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July 10, 2026

Office of Management and Budget
OMB Office of Federal Financial Management
Attention: Andrew Reisig or Joel Savary
725 17th Street, NW
Washington, DC 20503

RE: [OMB-2026-0034] Proposed Revisions to Guidance for Federal
Financial Assistance (Uniform Grants Regulation)

To the Office of Management and Budget and Participating Federal
Agencies:

The American Academy of Allergy, Asthma & Immunology (AAAAI) appreciates the opportunity to submit public comments on the proposed revisions to the Guidance for Federal Financial Assistance published in the Federal Register on May 29, 2026. The AAAAI is the preeminent professional organization representing thousands of allergist/immunologists, researchers, and scientific experts dedicated to advancing the treatment and prevention of allergic and immunologic diseases. We care for individuals with asthma, hay fever, sinusitis, eczema, food allergy, drug allergy, anaphylaxis, hives, and immunodeficiencies. Collectively, these disorders are a leading cause of chronic disease in America, affecting an estimated 50 million Americans, and causing substantial morbidity, mortality (asthma, anaphylaxis), and loss of productivity. As such, the U.S. annual healthcare costs of asthma are \$82 billion, food allergy \$25 billion and hay fever \$3-4 billion. Additionally, allergic and immunologic diseases directly limit eligibility for military service, contributing to recruiting shortfalls and reducing military readiness. While robust clinical studies have demonstrated that investments in allergy and immunology therapies improve the health of Americans across the life span and reduce healthcare costs, our ability to treat and prevent allergic disease depends on high-quality research.

We are deeply concerned that OMB's proposed rule changes will have devastating unintended consequences that will severely jeopardize the integrity, stability, and international standing of American biomedical research. This will negatively affect all American people, patients, clinicians and researchers. We urge the OMB to reconsider the following provisions, which threaten to derail critical, life-saving discoveries. Specific comments follow:

**\$200.205 - \$200.206 - Federal Agency Review of Applicants,
Institutions, and Proposals**

The AAAAI objects to the introduction of non-scientific criteria into the evaluation of grant proposals. Under §200.205, political appointees are

directed to apply a “pre-issuance review” to determine whether grants are in the “national interest” which allows for political control of grantmaking, marginalizes peer review, and imposes an undefined standard of “gold standard science”, as the basis for awards. Under 200.206 the administration directs agencies to weigh a scientist's “affiliations” with outside organizations and the applicant institution’s affiliations “in order to mitigate risks and protect the integrity of Federal programs”. These proposals risk weaponizing the grantmaking process against legitimate academic organizations. Further, the OMB clarifies that “funding opportunities may allow for open competition, limited competition, or selection on a non-competitive basis”. The AAAAI proposes that scientific peer review must remain the gold standard for award selection.

Decades ago, asthma was considered a disease in which airway smooth muscle constricts, impeding airflow. Treatments were largely limited to drugs that acted directly on smooth muscle or, in resistant disease, oral or injected steroids. These treatments worked temporarily, if at all, and were associated with dreadful side effects. Based on years to painstaking research in labs and clinics, we now know that asthma is largely an inflammatory disease with many different subtypes, each responsive to different therapies. Furthermore, the clinician has many choices in optimizing care for their patients, most of which carry minimal side effects. This represents a major success of American science and medicine, of which we can all be proud.

This type of biomedical advance could not have happened without consistent U.S. federal funding for the very best science in the country. Peer review and maintenance of strict scientific standards, free from political influence, are critical for the success of this enterprise. The unintended consequences of §200.205 and §200.206 are that: 1) the quality and quantity of U.S.-based science will decrease; 2) the U.S. will lose access to biomedical advances and profits from intellectual property; 3) the uncertainties of conducting science in the U.S. will drive talented American scientists to seek employment abroad; 4) future treatments and cures will be delayed; and 5) the U.S. will lose competitive advantage against other nations

§200.220 and §200.202(e) - Restrictions on International Scientific Collaboration

The AAAAI objects to a broad prohibition on international scientific collaborations. Under 200.220 and 200.202(e), the administration will require that any international element in a federally funded grant be “affirmatively justified on a case-by-case basis”. This proposal will reduce international scientific collaborations, impose new bureaucratic hurdles to advancing U.S. science, and add substantial cost as U.S. scientists are forced to develop study cohorts that are redundant with established cohorts outside of the U.S.

In our field, one of the most consequential advances in decades was performed in the United Kingdom with support from the National Institutes of Health (NIH). The Learning Early About Peanut Allergy (LEAP) study demonstrated that, contrary to conventional medical wisdom, peanut allergy could be prevented by introducing at-risk infants to dietary peanuts early (before 6 months of age). This study has had enormous implications for the practice of pediatrics in the U.S. and addressed a devastating chronic disease, peanut allergy, which had been increasing in prevalence and severity in the U.S. Recent real-world studies have demonstrated that early introduction of peanut has reduced the development of life-long peanut allergy in U.S. children by up to 40%. This incredible advance could not have been possible without international collaboration.

