Earlier this year, the AcademyHealth Board of Directors created the HSR Impact Award to recognize research that has had a significant impact on health and health care. The award, which is supported by AcademyHealth, is intended to identify examples of outstanding research that have been successfully translated into health policy, management, or clinical practice. AcademyHealth is pleased to announce the winners of the first HSR Impact Award:

Paul Ginsburg, Ph.D., president of the Center for Studying Health System Change (HSC) and his colleagues at HSC, were selected to receive the award for research conducted in 12 health care markets over a period of years on the policy issues raised by the proliferation of specialty hospitals. This research was summarized in an issue brief—Specialty Hospitals: Focused Factories or Cream Skimmers?—and through a subsequent policy conference to highlight the issue. More than 150 people attended the 2003 conference, including a wide range of policymakers and providers. The research and the conference generated significant media coverage, including articles in Washington HealthBeat; BNA’s Health Plan & Provider Report, and Modern Healthcare. The New York Times and USA Today consulted with HSC staff, and published articles citing the report.

Because the HSC site-visit research indicated that underlying distortions in the Medicare inpatient prospective payment system were likely contributing to the proliferation of specialty hospitals, HSC researchers briefed Medicare Payment Advisory Commission (MedPAC) staff well in advance of publication of the research. As a result, MedPAC initiated an analysis of the relative profitability of Medicare services and subsequently recommended changes in the Medicare inpatient payment system. After the moratorium expired on June 8, 2005, the Centers for Medicare and Medicaid Services (CMS) indicated it would not approve any new specialty hospitals for at least another six months to allow time for changes in the payment system.

Jack Needleman, Ph.D., associate professor in the Department of Health Services, School of Public Health, at the University of California, Los Angeles, received the award for his study to establish a relationship between hospital nurse staffing and adverse patient outcomes. Co-authors on the study

Continued on page 3

Advancing Research, Policy and Practice
Although it hardly seems possible, my term as AcademyHealth's Board Chair is nearly over. It has been an honor and a pleasure to serve. My tenure coincided with the five-year anniversary of AcademyHealth, which has prompted us to take stock of the progress we've made and the issues that will arise as we move forward. I have been especially pleased to have led the Board during the launch of a number of important initiatives, which we believe will position AcademyHealth to meet the future challenges facing the health services research and policy communities.

On a national policy front, a major development is the reauthorization of the Agency for Healthcare Research and Quality. The Board’s Committee on the Placement, Coordination, and Funding of Health Services Research Within the Federal Government, established in 2003, prepared a comprehensive analysis of options for the organization, as well as placement of government-sponsored comparative effectiveness research activities. The Board adopted this report, which was informed by interviews with nearly 40 leaders in health services research and policy and which has now been widely disseminated to the administration, members of Congress, congressional staff, and within the health services and health policy communities. When fully implemented, comparative effectiveness research will not only inform health care, but also will create new demand for health services research expertise. This new demand will, in turn, bolster the case for improving the infrastructure for the field, including greater support for graduate education, research methods, and data development. To access the report, go to www.academyhealth.org/publications/monographs.htm.

A second initiative relates to the need to build a more compelling case for the role that research can play in informing health policy and practice. To underscore this need, the Board created a new award to recognize seminal research that has had a significant impact on health policy, management, or clinical practice. Following an open call for nominations selected two research teams to receive the first award at the 2006 National Health Policy Conference in Washington, D.C., in February. A description of their research will be published under the banner of AcademyHealth’s HSR Impact series. For details, see page 1.

Working with federal agencies and national foundations that fund health services research, AcademyHealth has also begun to explore the value of convening a Council of Sponsors of Health Services Research to develop a strategic plan or blueprint for the field. To advise this initiative, AcademyHealth staff is now conducting a series of interviews to seek input on the role of the Council and to identify infrastructure needs for the field.

