MSPH Welcomes Its First MHA Class

HPM rolls out a new degree to adapt to a changing market and to maintain a strong management tradition

Employment in the healthcare sector has been on the rise for decades. The changes in healthcare laws, regulations, and technology as a result of the ACA have opened up a number of healthcare management positions and lured job-seekers from other industries including marketing, finance, and consulting. According to the Bureau of Labor, “Employment of medical and health services managers is projected to grow 23 percent from 2012 to 2022, much faster than the average for all occupations. As the large baby-boom population ages and people remain active later in life, the healthcare industry as a whole will see an increase in the demand for medical services.” To address this rise and to remain competitive with public health programs across the country, this September the Department of Health Policy & Management introduced a Master of Health Administration (MHA) degree. Dr. Michael Sparer, Professor and Chair of HPM, believes the introduction of the MHA is well-timed to fit the needs of HPM’s prospective students, “As the healthcare industry faces major changes with the introduction of the Affordable Care Act, there has never been a greater need for management professionals who balance business acumen with healthcare expertise.”

HPM has adapted to the changing healthcare landscapes over the years by offering a variety of degrees. When the department first became part of Columbia’s School of Public Health in the mid-1940s, HPM offered a two-year degree in hospital administration. The management-focused curriculum has been a mainstay in one form or another throughout the department’s rich history. The new MHA curriculum is modeled on the former MPH in healthcare management degree, but the courses have been modified to integrate a stronger management focus. The new MHA curriculum for full-time students includes three required classes: Hospital Management, Comparative Strategic Analysis, and Management Challenges in Evolving Healthcare and Insurance Systems. The MHA has proven to be a draw for students whose interests lie in creating a strong management skillset within the larger context of health systems. Samal Shepherd (FTM ’16) notes, “I was most attracted to Columbia’s integrated approach to the MHA curriculum. In addition to a core that is anchored in management, I believe that receiving training in the areas of health policy and public health provides a holistic understanding of our ever-changing system.” The new curriculum also includes Public Health Concepts, a class which challenges students to learn public health principles and how to translate that information into practice. As managers and administrators, an understanding of these concepts is critically important if students are going to be in positions where they can influence the creation of innovative programs, deliver services, develop policies and ultimately impact the health of local, national and global communities.

Prospective students who enroll in MHA programs often have considered pursuing other degrees, including a Master in Business Administration (MBA) or other healthcare management programs. The MHA offers core classes such as finance, strategy, and management statistics, which are also taught in MBA programs, but the MHA focuses on these courses through a healthcare lens. According to a report published by Hanover Research in October, “The quantitative and qualitative evidence suggests that the MHA program is becoming the preferred degree.” The Accredited Graduate Program Profile, a report published by the Commission on Accreditation of Healthcare Management Education (CAHME) in 2012, shows that 47% of MHA degree programs were accredited in 2012 as opposed to 12% of MBA programs. Students who know they are looking for a
more focused healthcare experience gravitate toward the MHA. Benjamin Masur (PTM ‘18) recalls, “I knew I wanted to pursue a career in healthcare, and an MBA was too business and finance focused without the healthcare context.” Rashmi Basapur (FTM ’16) agrees, “I wanted to build my business skills and health industry knowledge, and I believe I am achieving that goal through this program.”

The MHA degree has been developed for the full-time, part-time and executive programs. These programs build on a strong alumni base of healthcare managers. “Columbia has an excellent network of alumni who are willing to help students,” notes Basapur. These cohort-based programs provide students with an interdisciplinary education that integrates coursework in organizational leadership and management, health policy, and public health and health systems. Students across programs have had a positive reaction to the new degree and its practical applications. Andi Shapiro (PTM ’17), Manager of the Department of Patient Centered Care at New York-Presbyterian Hospital, emphasizes the practical application of her management coursework, “My classes have been immediately relevant to my current work,” she says, “I am using the lessons I learn in class every single day managing my team.”

The MHA degree prepares students for a variety of careers in healthcare, including management positions in hospitals, clinics and non-profit organizations; additionally, the degree equips students to obtain management jobs in industries like consulting, bio-pharma, finance, and insurance. To prepare students to step into these roles, the curriculum offers a number of courses which include experiential learning elements. Strategic Management incorporates case studies adapted from real-world healthcare scenarios. Additionally, MHA students must complete a summer practicum and participate in HealthSquare, a hospital simulation and capstone experience designed to simulate the operations of the full breadth and complexity of the healthcare marketplace. This comprehensive approach to the curriculum is a draw for students. Trinh Nguyen (FTM ’16) says, “I was interested in the MHA program at Columbia because of the breadth and depth of CAHME-accredited academic offerings, the integrated advising and professional development program, and its relationships to institutions and organizations in NYC and beyond.”

