2016 SUMMER FELLOWSHIP PROGRAM
FELLOW PROJECTS & REFLECTIONS
ABOUT THE HEALTH POLICY COMMISSION

The Massachusetts Health Policy Commission (HPC) is an independent state agency that develops policy to reduce health care cost growth and improve the quality of patient care. The HPC’s mission is to advance a more transparent, accountable, and innovative health care system through its independent policy leadership and investment programs. The HPC’s goal is better health and better care – at a lower cost – across the Commonwealth.

The agency’s main responsibilities are led by HPC staff (divided into six departments) and overseen by an 11-member Board of commissioners. HPC staff and commissioners work together collaboratively to monitor the performance of the health care system, including setting the health care cost growth benchmark; creating standards for care delivery systems that are accountable to better meet patients’ medical, behavioral, and social needs; analyzing the impact of health care market transactions on cost, quality, and access; and investing in community health care delivery and innovations.
FELLOWSHIP PROGRAM
The annual HPC Summer Fellowship Program has the dual purpose of helping to achieve the Commonwealth’s goal of health care cost containment while simultaneously providing hands-on educational opportunities to the next generation of health policy leaders. Each year, the Fellowship Program affords students the opportunity to engage in a ten-week, stand-alone policy or research project with one of the HPC’s six teams (see page 4). Treated as full-time employees, Fellows manage their own time to ensure they meet outlined project benchmarks, make key presentations, and meet deliverable deadlines.

PEOPLE
The HPC accepted applicants for the 2016 Fellow Program from January to March 2016. Applicants were required to be enrolled in a full-time Bachelor’s, Master’s, PhD, law, or medical program. Undergraduate applicants were required to have completed at least three years of their Bachelor’s degree.

The HPC received over 200 applications for the 2016 Fellows Program from over 65 different universities across the world.

After reviewing applications, HPC staff spent three days conducting interviews with dozens of top applicants. Interviews required applicants to describe their skills as well as propose a project of interest to them based on outlined HPC workstreams.

STIPEND
In 2016, Fellows were paid $15 per hour for up to ten weeks (375 hours) of work at the HPC. To enhance their time with the agency, fellows were included in various activities and meetings and given access to some of the Commonwealth’s most cutting edge and forward-thinking health policy making processes.

PROGRAMMING
On a day-to-day basis, Fellows worked in conjunction with their teams to see a project from creation to completion, while also exploring the intersection of HPC goals with their own academic and applied interests.

In addition to their main projects, Fellows were also offered a host of programming and networking opportunities to allow them to better understand the varied facets of the HPC’s work. Examples included:

• Joining policy meetings with HPC staff and key stakeholders
• Completing “Speed Networking” events with HPC senior staff
• Attending HPC public Board meetings
• Participating in small, interactive meetings on health policy with the HPC’s Board Chair, Executive Director, and Board members
HPC Teams

ACCOUNTABLE CARE
The Accountable Care Team is responsible for fulfilling the HPC’s statutory charge to develop and implement state certification programs for Patient-Centered Medical Homes and Accountable Care Organizations, to promote the integration of behavioral health with primary care, and to enable policy reforms to support these care delivery models. The team works to advance accountable care through other avenues, such as enhancing data transparency, convening key stakeholders to better align models, and identifying key barriers and accelerators of reform.

RESEARCH AND COST TRENDS
The Research and Cost Trends Team is responsible for developing an annual cost trends report to measure progress in key areas and examine performance against the cost growth benchmark established to curb health care spending in the Commonwealth. This team is also responsible for building the HPC’s evidence-base and supporting policy development and recommendations through the use of innovative data sources.

MARKET PERFORMANCE
The Market Performance team performs a variety of market oversight functions including the comprehensive and evidence-based reviews of the impact of significant provider transactions on health care costs, quality, and access through the Notice of Material Change and Cost & Market Impact Review processes. The team also manages and analyzes the first-of-its-kind Registry of Provider Organizations program.

