AHSR Testifies in Support of Increased Funding for Health Services Research

Dr. William L. Roper, M.D., M.P.H., dean of the School of Public Health at the University of North Carolina at Chapel Hill and former AHSR president, testified on March 7, 2000, before a House Appropriations Subcommittee, calling for substantial increases in federal appropriations for health services research. Citing growing demand for and the importance of health services research as a critical resource, Dr. Roper, a current member of AHSR’s Board of Directors, requested $300 million for the Agency for Healthcare Research and Quality (AHRQ) for FY2001—an increase of nearly 33 percent over current year funding.

Dr. Roper’s testimony on behalf of AHSR to the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies was in response to the President’s budget, which was released in early February. For the third year in a row, the President requested a substantial increase for the newly reauthorized AHRQ as well as increased funding for other Federal health services research programs.

Agency for Healthcare Research and Quality

Building on the concerns raised by the Institute of Medicine report on medical errors, the President has proposed a $46 million increase for AHRQ for a total FY2001 budget of $250 million. The agency is expected to dedicate $20 million of the increase to research on reducing medical errors and an additional $5 million to health care informatics. Funding also would be targeted for improving worker health and completing the national quality report requested by Congress in the Agency’s reauthorization.

AHSR is seeking an additional $50 million for AHRQ to ensure continuation of the critical disease management and prevention research made possible by the funding increases provided by Congress in the last two years, as well as to fully address the urgent need to reduce errors in medicine.

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AHSR 2000 Annual Meeting Highlights Health Services Research in the New Millennium

Join us in Los Angeles for the AHSR 2000 Annual Meeting, Research to Action: Shaping the Health System in the New Millennium, June 25-27 at the Westin Bonaventure Hotel. The conference is a critical forum for more than 2,000 researchers and users of research to dialogue on emerging health care issues. The meeting provides unique dissemination, learning and networking opportunities and includes sessions which are devoted to state-of-the-art research, cutting-edge policy and management issues organized around 10 themes. Sessions are targeted to participants from different disciplines and with varying skill levels and interests. In addition to featuring more than 100 sessions over a three-day period, the AHSR Annual Meeting attracts a large number of affiliated meetings of interest to attendees of the Annual Meeting.

Plenary Sessions Explore Future of Health Care

Opening plenary keynote speaker, Jeff Goldsmith, Ph.D., President, Health Forums, Inc., will present The Clouded Crystal Ball: Health Care in the New Millennium. Robert J. Blendon, Sc.D., Harvard University, will moderate Health Care in the 2000 Elections in a closing day breakfast plenary.

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Dear AHSR Members:

We are looking forward to seeing you in Los Angeles in June to celebrate the launch of the new Academy for Health Services Research and Health Policy. The merger between AHSR and the Alpha Center will be completed in May, and staff will be co-located in new offices at 1801 Connecticut Avenue on May 1. The new telephone number, email and website addresses will be announced next month.

The new year has been a busy one for AHSR. On February 17, AHSR submitted comments to DHHS on the rule to protect the privacy of individually identifiable health information. On March 7, former AHSR president and current board member, William Roper, M.D., testified on our behalf before the House Appropriations Subcommittee to offer AHSR’s rationale for substantial increases in federal appropriations for health services research. And on March 22, the Association and the “Friends of AHRQ” hosted a reception on Capitol Hill commemorating the 10th Anniversary of the Agency for Health Care Policy and Research and its successor, the Agency for Healthcare Research and Quality (AHRQ). In addition, we also presented President’s Awards for distinguished service to the field of health services research to Secretary of Health and Human Services Donna Shalala and Senator Bill Frist.

The AHSR Annual Meeting is just around the corner. We have already begun to receive registrations for the conference as well as for our popular methods seminars and other affiliate meetings. We now offer online registration for both the Annual Meeting on June 25-27 and the six full-day Seminars in Health Services Research Methods offered on June 24 and 27. Please check the AHSR website often for Annual Meeting updates and look for the full conference program online soon. The research abstracts for this year’s meeting will be on the website by June 1, replacing the hard copy Abstract Book; abstracts will be available online or by CD-ROM this year.

I hope to see you in Los Angeles for the first Annual Meeting of the new millennium!

Sincerely,

Diane Rowland, Sc.D., M.P.A.
AHSR President

Fall Methods Seminars to Focus on Federal and State Databases

The Fall 2000 Seminars in Health Services Research Methods: Using Federal and State Databases will be held in Washington, D.C. Tentative dates for the seminars are October 30–November 1, 2000.

AHSR is sponsoring the seminars in conjunction with the Agency for Healthcare Research and Quality (AHRQ), the Health Care Financing Administration (HCFA), the National Center for Health Statistics (NCHS), and the Department of Veteran Affairs. This year’s seminars will have a different format than in the past.

