MED SCHOOL ROLLS OUT HEALTH POLICY CONCENTRATION

As the Stanford School of Medicine becomes the first medical school in the country to let students select an area of specialization early on — a sort of medical major known as a “scholarly concentration” — the Center for Health Policy/Center for Primary Care and Outcomes Research is playing a key role in the effort, as it helps to create the Health Services and Policy Research concentration. The concentration is one of eight being rolled out this year as a key component of the medical school’s groundbreaking new curriculum.

Leaders at CHP/PCOR say the new concentration gives the centers a valuable opportunity to train the next generation of physicians in the key concepts and methodology of health policy. And given the tough competition among various areas to be chosen as one of the medical school’s first eight concentrations, the selection of health services and policy signals a recognition of the importance of and interest in the field.

“We’re excited to be a part of the medical school’s new curriculum,” said Laurence Baker, associate professor of Health Research and Policy and director of the concentration. “We want to be a leader in training physicians who will take an active role in improving our health-care system.”

Baker, a fellow at CHP/PCOR, said the new concentration is “an endorsement by the medical school of the quality of training we provide.” He noted that the specialization’s debut is timely, as escalating health-care costs, a record number of uninsured Americans, rising demand for expensive new therapies and escalating health-care costs, a record number of uninsured Americans, rising demand for expensive new therapies and 

AT RETREAT, ATTENDEES NETWORK, DISCUSS, CELEBRATE

At CHP/PCOR’s fifth annual retreat, held Sept. 30 in the scenic surroundings of Thomas Fogarty Vineyards in Woodside, the centers’ faculty, staff and associates took time out to reflect, network, discuss current research and brainstorm ideas for future projects.

This was the largest of CHP/PCOR’s annual retreats in terms of attendance (75 attendees), and it was the first to be held off-campus. The all-day event featured addresses by Philip Pizzo, dean of the Stanford School of Medicine, and
concerns about patient safety have turned policymakers’ attention to the need for reforming the nation’s health-care system.

“I think the next 10 years will be full of hard questions and choices in health care,” Baker said. “That’s why we need physicians who are not only trained to care for patients but also trained to consider important health policy issues.”

The idea behind the scholarly concentrations is that medical students can focus on an area that excites them, starting in their first year of medical school rather than having to wait until the last two years or after their residency. All students in the School of Medicine must select a concentration, generally in the spring quarter. Baker said a handful of students have already expressed interest in the specialization.

The school’s other concentrations are biomedical ethics and humanities; bioengineering; biomedical informatics; immunology; public service and community medicine; women’s health; and molecular and genetic medicine.

The Health Services and Policy Research concentration consists of two tracks — a “scholar’s track” for those who want to understand health services and policy issues and methodology, and a more in-depth “original research track” for students who have a strong orientation toward a career in the field and want to do original research in it. The “scholar’s track” requires the completion of a research paper along with 12 to 15 academic units; the “original research track” requires students to complete additional academic units, including an original research project.

Research projects could explore subjects such as analyzing the impact of government regulations on the way doctors practice; examining the effects of health insurance choices on various patient populations; or determining the cost-effectiveness of a new medical technology. The research projects, like the health services and policy field overall, often incorporate multiple disciplines, such as biostatistics, demography, economics and epidemiology.

Students in both the investigative and scholar’s tracks will have a designated mentor — a CHP/PCOR faculty member or affiliated faculty who will regularly advise students on their research projects, career plans and other matters. In addition, students in either track can earn a master’s degree in health services research by doing more extensive coursework and a thesis.

In preparation for the concentration, a new core course has been developed and is offered this quarter, Health Services Research and Policy Issues and Methods (HRP 207). “This is all new. There’s no road map for what we’re doing, so we’re creating it,” said Kathryn McDonald, executive director of CHP/PCOR and co-director of the concentration.

Leaders at CHP/PCOR say they’re encouraged that the new concentration will increase the centers’ involvement in medical education and will bring more medical students into contact with them. And over the long term, they say the concentration promises to enhance the centers’ national reputation, as graduates of the program go on to take leadership roles and spur changes in the health-care system. “This is a great opportunity for us to get more of tomorrow’s physicians involved in this very important discipline,” Baker said. ❖

Coit “Chip” Blacker, director of the Stanford Institute for International Studies, as well as moderated sessions on “Translational Research” and “Methods and Policy.”

