

2020 SUMMER FELLOWSHIP PROGRAM

FELLOW PROJECTS & REFLECTIONS

FELLOW PROJECTS & REFLECTIONS

The annual Health Policy Commission (HPC) Summer Fellowship Program has the dual purpose of helping to achieve the Commonwealth's health care cost containment goals 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 tenweek, stand-alone policy or research project with one of the HPC's departments (see page 4). As temporary full-time employees, fellows manage their own time to ensure they meet outlined project benchmarks, present key presentations, and meet deliverable deadlines.

PEOPLE AND PROCESS

Applicants to this highly competitive program must be enrolled in a full-time master's, PhD, law, or medical program. For the 2020 Fellowship Program, the HPC received more than 175 applications from over 70 universities around the world. After reviewing applications and resumes, HPC staff conducted interviews with dozens of top applicants. Candidates were invited for interviews based on prior professional experience and their interests in health policy as outlined in their application materials. The ideal HPC fellow is a strong problem-solver, a clear and concise writer of technical and policy content, and possesses the ability to understand multiple stakeholder perspectives. Successful candidates are collaborative, entrepreneurial, self-motivated, and passionate about health policy.

STIPEND AND PROGRAMMING

In 2020, fellows were paid \$20 per hour for up to ten weeks (375 hours) of work. To enhance their time with the HPC, fellows were included in various activities and meetings and given access to some of the Commonwealth's most cutting-edge and forward-thinking policy making processes and staff.

Due to the COVID-19 pandemic and the temporary closure of the HPC's offices, the 2020 fellowship program was conducted on an exclusively virtual basis. Fellows worked remotely and connected daily with their teams to guide a project from inception to completion, while also exploring the intersection of HPC goals and their own academic interests. In addition to their primary projects, fellows were offered a host of virtual programming and networking opportunities to allow them to better understand the varied facets of the HPC's work. Examples included:

- Joining virtual policy meetings with HPC staff and key stakeholders;
- Attending virtual meetings of the HPC's Board of Commissioners and policy sub-committees;
- Participating in small, interactive virtual meetings on health policy with HPC commissioners; and
- · Meeting with HPC staff from across the agency virtually in cross-functional breakout discussions

At the conclusion of the summer, fellows were asked to share the product of their work and reflect on the Fellowship Program in an eight-minute presentation to HPC leadership and staff.

HEALTH POLICY COMMISSION **DEPARTMENTS**

OFFICE OF THE CHIEF OF STAFF

The Office of the Chief of Staff (COS) ensures that the HPC delivers high-quality, transparent work on the Massachusetts health care system through its role as a convener, researcher, partner, and watchdog. COS is also responsible for guaranteeing that HPC deliverables are communicated transparently to various audiences and stakeholders. This is completed through management of the HPC's external affairs efforts, including media, public, legislative, intergovernmental, and stakeholder relations. COS also manages the administration and finance of the HPC, including agency operations, human resources, fiscal management, special projects, and public events. Coleen Elstermeyer, MPP, Deputy Executive Director, leads this department and provides highlevel strategic support to the Executive Director and Board members in their official capacity.

OFFICE OF THE GENERAL COUNSEL

The Office of the General Counsel provides legal counsel and advice on a wide range of strategic, policy, and operational issues for the agency. The Legal department is responsible for supporting the HPC's policy and legal work, including the development of regulations and oversight of agency compliance functions. The Office of the General Counsel is led by Lois H. Johnson, Esq.

HEALTH CARE TRANSFORMATION AND INNOVATION

The Health Care Transformation and Innovation (HCTI) department is responsible for developing a coordinated strategy to advance care delivery transformation policy and programs, including developing and implementing the agency's investment strategy. HCTI is responsible for administering several grant programs designed to catalyze care delivery transformation in the Commonwealth. The Community Hospital Acceleration, Revitalization, and Transformation (CHART) program, the Health Care Innovation Investment (HCII) program, and the SHIFT-Care Challenge collectively represent a key component of the HPC's efforts to increase health care quality, equity, and access while reducing cost growth in the Commonwealth. HCTI also advances the Commonwealth's goals of accelerating adoption of new integrated care models through state certification programs for patient-centered medical homes (PCMHs) and accountable care organizations (ACOs) and enhanced transparency of such efforts. The department - in collaboration with other state agencies and stakeholders — works to promote and align innovative care delivery and payment models and address upstream causes of poor health outcomes. Through these efforts, HCTI supports the HPC's vision of a care delivery system that reduces spending and improves health for all residents by delivering coordinated, patient-centered, and efficient health care that reflects patients' behavioral, social, and medical needs. HCTI is led by Kelly Hall.

