



National Disability Policy

A Progress Report, 2025



National Council on Disability

October 31, 2025

National Council on Disability (NCD)
1331 F Street, NW, Suite 850
Washington, DC 20004

National Disability Policy: A Progress Report, 2025

National Council on Disability, October 31, 2025
Celebrating 41 years as an independent federal agency.

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National Council on Disability

An independent federal agency making recommendations to the President and Congress to enhance the quality of life for all Americans with disabilities and their families.

Letter of Transmittal

October 31, 2025

President Donald J. Trump
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mr. President:

The National Council on Disability (NCD) is pleased to submit the enclosed 2025 Progress Report, which provides a statutorily required status update on the nation's advancements and successes in disability policies, recommendations concerning the challenges that remain and require attention, and new and emerging issues impacting people with disabilities.

This report highlights policy developments that occurred during the past year in health care, transportation, employment, the Census, construction, and recreation, among others. These developments are useful barometers of both the advancements and continuing needs of people with disabilities.

NCD stands ready to assist the Administration and Congress in their efforts on behalf of people with disabilities and to advance policies that promote the goals of the Americans with Disabilities Act—opportunity, economic self-sufficiency, independent living, and full participation of people with disabilities in all aspects of society—regardless of type or severity of disability.

Respectfully,

David Shawn Kennemer
Acting Chair

(The same letter of transmittal was sent to the President Pro Tempore of the U.S. Senate and the Speaker of the U.S. House of Representatives.)

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The National Council on Disability's Mission and History

Mission

The National Council on Disability's (NCD's) mission is to be a trusted advisor, in collaboration with people with disabilities to

- the President;
- Congress;
- federal entities;
- state governments, tribal communities, and local governments; and
- other entities and organizations.

NCD fulfills its advisory roles regarding disability policies, programs, procedures, and practices that enhance equal opportunity by

- convening stakeholders to acquire timely and relevant input for recommendations and action steps;
- gathering and analyzing data and other information;
- engaging and influencing current debates and agendas with current research;
- identifying and formulating solutions to emerging and long-standing challenges; and
- providing tools to facilitate effective implementation of policies.

History

NCD was first established as an advisory council within the Department of Health, Education, and Welfare in 1978, and then placed within the newly separated Department of Education. The Rehabilitation Act Amendments of 1984 (Public Law 98-221) transformed the National Council on Disability into an independent agency with the mandate to examine statutes, policies, practices, and programs impacting people with disabilities to assess the extent to which they provide incentives or disincentives to community-based services; promote full integration in the community, schools, and in the workplace; contribute to their independence and dignity; and to advise the President and the Congress on its findings.

Two years later, in 1986, NCD delivered on that charge with a path-breaking report, *Toward Independence*, which recommended the enactment of a comprehensive federal disability civil rights law. NCD later drafted the first version of the Americans with Disabilities Act (ADA), which was introduced in the House and Senate in 1988. After President George H.W. Bush signed the ADA into law in 1990, NCD's mission was amended to reflect the broad national disability policy goals it enshrined. Since the ADA's enactment, NCD has continued to play a leading role in crafting and impacting disability policy and advising the President, Congress, and other federal agencies on disability policies, programs, and practices.

NCD is composed of nine members: four appointed by the majority and minority leadership in Congress and five appointed by the President. Per NCD's authorizing statute, NCD is required to

- review and evaluate on a continuing basis all policies, programs, practices, and procedures concerning people with disabilities conducted or assisted by federal departments and agencies and all statutes and regulations pertaining to federal programs which assist such people with disabilities to assess their effectiveness in meeting the needs of people with disabilities;
 - gather information about the implementation, effectiveness, and impact of the ADA of 1990;
 - make recommendations to the President, the Congress, and other officials of Federal agencies or other Federal entities;
 - provide Congress on a continuing basis, advice, recommendations, legislative proposals, and any additional information that NCD or the Congress deems appropriate; and
 - review and evaluate on a continuing basis new and emerging disability policy issues affecting people with disabilities at the federal, state, and local levels and in the private sector, including the need for and coordination of adult services, access to personal assistance services, school reform efforts and the impact of such efforts on people with disabilities, access to health care, and policies that operate as disincentives for the people to seek and retain employment.
- (29 U.S.C. 781).