“We were quite pleased with this year’s retreat because it gave us a chance to see that we have great research, a fantastic staff, and a shared mission to continue contributing to real-world needs,” said CHP/PCOR executive director Kathryn McDonald.

In opening remarks for the retreat, CHP/PCOR acting director Doug Owens discussed the centers’ history and their recent growth and success. Since CHP/PCOR’s creation in 1998, the centers have grown from three core faculty and three research associates then, to five core faculty, 16 fellows and 33 associates today. During that time, the centers’ total research revenue has grown tenfold.

Owens said the centers’ current priorities include recruiting more core faculty, maintaining the high success rate for grant applications, and implementing the medical school’s new scholarly concentration in Health Services and Policy Research.

The sessions on “Translational Research” and “Methods and Policy,” moderated by Alain Enthoven and Mark Hlatky, respectively, featured faculty members and researchers presenting their studies in the context of those themes. In the first session, Mary Goldstein, Gillian Sanders and Kathryn McDonald discussed the application of their research in patient care and health systems. In the latter, Laurence Baker, Jay Bhattacharya, Michael Gould and Paul Heidenreich presented case studies illustrating the most appropriate methodology to answer a particular research question.

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Baker, for example, discussed how best to compare the quality of Medicaid managed care versus traditional Medicaid. He first highlighted a recent study that compared health outcomes for a group of Medicaid managed-care enrollees with those of a group enrolled in the same health insurer’s commercial product. The Medicaid enrollees’ outcomes were found to be poorer than those of the commercial enrollees, but Baker said this was likely due to the greater health risks associated with the Medicaid population.

Instead, Baker presented a better approach, which he and colleagues used in a recent study: They tracked the Medicaid populations of several California counties before and after those counties mandated managed-care enrollment for all Medicaid recipients. This “natural experiment” allowed the researchers to follow specific Medicaid populations over time, instead of comparing them with dissimilar populations.

The late-morning addresses by Blacker and Pizzo offered perspectives from CHP/PCOR’s two governing organizations. Blacker discussed the Institute for International Studies’ growth and evolution, noting that international studies is a high-priority area for Stanford as recently declared by university president John Hennessy. Blacker said CHP/PCOR will play an important role in raising the institute’s profile, through research on timely global-health issues such as bioterrorism and the spread of infectious diseases.

Pizzo’s keynote address took a more personal tone, as he discussed the highlights of his life and career. From his childhood — growing up in a first-generation Italian-American family where he was the first to attend high school — to his current post as dean of a prestigious medical school, Pizzo said his career has been shaped by unexpected circumstances and the influence of inspirational people he has known. These included a boy with a severe aplastic anemia disorder, for whom Pizzo served as physician, friend and advocate for several years, and a mother of two children with AIDS, who used her eloquence and determination to build a prominent pediatric AIDS foundation.

Pizzo said that over the years he’s learned the importance of taking a stand, despite strong opposition, as in his earlier efforts to promote the use of AZT in children, and his current interest in advancing stem-cell research. He said the School of Medicine should take a stand on important issues in medicine and that CHP/PCOR, in particular, has a prime opportunity to shape U.S. policy on difficult issues such as rising health-care costs, the uninsured, and efforts to reform Medicare and Medicaid. “We are at a place that can really do something about the critical [health-care] issues our nation is facing,” he said.

Between sessions, retreat attendees took time to review a series of posters that used words, images and charts to present the breadth of research being conducted at CHP/PCOR. The posters were created by research assistant Pam Mahlow.

The retreat concluded with a session on “Future Research Directions and Potential Collaborations,” intended to spark ideas for new research projects, particularly those involving multi-disciplinary collaboration. Judy Illes, senior research scholar at the Stanford Center for Biomedical Ethics, explained how at last year’s retreat she connected with CHP/PCOR researchers who later collaborated with her on a project examining ethical issues related to the use of fetal ultrasound.

This year, ideas for cross-disciplinary collaboration came from several CHP/PCOR associates including associate professor of neurology Barbara Koenig, research associate Cynthia Yock, and biotech firm chairman Robert Chess.

