

The Link

 COLUMBIA UNIVERSITY | MAILMAN SCHOOL OF PUBLIC HEALTH

Lights...Camera...Healthcare!

By Priya Vedula (MPH '17)



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HPM is offering a bold new approach to engage in a larger discussion about the current state of healthcare. The department has teamed up with a production company to create a four-part television series called *Healthcare in the Round*.

The idea began with a phone call between two of HPM's professors. "Meg said she had an idea to do a television series with a focus on healthcare," Michael Sparer, Professor and Department Chair, recalls. "And I said—great idea, let's talk!" The concept for the show is based on Fitzgerald's class, The Business of Healthcare, and a popular department event series, the HPM Roundtables. Fitzgerald envisioned a television series in which prominent figures in healthcare discuss their experiences and insights in the field. She wanted the series to appeal to a wider audience than just healthcare insiders.

Episode One kicked off at the Armory theater, which had been transformed into a talk show stage. The inaugural guest was George Barrett,

CEO and Chairman of Cardinal Health, a Fortune 21 company which provides healthcare services to over 75% of US hospitals, 50% of pharmaceutical companies and the US Navy.

At the beginning of the episode, Fitzgerald introduced Barrett, noting that he has "the empathy of an artist, and he is very practical in his approach to the business of healthcare." Fitzgerald and Barrett discussed his upbringing, his brief turn as a professional musician, and his transition into the healthcare industry. Throughout the discussion Barrett shared a keen understanding of the scope of problems within the healthcare industry. He discussed several of them in-depth, including the challenges of an aging population, the need for coordinated care, distorted incentives in the

ABBREVIATION KEY:

ACCL	ACCELERATED MPH
EXEC	EXECUTIVE MASTERS OF HEALTHCARE MANAGEMENT PROGRAMS (MPH, MHA)
DUAL	DUAL DEGREE PROGRAM
MHA	FULL-TIME MASTERS OF HEALTH ADMINISTRATION
MPH	FULL-TIME MASTERS OF PUBLIC HEALTH
HPM	DEPARTMENT OF HEALTH POLICY & MANAGEMENT
MSPH	MAILMAN SCHOOL OF PUBLIC HEALTH
PTM	PART-TIME MANAGEMENT MHA

medical field, the effectiveness of the ACA, and the importance of strong leadership.

Barrett's empathy came through as he spoke about his employees and the mission of his company. "We are at this inflection point," he said, "We have challenges we have to wrestle with. It's global. Cardinal Health understands its place in bringing efficiency and improving quality outcomes and safety, but it also understands the importance of working with other players."

HPM students were also engaged in the discussion. Larry Joo (MHA '17) asked a thoughtful question on the contrast between population health and personalized medicine. "I see the industry as a whole is going towards a population health management model of care," Joo noted, "but at the same time it seems that medicine, supplies, and business models are becoming more individualized. Do you see a clash between these two movements?" Barrett replied that the equation between customization and standardization in healthcare was upside down. "We customize those things we should standardize and standardize others that we should customize," he noted. "If we apply the tools correctly to understand where and how we should focus our efforts, we will surely benefit."

Fernando Mclean (MHA'17) rounded out the Q & A by asking if Barrett had any advice to give to students entering the workforce. "The key to success in any organization is being great in the moment," Barrett said. "Whatever you're doing—whatever the title, whatever the compensation—if you're really good at it, and really passionate about your work, and if you bring out the best in others, the likelihood is that someone's going to notice."

For the second episode of *Healthcare in the Round*, Michael Sparer interviewed Karen Ignagni, President and CEO of EmblemHealth. Known as one of the most influential and effective lobbyists in the healthcare arena, Ignagni has been working hard to increase access and make health insurance more affordable.

Ignagni revealed personal insights that spoke to her leadership qualities, "I'm always a person who thinks about the positive," she said. "If I did not wake up every morning with this positivity, I don't believe I could have gotten done all those things I wanted to." She discussed taking on the role of CEO of EmblemHealth. "I'm not intimidated about sharing my views about what works and what does not work." Additionally, she shared what she believed to be some of the key qualities to leadership: importance of keeping sight of one's goals, sleeping well, and keeping one's ego in check.

One of the highlights of the night was Dr. Sparer's policy game "Good Idea, Bad Idea, or It Depends" in which he pitched various healthcare proposals currently being discussed and asked Ignagni



Michael Sparer and Karen Ignagni on the set of *Healthcare in the Round*

to pick one of those three options. He asked about repealing the individual mandate but keeping the ban on denying coverage based on pre-existing conditions, allowing people to buy insurance across state lines, and turning federal programs, such as Medicaid, into a block grant. For the first question, Ignagni said, "past is prologue" and cited various states that had already tried such policies which resulted in the death spiral of many insurance companies. To the other two questions, her verdict was that it depends, echoing the theme of Dr. Sparer's prologue at the beginning of the episode around the uncertainty of the political atmosphere surrounding healthcare policy and the ACA under the new Trump Administration.

