Pharmacologic and therapeutic interventions for patients with Fontan failure are limited and poorly studied. Patient-reported outcome (PROs) metrics of quality of life (QOL) are crucial for aligning patient-centered goals regarding a meaningful improvement in their QOL and are currently underutilized in Fontan research. This proposal will address an urgent clinical need to better understand patient-reported outcome (PROs) metrics of quality of life (QOL), quantitative functional and frailty testing, and a direct comparison of two accessible, but underutilized therapeutic interventions among patients with failing Fontan physiology. A multicenter, randomized controlled trial (1:1) will test the central hypothesis that cardiac rehabilitation will result in improved peak VO2, frailty, and a validated, congenital heart disease-specific PROs (ACHD PROs) over a 12-week duration compared to PDE-5 inhibitor (Tadalafil).