscriptions to professional, academic, and technical journals (§200.454).** This proposal inaccurately discounts the value of attending conferences, participating in professional organizations, and subscribing to relevant scientific journals. For specialty physicians, these activities are essential in terms of sharing best practices, supporting collaboration, fostering innovation, and most importantly, ensuring accountability. The Alliance is concerned that this proposal would give political appointees arbitrary decision-making authority to determine the application of these funds, with no specific scientific parameters, which could isolate physicians from their professional communities to the detriment of patient care.
- **Prohibiting the use of federal awards for all publication costs, including article processing charges, open access fees, and similar fees related to professional journals and other peer-reviewed publications (§200.461).** The Alliance is concerned this proposal could make publication prohibitively expensive for federally funded researchers, thereby limiting the dissemination of critical scientific research. The field of medicine relies heavily on access to peer reviewed publications, which allows the medical community to share and validate scientific findings, which in turn leads to advancements and improvements in patient care. Additionally, allowing grant dollars to be used for publishing helps to maximize the federal government's return on investment by ensuring the public can freely access and build on research.
- **Newly permitting federal agencies to restrict grant eligibility among different types of nonprofit organizations (§200.202(d)).** The Alliance is concerned that this could be used to

exclude specific advocacy groups from being awarded federal grants, including those targeting critical public health issues.

- **Creating direct and binding OMB authority over all agencies by restructuring the Uniform Guidance, which is the government-wide framework for administering federal awards.** Currently, individual agencies have the flexibility to adopt OMB guidance and implement their own rules. In this rule, OMB proposes to codify the Uniform Guidance as a federal regulation, which would give government-wide grant requirements the force of law rather than guidance, centralize federal grant policy within OMB, and create a more uniform set of requirements across participating agencies that applies across federal agencies rather than requiring separate agency rulemaking. The Alliance is concerned this will result in fewer opportunities for agency-specific public input and less flexibility for agencies to tailor grant policies to their missions, programs, and recipient communities.
- The Alliance also takes issue with the fact that this wide-reaching rule never appeared on the Unified Agenda as a regulatory action being undertaken by OMB. As a result, no one in the regulated community was aware OMB was pursuing notice and comment rulemaking and was able to weigh in on the initial development of these proposals.

Overall, the Alliance believes this rule would give OMB unhindered and inappropriate discretion to steer federal funding to awardees based on political alignment rather than scientific merit, which will undermine our nation's scientific enterprise; impede cutting edge research, including the development of new treatments and cures; and erode patient outcomes and the overall quality of our healthcare system.

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We appreciate the opportunity to provide feedback on the OMB's Federal Financial Assistance proposed rule. Should you have any questions or would like to meet with the Alliance to discuss our concerns, please contact us at info@specialtydocs.org.

Sincerely,

American Academy of Facial Plastic and Reconstructive Surgery
American Academy of Otolaryngology – Head and Neck Surgery
American Association of Neurological Surgeons
American Gastroenterological Association
American Society for Dermatologic Surgery Association
American Society of Cataract & Refractive Surgery
American Society of Echocardiography
American Society of Plastic Surgeons
American Society of Retina Specialists
American Urological Association
Coalition of State Rheumatology Organizations
Congress of Neurological Surgeons
Society of Interventional Radiology