MARKET OVERSIGHT AND TRANSPARENCY

The Market Oversight and Transparency (MOAT) department is responsible for advancing the HPC's statutory charge to encourage a more value-based health care market. This includes (1) developing and implementing a first-in-the-nation Registration of Provider Organizations (RPO) program to provide transparency on the composition and function of provider organizations in the health care system, (2) tracking and evaluating the impact of significant health care provider changes on the competitive market and on the state's ability to meet the health care cost growth benchmark through review of material change notices (MCNs) and cost and market impact reviews (CMIRs), (3) evaluating the performance of individual health care providers and payers which threaten the health care cost growth benchmark and overseeing Performance Improvement Plans (PIPs) to improve the cost performance of such entities, and (4) collaborating with other HPC departments to catalyze improvements in the performance of the health care system. Beginning in 2020, the MOAT team also helps manage pharmaceutical spending by conducting reviews of high-cost drugs referred to the HPC by MassHealth, the Massachusetts Medicaid Program, and assessing if the pricing is unreasonable or excessive in relation to the value. MOAT is led by Kate Scarborough Mills, Esq., MPH.

OFFICE OF PATIENT PROTECTION

The Office of Patient Protection (OPP) safeguards important rights of health insurance consumers. Implementing certain provisions of M.G.L. Chapter 1760, OPP regulates the internal grievance process for consumers who wish to challenge denials of coverage by health plans and regulates and administers the external review process for consumers who seek further review of adverse determinations by health plans based on medical necessity. OPP is also charged with regulating similar internal and external review processes for patients of Risk Bearing Provider Organizations and HPC-certified ACOs. OPP also administers and grants enrollment waivers to eligible individuals who seek to purchase non-group insurance when open enrollment is closed. Additionally, OPP assists consumers with general questions or concerns relating to health insurance. OPP is led by Nancy Ryan, Esq., MPH.

RESEARCH AND COST TRENDS

The Research and Cost Trends (RCT) department fulfills the HPC's statutory charge to examine spending trends and underlying factors and to develop evidence-based recommendations for strategies to increase the efficiency of the health care system. Using key data sources such as the state's all-payer claims database (APCD) and cutting edge methods, RCT draws on significant research and analytical expertise to inform, motivate, and support action to achieve the benchmark and the goals of Chapter 224. RCT is responsible for producing the HPC's annual health care cost trends report and contributes subject matter expertise to the annual hearing on cost trends as well as special research projects as determined by the Executive Director and the Board. RCT is led by David Auerbach, PhD.

HPC SUMMER FELLOWSHIP PROGRAM REFLECTIONS



Tiffany Alunan Harvard T.H. Chan School of Public Health



HCTI

Amid a global pandemic and the nation's racial reckoning, the Massachusetts Health Policy Commission (HPC) has repeatedly shown its commitment to ensuring a meaningful Summer Fellowship Program despite its new virtual format-and for that, I am truly grateful.

This summer, I had the opportunity to work with the **Health Care Transformation and** Innovation (HCTI) department on the HPC's ACO Certification Program. My project focused on developing a strategy to publicly compare the performance of HPC-certified ACOs along different measurement domains, such as cost, quality, access, and health equity. I specifically reviewed state approaches to performance transparency and public-facing benchmarking of provider performance, and I conducted informational interviews with state officials within and beyond Massachusetts to learn more about their transparency initiatives. Building on my findings from the state landscape review and key informant interviews, I outlined key considerations and recommendations to inform how the HPC could feasibly report, compare, and identify high-performing ACOs in a public-facing report. Throughout this process, I valued having ownership of the project, and I was challenged and excited to explore the uncharted territory of ACO performance transparency with the guidance and support of my supervisor.

Overall, I feel so lucky to have grown and learned at the HPC this summer. I am truly amazed and inspired by the passionate, intelligent, and fun-loving HCTI team, and I cannot overstate how thankful I am for their constant support, mentorship, and opportunities for professional growth. Thank you, HPC, for this incredible experience, and thank you to my summer fellows for indulging in my love of Skribbl.io and other online games during our virtual office hour catch-up sessions!



Grace Flaherty Tufts University School of Medicine

GRACE FLAHERTY -

COS

This summer, I worked remotely as a fellow in the **Office of the Chief of Staff** (COS). My main project was researching and writing a white paper comparing state efforts to establish cost growth benchmarks and oversight authorities. As a part of this research, I conducted interviews with fourteen high-level legislative, executive branch, and private stakeholders from six states about their cost growth benchmark efforts and unique state health policy dynamics. My white paper includes a state-by-state analysis of fifteen states, a stakeholder analysis, and recommendations for states looking to establish or improve upon their benchmarks and oversight authorities. I hope that this report will serve as a helpful resource for the Office of the Chief of Staff in its work advising other states on cost growth benchmarks and monitoring commissions.