FIFTH GHP CONFERENCE PRODUCES FIRST PUBLISHABLE RESULTS

At the fifth conference of CHP/PCOR’s Global Health Productivity project, held June 19 and 20 at Stanford University, 42 international collaborators from 14 countries made significant progress on efforts to standardize research protocols and definitions for the project’s 18 participating countries. And, most exciting for everyone involved, GHP collaborators reported publishable results from the project for the first time.

“Up to this point we’ve done a tremendous amount of preliminary work and data collection, but now we’ve turned a corner in that we’re beginning to produce results,” said CHP/PCOR senior research scholar Sara Singer, who previously served as the Center for Health Policy’s executive director and who helped initiate the Global Health Productivity project in 1999.

Those sentiments were echoed by Vincenzo Atella, associate professor of economics at the University of Rome, Tor Vergata, who is leading the GHP projects on health-care reforms and private expenditures in Great...
GHP CONFERENCE, FROM PAGE 3

Britain and Italy, along with a cross-national comparison of pharmaceuticals’ market features. “GHP has a huge potential in terms of research outcomes,” Atella said. “Over the next year I expect important results to come out, and this should produce two important effects: First, it will reinforce the GHP members’ high degree of involvement in the research. Second, it will generate more international visibility for the project, which should produce more research opportunities and resources.”

Pilot studies presented at the meeting included:
- an international comparison of care for dementia in the elderly (led by Alan Garber, principal investigator of GHP and director of CHP/PCOR);
- a comparison of disability and chronic disease trends in working-age populations (led by CHP/PCOR core faculty member Jay Bhattacharya);
- a study on the purchase of health-care services and supplemental health insurance in several countries (led by Sara Singer and CHP/PCOR fellow Kate Bundorf);
- an examination of how policy changes affect public and private health expenditures in Italy, Israel and the United Kingdom (led by Atella); and
- a study of changes in out-of-pocket health expenditures in Israel (led by Amir Shmueli at Hebrew University).

Manuscripts based on these studies will be submitted for publication.

This year’s GHP conference drew record attendance, likely because it was coordinated to follow the International Health Economics Association’s Fourth World Congress, held June 15-18 in San Francisco. GHP conference attendees included Pierre Moïse and Michaël Schwarzinger, two researchers from the Organisation for Economic Cooperation and Development who specialize in aging and dementia; and several faculty affiliated with the University of Michigan Demography Center.

Participants noted that considerable progress was made this year in discussing methodology, such as how to study long-term care utilization by people with and without dementia, and how to study the way households across countries spend their income on health-care services and pharmaceuticals.

“Overall, people were very engaged. There was a lot of lively discussion,” said Sara Laufer, a CHP/PCOR research demographer and co-project director of GHP.

In other developments, Ali McGuire, professor of health economics from the London School of Economics, has joined the GHP network. And Kathryn McDonald, executive director of CHP/PCOR, has replaced Sara Singer as GHP project director. The Global Health Productivity project is funded by the Stanford Institute for International Studies’ Bechtel Initiative on Global Growth and Change.

GRANTS AWARDED AND SUBMITTED IN THE SUMMER QUARTER

Awarded:

“Analysis of Premiums for Medicare Supplemental Health Insurance” (seed grant)
Center on the Demography and Economics of Health and Aging
Principal investigator: Kate Bundorf
Project period: 7/03 - 6/04

“Best Practices for Quality Health Care”
Evidence-based Practice Centers, Task Order #3
Principal Investigator: Doug Owens
Project period: 5/03 - 5/05

“Drug Abuse and Transmission Dynamics of HIV Infection, Emerging and Re-emerging Infections in South Africa” (administrative supplement)
NIH/National Institute on Drug Abuse
Principal investigator: Doug Owens
Project period: 10/03 - 9/04

“Health Policy Choices of Elderly Americans” (administrative supplement, CDEHA)
NIH/National Institute on Aging
Principal investigator: Alan Garber
Project period: 10/03 - 9/04

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“Improving Safety Culture and Outcomes in Healthcare”
Agency for Healthcare Research and Quality
Principal investigator: Laurence Baker
Project period: 9/03 - 9/07

World Health Organization/Center for Health Development
Principal investigator: Don Barr
Project period: 10/03 - 8/04

