

Special Needs Alliance:

Public Policy News You Can Use



February 17, 2026

Disability Advocates Concerned About the Resurgence of the R-Word

Across the country, disability advocates have expressed concern about the [growth in use of the r-word](#). In 2010, President Obama signed *Rosa's Law*, formally replacing “mental retardation” with “intellectual disability” in federal legislation. Since then, prominent political and cultural figures including President Trump, Department of Justice Civil Rights Division Assistant Attorney General Harmeet K. Dhillon, Elon Musk, and Kid Rock have partaken in the recent resurgence, deploying the term at formal speaking engagements and on national media platforms. Researchers [found](#) that after prominent figures use the r-word, the word's use in everyday language skyrockets.

Advocates state the r-word is being used derogatorily and has become common in everyday Americans' lexicons. Chief Executive Officer of The Arc Katy Neas and University of Minnesota Institute on Community Integration Director Amy Hewitt say the trend reflects the growing use of rhetoric to appear powerful by denigrating an outsider group, in this case individuals with intellectual disabilities. Those who defend and support the word's use argue it is not a reference to people with intellectual disabilities and appreciate “recapturing language from the woke left”. On the other hand, disability champions find it harmful and offensive.

Senate Democrats Introduce Legislation Addressing Nursing Home Staffing Standards

On February 12, 2026, seven Senate Democrats including Senate Finance Committee Ranking Member Ron Wyden (D-OR) introduced the [Nurses Belong in Nursing Homes Act](#) to address staffing levels in long-term care facilities. The legislation comes after the Trump Administration's repeal of provisions within the [Minimum Staffing Standards for Long-Term Care \(LTC\) Facilities and Medicaid Institutional Payment Transparency Reporting Final Rule](#). The 2024 Biden Administration rule required nursing homes participating in Medicare and Medicaid to maintain a registered nurse onsite 24 hours a day, seven days a week, and to provide residents with a minimum of 3.48 total nursing care hours per resident per day. Of those hours, homes were required to provide at least 0.55 hours by a registered nurse and at

least 2.45 by a nurse aide. Upon repealing the rule, the Trump Administration cited concerns that the requirements could disproportionately burden rural and underserved communities experiencing workforce shortages and might contribute to facility closures.

Supporters of the Nurses Belong in Nursing Homes Act highlight to ongoing workforce challenges in the long-term care sector, [polling](#) indicating broad public support for federal staffing standards, and [evidence](#) linking adequate staffing levels to improved quality of care.

The *Nurses Belong in Nursing Homes Act* would:

- Require a registered nurse to be onsite 24/7 in nursing homes participating in federal programs.
- Establish an initial federal minimum staffing standard of at least three and a half hours of nursing care per resident per day.
- Require regular, evidence-based updates to staffing standards to reflect resident needs.
- Provide permanent funding for nursing home inspections, surveys, and enforcement activities related to staffing compliance.
- Reinvest civil monetary penalties imposed on nursing homes into workforce recruitment and retention initiatives.
- Establish accountability measures regarding the use of federal funds for frontline workforce investment.

CBO Releases Budget and Economic Outlook for 2026 to 2036

On Wednesday, the Congressional Budget Office (CBO) [released its budget and economic outlook](#), which provides a 10-year projection covering national deficits, debt, outlays and revenues, inflation and interest rates and includes major health care program spending among other budgetary insights. Overall, the CBO projected that the federal budget deficit will total \$1.9 trillion in fiscal year (FY) 2026 and grow to \$3.1 trillion by FY 2036. The CBO projected that health care outlays including Medicare, Medicaid, and the Affordable Care Act (ACA) will increase by nearly five percent in FY 2026 and continue to grow steadily, reaching \$3.1 trillion, or 6.7 percent of the gross domestic product (GDP), by FY 2036.

Roughly three-quarters of the projected health care cost growth over the ten-year period is driven by Medicare spending. Medicare spending is expected to reach \$1.1 trillion in FY 2026 and grow to \$2.0 trillion by FY 2036, reflecting increased enrollment and growth in average annual per-person spending of about five percent. Medicaid outlays are estimated to be \$708 billion in 2026, with growth slowing in the near term due to provisions in the *One Big Beautiful Bill Act* ([H.R.1](#)) before reaccelerating in 2030 as Medicaid covers more older adults and people with disabilities while costs continue to inflate.

Healthsperien Overview of the FY2026 Appropriations Package

The Healthsperien team compiled a [resource](#) summarizing key agencies, funding levels, and legislative changes included in the recently enacted fiscal year (FY) 2026 spending package.

The document provides a concise, agency-by-agency overview of health-related provisions and policy updates.

What's on Tap

Both chambers of Congress are in recess this week despite the initiation of a partial government shutdown Friday night. After lawmakers could not come to an agreement, the Department of Homeland Security (DHS) is the only federal agency impacted by the partial government shutdown. Democrats reportedly are seeking further oversight and reform to immigration and customs enforcement (ICE) agents including strengthening warrant requirements and ending roving patrols, both of which are nonstarters for Republican leaders and the White House. Prior to the Congressional recess, lawmakers have made minimal progress, suggesting the DHS shutdown could carry on through most of the month and consume the brunt of Congress' legislative bandwidth for the foreseeable future. President Trump is scheduled to provide the State of the Union Address on February 24th; however, some Republican lawmakers are [concerned](#) about the optics of the president's speech during a partial government shutdown. Once Congress agrees to the fiscal year (FY) 2026 funding for DHS, lawmakers are expected to immediately turn their attention to FY 2027 funding negotiations ahead of the September 30th deadline.

Late last week, Department of Health and Human Services (HHS) Secretary Robert F. Kennedy Jr. [announced](#) a swath of changes to the leadership team overseeing the nation's health. Chris Klomp, the current Director of Medicare, was promoted to oversee all HHS operations while retaining his role in the Medicare program. Director Klomp has widely been credited as one of the leaders in the Trump Administration's negotiations with drug manufacturers and retains a strong focus on reforming Medicare Advantage. John Brooks, who had served as the Deputy Administrator and Chief Policy and Regulatory Officer at the Centers for Medicare and Medicaid Services (CMS), was promoted to Senior Counselor for the agency. Secretary Kennedy also promoted two deputy commissioners at the Food and Drug Administration (FDA) to senior counselors. Additionally, [reporting](#) indicates that HHS Deputy Secretary Jim O'Neill and General Counsel Mike Stuart have been removed from their previous roles and will be offered other positions in the administration outside of HHS.

HHS representatives state the [staffing](#) changes aim to advance Secretary Kennedy's Make America Healthy Again (MAHA) agenda; however, [reports](#) indicate the shifts were driven by the White House to improve the department's stability, leadership, and executive oversight ahead of the midterm elections. Under Secretary Kennedy, HHS drastically changed its leadership team, evidenced by a [slew of dismissals](#) last summer. Health care issues are expected to be a focal point of the 2026 elections cycle in light of the *One Big Beautiful Bill Act* ([H.R.1](#)) including the expired Affordable Care Act enhanced premium tax credits, overall rising health care costs, and additional restrictions to Medicaid eligibility. In recent months, Republicans have performed poorly in [health care polling](#) and may reflect the public's response to HHS's leadership and staffing decisions.

Upcoming Events

Senate

- Out of Session

House

- Out of Session

Relevant hearings and events are expected to resume next week after Congress returns from recess.