The Board believes that collectively, these initiatives will help lay the foundation for stronger recognition of the role of research in improving health and health care. In his keynote speech at the 2005 Annual Research Meeting in Boston, Dr. Atul Gawande stressed the critical role this field must play if we are to achieve needed improvements in both public health and the health care system. He emphasized that “research on our health care system can save more lives in the next decade than bench science, research on the genome, stem cell research, and cancer vaccine research.”

Finally, I want to say what a pleasure it has been to work with the AcademyHealth staff, as well as with my fellow Board members. I wish everyone a wonderful and peaceful holiday season.

All the best,

Sara Rosenbaum, J.D.
George Washington University
HSR Impact from page 1

include Peter Buerhaus, Soeren Mattke, Maureen Stewart, and Katya Zelevinsky. The findings were first published in The New England Journal of Medicine, and the authors have made more than 100 presentations of the research at conferences and professional meetings of hospital and nurse executives, clinical nurses, nurse union leaders, regulators, and state and federal legislators. The authors further prepared a paper for Health Affairs on the implications for addressing the findings of this research.

The study and NEJM article have been cited in congressional testimony and state legislative efforts to enact nursing standards and programs to improve nursing. Shortly after the article appeared, a letter from Rep. Lois Capps (D-Calif.) was published in The New York Times urging Congress to enact the Nurse Reinvestment Act. The legislation received broad, bipartisan support and was signed by President Bush within two months of publication of the NEJM article.

The response to last spring’s Call for Nominations for the 2006 HSR Impact Award was extremely gratifying. We received 40 applications, which were then reviewed by a distinguished advisory committee comprising leaders in the fields of health policy and health services research. There were many excellent examples of the effective translation of research into health policy and practice. The Call for Nominations for the 2007 Award will be issued in February at the 2006 National Health Policy Conference, where Drs. Ginsburg and Needleman will formally receive their awards.

For more information about the HSR Impact Award, go to www.academyhealth.org/awards/hsrimpacts.htm.

HCFO Issues Special Topic Solicitations on Consumer Information and the Public Health System

The Robert Wood Johnson Foundation’s Health Care Financing and Organization (HCFO) program is a multifaceted initiative working to provide timely information to policymakers. To achieve that goal, HCFO periodically issues special topic solicitations, which are designed to elicit projects focused on a certain area of interest. One of the program’s most recent solicitations called for proposals examining the use of consumer information in the new consumer-centric paradigm.

Another sought proposals addressing the structure and functions of the current public health system.

The solicitations drew a strong response from a wide variety of researchers representing multiple disciplines. HCFO received 14 proposals on the use of consumer information and 34 public health system proposals. Two-to-three projects will likely be funded under each solicitation.

In designing its solicitations, HCFO staff considered prior research and worked to identify important unanswered questions. The solicitations were intended to trigger the investigator-initiation process, rather than prescribe specific research topics.

Consumer Information Solicitation

Under the consumer information solicitation, applicants were asked to consider developing research projects addressing how people make decisions about health care in different situations; the boundaries and guard rails in health care decision-making; the effectiveness of different communication strategies; and changes in the delivery system to facilitate better consumerism. By gaining a better understanding of the kinds of health care information that resonate with consumers, policymakers will be better equipped to develop education support tools for a variety of populations.

Public Health System Solicitation

The public health system solicitation challenged researchers to explore questions on how public health systems function; the structure of the public health system and the relationships between local, regional, state, and national agencies and the private sector; and inputs to and outcomes from the public health system. Research generated from this solicitation will contribute to a better understanding of the best ways to meet the modern-day public health system challenges.

Look for upcoming news on funded projects from these solicitations at www.hcfo.net.
Get Involved through AcademyHealth’s Interest Groups

AcademyHealth’s 10 Interest Groups (IGs) offer a variety of ways to get involved and make the most of your membership. Designed to facilitate interaction around specific topic areas relating to health services research and health policy, IGs are member-led groups that seek to advance the research and policy base in a specific area. All members—whether senior level, new professional, or student—are encouraged to participate in one or more groups. How can you get involved? You can join a committee, attend a meeting, or submit an abstract to be considered for presentation.