Accelerated student Min Huang (MPH '17) asked Ignagni about what policies would be important for health insurance companies to expand coverage. Ignagni alluded to the White House Health Care Summit of 2009 in which President Obama addressed her directly. "We need to do now, what we did back in 2009," Ignagni emphasized. "We need to come to the table with solutions. It is incumbent on us to work with the new administration and members of congress to evaluate what is workable and what is not." She believes policy will require answering questions around the three main issues: access, cost, and quality.

Ms. Ignagni also commemorated the work that Columbia University does in the public health field and urged students and faculty to think outside the box when it comes to increasing the power of the public health base in politics.

In this uncertain political climate, *Healthcare in the Round* offers viewers an opportunity to hear directly from leaders in the field. The HPM community can look forward to two more episodes of the series, which will be filmed and aired in the spring.

Message from the Chair



“The goal is to create a better and fairer system for all. That task, always important, is today more timely than ever.”

As I write this note, President-elect Donald Trump is nominating cabinet members, developing a Presidential transition plan, and considering whether and how to keep or abandon various campaign promises. In this context, the future of the Affordable Care Act (ACA) is very much in jeopardy, as is the future direction of our health system more generally. Will the Republicans use the Congressional budget process to avoid a Democratic filibuster and repeal key provisions of the ACA? What might be enacted to replace the repealed sections of the law? Will the Republicans delay implementation of their legislative changes, and, if so, for how long, and with what impact on consumers, insurers, and providers? Will there be more uninsured? How will the states exercise what is likely to be increased policymaking discretion? Will the trend toward narrow networks and high deductibles continue for those who still have coverage? Will there be new restrictions on reproductive rights and other benefits? How will the public health community fare, both here in the United States and around the world? The questions are endless.

HPM (and the Mailman School more broadly) is a community of scholars, students, and staffers who study, write about, and hopefully influence the health and healthcare systems here in the United States and around the world. We provide an important and unique perspective on these debates, providing both historical perspective and contemporary research and analysis. The goal is to create a better and fairer system for all. That task, always important, is today more timely than ever.

This issue of *The Link* describes and celebrates the various ways we go about meeting our mission. There are interviews with students (Michelle El Hajj), alumni (Cynthia Cox), and faculty (David Rosenthal). There are updates on new hires (John McHugh), impending retirements (Dahlia Rivera), and various papers, books, talks and awards delivered by or given to members of our community. There also is a cover story on the department’s effort to create a new television show, called *Healthcare in the Round* in which HPM faculty interview healthcare luminaries about leadership, policy, and their own career path.

The common thread that ties together our various activities is our shared sense of community and mission, and our willingness to try new ventures (*Healthcare in the Round* or new non-degree executive education initiatives) while keeping a clear focus on our core activities (our degree programs, our academic research, and the translation of that research into practice). So read, enjoy, and stay in touch! And as we enter the holiday season, I want to wish the entire HPM community happy holidays and wishes for a wonderful 2017!

Michael Sparer, PhD, JD
Professor and Chair
Department of Health Policy & Management

Student Spotlight: Michelle El Hajj (MHA '18)

“There are a lot of misconceptions about where I am from,” Michelle El Hajj says. “People think Lebanon is a desert—dry and sandy, but I live by the sea. It’s a beautiful place.” El Hajj speaks candidly about her experience as an international student, about enrolling in the MHA program at MSPH and moving across the world to New York and the challenges she’s faced adjusting to life here. “I was concerned that, being an international student, I might not be prepared for an Ivy League school,” she says. “I didn’t know if I would be able to succeed.” But after completing her first semester, El Hajj is confident she has made the right choice. “People here come from many different backgrounds. I’ve found a support network,” she says, “and I’ve made some really amazing friends.”

Before coming to New York to pursue an MHA, El Hajj completed a Bachelor of Science in Nutrition and Dietetics at the Lebanese American University (LAU). “I knew I wanted to be in the health field. The mission of helping people is important to me, it gives me purpose,” she says, “and nutrition was a really good choice. It offered a biological context, and yet I still had one-on-one contact with patients.” During the program, El Hajj secured a competitive practicum at Clemenceau, a Johns Hopkins affiliated hospital in Beirut. She worked there for a year, consulting with patients on dietary issues in various rotations including ICU and maternity. She also completed a rotation in the food-service department, making sure the quality of food met the hospital standards. It was during this rotation that El Hajj found herself active in management issues. “I wanted to be involved in project management and contribute my ideas,” she recalls. “I began to notice flaws in the system, and I spoke up about ways that the issues could be addressed.”

