Health Economics in Planning, Evaluation and Policy Research at HHS

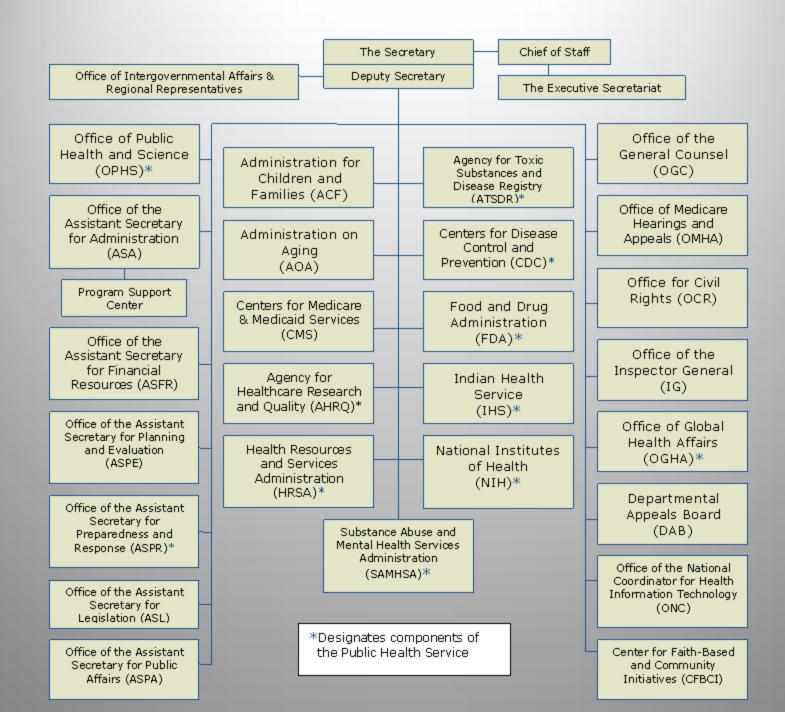
Laina Bush

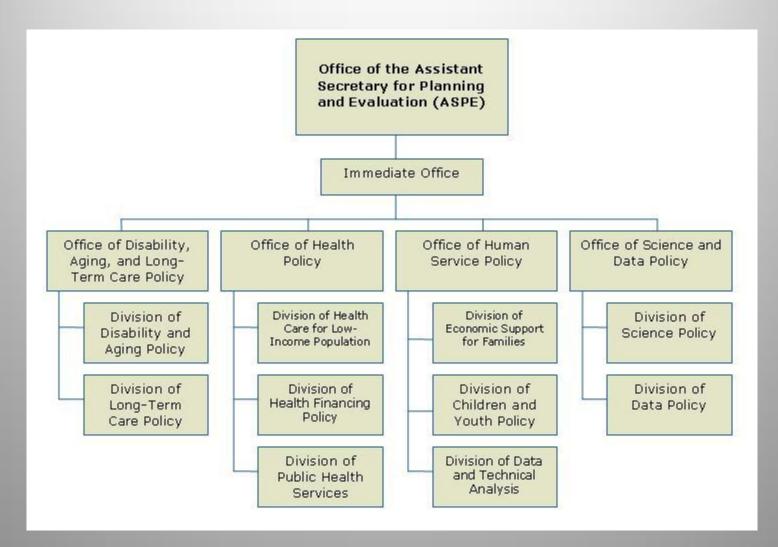
Associate Deputy Assistant Secretary for Planning and Evaluation, Science and Data Policy

Office of the Assistant Secretary for Planning and Evaluation Department of Health and Human Services

ASPE

Principal advisor to the Secretary of HHS on policy development in health, disability, aging, human services and science





ASPE Functions

- Policy Analysis and Development
- Policy Research, Evaluation, and Data Collection
- Policy and Program Planning
- Policy Implementation

Selected ASPE Projects

Nutritional Risk Assessment Conference: Perspectives, Methods, and Data Challenges

 ASPE, with the Interagency Risk Assessment Consortium, the Institute of Medicine's Food Forum, and the International Life Sciences Institute, held a workshop in February of 2007 to explore questions and challenges faced by nutritionists and the potential use of risk assessment to answer them.

Nutritional Risk Assessment Conference Key areas of discussion

- Discuss strengths and challenges of using various risk assessment approaches to inform dietary and nutritional recommendations
- Explore the use of risk assessment approaches to evaluate standards for nutrient intake and the relationship of diet and nutrition to chronic disease risk
- Identify next steps to make progress in these areas

Nutritional Risk Assessment Conference Next Steps

- Conduct a trial risk assessment of a single nutrient.
- Conduct methodological research for nutrition risk assessment.
- Urgent need for nutrition data suitable for risk assessment.
- The workshop summary is available through the Institute of Medicine Press.