Submitted:
“Health Insurance Provision for Vulnerable Populations”
NIH/National Institute on Aging
Principal investigator: Jay Bhattacharya
Project period: 7/04 - 6/09

“Making Better Decisions: Policy Modeling for AIDS and Drug Abuse” (minority supplement)
NIH/National Institute on Drug Abuse
Principal investigator: Doug Owens
Project period: 2/04 - 1/07

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“Improving Safety Culture and Outcomes in Healthcare”
Agency for Healthcare Research and Quality
Principal investigator: Laurence Baker
Project period: 9/03 - 9/07

World Health Organization/Center for Health Development
Principal investigator: Don Barr
Project period: 10/03 - 8/04


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**PRESENTATIONS**

**Jay Bhattacharya:**


“Disability Trends and Chronic Disease in Working-age Populations.” Internal Medicine Grand Rounds, July 2003 at Stanford University School of Medicine.


**Susan Frayne:**
“Providing Medical Care to Patients with Post-Traumatic Stress Disorder.” Department of Medicine Grand Rounds, May 15, 2003 at Stanford University School of Medicine.

**Mary Goldstein:**


Yoo B. “Is Health Care a Necessity or a Luxury?”


Smith MW, Joseph G. “Pharmacy Data in the VA Health Care system.” *Medical Care Research and Review* 60 (2003): 92-123.


Yoo B. “Is Health Care a Necessity or a Luxury?”

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PRESENTATIONS, FROM PAGE 6


Alex Macario:
“Quality of Care in Anesthesia: Opportunities for the Next Decade.” Grand Rounds Conference, Department of Anesthesiology at the University of Texas Health Science Center, May 1, 2003 in San Antonio, Texas.

ANNOUNCEMENTS

Have an idea for a Research in Progress Seminar for the winter quarter? CHP/PCOR wants to hear from you! If you would like to present your research or know of a colleague who would be an interesting RIP speaker, contact research associate Cynthia Yock (yock@healthpolicy.stanford.edu or 650-723-0970).

CHP/PCOR said a sad farewell to Sara Singer, former executive director of the Center for Health Policy. Sara left in August to pursue a PhD in health policy at Harvard University. Despite her physical absence, Sara will continue working on patient safety projects for CHP/PCOR. Kathryn McDonald, who has served since June 1998 as executive director of the Center for Primary Care and Outcomes Research, has now taken on the executive director role for CHP as well.

CHP/PCOR director Alan Garber is taking a sabbatical this academic year. In his absence, core faculty member and associate professor of medicine Doug Owens is serving as acting director.

Institutional Change and Healthcare Organizations, a book co-authored by professor of sociology (emeritus) and CHP/PCOR associate W. Richard Scott, was named by the Medical Sociology Section of the American Sociological Association as the best book published in medical sociology in the past two years.

CHP/PCOR welcomes research assistant Jody Mechanic, who is working on the Best Strategies for Quality Health Care Improvement project through the Evidence-based Practice Center, and Sara Selis, who has taken over Stephanie Manning’s position as information editor and outreach coordinator. Jody, who holds BS and MS nursing degrees, has Stanford ties dating back to 1988, when she began working as a nursing consultant and research assistant at Stanford Hospital. She later served as manager of Stanford’s Office of Outcomes Measurement. Sara is a writer and editor with a journalism background who has specialized in healthcare. Before joining CHP/PCOR she worked for Stanford Medical Center’s public affairs office. She previously worked as a newspaper reporter and as a writer/editor for Healthcare Business magazine.

Three new fellows have joined CHP/PCOR beginning this academic year: Melinda Henne, Smita Nayak and Michael Ong.

Melinda is an OB/GYN and reproductive endocrinologist who has practiced in the Air Force. She is in fellowship training in reproductive endocrinology and infertility and is pursuing an MS in Health Services Research at Stanford. At CHP/PCOR, she is researching the effects of health insurance mandates on infertility treatment utilization and outcomes.

Smita is a general internist who is interested in quality improvement and cost-effectiveness research. She has conducted clinical research on quality of care in nursing homes. At CHP/PCOR she is working on the EPC project to improve the quality of hypertension management in the United States.