During her community rotation, El Hajj worked for a month at the International Orthodox Christian Charities (IOCC). In this position she traveled to primary care centers in rural areas of Lebanon to assist with nutrition screenings

for breastfeeding mothers and malnourished children. Most of the patients she worked with were Syrian refugees. After she graduated from LAU, El Hajj continued her work with Syrian refugees as a Public Health Unit Intern with the United Nations. She moved to Zahle, a rural area near the border, where she lived in an apartment with few luxuries. She worked on vaccination awareness campaigns, tracking the number of vaccinations given and the efficacy of the campaigns. She also kept track of patient files and audited hospital receipts. “The refugees were new to the system in Lebanon,” she explains, “and though the system in Syria is public, the system in Lebanon is privatized. I kept track of patient records to make sure they were not being taken advantage of.”

This position exposed El Hajj to many difficult cases, and gave her a first-hand look at how policy and management work together. As part of her job, El Hajj contacted hospitals and tracked patient movement. Often there would be a conflict between what the patient would describe and what the hospital would report. In the worst cases, this would involve patients being held in the hospital against their will because of an outstanding bill payment. Though this practice is illegal in Lebanon, the patients had little recourse to fight back, and they relied on workers like El Hajj to reinforce the system’s regulations. “The government had rules, but the hospitals would try to get away with things,” El Hajj explains. “We would report these infractions and make sure the patients would be released on the same day, right away. If we weren’t monitoring these patients, there would be no one to advocate for them. This is where I discovered how policy and management are intertwined and how horrible things can happen when these situations go unmonitored.”

El Hajj admits that one of the most challenging aspects of the job was keeping her emotions in check. “I would have the patient or the family on the phone telling me how horrible the conditions were, and all I could do was transfer their information and reassure them,



Michelle El Hajj (MHA '18)

but I wasn’t allowed to make any promises. It’s devastating,” she recalls. “I gained emotional intelligence working in this position. You have to learn to think before you speak. You have to make sure that you’re making the right decisions because at the end of the day, you’re dealing with people’s lives. You have to stay focused.”

This experience, being apart from her family and working under emotionally taxing conditions, gave El Hajj a new perspective on her life and helped her recalibrate her professional path. “Taking on this challenge pushed me to discover my potential,” she says. “Working with the UN in a place of crisis was a one-time opportunity. It was very valuable. Once I took the job with the UN and lived on my own under these conditions for three months, I knew I could live anywhere and do anything.”

With this new confidence, El Hajj considered her next step. She had always wanted to study in the United States, and so she applied to graduate schools here. “I had read a lot about Columbia and the MHA program, and I was interested in attending,” she remembers. “And being in New York, where there are many healthcare opportunities, sounded really exciting.” El Hajj was accepted into the program and started classes in September. She is particularly interested in the classes geared toward practical aspects of business applications. “I’ve never been exposed to the business side of things, so I’m taking courses in accounting, decision making, and managerial and organizational behavior,” she says. “I’m learning a lot about how organizations actually

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function.” Her experience working with the UN has also given her a reference point, and she uses it to contextualize what she’s learning. “It’s useful to relate the theoretical work to my experiences,” she says.

As part of the MHA curriculum, students must complete a summer practicum. El Hajj has begun her practicum search, and hopes to find a hospital administration position in New York. “I have worked in this area before, and I’ve been exposed to the patient side,” she says. “I’ve also worked on the process side of things, and I’ve worked in a humanitarian field. I feel like I’ve been exposed to all different contexts, which I can combine to better understand the patients’ needs, and what problems are in the system.” As an international student, El Hajj knows she will have to work hard to prove herself, but she is eager to get exposure to the US healthcare system and is excited to see what the future holds.

For now, El Hajj is content to focus on her studies and enjoy her hobbies. A trained dancer, El Hajj joined the Salsa Club at Mailman. She also de-stresses by baking and cooking. “Cooking is a really good way to relax and separate yourself from everything that is going on—to use your hands, to focus on one simple thing.” Recently she has been trying out more complex recipes. “Even my mom is impressed with my skills,” she laughs.

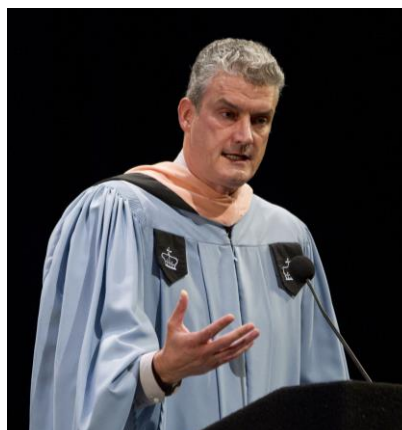
In reflecting on her educational path, El Hajj admits that her background in nutrition has served her well. “A lot of times when we are talking about studies that involve nutrition, it’s interesting to see different perspectives,” she says. “From a management perspective you want to focus on different things. As a nutritionist, I only used to focus on the patient, and now I focus on the larger system. It’s useful to have both perspectives.”

2016 EXEC Commencement

On October 13 the EXEC Class of 2016 celebrated their commencement at Lerner Hall on Columbia’s main campus. John MacPhee (EXEC ’12), Executive Director and CEO of the JED Foundation, delivered the commencement address.

