March 27, 2018

The Honorable Tom Cole
Chairman
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

The Honorable Rosa DeLauro
Ranking Member
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Dear Chairman Cole and Ranking Member DeLauro:

As the largest purchaser of health care—more than $1 trillion per year and rising—the federal government has an enormous stake in spending each health dollar wisely. Patients deserve health care that works for them, and taxpayers deserve smart spending. That means care delivered at the right time, in the right setting, by the right professional. It means that patients receive cutting-edge care, whether that patient lives in South Carolina, South Dakota, or south Jersey – and it means no patient is harmed by the care they receive due to a preventable medical error. It’s a tall order and a tough job, but the Agency for Healthcare Research and Quality (AHRQ) helps achieve such success day in and day out. AHRQ doesn’t attract great attention to itself; it’s a workhorse. But AHRQ saves money, and AHRQ saves lives.

As you draft the Labor, Health and Human Services, Education and Related Agencies appropriations legislation for fiscal year (FY) 2019, the 142 undersigned members of the Friends of AHRQ respectfully request $454 million in budget authority, which is consistent with the FY 2010 level adjusted for inflation. This funding level will allow AHRQ to rebuild portfolios terminated after the last seven years of cuts, and will help the agency avoid a funding cliff that will result in more than a 25 percent cut to its program level budget when the Patient-Centered Outcomes Research (PCOR) Trust Fund is at risk of expiring at the end of FY 2019.

AHRQ funds the research needed to change what’s wrong and share what’s right in day-to-day health care delivery. Universities and other research institutes throughout the nation conduct this critical research. AHRQ also generates data to monitor the health care landscape and ensures the pipeline of new medical findings reaches health care providers and patients, regardless of where they work and live, and provides them with the tools and training they need to use those findings every day in the care of patients.

An example of AHRQ’s successful work includes research grants to ensure rural primary care practices are equipped to respond to the opioid crisis. An explosion in the incidence of opioid addiction and overdoses, particularly in rural areas of the country, has elevated this issue to crisis-level in the United States. Primary care practices are often the first line of defense against this and other substance use disorders. In addition, AHRQ is the federal agency singularly responsible for reducing the nearly 100,000 deaths in the United States each year associated with medical errors. AHRQ’s innovative Comprehensive Unit-based Safety Program to Prevent Healthcare-Associated Infections—first applied on a large scale in 2003 across more than 100 ICUs across Michigan—saved more than 1,500 lives and nearly $200 million in the program’s first 18 months. This project has since been expanded to hospitals in all 50 states, the District of Columbia, and Puerto Rico.
The vast majority of federally funded research focuses on one specific disease, organ system, cellular or chemical process. AHRQ is the only federal agency that funds research on the “real-life” patient—the one who doesn’t have diabetes alone, for example, but also has cardiovascular disease and renal disease; or the patient who has cancer, as well as heart disease. In 2000, an estimated 60 million Americans had such multiple chronic conditions. By 2020, an estimated 81 million people will have multiple chronic conditions and the costs of their care will consume 80 percent of publicly funded health insurance programs, such as Medicare and Medicaid. Unfortunately, the $30 million cut AHRQ sustained in FY 2016 resulted in the termination of the agency’s portfolio aimed at optimizing care for patients with multiple chronic conditions. Restoring AHRQ’s budget to the FY 2010 level of $454 million will support research to supply providers with the tools they need to best serve these patients.

The Friends of AHRQ recognize the importance of investing federal funds strategically. We strongly believe that AHRQ more than earns a place among your appropriations priorities, and urge you to provide the agency $454 million in budget authority in FY 2019. Doing so would signal your continued commitment not just to produce discoveries, but to produce science that translates medical progress into better care for patients today. Absent any clear indication that the PCOR Trust Fund will be reauthorized between now and its scheduled expiration September 30, 2019, a level of $454 million in budget authority will allow AHRQ to avoid a devastating budget cut of more than one-quarter, maintain its current program level budget, and sustain critical research and training activities currently supported by the PCOR Trust Fund.

Thank you for considering our recommendation. For more information, including a copy of our report on AHRQ’s contributions to improved health and health care over the years, please contact Kristin Rosengren at 202.292.6700 or kristin.rosengren@academyhealth.org.

Sincerely,

Academic Pediatric Association
Academy of Nutrition and Dietetics
AcademyHealth
Alliance for Aging Research
AMDA – The Society for Post-Acute and Long-Term Care Medicine
American Academy of Allergy, Asthma & Immunology
American Academy of Ambulatory Care Nursing (AAACN)
American Academy of Dermatology Association
American Academy of Family Physicians
American Academy of Nursing
American Academy of Pediatrics
American Association for Dental Research
American Association for the Study of Liver Disease
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American Association of Neuromuscular & Electrodiagnostic Medicine
American Association of Nurse Assessment Coordination (AANAC)