Day one will feature two plenary sessions. One plenary is designed to showcase privacy issues, including an update on Federal regulations and the prospects of enacting privacy legislation, as well as the mechanisms available to address privacy concerns. A second plenary will be an overview session of the featured federal and state databases, including linkage issues.

Days two and three will be devoted to full-day seminars on six to eight federal databases, including MEPS, HCUP, RESDAC, NHIS and selected VA databases. The sessions will feature both faculty presentations and hands-on work.

Refer to the AHSR website, www.ahsr.org, in May for more specific date, content and registration information.
New Online Member Benefits Now Available; AHSR Website Updated Daily

The recent merger of AHSR and the Alpha Center into the Academy for Health Services Research and Health Policy has netted several new and exciting online benefits for members. Two new electronic publications—Legislative Update and AHSR Member Update—were introduced in March. Both publications were sent to the electronic mailbox of our members and posted on the ‘Members Only’ section of our website. Starting in May, members can add their resume to AHSR’s online Career Center, making the professional connections they need in literally seconds. This resume service is absolutely free to AHSR members.

Legislative Update and AHSR Member Update Now Online

AHSR’s Legislative Update and AHSR Member Update will keep you in the loop on vital information that affects you and our field. Legislative Update focuses on important legislative activities and policy developments affecting our field. In this publication, you can get the latest information on medical privacy or medical errors or review recent AHSR legislative testimony presented on Capitol Hill. We’ll also send you special alerts when an important issue breaks and enlist your support on specific legislative issues. If there are issues that you would like us to cover in this publication, please send your suggestions to: loseran@ahsr.org.

AHSR Member Update, published monthly, will keep you in the know about annual meeting plans, new member benefits, professional development workshops and more. Whenever possible, you will be provided with direct links to our website where you can obtain additional needed information. If you have specific suggestions for this publication, please contact: jrichardson@ahrs.org.

Resumes Accepted for Online Career Center Starting May 1

You’ll be able to make the professional connections that you need quickly with the addition of the new Resume Bank to AHSR’s online Career Center. You will be able to short-circuit your calls to the usual suspects and avoid steep headhunter fees with this new service. There will be a 500-word limit for resume submissions. This career-boosting service is free to members. Stay tuned for specific details on how you can submit a resume to this online service in the April issue of AHSR Member Update. Resumes will be accepted to the Resume Bank starting May 1.

Make Your Annual Meeting 2000 Plans Online

Everything you need to know about Annual Meeting 2000 in Los Angeles (June 25 to June 27) is on our website. You can register for the meeting at www.ahsr.org/2000/register.

Our annual meeting site will also give you the latest information about the conference program as well as exhibitor and advertising opportunities. For more information on advertising or exhibitor opportunities, please contact: kbastian@ahsr.org. Please check our site regularly for up-to-the-minute information.

Information on our popular Seminars in Health Services Research Methods which will be held before and after the annual meeting is now available online. Find out about the topics of our six seminars, led by some of our fields most prominent leaders, by going to: www.ahsr.org/seminars.

The Robert Wood Johnson Foundation 1999 Investigator Award Grantees Now Online

If you missed our February supplement to HSR Reports, which featured the 1999 grantees selected for The Robert Wood Johnson Foundation Investigator Awards in Health Policy Research, you can find out about these distinguished investigators and their research projects at: www.ahsr.org/rwjf/1999/.

Send Us Your Email Address

If you’re a “recently wired” member, please send us your email address. You’ll be placed on our electronic mailing list for specific member publications. Please send your email address to: info@ahsr.org.

Need-to-Know Web Addresses at AHSR

| Annual Meeting Registration | www.ahsr.org/2000/registration |
| Students Opportunities/Annual Meeting | www.ahsr.org/2000/student |
| Registration for Methods Seminars | www.ahsr.org/seminars |
| AHSR Career Center | www.ahsr.org/2000/career |
| AHSR’s Legislative Advocacy | www.ahsr.org/govern |
Abstract Submissions Reach All Time High

Over 1,000 abstracts were submitted to this year’s call for papers, call for posters and call for panel categories. The themes attracting the most abstracts were Quality: Measuring, Monitoring and Improving Quality of Care and Access/Social Determinants. Specific titles and chairs for the call for papers sessions and panels will be listed in the Annual Meeting Agenda Book and on AHSR’s website, www.ahsr.org, before the meeting. The review process will determine the total number of theme-related sessions; therefore, additional sessions may be scheduled at times other than those noted in the conference brochure.