MacPhee spoke of his graduation from the EXEC program as an important transition point in his life. He discussed his journey from the business side of healthcare to mission-based, non-profit work. He described his work at The JED Foundation, an organization rooted in policy, public health and institutional change, that seeks to protect the emotional health of teens and young adults on college campuses. “One out of five people between the ages of 13 and 28 is living with a mental health condition,” MacPhee noted. “It’s critical for their ability to flourish and thrive that we shorten the time from the emergence of symptoms to an accurate diagnosis.”

MacPhee discussed the mental health issues that college students experience and the behaviors that can result, from anxiety to alcohol abuse or suicide. “This is a public



John MacPhee (EXEC '12)

health emergency,” he said. “Fortunately, there is a great deal of evidence about what kind of practices can be put into place to prevent these mental health issues and to catch them quickly when they do happen.”

MacPhee ended his address by calling on the graduates to use the tools they learned in the EXEC program to help influence change within the system. “This is a pivotal time in healthcare,” he noted. “You can be part of the solution that moves us forward to a better system. The world needs you.”

Alumni Profile

In this Q & A Cynthia Cox (MPH '11) translates the experience she had in HPM to the work she's doing today at the Kaiser Family Foundation.

You received a Bachelor of Science degree from the University of California at Berkeley in Molecular Environmental Biology and Anthropology. How did you make the transition to public health? What brought you across the country to New York to complete your MPH in Health Policy & Management?

Like a lot of people who go into public health, I started college absolutely certain that I would be a physician, but by the time I graduated, I started to question whether medicine was the right path for me. From my experience volunteering at a free clinic and taking policy classes, I developed a better understanding of a lot of the challenges that were facing the US healthcare system—rising healthcare costs, the highest uninsured rate of any similar country—and the personal toll these took on people.

I applied to a variety of grad school programs—law, policy, and public health—knowing that I wanted a career in health policy, but not being sure of the best way to go about it. After I was accepted, I flew out to a few schools around the country to sit in on classes and meet with professors. I'm glad I did that because it helped me realize I didn't want to go to law school, and that policy was what I was really interested in. Columbia's program in particular was appealing to me because of the political and economic emphasis of the Health Policy & Management program.

During your time at Mailman, you worked on research projects with various faculty members ranging from dental health programs to the political economy of the NIH. You were also involved in an evaluation of a quality of care improvement effort at New York-

Presbyterian Hospital. How did these research opportunities impact your experience as a student? What practical skills did you take away from these projects?

I took on as many research opportunities as I could get at Mailman. I even stayed an extra semester so I could take an elective econometrics course and supported myself by piecing together part-time research jobs. Some of the projects I worked on were qualitative or writing-based, and others were purely quantitative.

All of these experiences helped me apply the skills I was learning in the classroom and also get a better sense of the type of research I might be able to do after grad school. These research projects also helped me develop a well-rounded skill base that has carried through to my work today. I enjoy variety in my day-to-day life, so I appreciate that I am able to do both quantitative and qualitative work.

After your first year of classes you completed your summer practicum as a policy analyst for the Harm Reduction Coalition. What was this experience like? What advice do you have for students who are currently applying for practicum positions?

For my summer practicum, I researched harm reduction efforts in Sub-Saharan Africa aimed at reducing risk of HIV transmission. It was totally different from any of the work I had done before Mailman and very different from the type of work I ended up doing after graduation. I had been curious about international health policy, so the practicum gave me a chance to test it out and see if it was something I wanted to pursue. I'm glad I stuck with domestic policy



Cynthia Cox (MPH '11)

as that's where my heart is, but my practicum was still a great experience.

My advice for students is first, apply early to as many programs as you can (especially if you are looking for a paid practicum as those are hard to come by). I'd also suggest trying to add something new to your repertoire. The practicum is a great opportunity to try something out that you might never have chance to do again, or it could end up being something you decide to spend the rest of your career working on. Finally, if you haven't already gotten to apply your quantitative skills through extracurricular research, try to do that at your practicum.

After graduating with your MPH, you joined the Kaiser Family Foundation as the Rosenfield Fellow in Health Policy & Public Health. What are some of the projects you worked on during this time, and how did they help direct your career path?

I had known going into Mailman that I wanted to work on some big picture health policy issues relating to healthcare costs, insurance coverage, and access to care, but never imagined that I would graduate from school right as the US health system was undergoing a major restructuring. The Affordable Care Act (ACA) passed while I was at Mailman and when I graduated, I went to work at the Kaiser Family Foundation as a fellow on their newly-formed health reform team studying the impact of the law on consumers and private insurers.

When I first started at Kaiser, the law was just being implemented so a lot of the work I was doing was analyzing baseline data or writing reports on the “pre-ACA” state of costs and coverage, and summarizing rules and regulations being published by Health and Human Services. As time went on, my work started to focus more on evaluating provisions of the ACA ranging from preventive services to insurance premiums and coverage expansions. I also had the chance to work on some more creative projects like making a cartoon video explainer of the health reform law and developing an online interactive tool that consumers can use to calculate their eligibility for subsidies and other financial assistance under the ACA.

