



Regulation for Federal Financial Assistance

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I am writing to express my ardent opposition to the OMB proposed rule, “Regulation for Federal Assistance” (OMB-2026-0034; FR Doc. 2026-10817).

My name is Miranda Yaver. I am a political scientist and health policy professor at the University of Pittsburgh, where I conduct research at the intersection of U.S. health politics, policy, and law by conducting nationwide surveys. Teaching four courses per year only covers 60 percent of my salary, so the ability to compete for grants is of critical importance. I also co-lead the Central Pennsylvania chapter of the Scholars Strategy Network, which is comprised of scholars across central and western Pennsylvania, many of whom conduct grant-supported research and help to train the next generation of researchers.

Accountability in grant administration is of course critically important, and that is precisely why there are stringent merit review standards, such that grants are highly competitive to obtain. In the last 1.5 years, grant making had already been severely hobbled by the imposition of constraints on whether research could advance, for example, health equity in a nation where many marginalized populations fare poorly in health outcomes. Politicizing the grant review process through Sections 200.205 and 200.302 is yet another dangerous step toward destabilizing the research that has driven America’s comparative advancement and on which American patients and others rely. Weakening America’s research enterprise and diminishing American leadership in scholarly research across wide-ranging disciplines is simply dangerous and, notably, does not emanate from any statutory directive.

The nature of American politics is that there is ebb and flow in partisan control of the executive branch. But the importance of research agendas – whether my own research on health insurance barriers that keep health care out of reach or colleagues’ research on subjects like the Black maternal health crisis – transcends periods of one party’s majority status. But subjecting such grants to political review to ensure alignment with administration priorities would drastically curb the ability of scholars such as myself to advance understanding of how best to mitigate barriers to health care access (to take one example).

Section 205.340’s broadening of authority to suspend or terminate awards for political reasons as opposed to the quality of the research not only results in grants being reviewed by people who lack any expertise in complex terrain such as utilization management by managed care health plans or the role of the Employee Retirement Income Security Act in shaping health care delivery, but in some cases (e.g., lab-based research) may not simply prevent additional work from taking place, but actually lead to the wasting of research resources already expended (e.g., if samples, mice, etc. cannot be sustained while the researcher pursues alternative funding streams). Simply put, not only would this dangerously politicize and constraint the entire research enterprise, but it will even contribute to government waste.

What's more, Sections 200.432 and 200.454 limits on the allowable costs that could be funded through grants will be harmful to both researchers and America's broader advancement of research innovation. As a pre-tenure faculty member, I routinely present research at academic conferences such as the AcademyHealth Annual Research Meeting, which I would need to pay out of my own pocket under the constraints of this rule. And even more distressingly, when working to disseminate research findings, we must often pay for journals' open access in order to ensure that it will be able to be accessed and thus to facilitate its impact. When I published in *Lancet Regional Health-Americas*, securing the article's open access cost \$5,800, an amount close to a month's post-tax income and thus prohibitively expensive unless supported through grants unless spread across a large number of authors. This cost is hardly anomalous, with other academic journals often charging between \$3,000 and \$7,000 for open access. Thus, if the rule is promulgated as-is, I and other similarly-situated researchers will struggle significantly to not only conduct research, but disseminate the products of our labor so as to democratize knowledge, update clinical practices when necessary, facilitate policymakers' use of our research so as to improve policy delivery, and garner citation (a metric of evaluation when scholars such as myself pursue promotion).

The goal of research is not to prop up the presidential administration in power, nor is it simply for the amusement of researchers. The research enterprise does not favor any particular political party, but it does help to secure America's position as a renowned leader in cutting-edge advancement across health, technology, and so much more. As researchers, we are trained to follow the evidence in a manner that can improve policy and practice in ways that this proposed rule would dangerously hinder by forcing alignment with presidential goals, introducing review by inexperienced political appointees, limiting international collaboration, and limiting allowable costs in ways that would impede research dissemination. This would deeply damage higher education, the field in which I work and in which America has historically been an international leader, because these hindrances to research and dissemination take aim at critical criteria for hiring and promotion, and through which we are able to train the next generation of scientists and other researchers. The results would be catastrophic for universities and their faculty and trainees, and would lead the United States to yield its international leadership to other countries who come to surpass us in research innovation.

In light of this dangerous politicization and inappropriate and harmful constraints on evidence-based research, I urge the rescission of this rule.