Growing Poster Program Enjoys Increased Recognition and Visibility

This highly popular program will feature cutting-edge poster presentations during the following two poster sessions: Sunday, June 25, 1:00-2:30 p.m., and Monday, June 26, 6:30-8:00 p.m. Poster presentations, as well as paper presentations, will be summarized in CD-ROM format for the first time this year and provided to all conference registrants. Before the conference, abstracts will be posted on the AHSR website.

Monday Lunch Seating Organized by Research Interests

On Monday, June 26, the lunch rounds will be organized around research interests. Participants will be able to join colleagues with similar research interests in seating areas designated by theme. This will be an excellent opportunity to talk informally with others who share similar interests.

Expanded Student Benefits Offer Students a Professional Home

- lower registration fees new!
- lower hotel rate option new!
- networking with other students and leaders in the field
- student breakfast (Sunday, June 25, 8:15 - 9:15 a.m.) new!
- skill and career development workshops
- meet-the-expert sessions
- pre- and post-doctoral program
- “best” student paper presentations
- dissertation award new!
- career center (see below)

For more information, click on www.ahsr.org/2000/student.

Expanded Career Center Services

Have a leader in the field of health services research review your resume! For the first time this year, the AHSR Career Center, located in the Exhibit Hall, will provide resume-reviewing services on Sunday from 1:00 p.m. to 2:30 p.m. and on Monday from 2:30 p.m. to 3:15 p.m. and 5:15 p.m. to 6:15 p.m. Also take advantage of interviewing space available during exhibit hours. And, once again this year, the Career Center will feature binders of job postings, fellowship programs and resumes. If you would like to announce a job or fellowship program, or provide a resume in one of the Career Center binders, please submit six (6), three-hole punched copies to AHSR by Tuesday, May 23. If you plan to attend the meeting, please provide your on-site contact information to facilitate interviews during the the meeting. A bulletin board will also be available in the Career Center. For more information, click on www.ahsr.org/2000/career.

Affiliate Meetings Add Value to the Annual Meeting Experience

More than 30 affiliate meetings are planned each year to coincide with the AHSR Annual Meeting. This year’s affiliate meetings offer a wide range of choices, including:

Second Annual Meeting of Child Health Services Researchers: The Role of Partnerships. AHSR is once again pleased to be holding this meeting in conjunction with the AHSR Annual Meeting. Co-sponsors include Agency for Healthcare Research and Quality (AHRQ), the American Academy of Pediatrics (AAP), Health Resources and Services Administration (HRSA), Ambulatory Pediatric Association (APA), National Association of Children’s Hospitals and Related Institutions (NACHRI) and the American Academy of Nurses (AAN). In addition to a plenary session, eight breakout sessions are planned on a variety of topics centered around the following four tracks: Skill-Building for New and Junior Investigators; Advanced Skill Building; CHR Issues I and II. For registration information, go to the AHSR website, www.ahsr.org/2000/registration. For general meeting information call 301/594-1542.

Pan American Health Organization: Maximizing the Use of Research in Health Sector Reforms in Latin America and the Caribbean. This meeting will focus on strategies for improving the use of research in the planning and evaluation of health sector reforms in Latin America and the Caribbean.

For more information regarding affiliate meetings, visit our website, www.ahsr.org/affiliates.
Register Soon for the Popular Methods Seminars!

This year, six full-day courses are being offered before and after the Annual Meeting. Please see the conference brochure or AHSR’s website, www.ahsr.org/seminars, for fees and detailed course descriptions. Register early, as the number of participants will be limited.

Saturday, June 24, 10:00 a.m. - 5:00 p.m.
- An Introduction to Cost-Effectiveness Analysis in Health Care—Emmett B. Keeler, Ph.D., RAND
- Health Technology Assessment 101: Mediating the Technology Pipeline—Clifford S. Goodman, Ph.D., The Lewin Group
- Advances in Methods for Monitoring and Improving Health Outcomes from the Patient Point of View—John E. Ware, Ph.D., Quality-Metric, Inc.

Tuesday, June 27, 1:00 p.m. - 8:00 p.m.
- Risk Adjusting Health Outcomes: Can We Really Level the Playing Field?—Harold S. Luft, Ph.D., University of California, San Francisco, and Patrick S. Romano, M.D., M.P.H., University of California, Davis
- The Quality Toolbox—Elizabeth A. McGlynn, Ph.D., RAND

Continuing Education Offered

Application forms for Continuing Education Units (CEUs) will be included with conference materials at the meeting. CEUs for nurses will be provided by the American Association of Colleges of Nursing. Continuing Education Credits toward advancement, re-certification or appointment in the American College of Healthcare Executives (ACHE) have been approved by ACHE.

Register Online

Submit your registration form in one of the following three ways: fax, mail or by utilizing the online form. Registrations must be received by May 5 to qualify for the discounted registration fee. The online form can be found on AHSR’s website at www.ahsr.org/2000/register.

