

May 4, 2022

The Honorable Patrick Leahy
Chairman
U.S. Senate Committee on Appropriations

The Honorable Richard Shelby
Vice Chairman
U.S. Senate Committee on Appropriations

The Honorable Patty Murray
Chairwoman
U.S. Senate Committee on Appropriations
Subcommittee on Labor, HHS & Education

The Honorable Roy Blunt
Ranking Member
U.S. Senate Committee on Appropriations
Subcommittee on Labor, HHS & Education

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

The American Geriatrics Society (AGS) is a national non-profit organization comprised of nearly 6,000 geriatrics healthcare professionals and basic and clinical researchers specializing in aging. The AGS believes in a just society – one where we all are supported by and able to contribute to communities and where ageism, ableism, classism, homophobia, racism, sexism, xenophobia, and other forms of bias and discrimination no longer impact healthcare access, quality, and outcomes for older adults and their caregivers. We advocate for policies and programs that support the health, independence, and quality of life of all of us as we age.

The AGS appreciates your collective support of the National Institute on Aging (NIA). Since it was established in 1974, the NIA has supported groundbreaking research on the diseases and disorders of aging which has improved the health and quality of life of all Americans as we age. We respectfully request your support for increased fiscal year (FY) 2023 funding for aging research efforts at the National Institutes of Health (NIH) and the National Institute on Aging (NIA) within the U.S. Department of Health & Human Services (HHS).

As a member of Friends of the NIA (FoNIA)—a broad-based coalition of aging, disease, research, and patient groups committed to the advancement of medical research that affects millions of older Americans—**the AGS urges you to include \$49 billion, a \$4.1 billion increase over the enacted FY 2022 level, in the FY 2023 budget for total spending at NIH for current institutes and operations. We strongly recommend ensuring that any funding for the Advanced Research Projects Agency for Health (ARPA-H) supplement, not supplant, the total \$49 billion base budget recommendation. The AGS also supports an increase of at least \$60 million in the FY 2023 budget for the Brain Research Through Advancing Innovative Neurotechnologies (BRAIN) Initiative, and a minimum increase of \$226 million for research on Alzheimer’s disease and related dementias over the enacted FY 2022 level.**

The COVID-19 public health emergency has significantly and disproportionately impacted older, medically complex individuals. The toll taken by the pandemic among our older loved ones has brought into sharp focus the need to increase research at the NIA, and across NIH, on the nature of aging— including its biology and impact on disease and disability, and the role of social determinants of health

on our bodies and minds as we age—so we can identify the most effective interventions for age-related diseases, disorders, and disabilities. Furthermore, there is emerging evidence that post COVID-19 condition, often referred to as Long COVID, affects approximately 31 percent of individuals in the U.S.¹ We support continued funding for research that advances medical understanding of post COVID-19 condition and real-time results to support providers in developing best practices for care.

The AGS believes that sustained and enhanced federal investments in aging research are essential to delivering high-quality, coordinated, and efficient care to older adults, whose numbers across the U.S. are projected to increase dramatically in the coming years. According to the U.S. Census Bureau, the number of people age 65 and older is projected to nearly double from 52.4 million today² to more than 94 million by 2060,³ while those 85 and older is projected to almost triple from 6.6 million today to 19 million by 2060.⁴ As our aging population increases, so too will the prevalence of diseases disproportionately affecting older people—most notably Alzheimer’s disease and related dementias (including vascular, Lewy body, and frontotemporal dementia)—and the economic burden associated with these diseases. By 2060, for example, the number of people affected by dementia is estimated to reach 12.7 million cases—nearly triple the number in 2021.⁵ Chronic diseases related to aging, such as diabetes, heart disease, and cancer continue to afflict 80 percent of people 65 and older.⁶ Further, 40 percent of Medicare beneficiaries have four or more chronic conditions and account for 78 percent of Medicare expenditures.⁷

As we know you appreciate, the NIA sponsors and conducts most federal aging-related research and applies scientific advancements to enhance the health, safety, and independence of older adults. The ongoing federal commitment to investments in science, research, and technology leads to cutting-edge discoveries in medicine and improved patient care and reduced costs. Breakthroughs from NIH research can not only delay the onset of costly age-related diseases but also can save trillions of dollars by the middle of the current century. The AGS urges Congress to strengthen its commitment in FY 2023 so that we may advance medicine to improve care quality and fully achieve the goals of delivery system reform.

¹ Chen C, Hauptert SR, Zimmermann L, Shi X, Fritsche LG, Mukherjee B. Global Prevalence of Post COVID-10 Condition or Long COVID: A Meta-Analysis and Systematic Review. [published online April 16, 2022]. *J Infect Dis*. 2022. doi:10.1093/infdis/jiac136

² U.S. Census Bureau. 2020 American Community Survey 5-Year Estimates Subject Tables. Available at <https://data.census.gov/cedsci/table?t=Populations%20and%20People&tid=ACST5Y2020.S0101>.

³ U.S. Census Bureau. An Aging Nation: Projected Number of Children and Older Adults. Updated October 8, 2019. Accessed April 25, 2022. <https://www.census.gov/library/visualizations/2018/comm/historic-first.html>.

⁴ U.S. Census Bureau. Projected Age and Sex Composition of the Population. Updated October 8, 2021. Accessed April 25, 2022. <https://www.census.gov/data/tables/2017/demo/popproj/2017-summary-tables.html>.

⁵ Alzheimer’s Association. 2021 Alzheimer’s Disease Facts and Figures. *Alzheimers Dement*. 2021;17(3):327-406. doi:10.1002/alz.12328

⁶ National Prevention Council. Healthy Aging in Action: Advancing the National Prevention Strategy. Published November 2016. Accessed April 26, 2022. <https://www.cdc.gov/aging/pdf/healthy-aging-in-action508.pdf>. (Page 11)

⁷ Centers for Medicare and Medicaid Services. Chronic Conditions Charts: 2018. Published 2018. Accessed April 26, 2022. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/Chartbook_Charts.

Thank you for your consideration of this funding request. If you have comments or questions about NIH funding or other issues related to the healthy aging of older Americans, please contact Anna Kim, Senior Manager of Public Affairs & Advocacy, at 212-308-1414 or akim@americangeriatrics.org.

Sincerely,

Handwritten signature of Peter Hollmann MD in black ink.

Peter Hollmann, MD
President

Handwritten signature of Nancy E. Lundebjerg in black ink.

Nancy E. Lundebjerg, MPA
Chief Executive Officer

May 4, 2022

The Honorable Rosa L. DeLauro
Chairwoman
House Committee on Appropriations
Chairwoman
Subcommittee on Labor, HHS & Education

The Honorable Kay Granger
Ranking Member
House Committee on Appropriations

The Honorable Tom Cole
Ranking Member
House Committee on Appropriations
Subcommittee on Labor, HHS & Education

Dear Chairwoman DeLauro, Ranking Member Granger, and Ranking Member Cole:

The American Geriatrics Society (AGS) is a national non-profit organization comprised of nearly 6,000 geriatrics healthcare professionals and basic and clinical researchers specializing in aging. The AGS believes in a just society – one where we all are supported by and able to contribute to communities and where ageism, ableism, classism, homophobia, racism, sexism, xenophobia, and other forms of bias and discrimination no longer impact healthcare access, quality, and outcomes for older adults and their caregivers. We advocate for policies and programs that support the health, independence, and quality of life of all of us as we age.

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