You are currently the Associate Director of Health Reform and Private Insurance at the Kaiser Family Foundation. Can you discuss your responsibilities in this role as well as some of the challenges you face?

Now that I’ve been at Kaiser for several years, I manage the Foundation’s projects relating to health reform and private insurance. I still do a lot of the same type of work that I started out working on, including quantitative and qualitative research and developing interactive tools and websites. The health reform team has grown, with some analysts devoted to the ACA specifically and others focusing on healthcare costs and quality more broadly, so the breadth of subjects I work on has expanded. I also explain our research findings to Kaiser’s audience by meeting with policymakers, talking to journalists, holding webinars, and tweeting. Every day is a new challenge as we are not only putting out our own research but responding in real time to day-to-day developments in health policy. This work requires being nimble and knowing that what I think I’m going to work on in a given day might have to wait if breaking news hits.

You also serve on the Board of Directors of the Berkeley Free Clinic, a non-profit that

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provides free medical care and counseling services. Why is this type of work important to you?

I started volunteering at the Berkeley Free Clinic when I was 19 years old, so my experience there really shaped my career and was invaluable to me. It impressed upon me the importance of safety net services and the difficulty many people face in seeking care for even the most basic healthcare.

As a volunteer-run organization, the Free Clinic is also the sort of place where people can take on as much responsibility as they have time to give, so I learned at a relatively young age what it takes to run a business – everything from janitorial staffing to fundraising, making sure the bills are paid, and developing long-term strategic plans.

As someone who has worked extensively on the Affordable Care Act can you offer your

thoughts on what will happen to the ACA under the new administration?

The health reform law will almost certainly undergo major changes or even full repeal, but there is still a lot of uncertainty as to how much of the law will be repealed and what a replacement plan will look like. The GOP now has gained the presidency and maintained control of congress, giving them the opportunity to make good on the promise to repeal and replace the ACA. But there is not yet a single replacement plan they have coalesced around, and it’s not clear they have enough votes in the Senate to pass a full repeal while avoiding a filibuster.

One likelihood is that congressional republicans will take a “repeal and delay” strategy, where they repeal key aspects of the ACA in early 2017 through a process called budget reconciliation, but delay replacement until they have agreed on a plan and have enough votes to pass it. This means some aspects of the ACA could remain intact for the next couple of years, possibly until after the 2018 midterm election, when the GOP is expected to pick up more seats. This strategy is not without its risks: repealing the individual mandate requiring most people purchase insurance (one of the least popular aspects of the law) while leaving other pieces of the law intact (like the requirement that insurers cover people with preexisting conditions) could lead to a death spiral in the individual insurance market. Even if the law is left more or less intact until replacement, the uncertainty of repeal and delay could cause some insurers to leave market.

Faculty Corner: A Conversation with Professor David Rosenthal



Prof. David Rosenthal

David Rosenthal was 22 years old when he started teaching. “Some of my students were not that much younger, maybe 15 or 16,” he remembers. “Classroom management wasn’t easy. I had to figure out ways to get my students interested in education.” At the time, Rosenthal was a recent college graduate who had his own rocky academic past. He was teaching at a middle school in Brooklyn, and his students struggled with basic math and reading concepts. Rosenthal developed unorthodox teaching strategies to connect with the students and to encourage them to engage with their classwork. He set up a token economy in class—a concept that was novel 45 years ago, but that today is widely practiced. The program was a success—students accumulated the play money and used it to purchase books, winter hats, and educational tools, but more importantly, they changed their behavior and began to engage in class. “My students were energetic,” Rosenthal notes, “but they hadn’t had much success in school. Since I hadn’t had a lot of success in school either, I didn’t have the same ideas and rules about education that some of my colleagues did, and I was able to figure out different ways to get my students to thrive.”

After teaching middle school for several years, Rosenthal applied to Brooklyn College and was accepted into the counseling program. “The classes I was taking at night and the practicums we did informed how I communicated with people,” he recalls. “It taught me how to have a conversation, ways to ask questions and how to listen. All of those things became part of who I am.” Rosenthal continued his education at SUNY Buffalo, where he got a PhD in Counselor Education and later did post-graduate work in Marriage and Family Therapy through the Menninger Foundation. While

studying in Buffalo, Rosenthal got a part-time job at a substance abuse counseling center. This opportunity deepened his counseling experience and opened up new professional opportunities. “I began to understand not only how to work in a therapeutic context but also how to work in a community context,” he recalls. “A large part of my master’s degree in counseling was how to bring about change in communities. My doctoral program was primarily about providing therapy for individuals or families, and I had the opportunity to bring both together in a community-based setting.”

