

OTA R.I.P.

Karen Bandy

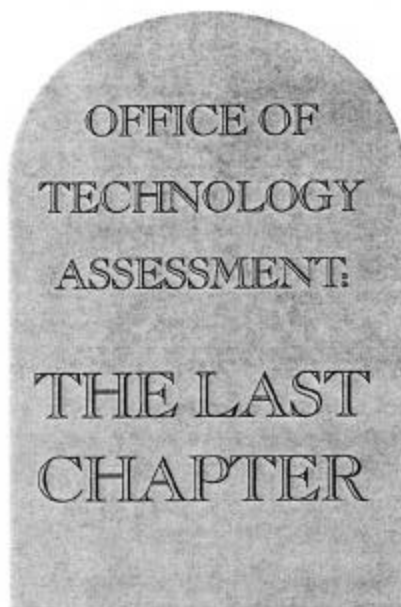
The Project Director for *Bringing Healthcare Online: The Role of Information Technologies*
sent us notes on this report — one of the last official publications of the OTA

TT asked Karen Bandy, Senior Analyst at the moribund Office of Technology Assessment, to send us her thoughts about the role of the OTA and what its loss will mean to the American public and to the process of congressional decision-making. We are proud to provide this forum for her.

The Office of Technology Assessment, which published *Bringing Health Care Online* (see book review this issue) ceased to operate on September 29, 1995. OTA was created in 1972 to provide non-partisan analysis of technology issues for the US Congress. It operated under the authority of a Technology Assessment Board made up of 12 members of Congress, equally divided between House and Senate, Democrat and Republican. With the board's approval, OTA accepted requests from committee chairmen and ranking minority members to assess the likely positive and negative consequences of congressional policies toward technology. Because OTA had a small in-house staff (about 150), and because its goal was to examine many points of view in order to clarify the issues, OTA invited people from academia, industry, interest groups, and government to take part in OTA studies as reviewers, advisors, and workshop participants. This process allowed Congress the benefit of a great deal of essentially free expertise, while at that same time insuring that a variety of stakeholder views were fairly represented.

OTA was closed in order to save money. Eliminating OTA's \$22 million and 150 staff positions helped Congress meet its new austere budget total of \$2 billion and allowed congressional budget-cutters to boast that they had eliminated a whole agency.

I think Congress made a mistake. I should point out that I have a biased view. I worked at OTA from 1979 until its closing. Bias aside, it is very easy to document that OTA's assessments over the past 23 years have saved the nation billions of dollars. For example, OTA's assessment of effective preventive services for the elderly led to Medicare policies that are estimated to save \$5 billion per year; its skeptical analysis of the Synthetic Fuels



Corporation saved an estimated \$60 million and changed the direction of energy research; and its analysis of the high risks and basic scientific weaknesses of the proposed "Star Wars" missile defense system helped Congress decide to curtail funding of that high-cost item. With the rapid change in technologies of all kinds, and the continuing pressure to create high cost government programs, Congress needs OTA's work now as much as it ever has.

Congress and Information

Senator Mack of Florida, who led the campaign against OTA, says that OTA is not needed because there is plenty of information about technology in the private sector. In my personal view, OTA is needed precisely because of that information. Overburdened congressional members and staffers, rushing to get this week's legislation through the mill, are usually not able to look at long term consequences. They sometimes do not have time or means to contact the people or groups that have a legitimate interest in an issue, but cannot afford a lobbyist. They often don't have the expertise to determine which technical reports are biased in favor of a particular industry. Committees may hire expert consultants to help them (as OTA often did), but the contracting process will be expensive and inefficient if handled on a committee-by-committee basis. Plowing through an avalanche of information, without a full-time, in-house capability for filtering and assessing it, is likely to increase the confusion, expense, and risk involved in dealing with technology issues in Congress.

My View of What Happened

When the closing of OTA was first proposed, in a resolution of the majority caucus shortly after the 1994 election, I believe that many of OTA's supporters (both Republican and Democrat) either did not take the threat seriously, or were too much in awe of the new Republican momentum to take early corrective action. By last summer, when the appropriations process was in full swing, the

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OTA R.I.P. *continued*

majority leadership was treating the closure as a fait accompli and OTA's friends had to stage dramatic, but ultimately unsuccessful, fights on the floor of the House and Senate.

In my view, OTA has been closed, not because it had too few friends, but because there were too few on Capitol Hill who owed OTA big favors. The trading of favors, or "chits", is the backbone of the political game. The successful politician is one who artfully creates situations that put others into his or her debt and who remembers the accounts of owed and owing down to the least significant figure.

