

The Link

MAILMAN SCHOOL OF PUBLIC HEALTH | COLUMBIA UNIVERSITY

HPM Beyond the Classroom

Recently, HPM has introduced many new opportunities for students, faculty and alumni to engage in healthcare topics outside of the classroom. Read on to learn more about the 2013 HPM Lecture Series and the HPM Healthcare Conference.

2013 HPM Lecture Series

HPM initiated the lecture series with the aim to bring in professionals from different areas of public health, healthcare policy and management. The lectures range from case studies on healthcare policy to a panel discussion on soaring medical costs. Patrick McNulty (EMPH '14) reflected on the initiative, "As a working physician and clinical director, I find the 2013 HPM Lecture Series to be a spectacularly effective way to introduce real-world public health issues and role models into the EMPH curriculum." The lectures have reinvigorated the HPM community by connecting students, faculty and alumni and providing a forum to discuss current topics in the vast and changing healthcare system.

Mary O'Dowd, Commissioner, New Jersey Department of Health and Senior Services

In January, Commissioner O'Dowd spoke to a group of students, faculty and alumni in the Allan Rosenfield Building's 8th floor auditorium. Commissioner O'Dowd (EMPH '04) presented two case studies. One study investigated the statewide policy regarding elective angioplasty. The other case focused on New Jersey's Compassionate Use of Medicinal Marijuana Act and the Alternative Treatment Centers that have been created to provide qualified patients with access to medicinal marijuana. Commissioner O'Dowd's talk provided an insight into policy issues relating to both cases and the deliberations and intricacies involved in enacting



Nick Macchione (EMPH '97), Sherry Glied and Nirav Shah at the 2013 HPM Healthcare Conference

legislation. Ellen Coleman, an EMPH student, attended the lecture with her cohort, the Executive Class of 2013. Reflecting on the lecture she commented, "It is useful hearing individuals like Commissioner O'Dowd talk about struggles with day-to-day issues which need politically astute, timely and practical responses. This forces us to test how our classroom learning informs real-world experience."

After the lecture, HPM hosted a reception where students and faculty continued the discussion with Commissioner O'Dowd in a more informal setting: over wine and cheese in the lobby of ARB 8. Darrell Terry (EMPH '14) noted, "Commissioner O'Dowd has really taken on some controversial issues. She has taken the time to hear all sides of the debate on medical marijuana and angioplasty without cardiac surgery backup and has thus far delivered reasoned responses. My classmates and I were impressed with both the content and delivery."

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ABBREVIATION KEY

EMPH	EXECUTIVE MPH PROGRAM
CEOR	COMPARATIVE EFFECTIVENESS & OUTCOMES RESEARCH
FTM	FULL-TIME MANAGEMENT
FTP	FULL-TIME POLICY
GLOBAL	GLOBAL HEALTH POLICY & MANAGEMENT
HPM	DEPARTMENT OF HEALTH POLICY & MANAGEMENT
MSPH	MAILMAN SCHOOL OF PUBLIC HEALTH
PTM	PART-TIME MANAGEMENT
GPH	GENERAL PUBLIC HEALTH

Honorable Pia Olsen Dyhr, MSc, Minister for Trade and Investment of Denmark

In February, HPM teamed up with the Global Health Initiative and Dean Linda Fried to host Pia Olsen Dyhr, The Minister for Trade and Investment of Denmark. Minister Dyhr began her talk by recognizing the distinctions between the American and Danish systems, noting the high taxes that Danish citizens pay in exchange for universal healthcare. She acknowledged the healthcare challenges that the Danish are encountering and noted that they are similar to those that the United States and other Western countries are currently facing. Such issues include an aging population, an uptick in chronic diseases and health disparity concerns. Minister Dyhr detailed the many reforms the Danish government has implemented to improve the healthcare system, but acknowledged the work that still needed to be done, "We need to come up with more solutions to provide better and more efficient care. An important part of this is to make sure the strongest expertise and competencies in the Danish corporations and research institutes reach international markets."



Susan Dentzer delivers a talk for the 2013 HPM Lecture Series

Health Affairs Editor-in-Chief, Susan Dentzer

In mid-March, the HPM Lecture Series brought in Susan Dentzer, former Editor-in-Chief of *Health Affairs*. Ms. Dentzer's talk was titled *America's Healthcare Deficit and What We Can Do About It*. She began by detailing basic changes and opportunities which will accompany the Affordable Care Act, including coverage expansion, individual and employer mandates, and insurance market reforms. Ms.

Dentzer also discussed the financial problems plaguing the current healthcare system including failures in execution of care processes, administrative failures, pricing failures, and fraud and abuse. She emphasized the goals of the new payment and delivery reforms which require "the move away from the pay-per-service, the move away from inadequate focus on the efficiency of care and the patient-centeredness of care...and the move towards this new model where we reward health systems for patient outcomes, for population health, for lowering the cost while we improve the patient's experience of care." Her talk drew upon a number of specific case studies that pointed to the importance of the triple aim as an organizing principle for the Affordable Care Act and future healthcare reform legislation. Ms. Dentzer ended her talk with a call to action, "As people who will go on into public health...help us build the case for public health investment...advocate for public health spending. You can contribute to our understanding of the roles of income and inequality, low economic growth, unemployment, and other factors that are big drivers of poor health." Students and faculty engaged in a question and answer session with Ms. Dentzer at the end of the presentation and continued to discuss the topics she had covered at a reception. Miriam Laugesen, an HPM faculty member, concluded, "Ms. Dentzer was extremely engaging, and she skillfully surveyed a wide range of issues related to the US health care system, connecting all of them to the need for health in all policies in the US. In her talk, she emphasized the way change requires people to mobilize and challenged the audience to take a leadership role in stimulating change. I think it was an inspiring talk. And we were lucky to have her."

