

Coalition to Improve Diagnosis

An Initiative of the Society to Improve Diagnosis in Medicine

The Honorable Patrick Leahy
Chairman
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Richard Shelby
Vice Chairman
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Patty Murray Chairwoman Senate Labor, Health
and Human Services, Education, and Related Agencies
Appropriations Subcommittee
Washington, DC 20510

The Honorable Roy Blunt Ranking Member Senate Labor, Health
and Human Services, Education, and Related Agencies
Appropriations Subcommittee
Washington, DC 20510

Dear Chairman Leahy and Chairwoman Murray, and Vice Chairman Shelby and Ranking Member Blunt,

As you and your colleagues develop the FY22 Labor, Health and Human Services, Education, and Related Agencies Appropriations bill, the undersigned members of the Coalition to Improve Diagnosis respectfully request that you include a dedicated increase in funding for the Agency for Healthcare Research and Quality's (AHRQ) patient safety portfolio specifically to expand and accelerate the agency's work to improve diagnostic safety and quality. We commend the Appropriations Committees for your support of related funding over the past three fiscal years and urge you to allocate at least \$8 million in additional, dedicated funds for FY22 for these activities, matching the House-passed amount.

Diagnostic error is the most common, most catastrophic, and most costly of medical errors: evidence shows that they impact 12 million American adults in outpatient settings each year, with as many as a third suffering serious harm, and result in nearly 100,000 premature deaths in U.S. hospitals. Diagnostic errors also contribute more than \$100 billion a year in waste to the system in the form of unnecessary tests, treatments, and procedures on the one hand and progressed disease that is more difficult and expensive to treat on the other. Not surprisingly, missed, and delayed diagnoses are the largest source of malpractice payouts. For three years, ECRI, one of the nation's largest patient safety organizations, named diagnostic error the nation's number one patient safety risk, ahead even of opioids. As with so much in our healthcare system, minorities and in many instances women, suffer disproportionately from misdiagnosis.

According to the National Academy of Medicine's (NAM) 2015 report, *Improving Diagnosis in Health Care*, each of us is likely to experience a meaningful diagnostic error in our lifetime, sometimes with devastating consequences. The NAM report noted that "Improving the diagnostic process is not only possible, but it also represents a moral, professional, and public health imperative" and issued an urgent call for dedicated funding to address diagnostic errors and harms.

The Coalition to Improve Diagnosis is a collaboration of leading healthcare organizations focused on ensuring diagnoses are accurate, communicated, and timely. Our Coalition members represent hundreds of thousands of physicians, nurses, patients and their families, clinical educators, risk managers, testing professionals, researchers and more. We believe it is critical that Congress act on the NAM recommendation.

AHRQ is poised to help us meaningfully improve diagnostic safety and quality through a research and quality improvement pipeline modeled on the agency's highly successful efforts to combat Healthcare Associated Infections (HAI). While Congress has provided some limited funding for diagnosis improvement efforts in the past three years, this year the House has passed an increase of \$8 million in dedicated funding for these activities in the FY22 Appropriation. This is an important step toward a robust portfolio of work that will put life-saving tools and practices into the hands of healthcare systems, clinicians, and patients. On their behalf, we urge the Senate to at least match the House provision of \$8 million in dedicated funding.

Thank you for your consideration.

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