



# National Health Council

1730 M Street NW, Suite 500, Washington, DC 20036 • 202-785-3910 • [www.nationalhealthcouncil.org](http://www.nationalhealthcouncil.org) • [info@nhcouncil.org](mailto:info@nhcouncil.org)

Testimony of Myrl Weinberg, CAE  
President, National Health Council

Submitted to the House Appropriations Subcommittee on Labor, Health  
and Human Services, Education, and Related Agencies

Regarding Fiscal Year 2012 Department of Health and Human Services Appropriations

April 15, 2011

Dear Chairman Rehberg and Rep. DeLauro:

The National Health Council (NHC) is the only organization of its kind that brings together all segments of the health care community to provide a united voice for the more than 133 million people with chronic diseases and disabilities and their family caregivers. Made up of more than 100 national health-related organizations and businesses, its core membership includes approximately 50 of the nation's leading patient advocacy groups, which control its governance. Other members include professional societies and membership associations, nonprofit organizations with an interest in health, and major pharmaceutical, medical device, biotechnology, and insurance companies.

The NHC is well aware of the challenging fiscal environment facing the Subcommittee – indeed the entire country. We recognize that federal resources must be carefully targeted to ensure that such investments produce the greatest good for the American people. This will involve very tough decisions on health care priorities by the Subcommittee.

As work begins on the Fiscal Year (FY) 2012 Labor-HHS appropriations bill, the NHC urges the Subcommittee to take a “global” view of the health care system as it identifies funding priorities for the coming year. The NHC and its membership, particularly those groups representing the patient community, stress that no one aspect of the health care system – research, public health, health care delivery – can be considered as a separate, stand-alone component. For a true benefit and service to the American people, especially those living with chronic conditions, the health care system must function through the effective and productive interaction of its many parts.

NHC's members have specific interests that span the entire health care system. However, a recent survey of our members demonstrated that they share a common concern for the entire continuum of the health care system.

One aspect of the health care system that is of concern to the NHC is patient access to care. With health care costs rising and a growing number of uninsured Americans, far too many people living with chronic conditions are not able to access the care needed to maintain their health and

productivity. This is a concern not just for each individual patient but the health system as a whole, which will face greater costs due to declining public health. While the NHC views the entire health care system as important, we recognize that the most vitally important piece is for patients to be able to obtain high quality, patient-focused care. Without this, the various components are unable to serve their intended function and the system as a whole falters.

Another large concern of the patient community is the lack of effective cures and treatments. Too many people who are facing serious and life-threatening conditions are doing so without the hope of a cure or even a treatment for their symptoms. Funding for biomedical research at the National Institutes of Health (NIH) offers this hope. But the drug development pipeline does not end with the NIH. Many therapeutics are taking longer to reach patients due to a backlog at the Food and Drug Administration (FDA). While the scope of FDA regulation has grown to the point that it is now regulating one-third of the U.S. economy, the agency's funding has remained relatively consistent. This fact is troubling to the patient advocacy organizations that represent people who lack effective cures and treatments. Both NIH and FDA must be adequately funded to increase the likelihood that these patients will live longer, healthier, and more productive lives.

The NHC appreciates the opportunity to submit this written testimony to the Subcommittee. We understand that you face many hard decisions and again urge that you focus on the health care system as continuum that patients must be able to access in order to best serve the needs of Americans living with chronic conditions.

Attachment: Funding the Continuum of Care for Patients with Chronic Diseases and Disabilities



# National Health Council

1730 M Street NW, Suite 500, Washington, DC 20036 • 202-785-3910 • www.nationalhealthcouncil.org • info@nhcouncil.org

## Funding the Continuum of Care for Patients with Chronic Diseases and Disabilities