The decision to offer the MHA degree was made as a direct result of faculty assessment of the MPH management program, recognition of the profile of students in search of a management degree, the significant demand to train students to manage health-related programs and organizations, and the need to provide additional management coursework focused on the delivery of healthcare services. “The interest in management in healthcare systems, whether it’s pharma, consulting, or hospital practice has grown,” notes Tom Ference, Professor and MHA Faculty Director. “The MHA is going to become a broader, more general degree for the management students.”

**Figure 1.1:** Types of Degree Programs with CAHME Accreditation, 2012

<table>
<thead>
<tr>
<th>Degree Program</th>
<th>Percentage</th>
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<tr>
<td>Master of Health Administration</td>
<td>47%</td>
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<tr>
<td>Master of Public Health</td>
<td>15%</td>
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<tr>
<td>Master of Science</td>
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<tr>
<td>Master of Business Administration</td>
<td>12%</td>
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<tr>
<td>Master of Public Administration</td>
<td>3%</td>
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<tr>
<td>Other</td>
<td>20%</td>
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Source: CAHME

Figure 1.1 taken from “MHA Market Analysis and Case Profiles” Hanover Research, Academy Administration Practice. October, 2014.
Welcome to the Winter 2014 issue of The Link, the newsletter for and about the Department of Health Policy and Management. The focus in this issue is on our management programs, both the management education programs (in which more than 250 students are now enrolled) as well as our faculty-led management research agenda (about which we have space here to mention only a small sample).

The cover story describes our newest degree program: the Master of Health Administration (MHA), which enrolled its first class this past September. In creating this degree, we have restructured our management curriculum, adding new courses, revising others, and more generally working together as a faculty to ensure a comprehensive and coordinated set of offerings.

Leading the effort to expand and continually improve our management program is Professor Tom Ference, and our faculty profile in this issue looks back at Professor Ference’s remarkable academic career, from teaching game theory to MBA students in the mid-1960s to teaching Strategy to a generation (or two) of public health students. Professor Ference is the Faculty Director for all three of our MHA Programs (full-time, part-time and weekend), and his influence and leadership here in HPM cannot be overstated.

The article on the Center for Healthcare Management showcases an important development in the department’s management research agenda: under Director Katharina Janus’s leadership, this Center is on its way to becoming a global leader in the management research arena. The Center is particularly noteworthy for its cross-national research agenda, as illustrated by an upcoming forum (in Germany) on innovation and implementation in the healthcare industry. I’m quite enthused about the opportunities afforded by this new international affiliation.

The issue also profiles Meghan Venable-Thomas, an HPM student who joined the department after serving in the military for seven years. While in the Army, Meghan worked on a range of Human Resources issues, as well as programs designed to encourage soldiers to work with at-risk teenagers. She finds the transition to healthcare (and to HPM) to be a logical next step. She is taking full advantage of her time in the department, including research on the impact of Agent Orange (for Professor Jeanne Stellman) as well as a practicum (and ongoing internship) with Memorial Sloan Kettering.

Career transition is also a theme in the profile of EMPH alum Kathleen Regan, who enrolled in the department after a successful career in investment banking and private equity. While Kathy’s finance career focused on the healthcare industry, she hoped the EMPH Program would facilitate a shift away from finance and a move toward health management and policy. Her strategy worked: Kathy recently was named Executive Vice President and Chief Operating Officer of the Commonwealth Fund, one of the nation’s leading health care foundations.

As usual, this issue of The Link also contains the Book Nook (reading suggestions from EMHM current students and alums), along with faculty and staff updates, and more. So read, enjoy, and stay in touch! And as we enter the holiday season, I want to wish the entire HPM community happy holidays and wishes for a wonderful 2015!

Michael Sparer, PhD, JD
Professor and Chair
Department of Health Policy & Management
Spotlight on Meghan Venable-Thomas (FTM’15)

“When I was at West Point, there was one woman for every eight men, and women are expected to pull their own weight physically, just like the guys are,” Meghan Venable-Thomas recalls as she describes fighting through the pain of a grueling hike with a forty-pound backpack. The types of physical tests that Venable-Thomas endured at West Point gave her a sense of confidence that carries over into her personal and professional life. “Because I’ve tested myself physically and psychologically, I know now I can meet challenges head on,” she says, “and I know that I can push through them.”

