

THE REHABILITATION IMPROVEMENT ACT OF 2013 (S. 1027)

POSITION

The American Physical Therapy Association (APTA) strongly supports the *Rehabilitation Improvement Act of 2013 (S. 1027)*, legislation that would improve, coordinate, and enhance the stature and visibility of rehabilitation research at the world's premier medical research agency. S. 1027 was introduced by Senators Mark Kirk (R-IL) and Tim Johnson (D-SD) on May 22, 2013.

PHYSICAL THERAPY AND REHABILITATION RESEARCH

Physical therapists conduct rehabilitation research that makes a difference in the lives of individuals with impairments, functional limitations and disability. Many physical therapist researchers study chronic conditions that impact individual quality of life and challenge our health care system in terms of cost and use of resources.

In 1990, Congress recognized the need for the National Institutes of Health (NIH) to address the area of rehabilitation research by establishing the National Center for Medical Rehabilitation Research (NCMRR) within the National Institute of Child Health and Human Development (NICHD). Since then, NCMRR and several other NIH Institutes have performed groundbreaking research that improves the quality of life for individuals who have spinal cord injuries, loss of limb, stroke, and other orthopedic, neurological, and cardiopulmonary disorders. However, there continues to be a compelling need to advance the role of rehabilitation research at NIH and to ensure that federal funding for these programs is well coordinated across individual Institutes and Centers.

In 2012 alone,
NIH funding supported
more than **402,000** jobs
and **\$57.8** billion
in economic output.

LEGISLATION COMPLEMENTS BLUE RIBBON PANEL

The Institute of Medicine (IOM) within the National Academies of Sciences, in 2 separate reports (1997 and 2007) concluded that NCMRR's goals have not been fully realized by its current structural location within NICHD, to the detriment of people with disabilities and chronic conditions. In 2012, NIH published a report prepared for the director of NIH, the director of NICHD, and others by a Blue Ribbon Panel on Medical Rehabilitation Research. The report argued that NCMRR is functioning but not thriving at NIH given its current location within NICHD.

The Blue Ribbon Panel concluded that the following changes should be made within NIH to better coordinate and carry out rehabilitation research:

- Develop, implement, and periodically update a NIH Rehabilitation Research Plan.
- Substantially increase funding for all aspects of rehabilitation research.
- Continue to build research capacity.
- Change the name of NCMRR to National Center for Rehabilitation Research.
- Implement structural change to transition NCMRR into an independent Institute, Center or new office in the Office of the Director.

S. 1027 complements and promotes the work of the Blue Ribbon Panel by establishing a working group comprising representatives from various NIH Institutes and Centers to update and streamline NIH rehabilitation research priorities. The legislation also allows for the development of interagency agreements relating to the coordination of rehabilitation research conducted by agencies outside of the Department of Health and Human Services. APTA urges support of this legislation and continued enhancement of rehabilitation research at NIH.

For more information on APTA priorities, visit APTA's policy center at <http://policy.apta.org>.



Co-sponsor S. 1027 Today!

For additional information, contact the American Physical Therapy Association's Government Affairs Department at 703/706-8533 or advocacy@apta.org.