



How Tech Transfer Can Help PIs Advance Healthcare Innovation in an Unprecedented Moment for Grant Funding

2025 has placed research-intensive universities in the most challenging funding landscape of the past decade. By mid-June, NIH reported a \$4.7 billion gap in extramural grant funding—a 29% drop from the average of the prior nine years. Another NIH analysis showed that 3.5% of active clinical trials were terminated, affecting more than 74,000 participants and eliminating \$1.8 billion in planned research activity.

Inside labs and research centers, the strain is unmistakable:

- **87%** of PIs say their labs are experiencing serious financial pressure
- **80%** of research administrators expect staffing reductions within the next year
- **57%** of scientists are considering leaving U.S. academia

These numbers represent more than budget shortfalls—they signal a destabilizing shift in the healthcare innovation ecosystem. Translational science risks slowing precisely when the demand for evidence-based interventions—especially in mental health, chronic disease management, and caregiver support—has never been higher.

In this moment, Tech Transfer professionals have a critical opportunity to ensure that promising digital interventions continue moving forward, even when traditional funding pathways falter.

Where Promising Digital Interventions Are Stalling

Many universities provide support for PIs for early-stage ideation and proposal development. After a project is funded and research begins however, many teams are left to navigate enormous challenges with shrinking resources. PIs must:

- Navigate complex landscapes of approvals and funding for technology development
- Conduct rigorous literature reviews and meta-analyses
- Hire or contract technologists, UX designers, and developers
- Build prototypes, digital interventions, or trial infrastructure from scratch

Under current financial constraints, these demands are often untenable. And for Tech Transfer offices, this creates downstream consequences:

- **Fewer commercialization-ready assets** entering the pipeline
- **Greater difficulty de-risking** digital interventions
- **Extended timelines** to advance technologies toward licensing or partnership
- **Less** promising research translating into real-world implementation of evidence-based interventions

The translation gap stems not from scientific issues, but from the technical and operational barriers PIs encounter between discovery and deployment.

To maintain innovation throughput and support faculty success, Tech Transfer must champion new approaches that make translation more accessible and affordable.

A New Approach: AI Specialized for Translational Healthcare

After nearly two decades working in translational healthcare, I have seen talented researchers lose momentum—not because their science lacked merit, but because the technical lift required to build and validate digital interventions was too high under tight budgets. This reality is what led me to begin advising [Scalable Care](#), a healthcare AI platform designed to reduce the translational burden on PIs while strengthening institutional innovation pipelines.

I've seen firsthand how AI can make it possible for research teams to keep moving forward even in a constrained funding environment—something the AUTM community is uniquely positioned to support and amplify.

A Faster, More Cost-Efficient Path to Build and Disseminate Interventions

[Scalable Care](#) enables researchers and clinicians to transform expert insights into dynamic, evidence-based digital interventions **without** hiring software developers or constructing custom technology.

Using a no-code AI app builder, researchers can:

- Rapidly prototype advanced digital interventions

- Conduct literature reviews and meta-analyses
- Test hypotheses and iterate on intervention design
- Reduce reliance on external development teams
- Deploy interventions in clinical research or real-world settings
- Transition validated interventions directly into scalable clinical adoption

Because these digital tools run on a unified, fully compliant healthcare platform, dissemination can occur immediately once research outcomes are validated.

Today, Scalable Care is supporting teams at:

- UCSF
- State of California
- Flinders University
- University of Texas San Antonio

These groups are reducing development costs, accelerating timelines, and preserving research momentum—without needing to rebuild or translate interventions across multiple systems.

What This Means for Tech Transfer Professionals

For Tech Transfer offices, AI-enabled platforms like [Scalable Care](#) offer a way to keep high-potential digital health innovations moving even when grants fall through. They help:

- **Increase the number of technologies** that reach commercialization maturity
- **Enhance the quality and completeness** of digital health prototypes
- **Shorten de-risking timelines** for licensing and partnership
- **Support faculty retention** by enabling progress despite funding cuts
- **Strengthen the institution's overall innovation pipeline**

In a year defined by constrained budgets and rising scientific need, the universities that adapt their translational infrastructure will preserve both innovation and institutional competitiveness.

Tech Transfer professionals are uniquely positioned to guide PIs toward cost-efficient, scalable pathways that ensure their work continues making impact—even in the face of unprecedented funding challenges.

With the right tools and strategic support, we can keep the most promising ideas alive and moving toward real-world implementation.

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