Panel Discussion with Steven Brill, Author of the TIME magazine article "Bitter Pill: Why Medical Bills Are Killing Us"

HPM had the honor of hosting a panel discussion with Steven Brill, the author of the recent *TIME* magazine article, "Bitter Pill: Why Medical Bills Are Killing Us." Mr. Brill spoke along with Michael Sparer, Professor and Chair of HPM; Art Gianelli, President and CEO of the Nassau Health Care Corporation; and Fred Hyde, Clinical Professor of HPM. Mr. Brill



Art Gianelli and Steven Brill during the panel discussion "Why Medical Bills are Killing Us"

opened the panel with a short talk about how his article came about. He began his research by "following the money" or tracking the various procedure and drug expenses of specific patients in an effort to uncover the mystery behind astronomical medical bills. Brill mentioned the lack of transparency in the world of medical billing, which sets it apart. "Healthcare has become an island unto itself, with no price transparency and no accountability," he noted. "It is a recipe for providing overpriced healthcare with lower quality." Gianelli praised the momentum Brill's article had generated, "It is rare that an article turns the universe on its axis, and this one did," he said. "This shows you can really make a difference with a pen and an idea. And I think that's important." The panel discussion also provided a unique opportunity for students to respond to Mr. Brill's article. Dr. Hyde, the moderator and co-organizer of the event, challenged the students in his Healthcare Accounting and Budgeting class to publicly address some of the problems Mr. Brill outlined in his article. The students developed and presented cases that provided detailed diagnoses, thoughtful solutions and comprehensive plans for implementing their solutions. The teams presented their papers to Mr. Brill and the panel during the Q & A, and the panel members provided their feedback.

To read the student papers and Brill's article in *TIME* magazine, visit www.brillandstudentpapers.org



Ann Campbell (EMPH '11) at the 2013 HPM Healthcare Conference

HPM Healthcare Conference

On April 13, HPM hosted its second annual Healthcare Conference at the Columbia University Club of New York. The conference drew over 150 attendees, including faculty, alumni, and current students and spurred a continuing dialogue among the participants about our rapidly evolving healthcare system.

Professor Sherry Glied opened the conference with a keynote address on healthcare reform. She reviewed the history of healthcare reform efforts in the United States, as well as what she described as the Affordable Care Act (ACA)'s improbable survival of the 2010 and 2012 midterm elections, Supreme Court hearings, and the 2012 presidential election. She also highlighted some of the most pressing challenges facing the ACA going forward, including implementation of Medicaid expansion and cost containment, bringing to bear her experience working as Assistant Secretary for Planning and Evaluation under President Obama.

Following Dr. Glied's keynote, New York State Health Commissioner Nirav Shah and Nick Macchione (EMPH '97), Director of Health and Human Services for San Diego County, engaged in a dialogue entitled *A Coast to Coast Conversation on Public Health*. The panelists highlighted the similar struggles each faced in bringing healthcare services to a large and diverse population and echoed the importance of federal-state collaboration in successfully bringing health reform's goals to fruition.

For the afternoon session, conference attendees were given the option to attend one of four small panel discussions on matters ranging from quality in healthcare and information technology to obesity and Affordable Care Act implementation. Full-time and adjunct HPM faculty members moderated the panels, which featured HPM alumni.

The conference also provided ample opportunities for current students from the full-time, part-time, and executive programs to network with one another, faculty and alumni. Following the conference, attendees also had a chance to continue the conversations inspired by the speakers and panels with a closing reception. The evening before the conference, HPM hosted the Experienced Career and Networking Evening for students with five or more years of work experience. The event allowed students to engage with alumni and representatives from hospitals and healthcare consulting firms.

Upcoming Events

Friday, June 7: Francoise Simon will present a talk for the HPM Lecture Series titled *Digital Health: Redefining Patient/Physician Dynamics*. Dr. Simon will discuss how Telehealth is redefining the medical workplace (integrated care, e-prescribing), as well as the consumer marketplace (access to care in remote areas, adherence improvement through e-learning and e-monitoring).

HPM is also excited about the forthcoming **Global Health Diplomacy Initiative**. This initiative begins with the assumption that in an increasingly globalized world, few topics are as important as the intersection between global health and international diplomacy. At the same time, however, there is a surprisingly thin literature defining, describing and analyzing the field. Additionally, there sometimes are tensions between those who focus on diplomacy as a tool to improve health outcomes and those who emphasize health programs as a tool to achieve diplomatic goals. Finally, there are too few efforts to train diplomats about health, health leaders about diplomacy, and future leaders about both health and diplomacy. With this initiative, HPM hopes to encourage research, education, and collaborations in each of these arenas.

Check the HPM events calendar page on the website for more about this and other upcoming events.



2013 HPM Healthcare Conference participants



Darryl Hollar (EMPH '08) presents during the Plugged into Healthcare: Investment & IT panel



Dr. Nirav Shah in conversation with Dean Linda Fried at the 2013 HPM Healthcare Conference

HPM Healthcare Conference Panelists and Presentation Titles

A Coast to Coast Conversation on Population Health

Nick Macchione, MS, MPH, FACHE, Director, Health & Human Services Agency, County of San Diego, CA
Nirav R. Shah, MD, MPH, New York State Commissioner of Health

What to Expect When You're Expecting the Affordable Care Act

Alison Boyle *Navigating Toward 2014 - Changes in the Health Payer Landscape*
Kevin Munjal *The Role of EMS in the Era of Health Reform*
Nancy McGee *How Pharmaceutical Manufacturers are Planning for Coverage Expansion in 2014*

Weighing the Issues: Obesity Across Populations

Madhu Mathur *Childhood Obesity: Diagnosed in the Doctor's Office- Treated in the Community*
Steve Caddle *Obesity in the Latin American and Caribbean Diaspora*
Mariana Cotlear *Re-Branding Healthy Eating: What We Can Learn from the Brussels Sprout*

The Culture of Quality & Patient Safety

Lorraine O'Neill *Patient Safety Culture: Assessing, Educating, Promoting and Supporting*
Catherine Foster *TeamSTEPPS - Leveling the Playing Field in Healthcare Quality*
Lee Eisenberg *Procedure Overuse and the Role of Medical and Surgical Specialty Societies: Choosing Wisely Campaign*

Plugged Into Healthcare: Investment & IT

Kathy Regan *Healthcare Information Technology: An Investor's Perspective*
Ken Ong *Patient Engagement - Yes, There's an App for That!*
Darryl Hollar *Transforming Health and Wellness via Targeted Use of Information Technology and Product Management*

Message from the Chair



“I’d like to congratulate our graduates, wish them well as they move on to their next phase, and encourage them to stay in touch with us.”

