

To: U.S. Senate Subcommittee on Labor, HHS, Education and Related Agencies Appropriations From: Dr. Lisa Simpson, President & CEO, AcademyHealth Re: FY 2020 Funding for Health Services Research at AHRQ

AcademyHealth is pleased to offer this testimony regarding funding for federal agencies that support health services research and health data, including the Agency for Healthcare Research and Quality (AHRQ). AcademyHealth works to improve health and the performance of the health system by supporting the production and use of evidence to inform policy and practice. We represent the interests of more than 4,000 health services researchers, policy analysts, and practitioners that produce and use health services research to improve our nation's health and the performance of the health care and public health systems. For fiscal year (FY) 2020, AcademyHealth recommends a funding level of \$460 million in budget authority for AHRQ, consistent with the agency's FY 2010 appropriated budget, adjusted for inflation.

Health services research is our nation's R&D enterprise for health improvement. Just as medical research discovers cures for disease, health services research discovers cures for the health system (see Figure 1). This research diagnoses problems in health care and public health delivery and identifies solutions to improve outcomes for more people, at greater value. And while biomedical and clinical research discoveries can take years and even decades to reach patients, discoveries from health services research can be used now by patients, health care providers, public health professionals, hospitals, employers, and public and private payers to improve care today.

Figure 1: The Health Research Continuum

These components of the health research continuum work in concert, and each plays an essential role—any one type of research on its own cannot effectively or appreciably improve health. Take heart disease as one example...

Basic research	Clinical research	Population-based	Health services
discovered the	determined which	research identified	research determined
contributions of	treatments were safe	strategies to reduce the	how to best deploy
elevated blood	and effective to treat	risks of heart disease in	these discoveries to
pressure, elevated	hypertension,	communities through	achieve the best health
cholesterol, and	hypercholesterolemia,	non-medical	outcomes. This
tobacco use to heart	tobacco addiction, and	interventions, such as	research helped
disease.	to prevent and treat	reduction of trans fats	identify who had the
	heart disease, in	in food and tobacco	least access, what
	general.	control measures to	barriers existed, and
	0	reduce smoking.	how to address them.
		C C	This research also led
			to the development of
			quality measures that
			are now used to report
			on the quality of
			cardiac care.

Source: *AHRQ: 15 Years of Transforming Care and Improving Health*, AcademyHealth, Jan. 2014. Available at: <u>http://academyhealth.org/files/AHRQReport2014.pdf</u>



Put plainly, health services research helps Americans get their money's worth when it comes to health care. We need more of it, not less. Despite the positive impact health services research has had on the U.S. health care system, and the potential for future improvements in quality and value, the United States spent less than one cent of every health care dollar on health services research.

As the largest purchaser of health care—more than \$1 trillion per year and rising—the federal government has an enormous stake in spending each health dollar wisely. Patients deserve health care that works for them, and taxpayers deserve smart spending. Indeed, in poll after poll, health care costs are consistently top of mind for Americans. As the lead federal agency for health services research, AHRQ is uniquely positioned to generate evidence to ensure Americans get the best care at the best value.

The vast majority of federally funded research focuses on individual diseases, organ systems, cellular, or chemical processes. AHRQ is the only federal agency that funds research at universities and other research institutions throughout the nation on the primary care and health <u>systems serving real patients</u>, those who have complex comorbidities, and the interactions and intersections of health care providers. AHRQ also provides the data needed to monitor the health care landscape nationally and within states, speeds new medical findings to health care providers and patients, and provides them with the tools and training they need to use those findings every day to improve the quality and safety of patient care.

An example of AHRQ's successful work includes efforts to reduce hospital acquired conditions. New, preliminary data from AHRQ finds that by implementing transformational, AHRQ-funded research, the Centers for Medicare and Medicaid Services (CMS) has reduced hospital-acquired conditions, and prevented an estimated 20,500 hospital deaths and saved \$7.7 billion in health care costs from 2014 to 2017.

In addition, AHRQ funded research grants are finding ways to ensure rural primary care practices are equipped to respond to the opioid crisis. An explosion in the incidence of opioid addiction and overdoses, particularly in rural areas of the country, has elevated this issue to crisis-level in the United States. Primary care practices are often the first line of defense against this and other substance use disorders.

AcademyHealth joins the Friends of AHRQ—an alliance of 150 health professional, research, consumer, and employer organizations that support the agency—in recommending \$460 million in budget authority for AHRQ in FY 2020, which is consistent with the FY 2010 level adjusted for inflation. This funding level would allow AHRQ to rebuild portfolios terminated as a result of years of past cuts and expand its research and training portfolio to address our nation's pressing and evolving health care challenges. Additionally, with a quarter of the agency's program level budget supported by the Patient-Centered Outcomes Research Institute and its associated trust fund, a strong investment in the AHRQ appropriation will be essential to sustain the agency's core activities as PCORI undergoes reauthorization this year. AcademyHealth has joined other groups to support the reauthorization of PCORI, but if those efforts fail, the loss of the trust fund would result in a 25 percent cut to AHRQ's budget that would cripple the agency's ability to achieve its important mission.

AcademyHealth is mindful that AHRQ and other domestic programs face a scheduled, statutory \$55 billion cut—11 percent across the board—if lawmakers are unable to enact legislation to raise the discretionary spending caps in FY 2020. Our proposed funding recommendation for AHRQ can only be achieved if such a bipartisan budget deal is reached. We have joined nearly 1,000 organizations across the research, public health, education, housing, natural resources, and other sectors in calling upon Congress and the White House to raise the caps before the end of the fiscal year, and we have endorsed the Investing in the People Act (HR 2021).

The accomplishments of the field of health services research would not be possible without the leadership and support of this subcommittee, and AcademyHealth recognizes the importance of investing federal funds strategically. We strongly believe that AHRQ more than earns a place among your appropriations priorities, and urge you to provide the agency

\$460 million in budget authority in FY 2020. Doing so would signal your continued commitment not just to produce discoveries for the *future*, but to produce science that translates medical progress into better care for patients *today*.

Thank you for considering our recommendation. For more information, including a copy of our report on AHRQ's contributions to improved health and health care over the years, please contact Dr. Lisa Simpson, President and CEO of AcademyHealth, at 202.292.6700 or <u>lisa.simpson@academyhealth.org</u>.