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Executive Summary

Per its authorizing statute, the National Council on Disability (NCD) is mandated to issue an annual report concerning disability policy. The report presents, as appropriate, information on progress made in health, transportation, employment, and other vital areas. The report also includes recommendations for policy changes that remain necessary. The following are key highlights of this year's disability policy developments.

Concerning health care, although there have been some advancements in accessibility for people across all categories of disabilities in recent years, attaining and maintaining good health continue to be elusive for many because of extensive barriers within the U.S. health care system. Many of the well-documented barriers that exist within the U.S. health care system for people with disabilities are due partly to an absence of disability competency curricula in most medical, nursing, and other health professional schools. The lack of training contributes to significant health disparities between people with disabilities and their nondisabled counterparts, with people with disabilities experiencing poorer health and poorer health outcomes. As the U.S. continues its efforts to provide better care to people with disabilities, NCD is encouraged by the

Administration's goal of making America healthy again. However, we are concerned that the reductions in Medicaid spending that will occur in the next years will have an adverse effect on access to necessary health care for many people with disabilities in the U.S. because states will face budget constraints that will require cutting essential services for the poorest members of this community.

In transportation policy, the U.S. Department of Transportation (DOT) finalized a rule to fortify its regulation implementing the Air Carrier Access Act (ACAA) and to address the considerable problems that people with disabilities using wheelchairs and scooters face when traveling by air that impact their dignity and safety, including mishandled wheelchairs and scooters and improper transfers to and from aircraft seats, aisle chairs, and personal wheelchairs. This new rule requires airlines to provide "safe and dignified" assistance, including prompt boarding and deplaning assistance, and requires airlines to return wheelchairs and scooters in the same condition they were received. Furthermore, the rule mandates annual training for airline staff and contractors who handle wheelchairs and scooters. However, DOT subsequently announced in June its Notification of Enforcement Discretion that during a review

period of the rule, it will not take enforcement action against regulated entities for failing to comply with the new or revised requirements contained in the final rule. NCD encourages DOT to continue enforcement of the new rule while it completes its announced review of the rule. DOT received nearly 2,000 comments in response to its rulemaking, with the majority reflecting overwhelming support of the Wheelchair Rule. Enforcement of the Wheelchair Rule, while the Rule is being reviewed, is necessary to address the significant problems wheelchair users

undergo when traveling by air that can affect their safety, dignity, and health. Harm to people with disabilities and damage to their wheelchairs by an airline can mean both short- and long-term loss of independence and expensive repairs, which can take months to complete. These occurrences hinder people's confidence in travelling.

There is undoubtedly still much to do in the coming year across various areas of disability policy. This report outlines the corresponding recommendations NCD proposes to address these challenges.

Acronym Glossary

ACAA	Air Carrier Access Act
ADA	Americans with Disabilities Act
AMDE	accessible medical and diagnostic equipment
AI	artificial intelligence
CRCL	The Department of Homeland Security Department of Civil Rights and Civil Liberties
DFR	Direct Final Rule
DOE	Department of Energy
DOL	Department of Labor
DOT	Department of Transportation
EEO	Equal Employment Opportunity
EO	executive order
FLSA	Fair Labor Standards Act
HEADs Up Act	Healthcare Extension & Accessibility for Developmentally Disabled & Underserved Population Act
HHS	Health and Human Services
ICDR	Interagency Committee on Disability Research
NCD	National Council on Disability
NIDILRR	National Institute on Disability, Independent Living, and Rehabilitation
NIMHD	National Institute on Minority Health and Health Disparities
NPRM	Notice of Proposed Rule Making
OCR	Office for Civil Rights
ODIC	Office of Disability Integration and Coordination
PR FSRDC	Puerto Rico Federal Statistical Research Data Center
TNC	transportation network company
WAV	wheelchair-accessible vehicle

Section 1: Health Status and Health Care

Although there have been some advancements in health care accessibility for people across all categories of disabilities in recent years, attaining and maintaining good health continue to be elusive for many because of extensive barriers within the U.S. health care system. Furthermore, because many people with disabilities rely on Medicaid for their health care access, appropriate health care will likely continue to be elusive because of the Medicaid cuts that will be phased in during the coming years.

