2023 SUMMER FELLOWSHIP PROGRAM

FELLOWSHIP PROGRAM
The annual Health Policy Commission (HPC) Summer Fellowship Program has dual goals of helping to achieve the Commonwealth’s health care reform and 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 ten-week, stand-alone policy or research project within one of the HPC’s departments. As temporary full-time employees, fellows work closely with their supervisors to ensure they meet project benchmarks, deliver key presentations, and meet deadlines. The 2023 Summer Fellowship Program was conducted in a hybrid format. While virtual programming was offered throughout the summer, all fellows were able to work from the HPC’s offices alongside HPC staff on a recurring basis.

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 2023 Fellowship Program, the HPC received nearly 200 applications from universities around the world. The HPC is committed to embedding diversity, equity, and inclusion as core components of its hiring process. To reduce bias in the Fellowship Program selection process, identifying information including names and universities were redacted from applications upon receipt. After reviewing the redacted materials, HPC staff conducted virtual 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, self-motivated, and passionate about health policy.

STIPEND AND PROGRAMMING
In 2023, fellows were paid $30 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. Fellows worked 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 meetings of the HPC’s Board of Commissioners; and
- Participating in small, interactive virtual meetings on health policy with HPC commissioners and Advisory Council members.

At the conclusion of the summer, fellows were asked to share the product of their work and reflect on the Fellowship Program in a presentation to HPC leadership and staff.
HEALTH POLICY COMMISSION DEPARTMENTS

OFFICE OF THE CHIEF OF STAFF (COS)
The Office of the Chief of Staff (COS) ensures that the HPC delivers timely, high-quality work and informs the public and stakeholders of the HPC’s mission, policies, and programs in a consistent and credible manner. This is completed through management of the HPC’s external affairs efforts, including media, public, legislative, intergovernmental, and stakeholder relations. COS also manages the day-to-day administration 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 high-level strategic guidance to HPC staff and Board members.

OFFICE OF THE GENERAL COUNSEL (OGC)
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 support of agency compliance functions. The Office of the General Counsel is led by Lois H. Johnson.

HEALTH CARE TRANSFORMATION AND INNOVATION (HCTI)
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 (MOAT)
The Market Oversight and Transparency (MOAT) department, led by Kate Scarborough Mills, Esq., MPH, 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.

OFFICE OF PATIENT PROTECTION (OPP)
The Office of Patient Protection (OPP) safeguards important rights of health insurance consumers. Implementing certain provisions of M.G.L. Chapter 176O, 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 K. Ryan, Esq., MPH.

RESEARCH AND COST TRENDS (RCT)
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.
I came to the Health Policy Commission (HPC) as a Master of Public Health student studying Health Policy, with a specific focus on food policy and integrating Social Determinants of Health (SDOH) into our existing healthcare and education systems. With my background as a community health worker and public health researcher, I was interested in learning more about innovative, community-driven ways to improve food security and diet-related health outcomes. I was ecstatic to be placed with the Health Care Transformation and Innovation (HCTI) team to create Learning + Dissemination (L+D) materials on key take-aways from their Moving Massachusetts Upstream (MassUP) investment program. With its focus on supporting collaborations between health systems, community organizations, and residents to more effectively address the “upstream” causes of poor health and health inequities, MassUP’s goals and the work of the four investment awardees aligned perfectly with my interests.

After becoming oriented with the HPC’s structure, the MassUP awardees and projects, and the goals of L+D products, I conducted a landscape analysis of other representations of upstream work. While the impact of SDOH on health outcomes and the necessity to invest time and resources into addressing upstream causes was well-described and generally understood in the fields of public health, medicine, and public policy, there were sparse resources on how to invest in this work and design effective interventions. I spent the remainder of my summer reviewing materials from each awardee to understand their major challenges and successes as they engaged residents and forged partnerships to improve food security and economic mobility.

