

May 24, 2022

Miriam Vogel
Chair
National Artificial Intelligence Initiative Office
The White House
1600 Pennsylvania Avenue, N.W.
Washington, District of Columbia 20500

James Manyika
Vice Chair
National Artificial Intelligence Initiative Office
The White House
1600 Pennsylvania Avenue, N.W.
Washington, District of Columbia 20500

Dear Chair Vogel and Vice Chair Manyika:

The undersigned support your continued leadership in advancing U.S. artificial intelligence (AI) competitiveness and in the formation of the National Artificial Intelligence Advisory Committee (NAIAC) per the National AI Initiative Act of 2020. We represent a diverse coalition of stakeholders that span the healthcare and technology sectors, all of whom support the expanded use of connected health technologies in healthcare. Evidence demonstrates that connected health technologies improve the “quintuple aim”: enhancing patient experience, improving population health, reducing costs, and improving the work life of health care providers, and equitable access.¹ These tools, increasingly powered by AI, leverage patient-generated health data (PGHD) and span, among others, wireless health products, mobile medical devices, telehealth and preventive services, clinical decision and chronic care management support, and cloud-based solutions.

The launch of the NAIAC comes at a critical time for U.S. competitiveness and the AI field. Across consumer and enterprise use cases, AI breakthroughs have positively transformed society by unlocking new efficiencies in countless ways and will continue to do so. At the same time, increased development and deployment of AI tools will have increasing impacts in important areas such as quality assurance, privacy, security, access and affordability, the U.S. workforce, and education.

In no area is there greater potential for positive transformation domestically, and to advance U.S. competitiveness and international leadership, than healthcare. Leveraging health data (including social determinants of health [SDOH] and PGHD) with AI tools holds incredible promise for advancing value-based care in research, health administration and operations, population health, practice delivery improvement, and direct clinical care. To realize this potential, the U.S. system must continue to evolve to provide incentives for investments that will support U.S. leadership in health AI.

We write to recommend that you take additional steps to ensure that the NAIAC’s scope and work includes healthcare. One way this appropriate emphasis can be ensured is through the creation of a NAIAC standing healthcare subcommittee, such as that announced for law enforcement at the inaugural NAIAC meeting on May 4, composed of both public and private sector leaders in health AI who can provide needed focus and recommendations on steps needed to augment U.S. leadership in the space. We recommend that this standing subcommittee address issues including research and development incentives, quality assurance and oversight, thoughtful design, access and affordability, ethics and data bias mitigation, linkages to data privacy and security, data interoperability, workforce issues, and education. We write to recommend that you take additional steps to ensure that the NAIAC’s scope and work includes a focus on considerations specific to healthcare.

¹ <https://www.jacc.org/doi/10.1016/j.jacc.2021.10.018>.

We appreciate your leadership, and that of the NAIAC, and commit to work with you and the NAIAC to advance U.S. AI competitiveness.

Sincerely,

AdvaMed

American Medical Association

Anthem, Inc.

Connected Health Initiative

Digital Therapeutics Alliance

Healthcare Leadership Council

HIMSS

Medical Imaging & Technology Alliance

Qi-Fense

cc: The Honorable Gina Raimondo, Secretary, United States Department of Commerce
The Honorable Laurie Locascio, Undersecretary of Commerce for Standards and Technology,
Director, National Institute of Standards and Technology
Dr. Lynne Parker, Director, National Artificial Intelligence Initiative Office, White House Office
of Science and Technology Policy