February 22, 2021

The Honorable Patty Murray  
Chair  
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies  
U.S. Senate  
Washington, DC 20510

The Honorable Roy Blunt  
Ranking Member  
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies  
U.S. Senate  
Washington, DC 20510

Dear Chair Murray and Ranking Member Blunt:

The COVID-19 pandemic has clearly revealed that the US healthcare system is at a breaking point, and our nation’s goals of a system that ensures access to high quality healthcare for all is falling far short of its potential. We have seen the deep racial and ethnic inequities both within and beyond healthcare as people of color are disproportionately contracting COVID-19, suffering worse outcomes, having less access to diagnostics, vaccinations, treatments, and are dying at higher rates. At the same time, the federal government, states, localities, and health providers are taking dramatic actions to respond to the pandemic and other existing healthcare challenges, and they are being forced to take action without sufficient research and evaluations on the impacts of their decisions.

The Agency for Healthcare Research and Quality (AHRQ) supports research to improve health care quality, reduce costs, advance patient safety, decrease medical errors, and broaden access to essential services. As the lead federal agency for funding health services research (HSR) and primary care research (PCR), AHRQ is the bridge between cures and care, and ensures that Americans get the best health care at the best value. The RAND Corporation released a report in 2020 as called for by the Consolidated Appropriations Act of 2018, which identified AHRQ as “the only agency that has statutory authorizations to generate HSR and be the home for federal PCR, and the unique focus of its research portfolio on systems-based outcomes (e.g., making health care safer, higher quality, more accessible, equitable, and affordable) and approaches to implementing improvement across health care settings and populations in the United States.”

While the vast majority of federally funded research focuses on one specific disease or organ system, AHRQ is the only federal agency that funds research at universities and other research institutions throughout the nation on health systems—the “real-life” patient who has complex comorbidities, the interoperability of different technological advances, and the interactions and intersections of health care providers. For example, some recent failures in the COVID-19 response can be addressed with more attention to the root causes of, and strategies for, addressing barriers to healthcare access, including what can be done in primary care to address health equity, and more broadly what are the patient-oriented primary care quality measures that would facilitate more engaged patient care.

As the lead agency for health services research and primary care research, AHRQ provides the resources that policymakers, health system leaders, medical providers, and patients need to determine the effectiveness of health systems delivery. In order to deliver better outcomes, we need to be able to differentiate which healthcare interventions work, for whom they work, and how to implement them, and HSR, PCR, and AHRQ are the process through which we develop that knowledge. For example, the
effectiveness of a new vaccine is diminished if we do not have a robust delivery system that provides equitable access regardless of race, ethnicity, or income, and addressing questions like this is where AHRQ has a proven track record. Funding HSR and PCR through AHRQ is a key part of how we will best recover from COVID-19, prepare for the next pandemic, and address failures in the healthcare system that Americans continue to face.

The benefits of investing in health services research through AHRQ transcend the pandemic and provide benefits in saved lives, better value care, and improved patient outcomes across the health system. For example, the implementation of just one AHRQ-funded study on reducing hospital acquired conditions prevented an estimated 20,500 hospital deaths and saved $7.7 billion in health care costs from 2014 to 2017. To maximize the translation of research findings across the public health and health care continuum to improved patient care and keep pace with the rapidly evolving and changing health care landscape, additional investments in AHRQ are needed.

For these reasons, as you draft the Labor, Health and Human Services, Education, and Related Agencies appropriations legislation for fiscal year 2022, the undersigned members of the Friends of AHRQ respectfully request no less than $500 million in funding for the Agency for Healthcare and Research and Quality (AHRQ). This request reflects an inflation adjustment from FY10 and the demonstrated needs of the pandemic.

AHRQ is the federal vehicle for studying and improving the United States healthcare system, and it needs the resources to meet its mission and this moment. Through this appropriation level, AHRQ will be better able to fund the “last mile” of research from cure to care.

Thank you for your support of AHRQ and health services research. For more information, please contact Josh Caplan at Josh.Caplan@AcademyHealth.org.

Sincerely,

ABIM Foundation
Academic Pediatric Association
Academy of Medical-Surgical Nurses
AcademyHealth
Alliance for Aging Research
Altarum
AMDA - The Society for Post-Acute and Long-Term Care Medicine
American Academy of Allergy, Asthma & Immunology
American Academy of Dermatology Association
American Academy of Hospice and Palliative Medicine
American Academy of Neurology
American Academy of Nursing
American Academy of Pediatrics
American Association for Dental Research
American Association for Physician Leadership
American Association for the Study of Liver Diseases
American Association of Colleges of Nursing
American Association of Colleges of Osteopathic Medicine
American Association of Colleges of Pharmacy
ECRI
Federation of American Hospitals
Health Care Systems Research Network
Healthcare Information and Management Systems Society (HIMSS)
Heart Failure Society of America
Heart Rhythm Society
Johns Hopkins University & Medicine
Kaiser Permanente
Lakeshore Foundation
Lupus and Allied Diseases Association, Inc.
March of Dimes
National Association of Long Term Hospitals
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Athletic Trainers' Association
National League for Nursing
North American Primary Care Research Group
Nurses Organization of Veterans Affairs (NOVA)
Oncology Nursing Society
Pediatric Policy Council
Population Association of America
Preparedness and Treatment Equity Coalition
Public Health Institute
Research!America
Results for America
RTI International
Society for Maternal-Fetal Medicine
Society for Participatory Medicine
Society for Pediatric Research
Society for Women's Health Research
Society of Chairs of Academic Radiology Departments
Society of General Internal Medicine
Society of Hospital Medicine
Society of Teachers of Family Medicine
Spina Bifida Association
The American College of Preventive Medicine
The Hilltop Institute at the University of Maryland, Baltimore County (UMBC)
The Society for Healthcare Epidemiology of America
The Society for Public Health Education
The Society of Thoracic Surgeons
UCLA Fielding School of Public Health
University of California, Berkeley School of Public Health
University of Michigan – Institute for Healthcare Policy & Innovation
University of Rochester
University of Utah Health
University of Washington
UPMC
Vanderbilt University Medical Center
Wake Forest School of Medicine
Washington State University
Weill Cornell Medicine