My key take-aways revolved around 1) the benefit of taking the time to establish a structure, mission, and vision for each partnership and gain genuine community buy-in, 2) the need for adequate resources so upstream-focused partnerships can “put their money where their mouth is” and compensate people for that time, demonstrating the value of their work, and 3) the critical step of meeting people where they are and understanding that it is hard for community members to contribute to upstream efforts if their immediate needs—housing, food, healthcare—are not being met. From key themes, I created two outputs: a drafted Spotlight on the formation of the Hampshire County Food Policy Council and their commitment to a governance structure that shares power with community residents. Secondly, I drafted a semi-structured interview guide for a video highlighting HEAL Winchendon’s commitment to developing resident leaders at every age, including an amazing “Youth Changemakers” program that fostered civic participation, town leadership, and professional development among youth.

I learned so much from the work of the awardees and their commitment to community-led initiatives, but I also had the opportunity to expand my knowledge of the general health policy landscape through Board meetings, meet-and-greets with Commissioners and other HPC partners, and conversations with my fellow colleagues and Fellows on topics ranging from state-level policymaking, healthcare cost trends, initiatives to expand health equity, tactics for program evaluation, and more.

I am so grateful for the support, mentorship, knowledge, and laughter that has been shared among the HCTI team this summer. Thank you, HPC, for such a wonderful Fellowship experience!
ERIC LINH
Health Care Transformation and Innovation

As a rising second-year master’s student in Health Policy at Yale University, I was eager to explore the various forms of state governance as it relates to public health and health equity. I was drawn to the Massachusetts Health Policy Commission (HPC) due to its unique position as an independent state agency with a primary goal of cost containment within the Commonwealth, with equity initiatives suffused across all its work streams.

I had the immense privilege of working as a Fellow in the Health Care Transformation and Innovation (HCTI) department at the HPC. The HCTI team was a paragon of diligence, cooperation, and support as they provided guidance throughout my entire summer. My main project was to develop an equity strategy framework for the Learning and Dissemination (L+D) team within HCTI to promote more accessible, inclusive, and critically-engaged outputs for current and future investment programs. This consisted of comprehensive analysis of past program outputs. This foundation served as a model as I developed question guides and conducted interviews with various program, evaluation, L+D, and HCTI leadership throughout the first portion of the summer.

Following this, I then turned to synthesizing and creating a strategy tool. It outlines common challenges across programs as well as amplifies key opportunities for future work. This tool will be used as a guide for future programs as they begin implementation and development of L+D outputs.

I am deeply appreciative to the HPC for its commitment to providing fellows with an amazingly comprehensive summer. In addition to the learnings of the Massachusetts healthcare system, I’ve had the opportunity to meet with many other staff members through both programmatic forums and overall enthusiasm and desire of staff to talk with fellows. I am excited to carry these new experiences with me as I begin my professional career.

OLIVIA OZKURT
Office of the General Counsel

I had the privilege of spending my summer with the Office of the General Counsel at the Health Policy Commission. As a JD candidate, my fellowship experience proved to be invaluable, offering me the opportunity to gain practical knowledge in both legal matters and health policy. Throughout the summer, I worked on several projects, including researching AI chatbots, specifically ChatGPT, and their potential application for the health field as well as negative implications to the field. I summarized sections of the new No Surprises Act report, specifically proving information on the analysis of trends in outwork billing and potential methods to study the effect of provisions. I also reviewed regulations related to the state MINI COBRA statute, provided background information on insurance claim denial reporting at both the state and federal levels, and conducted research on regulatory questions concerning student health insurance. Additionally, I assisted the Office of Patient Protection by summarizing legislative bills from the Joint Committee on Financial Services hearing. It was an incredible experience working on each of these projects and was able to enhance my legal writing and policy research skills while completing them.

I am incredibly appreciative of the guidance provided to me by the highly professional and motivated team at the Health Policy Commission. As a law student, with a strong interest in the intersection of law and policy, I am grateful to have had the opportunity to contribute to the significant and noteworthy initiatives taking place in Massachusetts. It has been an honor to help the Health Policy Commission work towards its goal of achieving fairness and equity in health care access in the Commonwealth.
During this summer, I had the wonderful opportunity to serve as a Fellow at the Massachusetts Health Policy Commission (HPC) within the Research and Cost Trends (RCT) team. Throughout the course of my fellowship, the RCT team played an instrumental role in offering me indispensable assistance and direction. Their guidance extended to diverse areas, through supporting the research process into healthcare expenditure and utilization patterns within Massachusetts, as well as fostering my professional growth through being included in team meetings and skill building exercises such as journal article presentations. I was also impressed by the holistic and comprehensive structuring of the fellowship program, in which they also facilitated meaningful networking opportunities between fellows and commissioners and members of the advisory board.

