Editor’s note: As this issue went to press, we learned with great sadness that John M. Eisenberg, administrator of the Agency for Healthcare Research and Quality (AHRQ), passed away on March 10, 2002. We at the Academy offer our condolences to John’s family and the AHRQ staff.

On January 17, 2002, John Eisenberg, M.D., M.B.A., received the first Academy Chair Award at the National Health Policy Conference. The award recognizes an individual who has made lifelong contributions to the fields of health services research and health policy, and to the translation of research into policy and practice to improve health and health care.

Judy Feder, Ph.D., chair of the Academy Board of Directors, presented the award and shared with the audience quotes from letters received from Eisenberg’s friends and colleagues, including current and former DHHS secretaries Thompson and Shalala, and Senator Bill Frist.

“I can think of no finer recipient of the Academy’s Chair Award than Dr. John Eisenberg,” Senator Frist said. “John has the unique ability to combine the worlds of medicine, research, and policy to improve the quality and safety of our health care delivery system—a balancing act made possible by his rare talents and intellect.”

In accepting the award, Eisenberg stressed the need to build the moorings of the bridge between research and policy with evidence-based research to strengthen informed policy making. “This award—and the organization bestowing it on me—symbolize the importance of bridging research and policy in American health care,” Eisenberg said. “Together we must continue to strengthen the bridge and to keep traffic moving smoothly from the research side to the policy side.”

HSR Funding Under Siege

In the wake of President Bush’s proposed FY2003 budget released in February, the Coalition for Health Services Research is marshalling all its resources to oppose the proposed cuts in federal resources devoted to health services research. If the President’s budget is adopted, the field of health services research would lose a total of $94 million compared to current spending. Hardest hit are three critical federal agencies, the Agency for Healthcare Research and Quality (AHRQ), the Centers for Medicare and Medicaid Services (CMS), and the Centers for Disease Control and Prevention (CDC) Extramural Prevention Research.

None of these agencies would be able to issue any new grants in 2003 and would have to severely cut back or eliminate multi-year grants that extend into 2003.

“At a time when health care costs are rapidly increasing and we may be facing growing numbers of uninsured, we should be renewing, not reducing, our commitment to health services research to help us find practical solutions to these problems,” said Gail Wilensky, Ph.D., chair of the Coalition’s Board of Directors, in response to the proposed budget cuts.

In his State of the Union address, President Bush stated that Americans know that economic security can vanish in an instant without health security. “Health security will not be achieved without research into critical areas of health care delivery—namely assuring that all Americans have affordable access to the high quality health care they need,” said David Helms, Ph.D., Coalition president and CEO.

According to the Coalition’s analysis of the President’s FY2003 budget request, the impact of the proposed funding reductions is as follows:

Eisenberg Received First Academy Chair Award

John M. Eisenberg

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Dear Academy Members,

Health services research always matters, but its importance becomes ever more apparent in the presence of powerful policy needs. Recession and rising health care costs remind us of the vulnerabilities of our health insurance system that research helps us address. Many Americans are at risk of losing their health insurance with their jobs; states and employers are coping with the expense of providing coverage; and the federal government is struggling to support existing programs, let alone improvements that many agree are desirable.

At the same time, the events of September 11 remind us of the vulnerability of our public health system. Preparedness is now at the top of the nation’s health services research agenda. Health services researchers are key players in the effort to improve the nation’s public and private readiness for biological or chemical attacks by providing research on how the public health infrastructure and private health providers can be better integrated for surveillance, detection and early response, and to identify and evaluate methods of developing “surge” capacity for use during any crisis.

Independent of terrorism, our public health needs have been largely overlooked in recent years. And, as health services researchers know well, emergencies do not reduce the importance of addressing long-term problems—quality assurance, disparities in health status across communities, efficient medical practice, and the myriad other issues that Academy members explore. Leading policymakers examined these issues at our National Health Policy Conference in January, attended by more than 600 people.

