Dear Chairman Blunt and Ranking Member Murray,

The undersigned patient, provider, and public health organizations write today to urge you to allocate additional funding for fiscal year 2018 in support of the Centers for Disease Control and Prevention’s (CDC) Arthritis Program. As you await the revised 302(b) funding allocations for the current fiscal year, made available through the bipartisan budget agreement reached by Congress earlier this month, it has never been more critical to support the CDC’s Arthritis Program on behalf of the 54 million adults and 300,000 children with doctor-diagnosed arthritis in the United States.

The CDC Arthritis Program carries out important public health research and data collection; in fact, it is the only federal program dedicated solely to arthritis, collecting data vital to understanding arthritis prevalence, trends, and factors impacting quality of life for individuals with this chronic disease. The program also works with state arthritis programs, national organization partners, and other leading experts in the field to implement proven interventions that reduce pain, better manage symptoms, and improve quality of life.

As an example, thanks to the research undertaken at the CDC Arthritis Program over the last year, we now know that the overall economic burden associated with arthritis is $300 billion annually. This stunning figure has more than doubled over the last decade. To put this into perspective, the annual economic cost of arthritis surpasses that of tobacco-related health effects, cancer, and diabetes. However, years of cuts or flat-funding have caused resources for arthritis to lag behind – at a time when the number of people affected by the disease is growing and expected to conservatively reach 78 million by 2040. It is time for the federal investment in arthritis programs to match the disease burden.

For those reasons, we respectfully request a $5 million increase in federal funding for the CDC Arthritis Program for the remainder of fiscal year 2018. This modest increase would allow the program to operate in two additional states and conduct impactful research on arthritis prevalence, comorbidities, health disparities, and disabilities/limitations associated with the disease, among other critical work.

We thank you for your leadership and commitment to public health research and data collection. It is essential that we continue to deploy and disseminate evidence-based, cost-effective strategies to control the nation’s leading cause of disability. We look forward to working with you in the days and weeks ahead.

Sincerely,

American College of Rheumatology
Arthritis Foundation
Coalition of State Rheumatology Organizations
National Association of Chronic Disease Directors
National Psoriasis Foundation
National Recreation and Park Association
Sjögren’s Syndrome Foundation
Spondylitis Association of America
United States Bone and Joint Initiative
YMCA of the USA