My research project focused on analyzing shifts in trends related to vaccination site administration subsequent to the COVID-19 pandemic. Specifically, my objective was to quantify and comprehend the implications of the transition to pharmacies as a prominent venue for vaccination services. This endeavor also encompassed the development of a methodology for the identification and classification of vaccination claims, along with the integration of both medical and pharmacy-based vaccination claims for a more comprehensive analysis. As a graduate student nearing the culmination of my program, with prior experience with large administrative claims databases, I enjoyed working in a familiar environment with the Center for Health Information and Analysis All Payer Claims Database. This experience allowed me to channel my creativity and leverage my skill set in a novel setting, distinct from the realm of my dissertation research. The opportunity to engage with familiar data within a completely new context was somewhat challenging, but it also provided a remarkable chance for personal and professional growth. The unique nature of this experience facilitated the expansion of my knowledge base in a way that was exceptionally valuable. I thoroughly enjoyed my time as a Summer Fellow at the HPC and will take the skills I learned this summer forward into my own work as well as beyond into my professional career.
This summer, I had the privilege of working as a Summer Fellow in the Health Care Transformation and Innovation (HCTI) departments at the Massachusetts Health Policy Commission. For my project, I supported the team by working on research and project proposals for future investments and partnerships focused on maternal health and youth mental health.

My research centered on identifying and analyzing key areas of need within the Massachusetts healthcare system. After diving into a few different topics, we ultimately landed on the youth mental health and maternal health crises as the areas we wanted to focus on. From there I worked with the HCTI team and other members of the HPC to develop various partnership and investment proposals for how the HPC could address youth mental health and maternal health concerns. From the beginning we wanted to embed equity into these programs, so we used a health equity lens when drafting these proposals.

My secondary summer project was to create an interview guide for learning and dissemination materials for the BESIDE investment program. Through this project I was able to dive deeper into one of the current HPC investments and learn about the work the HPC and their partners have done to improve access to doula services and reduce negative outcomes for Black birthing people.

Prior to working at the HPC, I worked at another state agency on health policy projects. It was an eye-opening experience to see how different state agencies operate, and the variety of work related to health equity going on within the state. As an MPH student focusing on health equity, I valued working on projects where addressing disparities in health outcomes for vulnerable populations was prioritized. I also learned so much from the fellowship program’s educational and networking opportunities. And I am incredibly grateful to the kind staff, and mentorship and support of my supervisors for making this summer such a wonderful and educational experience.
SARAH SOMMER

(She/Her/Hers)

MPH, Health Management, Harvard T.H. Chan School of Public Health

I feel privileged to have spent my summer with the Health Care Transformation and Innovation (HCTI) team, supporting the evaluation workstream. For my project, I created a report that highlighted current evaluation practices of investment programs, documented shifts in evaluation strategies over time at the HPC, and posed recommendations for future evaluations.

To inform the topics and themes in the report, I conducted interviews with seven HPC staff members across the HCTI and Research and Cost Trends (RCT) teams. These interviews covered a broad range of topics including the role of the evaluation team within the HPC, how the evaluation team collaborates with other workstreams and outside stakeholders, evaluation planning and data collection practices, and areas for future work. To better understand evaluation strategies in practice, I also sat in on regular HCTI meetings relating to two ongoing investment programs: Cost Effective Care for Caregivers and Newborns (C4SEN) and Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE). Through the combination of interviews and personal experiences, I wrote a report that reflects on current evaluation work and offers areas of consideration for potential growth.

