November 12, 2015

Dear Chairmen Cochran and Blunt and Ranking Members Mikulski and Murray:

As you and your colleagues work with the House of Representatives on the Fiscal Year (FY) 2016 Departments of Labor, Health and Human Services, Education, and related agencies appropriations bill, we are concerned about the proposed 35 percent cut to the Agency for Healthcare Research and Quality (AHRQ) in the Senate’s bill approved by the Committee on Appropriations and the House bill’s proposed funding elimination for AHRQ. We understand you face impossible decisions when it comes to health spending, but deep cuts to AHRQ will only undermine health care system improvements and ultimately put patients’ safety at risk. As you work to enact final spending legislation for FY 2016, we respectfully ask that you protect and preserve funding for AHRQ with a $364 million investment.

Finding innovative and affordable new ways to deliver health care is one of the most important investments we can make as a nation. AHRQ is the only federal agency whose sole focus is to generate reliable and credible information on how to deliver the best possible care, at the greatest value, with the best outcomes. In this regard, AHRQ is an integral pillar of the federal health research continuum, and sits at a critical intersection—generating evidence to support the needs of delivery systems dedicated to providing quality care, and the needs of patients and payers who want to understand the actual performance of the delivery system. Biomedical research to discover and develop cures is important. But if we don’t have AHRQ-funded research and data to ensure we optimally deliver those innovations to the right patients, at the right times, in the right settings, we are falling short on our promise to American patients.

Cuts of the magnitude approved by Senate Appropriations Committee to AHRQ’s research and data collection portfolio will compromise many lifesaving research projects that prevent, mitigate, and decrease the number of medical errors and patient safety hazards. For example, AHRQ’s innovative Comprehensive Unit-based Safety Program or CUSP program reduced central line-associated bloodstream infections by 41 percent when implemented in more than 1,000 intensive care units nationwide. As a result, the program prevented more than 2,100
infections, saved more than 500 lives, and averted more than $36 million in unnecessary health care costs.

Such cuts will also devastate important data collection initiatives that provide the foundation for our understanding about health care costs, access, and delivery. For example, AHRQ’s Medical Expenditure Panel Survey or “MEPS” provides the only nationally representative source of annual data on how Americans, including the uninsured, use and pay for health care. Over the last couple of decades, this survey’s data have become the linchpin for our understanding about care utilization and expenditures, health disparities, and health care access and coverage.

Just as the U.S. government funds war colleges to maintain a strong national defense, AHRQ is an investment in the economic security of our nation’s health. We face major budgetary challenges, and about two-thirds of federal outlays track back to health care delivery. AHRQ’s research will help close this fiscal gap by better understanding how to eliminate the 30 percent of health care spending that is identified as inappropriate, ineffective, or harmful. Drastic cuts to the only federal agency that focuses solely on these issues could not come at a worse time. We urge you to make AHRQ and its important research a priority.

Sincerely,

RICHARD BLUMENTHAL
United States Senator

SHERROD BROWN
United States Senator

AL FRANKEN
United States Senator

EDWARD J. MARKEY
United States Senator

ELIZABETH WARREN
United States Senator