STRATEGIC INVESTMENT
The Strategic Investment Team is responsible for administering the HPC’s Community Hospital Acceleration, Revitalization, and Transformation (CHART) and Health Care Innovation Investment Programs, two competitive grant programs that combine investment and consulting services in order to improve performance of the health care system.

OFFICE OF THE GENERAL COUNSEL
The Office of the General Counsel is responsible for building and maintaining compliance infrastructure and developing the agency’s regulatory program. The OGC legal counsel advice on a wide range of strategic, policy, and operational issues. As legal counsel, the OGC provides advice on a wide range of strategic, policy, and operational issues.

OFFICE OF THE CHIEF OF STAFF
The Office of the Chief of Staff manages the agency’s administration, finances, external affairs, and day-to-day operations. Most notably, OCS houses fiscal operations (accounts payable, grant dispersal, budgeting), external affairs (communications, legislative affairs), and Board member relations.
BEN AGATSTON
The Health Policy Commission’s Fellowship served as an excellent introduction to health policy, governmental work and public interest law. As a Fellow at the Office of the General Counsel (OGC), I was fortunate to join an accomplished team and experience the work of an administrative lawyer.

Because the OGC coordinates with all HPC teams, my work varied and included compliance, regulatory and transactional issues. For example, I researched and wrote about network adequacy, out-of-network billing and data security management. Through this work, I analyzed state and federal laws, regulations and cases. Further, I worked with the Office of Patient Protection (OPP) regarding federal requirements for consumers’ rights to appeal health plan decisions. While the OPP work delved into the weeds of federal laws and regulations, it was enjoyable to analyze the Affordable Care Act and see the balance of federalism and preemption.

Although this was my first exposure to a state agency, it is evident that the Health Policy Commission is unique. The HPC’s very nature and subject matter, combined with the talented, dedicated and familial staff, creates a collaborative, think tank environment. In addition, the HPC’s Commissioners, many of whom Fellows had the privilege of meeting with, are some of the nation’s foremost health policy leaders. And given the Fellows’ diverse expertise, my interactions with them were as instructive as the Commissioner meetings. Ultimately, this summer was challenging, stimulating and rewarding.

BEN BIGELOW
Responsibility and ownership aren’t always easy to find early in a career. Not all organizations entrust meaningful work to their younger employees. At the Health Policy Commission, my supervisors gave me a great deal of freedom in my research. They provided guidance along the way, but they also allowed me to pursue questions I found compelling.

As part of the Research and Cost Trends team, my research focused on low-value care, defined by professional medical societies and organizations to be services with little to no clinical benefit. These services can be indicators of wasteful spending within a health system. By combining a medical claims data with the Registry of Provider Organizations – a novel dataset linking physicians to their affiliated healthcare organizations – we found evidence of variation in low-value care among health systems in the state. The finding excited many people at the HPC, and we hope to publish the results in the near future.

The HPC also organized several meetings with members on its governing Board of Commissioners. These meetings were great opportunities to pick their brains about current issues in healthcare and to hear about what they’ve learned in their careers. We met with people like David Cutler, a distinguished economist, and Don Berwick, the former head of Medicare. And although I learned much from the commissioners, my relationships and conversations with the other Summer Fellows were just as fruitful and invigorating. I am leaving the fellowship with a wealth of new knowledge and a substantive portfolio. For that, I should thank everyone with whom I worked.
EVELYN BRAND

I could not say enough about my experience as a Summer Fellow at the HPC. Working on the Research and Cost Trends team (RCT), I analyzed trends in behavioral health-related hospital utilization in the Commonwealth, while also establishing a national benchmark for comparison. Through this project, I honed technical and coding abilities – a priority for me during this summer. I also gained practical, hands-on experience conducting policy research that I would have never gotten in class working with clean datasets. The whole RCT team was extremely supportive. I had an open dialogue with my supervisor to make certain I was working to develop defined skill-sets and had all the support I needed to be successful in my analysis. (Thanks Natasha – you made this a great summer!) Even the director of my team met with me and discussed career goals to ensure I got the most out of the fellowship.