Join the Growing List of AHSR 2000 Annual Meeting Exhibitors

Agency for Healthcare Research and Quality (formerly AHCPR)
American Academy of Pediatrics
American Association of Retired Persons, Public Policy Institute
The American Journal of Managed Care
Aspen Publishers, Inc.
Association of University Programs in Health Administration
Blackwell Science
Brandeis University, Schneider Institute for Health Policy
Center for Studying Health System Change
Centers for Disease Control & Prevention
The Commonwealth Fund
Department of Veterans Affairs, Health Services Research and Development, Health Economics Resource Center and VA Information Resources Center (VIREC)
Duke University Press
The George Washington University, Center for Health Services Research and Policy
Harvard University, Ph.D. Program in Health Policy
Health Administration Press
Health Care Financing Administration, Office of Strategic Planning
Health Research and Educational Trust
Health Resources and Services Administration
Johns Hopkins University, Center for Research on Services for Severe Mental Illness, Center for Women’s & Children’s Health Policy and Health Services Research and Development Center
Jossey-Bass Publishers
Kerr L. White Institute for Health Services Research
Klemm Analysis Group, Inc.
The Lewin Group
Mathematica Policy Research, Inc.
The MayaTech Corporation

Medical University of South Carolina, Center for Health Care Research
The MEDSTAT Group
Northwestern University, Institute for Health Services Research and Policy Studies
Oxford University Press
Pan American Health Organization
ProjectHope, Health Affairs
RAND
The Robert Wood Johnson Foundation
Rush University, Department of Health Systems Management
Saint Louis University, School of Public Health
Scolari (Sage Publications, Inc.)
Social and Scientific Systems, Inc.
United Health Group, Center for Health Care Policy and Evaluation
United Hospital Fund of New York
University of Alabama, Birmingham, Lister Hill Center for Health Policy
University of California, Davis, Center for Health Services Research
University of California, Los Angeles, School of Public Health, Health Services Department
University of Cincinnati, Institute for Health Policy and HSR
University of Michigan Press
University of Minnesota, Division for Health Services Research and Policy
University of Nebraska Medical Center, Nebraska Center for Rural Health Research
University of North Texas, Department of Applied Gerontology
University of Pennsylvania, Leonard Davis Institute of Health Economics
University of Southern Maine, Institute for Health Policy
University of Wisconsin, Wisconsin Network for Health Policy Research
Virginia Commonwealth University, Department of Health Administration
Westat
Research Highlights from Recent Issues of *HSR*

The editorial team has selected two outstanding articles from the February 2000 issue of *Health Services Research* to be featured in this issue of *HSR Reports*. In the first of these, “The Direct and Indirect Effects of Cost-Sharing and the Use of Preventive Services,” authors Geetesh Solanki, Helen Halpin Schauffler and Leonard S. Miller seek to test empirically a model for estimating the direct and indirect effects of different forms of cost-sharing on the utilization of recommended clinical preventive services. They conclude that both the direct and indirect effects of cost-sharing negatively affected the receipt of preventive counseling in HMOs and PPOs. As predicted, the direct negative effect of cost-sharing was greater than the indirect effect for Pap smears and mammography. Eliminating cost-sharing for these services may be important to increasing their utilization to recommend levels.

Lead author Helen H. Schauffler, Ph.D., is an associate professor and director of the Center for Health and Public Policy Studies at the University of California at Berkeley. She believes that removing all cost-sharing for targeted clinical preventive services (e.g., mammography, Pap tests and counseling for health risk behaviors) may be important to increasing utilization of recommended preventive care. The possible benefits include improvement in health plan and provider performance on selected HEDIS quality measures that assess utilization of preventive care (mammography, Pap tests and provider advice to quit smoking). In addition, over the long run, increased utilization of preventive care may help to meet public health goals to increase access to these important services and may result in improved health of the population through earlier diagnosis of cancer and modified health risk behaviors.

In the second article, “The Behavioral Model for Vulnerable Populations: Application to Medical Care Use and Outcomes for Homeless People,” authors Lillian Gelberg, Ronald M. Andersen and Barbara D. Leake present the Behavioral Model for Vulnerable Populations, a major revision of a leading model of access to care that is particularly applicable to vulnerable populations. They seek to test the model in a prospective study designed to define and determine predictors of the course of health services utilization and physical health outcomes within one vulnerable population, homeless adults, paying particular attention to the effects of mental health, substance use, residential history, competing needs and victimization. They conclude that homeless persons are willing to obtain care if they believe it is important and it is available. Their findings suggest that case identification and referral for physical health care can be successfully accomplished among homeless persons and can occur concurrently with successful efforts to help them find permanent housing, alleviate their mental illness and abstain from substance abuse.

