HEALTH IT IN THE AGE OF GOVERNMENT AUSTERITY

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Senate Appropriations Subcommittee on Labor, HHS, & Education
Total Labor-HHS spending is $15 billion lower today than if it had just kept up with inflation since 2004.
Discretionary Spending Caps

“Pre-Sequester”

Murray-Ryan Budget & Current Law

“Post-Sequester”
Examples of HHS Proposed Cuts

- Community Health Centers: -$495 million
- HRSA Bureau of Health Professions: -$370 million
  - Children’s Hospital GME: -$265 million
- Low-Income Home Energy Assistance: -$625 million
- Community Services Block Grant: -$324 million
Riders We’ve Seen… and may see again

- Eliminate ICD 10 requirements
- Waive all provider penalties for not complying with Electronic Health Record Requirements
- Prohibit NIH Big Data project
- Prohibit NIH Health Economics research
- Cut CMS funding by $1 billion
Bills That Need Offsets

- SGR expires at the end of the year
- Tax Extenders
- Children’s Health Insurance Program expires at the end of the year
- Community Health Centers
  $3.6 billion operating cliff
- Response to MERS-V?
- Response to Wildfires?
Key Dates

- **April 4th**: LHHS request deadline
- **May 20th**: Georgia GOP primary
- **May 22nd**: Subcommittee Allocations
- **Senate bill?**
- **July**: possible Georgia GOP run-off, **House Bill?**
- **August 1**: Summer recess begins
- **September 30th**: End of fiscal year
- **November 4th**: Midterm election
If you don’t know... NIH mHealth grants

NINR research topics include the development, testing and/or comparison of:
- effective strategies that use mobile tools to improve patient-provider communications;
- mobile tools that improve adherence to treatment;
- mobile tools that facilitate effective self-management;
- technologies that incorporate interventions for adherence and self-management strategies;
- Mobile health technologies or tools in underserved populations.

NIBIB topics include the development and testing of:
- Integrated, portable imaging tools that monitor health as part of point-of-care diagnosis & treatment;
- Tools that enhance the visualization and psychophysical understanding of complicated health information on mobile devices with a local cultural context;
- Decision support systems that provide guidance and a framework for shared decision-making with medical professionals;
- Networked, citizen-driven approaches to engage people in improving their health;
- Tools using telemetry and remote access to acquire, analyze and monitor biomedical data;
- Software and hardware for telehealth technology and studies.
If you don’t know…NIH BRAIN Initiative

FY 2014 = $40 million
President’s request for FY 2015 = $100 million

The first phase is all the creation of new imaging techniques
creating new forms of data to analyse

- Microscopes that can look at larger sections of a brain
- “Optical needles” that can penetrate a brain’s deep tissues
- New methods enable researchers to activate cells inside a living animal
- Optogenetic techniques deliver light-sensitive molecules to target cells, then stimulate them with light pulsed through a fiber-optic implant.
- Recording neuronal activity through flexible sheets fashioned from hundreds of thousands of nanowire electrodes.
If you don’t know….NIH BD2K Initiative

Big Data to Knowledge (BD2K)

Current biomedical studies create large, complex, and diverse datasets. Once findings are published, scientists create a new data set for future research studies.

BD2K is 2 ideas

Small Idea: Create new software and tools, train biomedical researchers on using big data.

Big Idea: Organize raw data from every NIH funded research lab so that all researchers can access it.
Any Questions?  Find me on LinkedIn.