Welcome to the third issue of *The Link*, the newsletter for and about the Department of Health Policy and Management. As I write this note, I’m struck by themes of both change and continuity. For starters, today is the annual MPH Commencement Ceremony, a day in which many of our students become alumni, and celebrate their journey here at Mailman with their family, friends, faculty, and fellow graduates. I’d like to congratulate our graduates, wish them well as they move on to their next phase, and encourage them to stay in touch with us. We’re proud of you and happy for you!!

This is also a time of transition in the organizational infrastructure here in HPM. As described more fully in her profile later in this issue, Susan Cohen is retiring this summer from her longstanding position as Academic Director of our Full-Time Academic Programs. In every aspect of her job, Susan went well beyond the basics of her job description and did so with grace, hard work, and a commitment to the interests of the department, our faculty and our students. We will miss her! At the same time, we also are excited to congratulate Rebecca Sale as she transitions into her new position of Director of Academic Programs and Special Projects!! We have reorganized the entire academic administration unit in the department, in a way that will improve our efficiency and overall performance. Thanks to Rebecca for leading this process, one that we will highlight more fully in the next issue of *The Link*.

Finally, as I have described more fully in prior issues of *The Link*, the department itself is also in the midst of implementing a host of new programs and initiatives, on topics including Food Policy, Global Health Diplomacy, and Oral Health. And we are building up our non-degree Executive Education offerings. And planning our move into the 4th Floor of the Allen Rosenfield Building, which itself is an important part of our strategic plan.

Lots of change, lots of transitions.

But as I think about these changes and transitions, I also reflect on the continuity that forms the heart of HPM. Our focus on providing talented students like Alejandro Perez, profiled on page 6, with the skills, networks and credentials to be an effective leader and manager. Our pride in superb faculty, such as Peter Muennig, who not only engages in important and innovative research, but who also runs the Burmese Refugee Project, which he talks about on page 11. Our ongoing connections with our alumni, such as Gina Villani, who is the CEO of the Ralph Lauren Cancer Center, and who has taken the lessons from the classroom and put them impressively into practice, as discussed more fully on page 7.

There also is our HPM Lecture Series, described in the cover story of this issue, our recent HPM Conference, which was an extraordinarily exciting and successful day, and perhaps most importantly, the day to day life of our students, faculty and staff, which taken together comprises the heart and soul of our vibrant and cohesive academic community.

Let’s continue to use *The Link* to explore our connections (our links!). Get in touch with us. Send us your ideas. Stay (or get) engaged in the HPM community. And have a great summer!

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

Spotlight on Alejandro Perez (FTM '14)

“Beginnings are always tough.” It’s the first thing Alejandro Perez says when I ask him about the journey from his childhood in La Feria, Texas, a small town in the Rio Grande Valley, to New York City. As a first-generation college student, Perez found himself in unfamiliar territory at Princeton, where he studied literature, French and Spanish. As we talk, it becomes clear that entering unfamiliar territory and tackling new experiences are what drives Perez. In college, he spent his junior year studying abroad in Paris, “My Bohemian year,” he playfully recalls, but it was there that his interest in public health began to take shape. A close friend was diagnosed with an anxiety disorder, and he witnessed her struggle to cope with the disorder and its stigmas. When he returned to Princeton for his senior year of college, Perez began taking psychology courses to understand more about the issues surrounding mental health.

After college, Perez landed a job as a research assistant with Phoenix House, a non-profit that provides addiction treatment services to individuals and families. He worked with a team from Philadelphia’s Treatment Research Institute to help develop and evaluate a new curriculum for teaching the twelve-step program. Twelve-step programming has been shown to be effective in aiding recovering addicts, but according to Perez, “It sometimes gets a negative reputation. Clients can have misunderstandings about the program’s association with God and religion. The new curriculum uses video and graphic art to address some of these misconceptions.” Perez’s involvement with the study included being on site, coordinating materials with counselors, and supervising data collection. Though Perez’s current role with the project is complete, he hopes to return to the study in the future to help analyze the data. His experience working as a research assistant gave him

practical skills in research and management and allowed him to consider the type of impact he could have within the healthcare system. “The research experience was very useful,” he says, “because it got me thinking more about the big-picture questions, like what kind of programs we offered clients, and how we presented these programs, all in the face of cuts and changes in the healthcare system.”

Perez is an active presence on the Mailman campus. He served as a first year representative in the Student Government Association, and this year he is the Alumni Chair for the Future Healthcare Leaders. The position plays to his strengths: He is charismatic and enjoys meeting new people and forging personal and professional connections. Perez is eager to use his position as Alumni Chair to help build a strong support system for MSPH students. “FHL’s goal for the coming year is to bring in a broad array of professionals to speak about their own experiences,” he said. “Next year, we’ve lined up the Manager of Strategy at New York-Presbyterian Hospital, Jonathan Gordon, to come and speak about the Affordable Care Act and its effects on hospitals. I think this type of programming will provide a good resource for students.” Nearly one year into his coursework, Perez is confident that the classes he has taken in the management program have given him tools that will be valuable in a professional environment. “Having a framework to approach problems and learning to work within a team dynamic are two things I’ve taken away from my courses,” he acknowledges. “In terms of content, I think the finance and strategy courses have been really valuable. Every time we talk about healthcare, essentially, we’re talking about cost, and being able to understand that and apply it is important.” Perez has had no shortage of opportunities to put his coursework into practice. In January, he began



Alejandro Perez (FTM '14)

working at the National Center for Children in Poverty. One project he’s working on involves updating the *50-State Policy Wizard*, a program on the NCCP website that will allow users to create custom tables for understanding various public policies, including insurance for children, food stamps, and minimum wage standards. The wizard will ultimately reflect not only current policies, but how these policies have changed over time. Perez is optimistic about the project’s implementation and its effectiveness as a resource, “We have the newest policies updated and ready to input, and the timeline is a major project, but we’re making solid progress.”

