

Congress of the United States
Washington, DC 20515

March 24, 2016

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

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

Dear Chairman Cole and Ranking Member DeLauro:

As you work to draft the Labor, Health and Human Services, Education and Related Agencies appropriations legislation for Fiscal Year (FY) 2017, the undersigned Members of Congress respectfully request that you provide the Agency for Healthcare Research and Quality (AHRQ) \$364 million in budget authority. This \$30 million increase over FY 2016 is consistent with the president's discretionary base budget request, and would restore the agency's funding to the FY 2015 level. We understand you face difficult tradeoffs under the austere spending caps, but 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.

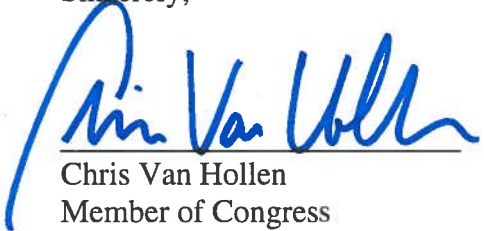
AHRQ is the only federal agency whose sole focus is to generate reliable and credible information on how to deliver the highest quality care, at the greatest value, with the best outcomes. In this regard, AHRQ is an integral pillar of the federal health research continuum, and sits at a critical intersection—generating 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 do not 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 ensure patients get the right care at the right time, every time. For example, AHRQ's innovative Comprehensive Unit-based Safety Program or "CUSP" 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.

AHRQ also supports 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.

AHRQ is an investment in the economic security of our nation's health. We face major budgetary challenges, as 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. We urge you to make AHRQ, and its important research, a priority in FY 2017.

Sincerely,


Chris Van Hollen
Member of Congress

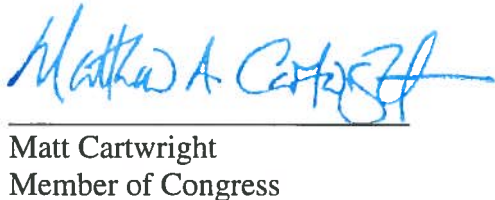

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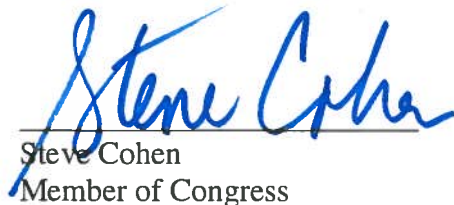

Michael E. Capuano
Member of Congress

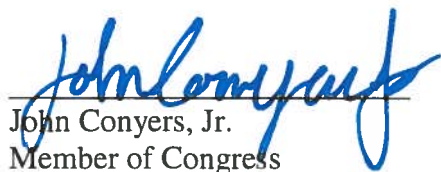

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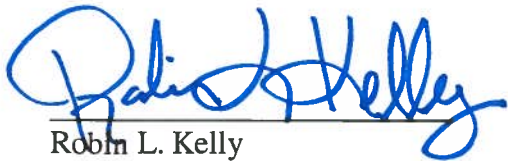
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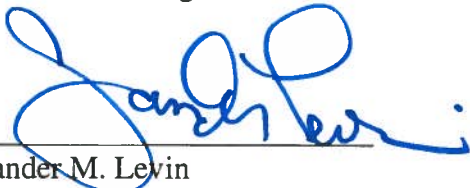
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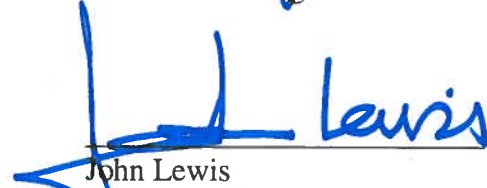
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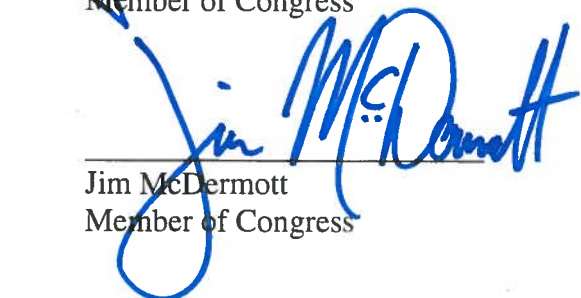
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