Frist Puts Health Care First

When Bill Frist delivers a speech on the senate floor about the importance of providing seniors with access to prescription drugs or protecting the country against threats of bioterrorism, he knows whereof he speaks. In 1995, Frist became the first practicing physician elected to the U.S. Senate in more than 70 years. Over the next six years, the Tennessee senator carved out a reputation for himself as the Republicans’ top health policy expert and an authority on bioterrorism issues. He was chosen by his colleagues to serve as the senate majority leader in December of last year.

Although some Washington pundits and journalists have questioned the relevance of Frist’s decision to keep “M.D.” next to his title as majority leader, to Frist the rationale has always been clear. “The M.D. sends the signal of what I think has made our democracy great from the founding of this nation,” he says. “And that is that we take real people who have real jobs—yes, jobs outside of government—and allow them to come and publicly serve the country.”

In recognition of Frist’s health care contributions as both physician and senator, AcademyHealth will present him with the organization’s second Chair Award on June 29th at its 20th Annual Research Meeting (ARM). The award honors “individuals who have made outstanding contributions to the fields of health services research and health policy and have effected the translation of research into practice to improve health and health care.” The first award was given to the late John Eisenberg of the Agency for Healthcare Research and Quality at AcademyHealth’s 2002 National Health Policy Conference. Frist will be the keynote speaker at this year’s ARM, which will be held in Nashville—the city where the senator was born and raised.

Born in 1952, William H. Frist was the youngest of five children of a physician father and a schoolteacher mother. For as long as he can remember, he wanted to be a doctor. “It started with my dad when I was a little boy,” he says. “His goal was to improve life and to make lives on an individual basis more fulfilling.”
As AcademyHealth’s members come together for this year’s Annual Research Meeting in Nashville, I would like to reflect on the progress we have made as an organization over the past several years. I also want to share with you the ways in which AcademyHealth is continuing to evolve.

This year marks the 20th anniversary of the Annual Research Meeting (ARM). Over the years, the meeting has grown tremendously—from 300 attendees and 60 speakers in 1984 to more than 2,100 people and 450 speakers last year. The ARM now includes 50 affiliate meetings, an awards program, and a broad array of poster sessions, student opportunities, and career services.

Since 2000, when AcademyHealth was created through the merger of the Association for Health Services Research and the Alpha Center, membership has grown from about 2,700 individuals to nearly 4,000, and voter participation in our board elections has more than doubled.

We have also added many initiatives and forums to our repertoire. We now offer a national health policy conference that is co-sponsored with Health Affairs and a health policy orientation. We have created an international program for health services researchers and policymakers that is focused on learning from cross-country comparisons, and we are co-sponsoring an international conference with the Agency for Healthcare Research and Quality (AHRQ). We have also expanded our health services research methods seminars, career services, and publications, as well as increased the number of journal subscriptions included with membership from one to three.

Under the banner of our affiliate organization, the Coalition for Health Services Research, we have strengthened our advocacy efforts for health services research. Last year, we helped restore funding for AHRQ and the Centers for Disease Control and Prevention’s (CDC) Extramural Prevention Research Program. This year, we are working to expand the budgets for AHRQ, CDC, and the Office of Research, Development, and Information in the Centers for Medicare and Medicaid Services.

AcademyHealth is exploring how we can add more value to our member benefits. To that end, we have recently conducted a member survey to assess your needs and interests. I am proud of what we have accomplished so far, and remain committed to working with you to advance research, policy, and practice.