Though he is busy with his work, classes, and campus commitments, Perez still finds at least an hour a day to devote to his creative passion: writing. He started writing fiction in college, and now he concentrates on poetry. This type of writing not only helps him fulfill his creative impulse but also keeps him focused. “Balancing the day-to-day with creative work is sometimes difficult, but I’ve realized how important it is to me. Writing is what centers me. I do it mostly to stay sane.” As for the future, Perez is open to the challenges and the changes in his life—it is, after all, what got him this far. He is interested in doing foundation work, and he is eager to incorporate writing into his career. As for where he will end up, Perez is undecided: “I might want to go back to Texas,” he says, “but who knows.” When he says this, it is impossible not to think of Perez’s Bohemian spirit, driving him forward.

Alumni Profile: Dr. Gina Villani (EMPH '06)

Gina Villani, MD, CEO of the Ralph Lauren Cancer Center discusses the transition from physician to CEO, and the set-backs and successes she's had along the way

When Gina Villani was thirteen years old, her cousin died from leukemia. Villani was stunned by the disease and the swift and devastating impact it had on her family. This experience ignited her interest in medicine and drove her to pursue a career as a physician. There were no doctors in her family and no model of how to navigate the medical school applications and entrance exams. Villani's parents were skeptical of her career choice, which only made her more resolute. "Because we didn't have anyone in healthcare in the family and no one had ever been to medical school, we didn't know the process," Villani says. She applied to medical schools for four years in a row, and undeterred, kept retaking her MCATs. On her fourth attempt, she got a perfect score and was admitted to the State University of New York (SUNY) at Stony Brook.

After medical school, Villani completed a residency in internal medicine at SUNY Syracuse and North Shore University Hospital. She did post-doctoral work in Hematology and Oncology at New York University Medical Center and Bellevue Hospital, and she worked at Montefiore in the Bronx during the height of the HIV epidemic, treating patients with HIV-related cancers. At North Shore, Villani treated patients without insurance, which sparked her interest in working with underserved populations. At North Shore, she also became a member of the Gynecological Oncology Group, studying the effectiveness of new drugs and drug combinations used to treat gynecological cancers. "It takes a lot to get people to understand what a clinical trial is," she

remarks. "It was a big accomplishment, being able to work with patients to help them understand the value of participating in clinical research."

As much as she valued working in a clinical setting and treating patients, Villani was eager to expand her career options. "I really like clinical medicine, but ultimately, I felt discouraged. I knew that I couldn't keep doing it five and six days a week. I was really frustrated with the healthcare system overall." Villani began to research her career options and decided to go back to school. She enrolled in Columbia's EMPH program. "The program completely changed my career path," she says, "I started to learn about the bigger picture, how the healthcare system works. It made me see that there were so many opportunities and alternatives to clinical medicine." She also learned valuable management skills at Columbia. "I had always been a staff physician at a hospital, so management was sort of the enemy," she jokes. She describes the relationship between the administration and the clinicians in her experience as two groups who didn't understand each other's roles and didn't speak the same language. "Learning about management widened my view of the whole healthcare system."

After getting her MPH, Villani served as the Vice President of Health and Quality of Life for the National Urban League. There she worked on a pilot program in partnership with the Morehouse School of Medicine. The program, first implemented at the Urban League in Elyria, Ohio, paired African-American



Dr. Gina Villani (EMPH '06)

men from the community with health coaches. The coaches provided physical screenings, nutrition and fitness education to help instruct the men on ways to control diabetes and hypertension. The program was such a success that it has since been instituted in various Urban League sites around the country.

In February of 2012, Villani was named CEO of the Ralph Lauren Cancer Center. The center was founded as a community-based facility focused on cancer prevention, diagnosis and treatment. This month marks the ten year anniversary of the center, and it continues to provide a space to treat underserved populations. Villani is proud to note that the center has expanded what is considered underserved, "It's not just racial and ethnic minorities—it's LGBT and the mentally-ill and other marginalized populations. We want to provide cancer prevention and treatment for those populations because they suffer disparities as well, so we've broadened who we are serving." She explains that the center is not a place for large-scale clinical trials or experimental drugs. "The center's goal is to stand as a model of how to provide cancer care in the community for underinsured, uninsured, disenfranchised people, and do it in a way that is financially responsible." Because Medicaid pays so little for cancer care, underserved individuals don't have access to quality care. Villani cites the huge

payment disparity, which will include more and more people under Medicaid as the Affordable Care Act is rolled out. The Ralph Lauren Cancer Center is striving to meet this roadblock head on by providing education about access to cancer care and payment reform and by emphasizing the notion that having insurance does not necessarily equal access.

Villani is a member of the American Society of Clinical Oncology (ASCO), and she also serves on their health disparities committee and government relations committee. She brings her experience working with Medicaid patients to these groups, and is currently working with them to develop payment reform. “We’ve done that with primary care,” she argues, “federally qualified health centers are focused on primary care, but the minute a specialist is required, it becomes a problem. The role that the Ralph Lauren Cancer Center plays isn’t typical cancer research. It’s more about policy; it’s more about trying to create a

“The role that the Ralph Lauren Cancer Center plays isn’t typical cancer research. It’s more about policy; it’s more about trying to create a model for taking care of people out in the community.”

“We were treating women for breast cancer, and then we were letting them walk out the door and die from other diseases. It drove home the point that you can’t treat cancer in isolation.”

model for taking care of people out in the community. And there’s some data that says it’s less costly to do that out in the community, yet the whole payment system forces people to go to hospitals.”