After completing his PhD, Rosenthal left Buffalo to take a faculty position in the College of Education at the University of Iowa to continue his research and to train therapists in substance abuse counseling. He later joined the Department of Family Medicine at Iowa. As a tenured faculty member, he played a lot of different roles. For example, he taught doctors and medical students how to communicate with patients; he collaborated on numerous publications, books and an award-winning video series and later created a documentary about substance abuse in Native American communities; he served on a number of boards; and he continued to see patients. After 23 years at Iowa, Rosenthal decided to move back to New York. His experience in family medicine and substance abuse counseling, and his interest in working with community groups led him to management positions at non-profits on the Lower East Side. He worked as the Project Coordinator of La Bodega de la Familia (Family Justice), an organization that offered support for people who had been incarcerated for drug-related offenses. The organization helped these offenders re-adjust to life with the support of their families, social workers and parole officers. “It took a good bit of faith to see the substance abusers as having a medical problem that needed treatment as opposed to simply putting them back in jail,” Rosenthal recalls.

Rosenthal later served as the Executive Director of the Lower East Side Harm Reduction Center. The center provided a needle exchange, counseling services, and basic needs like food and clothing. “We gave out five-hundred thousand syringes a year, and we probably

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collected four-hundred thousand,” Rosenthal notes. He emphasizes the impact that harm reduction centers have had in New York state, “HIV levels among active drug users were at around 52% before syringe exchanges started. Now it’s about 3-5%. While you would never attribute change to one thing, there’s no question that harm reduction centers have done a great deal to reduce HIV transmission.”

Rosenthal brings his counseling and family medicine experience to his current job as a faculty member and the Director of Behavioral Medicine at Columbia’s Center for Family and Community Medicine. He balances this position with a faculty job in HPM where he teaches courses like Public Health Concepts and Managing Public Health Non-Profits. In August, Rosenthal became the Faculty Director for the full-time and executive management programs. Though he holds multiple responsibilities in both departments, Rosenthal’s first priority is to his students. He is constantly on the lookout for new materials to incorporate into his courses. He finds ideas in his own clinical work. “I am able to translate patient experiences into cases, and I bring these cases to my students. They use these situations to develop their strategic management skills and apply theory to practice,” he says. “This has been a very useful teaching tool, and the students appreciate the immediacy and the challenge in these examples.”

Rosenthal is an avid reader and music lover, and he allows space for the humanities in his

teaching philosophy. He encourages his students to keep an open mind when engaging with others to enhance communication and to be able to understand different perspectives. “Too often we’re not curious about other people’s lives, so we limit our own thinking because we’re unwilling to struggle with some of the fuzziness of the world,” he says. “When we look at the arts and we read, we begin to say, there’s more than one reality, and by pulling in those other realities, then hopefully we can hear other people’s stories as opposed to only looking for the facts.”

For the past 40 years, Rosenthal has served as a board member on a number of non-profits. He is currently on the board of Heritage Health and Housing, Clowns Without Borders and Kwah Dao. He believes that being involved with these organizations is crucial to staying relevant. “We’re in an applied field—community service work helps to inform my teaching. It is important to me to be actively practicing something at the same time I’m teaching it. Having new stories, new interactions, and new frustrations is important because the world changes,” he explains. Being involved in community organizations also helps Rosenthal see the direct effects of public

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health policies. “When I’m at Heritage Health and Housing and people are talking about the future of the ACA—talking about losing their insurance and what that will mean for them—it’s very different than just talking about it at a conference.” Rosenthal encourages all of his students, whatever aspect of public health they are committed to, to get involved with a community organization. “There’s no excuse not to get involved,” he argues. “Students are gaining expertise in HPM that will be very valuable to non-profits. There are so many non-profits that would be thrilled to have somebody with the skills our students have.

Rosenthal’s professional career has been wide-ranging. He maintains connections with a number of different departments and organizations, and he continues to collaborate on research with faculty throughout the university, but the underlying principles behind the work he does remain the same. “The things I’ve learned in psychology and family therapy classes and the impact that knowledge has had on everything I do has been immeasurable,” he says. Rosenthal sees a strong connection between his counseling work and principles of behavior and management. “Family therapists get trained for things systemically, which is very similar to the way managers should be trained. For example, feedback is a management concept, but it’s also very much a clinical teaching activity,” he argues. “As I work with organizations, it’s clear that how you tell a story—controlling the narrative—has a big impact on how people respond.” Rosenthal is challenged and inspired by the connections he makes with students, patients and colleagues and credits these interactions for the successes he’s had. “The moments where somebody can say that I’ve made a difference in their life, those are the moments that stick with me and keep me going.”

Faculty & Staff in Action

This semester HPM faculty and staff gathered for monthly pizza lunches. The lunches offered an informal setting for HPMers to discuss research prospects, programs, future events and opportunities for the department, and of course, to try out the new department ping pong table. As it turns out, HPM is home to some pretty fierce competitors.



Staff Member Cecilio Mendez puts the smack down



Prof. Nan Liu poaches the return



Prof. Blaylock brings the heat

Have You Heard?

HPM Faculty & Staff

HPM professor **Miriam Laugesen's** book *Fixing Medical Prices* was published by Harvard University Press in November.