Beyond working with RCT, the HPC created a great program for the fellows, including a fellow-lecture series with the HPC commissioners. Previous work by one of these commissioners partially inspired my pursuit of a Master’s of Public Policy, especially my focus in policy analysis and belief in data driven policy. It was an incredible opportunity to discuss relevant policy issues with individuals who are shaping the Commonwealth’s future in health care.

My time at the HPC provided me with everything I could have hoped for in a Summer Fellowship. From mentorship and technical skills to overall knowledge of health care policy, the HPC helped me continue to grow as a policy researcher. Thank you to Natasha, Marian, David, Aaron, Bert, and the rest of the HPC for all of your time and support!

JASON FLOOD

This summer at the HPC was an incredible introduction to the Massachusetts health care landscape and state government. I have long held a passion for improving patient care and reducing health care costs through collaboration across public, private, and nonprofit institutions. Prior to joining the HPC, I had only ever worked in the private sector. The Summer Fellowship served as an amazing primer on the public sector and the crucial role it plays in the health care ecosystem. The program arranged meetings with a number of the HPC’s Commissioners, which provided invaluable opportunities to delve deeply into health policy topics with some of the most distinguished people in the field.

I spent my summer working with the Market Performance team, where I analyzed the impact of health care market transactions on health care cost, quality, and access in Massachusetts. I partnered with the HPC’s expert consultants to dig into the financial statements of various hospitals and evaluate inpatient, outpatient, and primary care market share for some of the state’s largest providers. I especially enjoyed meeting and learning from all of the talented and passionate members of the team. Thank you to Megan Wulff, Kate Scarborough Mills, and the rest of the Market Performance team for supporting me throughout my summer project.

These last ten weeks have contributed immensely to my professional development. Moving forward, I hope to combine what I have learned about health care in Massachusetts with my prior experience in the technology sector to drive innovative, cost-saving changes in health care.
IMAN KUNDU
This summer, I had the opportunity to work with Massachusetts Health Policy Commission. As a Masters of Public Health student, I learned about this opportunity while looking for my course practicum and I was hoping for a practice-based learning experience tied directly to public health. This experience not only fulfilled but exceeded my expectations.

I worked with the Strategic Investment team on the CHART (Community Hospital Acceleration, Revitalization and Transformation) project. My project, more specifically, was data-driven quality improvement for CHART. I gained first-hand knowledge of how we can analyze and visualize health-care delivery data and use it to improve health care delivery. I helped in identifying questions that will be useful for informing ongoing quality improvement and analyzing data to answer those questions as well as for data quality checks. The data analysis was based on Microsoft Access, which I only had preliminary knowledge about before starting the project. But at the end of the project, I feel very confident about my skill with this data visualization and analysis interface. From a broader perspective, I gained knowledge on how we can compare the health care delivery performance of the hospitals.

HPC has one of the best working environments I have known. I loved the mutual camaraderie as well as the guidance that we were provided. I liked the scholastic environment and enjoyed the fellow lecture series, which I found thought-provoking. Overall, I believe this experience has greatly prepared me for my future in public health.

DIANNA LINDSEY
As a Fellow with Strategic Investment, I worked closely with the CHART Team in order to gain a better understanding of hospital award sites and their target patient populations. My project was designed as a mixed-methods approach, which allowed me to perform both qualitative and quantitative analysis. With funding from Phase 2, hospitals identified specific populations to target, with the goal of ultimately reducing spending and avoidable hospital utilization. This was done through the patient interview process, which revealed a tremendous amount about trends and drivers of readmissions. From the identification of four target populations; inpatient high utilizers, ED high utilizers, inpatient and ED high utilizers combined and ED behavioral health, I was then able to perform a quantitative analysis in hopes of identifying variation and trends among groups. These statistical findings helped us better understand the relationship between our high utilizer patients and those with a behavioral health diagnosis. This was an extremely meaningful and challenging project that I was fortunate to be a part of.