Villani recalls a study that she participated in at Brooklyn Hospital involving African-American women with breast cancer. Of the women participating in the study, half were obese, and a quarter were morbidly obese. The women underwent traditional forms of treatment, including chemotherapy, radiation therapy and surgery. The ten-year survival rate for the group was 90 percent, but the ten-year survival rate for the morbidly obese women was only 10 percent. “We were treating women for breast cancer, and then we were letting them walk out the door and die from other diseases. It drove home the point that you can’t treat cancer in isolation.” This insight has stayed with Villani, and she maintains this philosophy through her work. At the Ralph Lauren Cancer Center, part of the goal is educating members of the community about how other diseases might impact their cancer. “We want people to understand that obesity and diabetes really do put people at risk for cancer and affect patients and their recurrence rates.” One way to do this is by promoting exercise, nutrition and healthy living. The center offers a community lecture series, health screening events, and health fair presentations. They have just recently launched a yoga class, along with other exercise initiatives. “It is important not to

blindly treat cancer,” Villani emphasizes, “and forget other things that might be going on with these patients.”

As a woman in senior management, Villani has encountered her share of challenges. “I had just been hired at a new job,” she recalls of one particularly frustrating experience. “I had moved into my new office and was cleaning out the drawers, and I found an offer letter to a man for the job that I had just taken. The man was younger than I was and had less experience than I did. They had offered him fifty thousand dollars more than me.” Villani knows these inequities still exist. In her success, she sets a powerful example for women in the healthcare management field. She has not forgotten the valuable tools that helped form her work-ethic early on. “I think everybody ought to be a waitress at some point,” she says. “I waitressed all through high school and college, saving my money to fulfill my dream. It taught me organizational skills and how to multi-task.” She credits these skills with helping to manage her schedule and balance her professional life with her life outside of work.

In her free time, Villani stays active by participating in marathons and other endurance events. She has completed the New York City Marathon as well as a three-day race in the Colorado Rockies, and she will compete in a hundred-mile bike race on June 1 of this year. Plus, “I have two teenage girls,” she laughs, “so that’s enough to keep anybody busy.”

Q & A with Susan Cohen

Susan Cohen, Director of Academic Programming, will retire in July after many years with HPM. We talked with her about the changes she's seen and what she is planning after retirement.



Susan Cohen in 1973



Susan Cohen in 2012

How did you initially get involved in Academic Administration? And as your career took shape, did you have a sense of where you were going and where you wanted to go, or did it seem to be a series of accidents?

It was a series of accidents. My first graduate degree was actually in anthropology at the University of Wisconsin. My master's thesis was in ethno-history, on Menominee representational art. I spent a lot of time on Menominee reservations in northern Wisconsin.

I originally came to New York in 1968 to work on a project based at Lincoln Hospital in the South Bronx, and that was my introduction to healthcare, through the back door. I spent most of the year on an NIH grant studying differences between therapies in community temples and churches and therapies at medical centers. Then Dr. Jack Elinson, Chair of the Sociomedical Science Department at Columbia, brought me in on a grant he had at Columbia, to study multi-phasic health screening—they wanted to know if preventative care made a difference in long-term outcomes. They were looking for a project manager out in the field, and my background as an anthropologist fit. I'd already spent a year in the South Bronx, so I just transferred my expertise to Bedford-Stuyvesant. That was my real introduction to public health.

At that point in 1972, Columbia was starting something called the Center for Community Health Systems, a joint venture between P&S and the School of Public Health, and I had the luxury, as the center was being established, to stay here and educate myself about public health.

In the interim I got married, I was commuting 120 miles a day, and I was also an adjunct, teaching anthropology, and I began thinking, what can I do professionally where I can always get a job? Healthcare administration. So, still doing research, I applied to the MPH Program at Columbia. I started going to school and finished my coursework in 1978, the year Ben, my oldest, was born. I then had to transition to a job, and I still had to do a practicum for my degree.

I wrote letters to several hospitals. And low and behold, the then-head of what is now Robert Wood Johnson Hospital responded to my letter, inviting me to come in and talk. He had always had an administrative resident, and he didn't have one in New Jersey yet. He said, "I'm interested in you, but you'd have to make a serious two-year commitment to me as a resident." He said, "The first year, you're going to hip-pocket with me," that was his term. "You're going to just follow me around, you're going to do everything, come with me everywhere, and I'll take you to the

highest levels of government, and wherever I go, you're coming with me. The second year, I'm going to give you an area of responsibility." I said yes. After my first year, I was given the job of starting an Office of Education and was responsible for the administration of the residency programs in the hospital, along with staff and patient education. The other project I was given was to work with the development of the new Pediatric ICU. It was an incredible two years of learning. I ended up staying for eight years.

So I should warn the HPM students that their practicum could turn into a big commitment? [Laughter] What happened after eight years?

In 1985, a lot of things happened in my personal life that made me decide life was short, and working as a hospital administrator was a more intense job than I ever wanted. I had two small children at this point, and I decided it wasn't worth it. It was that simple. Luckily, I had a husband who could support us, so I took a year off, but I didn't fire our baby-sitter because we loved her so much. And she had been adopted, so one of the first things I did that year was put on my anthropology hat to help her find her birth mother. I learned that her mother had recently died, but I also found out that our baby-sitter had three half-sisters. And she's like this (fingers crossed) with them

now. That's the best thing I did in that year off, my good deed of the year, and it kept me intellectually alert, because it required a lot of research and investigation and knocking on doors.

Then I got a phone call from Columbia, from Jack Elinson who needed someone to come in on a project, and asked if I would consider working. And I said I would only consider working if I could work part-time, so I did. At the same time, Larry Brown and Sheila Gorman were considering starting an Executive MPH Program. When my work with Jack ended, I said I would come back to work with them part-time. The exec program was a lot of fun. We looked at established programs, at financial models, figured out how to make it work.