HPM Department Chair **Michael Sparer's** article "Maintaining Insurance Access under Trump—A Strategy" appeared in the *New England Journal of Medicine* (November 2016).

HPM Professor **Claire Wang's** article about the nutrition quality of US school snack foods appeared in the *Journal of School Health* (December 2016).

HPM adjunct professor **Heather Butts** and her organization HEALTH for Youths helped organize the official designation of Bruce Reynolds Way in Inwood on September 9.

Professors **Peter Muennig** and **Zohn Rosen's** article "Cost Effectiveness of the Earned Income Tax Credit as a Health Policy Investment" appeared in the *American Journal of Preventive Medicine* (December 2016).



Dr. Miriam Laugesen

HPM Administrator **Dahlia Rivera** recently announced her retirement. Dahlia, who currently serves as Assistant to the Chair, has worked at Columbia for 45 years.

HPM Professor **John W. Rowe's** article "Preparing for Better Health and Health Care for an Aging Population" was published in *JAMA* (October 2016).

HPM professors **Tal Gross** and **Matthew Neidell** published an article titled "Particulate Pollution and the Productivity of Pear Packers" in *The American Economic Journal: Economic Policy* (August 2016).

A Roundtable Discussion with Bill Toby

By Safiya Cesar (PTM '17)

HPM hosted Bill Toby for the most recent HPM Roundtable this past September. Toby shared his fascinating and historical story of serving in local and federal government, having a successful career in the private sector and breaking the barriers that existed for African-Americans to work in both of these professional settings in the mid-1960s-70s.

Toby, a specialist in Medicare and Medicaid, shared challenges from over 50 years of experience in both the private and public sectors of healthcare. He began his healthcare career in federal government in 1968 when he was selected to be the first African-American manager in the New York Region II Office of the US Department of Health, Education, and Welfare. Two years later he served as the Intergovernmental Affairs Officer in the Office of NYC Mayor John Lindsay. While working in New York, Toby met with Governor Rockefeller and convinced him to get more people enrolled in Medicaid. By increasing advertising and outreach, enrollment skyrocketed. However, in 1970, fraud and abuse in the Medicare system was prominent, and Toby was called upon to help resolve the issue. He recommended that a computer system be installed in order to determine all Medicare eligibility and that the states be in charge of Medicare/Medicaid administration (at the time it was mostly controlled by the state counties). In the first year, fraud and abuse decreased, saving \$200 million. Four years later President Reagan

recognized Toby's contribution and presented him with a national award.

Through the 70s and 80s Toby continued to hold various government positions. In 1992, he was appointed by Bush to head the Federal Health Care Financing Administration (HCFA) which later became the Centers for Medicare & Medicaid Services (CMS), managing a budget of over \$400 billion. During the discussion, Toby shared stories about working with Lindsay and Ed Koch (NYC Mayor 1978-90). He provided a tangible reality to the history of our healthcare system. He also talked about the interconnectedness of the private and public healthcare insurance system. Since leaving the public sector just over 20 years ago, Toby has spent the majority of his time consulting for private insurance companies. Additionally, in 2015, Toby was appointed by Governor Cuomo to be the co-chair of DSRIP's Project Approval and Oversight Panel. He cited DSRIP as the most important, innovative, and efficient program for the transformation of Medicaid by helping to, for example, ensure better access and quality for beneficiaries, reduce unnecessary hospital readmissions, and prioritize health outcomes.

The Roundtable ended with Toby sharing his expertise about what factors contributed to his success as a healthcare administrator, how to successfully work with insurance companies and what he hopes DSRIP will achieve.

Introducing HPM Faculty



John McHugh received his PhD in Health Services Research from Brown University. His research focuses on organizational relationships, specifically studying the effects of public policy on healthcare organizations and how changing organizational dynamics affect patient outcomes. His dissertation analyzed the impact of hospital and skilled nursing facility relationships on rehospitalization rates. Prior to matriculating in the doctoral program at Brown, McHugh spent 8 years at Navigant Consulting, where he was a Director in the Health Systems Strategy group. He also holds an MBA from Duke University's Fuqua School of Business.

HPM Highlights

HPM is collecting alumni updates for *The Link*. Have you changed jobs or titles? Recently published a book or article in the healthcare field? Is there something happening in your life that you'd like to share? Complete [this](#) web form and let us know!

Ben L. Bynum, MD (DUAL MBA/MPH '10) recently published an article in the *Journal of Health Care Finance* titled "A Place for School-Based Health Centers within the New Era of Alternative Payment Models in Medicaid." The article can be found on the JHCF's website.

Jacqueline Kanuk Bond (EXEC '08) is Director of Operations at SMG Health in Sydney, Australia.

Anita Franzione (DrPH '94) is an Assistant Professor at Rutgers University teaching Health Care Systems, Public Health and Aging, Principals of Public Health, and Public Health Leadership Seminar.

In November *Governing* magazine announced its 2016 Honorees for Public Officials of the Year, an honor given to individual state and local government officials who have demonstrated outstanding accomplishments. The list included HPM alum **Nick Macchione** (EXEC '97), Director of Health and Human Services, San Diego County, California.