Make America Healthy Again Commission (MAHA Commission)

NCD is encouraged by the Administration's goal of making America healthy again. As NCD noted in its letter to Health and Human Services (HHS) Secretary Kennedy offering its service in this endeavor, as a further subset of the U.S. population that cuts across every demographic, people with disabilities experience even starker health disparities than the general population. Today in the United States, if you are a person with a physical, intellectual, or developmental disability, your life expectancy is less than that of someone without disabilities.¹ You are more than three times as likely to have arthritis, diabetes, and a heart attack.² You are five times more likely

to report a stroke, chronic obstructive pulmonary disease, and depression.³ You are more likely to be obese.⁴ You are significantly more likely to have unmet medical, dental, and prescription needs.⁵ If you are a woman with a disability, you are likely to receive poorer maternity care and less likely to have received a Pap smear test or a mammogram.⁶ Accordingly, NCD stands ready to help the Administration pursue its goal of helping the American people get (and stay) healthy.

Framework to End Health Disparities of People with Disabilities

After consultation with people with disabilities, a multidisciplinary team of disability and health policy experts, and years of NCD's own health disparities research, in 2022, NCD released and continues to regularly update (last updated in April 2025) the report "Framework to End Health Disparities of People with Disabilities" (Framework).⁷ Many of the well-documented barriers and bias that exist within the current U.S. system are due partly to an absence of even minimal disability competency curricula in most medical, nursing, and other health professional schools. The ultimate product of this barrier is significant health disparities between people with disabilities and their nondisabled counterparts. Although some of

the Framework's recommendations have been realized, others have not, including the following core recommendations.

NCD Recommendation 1. HHS should develop and disseminate model disability clinical care curricula for all U.S. medical, nursing, and other health care professional schools consistent with Section 5307 of the Patient Protection and Affordable Care Act and should propose a rule to make that curricula mandatory; Congress should also pass

legislation codifying that model curricula for U.S. medical, nursing, and other health care professional schools.

Standardized Disability Clinical Care and Competency Education Developments

NCD has collaborated with nongovernmental organizations to raise awareness of the need to include disability clinical care and competency training in medical and nursing education programs. These organizations include the Association of American Medical Colleges (AAMC), the Accreditation Council for Graduate Medical Education (ACGME), and The Joint Commission (on hospital accreditation), among others. The ACGME organized a major national summit for heads of medical residency programs regarding this important issue in March 2025. The goal of the summit was to inspire and provide guidance to graduate medical education programs in their efforts to teach residents and

fellows how to offer accessible care to patients with disabilities across the lifespan. Including disability clinical care and competency training in medical and nursing education programs would be a crucial component toward ending the health disparities of people with disabilities, and policymakers should continue to pursue this as a matter of policy.

NCD Recommendation 2. Congress should designate people with disabilities as a Special

Medically Underserved Population under the Public Health Service Act.

Special Medically Underserved Population Designation of People with Disabilities Developments

NCD continues to educate and advise members of Congress on the Healthcare Extension and Accessibility for Developmentally Disabled and Underserved Population Act (HEADs UP Act). This bipartisan bill seeks to designate people in the U.S. with intellectual and developmental disabilities as a "special medically underserved population," thereby providing significant government programs aimed at increasing their access to essential health care services, including federal funding for health centers and public health infrastructure such as federally qualified health centers, eligibility to apply for federal funding to develop and operate community health centers, and access to loan repayment and training programs in workforce

development and training programs for providers who treat the underserved population. NCD's position is that all people with disabilities warrant such a designation based on the body of health disparities research; therefore, NCD recommends passage of the HEADs Up Act, which would mark progress toward that end by designating an important subpopulation with specific health disparities.