W. David Helms, Ph.D.
President and CEO
AcademyHealth

| Dates to Watch | | |
|----------------|-----------------|-----------------|------------------------|
| **July** | **August** | **September** | **October** |
| 17–18 State Coverage Initiatives Workshop for State Officials* (Chicago) | 25 Early registration deadline for the 5th International Conference on the Scientific Basis of Health Services (ICSBHS) and its affiliate meetings (Washington, D.C.) | 2–19 AcademyHealth member elections | 26 Discounted registration for 2003–4 live seminars in health services research methods |
| | | 15 Changes in Health Care Financing and Organization meeting* Consumer-Based Health Care: Current Research and Implications (Washington, D.C.) | 20–23 5th International Conference on the Scientific Basis of Health Services (Washington, D.C.) |
| | | | |
| | | | * by invitation only |
Steinwachs Makes Case for HSR Funding

Testifying before Congress on behalf of the Coalition for Health Services Research, Don Steinwachs, Ph.D., of Johns Hopkins Bloomberg School of Public Health, called for an increase in federal spending on health services research by $196 million in FY 2004.

“Health services research provides information that is saving thousands of lives every year, improving the overall quality of health care in this country, and saving millions of dollars to private and public health programs,” said Steinwachs, who chairs the Coalition’s board of directors. Steinwachs testified on May 7 before the House Labor, Health and Human Services, Education, and Related Agencies Subcommittee of the Appropriations Committee.

The Coalition and the 130 member organizations of the Friends of the Agency for Healthcare Research and Quality (AHRQ) are asking Congress to increase AHRQ funding from $303 to $390 million. “AHRQ leads the world in its research into patient safety, quality of care, and translation of research into practice,” said Steinwachs. “Yet a lack of funds prevents AHRQ from doing more research.”

Steinwachs also recommended that Congress increase funding for the Centers for Medicare and Medicaid Services’ Office of Research, Development, and Information from $28 to $60 million. He asked for an increase from $126 to $180 for the Centers for Disease Control and Prevention’s (CDC) National Center for Health Statistics.

Steinwachs made a case for preserving the CDC’s Extramural Prevention Research Program, which has been slated for elimination in the president’s budget, at its current funding level of $18 million. He did not discuss funding for the Veterans Administration because that agency does not fall under the subcommittee’s jurisdiction.

To read Steinwach’s testimony, please visit www.chsr.org/testimony.htm.

Privacy Workshops Help Researchers Play by New Rules

After much anticipation, the Health Insurance Portability and Accountability Act (HIPAA) health information privacy regulation went into effect on April 14. The regulation affects every aspect of how health services researchers request, obtain, and handle identifiable health information.

AcademyHealth, in partnership with the Agency for Healthcare Research and Quality (AHRQ), recently conducted two workshops to acquaint researchers with the tools they will need to access and protect data under the new rule. Researchers will be given access to data sets that are limited to the “minimum necessary” amount of individually identifiable information for a given project. Institutional review boards and newly created privacy boards will be used to approve research protocols. With all these changes, it will take time before anyone knows how this system will play out in practice.

At the Washington workshop, held only weeks after the rule went into effect, researchers voiced a variety of concerns. Many participants wanted to know how the rule relates to subcontractors such as survey research firms. They wondered what subcontractors’ responsibilities are in regard to collecting, storing, and processing protected information.

According to Mary Durham, Ph.D., director at Kaiser Permanente’s Center for Health Research, Northwest and Hawaii, such subcontractors, which are known within the rule as “business associates,” are the responsibility of the “covered entity” (i.e., the source of health data). Covered entities must draft a business associate agreement that meets the regulation’s requirements and have it signed by their subcontractors. Although covered entities are responsible for protecting data, the onus is on the researcher to make arrangements for the data to move from the covered entity to his or her data sets.

AcademyHealth will release a “Promising Practices” guide based on case studies it has developed for the workshops. The guide will answer questions that health services researchers have had so far, provide sample business associate agreements, and discuss specific research designs. The guide should be available free through the AcademyHealth Web site by early fall.
2003 AcademyHealth Research Award Winners

Individuals Honored for Contributions to Research and Policy

Distinguished Investigator Award
Emmett B. Keeler, Ph.D.
Dr. Keeler is a senior mathematician at RAND Health and a professor in the RAND Graduate School and the University of California, Los Angeles School of Public Health. After receiving his Ph.D. from Harvard in 1969, he joined the RAND Mathematics Department. In 1975, he became part of the insurance experiment team to study the effects of alternative health insurance plans on episodes of treatment and health. He led the Patient Outcome Research Team on the management and outcomes of childbirth. His recent research includes analyses of improvements in chronic illness care, the cost-effectiveness of medical treatments, the demand for medical savings accounts, and the effects of competition and managed care on hospital costs. Last year, he served on two National Academy of Science committees. Together with his co-authors, Dr. Keeler has received three Article-of-the-Year awards from the Association for Health Services Research (the organization that merged with the Alpha Center to form AcademyHealth).