This self-reliance and ability to take on challenges has helped Venable-Thomas through seven years of military service in the US Army and ultimately led her to pursue her passion for healthcare. After she graduated from West Point, Venable-Thomas began her military service career working in human resources. In this role, she collaborated on an initiative called Operation Safe Return, a program designed to help soldiers prepare for the transition back home. “Part of HR in the military is casualty management,” Venable-Thomas explains. “There is a heightened level of stress that soldiers experience when they are deployed, and when they return home, the body misses those stress levels.” As a result, returning soldiers often engage in high-risk behaviors which can result in serious accidents or death. One aspect of Operation Safe Return introduces positive stress for returning soldiers in the form of competitions and sports, like paintballing and off-road biking. Venable-Thomas’s work introduced additional training programs to help soldiers recognize negative feelings, access help, and create incentives to decrease risky behavior. “It was a big initiative, and we had a very positive outcome,” she remembers, “it was an exciting project to run.”

Venable-Thomas continued her military career as a diversity outreach officer at West Point. In this role, she received a lot of questions from potential applicants about what life is like at West Point, and specifically, about what it is like to be a female in a male-dominated industry,” Venable-Thomas explains, “I think as a woman, the challenge is balancing who you are—your femininity with your ability to be assertive—and communicating issues and goals clearly.” Venable-Thomas acknowledges that it was difficult to take on new jobs where subordinates and superiors were unfamiliar with her management style and underestimated her abilities. “There are always difficulties,” she acknowledges, “but I have no problems being assertive. When issues arise, I address them directly. This allows me to move forward and create a positive environment.”

Two initiatives that Venable-Thomas developed while working as a diversity outreach officer helped spark her interest in healthcare. One was a mentorship program called Inside Out which matched at-risk high school students with West Point cadets. The cadets mentored the students and increased the potential for them to succeed academically. Another outreach project Venable-Thomas created involved sending West Point cadets to underrepresented communities in large cities to do engineering projects with high-school students, exposing them to the foundations of science, technology and math as well as the benefits of a military career. In both of these situations, Venable-Thomas witnessed first-hand the lack of resources available to these communities. “These types of outreach programs are really interesting to me,” Venable-Thomas says. “This work ignited my interest in healthcare.”

After she fulfilled her obligation to the military, Venable-Thomas decided to pursue her interest in healthcare. “Leaving the military was a pretty scary thing to do,” she admits, “I got out and started doing my research about the best route to take. I felt like I really needed the education in healthcare that I didn’t have. That’s why I chose to come to Columbia.” In many ways, Venable-Thomas’s move from a career in military HR into healthcare was an apt transition. “I learned a lot of important skills from the military,” she recalls, “including leadership skills, stress management and time management skills, as well as the ability to juggle many projects at once and manage a range of different personalities.” Venable-Thomas points to the high stakes of military work, where an error can put a coworker’s life at risk. “The military teaches you to be attentive to details and makes you think about how other people will be affected by your actions and decisions.”

Since coming to Columbia, Venable-Thomas has immersed herself in her courses and other opportunities available in the department. She completed a research-based internship working with HPM faculty member Dr. Jeanne Stellman, a leading expert on dioxide exposure in Agent Orange during Vietnam. She helped Dr. Stellman compile information for a comprehensive website detailing the effects of Agent Orange and dioxide exposure. For her summer practicum, Venable-Thomas worked at Memorial Sloan Kettering (MSK), where she helped prepare a new MSK outpatient center. She worked with clinicians to determine their needs for the new space and negotiated with Department of Health inspectors and architects to make sure the facility was up to code. Venable-Thomas also oversaw the transfer of equipment from MSK to the new clinic. “It was not unlike things we had to do in the military,” she says, “moving happens frequently when you’re deploying and re-deploying, managing all aspects of the move and making sure things arrive where they need to be.” Venable-Thomas stayed on at Memorial Sloan Kettering after her practicum ended, and she recently helped coordinate a Complex and Advanced Skin Cancer CME in order to promote a new initiative for the Multidisciplinary Skin Cancer Management Program. The initiative aims to triage patients with complex skin cancer through multiple different clinics in one day, including radiology, oncology, plastic surgery, head and neck surgery and dermatology.

