

CANCER NATION

July 13, 2026

The Honorable Russell Vought
Director
Office of Management and Budget
725 17th Street, NW
Washington, DC 20503

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

Dear Director Vought:

Cancer Nation advocates for quality cancer care for all people touched by cancer. Founded by and for cancer survivors in 1986, as the National Coalition for Cancer Survivorship, Cancer Nation created the widely accepted definition of survivorship and defines someone as a cancer survivor from the time of diagnosis and for the balance of life.

Our educational, policy, and advocacy efforts are aimed at improving the quality of care and quality of life for cancer survivors after their diagnosis. Our efforts include a focus on survivorship research that informs the elements of quality survivorship care and fosters delivery of quality survivorship care to all. Our nation has made great progress in the treatment of cancer, resulting in millions of Americans living beyond their cancer diagnosis and treatment. There are currently 18.6 million Americans living with a history of cancer, a number that will grow to 22 million Americans in a decade. This success has created another challenge, which is access to quality survivorship for all.

Potential Impact of the Federal Financial Assistance Proposed Rule on Biomedical Research, including American Research Leadership

Cancer Nation has joined its colleagues in the cancer community in submitting comments on the proposed rule that focus on political review of research grants, the marginalization of scientific expert peer review, termination of awards, and limits on scientific collaboration.

In our collective comments, we have focused on how substituting pre-issuance review conducted by senior political appointees for peer review by scientific experts may slow or stall cancer research, which has yielded many new treatments. Cancer research has flourished – yielding many new treatments for cancer patients – under the current National Institutes of Health (NIH) system that relies on scientific peer review. The expert peer review system has included patients, who bring expertise about their disease, knowledge of treatments, and the lived experience of their disease to the task of reviewing grant proposals that might expand basic understanding of a disease, develop new therapies for a disease, or refine the delivery of care for their condition. This important real-world and lived experience and expertise would be lost in a system that favors political review. The role of patients may be especially critical in cancer survivorship research review as discussed below.



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In addition to the problems with substituting political review for scientific review, we believe there will be significant administrative and logistical issues associated with review by political appointees and abandonment of the system of peer review that utilizes many scientific experts.

We are also alarmed by the impact of grant terminations that may occur even if a grantee is performing based on the scope of work of the grant award. This process of termination with few standards and few appeal rights will essentially waste the taxpayers' money, as the investment in terminated grants will be lost. Of even greater immediate consequence is the potential that clinical trial participants will lose access to an investigational agent if a grant that is terminated ends a trial. Patients who enroll in trials deserve more respect than this termination policy affords them.

We note that the law provides that the cancer program at the National Cancer Institute (NCI) will be subject to counsel and advice from scientific and research experts and that NCI grants will be subject to scientific peer review. This has been the NCI standard since the 1971 enactment of the National Cancer Act, this nation's successful effort to invigorate the cancer research program.

Impact of the Proposed Rule on Cancer Survivorship Research

We fear that the proposed rule regarding federal financial assistance will have a particularly significant impact on cancer survivorship research. Political review with few standards will, we are concerned, result in the rejection of survivorship research proposals.

Cancer survivorship experts at the Office of Cancer Survivorship at NCI recently utilized a consensus process to develop a taxonomy of key concepts related to survivorship and caregiving. The definitions they developed are meant to be used to inform survivorship research, clinical care, and health policy. The consensus process resulted in this definition of cancer survivorship research:

Research focused on cancer survivorship aims to enhance the health and well-being of all cancer survivors and caregivers. This research area aims to understand, prevent, and mitigate acute and late-occurring physical, psychological, social, and economic effects of cancer and its treatment, improve care delivery, promote healthy behaviors (e.g., diet and physical activity, smoking cessation, and preventive care), develop and sustain research infrastructure (e.g., data repositories, research hubs, and biospecimen collection), and improve research methodologies for individuals impacted by cancer. Additionally, research on the multilevel contextual factors that influence aspects of cancer survivorship, including factors related to health policy, health care payer, community, health care system, care team, and survivor and caregiver characteristics (e.g., socioeconomic status, sex, and race/ethnicity), are included in the definition of cancer survivorship research.¹

This definition and the cancer survivorship research informed by it are critical to our efforts to care for cancer survivors from diagnosis and post-treatment, to ensure quality of life and access to quality care.

¹ Mollica MA, Doose M, Reed C, and Tonorezos E. Defining concepts in cancer survivorship. Cancer 2025; e70039.



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As we noted above, cancer therapy advances have resulted in 18.6 million Americans currently living with a history cancer. Our nation is continuing the success of the War on Cancer by seeking to address the needs of those cancer survivors through quality care and other interventions, all informed by cancer survivorship research.

We are concerned that political appointees who conduct pre-issuance review will not have the expertise to review complex cancer survivorship research proposals. The standard that researchers should achieve “Gold Standard Science” is a standard without definition. Those who are conducting pre-issuance, or political, review are instructed to ensure that applications comply with Administration priorities. If political reviewers rigidly apply the Administration’s prohibition against diversity, equity, and inclusion, or DEI, important cancer survivorship research grants will likely to be rejected.

It is the goal of advocates for cancer survivors and the health care professionals who care for them to ensure that ALL cancer survivors have access to quality survivorship care. In order to meet this goal, it is important to understand differences among survivors in the acute and late-occurring physical, psychological, social, and economic effects of cancer and its treatment. Knowing how cancer survivors live and work is important to the research that will help us develop and improve cancer survivorship delivery systems.

Investigating and understanding the differences among cancer survivors is the path to ensuring a system that serves all and serves all well. If the proposed system for review and oversight of research is finalized, millions of cancer survivors may not see the survivorship care they need and deserve. Our understanding of cancer survivorship and how to care for survivors may be compromised by a review system that favors politics over science.

Cancer Nation urges that the proposed rule on federal financial assistance be withdrawn. The proposed research review and oversight system so dramatically marginalizes the role of scientific experts in biomedical research review that we fear the American research enterprise will be undermined. We are especially concerned about effects on cancer survivors who need care to live their best lives, as quality of care and research for them may decline rapidly.

Sincerely,



Shelley Fuld Nasso, MPP
Chief Executive Officer