Alice S. Hersh New Investigator Award
Benjamin R. Druss, M.D., M.P.H.
Dr. Druss was recently named the Rosalynn Carter Chair in Mental Health and associate professor of public health and psychiatry at the Rollins School of Public Health, Emory University. Previously, he was an associate professor and director of mental health policy studies at Yale University.

Dr. Druss’s research focuses on improving care at the interface of primary care and mental health services—an interest that grew out of his dual training as a psychiatrist and primary care physician. Dr. Druss received a medical degree from New York University and an M.P.H. from Yale University.

Article-of-the-Year Award
Linda H. Aiken, Ph.D., R.N.
Dr. Aiken received this award for her lead authorship on the article, “Hospital Nurse Staffing and Patient Mortality, Nurse Burnout, and Job Dissatisfaction,” which appeared in the October 23/30, 2002, *Journal of the American Medical Association*. The article is coauthored by Sean P. Clarke, Ph.D., R.N.; Douglas M. Sloan, Ph.D.; Julie Sochalski, Ph.D., R.N.; and Jeffrey H. Silber, M.D., Ph.D. Dr. Aiken is director of the Center for Health Outcomes and Policy Research, and The Claire M. Fagin Leadership Professor of Nursing. She is also a professor of sociology at the University of Pennsylvania. Dr. Aiken is an elected member of the Institute of Medicine of the National Academy of Sciences, the American Academy of Arts and Sciences, the National Academy of Social Insurance, and a Woodrow Wilson Fellow of the American Academy of Political and Social Science.

She is a fellow and former president of the American Academy of Nursing and an honorary fellow of the Royal College of Nursing of the United Kingdom. Dr. Aiken received bachelor’s and master’s degrees in nursing from the University of Florida, Gainesville, and a Ph.D. in sociology and demography from the University of Texas at Austin.

Dissertation Award
Jill R. Horwitz, Ph.D., J.D., M.P.P.
Dr. Horwitz is now completing a post-doctoral fellowship funded by the National Institute on Aging at the National Bureau of Economic Research. She will join the University of Michigan law faculty in fall 2003. She holds a B.A. from Northwestern University, and an M.P.P., J.D., and Ph.D. in health policy from Harvard University. While in graduate school, Dr. Horwitz held graduate fellowships in the Harvard Center for Ethics and the Professions and the Hauser Center for Nonprofit Organizations.

She served as a law clerk for Judge Norman Stahl of the U.S. Court of Appeals for the First Circuit. She has been public affairs director for the Planned Parenthood Association of San Mateo County and a teaching fellow in history at Phillips Academy. Dr. Horwitz has published on no-fault tort reform, hospital conversions, ERISA, and nonprofit health care institutions.
From illnesses going into the hospital."

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the time Medicare was designed in 1965, Frist
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appearing in the April 3, 2002, Journal of the
American Medical Association.

As a member of the Foreign Relations
Committee, as well as a ranking member of the
subcommittee on public health, Frist has strongly
advocated for increased funding to combat global
HIV/AIDS. He also helped to pass legislation to
bolster America’s defenses against bioterrorism
after the 2001 anthrax attacks.

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American Medical Association.

Of course, opinions differ about the best way
to meet some of the health care goals on
Frist’s agenda. For example, many Democrats
disagree that privatizing Medicare is necessary
or even desirable, and would prefer instead
to add a prescription drug benefit to what they
view as an otherwise well-functioning pro-
gram. Nevertheless, no one can argue with
Frist’s passion for improving health through
well-funded research, strong policies, and
high-quality care—the very same things that
AcademyHealth and its members value. 