We were just admitting our third class when my husband Lenny got a huge promotion within Bell Labs. We moved to Atlanta, and we were there for seven years. For a while I commuted back to New York to work with the exec program and to finish the teaching assistantship I had. Then in 1995, I got a job at the Rollins School of Public Health, at Emory, in the Department of Environmental Health, doing research again, managing a large CDC project on musculo-skeletal injuries in the workplace. We worked with large corporations and enrolled employees when they were hired, and they kept extensive logs, and mailed them to us. I had been working there for five years when Lenny received a wonderful offer from General Dynamics. He moved back to New Jersey a year and a half before me and Jess, my youngest, did, so that she could finish high school in Atlanta. Lenny commuted back to Atlanta every weekend.

I called Sheila Gorman, to let her know I was coming back. She was thinking about retiring and wanted to bring in someone to do a lot of the stuff she did at HPM. And I said okay—my requirement was that I had to start work

the day before Jess started Yale, so that I could get tuition benefits. [laughter]

What are some of the changes you've seen here at Columbia and in the world of Health Policy and Management?

When I came on as an administrative assistant, there were only 40-odd students in the full-time program. We designed a part-time program in order to standardize the curriculum for our part-time students. The exec program is pretty much unchanged, although we had smaller student cohorts then. Also, the content side of management has changed—for a long time we let students decide what content they wanted to take. This has become more defined. I also think it's become really important for students to get a broad background across all the social sciences, to be able to see the world more holistically. To have a broader world-view.

We've also seen a lot of changes with accreditation. This was one of the earliest departments of Health Administration in the country; the first class graduated in 1947. It was also one of the founding members of ACEHSA, which eventually became CAHME, the organization that accredits healthcare management programs. At some point in the '80s, we lost our accreditation. Sheila Gorman said that it was something she always thought was really important, and she really wanted to get it back. So we did.

Is regaining CAHME accreditation one of the most important things you did during your tenure here? What other projects or experiences during your time at HPM stand out to you?

CAHME accreditation—I think it's important. We've had students do internships, at the Mayo Clinic, for instance, that they can't do without the accreditation. I also learned a lot by going to China. I went with Michael Gusmano and two HPM students, who also acted as translators, the year before

the Olympics. The work we're doing with China is ongoing in different spheres.

What will you miss?

I really like talking and working with students. Advising. Partially because of my life experiences and the fact that I've seen two children grow up and go through things.

What advice would you give to someone who's still figuring out where they fit in the world of health policy and management?

I think you have to decide where your strengths lie because there are so many different things that you could do. Different people have different strengths. My personal strengths have been in program development and analytics. And in figuring out how to get something done. And I actually like writing.

What are some of your plans for retirement?

We're going to travel. We're going to Croatia and probably to Israel and Jordan in the fall, and then to some place in Southeast Asia in the winter or spring. I want to exercise. I want to go to water aerobics at least three days a week. If I can figure out how to fit it in, I want to take a master gardening course, but that's a huge commitment, and the question that I'm wrestling with is how to fit it in with all the travelling!



Jessica, Susan, Lenny and Ben Cohen

Faculty Corner

HPM Professor Dr. Peter Muennig discusses his work with the Burmese Refugee Project

Peter Muennig has a hand in many research projects worldwide, but it is clear that he is passionate about his work with the Burmese Refugee Project, an organization he co-founded nearly 13 years ago. The Burmese Refugee Project (BRP) is an organization that offers education, healthcare, and social support to the community of Shan Burmese living in northwest Thailand. When Shan refugees arrived in Thailand, they were illiterate and unfamiliar with how to navigate Thai systems. As a result, they established impromptu communities without sanitation or clean water. “We set out trying to tackle these problems,” says Muennig, “with the ultimate mission of trying to generate human capital in the community so people can return to Burma one day and rebuild their own communities.”

The Burmese Refugee Project provides basic healthcare, education and access to sanitation and clean water to the local refugee community, mostly through a community participatory model. In this model, the BRP teaches locals the importance of constructing latrines and secures government waste removal services, but largely leaves the work up to community members so that they feel invested in the community. The BRP also provides the population with vaccinations, deworming medications, Vitamin A and toothbrushes. The success of these efforts is inspiring. Statistics show that in terms of basic growth, Shan refugee children have jumped from the 10th percentile (underweight and undersized), to the 45th percentile (a little under the Thai average for weight and age) in just over five years. The BRP aims to address more than just the community’s physical deficiencies. They are invested in working to create intellectual capital. At first, Burmese students were placed in traditional Thai schools, but the quality of education and the learning environment in the rural Thai schools were not optimal for securing a strong education. The refugee children were being discriminated against by both Thai students

and teachers. The BRP addressed this problem by working with the neediest children first—those who had experienced difficult home environments. “We decided to offer them the opportunity to go to the city and stay in a boarding school,” Muennig recalls. “That was one of the things that we did to build up the quality of education. We also made the same opportunity available to those who excelled in school, so we moved five kids to Chiang Mai for a high-quality private school education.” The organization also began an after-school academic tutorial program to help the refugee students who remained in Thai schools. The academic success stemming from these programs is substantial: There are refugee students in the top three positions in every local Thai school, and among the refugee community, there is nearly a 75 percent high school enrollment rate, which is higher than the Thai average in the area. Another exciting sign of the program’s progress is that this year, the program will see its first student off to college to study Chinese and business. Muennig is optimistic about the future of the BRP and is invested in expanding the program’s educational approach. “We opened a Montessori school, and the model is to be economically sustainable. We have multiple-language students, and we bring expatriate kids into this classroom environment, and they pay tuition, and the refugee kids attend for free. This is a way of sustaining the school and at the same time providing a very high quality education.” Muennig hopes to expand the Montessori and build a larger campus, eventually accommodating 70-100 students of all ages, but the funding has yet to be raised.

