On behalf of Research!America, the nation’s largest not-for-profit education and advocacy alliance working to accelerate medical progress and strengthen our nation’s public health system, thank you for this opportunity to share our views on Fiscal Year 2019 (FY19) appropriations under the jurisdiction of the Subcommittee on Labor, Health and Human Services, Education, and Related Agencies. We are grateful that for FY18, the committee not only bolstered the base budgets of the National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC), and the Agency for Healthcare Research and Quality (AHRQ), but also provided dedicated funding for such escalating threats as the opioid crisis and antibiotic resistance and unique needs like the development of a universal flu vaccine. Our appropriations requests for FY19 focus on continuing to rebuild the base budgets of these agencies, since the dollars needed to address the opioid crisis and other discreet research and public health issues could well change over the course of FY18.

In that context, we request a discretionary budget increase of at least $2.215 billion for the National Institutes of Health, agency-wide funding of $8.445 billion for the Centers for Disease
Control and Prevention, and agency-wide funding of $454 million for the Agency for Healthcare Research and Quality.

**The National Institutes of Health drives the discovery of new treatments and cures**

NIH is the world’s leading funder of basic biomedical research, and Americans recognize the value this research delivers. Since 1992, Research!America has commissioned national and state-level surveys to gauge public sentiment on issues related to health research and innovation. One of the most consistent findings over time has been Americans’ support for basic research. In a recent survey, 64 percent of respondents agreed that “even if it brings no immediate benefits, basic scientific research that advances the frontiers of knowledge is necessary and should be supported by the federal government.”

More than 80 percent of NIH funding is awarded through almost 50,000 competitive grants to 300,000 researchers at more than 2,500 universities, medical schools, and other research institutions in every state and around the world. Research supported by NIH is typically at the early, non-commercial stages of the research pipeline; therefore, NIH funding complements critical private sector investment and development. The NIH also plays an essential role in educating and training America’s future scientists and medical innovators by sponsoring training grants and fellowships for biomedical- and health-focused graduate and medical students, postdoctoral researchers and young investigators-- a pivotal investment in America’s future research workforce.
NIH advances the interests of America and Americans in other crucial ways. For example, the All of Us Research Program at NIH seeks to collect data from one million people to help researchers uncover paths toward delivering precision medicine, accelerating research and improving health. The National Institute of Aging supports research on the health and well-being of older Americans and, through its Alzheimer’s Disease Education and Referral Center, provides information on age-related cognitive changes and neurodegenerative disease. The National Cancer Institute’s Cancer Moonshot aims to accelerate research and improve our ability to prevent and detect cancer. NIH also plays a pivotal role in the public-private research and development of countermeasures when epidemics and other global public health threats emerge.

We believe it is in the strategic interests of the United States to increase annual discretionary funding for NIH by at least $2.215 billion in FY19, and to supplement that increase by accelerating progress in key areas of opportunity and threat. Research!America believes this powerful infusion of funds is merited by the magnitude of our health challenges, the tangible and intangible costs of inaction, and the extraordinary return on medical progress.

**The Centers for Disease Control and Prevention safeguards the nation’s health**

CDC is tasked with protecting and advancing the nation’s health, and over the past 70 years it has worked diligently to thwart deadly outbreaks, costly pandemics and debilitating disease. Moreover, CDC plays a key role in research that leads to life-saving vaccines, bolsters defenses against bioterrorism and improves health tracking and data analytics. CDC’s work has benefited America and Americans in myriad ways, including dramatically reducing the incidence of child
lead poisoning, reducing deaths from motor vehicle accidents, containing dangerous pandemic and epidemics, achieving a significant expansion of newborn hearing tests and other screening measures and preventing millions of hospitalizations.

Ebola, Zika, Dengue fever, flu and other emerging health threats have shown just how critical CDC is to our nation, and have also revealed the enormity of the challenge the agency faces as it works to safeguard American lives. To protect our nation, CDC scientists must be on-the-ground fighting public health challenges wherever and whenever they occur. But there is an imbalance between the funding provided to CDC and its increasingly growing mission demands. We request that CDC receive at least $8.445 billion in FY19 to carry out its crucially important responsibilities.

**AHRQ provides best practices to keep health care costs under control**

AHRQ is the lead federal agency responsible for ensuring that medical progress translates into better patient care. The value of medical discovery and development hinge on smart health care delivery. Out of the $3 trillion annual spending on healthcare, an estimated 30 percent could be prevented by addressing error and inefficiency. AHRQ-funded research identifies and addresses this diversion of limited health care dollars, empowering patients to receive the right care at the right time in the right settings. One out of every 25 hospital patients are affected by healthcare-associated infections. AHRQ-funded research highlighted best practices for identifying methicillin-resistant *Staphylococcus aureus* (MRSA) in long-term care facilities as part of an infection control strategy that limits the exposure of MRSA-free residents.
From ensuring new medical discoveries reach doctors and patients as quickly as possible in rural as well as urban areas to deploying telemedicine and other health IT to address challenges in health care access and delivery, to cutting the number of deadly and preventable medical errors, AHRQ serves many critical purposes. If we underinvest in AHRQ, we are inviting unnecessary health care spending and squandering the opportunity to ensure patients receive the quality care they need. We ask that you commit to investing in life- and cost-saving health services research by funding AHRQ at $454 million in FY19.

Conclusion

There are few federal investments that convey benefits as important and far-reaching as funding for NIH, CDC and AHRQ: new cures, new businesses, new jobs; innovative solutions that improve health care delivery and optimize the use of limited health dollars; and a public health system nimble and sophisticated enough to meet daunting challenges to the health and safety of the American people. We appreciate your consideration of our funding requests and thank you for your stewardship over such critically important federal spending priorities.

Sincerely,

Mary Woolley
President and CEO
Research!America