



**American Hospital
Association**

Liberty Place, Suite 700
325 Seventh Street, NW
Washington, DC 20004-2802
(202) 638-1100 Phone
www.aha.org

July 26, 2012

The Honorable Harold Rogers
Chairman
Committee on Appropriations
U.S. House of Representatives
H-307 Capitol Building
Washington, DC 20515

The Honorable Norm Dicks
Ranking Member
Committee on Appropriations
U.S. House of Representatives
H-307 Capitol Building
Washington, DC 20515

Dear Chairman Rogers and Ranking Member Dicks:

I am writing on behalf of the American Hospital Association (AHA) to express our views regarding the Fiscal Year (FY) 2013 appropriations bill for the Departments of Labor, Health and Human Services, Education and Related Agencies (Labor-HHS) reported out of the subcommittee on July 18.

The AHA represents more than 5,000 member hospitals, health systems and other health care organizations, and 40,000 individual members.

Our nation faces serious fiscal challenges this year and in the future as Congress attempts to address our deficit while still ensuring our national needs are met. The AHA recognizes the fiscal constraints imposed upon the subcommittee. Accordingly, we are pleased that the subcommittee provides \$139 million, an increase of \$1.4 million above last year, for rural health programs for FY 2013. These health care programs are vital to ensuring that needed services remain available in America's rural communities.

Likewise, the AHA is pleased that the subcommittee is recommending \$275 million for the Children's Hospital Graduate Medical Education program (CHGME). This program supports the training of pediatric medical residents in Graduate Medical Education. Children's hospitals serve a unique role in our nation's health care system, training the next generation of pediatricians and pediatric sub-specialists and caring for some of our most vulnerable populations. Because our nation's children's hospitals typically treat very few Medicare patients, they receive no significant federal support for GME. The funding provided for CHGME by the subcommittee is vitally needed in the face of growing shortages throughout the nation.



The Honorable Harold Rogers
The Honorable Norm Dicks
July 26, 2012
Page Two

The AHA also strongly supports the subcommittee's inclusion of policies to curtail recent and impending actions of the National Labor Relations Board (NLRB) that are detrimental to employers and hospitals. These include: ensuring secret ballot elections during union organizing; prohibiting the implementation of electronic "card check"; prohibiting the establishment of "micro-unions"; preventing "quickie" elections that would require an election in as little as 10 days; and prohibiting the promulgation of rules requiring employers to disclose an otherwise confidential agreement when a consultant or lawyer provides advice to the employer regarding materials used for communication with employees about unions during a unionizing campaign.

But we are dismayed that the bill would terminate the Agency for Healthcare Research and Quality (AHRQ) and prohibit funding for patient-centered outcomes research. AHRQ-supported research is aimed at identifying systemic interventions that are likely to provide the greatest improvements in the safety and quality of patient care and improving efficiency in the care delivery system. Research accomplished by AHRQ provides health system leaders with valid and reliable information about the changes they can make that will improve the care for many patients. Patient-centered outcomes research is aimed at providing the best available evidence, through scientific research, to help patients and their providers make the most informed decisions about their care. We urge that funding be restored for AHRQ, and that funds also be made available for patient-centered outcomes research.

Lastly, the subcommittee bill rescinds funding that has previously been allocated for many health care programs designed to improve access to health care and prohibits funding for these programs in the future. We believe these programs are integral to improving the health care status of millions of Americans. The AHA urges the committee to restore funding to programs that will help expand and improve access to health care for the many citizens who do not now have health care coverage.

The impact of the decisions you make in your role as appropriators is far-reaching. The AHA appreciates the support you have provided in the past to ensure that vital health care programs and services remain available to all. We hope you will take our views into consideration as your deliberations on the FY 2013 funding for the Labor-HHS bill moves forward.

Sincerely,

Rick Pollack
Executive Vice President