In addition to my main project, this summer I supported the HPC's external affairs responsibilities. I attended virtual legislative hearings and meetings and wrote summary briefs, tracked and analyzed health care legislation and drafted bill summaries, charted the HPC's strategic investments across state providers, and helped update the HPC'S FY20 Business Development Report. Through this work, I gained a tremendous amount of knowledge about Massachusetts' legislative processes, stakeholders, and policy dynamics. I also helped the agency respond to the COVID-19 pandemic by tracking state executive actions, researching best practices for ensuring a safe return to the workplace, and offering recommendations for how to safely reopen.

I am leaving this fellowship with a better understanding of how research is translated into policy and a deeper appreciation for the important work of state agencies. Despite being virtual rather than in-person, this fellowship was still an incredible opportunity to strengthen my skills and network as a public health professional. I especially appreciated the extra efforts the agency took to organize a variety of supplementary activities for the fellows, including Q&As with HPC leadership and commissioners, coffee chats with staff, and an epic agency-wide Zoom icebreaker activity. I sincerely appreciate the staff's efforts to make us feel like members of the HPC family, even if only through our computer screens. I look forward to staying connected in the future, thanks for a fantastic summer!



Rachel Getz Tufts Medical School



Mia Harris **Boston University** School of Law

RACHEL GETZ MOAT

As a medical student who has seen first-hand how health policy impacts clinical care, the opportunity to work at the Health Policy Commission has been empowering and energizing. Every staff member exudes passion, expertise, and an eagerness to listen and grow. In every project, I have felt welcomed and heard, which to me is the mark of an extraordinary organization.

It has been a privilege to work with the Market Oversight and Transparency (MOAT) department, supporting the development of the Drug Pricing Review program. Established in the 2019 Budget, if MassHealth fails to come to an agreement with a drug manufacturer on a supplemental rebate, the manufacturer can be referred to the HPC. With HPC's expanded statutory authority, it can determine if a manufacturer's pricing for a drug is unreasonable or excessive compared to HPC's proposed value of the drug. Throughout the summer, I had a seat at the virtual table for meetings with stakeholders and expert consultants as we finalized the manufacturer Standard Reporting Form. I also worked on answering research questions as they arose during the development process. This included gleaning best practices from similar regulatory agencies as well as creating tools to facilitate clinical provider engagement and information gathering. Moreover, it was so exciting to be a part of HPC as the organization committed to an embedded health equity framework. Eliciting input from the whole organization, I supported the framework by reviewing scientific evidence related to equitable stakeholder engagement processes and potential assessment tools HPC could utilize for operational practices.

Overall, this fellowship has been an invaluable learning experience. I have a deeper appreciation for the drug regulation landscape and how policy is implemented step-wise. As a future physician, I am motivated to be in policy spaces. It's imperative to advocate for changes that make the conditions my patients live, learn, work and play healthier and more equitable. Being a part of regulatory policy and networking with experts in the field has built my confidence in getting further involved. I am so grateful to the MOAT team, summer fellows, and HPC staff for their support, mentorship, and dinner recipe ideas, even as we worked in a completely remote environment.

MIA HARRIS

OFFICE OF THE GENERAL COUNSEL

As a Juris Doctor candidate with a passion for health law and policy, my fellowship experience at the Health Policy Commission was invaluable. While working with the Office of the General Counsel, I had the opportunity to engage in a range of legal research regarding out-of-network billing protections, telehealth payment models, and Office of Patient Protection (OPP) carrier reporting requirements.

Throughout the program I was challenged to be creative and to explore a variety of legal research tactics. I monitored the progress of a comprehensive health care bill that addressed out-of-network billing and telehealth, and regularly updated the legal team on the progress. I researched and synthesized state telehealth payment policies, comparing pre-COVID-19 policies to emergency policies put in place in response to the outbreak. I analyzed OPP statutes to identify discrepancies in carrier reporting requirements and made recommendations for action. I also analyzed the ways in which OPP demographic data could be used practically to advance health equity efforts.

Through this work, I became more comfortable with interpreting health laws and understanding their complex provisions. I immersed myself into the world of health policy and gained an in-depth understanding of the structure of the Massachusetts health care system. I nourished my passion for health equity alongside others, engaging in conversations that emphasized the importance of the social determinants of health and upstream intervention. I was encouraged to grow both personally and professionally, building upon my existing skills and developing new ones.