Impeding international collaboration will prevent high-risk high-reward projects such as the LEAP study from being conducted. Additionally, it will prevent U.S. scientists from using data, samples, and tools already developed by foreign collaborators, and require them to develop such data,

samples, and tools in the U.S. redundantly at high cost. While we agree that care must be taken regarding security and intellectual property matters, international collaborations are critical not only for progress in our field, but in every scientific field.

§200.300 - Statutory and National Policy Requirements

The AAAAI objects to prohibiting research on diversity, equity, inclusion, or accessibility policies or practices. Under §200.300, the epidemiologic identification of key patient populations or geographic areas at highest risk for allergic and immunologic diseases and their complications could be excluded from study. However, epidemiology provides critical insights into disease pathobiology, and it is essential to carefully steward federal resources responsibly.

For instance, mammalian meat allergy (MMA) is an emerging food allergy epidemic. Between 2015 and 2025, the incidence and prevalence of MMA increased over 5,000% such that an estimated 0.5 million patients in the U.S. are now afflicted with this condition that is transmitted by Lone Star ticks. While once confined to some populations in the American Southeast, MMA is now prevalent in the Northeastern U.S. and predominantly affects middle and older aged white males. Strategies to combat tickborne diseases and to monitor the efficacy of programs against tickborne diseases absolutely require epidemiologic tracking across all populations before and after an intervention.

Restrictions on epidemiologic research will prevent the development of effective programs against many infectious diseases and subsequently harm *all* patient populations. This represents an unacceptable and unnecessary risk to public health. Furthermore, as broadly constructed, §200.300 will not only prevent much of this research, but a university or research institution that conducts such research with independent non-federal funds could face termination of federal grants if the activity is found to conflict with the conditions of federal awards. While we agree that care must be taken to prevent unlawful discrimination against all populations, demographic and geographic information are needed variables in effectively combating infectious and allergic diseases.

§200.340 – Termination of Grant Awards for Discretionary Reasons

The AAAAI objects to allowing discretionary termination of grant awards. §200.340 proposes to expand federal authority to terminate federal awards mid-cycle based purely on shifting "Federal agency priorities" or "the national interest". This introduces an untenable level of risk for scientific institutions and for maintaining a population of trained U.S. scientists.

Biomedical research, particularly longitudinal studies into chronic conditions like asthma, primary immunodeficiencies, and severe food allergies—requires multi-year commitments to maintain patient cohorts, secure specialized laboratory personnel, and ensure scientific continuity. Allowing an agency to cancel an active grant early because of subjective, non-scientific policy re-alignments undermines research institutions. Additionally, this unpredictability can lead to a staggering waste of already expended taxpayer resources on half-completed, aborted clinical trials, and will actively discourage top-tier talent from pursuing research in the U.S. A 2025 study in *Nature* found that between 75-80% of graduate students, postdocs, and faculty were actively considering leaving the U.S.. Applications from U.S. scientists to pursue research in Canada increased by 40% last year, and Europe, India, and China are actively recruiting U.S. scientists. This potential generational loss of talent would severely undermine the national interest of the U.S. and harm all American people.

§200.432 and §200.461 – Prohibition of Publication and Conference Costs

The AAAAI objects to the restriction of federal funds from being used to pay for the cost of study publication and conference attendance. § 200.432 and 200.461 will make the costs of attending conferences and costs for research publication unallowable unless such costs are 'expressly required by statute' or 'expressly approved in advance' by the Federal agency on a case-by-case basis. Here the OMB states that "publication costs are not inherently necessary to carry out the core programmatic objectives of most Federal awards" but that, in many cases, "such activities are discretionary, vary widely in scope and costs, and may serve institutional, professional, or reputational interests rather than the specific objectives of the Federal program".

The assertion that publication and conference costs are "not inherently necessary" to the core objectives of federal awards is not accurate. Scientific research does not conclude in the laboratory; it is finalized only when it is peer-reviewed, published, shared with the broader scientific community, and replicated by that community. Restricting funds for these vital activities under § 200.432 and § 200.461 severely undermines the return on federal investment, as isolating discoveries within a single institution or study halts the very progress and collaboration that federal grants aim to foster. Conferences and publications are not merely "discretionary" or "reputational" endeavors; they are the primary mechanisms for rigorous peer review, knowledge dissemination, and the translation of raw data into public-health and technological advancements. Imposing administrative bottlenecks like case-by-case approvals will only stifle innovation and delay life-saving scientific breakthroughs.

In conclusion, the AAAAI urges the OMB to withdraw the proposed changes that expand political oversight in biomedical research, restrict international collaboration, reduce the collection of robust epidemiologic data, allow arbitrary grant terminations, weaken the U.S. scientific workforce, and limit the dissemination of federally funded research. To maintain America's position as the global leader in biomedical innovation, federal grant policies must protect scientific objectivity and grant review, foster open collaboration, provide funding stability, and disseminate accurate results.

We thank you for your consideration of the medical and scientific community's perspective.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Carla M. Davis MD", followed by a stylized flourish.

Carla M. Davis, MD, FAAAAI
AAAAI President