When asked about her future, Venable-Thomas is thoughtful. “I’m exploring my options,” she says. “I think about working with institutions like the World Health Organization or the United Nations or perhaps a small firm that does consulting. There are small organizations out there that are doing really impactful things around the world.” In the meantime, Venable-Thomas will focus on her coursework and her life in New York. “I like experiencing new things,” she says. “That’s what’s great about New York City. There are so many opportunities right here.”
Alumni Profile: Kathleen Regan (EMPH ‘11)

Kathy Regan was recently named the Commonwealth Fund’s new Executive Vice President and Chief Operating Officer. Founded in 1918, the Fund is a foundation that aims to promote a high performing healthcare system that achieves better access, improved quality, and greater efficiency, particularly for society’s most vulnerable. Regan knows that the position she is inheriting is heavy with reputation and history. “The first challenge is maintaining that,” she says, but she also wants to add her own skillset and vision to the role. “I bring a different voice to the table. The business community is an important stakeholder in healthcare and in creating a more efficient and effective healthcare system, so business has to come along in order for reform to take root and for innovation to flourish.” In her new role, Regan is responsible for many of the day-to-day operations. She oversees the endowment as well as the finance and administration segment. She also has a hand in the more programmatic aspects of the foundation as a member of the senior management team. “It’s a unique environment,” Regan notes. “That’s one of the things that attracted me to the Fund and to the role. My management skills and finance skills are strong, but in order to keep growing as an individual and contribute what I want to contribute societally, I want to challenge myself in new ways. Also it is an opportunity to work with an outstanding team of healthcare policy leaders both internally and externally to the Fund.”

Regan’s early career is remarkable: though she took many science and math classes in her undergraduate coursework at Princeton, she ultimately graduated with a degree in history, spent a yearlong fellowship in Indonesia at Gadjah Madah University, then worked for Chase Bank International, where she learned the basics of accounting and financial statement analysis, before launching a career in investment banking. Regan knew she wanted to work in healthcare and take a strong leadership position within her company. “It was an area I felt that I knew a lot about,” she says, “It was also an area, as a woman, I thought I could make more progress. The healthcare field was very much a meritocracy, so that’s where I gravitated, and that’s where I built my practice.”

Regan spent fifteen years working in healthcare investment banking. As she grew within the company, Regan took on more responsibilities and a bigger managerial role. She credits the team she worked with for helping her balance family life with the pressures of her career, “I was able to have three children in the course of building an investment banking career, which is somewhat rare, and I really valued the opportunity to work with that group and the relationships that I built.”

After leaving the world of investment banking, Regan went to Warburg Pincus, a leading global private equity firm, where she was a senior consultant with the medical technology team. At Warburg, Regan gained experience working with entrepreneurs and investing in health tech startups. “It was a terrific experience for me to actually go from advising companies on financing strategies and merger strategies, to working with entrepreneurs in startups and building companies, sometimes from scratch,” she says. Regan liked the variation that Warburg offered—in addition to working with smaller companies, she was involved in large, complex buyouts. Eventually, Warburg began to focus exclusively on bigger buyouts, and Regan decided it was time to make a change. She stepped into the role of Executive Vice President at Keystone Dental Inc., one of the companies that she helped to found. At the same time, she also decided to go back to school. “The timing was right for me in my career and also in the national debate around healthcare reform,” she recalls. “I was looking for that next step and the next set of challenges. I saw joining the EMPH program as a bridge to finding the next big opportunity.” Regan attended the EMPH program at a pivotal time, which brought a lot of big questions into focus. “I think I was very lucky to enroll in the Exec program when I did,” she remembers. “I was there when the ACA was being debated and ultimately put into law, so a lot of the discussions that we had in the classroom are very relevant to the discussions that we now have here at the Commonwealth Fund.”

Along with her new position at the Commonwealth Fund, Regan also serves as a Trustee of Lutheran HealthCare in Brooklyn, where she chairs the Strategy and Partnership Committee and serves on the Quality Committee. “I can’t say enough good things about Lutheran as an institution,” she says. “They do amazing work on a very limited budget with a very challenging payer mix.” Regan is also an advisor to New York-Presbyterian’s Minimally Invasive New Technologies (MINT) Program. The program seeks to develop medical devices that will provide more effective treatment through minimally invasive surgery. The MINT model is unique in that it enlists clinicians, business developers and biomedical engineers to evaluate and refine concepts with philanthropic and hospital system funding. “I think that’s a very interesting model and one that I hope to see proliferate in other large systems that combine the strength of a big hospital, medical school, incredible talent in the physician base and hopefully continued access to philanthropy to fund it.”