The HPC Summer Fellowship equipped me with a wealth of knowledge about evaluation and the health policy space that I will carry with me throughout my career. I gained firsthand experience in the complexity that comes with evaluating investment programs in practice and was inspired by the evaluation team’s dedication to data methods that highlight voices that frequently go unheard. Beyond evaluation work, I was able to learn about all HCTI operations through learning opportunities and informal conversations; I’m grateful to everyone who took the time to welcome the fellows into the team. Engaging in conversations about community engagement in investment programs, social determinants of health, health equity across topic areas and more added depth and richness to my summer fellowship experience. Finally, meet and greets and coffee chats with individuals within and outside of the HPC have opened my eyes to exciting opportunities in the health policy space. As I return to my graduate program, I’m endlessly thankful for the mentorship I received this summer and to have worked on a project that will have legacy in future evaluations.
**DANIEL STERN**

Research and Cost Trends

This summer, I worked as a Summer Fellow on the Massachusetts Health Policy Commission’s (HPC) Research and Cost Trends (RCT) team. Throughout the summer, the Fellow class had the unique opportunity to meet with several commissioners, advisory board members, and other health care leaders in Massachusetts to learn about building a career in health policy and discuss successes and challenges in crafting an affordable and equitable health care system in the state. On the RCT team, I participated in bi-weekly meetings where the team discussed updates to statutorily mandated work, brainstormed new analyses based on notable trends in health care, presented academic journal articles, and even held public speaking exercises. It was incredibly rewarding to be able to speak with these health care leaders and be in the room with researchers as they shape health policy in Massachusetts.

For my summer project, I conducted research on outpatient observation care in Massachusetts. I combined all three Center for Health Information and Analysis (CHIA) Acute Hospital Case Mix databases (Inpatient Hospital, Emergency Department, and Outpatient Observation) to obtain a holistic view of all hospital discharges in the state. I then merged this with internal crosswalks, as well as some external population and enrollment files, to add color to the discharge data. From there, I analyzed how the number, and average length of stay, of observation stays has changed over time. Finally, I calculated the share of emergency department visits that went to observation compared to inpatient admission for various diagnoses and hospitals, demonstrating which hospitals are more likely to use observation care and for which conditions. It had been several years since I used STATA regularly, and my preceptor and the RCT team provided invaluable guidance and direction on both the technical and theoretical aspects of the project.

I had an amazing time this summer meeting and getting to work with all the incredibly talented and committed HPC staff, and I am extremely grateful to have been given this opportunity!

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**DOLMA TSERING**

Health Care Transformation and Innovation

As a Master of Public Health student specializing in Health Policy with a strong interest in payment and delivery system transformation and a deep passion for health equity, my Summer Fellowship experience was an exciting opportunity to make meaningful contributions within an organization that aligned with my interests.

Throughout this fellowship, I had the privilege of being part of the Health Care Transformation and Innovation (HCTI) department, specifically engaging with the Accountable Care Organization (ACO) team. My initial project involved an in-depth exploration of the ACO model’s efficacy through a comprehensive landscape review. The result was the creation of an ACO Research Library and a slide deck on emerging trends and key findings. This process not only fine-tuned my research skills but also deepened my understanding of evolving healthcare delivery models.

For my second project my aim was to foster knowledge-sharing among ACOs, by furthering the implementation of health equity-focused interventions. I identified relevant health equity resources, frameworks and initiatives with a focus on amplifying patient engagement. I also crafted event proposals that outlined potential speakers and webinar topics, to assist ACOs in their pursuit of health equity. My third project included drafting a survey for payers and providers to assess the adoption of health equity data standards endorsed by the Executive Office of Health and Human Services (EOHHS) Quality Measure Alignment Taskforce (QMAT), which reinforced my project management skills and highlighted the pivotal role of standardized data in propelling health equity efforts.
This summer, I had the opportunity to work in the Office of the Chief of Staff within the Health Policy Commission, focusing on projects related to government affairs and health equity. As a Juris Doctor candidate, I was excited to learn more about health policy at the state level because I wanted to better understand how policy and law intersect and inform each other. I was especially excited to explore this at the Health Policy Commission because state agencies play an invaluable role in all aspects of health policy and law, from informing policy proposals to implementing and enforcing regulations.

During my summer at the HPC, I conducted bill tracking and analysis of numerous health policy bills under legislative consideration. I provided legislative summaries of numerous legislative hearings at the Massachusetts State House on health policy topics including drug pricing reform, maternal health, health equity, and more. I also provided analysis and summaries of health-related provisions in the Massachusetts annual state budget and supplemental budgets. In addition to my legislative projects, I assisted with the successful execution of the HPC’s June and July Board Meetings and several other projects in support of the Chief of Staff and the Executive Director. Lastly, I completed an independent research project assessing current health equity efforts across state governments and legislatures, as well as the federal government and the U.S. Congress. My project was intended to provide an overview of the landscape of health equity efforts nationwide, and my research ultimately illustrated both the remarkable progress some states and the federal government have already achieved in advancing health equity as well as areas for continued improvement.