U.S. Department of Health and Human Services Office for Civil Rights Resolution Agreements

In January 2025, the HHS Office for Civil Rights (OCR) reached voluntary resolution agreements with state Medicaid agencies in Florida and Montana and offered technical assistance to 25 state Medicaid agencies to promote compliance with civil rights laws after the unwinding of the Medicaid Continuous Enrollment Condition. The agreements offer these two states the opportunity to document their obligation to the implementation of civil rights laws as applied to routine and periodic redeterminations of Medicaid enrollees' eligibility,

which resumed with the end of the Medicaid Continuous Enrollment Condition. The voluntary resolution agreements are based on federal civil rights laws that prohibit discrimination: Title VI of the Civil Rights Act of 1964 (Title VI) and Section 1557 of the Affordable Care Act (Section 1557). The technical assistance offered reminded states of their independent responsibilities to make their Medicaid eligibility processes and redetermination communications accessible for people with disabilities.

Health and Human Services Administration for Community Living Grant Award and Funding Opportunity

HHS' Administration for Community Living announced the release of \$1.1 billion in funding and new grant opportunities to provide critical services to older adults, people with disabilities, and their family caregivers. The Older Americans Act formula grant funding will be issued to all 50 states and six territories, as well as 293 tribes and tribal organization nationwide. The goal is to strengthen critical community-based programs.

Section 2: Transportation

Accessible transportation for people with disabilities has seen some notable steps forward in the past year, although some progress is currently on an enforcement pause pending review of a new rule.

Air Carrier Access Rule

In January, the DOT finalized the rule “Ensuring Safe Accommodations for Air Travelers With Disabilities using Wheelchairs”⁸ to fortify its regulation implementing the ACAA and to address the problems that people with disabilities using wheelchairs and scooters contend with when traveling by air that impact their dignity and safety, including mishandled wheelchairs and scooters and improper transfers to and from aircraft seats, aisle chairs, and personal wheelchairs. Air travel can be particularly difficult for people who use wheelchairs or scooters and rely on disability-related physical assistance and services provided by U.S. and foreign air carriers and their contractors. Damaged and delayed personal wheelchairs can lead to significant life disruptions, including loss of

mobility, independence, and personal injury. Wheelchairs are often custom fitted to meet the needs of the user. Loaner devices most often lack customized assistive technology that helps a person breathe or communicate and are not up to par with the functionality that the user needs and relies on. The new rule requires airlines to provide “safe and dignified” assistance, including prompt boarding and deplaning assistance,

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and requires airlines to return wheelchairs and scooters in the same condition they were received. Furthermore, the rule mandates annual training for airline staff and contractors who handle wheelchairs and scooters.

Unfortunately, after issuing the final rule, on June 10, 2025, DOT announced that during a review period of the rule, it will not take enforcement action against regulated entities for failing to comply with the new or revised requirements contained in the final rule.⁹ DOT explained that the review period is meant to allow additional time for officials to review the Wheelchair Rule to ensure that it is consistent with the law, including the requirements of the 2024 FAA Act and

Administration policies, and to consider the issues raised by a lawsuit filed recently to challenge certain provisions of the Wheelchair Rule.¹⁰

NCD believes it is prudent to continue to enforce the rule while the rule is under review. DOT received nearly 2000 comments in response to its rulemaking, with the majority reflecting overwhelming support for the Wheelchair Rule.¹¹ Enforcement of the Wheelchair Rule is necessary to address the serious problems wheelchair users experience when traveling by air that can impact their safety, dignity, and even health. Harm to people with disabilities' bodies and damage to their wheelchairs by an airline can mean both short- and long-term loss of independence and costly repairs, which can take months to complete. These occurrences hinder an individual's ability to travel with confidence, whether it is for business or pleasure.

American Airlines Penalty

On October 23, 2024, DOT announced a \$50 million penalty against American Airlines for multiple violations of the laws protecting airline passengers with disabilities between 2019 and 2023. DOT's investigation into American Airlines revealed alleged cases of unsafe physical assistance that resulted in injuries and undignified treatment of wheelchair users in addition to repeated failures to provide prompt wheelchair assistance. American Airlines was also alleged to have mishandled thousands of wheelchairs by damaging them or delaying their return, which left travelers without the devices

they needed for mobility. This penalty serves as a deterrent for similar violations.