We also learned at the Conference that increasing budget pressures pose a serious challenge to health services research. If research spending is reduced, as proposed in the President’s budget, our community’s ability to contribute will be seriously impaired. According to the HHS budget summary, the Agency for Healthcare Research and Quality (AHRQ) will be fully funded in 2003 through inter-agency transfers of evaluation funds. The budget will place a priority on patient safety, medical error reduction, national reports on quality and disparities in health care, and adoption of evidence-based clinical practices. Spending on quality, cost-effectiveness, and intramural research would be cut by $68 million. The Coalition for Health Services Research is making every effort to see that these research activities also receive the support they need.

Finally, let me call your attention to our recognition of an extraordinary colleague through the Academy Chair Award. No one could be more deserving than this year’s recipient, John Eisenberg, administrator of AHRQ. John’s lifelong contributions to the fields of health services research and health policy include not only his own research and application of research to policy, but also the enthusiasm and energy he brings to our field. His greatest contribution may be the model and support he has provided the many health services researchers who follow in his footsteps.

Judy Feder, Ph.D.
Georgetown University
Academy activities


This year’s three-day annual research meeting will bring together health services researchers, providers, and key health decision makers to address the critical challenges that confront the health care delivery system at the dawn of the 21st century. With the nation’s capital as the backdrop, the meeting, Health Services Research: From Knowledge to Action, will take place June 23 - 25 at the Hilton Washington. The program is led by conference chair Elizabeth McGlynn, Ph.D., associate director of RAND Health.

The meeting features more than 100 sessions that cover topics such as health insurance in the consumer era, what’s next for managed care, improving the quality of life among the elderly through long-term care, evaluating new models of primary care for women, and equipping the health care workforce for practice in the 21st century. The varied formats of the sessions—which range from panel presentations to methods workshops to policy roundtables—offer participants an opportunity to learn and make valuable contacts.

The Academy has responded to participants’ suggestions and built on its past successes to create new learning opportunities for public and private researchers and policymakers. New to this year’s program is the role of health services research in women’s health. The conference will also include sessions dealing with the increasing threat of bioterrorism and how health services researchers can best respond to it.

This year’s keynote speaker is Donald M. Berwick, M.D., M.P.P., president and CEO of the Institute for Healthcare Improvement, a nonprofit organization dedicated to improving the quality of the American health care system. As a key contributor to the Institute of Medicine’s recent reports on medical errors and quality, Dr. Berwick helped lead the drive to enhance the quality with which health services are delivered in this country. His keynote address—“Implementing the 21st Century Health Care Chassis”—will set the tone for a meeting dedicated to generating new knowledge and translating it into policy changes that reflect the current needs of consumers and providers.

Speaking of the 21st century, this year the Academy will host a Cyber café, allowing participants to check their e-mail during the meeting. Also for the first time, panelists are invited to post their presentations on the Academy’s website at www.academyhealth.org/2002/presentations.

Donald M. Berwick

2002 Training Directory Now Available

The Academy’s Directory of Training Programs in Health Services Research and Health Policy is now available. This Directory responds to a growing interest in health services research and health policy and increasing demand for information about Post Baccalaureate certificates, Master’s, Doctoral, and Postdoctoral programs in these fields. It has been expanded to include health policy research programs and the health policy tracks in public policy programs as well as the core health services research programs included in our two earlier editions (1997 and 1992). Additionally, when possible, we have included more descriptive information about the programs. Currently, we have 110 programs profiled. The online, searchable edition is now accessible via the Academy’s website at www.academyhealth.org/directory/, the print Directory will be available later this spring.

Cyber Seminars on Instrumental Variables: Registrations Still Being Accepted!

Register online for the final Cyber Seminar of our pilot series. Instrumental Variables, taught by Doug Staiger, Ph.D., of Dartmouth University, will be webcast on Thursday, March 28, from 1:00 - 3:00 p.m. Special rates are available for groups and students. Continuing Education credits are also available. Visit www.academyhealth.org/seminars/cyberseminars to register. Stay tuned for our next series of Cyber Seminars this fall!
MEMBERS MATTER

Moving On and Moving Up

In Members Matter, Academy members can keep up to date on career news of friends and colleagues. Please send your news to membernews@ahsphp.org. Submissions of no longer than 25-30 words will be printed on a first-come, first-served basis.

