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[^0]April 9, 2015

The Honorable Thad Cochran Chairman<br>Committee on Appropriations<br>U.S. Senate<br>Washington, DC 20510

The Honorable Harold Rogers
Chairman
Committee on Appropriations
U.S. House of Representatives

Washington, DC 20515

The Honorable Barbara Mikulski Vice Chairwoman Committee on Appropriations
U.S. Senate

Washington, DC 20510

The Honorable Nita Lowey<br>Ranking Member<br>Committee on Appropriations<br>U.S. House of Representatives<br>Washington, DC 20515

## Dear Chairman Cochran, Vice Chairwoman Mikulski, Chairman Rogers and Ranking Member Lowey,

On behalf of the Board of Directors of Research!America, the nation's largest public education and advocacy alliance committed to elevating medical progress to a higher national priority, we are writing to thank you for your stewardship over our nation's discretionary funding priorities. As the House and Senate Appropriations Committees prioritize fiscal year 2016 (FY16) funding, we ask you to boost medical progress and bolster our nation's public health capacity by providing a meaningful increase over FY15 in the 302(b) allocation for the Departments of Labor, Health and Human Services (HHS), and Education and Related Agencies (Labor-H) Appropriations Subcommittee.

The National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC) and the Agency for Healthcare Research and Quality (AHRQ) all strengthen this nation by improving Americans' health and well-being. Restoring the Labor-H 302(b) to at least the FY10 level of $\$ 163.6$ billion would pave the path forward for sustainable increases in the budgets for these agencies. It is a fact that research improves American health, grows the economy and bolsters our national defense. But decades of austere budgeting have severely eroded purchasing power for these agencies.

In the face of waning funding for NIH, CDC and AHRQ, medical progress is at risk. Critical research is being cut back or eliminated at research institutions across the country as the percentage of grants NIH approves for funding is at historic lows, not because of an increase in submissions or a decline in impactful research ideas, but because inflation has severely eroded NIH's purchasing power. A funding increase in FY16 won't necessarily restore grant approval rates to historic levels, but it would meaningfully increase the volume of important
medical research. Public health threats, like Ebola, are a wake-up call for a greater commitment to the CDC for robust public health research, practice and preparedness on a sustained basis. AHRQ-supported research combats medical errors, improves the quality of care to help reduce the length and intensity of disability and disease, and identifies inefficiencies in health care delivery that inflate the cost of public and private insurance. Given the enormity of the challenge of inefficiency in health care delivery, AHRQ is severely underpowered.

Research!America appreciates the difficult task facing Congress as it seeks to simultaneously confront the federal deficit and debt, strengthen the United States and promote the well-being of Americans. We firmly believe that increased funding for NIH, CDC and AHRQ is a means of advancing all three of these fundamental goals. We hope that as you negotiate the 302(b) process, you will assign a top priority to assuring there is sufficient funding in the allocation for the Labor-H Subcommittee to enable these increases. We thank you and your respective staff members for your hard work, responsiveness and determination to advance the best interests of America and Americans. If you have questions about this letter, please contact Ellie Dehoney at (571) 482-2717 or edehoney@researchamerica.org

Sincerely,


Mary Woolley
President and CEO


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