Lillian Gelberg, Ph.D., lead author, associate professor in the department of family medicine at the UCLA Center for Health Sciences, says, “Health planners will find it encouraging that the vast majority of homeless persons obtained initial medical attention when provided with referral resources in the community.” She adds that, “Gatekeeping mechanisms designed to ration physical, mental and substance abuse treatment services may lead homeless adults to further avoid seeking care in the early stages of illness if the care-seeking process becomes more arduous or time consuming. Moreover, the uninsured homeless, whose numbers are increasing due to welfare reform, may find it particularly difficult to obtain non-urgent care, even if they wish to do so.”

Upcoming Special Issues of HSR

In the coming months, three additional issues of *Health Services Research* will be published. In March, a theme issue on clinical outcomes and physician decision making will be published with support from the Health Services Research and Development Service (HSR&D) of the Department of Veterans Affairs. The lead editorial by Jack Feussner, M.D., Chief Research and Development Officer, and John Demakis, M.D., Director, VA HSR&D, highlights the importance of establishing a feedback loop that links research to policy, operational and clinical action.

The supplement to the April issue is the Special Proceedings from last year’s AHSR Annual Meeting. This issue honors Alice Hersh, the Association’s founding Executive Director. This year’s issue includes the AHSR President’s speech by Jack Hadley, Ph.D., as well as 12 excellent policy papers on issues ranging from expanding coverage for the uninsured to quality and outcomes of care.

Finally, in December, a special supplement will be devoted to instrumental variable analysis in health services research, co-edited by Joe Newhouse, Ph.D., Harvard University, and Mark McClelland, M.D., Ph.D., Stanford University. This issue will highlight recent advances in the application of instrumental variables analysis to health care outcomes.
Summary of HSR Survey Results

In October 1999, AHSR conducted an electronic survey of its members (those with email) regarding their willingness to pay increased dues to support publishing Health Services Research (HSR), the Association’s official Journal, on a monthly basis. The survey also assessed member views of various electronic publishing options.

Responses indicated that the main reasons for considering monthly publication included: (1) a 40 percent cumulative increase over the past couple of years in manuscript submissions with no diminution of quality – resulting in a backlog of accepted articles for publication; (2) an ability to have greater opportunities to influence policy and practice through more frequent publications; (3) an increase in publication opportunities for health services researchers; and (4) an opportunity to introduce new features to the Journal that may be of interest.

AHSR annual dues are currently $120, of which $38 is used to purchase a subscription to the Journal. The current annual subscription price for non-AHSR members is $70 for individuals and $108 for institutions.

Assessing Price Elasticity
To assess the price elasticity, respondents randomly received one of three versions of the survey: (1) one involving a $31 increase in dues, (2) another involving a $41 increase in dues, and (3) a third involving an approximately $62 increase in dues – reflecting approximately a 25 percent, a 33 percent, and a 50 percent overall increase in dues. After two follow-up reminders, 751 AHSR members with email responded – a 35 percent response rate. This compares favorably with similar surveys. As expected, more respondents are employed in academic settings than the membership at large (57 percent vs 45 percent) and more have doctoral degrees than the membership at large (66 percent vs 45 percent). The findings are summarized below.

Financial Support for Increasing Frequency of Publication
Overall, 60 percent of members support a dues increase in order to increase the frequency of HSR publication. Seventy-four percent of respondents favored monthly publication at the $31 level of dues increase; 54 percent at the $41 level; and 46 percent at the $62 level. As expected, there was a positive association between use of the Journal’s content in one’s work (from no use to citing the Journal and using it in teaching and related activities) and what one does with the Journal upon receipt (from do not open to scan abstracts to scan articles to read one or more articles) and the willingness to pay increased dues for monthly publication.

Those who favored a dues increase in order to publish HSR on a monthly basis were more likely to view publishing as being very or extremely important versus of lesser importance; were more likely to have their dues paid by a grant or other organization than by themselves; were more likely to be employed in academic than non-academic settings; and were more likely to be male. There were no significant differences between researchers and practitioners, duration of membership, student status or age.

Summary of Results of Electronic Publishing Options
Overall, over half (57 percent) of AHSR respondents preferred to keep the hardbound print version of the Journal; although a significant minority (43 percent) favored going to an all-electronic format. Even if HSR did go to electronic publication, 57 percent of respondents would still be interested in receiving a hardbound print version and most of these (70 percent) would be willing to pay $30 more per year for the print version above and beyond the cost of the electronic version.

Those who tended to favor electronic publishing were less active users of the Journal, tended to be more recent subscribers to the Journal, and tended to be employed in non-academic settings. Interestingly, those who did not consider publication to be very important were more likely to favor electronic publication than those who viewed publication as very or extremely important. There were no differences by who paid for dues, between practitioners and researchers, or by student status, age, or gender.