› Lu Ann Aday, Ph.D., was named the first Lorne Bain Distinguished Professor in Public Health and Medicine at the University of Texas Health Science Center at Houston, School of Public Health.

› Brady A. Augustine, M.S., was named to the National Committee for Vital and Health Statistics. He currently works as the corporate director for special projects/senior biostatistician and medical economist for Gambro Healthcare USA.

› Joanna Bokovoy, R.N., Dr.P.H., joined Dr. Larry Kleinman, chief of the Health Studies Unit, at Lehigh Valley Hospital as the director of Health Care Research.

› Maj. Thomas Bundt, defended his dissertation on immunization compliance in February at the University of Florida. He will be the first graduate of this Ph.D. program.

› J. James Cotter, Ph.D., is now an associate professor in the Department of Gerontology in the School of Allied Health, at Virginia Commonwealth University in Richmond.

› Elizabeth Docteur, formerly the director of health policy studies at the National Academy for Social Insurance, is now a health economist with the Organization for Economic Cooperation and Development in Paris, France.

› Kristine Elmendorf, a doctoral candidate in the Department of Health Policy and Administration at Penn State University, was recently awarded a research fellowship funded by the National Institute on Aging and the National Institute of Mental Health.

› Jennifer Flome, M.P.H., is a project administration specialist with RTI International’s Atlanta office. Her duties include project management, business development and marketing, and research.

› Leslie Greenwald, Ph.D., formerly the division director for payment research within the Research and Evaluation Group at CMS, is now a senior researcher at RTI International.

› Catherine Hess, the Association of MCH Programs’ first executive director, has left to consult in health policy.

› Betsy L. Humphreys, associate director for library operations and assistant director of health services research information at the National Library of Medicine, is serving on AHRQ’s National Quality Measures Clearinghouse Panel of Experts.

› Ivo P. Janecka, M.D., FACS, was appointed executive vice president for medical affairs and cancer control at the American Cancer Society, Florida Division. He is continuing as professor of surgery at Harvard Medical School.

› Douglas Kamerow, M.D., formerly USPHS assistant surgeon general and director of the Center for Practice and Technology Assessment at AHRQ, has joined RTI International as a chief scientist.

› Lauren LeRoy, Ph.D., has been appointed chair of a new Institute of Medicine committee on Public Financing and Delivery of HIV Care.

› Daniel R. Longo, Sc.D., professor of family and community medicine at the University of Missouri-Columbia School of Medicine has been named to the editorial board of the Journal of Tobacco Induced Diseases.

› Anthony T. LoSasso, Ph.D., was promoted to research associate professor at the Institute for Health Services Research and Policy Studies, Northwestern University.

› Nicole Lurie, M.D., has joined RAND as the first Paul O’Neill Alcoa Professor of Health Policy.

› Stephen Mc Connell was named interim president and CEO of the national Alzheimer’s Association in January 2002.

› Nancy Mele, DSN, R.N., formerly with the University of Arkansas for Medical Sciences, Pediatrics/UAP, is now assistant professor at the University of Memphis’ Loewenberg School of Nursing.

› Lloyd Michener, M.D., clinical professor and chair in the Department of Community and Family Medicine at Duke University Medical Center, was named a member of the Executive Committee of the AAMC.

› Meg Murray, previously the Medicaid director for the state of New Jersey, is now the executive director of the Association for Health Center-Affiliated Health Plans, a new association of 17 health plans.

› David Nash, M.D., the Dr. Raymond C. and Doris N. Grandon Professor of Health Policy at Jefferson Medical College was named the Tek Scholar by the Indianapolis Health and Hospital Association in October.

› David R. Nerenz, Ph.D., was named director of Michigan State University’s Institute for Health Care Studies, effective July 1, 2001.

› Cheryl Rucker-Whitaker, M.D., M.P.H., has recently accepted a position as assistant professor of preventive medicine at Rush Presbyterian St. Luke’s Medical Center in Chicago.