Ground Transportation for People with Mobility Disabilities

This year NCD issued a report, "Ground Transportation for People with Mobility Disabilities 2025: Challenges and Progress," about the state of access of ground transportation for millions of Americans with mobility disabilities, finding that wheelchair users remain a population left behind as technology advances. The report examines the unique

barriers people with disabilities experience accessing ground transportation options, explores solutions to increase the availability of wheelchair-accessible vehicles (WAVs), and makes recommendations

to policymakers on ways to expand transportation options. The report further analyzes barriers to accessing ride hail services such as Uber and Lyft, taxi service, paratransit, shuttle service and rental cars, and autonomous vehicles.

A few highlights from NCD's research findings include

- Ride hail services currently only provide WAV service in approximately 10 U.S. cities, leaving millions of WAV users without this commonplace, door-to-door option.
- On days that DOT surveyed households on their travel behavior, two to three times the number of people with travel-limiting disabilities stayed home and took no trips as did people without disabilities.

- People with travel-limiting disabilities are far less likely to own a vehicle, have access to a vehicle, and drive a vehicle than their nondisabled counterparts.
- Transit-dependent people often don't apply for jobs that aren't accessible by bus, even if they offer better pay and opportunities, keeping them in a cycle of poverty.
- Transit-dependent people miss out on social activities and obligations, preventing formation and maintenance of social networks.
- Disadvantages are generational, with children of transit-dependent people starting life with a deficit in social capital compared with more mobile counterparts.
- About a third of people with disabilities report always or usually having difficulty accessing transportation for spontaneous events.

NCD Recommendation 3. Congress should pass legislation that requires all

transportation network companies (TNCs), taxi companies, and autonomous vehicle (AV) companies that deploy fleets of robotaxis to provide and maintain an active percentage of WAVs in each community where they operate. The legislation should also ensure that the companies bring WAVs into the community rather than using the communities' current supply to fulfill this requirement.

NCD Recommendation 4. The US DOT should incentivize partnerships between AV tech companies and vehicle manufacturers for the design and manufacture of fully autonomous WAVs and an autonomous universal system that safely secures wheelchairs and wheelchair users. DOT should amend its Americans with Disabilities Act (ADA) regulation to require taxi services, TNCs, and autonomous taxi services to have a percentage of WAVs in service and available in each locality where they operate. Furthermore, DOT should vigorously enforce the ADA and related regulations within this space.

Section 3: Employment

Fair employment policies are necessary to achieving economic self-sufficiency for people with disabilities. This year, NCD has focused its employment work on the vital areas of tax misclassification, subminimum wage (Section 14(c) of the Fair Labor Standards Act [FLSA]), and hiring.

Tax Misclassification: Lost Employment Benefits for Disabled Workers

This year NCD released a report, “Tax Misclassification: Lost Employment Benefits for Disabled Workers,” advising Congress, the President, and the Administration on the tax misclassification of workers with disabilities, potentially depriving workers of important employment benefits and protections. NCD found that people with disabilities who are misclassified for federal and state employment tax purposes are ineligible for unemployment insurance and for workers’ compensation and must pay the full FICA tax, purchase their own health insurance, or rely on Medicaid.

In the report, NCD examined the definition of “employee” under the Internal Revenue Code and the legal implications of a 1965 Revenue Ruling that may be applied inappropriately to keep people with disabilities off employers’ payrolls by misclassifying these putative employees as “rehabilitation clients” or “independent contractors.” NCD conducted this investigation to highlight the magnitude and severity of worker misclassification and its impact on people with disabilities and their employment benefits.

NCD’s key findings:

Sheltered workshops may be incentivized to... [continue] unnecessary rehabilitation services to maintain [people with disabilities’] rehabilitation client status even after the training program has been completed.

- The misclassification of people with disabilities in sheltered workshops is not an uncommon occurrence but likely a systemic problem caused by lingering historical perceptions about the employability of people with disabilities.
- Revenue Ruling 65-165 may be inappropriately applied to exclude these putative employees from workshops’ payrolls, leaving them ineligible for many key employer-sponsored benefits.
- Although people with disabilities in sheltered workshops may be classified as

“employees” for purposes of protections under the FLSA, this does not guarantee employment status for federal employment tax purposes.