My fellowship experience illustrated the central role of health policy in shaping health law and how state agencies such as the HPC can actively drive change in the public health and health care space. Working with the Office of the Chief of Staff and other HPC staff, speaking with HPC Commissioners and Advisory Board members during Meet and Greets, and attending Board meetings and other health policy events this summer provided me with a rich and nuanced understanding of health, policy, and law that will inform my educational and professional experiences moving forward. I am grateful to have had the opportunity to be part of the incredible work the HPC does for Massachusetts, and I look forward to what the HPC will accomplish next!
This summer, I had the opportunity to join the Market Oversight and Transparency (MOAT) team to work on several projects. My time as a summer fellow with the HPC and team MOAT was an amazing and insightful experience that helped me better understand the intersection of law and health policy. This experience has not only improved my skills for my individual projects, but also enhanced my knowledge of the HPC’s role in various regulations and the functioning of the Massachusetts government as a whole.

My projects included researching private equity’s impact in the healthcare sector as well as working with the Performance Improvement Plans (PIPs) team on measures of payer efficiency. For my first project, I conducted a thorough literature review on healthcare private equity, including the typical investment model, national and Massachusetts trends, and impacts on the healthcare sector. In addition, I conducted a statute review of other states’ regulations to better understand the ongoing oversight efforts for private equity ownership in the healthcare system. For my second project, I conducted supporting research for the PIPs team, evaluating potential ways to define and measure payer efficiency in Massachusetts.

I am deeply grateful for all the wonderful people I met and worked with this summer at team MOAT and the HPC. Everyone is welcoming, supportive, knowledgeable, enthusiastic, and beyond. Through this fellowship, I was able to gain a great deal of knowledge and insight on healthcare and law-making, as well as understand different perspectives engaging with state government research firsthand. This experience has been incredibly beneficial, providing me with a fresh understanding of how state government can positively influence health policy. I am very grateful for all the support and mentorship during my fellowship experience, and I am excited to take the knowledge with me into the rest of my education and career.
This summer, I had the opportunity to work with the Health Care Transformation and Innovation (HCTI) team, on two projects for the Cost Effective and Coordinated Care for Caregivers and Substance Exposed Newborns (C4SEN) investment program. As a Master of Public Health student studying Health Policy with an interest in health equity and maternal health, I was excited to learn how health equity is incorporated into state-wide maternal health policies and programs.

C4SEN was one of the first investment programs to have health equity as a major theme and the HPC team wanted to learn how health equity could be better incorporated. As a result, I facilitated and planned a health equity after action review for the C4SEN team. The goals of these meetings were to evaluate how health equity was prioritized throughout the program and identify any missed opportunities to consider when incorporating health equity into future investment programs. In developing the discussion guide for the meetings, I reviewed the RFP for C4SEN, the Equity in Every Project tool, and awardees’ operational responses to understand how health equity was a focus throughout the project. After facilitating two meetings with the team, I reviewed meeting notes and recordings and synthesized key takeaways including future considerations for investment programs when prioritizing health equity.

For my second project, I developed a technical assistance resource guide based on activities undertaken by two C4SEN and BESIDE program awardees. Both Baystate/BESIDE and Berkshire/C4SEN awardees performed impressively after relatively slow starts and HCTI wanted to explore the decisions made by both teams during the planning period that set them up for success. I identified overlapping themes and activities of Baystate and Berkshire and categorized these activities by theme in the resource guide. This reference document will be used by program contacts to understand best practices and provide examples from BESIDE and C4SEN for awardees in the planning period.

In addition to expanding my knowledge of maternal health policies in practice, I was able to strengthen my research and project management skills. Working at the HPC this summer provided an invaluable chance to explore state health policy and learn from incredibly intelligent and dedicated health policy professionals. I want to thank my supervisor and the HCTI team for their support and guidance throughout this summer. I am truly grateful for the profound impact of this Fellowship experience!