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As a pre-med student at Princeton, he spent his
junior and senior years studying health policy at
the Woodrow Wilson School of Public and
International Affairs. After graduating in 1974,
Frist attended Harvard Medical School and then
completed a surgical residency at Massachusetts
General Hospital in Boston and Southampton
General Hospital in England.

Throughout his 20 years in medicine, Frist per-
fomed more than 150 heart and lung trans-
plants and wrote more than 100 articles, chap-
ters, and abstracts on medical research.

As a U.S. Senator, Frist has emerged as one of
the leading voices on health care in
America. “He has enormous influence over
the timing and content of health legislation
and an abiding personal interest in the sub-
ject,” says Uwe Reinhardt, Ph.D., a health
economist at Princeton University.

One of his highest priorities is to modernize
Medicare and establish a prescription drug ben-
efit for seniors covered under the program. At
the time Medicare was designed in 1965, Frist
says, “sickness was defined by acute, episodic
illnesses going into the hospital.”

But with the number of seniors projected to dou-
ble over the next 30 years, and the numbers of
workers paying into the system estimated to fall
significantly during that same period, Frist
believes that the program’s design no longer meets
the needs of its target population. “As we live
longer, there are more and more chronic diseases
and long-term care requirements,” he says. “Yet
Medicare has not incorporated preventive care or
chronic disease management into its structure.”

“I now have the privilege of
being able to treat the
collective health of the nation.”
— Sen. Bill Frist, M.D.

Frist believes that the current political environ-
ment is right for the passage of a bill to reform
the program, and predicts that such legislation
will reach the senate floor by July. Frist antici-
pates that the reform plan will comprise ele-
ments of several past proposals, including pre-
vious House bills and the Bush administration’s
Medicare reform framework. He believes one
effective way to strengthen the Medicare pro-
gram and improve the quality of care is to offer
beneficiaries a choice of coverage options
through competing private plan participation.

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Forum Promotes Global Collaboration on Health Services Research

This fall, AcademyHealth and
the Agency for Healthcare
Research and Quality will co-
host an international forum to
promote the exchange of
health services research to
improve health care quality and access. The meet-
ing, titled “The 5th International Conference on the
Scientific Basis of Health Services: Global Evidence
for Local Decisions,” will take place in Washington,
D.C., on September 20–23. Its focus is on promot-
ing the use of scientific evidence for clinical prac-
tice, health services management, and health policy.

“Every country is struggling with issues concerning
access to health care and the quality of that care,”
says Karen Davis, Ph.D., conference co-chair and
president of The Commonwealth Fund.

“This conference encourages cross-national com-
parative research and collaborative thinking in an
effort to work together toward a solution.” It is part
of a biennial series that began 10 years ago in the
United Kingdom, and has since been hosted by the
Netherlands, Canada, and Australia. More than 25
collaborating organizations worldwide are support-
ing the 2003 conference.

Don Berwick, M.D., president and CEO of the
Institute for Healthcare Improvement, will also
co-chair the conference. He and Davis lead an
international planning committee to define the
program and identify speakers. A call for
abstracts this spring yielded almost 400 sub-
missions from around the world, including
Argentina, Pakistan, China, Bolivia, India,
Germany, and South Africa.

“I’ve attended three ICSBHS conferences and
have always viewed them as a great occasion to
learn about what other countries are doing to
get science into health services,” says Kathy
Lohr, Ph.D., chief scientist at RTI International.

“That the meeting fosters exchange, progress,
and interaction is, in some ways, its own reward
for attendees.” More than 500 individuals are
expected to attend.