Though the BRP is making significant progress, they still face many challenges. “The biggest difficulties we have are with the adults,” Muennig acknowledges. “Drugs are a problem in the community. Legal violations are a problem, both against the refugees and within the refugee community, and there is a high rate of alcoholism and other diseases such as hypertension and heart disease.” In addition to basic medical care, the BRP offers programs in alcohol and substance abuse education and intervention, but the community is slow to embrace these changes. Another issue in the refugee community is

fertility. “Most families have two to three kids, which is more than they can financially afford to have, earning under two dollars a day,” Muennig says. “We’ve been working on sex education within the community, and it’s easy to get people to understand the utility of birth control, but it’s very difficult to change ideas about children.” The global community has placed much emphasis on developing Burma’s infrastructure due to recent government reforms, but according to Muennig, many organizations such as the BRP, which are working outside of Burma, are getting defunded so that infrastructure can be built within Burma. “People are overlooking this huge resource of human capital that hasn’t yet moved to Burma and cannot because their communities and schools have not been rebuilt,” argues Muennig. “The international community really needs to think more broadly about where the resources should be going.”

Despite Muennig’s many projects and research interests, he remains committed to the BRP and is instrumental in organizing and expanding its programs. “My main role on the ground is to provide feedback in terms of trying to maintain continuous quality improvement and trying to meet targets for school enrollment and the tutorial program,” Muennig says. Coordinating the effort is not an easy task, but Muennig has a lot of support. Employees at the BRP come from all over the world, and they help keep the program running smoothly, along with the board in New York, which consists of Burmese scholars and other teachers and academics. Muennig specifically identifies David Rosenthal, Clinical Associate Professor in HPM and Family Medicine, for his help in supporting and organizing the BRP. “Without him, we would be sunk,” Muennig acknowledges.

Muennig recently returned to New York City to teach two classes in HPM, Health Disparities and Public Policy and Health Policy in the Global Context. “I bring the BRP and my other international research experiences into the classroom,” he says. “I think it gives the students a sense of the realities of what is happening in international work.”

To find out more about the Burmese Refugee Project or to donate, visit www.burmeserefugeeproject.org

Have You Heard?

HPM Faculty & Staff Updates

In January, HPM faculty member **Nan Liu** and his wife welcomed a baby boy, **Henry P. Liu**. In the same month **Emily Austin**, EMPH & PTM Program Coordinator, and her husband welcomed a baby girl, **Austin Harper Winslow**.

HPM faculty member **Miriam Laugesen's** book *Democratic Governance and Health: Hospitals, Politics and Health Policy in New Zealand* was published by Otago University Press in December.

On March 19, The New York Association for Ambulatory Care presented EMPH professor **Donald L. Ashkenase** with the Outstanding Career Achievement Award.

HPM adjunct professor **Michael Friedman** displayed his digital photography at Sam's of Gedney Way in *Visions of Music: Sketches and Digital Images*.

EMPH Faculty Director and Professor, **Tom D'Aunno** has been named Editor-in-Chief of *Medical Care Research and Review*.

Harvard Business Review ranked roughly 2,000 CEOs on a range of criteria, and listed the top 100 in its January/February 2013 issue. HPM faculty member **John W. Rowe** finished at number 40, and first in the world in the healthcare services and healthcare finance arena. Dr. Rowe was also named among the *50 Over 50 'Influentials' Who Are Changing Our Views on Aging*. The list appears in the December 2012/January 2013 issue of *AARP Magazine*.

Susan Cohen, Academic Director of the Department of Health Policy and Management, was presented with the Mailman School's annual Staff Award for Excellence.

HPM adjunct professor **Mr. Alan Levenstein** and his consulting workshop class were recognized by the World Federation of Pediatric Imaging for their work done on "WFPI Case Study" and the promotion of advanced imaging care for children worldwide.

HPM Welcomes New Faculty Member, Jemima Frimpong



Jemima A. Frimpong, PhD, focuses her research on examining the impact of the organization and management of health care delivery organizations on treatment practices, quality of care, and patient outcomes. Dr. Frimpong's research has a particular emphasis on understanding and improving the processes through which healthcare delivery organizations learn, innovate, and improve performance. Her primary stream of research aims to address questions related to three areas: adoption and continuous use of evidence-based practices, variations in the utilization of evidence-based practices, especially among underserved populations, and patient outcomes. Her second stream of research broadly examines the role of teams, particularly interpersonal and intergroup interactions on team effectiveness and performance. In addition to merging principles of organizational behavior and health services research, her work integrates quantitative and qualitative research methodologies in studying organization and management issues in health care organizations. Dr. Frimpong's goal is to design, implement, and evaluate interventions to help improve quality of health care delivery and patient outcomes.



Book Nook

We've asked our faculty to recommend a book or article that offers a valuable perspective on some aspect of the healthcare industry. Happy reading!

Paul Thurman (Strategic Management) recommends "Putting the I in Healthcare," an article by Gil Irwin (et. al.) in the February 18 *Strategy+Business* (a Booz & Co. publication).

Don Sexton (Healthcare Marketing) suggests Charles Duhigg's *The Power of Habit* (Random House, 2012) as a fascinating blend of research findings and case histories of how habits work and affect all of us.

Jonathan Engel (Healthcare Finance) recommends Steven Brill's article in *TIME* Magazine "The Bitter Pill: Why Medical Bills Are Killing Us" (March 4, 2013). He also suggests Atul Gawande's "The Cost Conundrum" (*The New Yorker*, 2009).

Kent McKinney (Strategic Planning for Health Insurance Plans) suggests *Woodrow Wilson: A Biography* by John Milton Cooper, Jr. The first and only American President to hold a PhD, Woodrow Wilson's social vision enabled him to form many of the first federal regulatory and legislative bodies which accelerated many of FDR's New Deal proposals under his administration.

Michael Sparer (HPM Core, Health Policy & the Political System) recommends *The Passage of Power* by Robert Caro, the latest in Caro's multi-volume examination of life and times of Lyndon Johnson. This book, like its predecessors, is a remarkable look at a remarkable leader, and offers terrific history, a great read, and true insight into effective leadership.

