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Dear APA members,

We wanted to pass along the following PPC update about the ongoing government shut down. Please email us if you have any questions. We also wanted remind everyone about the monthly federal policy and learning collaborative, where we hear updates on federal policy issues and there is space to ask questions and discuss. You can sign up for this group here: [PPAC Policy Updates and Learning Collaborative - Academic Pediatric Association](#)

Thank you!

Maya Ragavan  
Public Policy and Advocacy Chair



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### PPC Update

November 26, 2025

**LENGTHY GOVERNMENT SHUTDOWN CONCLUDES AFTER CONGRESS PASSES MINIBUS.** The longest government shutdown in U.S. history came to an end on November 12 after 43 days, as [Congress passed and President Trump signed](#) a spending package pairing a “minibus” of three full-year appropriations bills and a continuing resolution (CR) extending all other discretionary funding through January 30 at current funding levels.

The shutdown’s conclusion was made possible after [eight Senate Democrats struck a deal](#) with Senate Republicans to advance government funding legislation. The deal included three standalone full-year spending bills for the Legislative Branch, the Department of Veteran’s Affairs, and the Department of Agriculture (USDA), which administers the Supplemental Nutrition Assistance Program (SNAP) and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). Following Senate passage, [the House passed the package in a 222-209 vote](#), with only six Democrats voting in favor.

With the shutdown over, SNAP beneficiaries in most states are [once again able to access their benefits](#). Importantly, with full-year funding for USDA secured, benefits for SNAP and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) are guaranteed for the rest of the fiscal year through September 30, 2026, regardless of any potential future shutdowns.

The agreement also reverses all reductions in force (RIFs) at federal agencies implemented by the Trump Administration during the shutdown and prohibits future RIFs for the duration of the CR. This provision was [crucial in securing the vote of Sen. Tim Kaine \(D-Va.\)](#), who delivered the deciding vote for advancing the bill. Additionally, the bill

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Affordable Care Act (ACA) premium tax credits that are still set to expire at the end of this year. Senate Majority Leader John Thune (R-S.D.) made a [“handshake” agreement with Democrats](#) to hold a vote by mid-December on a bill of their choosing to extend the ACA tax credits. But such a measure is not guaranteed to pass the upper chamber, and House Speaker Mike Johnson (R-La.) [has not made any similar commitments](#) to holding such a vote in the House.

**—WITH THE GOVERNMENT REOPENED, ATTENTION TURNS TO FINALIZING REMAINDER OF FY26 APPROPRIATIONS.** While programs under the three bills listed above have secured funding for the remainder of FY26, the remaining nine will need to be addressed in the next two months to avoid a partial government shutdown. Thune is [reportedly](#) working to build support for advancing in the coming weeks the Defense spending bill and potentially packaging up to four additional appropriations bills with it, including the Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) bill funding health and social programs. However, House and Senate leadership have yet to come to an agreement on top-line spending levels for overall discretionary spending. House proposals more closely mirror the President’s budget request, which would reduce non-defense discretionary spending by more than 20 percent. The Senate, which usually takes a more bipartisan approach given the chamber’s 60-vote filibuster threshold, has yet to release funding totals for all 12 bills. This lack of agreement makes completing the remaining appropriations bills challenging.

The National Institutes of Health (NIH) has a generally positive funding outlook. The Senate Labor-HHS bill would provide \$47.201 billion for NIH, a \$400 million increase over the FY25 level. The House version of the same bill provides \$46.9 billion for NIH’s base budget, a \$99 million increase. Both chambers clearly rejected the Trump Administration’s proposed \$18 billion cut to the agency and restructuring in the form of a consolidation of multiple Institutes and Centers. Therefore, it appears unlikely that final funding levels will significantly diverge from committee-approved amounts. The three funding bills already enacted for USDA, Veterans Affairs, and the Legislative Branch closely aligned with the Senate’s bipartisan funding levels, and a final Labor-HHS bill may also be based on the Senate’s FY26 proposal.

Given the uncertainty surrounding the timeline for the remaining appropriations bills, particularly the Labor-HHS bill, it is difficult to determine the most effective advocacy opportunities at this moment. We hope you enjoy the Thanksgiving holiday, and we anticipate that, following the break, continued engagement with Congress will be essential to highlight both the challenges facing and the value of pediatric health care and research. Please keep your stories and Op-Eds prepared for when advocacy efforts resume!

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