Offer to Volunteer
Each Interest Group is lead by a volunteer group of members that determine the group’s activities for the year. These may include hosting a Web- or audio-based discussion, coordinating a full-day pre-conference workshop, reviewing abstracts, developing a database of resources, or mentoring students. Interest Groups provide a way for you to learn more about research topics of interest to you, expand your skills, and meet new people. If you are interested in volunteering, call or e-mail Kristine Metter, director of membership, at 202.292.6754 or kristine.metter@academyhealth.org.

Attend a Meeting
The IGs are now developing a variety of program activities that reach out to those interested in a particular area of research. For example, the Public Health Systems Research Interest Group is hosting audioconferences on December 7 and January 11. With support from The Robert Wood Johnson Foundation, AcademyHealth will host two interactive audioconferences that address the use of accreditation measures and evidence-based research in developing an effective public health system. These 90-minute audioconferences bring together leading experts in public health systems research to discuss:

- Accreditation of Public Health Agencies: Lessons from Three States December 7, 2005, 2:00 p.m. ET
- The Guide to Community Preventive Services: Developing an Evidence Base for Public Health January 11, 2006, 2:00 p.m. ET

For more information or to register, please visit www.academyhealth.org/phsr/.

Submit an Abstract
Allowing for more in-depth discussion than is possible during the regular Annual Research Meeting program, Interest Group meetings provide a forum for individuals to share information on current issues related to their topic. You can help shape the content for these meetings by submitting a paper, panel, or poster. As an AcademyHealth member, and as a member of one or more IGs, you will be receiving additional information about these special calls for abstracts in the coming months.

The following Interest Groups are calling for abstract submissions in addition to the Annual Research Meeting’s Call for Abstracts:

- Child Health Services Research – Call for Panels and Posters
- Health Economics – Call for Panels and Papers
- Health Workforce – Call for Papers
- Public Health Systems Research – Call for Panels and Posters
- State Health Research and Policy – Call for Papers and Posters

Please note that you may submit an abstract to one or more Interest Groups and the Annual Research Meeting. You must, however, submit separately for each program.

Whether you want to work on a small project or large, whether you want to develop new skills or share your experience with others, there’s an opportunity for you to get involved with AcademyHealth’s Interest Groups.

New Board Directors Elected

The AcademyHealth member election for three new directors was held from September 6 – 23. Nearly 34 percent of members eligible to vote participated in this year’s election. In addition to the directors elected by the membership, the AcademyHealth Board elected two new directors at its June 28, 2005, meeting. The four-year terms for these new directors begin December 13 and are effective through December 2009.

The entire Board election process involves members at various stages. Early each year, the entire membership is solicited for suggestions for director nominees. The Nominating Committee, which is comprised of both AcademyHealth Board and non-Board members, evaluates nominations and prepares a slate of board-elected and member-elected candidates. The slate is then approved by the current Board. Please join us in welcoming the following individuals to the Board from the member election:

Member-Elected Directors

David Blumenthal, M.D.
Director, Institute for Health Policy, Massachusetts General Hospital/Partners HealthCare System

Robert M. Mayberry, Ph.D.
Director of Epidemiology and Health Equity, Research Center for Health Care Research, Institute for Health Care Research and Improvement, Baylor Health Care System

Mary K. Wakefield, Ph.D., R.N.
Associate Dean for Rural Health and Director, Center for Rural Health, School of Medicine and Health Sciences, University of North Dakota

Board-Elected Directors

S. Anthony (Tony) McCann
Secretary, Maryland Department of Health & Mental Hygiene

Louis F. Rosesite, Ph.D.
Director of Research, Center for Excellence in Aging and Geriatric Health and Thomas Jefferson Program in Public Policy, The College of William and Mary

Your input is an important part of the Board election process. As your designated representatives, the Board sets AcademyHealth’s strategic direction and assumes a leadership role in advancing the fields of health services research and health policy. In 2006 there will be five directors elected—three by the Board and two by the membership. We would like your input on nominees for all five slots. Start thinking now about who would be good representatives of the membership and watch your mailbox in January and February for details on our Call for Nominations.

