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## Federal cuts to health-care research and quality agency make Missouri hospitals less safe

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The Trump administration recently slashed funding for the federal Agency for Healthcare Research and Quality (AHRQ), an agency that works to improve our health-care system. Such budget cuts threaten to make Missouri hospitals less safe, less effective and potentially more prone to devastating medical errors.

While not as well-known as other federal health-care agencies, AHRQ is the only agency that works to improve the health-care system itself.

Dr. Mary Politi, a researcher at Washington University in St. Louis, explained its significance: 'We have some very effective medications and treatments, but if people cannot access or use them safely and appropriately, they won't work as well. AHRQ helps study the ways to make health care work for people in real-world settings.'

The U.S. Department of Health and Human Services plans to reduce AHRQ staff by as much as 80 to 90% and merge it with another office. Researchers we spoke to say the agency has stopped approving new grants, and more concerningly, all of the AHRQ grant administration staff were laid off in mid-July. As multi-year grants need to be re-approved every year by these staff, this means existing grants will likely not continue past the current year.

Such cuts are especially concerning in Missouri.

Despite receiving over \$9 million in AHRQ grants, it still has one of the worst-performing health-care systems in the nation. Missouri currently ranks 44th in maternal mortality rates, and 50th on avoidable hospital use and cost.

Before the budget cuts, Politi had hoped to use AHRQ funding to make health care in Missouri safer for older adults.

There are some patients that have symptoms of normal aging that are hard to distinguish from infections and so there are some people that might be getting overprescribed antibiotics, which can lead to adverse effects, Politi explained.

She wants to investigate where and why such prescribing errors occur so they can be prevented in the future. Now, however, she fears the study may never become a reality.

The stakes of not funding this kind of research are high. In 2015, a landmark report found most people in the U.S. will experience at least one incorrect or delayed medical diagnosis in their lifetime.

When quality or safety breaks down, the results can be tragic.

In April, Mercy Hospital in St. Louis County paid \$48.1 million to settle a malpractice case that left a child permanently disabled. Additionally, because these health centers are not liable themselves, taxpayers often foot the bill. Even before the Mercy Hospital case, these suits cost taxpayers in Missouri and Kansas \$21 million between 2018 and 2022.

By contrast, when AHRQ funding is plentiful and used well, the positive impacts are easy to see. Barnes-Jewish Hospital in St. Louis particularly stands out in terms of its impressive hospital quality. Dr. Virginia McKay, another Washington University researcher, emphasized that when researchers in Missouri develop new ways to improve care, local patients are often the first to benefit.

It really does foster leading-edge, high-quality care for kids and for adults that then St. Louisans get access to, and people in the region get access to, McKay said. In many ways, [St. Louis] Childrens' and Barnes-Jewish [hospitals] set national and global standards for care quality for the patients. And again, that's now going away.

McKay's own AHRQ-funded study examined how to reduce the unnecessary use of antibiotics during surgery. Similarly, researchers at Childrens' Mercy Hospital in Kansas City used AHRQ funding to help standardize antibiotic prescription for children. And researchers at University of Missouri-Columbia used AHRQ funding to improve how doctors decide what to prescribe to patients with hypertension.

Unfortunately, no other federal agency is clearly equipped to pick up where AHRQ leaves off.

Policymakers should act now to restore and safeguard AHRQ's funding, either by reestablishing it as a fully independent agency or by creating a dedicated budget within the Department of Health and Human Services.

Additionally, Congress should pass legislation requiring minimum annual funding levels for health-care-improvement research. These steps would help ensure that states like Missouri can provide the safe, high-quality health care that Missourians deserve, and patients across the country benefit from safer, more effective care.

*Robert Weiner was a spokesman in the Clinton and Bush White Houses and was chief of staff of the House Aging Committee and its Health Subcommittee for Chairman Claude Pepper. He also was spokesman/senior staff for Congressmen John Conyers, Charles Rangel, Ed Koch, Sen. Ted Kennedy and four-star Gen./Drug Czar Barry McCaffrey*

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Robert Weiner <https://weinerpublic.com/rweiner.jpg>

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