In her free time, Regan stays active by running half marathons, skiing, playing tennis and swimming. She and her husband are also preparing to be empty-nesters—next year the youngest of their three children will leave for college. Regan has also maintained her entrepreneurial spirit and enjoys connecting with the Columbia HPM Network. She likes meeting students and alumni and discussing ideas for new businesses. “I’ve had the chance to talk to a lot of people who come out of the EMPH program who are very interested in thinking about entrepreneurial opportunities, and I want to try to help foster that in the healthcare community.” In speculating about the changing landscape of healthcare, Regan shares her thoughts for the next wave of innovation, “Most of the really interesting entrepreneurship is going to come on the delivery side” she predicts. “The next challenge will be figuring out how to integrate the technology that we’ve started to build the infrastructure around into that delivery system to really support and enable it to be more efficient and effective.”
When Tom Ference was seventeen, his high school English teacher fell ill in the middle of the semester. Because the small school lacked funds, and because Ference was a strong student, he was chosen to fill in. “My first teaching experience was teaching Macbeth to my own classmates,” he says. “It was wonderful.” This experience confirmed Ference’s calling and left him with an important lesson, “As long as you’re a strong student, you can teach anything.” Though his interest in teaching was evident from an early age, Ference’s path into academia wasn’t always so clear. He grew up in Pittsburgh, the son of the foreman of the hard hat department at a safety products company. “I didn’t know anything about going to college,” he says. “No one in my school went to college. They went to work in the Westinghouse, in the mills, or to the army — or to prison.” Ference wanted to study engineering, so he applied to Carnegie Institute of Technology. “I had no idea it was a hard school to get into,” he admits, “I applied there because I was going to be an engineer. My dad was a foreman, and my grandfather was a shop foreman, and all the studies show that you want to do what your dad did, just one step up.” Ference studied engineering at Carnegie Tech and worked for the same company as his father designing safety systems on missile silos under an Office of Naval Research/Department of Defense contract. He stayed on at Carnegie Tech to pursue a graduate degree in organizational psychology, which at that time included research on artificial intelligence and computer simulation of human thought and on general organization theory. Ference approached organizational theory from an engineering perspective. “Engineers look at complex systems and solve them. They are less concerned with theory and more concerned whether or not it works.” Ference continued his doctoral study in organization theory, working under Nobel Laureates including Herbert Simon and Robert Lucas, teaching statistics to night school students, and working full-time during the day designing missile silos.

Ference began his teaching career at Columbia in 1966. He was hired by the business school to teach organizational and managerial behavior as well as decision theory and game theory. He was introduced to management and marketing curricula through his work with the School’s executive education programs, including the Executive MBA program. “Managing, dealing with the politics, the arguing, the negotiation—I took to that, it was fun,” he recalls, “It was worth doing well, but it was a hobby. Teaching is what I do.” Ference became Director of the Executive MBA program at Columbia Business School in 1972, expanding it from a group of twenty people to a group of over three hundred. “I built a strong cohort of adjuncts and regular faculty. It got to the point that the senior faculty would fight to teach in the program,” Ference recalls, “I like building things. I try to create a character and philosophy in all my programs.” In addition to leading the EMBA program, he also founded and directed the Institute for Not-for-Profit Management and the Police Management Institute for the Business School.

Ference has been instrumental in building programs for HPM since 1994, when he moved from the business school to MSPH. For him, the move to teaching in a public health program was a natural progression—he adjusted the strategy course materials to incorporate public health content. “I was always teaching the same stuff. The problems change, but the mindset, intellectual constructs, critical thinking, and open systems never really change.” Ference currently teaches in all three of HPM’s MHA programs and also serves as the Faculty Director for all three. He has a clear goal for all of his students: He wants them to learn to think. “It sounds terrible,” he laughs, “but many of them get here—and they know a lot of stuff—but they have no idea how to think! The essence of analysis is learning to think, to keep asking why. What I want to do is get my students from question and answer mode to changing the way their mind works.” It’s obvious that Ference cares deeply about his students and the impact that he has on them. He encourages his students to go beyond what they believe themselves to be capable of. “I’ll push them,” he says, “I’ll tell them ‘you can do better.’ I’ll say to them ‘I want you to believe you’re as good as I know you are.’” HPM runs a number of special programs, including the Practicum, the Professional Development Program (PDP), the Case Competition, and HealthSquare, a hospital simulation that crystallizes different aspects of the management curriculum into one capstone experience. With his love for creating educational materials, it’s easy to see Ference’s fingerprints on these programs. He designed the Practicum program, conceived and led the HealthSquare project and helped create and oversee the PDP program. He works with Professor Paul Thurman in developing and promoting the Case Competition, and he selects and edits all of the cases. He is particularly proud of the work that has been done to expand the practicum and PDP, programs that he has been deeply involved with since coming to Mailman. “I was overjoyed at this year’s Practicum Day,” he recalls. “In addition to the many students who presented, we had 28 faculty and closely affiliated alumni facilitating. I thought that was wonderful. It has become a departmental phenomenon. All these programs are, in my mind, examples of doing what’s right. We’re supposed to be doing this for the students and the field.”