- Sheltered workshops may be incentivized to misclassify people with disabilities to avoid paying payroll taxes and workers’ compensation insurance and avoid providing health insurance. This may include the continuance of unnecessary rehabilitation services to maintain their rehabilitation client status even after the training program has been completed.
- People with disabilities who are misclassified for federal and state employment tax purposes are ineligible for unemployment insurance and for workers’ compensation and must pay the full FICA tax, purchase their own health insurance, or rely on Medicaid.
- The misclassification of people with disabilities in sheltered workshops results in a loss of revenue to federal and state governments because of the subsequent reduced collection of employment taxes.
- Worker misclassification allows sheltered workshop employers to transfer their financial burden and responsibilities onto their putative employees with disabilities.
- Sheltered workshops that properly classify people with disabilities for tax purposes face disadvantages in contract bidding because of their higher labor and administration costs compared to workshops that misclassify.

NCD Recommendation 5: Improved federal oversight, random payroll audits, and criminal prosecutions of willful employment tax fraud are needed. In addition, federal and

state legislatures should repeal laws that exclude people with disabilities from the term “employment” because they reflect outdated social concepts of people with disabilities.

In addition to NCD’s recommendations for incorporating modern disability policies into tax policies, NCD recognizes that other actions are needed, too. Education and outreach campaigns directed to the tax community and taxpayers with disabilities are imperative to ensure that workers receive the proper employment classification. Resolving the worker misclassification problem means not only addressing individual worker complaints or court cases but also implementing a combination of prevention, inspection, and the collective understanding that workers with disabilities should receive equal employee benefits and protections.

Section 14(c) of the Fair Labor Standards Act

The U.S. Department of Labor (DOL) announced its withdrawal of its Notice of Proposed Rule Making (NPRM) published on December 4, 2024,¹² which proposed to amend 29 C.F.R. part 525 to phase out the issuance of subminimum wage certificates under section 14(c) of the FLSA. Since 1938, the U.S. has used the FLSA to shape how workers are legally paid. Section 14(c) of the law allowed business owners to legally pay certain classified workers with disabilities less than the federal standard minimum wage—known as subminimum wage employment.

The withdrawal of this NPRM marked DOL’s discontinuance of the rulemaking process and removed the proposal from further consideration.¹³ DOL cited a lack of statutory authority to establish such a rule as the reason

for the withdrawal. This is consistent with what NCD was told under previous administrations. DOL also noted that the NPRM was based on a presumption that because of a substantial decline in the use of section 14(c) certificates, no employment opportunity for qualifying people with disabilities is curtailed by the federal minimum wage, which it argues is not the case based on the remaining 14(c) certificates still in use. NCD has long advised that there should be a phaseout of employers holding existing Section 14(c) certificates to gradually cease paying subminimum wages to workers with disabilities. Such a phaseout would be consistent with the overarching goals of the ADA—equality of opportunity and economic self-sufficiency for all people with disabilities.

Modifications to the Regulations Implementing Section 503 of the Rehabilitation Act of 1973

On July 1, 2025, DOL proposed to rescind the regulations that require contractors to invite applicants and employees to self-identify their disability status, as well as the utilization goal requirements at 41 CFR 60-741.45.¹⁴ The established regulations at 41 CFR 60-741.45(a) that are up for rescission require contractors to apply a seven percent utilization goal for employment of qualified people with disabilities to each of their job groups or to their entire

workforce if the contractor has 100 or fewer employees.¹⁵ The regulations also require covered contractors to conduct a utilization analysis, where they evaluate the representation of people with disabilities in each job group within their workforce (or across the entire workforce if they have 100 or fewer employees) with the seven percent utilization goal.¹⁶ When the percentage is less than the utilization goal established, the contractor must take steps to determine whether and where impediments to equal employment opportunity exist.¹⁷ When making this determination, the contractor must assess

...DOL proposed to rescind the regulations that require contractors to invite applicants and employees to self-identify their disability status, as well as the utilization goal requirements...

its personnel processes, the effectiveness of its outreach and recruitment efforts, the results of its affirmative action program audit, and any other areas that might affect the success of its affirmative action program.