Michael is a general internist whose research focus is the application of health economics to general internal medicine. He has published research on health insurance in China, tobacco control economics and pharmacoeconomics. At CHP/PCOR, he is working on projects related to improving the diagnosis and treatment of depression in primary-care settings.
HEALTH SERVICES ‘RESEARCH IN PROGRESS’ SEMINAR SERIES

Summer Quarter:

June 18: Dana Goldman, “Understanding Health Disparities in Chronic Illness.”

July 2: Jay Bhattacharya, “Irrationality and Efficiency in Viatical Settlement Markets.”

July 16: Gillian Sanders, “Cost-effectiveness of Genetic Screening in Sudden Cardiac Death.”

July 23: Pete Groeneveld, “If it’s Tuesday, this Must be Denver: a Case Report from a National Job Search in Health Services Research.”

July 30: Ming Wu, “Factors of Health Care Utilization for the Elderly in Beijing.”

August 6: Albert Chan, “Evaluating Provider Adherence to a Guideline-Based Decision Support for Hypertension.”

Fall Quarter:


October 1: Anitu Stewart, “Issues in Developing Self-report Measures in Health Disparities Research: Measuring Interpersonal Processes of Care as an Example.”

October 29: Mark Hlatky, “Gaps Between Evidence and Practice.”

November 5: Alan Go, “Translating Trials into the ‘Real World’ for Atrial Fibrillation: Insights from the ATRIA Study.”


November 19: Corinna Haberland, “Impact of New Mid-level NICUs on the Level of Care Received by Low-birthweight Infants.”

CHP/PCOR PROFILE: SARA LAUER

Where she’s from: Born and raised in Los Angeles.

Research interests: Demography and health policy related to disabilities/the elderly.

Education: BA in rhetoric, with a minor in demography, from UC-Berkeley. MA degree in demography, also from UC-Berkeley. Sara has twice completed RAND Summer Institutes on the Demography, Economics and Epidemiology of Aging. “I’m interested in words as well as numbers, and demography seemed to fit well with those,” she says.

Her work at CHP/PCOR: Sara joined CHP/PCOR in summer 2001 as a research demographer and as co-project director of the Global Health Productivity project. Her previous research at CHP/PCOR has explored trends and demographics of obesity, as well as racial disparities in the use of emerging medical technologies. For the past 18 months she has also been active in coordinating grant proposals for GHP and the Center on the Demography and Economics of Health and Aging; organizing conferences for GHP; and fulfilling reporting requirements for CDEHA to the National Institute on Aging. She recently worked some late hours putting together the CDEHA renewal grant proposal to NIA.

Professional experience: As an analyst for Berkeley Policy Associates in 2000, Sara interviewed human resources officers, business owners and employees to evaluate the effectiveness of federally funded demonstration projects aimed at integrating people with disabilities into the workplace. In previous positions, Sara served as a disability commissioner for San Mateo County’s Aging and Adult Services Division; an Internet accessibility consultant for that division; and as a librarian for the Sharlin Memorial Demography Library at UC-Berkeley.

Hobbies: Rollerblading, baking, swimming, reading, running with her dog, “wearing out my Visa in good bookstores.”

Interesting fact: A self-proclaimed chocoholic, Laufer ran a wholesale chocolate-truffle business for five years in the late 1980s and early 1990s, selling her hand-made chocolates to hotels and corporate customers. She still does some truffle-making for friends, family and (luckily for us…) her co-workers at CHP/PCOR!


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ABOUT CHP/PCOR

The Center for Health Policy (CHP) and the Center for Primary Care and Outcomes Research (PCOR) are sister centers at Stanford University that conduct innovative, multidisciplinary research on critical issues of health policy and health-care delivery. Operating under the Stanford Institute for International Studies and the Stanford School of Medicine, respectively, the centers are dedicated to providing public- and private-sector decision-makers with reliable information to guide health policy and clinical practice.

CHP and PCOR sponsor seminars, lectures and conferences in an effort to provide a forum for scholars, government officials, industry leaders and health-care practitioners to explore solutions to complex health-care problems. CHP and PCOR build on a legacy of achievements in health services research, health economics and health policy at Stanford University. For more information on the centers, go to http://healthpolicy.stanford.edu.