It should also be noted that if HSR went to electronic publishing, an overwhelming majority (92 percent) would prefer that it appear as an attachment in word processing format. Also, the overwhelming majority (88 percent) favor copyediting before any accepted refereed article would appear in electronic format. The feedback regarding electronic publishing reflects the complexity of the issue. While we believe the direction is clear (i.e., toward increased use of electronic dissemination of scientific research), we believe the pace and exact form that this takes will involve continued careful examination of the financial, legal and consumer preference issues.

The Journal, the Association and the Hospital Research and Educational Trust (HRET) will use this input in making decisions on both frequency and form of publication going forward.
The Association for Health Services Research jointly with the National Policy Association, a DC-based organization representing high-level business and labor leaders, will be convening an invitational conference on “Income Inequality, Socioeconomic Status and Health: Exploring the Interrelationships” on April 27, 2000, in Washington, DC.

The conference will feature panels on International Evidence and on the U.S. Experience by top scientists in the field; a Congressional Keynote address; a Policy Framework session; and a Policy Choices Roundtable. Findings from this Conference will be highlighted in a future issue of HSR Reports. Researchers include S. Leonard Syme, University of California/Berkeley; Lisa Berkman, Harvard Center for Society and Health; Clyde Hertzman, Canadian Institute for Advanced Research, University of British Columbia; Richard Wilkinson, International Centre for Health and Society, University of Sussex, UK; Nancy Adler, University of California/San Francisco; Ichiro Kawachi, Harvard Center for Society and Health; David Williams, University of Michigan; Bruce Kennedy, Harvard School of Public Health; and George Kaplan, University of Michigan. Policy speakers and panelists include Nicole Lurie, Office of the Surgeon General, HHS; Katherine Newman, Kennedy School; and representatives of Congress, business and labor, and the media.

For further information, contact Barbara Krimgold, bkrimgold@ahsr.org.

AHSR and NPA Hold Joint Meeting

The RWJF Investigator Awards in Policy Research Announce Recent Publications

The RWJF Investigator Awards in Health Policy Research, for which AHSR serves as the national program office, is pleased to announce two new publications.

Institutional Change and Healthcare Organizations: From Professional Dominance to Managed Care

W. Richard Scott, Martin Ruef, Peter J. Mendel and Carol A. Caronna, University of Chicago Press, 2000

This book, a landmark in the theory of organizations and in the history of health care systems, examines the transformations that have occurred in medical care systems in the San Francisco Bay area since 1945. The authors describe these changes in detail and relate them to both the sociodemographic trends in the Bay Area and to shifts in regulatory systems and policy environments at local, state and national levels. But this is more than a social history: the authors employ a variety of theoretical perspectives – including strategic management, population ecology and institutional theory – to examine five types of health care organizations through quantitative data analysis and illustrative case studies. To order, contact University of Chicago Press at 800/621-2736.

Social Epidemiology

Lisa F. Berkman and Ichiro Kawachi, Editors

Oxford University Press, 2000

The authors of this groundbreaking text define social epidemiology as the study of social determinants of health, implying that an important goal of public health is to identify and address factors in the social environment that may be related to health outcomes. In the first systematic account of this field, they focus on the major social factors that influence health, including socioeconomic position, income distribution, discrimination related to race/ethnicity or gender, social networks/social support, social capital and community cohesion, work environment, life transitions and affective psychological states. Individual chapters describe the conceptualization and measurement of each social variable, as well as empirical evidence linking them to a broad range of mental, physical, and behavioral health outcomes. To order, contact Oxford University Press at 800/451-7556.
Schneider Institute for Health Policy
The Heller Graduate School, Brandeis University

The Schneider Institute for Health Policy (SIHP) was founded in 1978 by Professors Stuart Altman and Stanley Wallack. Located in the Heller Graduate School for Advanced Studies in Social Welfare, SIHP is the largest research center within the university. Staff from SIHP collaborate with other health services research organizations, as well as with service delivery systems that serve as laboratories for demonstrating and testing innovative financing and health care delivery strategies.

Research Areas
Researchers at SIHP work on a variety of substantive issues that bridge the two domains of health services and health policy research. Professor Constance Horgan is Director of Research at SIHP. Other SIHP staff include approximately 60 researchers, administrators and technical assistance experts with backgrounds in economics, mental health, public policy, public health, sociology, political science, psychology, health administration, finance and operations. SIHP has approximately 70 Grants and Contracts in its current health services research and policy portfolio.

More than half of SIHP’s funding derives from Federal sources such as the Substance Abuse and Mental Health Services Administration, the National Institutes of Health and the Health Care Financing Administration. Foundations such as Robert Wood Johnson, Kaiser Family and Kellogg provide SIHP with approximately one-third of the total funding; the remaining funding comes from state and local governments as well as private sources.

