

Public Policy

How Intel promotes innovation worldwide



Intel Public Policy

Personal Health & Health Information Technology

Intel seeks to drive public policies that speed the adoption of healthcare technologies to improve results for individuals and expand healthcare technology markets worldwide.

Background

Rapidly aging populations, chronic disease, poor healthcare quality, rising costs, and threats of pandemic contagions underscore the need to modernize our healthcare systems worldwide. However, many healthcare systems have been stubbornly resistant to the adoption of technologies that have already modernized other industry sectors. These inefficiencies, combined with dramatically increasing demand for healthcare, are directly threatening many nations' abilities to maintain healthy, productive, and competitive societies. For example, the Institute of Medicine of the National Academies in Washington, D.C. reports that between 44,000 and 98,000 Americans die in hospitals each year as a result of preventable medical errors. Interoperable, standardized technologies within traditional points of care are critical to improving the quality and reducing the cost of healthcare.

Two factors impacting our world's healthcare landscape are the growth of the over-60 population in developing countries from 42 million today to 278 million in 2050, and the spike in obesity rates which is producing an alarming growth in chronic disease. For example, in the U.S., nearly 20 percent of the population drives 80 percent of the healthcare spending and, of the 20 percent with chronic disease, many patients have multiple chronic conditions. The convergence of medical and consumer electronic technologies offers new possibilities for early detection of chronic disease and helping patients receive care through personal, adaptive home health systems. Daily interventions through such technologies help keep patients healthy, active, and at home—not in expensive acute and long-term care settings.

Key Issues

Reimbursement for home health technologies.

Intel supports policies that provide direct incentives to expand alternatives to traditional hospitals and other institutional care. For example, Intel supports efforts in the U.S. to expand the types of tele-health medical, surgical, and diagnostic codes reimbursed by Medicare, and innovative physician-directed chronic care teams focused on home health applications. Governments and private insurers must accelerate the deployment of technologies to deliver patient-centered healthcare, rather than the current fee-for-service structures. As technology advances to provide healthcare and access to specialists, recognition of the legal status of this technology-driven way of practicing medicine will need international endorsement. Intel will work with authorities globally to ensure that the benefits of telemedicine reach the most needy.

Key Issues (continued)

Health information technology.

Interoperability of systems and networks is essential to ensure optimal healthcare. For example, legislation in the U.S. providing grants for the adoption of electronic health records and codifying the Office of the National Coordinator for Health Information could be instrumental in jumpstarting the migration to digital records. Given appropriate guidelines for privacy and protection, the shift to electronic personal health records could save lives and reduce duplicative costs within the healthcare system. Through negotiations with the European Commission, U.S. companies are working toward standards that will enable the exchange of electronic medical records across international borders.

Regulatory barriers.

Regulatory barriers—such as practitioner licensure regulations restricting the use of telemedicine across state, national, and international borders—present challenges in the shift to home healthcare. In the U.S., Intel recommends increased appropriations to the Office for the Advancement of Telemedicine in order to support efforts at the Nurse Licensure Compact and the Federation of State Medical Boards to decrease regulatory barriers.