For a full list of the 2005 Board of Directors, visit www.academyhealth.org/about/board.htm.

News from the Journals

Health Affairs

The January/February issue of Health Affairs is a special edition on hospitals, with features on consolidation, pricing, technology, quality, and the outlook for hospitals in the health care system of the future.

Milbank Quarterly

The winter issue of the Milbank Quarterly commemorates the 100th anniversary of the Milbank Memorial Fund. This special issue of the Quarterly contains selected articles from the journal’s past 83 volumes that provide insight into the role of both the Fund and its journal in addressing major policy questions for health services and population health.

HSR

The February Health Services Research includes articles addressing managed care, insurance and health care delivery, child health services, mental health services, and IRB and methodological issues.

Brown’s LTC Findings to be Highlighted at Policy Seminar

On February 8, AcademyHealth will conduct a policy seminar sponsored by The Commonwealth Fund’s Building Bridges: Making a Difference in Long-Term Care initiative in conjunction with the 2006 National Health Policy Conference in Washington, D.C. The seminar will feature highlights from a background paper commissioned for the initiative’s second annual Long-Term Care Colloquium held this past June in conjunction with the AcademyHealth Annual Research Meeting. In the paper, Randall Brown, Ph.D., Mathematica Policy Research, Inc., discussed new consumer-directed care initiatives and the implications for state and federal LTC policy.

For the upcoming policy seminar, Dr. Brown will focus specifically on issues of interest to state and federal policymakers, highlighting Cash & Counseling as one strategy. In addition, a panel of experts will address policy issues related to Cash & Counseling and consumer-directed long-term care more broadly. The seminar hopefully will stimulate an ongoing dialogue regarding consideration of innovative approaches to this high priority area of LTC financing and service delivery.

For more information about the policy seminar, contact ltc@academyhealth.org, or see www.academyhealth.org/ltc/2006/index.htm to register.
Discover statecoverage.net: An Online Resource for Expanding Coverage

How to best provide health insurance coverage in the United States is a complicated and controversial public policy issue. States play a critical role in the decisions around health insurance, serving as laboratories for new coverage models. The Robert Wood Johnson Foundation’s State Coverage Initiatives (SCI) program works with states to plan, execute, and maintain health insurance expansions, as well as improve the availability and affordability of health care coverage.

SCI recently added new resources to its Web site, statecoverage.net, to help states better navigate options for expanding health insurance coverage.

One of the most significant improvements is the state coverage matrix, which now provides at-a-glance comparisons and in-depth descriptions of coverage strategies, such as Medicaid and SCHIP waivers, reinsurance, high-risk pools, limited-benefit plans, and group purchasing arrangements. Also included in the matrix are coverage profiles of each state, which offer useful statistics including sources of health insurance coverage and an overview of Medicaid and SCHIP coverage within each state, as well descriptions of strategies that states have implemented to expand or sustain coverage.

Researchers, advocates, policymakers, and decision-makers can access additional resources designed specifically for them at statecoverage.net, including:
- A searchable database of hundreds of state reports written by state officials about their coverage programs and expansion strategies.
- Useful statistics on a variety of coverage-related topics.
- Summaries of the innovative work being done by the SCI and the Health Resources and Services Administration (HRSA) state planning grantees, including highlights, resources, and reports based on grant activities.
- Information on applying for grants and accessing SCI’s technical assistance.
- Analyses of the basic issues of health insurance coverage in the United States: why people are uninsured, the consequences of uninsurance, and what options exist for expanding coverage to the uninsured, including links to research and resources.
- A complete collection of SCI publications, from technical manuals and issue briefs to the annual State of the States report—a comprehensive overview of coverage expansion efforts.
- Agendas and presentations from past SCI meetings.
- Links to state programs and coverage-related Web sites.
- A glossary of definitions for coverage- and health policy-related terms.