SIHP examines the overall health care system from a variety of perspectives including questions of access to and quality of care; how health care is financed, delivered and utilized; and the cost of such care. In many of its studies, SIHP focuses on the special problems of our most vulnerable populations, including the elderly, individuals with chronic illness and those with substance abuse problems and mental illness. A distinguishing characteristic of the Institute is its ability to undertake innovative research and move the findings into the real world of solution-oriented practice. An example of such research is the Social HMO.

In addition to these historic research interests, SIHP researchers are also expanding the diverse institute research portfolio to include four new interrelated initiatives:

- Technology (how new technologies—pharmaceuticals in particular—impact the health care system and how emerging technological advances are adopted most efficiently into clinical practice)
- Children’s Health (with an emphasis on disease prevention)
- Behavioral Health (mental health and alcohol, drug and tobacco abuse)
- International Activities (establishing cost-effective health systems and assisting countries in defining their package of essential health services)

In addition to conducting health services and policy research, the Institute staff has forged relationships with a variety of outside partners and frequently collaborates with them to conduct research. SIHP researchers also provide consulting and technical assistance to both government and non-governmental agencies and foundations, and to a variety of community-based and other health care programs.

National Policy Centers
Over the past 20 years, SIHP has been the host site for a number of national policy centers in areas of health care financing, both acute and long-term care. A major focus of the Institute has been in studying alcohol and drug abuse treatment. A key activity in this area is the Brandeis/Harvard NIDA Center on Managed Care.

In 1998, SIHP was selected to be the National Maternal and Child Health Policy Center of Excellence. This Center was established to promote a broad-based approach to the social, economic, political and cultural determinants of policies that affect the health of children.

The Council on the Economic Impact of Health System Change
The Council on the Economic Impact of Health System Change is administered by SIHP and is supported by a grant from the Robert Wood Johnson Foundation. Stuart Altman, the Sol C. Chaikin Professor of National Health Policy at the Heller School, chairs the Council, which is an independent, non-partisan body of recognized experts in economics and health policy that focuses on the economic impact of changes occurring in the U.S. health care system. Its mission is to identify and analyze critical issues generated

continued on page 12
AHSR Responds to Privacy Regulation

AHSR filed comments on February 17, 2000, in response to the Department of Health and Human Services’ (HHS) proposed Standards for Privacy of Individually Identifiable Health Information. The Department issued its proposed rule on November 3, 1999, to protect the privacy of individually identifiable health information as required under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This legislation contained numerous administrative simplification measures to streamline the electronic transfer of health information and called for the development of privacy standards for identifiable health information.

Congress has wrestled with medical records privacy legislation since the passage of HIPAA, but has been unable to reach consensus, particularly on pre-emption of more stringent State laws. In the absence of Congressional action, HIPAA gave the Secretary the authority to promulgate a rule.

The Secretary received over 45,000 comments on the proposed rule, but maintains that a final rule with a comment period will be issued later this summer. The privacy standards would take effect two years after the final rule was published. However, Congress could act either later this year or sometime during the two years to override the rule or delay or prevent its implementation.

The full text of AHSR’s official response to the privacy standards and a summary of the proposed rule are available on AHSR’s website at www.ahsr.org.
**ACHE Award for Faculty**

Each year the American College of Healthcare Executives (ACHE) awards a full-time faculty member of a health-care management program (and an ACHE affiliate) $10,000 for research that enhances managerial effectiveness and/or career opportunities in health services administration. Last year, Jan Dreachslin and Rob Weech-Maldonado of Penn State won for their proposal “Diversity Management Practices of Hospitals in PA.” For information about what to include in your proposal, contact ACHE’s website, www.ache.org, click on the “About ACHE” link, then the “ACHE Awards” link. The 15 page (maximum) proposal must be received by April 17. Mail it to: Peter Weil, Ph.D., FACHE Vice President, Research & Development, ACHE, One N. Franklin Suite 1700, Chicago, IL 60606-3491. For questions, contact pweil@ache.org.

**Rutgers University Unveils New Center**

The Institute for Health, Health Care Policy, and Aging Research at Rutgers University announces the establishment of its newest component, the Center for State Health Policy. Under the direction of Joel C. Cantor, Sc.D., the Center provides impartial and rigorous research and analysis on health care issues to aid in health policy decisionmaking. While the Center’s research agenda is still under development, key areas for research already include community-based long-term care, health care financing and delivery, access to care, performance measurement and regulatory policy. The Center also contributes to education opportunities in health policy at Rutgers through symposia and meetings for the health policy community. Core funding for the Center is provided by the Robert Wood Johnson Foundation. The Center for State Health Policy is located at 317 George Street, Suite 400, New Brunswick, NJ 08901-1293. For more information, contact 732/932-3105 or email info@cshp.rutgers.edu.