When the chips are down, chits are called in; and in a close vote it is chits, not facts, issues, or even beliefs, that make the difference.

OTA didn't play the chit game. Individually and institutionally we believed that the facts and issues were important, and that we were supposed to be neutral analysts of them. We ignored the process that true Hill insiders, whether members or staff, find as basic as eating or sleeping. They thought we were either

extraordinarily arrogant or incurably naive. We, in our arrogance and naiveté, thought that remaining aloof from the political process would protect us.

And perhaps we were protected, for a time. As one of OTA's assistant directors pointed out in a final message to staff, the amazing thing is not that a political entity like Congress would close OTA, but that it would allow OTA to operate for as long as it did. Playing politics would have reduced OTA's credibility, and a misstep might have resulted in scandal, notoriety, and closing long ago. As it is, we can go out with our heads up, our reputations reasonably intact, and with the respect of those whose respect is worth having.

Congress has not actually abolished OTA, merely chosen not to fund it; the legislation creating the agency is still on the books. In the long run, I believe that the needs fulfilled by that legislation will once again be recognized, and that something like OTA will be created.

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NEW BOOKS

Ryder, Jeanne C. **A Pocket Tour of Health & Fitness on the Internet.** Sybex, San Francisco, 1995. ISBN: 0-7821-1711-2

Satava, Richard M.; Morgen, Karen; Sieburg, Hans B.; Mattheus, Rudy; Christensen Jens. (Eds). **Interactive Technology and the New Paradigm for Healthcare.** IOS Press, Amsterdam, 1995. ISBN: 90-5199-201-7.

Van Gennip E.M.S.J; Talmon J.L. **Assessment and Evaluation of Information Technologies in Medicine.** IOS Press, Amsterdam, 1995. ISBN: 90-5199-200-9.

Karinch, Maryann. **Telemedicine: What the Future Holds When You're Ill.** New Horizon Press, Far Hills, NJ 1994. ISBN 0-88282-130-X. *Reviewed this issue.*

Bandy, Karen G. (Project Director) **Bringing Healthcare Online: The Role of Information Technologies.** Office of Technology Assessment, Congress of the United States. U.S. Government Printing Office, ISBN: 0-16-048292-5. Limited availability; the OTA has been dismantled. *Reviewed this issue.*

Tintman TC, McCaughan WT. Telemedicine in rural correctional facilities: programs of the University of Texas Medical Branch in Galveston and Texas Tech University Health Sciences Center.

Seale DE. The Golden Crescent interactive network: building a rural information super highway.

Brown M. Technology based training via Wide Area Networks.

Walker J, Gynn AZ. A glossary of telecommunications terms for telemedicine and distant learning.

BOOK Review

Bringing Healthcare Online:
The Role of Information Technologies.
U.S. Government Printing Office, ISBN: 0-16-048292-5.

Karen Bandy, Project Director for this book, sent us notes on this 229-page report - one of the last official publications of the OTA (see OTA R.I.P., p.7).

Information technologies are transforming the way health care is delivered. Innovations such as computer-based patient records, community health information networks, telemedicine, and new ways of distributing health information to consumers are beginning to affect the cost, quality, and accessibility of health care.

Bringing Health Care Online: The Role of Information Technologies, prepared by the congressional Office of Technology Assessment, also points out that computers are widely deployed in health care, but that they are not widely connected. Technologies for collecting, distilling, storing, protecting, and communicating data are still limited to scattered islands of automation. Standards development plays a central role in improving the exchange of medical information. Although standards setting is primarily a private-sector activity, the process could be accelerated through federal participation in developing standards that would encourage information exchange and protect the privacy of participants in the health care system.

The report devotes a chapter to telemedicine, discussing telemedicine's potential effects on costs, access, and quality of care, and providing updated summaries of activities of a number of telemedicine projects in the US and abroad. It also discusses issues, many of them nontechnological, that are barriers to widespread diffusion of telemedicine. These include: reimbursement issues; lack of research and experience; legal and regulatory issues, including licensing and credentialing, liability, and privacy; the telecommunications infrastructure; and the human infrastructure and human factors issues.

Among the suggested options for congressional action are: continued funding for telemedicine demonstration and evaluation; incentives to encourage cooperative efforts and consortia; improved mechanisms for disseminating research results; adequate funding for experiments demonstrating alternative approaches to reimbursement.

Bringing Health Care Online, as well as other recent OTA reports, will soon be available online at <http://www.ota.gov/>. Hard copies continue to be available for purchase from the Government Printing Office at (202)512-1800. In addition, a CD-ROM collection of the complete OTA series is now being prepared and should be available from the Government Printing Office in early 1996. **TI**