› Neil Solomon, M.D., Ph.D., was recently reappointed to serve on the board of directors at the International Council of Caring Communities, and as director of the Health Council Advisory Board.


› Mary Wakefield, Ph.D., R.N., previously director of the Center for Health Policy at George Mason University, Fairfax, Va., is now director of the Center for Health Policy at the University of North Dakota, Grand Forks.

› Kieran Walshe, Ph.D., has taken up a new post as director of research and reader in public management at the Manchester Centre for Healthcare Management, University of Manchester, United Kingdom.
Poster and Exhibit Programs
For all three days of the conference, the exhibit hall will host more than 100 exhibitors and feature more than 600 posters presenting the latest health services research findings. Reflecting its growing popularity and importance, the poster program has substantially expanded in recent years. Exhibitors will have the opportunity to share information and exchange ideas with approximately 95 percent of the conference participants. They will also receive a free posting on the Academy web site and a description in the conference agenda book. To exhibit or place an ad, visit www.academyhealth.org/2002/exhibits.

Student Opportunities
Following its successful debut last year, a students’ “meet-the-experts” breakfast has been scheduled for Sunday, June 23, from 8:45 to 9:45 a.m. This breakfast gives up-and-coming health services researchers a chance to network in an informal setting with some of the most distinguished names in the field.

Academy Affiliate Meetings
More than 40 meetings will be held in conjunction with the Annual Research Meeting. Check the web site for a complete listing and updated information. Listed below are some of the meetings sponsored or co-sponsored by the Academy.

- Fourth Annual Child Health Services Research Meeting – Saturday, 10:00 a.m. – 6:00 p.m. “At the Cutting Edge of Research and Policy” is the title of this year’s AHRQ-sponsored meeting held in conjunction with the Annual Research Meeting. * www.academyhealth.org/childhealth
- Health Services Research and Health Policy Center Directors Meeting – Saturday, 1:00 – 4:00 p.m. The meeting will focus on the shared concerns and interests of all health services research and health policy centers, and complements the February Health Policy Center Directors Forum hosted by the Association of Academic Health Centers.
- Public Health Systems Research Meeting – Saturday, 10:00 a.m. – 2:30 p.m. This new affiliate, sponsored by the Academy and CDC, will showcase public health systems research and will include an Invited Papers session, a Call for Papers session, and a small poster session. *
- The International Health Policy and Research Exchange: Lessons from Europe and Japan on Health Care Innovation in Social Insurance and Long Term Care – Sunday, 3:15 – 6:30 p.m. The double session will offer a comparative analysis in two specific areas: long term care, chaired by Guss Schrijvers and Josh Weiner, and innovations in social insurance, chaired by Uwe Reinhardt.
- Health Information Privacy Requirements and Health Services Research – Tuesday, 2:45 – 5:00 p.m. The Academy presents this educational workshop to explain how you can prepare to work within the regulation, the steps needed to obtain protected health information, and what determines de-identified information.

* Registration required

www.academyhealth.org/2002/affiliate
News from the Journals

Health Affairs
Health Affairs will feature 15 articles on nonmedical determinants of health in its March/April issue, for release March 12, including papers on socioeconomic status, disparities, environment, tobacco, alcohol, illegal drugs, obesity, and parental behavior. Papers recently published on the journal’s newly re-designed web site, www.HealthAffairs.org, include: a new proposal on reforming the Medicare fee-for-service program by John Wennberg et al., published Feb. 13; “Trends in Medicare Supplemental Insurance and Prescription Drug Coverage, 1996-1999,” by Mary Laschober et al., published Feb. 27; and a new paper coming March 20 on a trend toward thinner benefits and increased use of cost-sharing in health insurance products. In May, the journal will publish its annual international issue.

HSR
To increase the efficiency of the manuscript submission and review process and facilitate the bi-coastal location of the journal’s new editors as of September - Ann Flood and Hal Luft - HSR is adopting a policy of electronic-only submission of manuscripts effective September 1, 2002. Manuscripts that are not submitted electronically will be returned. A new common email address for the Journal will be established over the coming months and communicated to the field. HSR is also soliciting manuscripts for a special issue on the social determinants of health. Visit www.hsr.org for deadlines and details.