Although this summer presented various unique challenges, I am incredibly grateful for having the opportunity to work with and learn from the HPC staff. Thank you to the legal team, my fellow fellows, and to the HPC as a whole for such an amazing summer!



Chelsea Kamuene **Boston College** School of Social Work



Brianna Raposo Mailman School of Public Heath

CHELSEA KAMUENE

This summer I was fortunate enough to work within the Health Care Transformation and Innovation (HCTI) Department, where I assisted the newly enacted investment program known

HCTI

as MassUP: Moving Massachusetts Upstream. The MassUP investment program, is addressing upstream causes of SDOH and root causes of health Inequities. As a fellow I was responsible for creating a literature review and providing further context to the MassUP team on two SDOH areas of focus: food systems and security, and economic mobility and stability. I looked at the concepts of food insecurity, urban and community agriculture and its relation to the food system. Along with Food Policy Councils, and how food access relates to power. My research on economic stability centered on the concept of "unbanked" and intergenerational wealth. Additionally, I conducted a landscape analysis of existing multi-sector community-based programs that address SDOH. To provide the MassUP team to with various guidelines to refer to when supporting program awardees.

My summer project has provided me knowledge on food and economic literacy, two areas that are often determining factors of success for every individual no matter the background. This project has also taught me that both areas of SDOH are interconnected and that no sustainable solution will develop if the issues are tackled separately. This will only widen the issue and lead to social isolation because it requires a united team with diverse perspectives.

My time at the HPC has been an instrumental experience and I will continue to build onto it as I progress in my career. I am grateful that I was part of a stellar community within the HCTI department which has ingrained in me that, program development when addressing health inequities in a large health care system is one of the major ways to create sustainable impact.

BRIANNA RAPOSO

HCTI

As a current Master of Public Health student studying health policy and management, the summer fellowship at the Health Policy Commission has expanded my knowledge and deepened my understanding of ways to improve health care for Massachusetts residents.

My work with the **Health Care Transformation and Innovation** (HCTI) department, specifically the HCTI evaluation team, provided me with the opportunity to conduct a landscape analysis of health investment program evaluation practices around the Commonwealth. After finding peer organizations in the health investment and grant giving space, I conducted a literature review of their program evaluation reports. Upon synthesizing these findings and comparing them to the current HPC evaluation model, I delivered concrete recommendations for future HPC evaluation practice.

Being given the opportunity to have complete ownership over my project and influence the work of the evaluation team beyond my short time at the HPC has been so rewarding. I am appreciative of how hard all of the staff at the HPC has worked in order to make this fellowship experience as fulfilling as it always has been. Though my work was completely remote, it was clear that we were able to experience much of the camaraderie that drives the office culture at the HPC without ever stepping foot in the office. This fellowship has improved my independent research and time management skills and has allowed me to reflect on my own work-style in challenging times. The HPC team has been resilient, dynamic, and steadfast in their dedication to the agency's mission. I started every day with such admiration for my HPC colleagues.

Thank you to everyone at the HPC, but especially HCTI and the evaluation team for fostering such a warm and welcoming environment for the 2020 Summer Fellows. I have felt so supported (yet challenged, in the best way) through my work. This summer at the HPC will be unforgettable!



Colette Rector Harvard T.H. Chan School of Public Health



Celine Toder Mailman School of Public Health

COLETTE RECTOR

The Health Policy Commission's summer fellowship provided a lens into the world of state government and the role it plays in supporting health and well-being. I worked with the **Health** Care Transformation and Innovation (HCTI)'s Learning and Dissemination Team that's charged with connecting important health care evidence with the people who need to hear it. I spearheaded a case study series that spotlights stories of successes and lessons learned from investment programs that often don't surface in broader cohort-level evaluations. We decided to narrow the focus of the first few case studies to how different health systems are responding to the COVID-19 pandemic, and I learned a lot about how different organizations respond to crises to protect their patients. I also developed an impact brief summarizing key findings from the Neonatal Abstinence Syndrome Investment Opportunity, produced a slide deck about the history of the agency's granting practices, and supported a slew of other projects across the team.

Despite the virtual nature of the fellowship, working with the HPC and Team HCTI was nothing short of a delight. The team has been highly supportive of both my projects and in ensuring I had the experience needed to set me up for success in the next phase of my career. We also had our fair share of (virtual) fun and opportunities to get to know each other over Zoom. Most importantly, I've been inspired to see a workplace foster open dialogue around issues of health equity and equity in the workplace, and a real commitment up and down the agency to making change. I'm eager to take up that mantle in whatever comes next.