Thom Blaylock (Healthcare in the Arts) recommends *Into the Silent Land: Travels in Neuropsychology* by Paul Broks. It's a beautifully written book by a doctor about various neurological conditions, but it is also a thoughtful exploration of what it means to think and be and the sometimes odd ways doctors see their patients.

Kate Garrett (Healthcare Quality) subscribes to THCB Reader, which provides email updates of new content from The Health Care Blog (www.thehealthcareblog.com). In addition to posts on quality issues, the Reader provides an efficient way to keep up with what's happening in the overall implementation of the ACA as well as the development of the insurance exchanges, ACOs and health IT.

Art Gianelli (Hospital Management) recommends *Hospital*, by Julie Salamon. Though it was published in 2008 and many things are changing, *Hospital* is still the best under-the-hood inside look at the way hospitals really work: successes, failures, dysfunctions, triumphs and everything in-between.

Tom Ference (Strategic Management) recommends "Aggregate, Integrate, Align: A Framework for Health System Development and Alignment" by Steven Levin and Gregory Maddrey (EMPH '06). The article (*The Chartis Group*, May 2013) provides a very clear framework and process for aligning physicians and health systems and includes some excellent case examples.

Call for Class Representatives

Do you keep in touch with your classmates from Columbia?

Are you interested in getting more involved with HPM and networking with other alums?

Do you want to be a part of a fundraising initiative to help the department reach its mission?

As you may know from reading the previous issue of *The Link*, HPM is relocating to the fourth floor of the Allan Rosenfield Building. This move is a critical component in the department's strategic plan. The new space will enable growth and enhance collaboration and scholarship. We also need to reconnect with our alumni, so they can provide both fiscal and intellectual resources. As a part of this effort, HPM is looking for alumni volunteers to be engaged as class representatives. Class reps will be instrumental in HPM's fundraising campaign. Responsibilities include reviewing alumni lists and reaching out

to classmates, participating in meetings, special events and activities, and engaging contacts in HPM's initiatives. They will also help add an alumni voice to department activities.



If you are interested in being a class representative, contact Rebecca Sale at rlr2108@columbia.edu.

HPM Highlights

Welcome to **Dori Lorsch, CPA**, the new HPM Department Administrator.

The Regina Loewenstein Prize for Academic Excellence in Health Policy and Management is being presented to **Amy Elitzer (FTM '13)**.

Ashwini Batchu (FTM '14), **Yasmin Wazir (FTM '14)** and **Grace Yeh (FTM '14)** were selected for a new administrative summer residency program offered through the Columbia University College of Physicians and Surgeons (see sidebar).

Mustfa K. Manzur (FTM '13) received the Mailman School Outstanding Teaching Assistant Prize. This honor recognizes exceptional contributions by a teaching assistant who displays peerless dedication to learning, remarkable commitment to supporting course operations, and excellence in communicating with students.

HPM is offering a new award this year, The Foster G. McGaw Scholarship Award. This award is provided to students in Association of University Programs in Health Administration (AUPHA) member programs who have demonstrated academic excellence during their graduate studies. The scholarship was endowed by Foster G. McGaw, founder



Mustfa K. Manzur (FTM '13)



Amy Elitzer (FTM '13)

of the American Hospital Supply Corporation. In endowing this scholarship, Mr. McGaw recognized the importance of health administration education and AUPHA's contribution to the field. The Foster G. McGaw Scholarship Award is being presented to **Whitney Gruhin (FTM '13)** and **Sunitha Reddy (FTM '13)**.

Several students in Dr. Sparer's HPM Core Class have gone on to publish articles in notable journals that started as class assignments. **Peter D. Fabricant's (GPH '13)** article "A Narrative Review of Surgical Resident Duty Hour Limits: Where Do We Go From Here?" was published in the March issue of *Journal of Graduate Medical Education*. **Bekir Tanriover, MD (CEOR '13)** published his article "Future of Medicare Immunosuppressive Drug Coverage for Kidney Transplant Recipients in the United States" in the *Clinical Journal of the American Society of Nephrology* (April 4, 2013). **Kevin Munjal's (EMPH '12)** article "Realigning Reimbursement Policy and Financial Incentives to Support Patient-Centered Out-of-Hospital Care" appeared in the February 20, 2013 issue of *JAMA*.

Kristine Kulage (PTM '14) presented "Take the xTrain to NIH NRSA Success" at the National Council of University Research Administrators' 7th Annual Pre-Award Research Administration Conference in New Orleans.

Chris Pernel (EMPH '11) recently released *Letters to My People: Inspirational Essays, Poems, and Affirmations* through Amazon.com.

New Administrative Summer Residency for HPM Students

The Administrative Residency Program of the Columbia University College of Physicians and Surgeons is a 12-week summer program designed for students seeking to prepare for careers in healthcare management and leadership positions in the healthcare delivery system.

The purpose of the residency is to provide an introduction to the daily activities of the College of Physicians and Surgeons from the perspective of top management.

The residency is structured to provide experiential learning in an academic medical center environment within departmental rotations for varying lengths of time over a 12-week period. The residency is tailored to the interests and professional needs of the student.

The summer 2013 program will enable HPM students to observe the role, function and style of top management individuals; analyze the decision-making process at different levels of the organization and provide an environment for candidates to apply the skills, theories, and concepts presented during the academic year.



Dr. Kevin Munjal (EMPH '12)

Stay Connected!

SAVE THE DATES

**HPM Lecture Series presents Dr. Steven Corwin,
CEO of New York-Presbyterian
Date and Location TBD**

**HPM Networking Event
November 14, 6-9pm
Columbia University Club of New York**

ALUMNI

Update your contact information via the HPM Department homepage:
www.emph.columbia.edu/alumni_update_form.html

Check out our EMPH student blog: www.columbiaemph.wordpress.com

**Check the HPM website for future issues of *The Link* to keep up with
what's happening in the department.**

Contact HPM to share your updates.
Email Carey McHugh: ctm2101@columbia.edu



*EMPH class of 2013 with HPM faculty and staff
at the 2013 HPM Healthcare Conference*

THE LINK

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