The HPC Fellowship experience has truly been great. I was able to develop my qualitative and quantitative skills, received meaningful coaching and feedback and learned a tremendous amount about health care delivery. It was really a pleasure working with Jessica Lang as my project manager under Strategic Investments and Evaluation as well as Natasha Reese of the Research and Cost Trends team. Their coaching and guidance has been invaluable. The degree of professionalism here at the HPC is unmatched; I looked forward to working with and learning from all of the fellows on a daily basis. I am excited to continue to build upon the knowledge and skills I acquired throughout the course of this fellowship. Thank you to everyone at the HPC who helped make this process and fellowship a great experience.
ALON PELTZ

This summer I visited the Health Policy Commission from the Robert Wood Johnson Foundation Clinical Scholars program at Yale. During my time at the Health Policy Commission, I worked with Vivian Haime and Katie Shea Barrett as a member of the Accountable Care group. Alongside colleagues at CHIA, we conducted an evaluation of quality measure alignment among public and private sector Accountable Care Organizations. We developed a series of recommendations for attaining a more coordinated quality measurement strategy.

My experience at the Health Policy Commission has afforded me a valuable opportunity to advance my understanding of quality measurement and gain a broader appreciation for the pivotal role that state agencies can play in driving cross-sector health care transformation. As a primary care physician, it was particularly valuable for me to learn about the similarities and differences among insurers in how they approach performance measurement for ambulatory care.

Overall, it was a great opportunity to get to work with the staff at the Health Policy Commission and the Accountable Care team this summer. They are a talented, passionate, and inspiring group of professionals who work tirelessly to make health care in the Commonwealth better, safer, and more affordable. I look forward to following the Health Policy Commission’s innovative work in the future. I am grateful to RWJF for supporting my visiting summer fellowship, the Health Policy Commission staff for giving me the opportunity to learn and contribute, and to the members of Team Accountable Care for their generous support and mentorship.

ERIC POPP

This summer I served as a fellow in the Office of the Chief of Staff, sometimes called “team Exec” by HPC staff. I focused most of my work on agency preparation for the 2016 Cost Trends Hearing in October. This event, required by law, is designed to bring together major stakeholders in Massachusetts health care to discuss what’s driving cost growth and what we can do to manage it. My job was to help agency staff develop documents soliciting testimony from payers, providers, and hospitals in advance of the event.

Because “team Exec” handles both internal management and external affairs, my fellowship also involved both government and media relations projects. Throughout the summer, legislators and the governor convened to develop the FY2017 state budget, a process that affected funding or authorization of many initiatives, priorities, and responsibilities of the HPC. With the government affairs team, I monitored these budget developments, briefed staff members regarding their effect on the HPC, and attended a range of health policy events and meetings at the State House. Additionally, I assisted the HPC’s press team in monitoring media coverage of HPC work and keeping staff informed of political, legal, regulatory, and economic developments relevant to the agency’s mission.

At the HPC, the work is interesting, the mission is important, and the staff is brilliant—the work done here causes change in Massachusetts, and the nation continues to look here for health care leadership. The summer fellowship is truly the best summer job in the Commonwealth.
**LOUISE SÉCORDEL**

My experience as an HPC Summer Fellow was both enriching and transformational. Being a Healthcare MBA student, it was inspiring to see many talented minds—coming from legal, research, public health, clinical, and business backgrounds—collaborating together to tackle healthcare cost and quality.

As a Fellow on the **Strategic Investment** team, I gained a unique insight into transitional care at community hospitals across the state. Contributing to the Community Hospital Acceleration, Revitalization and Transformation (CHART) program—where 27 community hospitals aim to maximize appropriate hospital use, enhance behavioral health care, and improve quality and safety—I focused on identifying and compiling early operational successes, with the goal of creating a toolkit template of lessons learned from the hospital teams. It was humbling to hear stories from the care teams—frequently comprised of social workers, community health workers, nurses, and pharmacists—tirelessly coordinating with many partners to best meet the needs of the Commonwealth’s most vulnerable patients.