In September **Dr. Patricia Schnabel Ruppert** (EXEC '15), Health Commissioner of Rockland County New York, and **Dr. Nadia Laniado** (EXEC '14), Director of Community Dentistry and Population Health at Jacobi Medical Center, were selected as 2016-17 Fellow Ambassadors for the New York Academy of Medicine. Dr. Ruppert also recently contributed an OpEd to The Huffington Post website about the importance of getting a flu vaccine.

HPM alum **Dr. Melanie Bernitz** (EXEC '12) has been appointed the Associate Vice President and Medical Director, Columbia Health.

Recent HPM alum **Sara Gorman's** (MPH'15) new book *Denying to the Grave* was published by Oxford University Press in September.

Penelope Milsom (ACCL '14) was awarded a Wellcome Trust Studentship at the London School of Hygiene and Tropical Medicine. She will begin her PhD there in April.

John Reid (MPH '16) is DSRIP Program Manager, Business Analytics at St. Barnabas Hospital in the Bronx.

Steve Lazarus (EXEC '04) has been Deputy Director Medicaid - Managed Care - Louisiana Department of Health, since November 2016.

The EXEC class of '08 hosted a gathering in October for classmates and their families. The class has been meeting twice a year since their graduation in 2008.



Exec Class of 2008

After working for two years as an analyst at the US GAO, **Marissa Barrera** (MPH '14) is currently working as a Health Policy Analyst for Senator Bernie Sanders on the Senate Budget Committee.

Jana Smith (MPH '12) recently changed jobs and is now Vice President at ideas42.

Anne Smith (MPH '14) manages US government affairs for the American Chamber of Commerce in Japan.

Ricardo Rivera Cardona (EXEC '17) was selected for the Aspen Global Leadership Network's 2nd Class of Health Innovator Fellows. These 21 entrepreneurial leaders come from across the United States and work in a wide variety of healthcare industries and sectors—including medicine, pharmaceuticals, public health, biotechnology, insurance, mental health, government, and more.

Lauren Kalbfell (MPH '18) was selected as a Kraft Global Fellow through the Office of the University Chaplain. The focus of the fellowship is to promote interfaith and intercultural understanding of India in collaboration with the Columbia Global Center Mumbai.



Meg Gramins (EXEC '16)

Meg Gramins (EXEC '16) was chosen by her classmates to deliver marks on behalf of the graduates during the EXEC commencement in October.

Congratulations to 2nd year full-time MHA and MPH students who have received administrative fellowships! These students include: **Tetiana Allen** (MHA'17) Baylor College of Medicine; **Rashmi Sagaram** (MHA'17) UPMC Administrative Fellowship; **Kwasi Nyantakyi** (MHA'17) Thomas Jefferson University Hospital; **Larry Joo** (MHA '17) Massachusetts General Hospital; **Megan Pelino** (MPH'17) Cancer Treatment Centers of America; **Marilyn Erazo** (DUAL MPH/MSW '17) Northwell Health; **Rachel Papendick** (MHA'17) Trinity Health System.

Congratulations to the EXEC Class of 2016!



The EXEC Class of 2016 at their commencement ceremony in October

2016 Case Competition Winners



Steven Schulman (EXEC '16) and Prof. John Winkleman with the Columbia Case Crackers

First Place Team

Columbia Case Crackers, MSPH

Priya Vedula
Katrina Verbrugge
Karen Hauser
Morgan Traina

Second Place Team

MDSG Consulting, MSPH

Michael Novello
Gabe Gan
Derek Fine
Suzanne Kirkendall
Steven Hefter

Third Place Team

The Dynamics, SIPA, Engineering, GSAS

Cynthia Liu
Yiyi (Michelle) Pang
Yang (Kelly) Hu
Chen-Hsien Su
Andy Wang

Most Innovative Solution Team

The FKAG Group, MSPH

Felisa Hsieh
Alex Cho
Kelsey Trumbach
Greg Goshgarian

Best Individual Presenter

Robert Marshall, SIPA, Team Sana Consilium

Best Question & Answer Participant

Miriam Goldfield, MSPH, Team Healthspiration



The MHA Class of 2017 in September celebrating their last first day of school

Stay Connected

Tours & Naming Opportunities:

For a tour of HPM's new offices, to learn about naming opportunities, or for more information on how to contribute, contact Arianne Andrusco: aa2819@columbia.edu (212-305-5270)

Alumni:

Email Beth Silvestrini: bs2520@columbia.edu to get involved or [update your contact information](#)

Save the Date:

HPM Healthcare Conference
Friday, April 21, 2017

Contact HPM to share your updates:

Email Carey McHugh: ctm2101@columbia.edu

THE LINK

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Editors

Carey McHugh, MFA
Manager, Communications &
Events

Rebecca Sale, MPH
Director, Academic Programs

Michael Sparer, PhD, JD
Professor and Chair