Milbank Quarterly
Academy members’ complimentary subscriptions to the Milbank Quarterly begin in March, courtesy of the Milbank Memorial Fund. The Quarterly puts critical issues in health policy into broader perspective by publishing research, syntheses, policy analysis, and commentary from a wide array of disciplines, including bioethics, history, and law, as well as health services research. The Quarterly’s editor, Bradford Gray, welcomes submissions from Academy members. For guidelines, see www.milbank.org/quarterly.html. The March issue includes Dov Chernichovsky’s paper on public choice and the state in the emerging paradigm in health systems, Marsha Rosenthal and Mark Schlesinger’s study of consumers’ attribution of blame under managed care, and a paper by John Lavis and colleagues on policymakers’ use of health services research.

HOT OFF THE PRESS

Shifting Responsibilities: Models of Defined Contribution
By Kathryn Martin, Changes in Health Care Financing and Organization program – February 2002
The managed care backlash has spurred an increasing demand for choice from consumers, while employers, faced with rising health care costs each year, try to balance worker satisfaction with their own bottom line. The defined contribution approach is being discussed as a possible solution.

This report seeks to identify the advantages and drawbacks of implementing various forms of defined contribution. It also outlines product options, contracting requirements, and responsibilities of both employers and employees in four defined contribution models. www.hcfo.net/pdf/definedcontribution.pdf

State of the States
By LeAnne DeFrancesco, Christina Folz, Madeleine König, and Carole Lee for the State Coverage Initiatives program – January 2002
This report describes how states are responding to the new health care environment, shifting their focus from expanding public programs to maintaining current coverage levels. It explores how state approaches to coverage have changed through flexibility opportunities provided under the new administration, and highlights key state innovations in reducing drug costs, establishing risk pools, and other cost-containment mechanisms. The report also notes resources available to states – through the Health Resources and Services Administration and The Robert Wood Johnson Foundation’s State Coverage Initiatives program – in planning and implementing a strategy to cover the uninsured. www.statecoverage.net/pdf/stateofstates2002.pdf

The Growing Case for Using Physician Incentives to Improve Health Care Quality
By Bailit Health Purchasing, LLC, and Sixth Man Consulting, Inc. for the National Health Care Purchasing Institute – December 2001
This first in a series of monographs on physician reimbursement for providing quality care examines the lessons and experiences of many innovative health care payers and purchasers that are experimenting with physician incentive strategies. The authors conducted interviews and focus groups with stakeholders to gain a more complete picture of these efforts. From these findings, the authors observe the pervasiveness and size of physician incentives, identify why incentives are not more widespread, and lastly, offer lessons learned from their study. www.nhpci.net/pdf/IncentivesMonoFinal.pdf

For information on all of the Academy’s publications, go to www.academyhealth.org/publications.
AHRQ’s budget would decrease from $300 million to $251 million. AHRQ will be unable to issue any new grants in 2003 and non-patient safety grants that continue into 2003 would have to be cut on average by 50 percent.

CMS would be forced to absorb a cut of almost 50 percent from $55.3 million to $28.4 million. After subtracting funds for several protected programs the agency must fund, especially the $12.4 million Medicare Beneficiary Survey, CMS will be left with only $10 million in discretionary funding. However, with FY2003 commitments for funding second- and third-year projects at $17 million, CMS would have to cut existing research dollars by $7 million.

CDC’s Extramural Prevention Research budget of over $17 million would be completely eliminated. The CDC would be unable to issue new grants or even complete current grants under this program.

While the National Center for Health Statistics (NCHS) would only be required to take a $1 million cut, NCHS has been under-funded for many years. This program needs more resources in order to provide critical data to health services researchers and policymakers.

