March 16, 2022

The Honorable Rosa DeLauro  The Honorable Tom Cole  
Chair  Ranking Member  
Appropriations Subcommittee on Labor, Health  Appropriations Subcommittee on Labor, Health  
and Human Services, Education and Related  and Human Services, Education and Related  
Agencies  Agencies  
U.S. House of Representatives  U.S. House of Representatives  
Washington, DC 20515  Washington, DC 20515  

Dear Chair DeLauro and Ranking Member Cole: 

The COVID-19 pandemic has clearly revealed stress fractures in the US healthcare system and that 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, ethnic, geographic, and socioeconomic health disparities and inequities both within and beyond healthcare as people of color have disproportionately contracted COVID-19, are 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 have taken dramatic actions to respond to the pandemic and other existing healthcare challenges, and they are being forced to do so 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.” AHRQ offers valuable insights on every facet of the health care system. For example, the National Academy of Sciences, Engineering and Medicine 2021 report on Implementing High Quality Primary Care highlighted the value of and need for federal investments in AHRQ through the National Center for Excellence in Primary Care Research.

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 and trustworthy 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 2023, the 135 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 need to expand and accelerate HSR investments to inform decision-making on the health care system as it recovers from 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
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Academy of Medical-Surgical Nurses
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ACCP
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 Ambulatory Care Nurses (AAACN)
American Academy of Dermatology Association
American Academy of Family Physicians
American Academy of Hospice and Palliative Medicine
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Federation of American Hospitals
Healthcare Information and Management Systems Society (HIMSS)
Healthy Teen Network
Heart Failure Society of America
Heart Rhythm Society
Johns Hopkins Health System
Kaiser Permanente
Lakeshore Foundation
Lown Institute
Lupus and Allied Diseases Association, Inc.
March of Dimes
Marshfield Clinic Health System
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Athletic Trainers' Association
National Black Nurses Association
National Eczema Association
National Hispanic Medical Association
National League for Nursing
National Nurse-Led Care Consortium
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Society for Participatory Medicine
Society for Pediatric Research
Society for Public Health Education
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
Society to Improve Diagnosis in Medicine
Spina Bifida Association
The American College of Preventive Medicine
The Cecil G. Sheps Center for Health Services Research
The Hilltop Institute at the University of Maryland, Baltimore County (UMBC)
The Leapfrog Group
The Society of Thoracic Surgeons
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