CELINE TODER

The HPC Summer Fellowship program allowed me to experience firsthand how a state agency uses data to shape policy. This summer, I had the honor of joining the Research and Cost Trends (RCT) team working on low value care. My project expanded on HPC's previous work on low value care by analyzing low value laboratory testing. Low value laboratory testing is the practice of administering diagnostic tests which are of no value to the patient. I began my project by conducting a comprehensive literature review and then selected four pediatric measures to examine within the Massachusetts All-Payer Claims Database (APCD). I used Stata to analyze the APCD data which involved identifying inclusion and exclusion criteria as well as the prevalence of these low value laboratory tests. I also wrote an internal memo on the potential impact of COVID-19 on low value care which summarized my findings from a literature review and my analysis of testing protocols in different states.

In addition to working on my projects, I participated in committee and board meetings which gave me a deeper appreciation of the interconnection of each department and how HPC achieves its goals. I greatly value my experience as an HPC Fellow because it gave me the autonomy to design an impactful project that matched my specific interests, learn from the outstanding professionals at HPC, and collaborate with the amazing members of my cohort. I would also like to thank my manager and the other members of the RCT team who gave me invaluable support this summer.

HCTI

RCT



Daria Turner Emory University Rollins School of Public Health



Dominic Voehler Tufts University

DARIA TURNER **HCTI**

This summer I had the opportunity to work with the **Health Care Transformation and Inno**vation (HCTI) team. As an MPH student with a burgeoning interest in health policy, the Summer Fellowship program offered me the opportunity to explore the field of health policy, while building upon the skills I have developed throughout my career in bench and clinical research. Due to the virtual nature of the fellowship I was worried that I would not be able to make an impact or create connections with members of the HPC or my fellow fellows, but those worries never came to fruition.

For my project I examined how the utilization of demographic data can provide insights into existing health inequities. I conducted a literature review and stakeholder interviews to understand current demographic collection practices within the health care industry and what additional information is needed to capture health disparities. I also examined how SHIFT-Care and the upcoming Maternal Mortality and Morbidity investment program can utilize demographic information to address health equity. For the SHIFT-Care opioid use disorder (OUD) track, I examined how the demographics of the program compared to the OUD demographics of Massachusetts as a whole and by awardee region. After mentioning my interests in maternal health, I was also looped into the landscape analysis for the upcoming Maternal Mortality and Morbidity investment program.

I really appreciated how the fellowship was able to adapt to the virtual environment. One aspect of the fellowship that appealed to me was the opportunity to learn about different career paths in health policy. I thought I would miss out on those opportunities due to the virtual nature of the fellowship however, that was not the case. With the help of my supervisor and other members of the HPC I was able to make virtual connections with health policy professionals both inside and outside of the HPC. Even though the fellows were not able to meet HPC staff in person we stayed connected through HCTI Fun Fridays, virtual wedding receptions, meet the fellows events, and office hours. I enjoyed my virtual time with the HPC immensely and I would like to thank everybody who made this summer productive and above all fun.

DOMINIC VOEHLER

RCT

During my summer fellowship at the Massachusetts Health Policy Commission (HPC), I had the privilege of being a part of the **Research and Cost Trends** (RCT) team. During this experience, I gained a better understanding of Massachusetts's health policy landscape and saw first-hand the HPC's role in promoting value, efficiency, and equity in health policy.

I spent my summer focused on a project looking at primary care spending and utilization among commercially insured adults in Massachusetts. As part of this project, I performed a literature review to identify the national trends in primary care spending and utilization, and I identified how primary care was defined in the literature to inform my research project. Based on the findings from my literature review, I developed a framework for my project and wrote code to clean and analyze the claims data to answer the primary research question. One of my biggest takeaways from this experience was acquiring a better understanding of how to systematically and thoughtfully work through a research question by performing a literature review, identifying appropriate variables, incorporating cross walks, cleaning data, and performing analyses to reach a conclusion and answer the research questions.

In addition to my main project, I learned so much about the Commonwealth's health policy landscape by attending board and advisory council meetings as well as participating in fellows' meetings with commissioners. I was also able to participate in meetings with the RCT team to discuss other ongoing projects. The various components of the fellowship added to my own research project, while also expanding my knowledge of the HPC's role in health policy.

I am incredibly grateful to the RCT team for the opportunity to work with them this summer and for all of their help and guidance. I would also like to thank the HPC for flawlessly facilitating this fellowship program in a virtual environment and for providing the fellows with such an enriching summer experience.

