ARPA-H must solve urgent healthcare challenges

Progress in the health arena isn’t simply a matter of developing a new medical intervention, it is innovating a healthcare system that puts that intervention to work in the best interests of society. ARPA-H must select specific health problems to solve using a transparent priority setting process, identify the types of research projects to address them, actively manage these projects to ensure attention to “the last mile” to ensure consistent delivery to patients, and measure progress toward success.

Effectively innovating health care treatments requires focusing on delivery research

ARPA-H needs to ensure that the innovations it produces are targeted to the most urgent problems in healthcare today, including health disparities. The faltering uptake of the COVID vaccine is an all too stark reminder of the individual and societal tragedy that can unfold when evidence-based discovery is not coupled with evidence-based delivery. Understanding how innovations will be delivered, accepted, accessed, and paid for in everyday patient care and in diverse communities is essential for ARPA-H to ensure that we cover the “last mile”, i.e. get innovations out of the laboratory into the market.

The COVID-19 pandemic showed how biomedical research can fail

The pandemic has made clear that while biomedical research was able to quickly create multiple effective vaccines, the challenges in getting these to every patient require resources and research devoted to studying effective care strategies and delivery models.

Innovations must work in the real world

Like ARPA-H, the Advanced Research Projects Agency-Energy (ARPA-E) directly funds projects that are intended to be translated to applications in public and private sectors. Delivery research is the key translational step to ensuring that ARPA-H achieves actual health benefits for individuals and communities. Testing biomedical innovations requires incorporating not only how a patient receives and reacts to a therapeutic in a laboratory or controlled setting, but how that therapeutic is distributed, accessed, and implemented in the real world as well.

Recommendations for ARPA-H to transform health outcomes:

- **Fund differently to drive innovation**: transparent priority setting must be coupled with: funding a more diverse set of investigators; research mechanisms beyond the traditional R01; and involving stakeholders in the research prioritization, execution, and governance, including individuals from underserved communities;

- **Incorporate new data, research methods** and designs that leverage new technology to accelerate discovery and draw on expertise in other fields of science;

- **Test early and often**: every stage of research should include dedicated funding for testing innovation implementation and impact on patients and communities across a range of racial, ethnic, geographic, and socioeconomic characteristics; and

- **Prioritize “tech to market”**: each prioritized project must include support for translating medical discoveries into care delivered in person, digitally or in new ways, with an emphasis on the discoveries being scalable, accessible, equitable, and creating high-value, equitable care for patients while improving resiliency and capacity in health systems.

- **Support NIH health delivery funding rates**: NIH devotes 5% of grant funding to supporting health system and implementation research, which is an appropriate minimum funding benchmark.

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