Register before July 25 and save $100. Visit
www.icsbhs.org for themes and speakers, an
up-to-date conference agenda, hotel and travel
information, and a registration form. ➤
Translating health services research into practice is Lisa Rubenstein’s goal and that of the nearly 50 investigators she oversees as director of the VA’s Center for the Study of Healthcare Provider Behavior based in Sepulveda, Calif. “My strong focus on mission and vision is rooted in my conviction that health services research should strive to be innovative, seek truth no matter how painful, and make a difference in people’s lives,” says Rubenstein.

A VA and RAND researcher focused on quality improvement issues, Rubenstein has brought an impressive array of skills to the Center and has recruited health services researchers from the VA Greater Los Angeles Health Care System, UCLA, and RAND. This year, the Center celebrates its 10th anniversary. Its mission is to promote better health and health care for veterans through better understanding of provider behavior, the factors that influence it, and the health systems interventions that will improve it.

The Center strives to be a source of new theoretical and empirical knowledge about designing, implementing, and evaluating interventions that lead to evidence-based and responsive clinical care in both VA and non-VA settings. Its investigators are attuned to the role of health care provider behavior and system interventions that can enhance patient care.

Through their work, Rubenstein and her colleagues have learned that system problems are often responsible for presenting barriers to high-quality care—and not individual providers’ attitudes. Not surprisingly, many of the intervention programs that the Center designs or evaluates rely heavily on the chronic care illness model, which takes a broad-based, systematic approach to patient care.

This model emphasizes using decision support, patient self-management, practice redesign, and information systems. Center researchers are looking at care interventions for depression, schizophrenia, HIV/AIDS, end-of-life care, smoking cessation, women’s health, and healthy aging.

“Single-component interventions aren’t enough,” says Rubenstein. Indeed, Center research on schizophrenia supports multiple components of care—including family intervention, patient self-management, and computer management—each of which helps patients cope with a unique aspect of the disease. A key feature of the Center’s depression intervention is active collaboration between primary care and mental health providers supported by care managers.

Other areas of Center research include evaluating efforts to translate research into practice, evidence-based medicine, and care quality measurements. Center researchers have also debunked a host of practices that aren’t effective. Work by Center investigators has shown, for example, that locally defined quality improvement is unlikely to succeed for smoking cessation, and has led to findings that increased use of telephone counseling is a better approach to helping people quit cigarettes.

Rubenstein’s colleagues commend her for creating a congenial and collaborative setting at the Center. In fact, her leadership may be part of the reason why VA Greater Los Angeles has seen a nearly 40-fold increase in annual health services research over the past decade. Between 1999 and 2002 alone, the Center received funding for 61 proposals and completed 80 funded projects. “Collaboration is really critical for health services researchers,” Rubenstein says.

Lisa Rubenstein, M.D.

Lisa Rubenstein, M.D., is a health services researcher and clinician trained in internal medicine. Rubenstein heads the Center for the Study of Healthcare Provider Behavior, a Veterans’ Affairs (VA) Health Services Research & Development Center of Excellence and is a professor of medicine at the University of California at Los Angeles (UCLA). She is a leader in designing and evaluating systems to improve health care quality, and has spearheaded development of new health services research methods, including functional status computer feedback, scale-based methods of quality of care, and sickness assessment and structured implicit review.

Among her many accomplishments, Rubenstein was awarded the 2001 VA Undersecretary’s Award for Outstanding Achievement in Health Services Research. She earned her medical degree at Albert Einstein College of Medicine and her M.S.P.H. at UCLA.

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members matter

Moving On and Moving Up
Keep in touch with friends and colleagues by sending your career news to membernews@academy-health.org. Submissions of no more than 25 words will be printed on a first-come, first-served basis.

Rajesh Balkrishnan, Ph.D., has accepted a position as associate professor of management and policy sciences at the University of Texas School of Public Health. He starts July 1.

Katherine M. Harris, Ph.D., has accepted a position as research fellow at the Substance Abuse and Mental Health Services Administration Office of Applied Studies.

Jane Horvath has accepted a position as vice president for policy at the National Chronic Care Consortium in Washington, D.C.