In addition to the work he does in HPM, Ference has been instrumental in building and directing a number of other programs, including the Police Management Institute, which was modeled on the Executive MBA program. The Institute, which is located in the Columbia Business School, was started in 1988 with the objective to teach police executives the core elements of management and strategy. “The average police executive is really running the branch of a fairly significant corporation,” explains Ference. “They decided that they wanted a management program, not a command college, to train them.” Fifteen senior police managers from the NYPD are selected to take part in the program each year,
which runs for a five-day intensive residence each month. They work on culminating projects which involve practical applications to issues like racial profiling, identity theft, human trafficking, and domestic violence. “We’re in our 26th class,” says Ference, who directs the Institute and has taught each class that has come through, “We’ve created a whole community. It’s a fantastic program.”

Ference points to his engineering background which has helped him to adapt to each new world he finds himself inhabiting, from business to healthcare to crime prevention. “I have a strategist’s and an engineer’s view of a sector,” he says, “and I think that enables me to contribute to those same discussions from a different perspective, and that’s what I teach from. When we started the police program, I knew something about criminal justice, but they didn’t want a criminal justice program, they wanted a management program. The business is crime, protection and safety, so the idea for us was how to help them think institutionally.”

Ference works hard to maintain the relationships that he has spent years building. He strongly believes in mentoring and maintaining personal connections, and many of his former students now work alongside him. When asked about his legacy and his most important achievements from his long career, Ference points to both the relationships that he’s cultivated over the years and the programs that he’s shaped. “I am proud to have been part of this set of people—protégés, mentees and apprentices—who care for, trust, and go out of their way for each other. I’m also extremely proud of the programs that have endured.” At this point in his nearly 50-year career at Columbia, Tom Ference is starting to think about retirement. He’d like to carve out some time for his hobbies which include gardening, reading and spending time with his family. He also believes that it is important to hand off the projects he has created, “If you don’t eventually walk away from something that you’ve built, you’re actually diminishing its ability to survive. I always said that as soon as they can find someone younger than me that can keep up with me, I’ll go away.” But as for now, he’s still going strong.

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**Book Nook**

We’ve asked EMHM students and alums to recommend a book or article that offers a valuable perspective on some aspect of the healthcare industry.

**Happy Reading!**

Leila Salehi (EMHM ‘16) recommends *The Truth About Drug Companies: How They Deceive Us and What to Do About It* by Marcia Angell. It’s written by a former editor-in-chief of the NEJM who outlines some of the major criticisms leveled against the pharma industry, namely unnecessarily high costs and marginal innovations of pharmaceutical products. Some of the evidence and numbers quoted are a bit dated, but the main issues are still relevant today.

Khaled Kadry (EMHM ‘16) suggests *Overtreated: Why Too Much Medicine Is Making Us Sicker and Poorer* by Shannon Brownlee. The book is an interesting look at the paradoxes of today’s healthcare and the variation of healthcare practice in the US.

Cecilia Gunning (EMHM ‘16) recommends *Being Mortal* about healthcare for the aged and end-of-life issues. Gawande’s writing is engaging and candid, and end-of-life care is a very current theme that is in the mind of many people whose professions are in or related to healthcare.

Kathy Colon (EMHM ‘15) suggests *Blink* by Malcolm Gladwell. It’s about the power of thinking and how professionals can shift their ideas and develop a sixth sense, see things others can’t see and how to make us achieve our potential in life for success.

Ken Shubin Stein (EMHM ‘16) recommends *The Art of Thinking Clearly* by Rolf Dobelli. It is a great book about how our brain makes systematic errors in decision making and how to recognize when one of them is happening.

Monica Mehta (EMPH ‘13) recommends David Cutler’s book *The Quality Cure: How Focusing on Health Care Quality Can Save Your Life and Lower Spending Too* as a great refresher. It’s a well written, easy-to-digest reminder of US healthcare spending and reform, why changing incentives matter, and how to achieve quality endpoints.

Larry Marsh (EMPH ‘13) recommends “How Not to Cut Health Care Costs” an article by Robert S. Kaplan and Derek A. Haas that appeared in the *Harvard Business Review* in November, 2014. Field research with more than 50 healthcare provider organizations, most based in the US, suggests that many cost-cutting initiatives actually lead to higher costs and lower-quality care. Why it happens: Administrators typically look to reduce line-item expenses and increase the volume of patients seen without considering longer-term effects. The solution: Administrators in conjunction with clinicians should examine all costs incurred over the care cycle for a medical condition.
Have You Heard?

HPM Faculty & Staff Updates

FDI World Dental Federation announced the January 1, 2015 appointment of Professor Ira B. Lamster as the next editor of the International Dental Journal.