A number of the institutes of the National Institutes of Health also conduct health services research. While their overall research budget has doubled over the past five years, the Coalition does not have consistent data from these institutes on how much of their research budgets are allocated to health services research. The Bush administration budget proposed to eliminate the “knowledge development” budget at the Substance Abuse and Mental Health Services Administration. We understand that the Department of Health and Human Services’ rationale for this cut is that this activity should be undertaken by the NIH.

The Coalition, the advocacy arm of the Academy, has developed a strategy intended to restore, and if possible, increase federal funding for health services research. The strategy makes full use of the Coalition’s resources and supporting organizations with a stake in preserving health services research, to:

- Mobilize the Friends of AHRQ, a 100+ member organization of associations.
- Facilitate meetings between our research and policy leaders and key Congressional appropriations and authorizing committee members.
- Organize briefings for key Congressional staff focused on the linkages between health services research and pressing policy issues.

The most effective voice in this process will be that of the producers and users of health services research. It is critically important for Congress to hear directly from you about where research has informed policy and practice. Donald Berwick, M.D. MPP, president and chief executive officer of the Institute for Healthcare Improvement, provided a strong defense for AHRQ funding while testifying on Health Quality and Medical Errors before the House Ways and Means Subcommittee on Health on March 7, 2002. “It would be wise to expand, not to cut, our nation’s meager investment in studying how our $1.5 trillion care system can be made better continually,” Berwick said. “The proposed AHRQ budget would bring nearly to a standstill new investigator-initiated health services research proposals, and that means a sudden slowing down of research and investment which ultimately has a major impact on the well-being of our patients.” The Coalition urges you to visit its web site, www.chsr.org, where you will find all of the information you need to make calls, write letters and schedule appointments.

The Coalition will continue to keep the Academy members informed as the federal budget wends its way through the appropriations process, through frequent updates to the Coalition web site e-mail updates, and Academy Reports.

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* Estimate for HSR

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continued from page 1
Academy Expands Career Services

Recruiting a quality employee? Searching for your first job or a mid-career transition? Looking for career resources? The Academy aims to provide you a clear advantage. Ranging from online position listings and web links to a salary survey and conference programs, our career center provides a variety of opportunities for employers, candidates, and students.

The Academy’s online listing of health services research and health policy positions is an outstanding resource for employers and candidates. As one of the most valuable resources of position listings for health services research and health policy, this site averages 20 positions per month and more than 1,000 hits by job seekers each month.

The online career center—www.academyhealth.org/career — also provides access to a comprehensive list of career resources and funding opportunities. The center features a number of links for fellowships and awards. Current funding announcements are updated constantly. Be sure to check the site regularly to see the latest RFPs. Also check out the Academy’s Directory of Training Programs in Health Services Research and Health Policy (see article on page 3).

A new career service that we’re adding in 2002 is a salary survey. The Academy, in conjunction with the Institute for Health Policy Studies at the University of California-San Francisco, is developing a survey instrument unique to health services research and policy that will look at salaries, amount and sources of consulting income, demographic, and other information. The first survey results will be available in June 2002.

We strive to provide career services at both the National Health Policy Conference and the Annual Research Meeting (ARM). Employers and candidates can take advantage of these gatherings to network with a large number of contacts. Resume reviews and on-site interviews are available at both meetings – don’t miss the on-site position and resume listings at the ARM in June.

Policy Conference Resources Online

The 2002 National Health Policy Conference: Shared Power, Shared Responsibility, held in Washington, D.C., on January 16-17, drew more than 600 health policy analysts, health care executives, and researchers from the public and private sectors to learn about the nation’s top health issues for the coming year. The Academy and Health Affairs will use the comments and suggestions from participants’ evaluation forms to plan and improve next year’s conference, which 89 percent of respondents indicated that they would attend.

If you missed this conference, you can catch up on the cutting-edge health policy issues on our web site. Visit www.academyhealth.org/nhpc to read the Conference Summary, view copies of the Resource Guide, Agenda Book, and select speaker slides, view participants’ comments in our Evaluation Summary, and find information on the 2003 NHPC. View webcasts of select sessions at www.kaisernetwork.org/healthcast/nhpc/jan02.