John E. McDonough, Dr.P.H., recently became the executive director of Health Care for All in Boston.

Doris Vahey, Ph.D., has accepted a position as coordinator of professional practice programs at the Mount Sinai Medical Center.

Fredric D. Wolinsky, Ph.D., is joining the College of Public Health at the University of Iowa as the John W. Colloton Chair in Health Management and Policy.

Organizational Affiliate Announcement
With a recent gift of $1.2 million from Blue Cross and Blue Shield of Florida, the University of Florida will establish an endowed professorship in the Department of Health Services Administration, College of Health Professions. The professorship will support the appointment of a nationally known scholar with interests in health insurance coverage, affordability, access to care, and related health policy issues.

Upcoming Events at AcademyHealth

Health Policy Orientation
Learn the ins and outs of policymaking in Washington from health policy experts and industry leaders on September 29—October 2 in Washington, D.C. *Health Politics and Policy: An Orientation to Decision-Making in Washington* is designed to teach scholars, fellows, university faculty, and federal and state government and foundation employees the fundamentals of health policy development and implementation.

AcademyHealth developed this program with support from the Centers for Disease Control and Prevention’s National Center for Health Statistics. Limited space is available. Visit www.academy-health.org/orientation to register.

Cyber Seminars
Learn from the experts without leaving your home or office through our Web-based cyber seminars in health services research methods. Our new fall and winter line-up features seven courses. The October, November, and December seminars are focused on monitoring, improving, and interpreting patient-reported health outcomes assessment.


News from the Journals

Health Affairs
The July/August *Health Affairs* features articles on medical liability and patient safety, physician shortages, health literacy, and federal health information policy. This issue also contains a special report on balancing bioterrorism preparedness with other public health priorities. Web offerings spotlight rising health care costs, including articles on large-scale subsidies for low-income populations, costs of covering the uninsured, and the effect of obesity on national medical expenditures.

HSR
*Health Services Research* is in the second phase in its move to electronic management of its review process. In collaboration with Blackwell Publishing, *HSR* has implemented a new interface using Manuscript Central, a Web-based system. Potential reviewers will identify their areas of expertise, and authors will similarly categorize their manuscripts. The Web-based approach includes the automatic conversion of manuscripts to PDF format to maintain confidentiality and security. To verify if you have an existing account, visit hsr.manuscriptcentral.com.

Milbank Quarterly
The June *Milbank Quarterly* features a useful review article about four areas of research in long-term care, plus empirical studies of the knowledge-transfer process for health services research, racial/ethnic disparities in Medicare spending for aged beneficiaries, the impact of the Balanced Budget Amendment on post-acute care, reform of primary care in England and Norway, and models of physician-hospital affiliations.
In March, AcademyHealth sent an online survey to our members and constituents to assess their needs. We would like to thank the 30 percent of our members who participated. Additional results are available on the “Members Only” section of our Web site, at www.academyhealth.org/membership/membersonly.htm.

Fifty-five percent of survey respondents described their primary job as “health services researcher;” ten percent said they were “policy analysts;” and the remainder were a mix of students, providers, consultants, administrators, and educators.

The most common reasons for joining AcademyHealth are journals and publications, professional affiliation, and networking opportunities. Members rated the journals Health Affairs, HSR, and Milbank Quarterly as highly valuable, as well as AcademyHealth Reports.

Nearly 60 percent of respondents said that AcademyHealth’s Annual Research Meeting was valuable or extremely valuable.

Asked which priorities they thought AcademyHealth should concentrate on, respondents touched on the following themes:

- funding for research;
- professional development/education;
- training/mentoring new students;
- catering to member needs;
- linking researchers and policymakers; and
- providing the most up-to-date information.

In addition to this survey, AcademyHealth recently collected qualitative information through focus groups and targeted phone interviews. Our staff and board will use this feedback to develop new products and services, improve on those we already offer, and enhance our communication with members. If you have any questions about the survey, please contact Kristine Metter, director of membership, at kristine.metter@academyhealth.org.