## **COUNCIL OF ACADEMIC FAMILY MEDICINE**

Association of Departments of Family Medicine Association of Family Medicine Residency Directors North American Primary Care Research Group Society of Teachers of Family Medicine







## Maintain the Agency for Healthcare Research and Quality (AHRQ): The Home of Primary Care Research

## **Recommendations:**

- Maintain AHRQ as an independent agency
- Support the primary care research function within AHRQ

**Background:** For FY 2018 and FY2019, the President's budgets eliminated AHRQ and moved some features of AHRQ into a new National Institute for Research on Safety and Quality. The Consolidated Appropriations Act of 2018 supported further study of health services and primary care research before considering a move.

The importance of AHRQ to primary care research: AHRQ supports primary care research around the country. In contrast, most other research funding supports one specific disease, organ system, cellular, or chemical process – not for primary care even though the overall health of a population is directly linked to its primary health care system. Primary care research includes: translating science into patient care, better organizing health care to meet patient and population needs, evaluating innovations to provide the best health care to patients, and engaging patients, communities, and practices to improve health. AHRQ has proved to be uniquely positioned to support and disseminate best practice research nationwide.

It is our hope that all of AHRQ's unique work continues and is enhanced in the future. Basic science and disease-specific research is the historic and current focus of the NIH. Primary care research in contrast has been underfunded within this framework. For example, less than 0.5% of NIH funding goes to family medicine researchers, and it is concentrated among a limited number of departments with little funding for new investigators. In contrast, AHRQ focuses on primary care research. Reduced levels of AHRQ funding have exacerbated the disparities in primary care research that the Agency has not been able to address.

There are six areas that AHRQ highlights that distinguish it from other federal biomedical research infrastructure: Practice-based Research Networks (PBRNs), practice transformation, patient quality and safety in non-hospital settings, multi-morbidity research, mental and behavioral health provision in primary care practices, and training future primary care investigators. AHRQ performs several unique roles.

- AHRQ's funds research into multiple chronic conditions a hallmark of primary care practice..
- AHRQ funds patient safety research. Highlighting the success of AHRQ's patient safety initiatives, a 2014 HHS report showed hospital care to be much safer in 2013 compared to 2010.
- AHRQ supports research to better understand how patients decide to seek care, how to introduce and disseminate new discoveries into real life practice, and how to maximize appropriate care.
- AHRQ provides the critical evidence reviews needed to answer questions on the common acute, chronic, and co-morbid conditions that family physicians encounter in their practices on a daily basis.
- AHRQ promotes evidence-based patient safety practices that is vital to a robust health care system that delivers higher quality of care and better health while reducing the rising cost of care.

An example of the unique nature of AHRQ work is research to optimize care for patients with Multiple Chronic Conditions (MCC). Funding cuts to AHRQ have eroded the initiative's ability to continue. It would have provided clinicians with evidence-based tools to develop integrated care plans that comprehensively reflect patients' health conditions, values, preferences, and relevant life circumstances as well as examine how new care models and services, which are transforming the health care delivery system, may better serve the needs of people with MCC.

AHRQ should remain an independent agency with a strong primary care research function.