Visit statecoverage.net today to learn more about SCI and how its resources can help your state expand coverage.

2005 Annual Research Meeting Hits High Marks!

The AcademyHealth 2005 Annual Research Meeting (ARM), hosted in Boston for the first time, hit several all-time highs, including record attendance. In its 22nd year, the ARM continued to be THE forum for health services research, providing opportunities to present and learn about cutting-edge research, debate health policy issues, network with colleagues, and develop new methodological skills.

If you think you saw many new faces in the audience and on panels, you did. More than one-third of the attendees were first-timers, many of whom enjoyed AcademyHealth’s FIRST first-timers mixer. Importantly, this year nearly two-thirds of the speakers were first-time ARM presenters. Many of these speakers participated in the peer-reviewed call for papers and call for panels sessions. For the past three years, there has been an increase in the number of call for papers sessions and call for panels. We are pleased that half of the presentations at our scientific meeting are selected through a peer-review process.

Interesting facts about the 2005 ARM:
- Attendance – 2,386 (50 percent increase)
- First-Time Attendees – 37 percent of total attendance
- Speakers – 544 (12 percent increase)
- New Speakers – 63 percent of the speakers on program for the first time
- Breakout Sessions – 134 (5 percent increase)
- Session Balance – 47 percent peer-reviewed sessions (up from 31 percent three years ago)
- Abstract Submissions – 1,510 (12 percent increase)
- Posters – 823 (15 percent increase)
- PowerPoint Presentations on Web – 462 (5 percent increase)
- Adjunct Meetings – more than 50, including 10 AcademyHealth Interest Groups

Mark your calendar now!

ANNUAL RESEARCH MEETING 2006
June 25–27 • Seattle
Abstracts Due: January 13, 2006
House and Senate Complete HSR Budgets

The U.S. Senate and House of Representatives have recently completed action on the funding bills that finance those federal agencies that support health services research. At press time, the only action remaining was for the House and Senate to meet in a conference committee to iron out the differences between the bills prior to sending them to the President to be signed into law. With the fiscal year ending September 30, the government has been operating under a “continuing resolution,” which provides funding for those agencies that have not yet received their appropriations. The continuing resolution provides funding at last year’s levels.

As noted in the September 2005 edition of AcademyHealth Reports, this is a tight budget year, and it will become even tighter due to the additional resources directed toward hurricane relief. Actions for specific agencies follow:

Agency for Healthcare Research and Quality

The House provides AHRQ with $319 million. This is the same level of funding as in FY 2005, and is also the same as the President’s request. The Senate provides $324 million. The additional $5 million is earmarked for comparative effectiveness research. If approved, this would bring total AHRQ spending on comparative effectiveness research to $20 million. We are asking the House to support the Senate level.

The Coalition for Health Services Research has concerns about this funding level. We recognize that few agencies not involved in the war effort, hurricane relief, or in preparing for a possible pandemic of avian flu will receive funding increases. However, Congress continues to increase the responsibilities of AHRQ, most recently with passage of the “Patient Safety and Quality Improvement Act of 2005.” Funding for these additional activities will have to be found within the Agency’s current budget, likely resulting in reduced research support in other areas, especially investigator-initiated awards. The Coalition hopes this issue will be addressed when Congress reviews the Agency and its goals next year during the reauthorization process.

National Center for Health Statistics

Both the House and Senate funded this critical data-gathering agency of the Centers for Disease Control and Prevention (CDC) at last year’s level of $109 million. In FY 2005, Congress provided a much needed $19 million increase, recognizing that the agency needed the increase to maintain its sample sizes and the number of surveys it undertakes. Without further increases, the agency will once again find itself in the position of determining which surveys to postpone, reducing the number of questions asked, and/or reducing the number of people surveyed.