In the spring, HPM administrator Rachel Sabb completed her MA in Computing in Education at Columbia’s Teacher’s College.

Professor Miriam Laugesen’s essay “Valuing Physician Work in Medicare: Time for a Change” was published as part of the National Institute for Health Care Management’s Expert Voices Series (October, 2014).


Professors Margaret Kruk (HPM) and Lynn P. Freedman (Pop Fam) collaborated on an article, “Disrespect and abuse of women in childbirth: challenging the global quality and accountability agendas” for The Lancet which was published online in June, 2014.

In December, Professor and HPM Department Chair Michael Sparer moderated a panel at the UN in collaboration with the French Mission. The event was the fourth seminar in an ongoing series as a part of the Better Health Systems Initiative. The seminar helped to identify the long term impacts of Universal Health Coverage, including its role in health system.

Introducing HPM Faculty & Staff

Amina Williams is a 2014 graduate of Dartmouth College, where she was on the pre-med track. She majored in English with a concentration in Creative Writing. During her senior year, she served on the board of Dartmouth’s Women of Color Collective and Caribbean Society. She is interested in pursuing a career in the healthcare field and learning more about health disparities and how they affect urban communities. Currently, she is an Administrative Coordinator in HPM and works closely with the MHA and EXEC programs.

Katharina Janus, PhD, MBA, is Professor of Healthcare Management at Ulm University, Germany, and the Director of the Center for Healthcare Management, an international research center at the Department of Health Policy & Management, Columbia University, New York, USA. She also heads the “Care-Tank”, the Center’s think-tank and platform for innovation, and holds an appointment at Columbia University. Prof. Janus focuses her research on the design and implementation of monetary and non-monetary incentive systems in healthcare organizations as well as on the assessment of innovative medical/management interventions and their impact on performance in various healthcare systems and organizations. As a healthcare manager in research and practice, she puts a strong emphasis on managing the human side of healthcare delivery in the new age of care management – formerly known as “managed care.” She has been the principal investigator of several international studies on physician motivation and professional culture in collaboration with the Hannover Medical School, the University of California at Berkeley and Stanford University. Additionally, Prof. Janus has been involved in political advisory councils and managed care projects on a national and international level. She also serves as a member of the board of Allianz private health insurance, Munich, Germany. Dr. Janus earned her Master’s Degree in Business Administration at the Universities of Hamburg and the Université Panthéon-Sorbonne Paris in 2000. She holds a PhD in Business and Social Sciences from Helmut-Schmidt-University in Hamburg (2003). Dr. Janus was a 2006-07 Harkness Fellow in Health Care Policy at The Commonwealth Fund, a Rockefeller Foundation academic fellow in 2012 and a Brocher Foundation resident in 2014.
The Center for Healthcare Management

HPM has a new center with a global mission

HPM Professor Katharina Janus founded the Center for Healthcare Management in 2010 as a network of leading international scholars and practitioners. Since then, the formerly virtual research network has evolved into a global research center. It joined Columbia University and HPM in May 2014.

As a leader in healthcare management research, the Center has worked hand-in-hand with social scientists, mathematicians, political scientists and data management experts to apply evaluation research of medical and management oriented innovations. With a unique network of leading academics and practitioners, the Center has been assessing performance of innovations, validating measurements, and implementing change with the goal of creating high-performing healthcare systems and organizations.

**Joint Initiatives**

Partnership between HPM and the Center will focus on research, education and other scholarly activities. Here are a few objectives:

- The Center’s unique expertise in healthcare management will support HPM’s vision to establish a research cluster.
- The Center’s cross-national orientation and collaboration with experts of numerous healthcare systems will contribute to HPM’s international research and offer joint initiatives with respect to healthcare reform and practice implementation.
- The Center’s work evaluating real-world medical and management interventions will contribute to HPM’s goal to expand its work in implementation and systems science.
- The Center’s activities in non-degree management executive education programs in Europe will offer further areas for collaboration to train healthcare leaders cross-nationally.

The Center for Healthcare Management will continue to operate its European base and act as a Columbia University research center based in Europe.

Check out Professor Janus’s recent post “The Innovation Conundrum In Health Care” on the Health Affairs blog:

http://healthaffairs.org/blog/2014/12/12/the-innovation-conundrum-in-health-care/

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What’s Next?

The Center for Healthcare Management’s next event is the 4th Forum on Health Policy & Management: Innovation & Implementation, which will be held on January 29 and 30, 2015, at the capital residence of the Robert-Bosch-Foundation in Berlin, Germany.

This two-day forum will bring together a distinguished line-up of industry experts, government decision-makers and leading academics from several countries to review innovation in healthcare from various perspectives and explore implications for implementation on the provider and payer side.