In addition to my project, I was exposed to other initiatives across the HPC. From public presentations, to Senior Staff speed meetings, to AcademyHealth poster sessions, to Commissioner conversations—all activities deepened my understanding of the current state of healthcare and the implications of payment reform. I especially want to thank Lauren Melby for her invaluable mentorship and Margaret Senese for her expertise and guidance, as well as the rest of the CHART team for their support. Add a group of dynamic and engaging Fellows, and you’ve got an all-around great summer experience!

**HALLIE TOSHER**

As an HPC Fellow, I had the opportunity to focus on a specific health policy topic, hone my policy analysis skills, and learn about state government. Throughout the summer, I saw first-hand how the HPC is driving innovations in Massachusetts—from Patient-Centered Medical Home (PCMH) and Accountable Care Organization (ACO) certifications to investing in neonatal abstinence syndrome programs.

As a fellow with the **Accountable Care** team, I explored how payers can support primary care practices in their efforts to better coordinate care, integrate behavioral health, and become PCMH PRIME certified. Specifically, I researched alternative payment models and payment strategies in other states and Massachusetts—including Medicaid, multi-payer, and commercial payers—to identify key areas for policy and payment reforms. To support this research, I had the opportunity to set up and facilitate a focus group with primary care practices to learn what financial and technical assistance providers need to integrate behavioral health. Based on my research and stakeholder engagement, I developed policy recommendations to support HPC’s payer engagement strategy. The Accountable Care team, and particularly Jennifer Lea Huer, provided invaluable guidance and were very generous with their time.

In addition to working with a specific team, the HPC organized a state house tour, one-on-one meetings with HPC Commissioners, a professional networking session with senior staff, and meetings on specific health policy topics. Overall, this fellowship was extremely rewarding and I’m grateful for the opportunity to work with such intelligent and passionate people.
ESTHER VELASQUEZ
The HPC provides its fellows with a lively and dynamic work environment. As a fellow, I gained much knowledge and perspective from co-fellows and HPC staff and benefited from the collaborative and interdisciplinary nature of the work. From attending meetings with HPC Commissioners to participating in public hearings on proposed policy, the experience provides fellows with abundant opportunities to learn about current initiatives to improve health care and reduce spending as well as opportunities to understand the intricacies of the processes shaping health policy in Massachusetts.

Throughout the summer, I collaborated with the Accountable Care team to tackle a charge from the legislature. Massachusetts Session Law 2016; Chapter 52 an Act Relative to Substance use, Treatment, and Prevention; Section 57 tasked the HPC with assessing the availability of services for the treatment of dual-diagnosis or the co-occurrence of mental illness and a substance use disorder. Being involved in a project that responded directly to legislation and has the potential to inform future policy was a valuable and exciting experience. As a social worker and epidemiologist, the project encompassed my professional interests and skills closely but simultaneously challenged me to consider the issues and research process from a new lens, one that prioritizes utility for the Commonwealth.

It has been a privilege to be part of the fellowship program, and I encourage students interested in health policy to seize this opportunity.

EMMA WAGER
The HPC was a fantastic place to spend the summer. As the fellow on the Market Performance team working on the Performance Improvement Plan (PIP), I got a unique opportunity to work on developing this first-in-the-nation program for monitoring payer and provider cost growth. I was able to do independent research to compile a comprehensive literature review, draft notices and information requests for high-growth entities, and participate in meetings with representatives from these payers and providers. This is the first year that PIPs have been implemented, so I knew that all of my work would be setting a precedent for years to come. I would specifically like to thank Kara Vidal and Kate Scarborough Mills for their guidance and dedication to the HPC, PIPs, and my project. There is never a dull moment on the Market Performance team, and I was made to feel like a valuable member from day one.

I’m very interested in state government and healthcare policy, so being in a state agency for the summer was a great opportunity. In addition to our individual projects, all of the fellows got to attend meetings with commissioners, tours of the state house and office bonding events like the HPC Olympics. The twelve fellows also made great connections with each other, and spent plenty of time in our “bullpen” talking about health policy, our academic programs, the election, the Olympics, and, of course, food. I am very proud of what we were all able to accomplish this summer, and I would highly recommend the HPC fellowship program.