DOL's stated intent in proposing this recession is the alignment of the regulation action with case law and recent executive orders. NCD advises that self-identification is an important part of disability data gathering, important for tracking current and long-term hiring that inform national employment data. NCD also points out that increased employment of people with disabilities in positions that they are qualified for helps advance this population's economic stability and benefits society, and rescission of the regulation may increase the unemployment of people with disabilities in federal contracting.

Section 4: Voting

The right to vote is a foundational necessity for a democracy and enshrined in the U.S. Constitution. Many people with disabilities must rely on voting options that are accessible to exercise that right.

Development in the Courts

On October 15, 2024, in a four to three ruling, the Ohio Supreme Court upheld a recent directive from its Secretary of State that effectively prohibits authorized people from returning an absentee ballot to a drop box on behalf of a family member or voter with a disability.¹⁸ The Secretary of State issued a rule in August 2024 allowing the use of voting drop boxes only by people who are casting their own ballots.

The Voting Rights Act of 1965 states that any voter who “requires assistance to vote by reason

of blindness, disability or inability to read or write may be given assistance by a person of the voter’s choice.” This recognizes that some people cannot vote without assistance for valid disability-related reasons. For example, some voters with disabilities are immunocompromised and cannot leave their homes. Others may have difficulty writing their own ballots because of a physical disability or because they are blind.

NCD has consistently noted the need for accessible voting methods as a means of protecting voting rights. Americans’ right to vote is enshrined in the U.S. Constitution and should not be abridged for any reason, and reasonable accommodations should be afforded to people with disabilities to ensure that they can exercise their fundamental right to vote as U.S. citizens.

Section 5: Census

Documenting the number of people with disabilities in the U.S. is vital for many reasons, including allocating sufficient resources for federal, state, and local programs to meet the needs of the population. In September 2024, the U.S. Census Bureau (Census) announced the official opening of the Puerto Rico Federal Statistical Research Data Center (PR FSRDC), an action that expands the reach and impact of statistical data in Puerto Rico.

As the first Federal Statistical Research Data Center in a U.S. territory, the PR FSRDC will empower local researchers with access to restricted-use microdata from a wide array of federal agencies, including the Census Bureau. The data available will enable researchers to explore new, previously unanswerable questions about society, economy, and public health systems, among others.¹⁹ Puerto Rico now has the tools to conduct high-impact studies, as is the case in mainland institutions, to inform policy and decision makers.

Section 6: Federal Agency Restructuring and Budget Cuts

NCD continues to monitor the impact budget cuts and federal agencies' restructuring have on people with disabilities. For example, significant restructuring has taken place at the Federal Emergency Management Agency, Office of Disability Integration and Coordination (ODIC). ODIC delivers the agency shared mission of helping people before, during, and after disasters in ways that maximize the inclusion of, and accessibility for, people with disabilities. Many ODIC personnel opted to be placed on administrative leave under the new restructuring efforts.

NCD is concerned that the reduction in ODIC staff will impact emergency management for people with disabilities, who have continued to experience barriers to receiving preventive and post-disaster help.

As an additional example, the Department of Homeland Security Department of Civil Rights and Civil Liberties (CRCL) was eliminated in April. CRCL processed Equal Employment

Opportunity (EEO) complaints and Section 504 complaints from the public and engaged with communities. EEO complaints were absorbed by the Department of Homeland Security Human Resources Department. At this time, it is unclear who will assume the other CRCL responsibilities.

Furthermore, this year has seen considerable changes at HHS because of both agency

restructuring and legislation impacting its programs. The most significant among these are the reductions in federal Medicaid funding that will be phased in during the coming years. Reduced funding to states will likely impact the ability to obtain health care for the poorest in the nation, including many people

with disabilities. Many will likely lose access to necessities (e.g., personal care aides, therapy, equipment) that help them live independently at home. When home care services are unavailable to people with disabilities who rely on them to live at home, more of them are in danger of having to move into nursing homes or institutions, which cost more and place people

When home care services are unavailable to people with disabilities who rely on them to live at home, more of them are in danger of having to move into nursing homes or institutions, which cost more and place people in the most dangerous places to live if or when contagious illnesses occur...

in the most dangerous places to live if or when contagious illnesses occur, as we saw during the COVID-19 pandemic.