**RAND Announces Opening of Pittsburgh Office**

RAND, the Santa Monica-based non-profit research institution, has opened an office in Pittsburgh, PA. A prominent part of RAND’s presence will be the RAND – University of Pittsburgh Health Institute, a joint effort between RAND Health and the Schools of Medicine and Health Sciences at the University of Pittsburgh. The purpose of the Institute is to help realize the full potential of medical advances in the health care system. The Institute will expand ongoing health care research at the participating institutions by developing and testing promising evidence-based interventions for improving clinical care and health services delivery. One goal of this activity will be to establish western Pennsylvania as a national exemplar of high-quality, high-value health care services. An equally important goal for the Institute’s work will be to help shape national health care policy.

Staff at the Institute will have opportunities for joint appointments with the School of Medicine and with other health services schools at the University of Pittsburgh. Although initially a collaboration between RAND and the University of Pittsburgh, other institutions are contemplating joining the Institute.

The Institute’s leadership includes three prominent figures in health care policy research: Dr. Robert H. Brook, vice-president and director of RAND Health; Dr. Arthur S. Levine, senior vice-chancellor for the Health Sciences and Dean of Medicine at the University of Pittsburgh; and Dr. Harold Alan Pincus, the Institute’s first director, and executive Vice-chairman of the Department of Psychiatry at the University of Pittsburgh School of Medicine.

**CHPR Explores Economic Issues for Cancer Survivors in New NCI Grant**

What kinds of health care programs or changes in government policy would help cancer survivors to cope better with the challenges they face? Researchers in Penn State’s Center for Health Policy Research (CHPR) seek answers in a new $2 million, five-year research study funded by a National Cancer Institute grant.

Dr. Pamela Farley Short, CHPR director and professor of health policy and administration, is principal investigator of the research team that includes investigators from Penn State University Park, the Penn State College of Medicine, The Johns Hopkins University, and CODA, Silver Spring, MD. A sample of about 4,000 people who were recently diagnosed and successfully treated for cancer will be identified from four registries of cancer patients in the mid-Atlantic region. Together, these tumor registries draw patients from inner-city, small urban, suburban, and rural areas. The researchers will be looking for factors that protect cancer survivors from or expose them to economic and quality of life changes. Data from the cancer survivors will be compared with data gathered in an independent national survey of people without cancer, and additional interviews at one-year intervals will continue to track the effects of cancer on the lives of survivors.

**Public Health Service’s Primary Care Policy Fellowship Program Evaluated**

Three researchers at Penn State are conducting an evaluation of the Public Health Service’s Primary Care Policy Fellowship Program, with funding provided by the Agency for Healthcare Research and Quality. The project is under the direction of Diane Brannon, Ph.D., professor and head of the Department of Health Policy and Administration, Mark Young, M.D., professor and chair of the Department of Health Evaluation Sciences, and Fredrick Orkin, M.D., professor of Health Services, Research, and Anesthesia, both in Penn State’s College of Medicine. The evaluation is commissioned by the Research Committee of the Primary Care Fellows Society, the alumni organization that has emerged from the fellowship program. Through a secondary analysis of existing evaluation data, career case studies, telephone interviews with stakeholders and focus groups, the study will evaluate how well the program meets participants’ needs, long-term career impacts and effects on organizations.
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by health system change and to disseminate its findings to national policy makers, health services researchers, industry leaders and the general public.

In 1999, the Council introduced its third book, *Regulating Managed Care: Theory, Practice and Future Options*, at AHSR’s Annual Meeting. For detailed, current information on Council activities and publications, visit the website at: http://sihp.brandeis.edu/council

- **Training Grants**
  SIHP has a strong commitment to educate students and to conduct scholarly research. Straddling the educational and research/policy arenas is both a challenge and the strength of the Schneider Institute. This dualism provides a very rich educational experience for graduate students. The Institute is fortunate to have several federal training grants. Specifically, funding from the National Institute for Mental Health supports five Ph.D. students, 11 Ph.D. students are supported by funding from the National Institute on Alcohol Abuse and Alcoholism, and 10 Ph.D. students are supported by funding from the Agency for Healthcare Research and Quality. Other SIHP research funding supports an additional 15 to 20 graduate students a year involving them directly in a variety of research arenas.

- **Information**
  To learn more about SIHP, please contact: Schneider Institute for Health Policy, The Heller School, MS 035, Brandeis University, 415 South Street, Waltham, MA 02454-9110; phone: 781/736-3900, fax: 781/736-3905, website: www.sihp.brandeis.edu