CDC’s Public Health Research

In FY 2004, the CDC decided it needed a stronger public health research component. It took the $15 million it was currently spending on the Extramural Prevention Research program, added $15 million in new appropriations, and created the new Public Health Research program, which received $31 million in funding from both the House and Senate for FY 2006.

Centers for Medicare and Medicaid Services

The Centers for Medicare and Medicaid Services (CMS) Office of Research, Development and Information was funded at $28 million last year. For FY 2006 the House provides $65 million, while the Senate provides $78 million—$33 million more than the President’s request. However, the Senate bill reinstates the $40 million Real System Change Grants program that was eliminated in the President’s request and in the House bill, which, if funded at that level, could result in a loss of $7 million to core CMS research activities.

National Institutes of Health

According to the NIH, it currently spends 3.2 percent of its budget for health services research. This translates into $925 million spent on health services research in FY2005. If the trend holds, spending at the NIH on health services research would be $912 million under the House bill and $941 million in the Senate. We are urging the House to adopt the higher Senate number.

Veterans Health Administration

For FY2006 the President requested an overall funding level of $353 million for VHA research. This is a cut from a current spending level of $402 million. The House adopted the President’s figure, while the Senate bill increases funding to $412 million. The Coalition is supporting the higher Senate number.

Federal Funding for Health Services Research Programs

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<th>Agency</th>
<th>FY 2004</th>
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1 Including $40 million for Real System Change Grants.
2 Health services research dollars as reported by the NIH.
3 Health services research revenue portion of overall NIH funding.

\[\text{Footnotes:} \]

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AcademyHealth and Health Affairs are hosting the 2006 National Health Policy Conference (NHPC) in Washington, D.C., on February 6–7. Leading experts from the administration, academia, Congress, and the health industry will offer insights into critical health care issues confronting policymakers. Confirmed plenary speakers include noted health economist Uwe Reinhardt, who will take a provocative look at health savings accounts, and polling expert Bob Blendon, who will share his latest research on public opinion and health policy.

This year’s sessions will focus on issues such as rebuilding the Gulf Coast’s health care system; reducing disparities in health care; preventing and managing chronic conditions in children; and corporate responsibility for America’s health care. The National Health Policy Conference has become a banner event early in the new year. We hope you’ll be able to join us!

Minicourses on Health Policy Tools & Techniques – February 8, 2006
These two, three-hour minicourses, offered in conjunction with the NHPC, provide participants with new analytical tools to bolster their skill sets and contribute to career advancement. The first course—Program Evaluation for Non-Researchers—provides an overview of the basic concepts and models of program evaluation. The second course—How to Communicate with Decision Makers: Using Technical Information to Inform Health Policy—gives a review of essential communication skills and advanced techniques for conveying a message to policymakers.

Health in Foreign Policy Forum – February 8, 2006
In its second year, the Health in Foreign Policy Forum will focus on an issue that literally crosses national borders: the migration of health professionals. With U.S. hospitals facing a major shortage of nurses and expecting shortages of physicians in the future, they are increasingly looking abroad to recruit health professionals. Other countries, especially those dealing with the HIV/AIDS epidemic, are concerned about the impact of emigration on their own shortages. The forum will bring together domestic health workforce experts, specialists in U.S. foreign aid, and speakers from source countries to discuss the following: Domestic Staffing Shortages: Role of International Recruitment; Developing Nations: Migration, Retention & Return of Professionals; Promising Domestic & Foreign Policy Practices; and a Policy Debate.

To register or learn more about the National Health Policy Conference, minicourses, or Health in Foreign Policy Forum, visit www.academyhealth.org/conferences/nhpc.htm.

Register now for the 2006 National Health Policy Conference at www.academyhealth.org/nhpc.