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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

HEALTH RESOURCES ADMINISTRATION

ANNUAL REPORT

OF THE

Arthritis Ad Hoc Review Committee
Division of Regional Medical Programs

MANDATE

The Committee shall review applications for grants for the support of a pilot arthritis program and make recommendations to the National Advisory Council on Regional Medical Programs with respect to the approval and funding of such applications.

MEMBERSHIP

The Committee was composed of the following members:

Chairman:

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Members:

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MEETINGS

The Committee met one time in Fiscal Year 1974:

May 23-24-25, 1974

ACCOMPLISHMENTS

The Arthritis Ad Hoc Review Committee made an extraordinary contribution to the development of what hopefully will be a significant national program. The Arthritis funds were made available under a Congressional earmark in December 1973. The appropriation language simply suggested that \$5-million in RMP funds be used to develop Pilot Arthritis Centers. It provided no other legislative history or guidance.

At that time of passage, there were no RMP funds available. A large portion of the Fiscal Year 1974 appropriation had not been released, and those funds that were released had already been fully obligated. In addition, there was virtually no Federal expertise available in arthritis, save a small staff at NIH with a scientific research orientation. Only one or two members of the National Institute of Arthritis, Metabolism, and Digestive Diseases Council were versed in arthritis, and there appeared to be a complete lack of expertise anywhere in the Federal Government on problems of arthritis care at the community level.

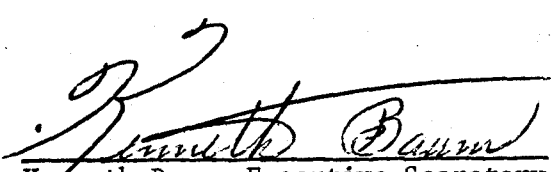
Arthritis Center applications were solicited by the Division of Regional Medical Programs (DRMP) on February 27, 1974, after release of the remaining Fiscal Year 1974 funds pursuant to a Court Order. The program announcement described in general terms the purposes for which funds could be used, the review process, and a few criteria. It was not until applications actually were submitted early in May 1974 that the process of defining a sound, initial national program could begin. The Ad Hoc Committee's great contribution was to study the applications themselves together with staff summaries and distill from these the principles that would lead to a sensible, one-time national pilot effort.

The proposals which were developed by applicants under great time pressure contained many of the following features: (a) an inpatient or other central facility with affiliated satellite clinics; (b) strong patient and public education components; (c) some research; (d) major equipment acquisition, usually vehicles and laboratory equipment; and, frequently, (e) special programs for specific problems such as juvenile arthritis and gout.

After nearly a day in which primary and secondary reviewers described each of the 43 proposals individually, the Committee developed a series of guidelines which gave priority to projects of national significance, or providing outreach, or serving the disadvantaged. Likewise, the Committee agreed generally not to support major equipment purchases, public education, motion picture and videotape production, research, data banks and registries. It was felt that these latter types of activities were either too costly, or far

outweighed by greater needs at the present time. Committee members then evaluated the merits of each application individually by using the principles that they had developed. In this manner, the group considered the 43 requests for \$15-million and finally recommended approval of 31 applications for approximately the earmarked amount, also providing numerical priority rankings for each.

It is remarkable that so much could have been accomplished in a single, three-day meeting. The Committee provided expert advice and basic thinking about what should be funded and why, based on their knowledge of national needs, capabilities, and the state of the art. Their advice was vital in view of the Federal Government's meager resources in arthritis and the short time in which to initiate and fund the new program. Without the group's hard work and thoughtful input, the taxpayers would have been poorer. Anyone who wishes to see an example of constructive use of an outside, expert advisory group should read the transcript of this Committee's deliberations.


Kenneth Baum, Executive Secretary

Date August 27, 1974