Topics include, among others, care coordination and clinical integration as well as how big data is being utilized to deliver customized solutions for population health management.

The Forum features keynotes, panels, keynote “chats” and structured roundtables, providing attendees with the connections, tools and strategies for producing actionable results in their practice.

Participation in this forum is by invitation only. If you are interested in receiving a personal invitation, contact us at info@centerforhealthcaremanagement.org

For more information, check out the Center’s website at www.centerforhealthcaremanagement.org
HPM Highlights

Katie Logan (CMPH ’15) led an hour long session on relationship building between syringe exchange programs and pharmacies at the 10th National Harm Reduction Conference, which was held in October in Baltimore. The session was based on research she had conducted for the past eight months with the Washington Heights CORNER Project, a syringe exchange in upper Manhattan.

Diana Contreras (EMPH ’14) was elected by her peers to give the student address at the 2014 EMPH commencement ceremony.

Rení Ellis (CMPH ’15) was one of ten recipients to be awarded the David A. Winston Health Policy Scholarship, a highly competitive national scholarship with a $10,000 tuition award.

Gati Dharani (PTM ’12) led a pioneering study to assess the impact of wearable technologies on personal-health management. The study explores how such technologies can be incorporated into the evolving pharma business model, which is increasingly focused on improving patient-care models as well as population-level health management to address chronic disease. She presented her findings and white paper in November at APHA’s annual conference.

Trek Medics International, a non-profit founded by Jason Frisen (EMPH ’12), was awarded a $250,000 seed grant from Google.org as well as a $10,000 grant from Cardinal Health Foundation to continue their work in international emergency medicine programs.

Kevin Mo (FTM ’15) has taken time off from pursuing his MPH degree to train for a spot on the US Olympic Fencing Team.

Executive MPH Class of 2014 Commencement Address

In October Dr. Howard Zucker, the Acting Commissioner of Health for New York State, delivered the commencement address for the EMPH Class of 2014. Dr. Zucker, a graduate of Columbia and a former Professor of Clinical Pediatrics and Anesthesiology at Columbia University College of Physicians & Surgeons, spoke about the breadth of public health and the current challenges that affect public health workers around the world. “Public health transforms lives,” he said. “Few things have had more impact in improving life expectancy than public health.” Dr. Zucker urged the candidates to their professional experience and use what they’ve learned in their careers and education to confront the public health challenges that exist today. “As the stewards of this profession,” he said, “you have inherited these challenges. Finding solutions demands creative thinking and hutzpah to see the trials and tribulations that are out there and turn them into the opportunities to improve the world we live in.”

Congratulations to the Winners of the Fall 2014 Case Challenge

First Place Team
You Know Nothing, Jon Snow
Advised by Jessica Fanzo
Molly Slotznick, Captain (SIPA)
Chloe Denavit (SIPA)
Andrew Carmona (SIPA)

Second Place Team
The Patient Will See You Now
No advisor
Maria Tazi (EMHM ’16), Captain
Tsahia Hobson (EMHM ’16)
Rachel Ravens (EMHM ’16)
Mary Crawford (EMHM ’16)
Faisal Zahir (EMHM ’16)

Third Place Team
s: A Tie!
The Three Musketeers
Advised by Jeanne Stellman
Shahbaz Salehi (ACCL ’15), Captain
Sanjay De (ACCL ’15)
Manuel Pantoja (ACCL ’15)

Five Alive
No advisor
Barr Even (ACCL ’15), Captain
Lynn Chan (DUAL ’16)
Pavitra Viswanathan (CMPH ’16)
Richard So (DUAL ’16)

Most Innovative Solution Team
Imagine Health Solution
Advised by G. Nathan Dong
James Kim (FTM ’16), Captain
Do Hoon Kwon (CMPH ’16)
Alexander Edwards (CMPH ’16)
Sang Cho (ACCL ’15)
Rose Lee (SMS)

Best Individual Presenter
Ricci Poormon (FTM ’16)
Team: Princess Poormon & Associates

Best Question-and-Answer Participant
Trudy Lei (CMPH ’16)
Team: Lion Health Group
Congratulations to the October ’14 and February ’15 Graduates!

Stay Connected

Tours & Naming Opportunities:
Renovations are underway for HPM’s new office space on the fourth floor of the Allan Rosenfield Building. For a tour of the new facility, to learn about naming opportunities, or for more information on how to contribute, contact Arianne Andrusco: aa2819@columbia.edu (212-305-5270)

Save the Date:
2015 HPM Healthcare Conference
Friday, April 17, 2015

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

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

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