

United States Senate

WASHINGTON, DC 20510

March 17, 2016

The Honorable Roy Blunt
Chairman
Subcommittee on Labor-HHS-Education
Senate Appropriations Committee
135 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor-HHS-Education
Senate Appropriations Committee
156 Dirksen Senate Office Building
Washington, D.C. 20510

Dear Chairman Blunt and Ranking Member Murray,

As you and your colleagues begin work on the Fiscal Year (FY) 2017 Departments of Labor, Health and Human Services, Education and Related Agencies appropriations bill, we respectfully request that you include \$364 million for the Agency for Healthcare Research and Quality (AHRQ). This \$30 million increase over FY 2016 is consistent with the President's budget request and would restore the agency's funding to the FY 2015 level. More robust funding for AHRQ will show dividends as the agency generates evidence, data, and tools to make health care as effective, efficient, affordable, equitable, and safe as possible for American patients.

AHRQ is the only federal agency whose sole focus is to generate reliable and credible information on how to deliver the highest quality 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 by both generating evidence to support the needs of delivery systems, while also working to address the needs of patients and payers who want to better understand the performance of delivery systems. 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, we are falling short on our promise to American patients. Indeed, AHRQ is building upon and extending the work of its public and nongovernmental partners to improve patient care and health outcomes. For example:

- AHRQ will soon award a series of three-year research grants to advance implementation of Medication-Assisted Treatment (MAT) for opioid use disorder. These grants will focus on primary care practices in rural areas of the United States. In addition to expanding access to this evidence-based therapy in underserved communities, these research studies will discover and test solutions to overcoming known barriers to implementation of MAT in primary care settings. Further, they will create training and implementation resources supporting future

efforts to expand access to MAT.

- AHRQ recently published two new resources to help primary care clinicians and their patients make evidence-based decisions about which medications to use for treating alcohol use disorder. In the United States, more than 68 million people 18 years old or older suffer from alcohol use disorder at some point in their lifetime, making it the third highest risk factor for early death, aside from being overweight and tobacco use. In fact, people who suffer from alcohol use disorder are at least three times more likely to die early as those who do not.
- AHRQ's innovative Comprehensive Unit-based Safety Program to Prevent Healthcare-Associated Infections (CUSP)—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. The protocols have since been expanded to hospitals in all 50 states, the District of Columbia, and Puerto Rico to continue the national implementation of this approach for reducing healthcare-associated infections (HAI). AHRQ's ongoing and expanding HAI portfolio is well-aligned with the National Action Plan for Combatting Antibiotic Resistance, which calls on AHRQ to sponsor research that develops improved methods and approaches for combatting antibiotic resistance. Further, it calls on AHRQ to conduct prescription drug stewardship activities in multiple health care settings.

Because the federal government is the largest purchaser of health care—more than \$1 trillion per year and rising—it has a responsibility to fund research that determines how to get the most value out of every health care dollar. 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. We urge you to make AHRQ, and its important research, a priority in FY 2017.

Sincerely,



RICHARD BLUMENTHAL
United States Senator



KIRSTEN GILLIBRAND
United States Senator




SHELDON WHITEHOUSE
United States Senator



MARK R. WARNER
United States Senator



BENJAMIN L. CARDIN
United States Senator

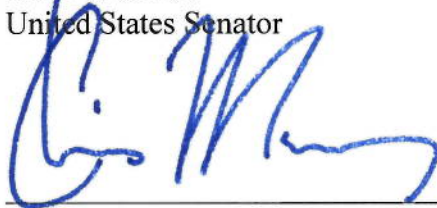

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