NCD advises that these changes will likely have a significant impact on the considerable

progress that the federal government and states have made to achieve the goals of the ADA and the *Olmstead* mandate to ensure community living opportunities for those who want to remain in their homes.

Section 7: Recreation

Airbnb

This year, Airbnb introduced a number of product features, programs, and policies designed to help hosts highlight accessibility features and provide guests with accurate information to help them determine if a home, experience, or service meets their unique needs so they can book with confidence. This

includes search filters for accessibility features when reviewing the property online, digital platform accessibility, and online features that enable accessibility requests. Accessibility accommodations such as these serve as a necessary step toward accessible vacations and recreation. NCD will continue to monitor these developments.



Section 8: Construction

The US Department of Energy (DOE) announced a Direct Final Rule (DFR) (paused until December 2025 as of the publication date of this NCD Progress Report) to rescind new construction requirements related to disability nondiscrimination in federally assisted programs or activities.²⁰

The DOE regulation at issue has existed for 45 years and is an essential part of the overall federal assurance that buildings constructed or altered using federal

funds are usable by all Americans. DOE explains that it seeks to rescind the nondiscrimination requirements for constructing buildings financed with federal funds, leaving only a

general prohibition on discriminatory activities and related penalties, to further “DOE’s policy to give private entities flexibility to comply with the law in the manner they deem most efficient.”

NCD advised DOE to pause its intention to effectuate the DFR on June 11, 2025, and expressed our concern with DOE’s intention to rescind the detailed requirements because they

contain long-standing, crucial requirements for physical accessibility of buildings constructed and altered using federal financial assistance. NCD advised that private industry frequently lacks the expertise to determine how to construct or alter buildings for accessibility and relies on easily accessed, widely accepted, and widely used standards to achieve it. In addition, the existing requirements help to foreclose the risk of additional costs and delays incurred

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postconstruction to retrofit initial construction that is not accessible.

NCD pointed out the importance of Rehabilitation Act Section 504 regulations to the large and growing population of Americans

with disabilities. Prior to their existence, there was little to no accessibility of buildings, and people with disabilities and their families were significantly burdened by the inability to enter and use public buildings. This lack of access impacted their lives in myriad ways, including decreased employment opportunities and increased barriers to community participation.

NCD recommended that any plan to alter or rescind a regulation that is a cornerstone for accessibility to federally financed buildings should be considered only after meaningful consultation with disability experts and

stakeholders and a meaningful opportunity for the public to be informed of the plan, understand its impacts, and have an opportunity to provide informed comments based on that information.

Section 9: Issue to Watch

Artificial Intelligence

Artificial intelligence (AI) technologies, including machine learning, natural language processing, and automation, are swiftly renovating key sectors such as health care, employment, public services, and education. Although AI-powered accessibility tools, including real-time captioning, adaptive interfaces, and speech recognition, have the potential to reduce barriers and promote inclusion, they also no doubt present considerable risks. Federal agencies, including the U.S. Access Board, have identified that AI systems often replicate and amplify existing biases because of unrepresentative training data

and lack of accessibility features. For example, AI-driven hiring tools may unintentionally screen out qualified candidates with disabilities if gaps in employment history or nonstandard communication styles are misinterpreted. There are currently no comprehensive federal standards that explicitly and uniformly require AI systems to be accessible to people with disabilities or that agencies systematically collect data on AI's impact on this population. It is vital that AI-enabled tools, including with respect to health care and other areas, be made accessible for the benefit of all and that federal standards be established to address this important issue.



Section 10: Conclusion

The collective efforts of the executive and legislative branches, as well as states' partnerships, are essential to advancing policy that supports the goals of the ADA: equality of opportunity, economic self-sufficiency, independent living, and full participation of people with disabilities in all aspects of society regardless of type or severity of disability.

Although some progress was made this past year, including with respect to health care, one cannot ignore the many challenges that remain for many in the disability community, including in tax policy, health care, transportation, and other policy areas. In the coming year, it is incumbent on policymakers to rectify deficiencies and continue the work toward the ADA's goals.

Endnotes

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