Research to Support the 2010 Dietary Guidelines

- The 2005 Dietary Guidelines Advisory Committee identified research areas where improvements in understanding could aid the development of the 2010 Dietary Guidelines.
- Barriers to Consumers' Adoption of the Dietary Guidelines with Abt Associates
- Adaptation of Adult-Based Dietary Guidelines for Children: Current Practice, Knowledge Gaps and Policy Implications with Mathematica

Barriers to Consumers' Adoption of the Dietary Guidelines

- An examination of the literature to identify those sub-populations at most health risk due to lack of compliance with the dietary recommendations in the *Dietary Guidelines*,
- identify the dietary shortcomings faced by the subpopulations,
- ascertain the barriers these groups are facing to adopting a healthy diet, and
- summarize the best current strategies and approaches that are being used to address these barriers.

Key Findings

- The high cost or perceived high cost of food was the most often cited barrier, however, no one barrier was identified for all five subpopulations studied.
- Interventions that were most successful targeted very narrow dietary shortcomings and addressed only one or two specific barriers for one sub-population.

Adaptation of Adult-Based Dietary Guidelines for Children: Current Practice, Knowledge Gaps and Policy Implications

- An examination of the literature supporting major dietary guidance statements that target children:
 - To determine whether the guidance draws from research done with children or is adapted from research done with adults.
 - To identify and describe new evidence in support of child-focused dietary guidance.
 - To identify knowledge gaps in the science base related to dietary guidance for children.
 - To assess the implications of the science base in supporting dietary guidance for children that will promote health in childhood and beyond.

Key Findings

- Approximately 100 child-focused research studies on diet and health outcomes were cited by the 2000 or 2005 DGACs in support of recommendations for children.
- However, evidence is lacking in several areas, especially the health effects of whole grains, potassium, and specific fats.
- Further, little research exists on how following the *Dietary Guidelines* affects the short- or long-term health of children.

Integrated costs and public health outcomes of food import screening model

- Estimates the budget impact and public health impact of FDA's food import screening activities.
- How will re-allocating examination resources within a given level of resources change the level of safety?
- How does the level of safety change with more or less resource-intensive examination strategies?
- Work in progress with Eastern Research Group

Achieving Health Care Savings through Implementation of Prevention

- A model of the potential costs and savings associated with prevention services as part of the health reform agenda.
- Considers prevention services like colorectal screening, tobacco cessation programs, and community obesity interventions.
- Work in progress with Urban Institute

Transfer Income Model

- A comprehensive microsimulation model developed and maintained at the Urban Institute under primary funding and management from ASPE.
- It simulates the major governmental tax, transfer, and health programs that affect the U.S. population, and can produce results at the individual, family, state, and national levels.

Sample Findings

- Used to estimate the number of full-year uninsured children in 2003 and 2004.
- Approximately 4.9 million children were uninsured for the entire calendar year.
- An estimated 257,000 of these children (5.2 percent) were eligible for one or more months of public coverage under Medicaid.
- An additional 794,000 uninsured children (16.2 percent) were eligible for public coverage under SCHIP.

Actuarial Capabilities

- ASPE maintains a quick turn-around contract with the Actuarial Research Corporation (ARC).
- ARC maintains an actuarial model of the US economy that allows projections of the costs and impacts of proposed policy changes to HHS programs and policies.

Sample Analyses

- Costs of compensating first responders for adverse effects from vaccines.
- Estimation of the impact of alternative system-wide cost-control and containment systems.
- Explanation of investments in preventive health and their impacts on costs and burdens of disease and health insurance expenditures.

ASPE-CMS Data Use Agreement for Medicare and Medicaid

- Allows ASPE access to CMS data:
 - to conduct health policy research,
 - evaluate the effect of CMS policies,
 - assess medical product safety,
 - investigate healthcare fraud,
 - and develop techniques for improving the use of claims data for research.
- Work is in progress with Acumen

Cost Benefit Analyses

- ASPE assesses the costs and benefits of potential policy alternatives
- Regulatory Impact Analyes
- ASPE develops standards for economic analysis in HHS and reviews the regulatory impact analyses of its agencies

Questions?

Laina Bush

Associate Deputy Assistant Secretary for Planning and Evaluation, Science and Data Policy

Department of Health and Human Services

Laina.Bush@hhs.gov