

Division of Public Administration Alumni Association

Portland State University

Mark O. Hatfield School of Government

Bringing alumni together for social
networking, knowledge sharing, and
professional development

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Message from the Editor:

Happy New Year, Alumni! The year 2012 promises to bring new challenges, professional and personal development, and learning opportunities. For me, the New Year also brings exciting opportunities to expand the Portland State Public Administration Alumni Association. Over the past year, we have successfully expanded our social network presence, brought alumni together for networking events, and begun publishing our newsletter. Alumni from all degree tracks have been involved in various aspects of the Alumni Association, including contributing to the content of this newsletter. The first two issues focused on local government administration, public sector research and evaluation techniques, technical proficiencies and certifications for public administrators, and nonprofit administration. In this issue, alumni have contributed articles from the public health field. Throughout 2012, we will continue to offer additional topics of interest from the perspective of those working in the public and nonprofit sector all over the country. The purpose of the Alumni Association is not just to benefit individual alumni, but to strengthen our alumni community as a whole, learn from the experiences of others, and continue our education well past graduation. Here's to a successful 2012 for all!

ABOUT THE NEWSLETTER

This is the PSU Public Administration Alumni Association newsletter, to be published quarterly according to PSU's academic calendar. The topics and authors will vary, but will always be relevant to the study and practice of public administration and public health. Drawing from multiple fields of study, we look forward to bringing you additional relevant content, and are always seeking input on the newsletter (format and substance) as well as article contributions. For more information, see page 6.



Alumni Spotlight: Sarah Young

A Master of Public Health graduate shares her experience in the Federal Presidential Management Fellowship (PMF) in a position at the Department of Housing and Urban Development

Last spring, I graduated from PSU with an MPH in Health Management and Policy. Just two months later, I was flying all the way across the country to a new job in Washington, DC as a health care underwriter and policy analyst with the Department of Housing and Urban Development (HUD). Much to my surprise, I had the job when I graduated, thanks to the Presidential Management Fellows program. I want to share the path I followed to get here with my classmates and future students.

The Presidential Management Fellowship

In September 2010, I applied to the PMF program. The program is a two-year work and training fellowship with the federal government for people with a recent graduate degree. Your degree can be in almost any area (I've met an anthropology PhD for instance) although the majority are graduates in Law, Public Affairs/Policy, and International Affairs. I actually think I may have had an advantage because health policy and administration was less

common among the finalists. That's just guessing on my part though.

A few words about the PMF application process: it is long, confusing, and probably good practice for navigating government bureaucracy. I submitted the first stage of the application in September 2010, traveled to San Francisco for day-long interviews in January, and only learned I was a finalist eight months later in April. Finalists are not guaranteed a job either; you need to find your own position with an agency. I chased a lot of leads in the two months following that finalist notification. Fortunately one of them panned out, and I accepted a position with the Office of Healthcare Programs (OHP), which is part of HUD.

Applying a Public Health Education

Since the PMF program requires a graduate degree, my MPH was an obvious precondition. That said, I have definitely used what I learned academically as I find my feet in my new job. OHP administers a mortgage insurance program for hospitals and residential living facilities, which are mainly nursing

homes, and assisted living facilities. The day-to-day work relates more closely to mortgage insurance and underwriting reviews than to health policy or public health. This meant that the first requirement was to learn fast and keep on my feet. But you don't have to step back very far from the standard financial reviews to realize that health policy and healthcare financing have a major impact on all of the facilities we work with. Medicare payments are important for all hospitals and Medicaid accounts for half the money spent on nursing homes in this country.

The fact that I have some familiarity with our current convoluted U.S. healthcare system allows me to contribute to some of those big-picture issues. I find that classes I took at PSU, like Health Systems Organization, Health Policy, and Financial Management of Health Services, definitely inform my thinking.

Impacting Policy and the Public

One of the more interesting projects I am involved with is our program Policy Team. That is a forum where I can ask questions like, "Are we building nursing homes to match

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the needs of the next 20 years or of the last 20 years?” and “What impact might changes to Medicaid Home and Community Based Services waivers have on facilities with mortgages insured by HUD?” Answering these questions is considerably harder than asking them, but it is exciting to be in a role where I can contribute to that challenge.

Another interesting piece of my current work is drafting responses to Congressional Inquiries. A Congressional is a letter from a U.S. Senator or Representative asking the agency to answer a question or address some issue. They often come from constituents, e.g. “My constituent Ms. Smith wrote to me about this problem she has with a HUD program, please provide a response on the matter described below,” but they can also be direct questions from a legislator. Recently I’ve been writing the first draft of the response when these letters arrive in our office. This allows me to learn about interesting situations with the program and practice my diplomatic skills in order to politely and clearly explain the issue without promising anything the program cannot deliver.

Applying the PMF to a Future Career in the Federal Government

Thanks to my position and the great people I am working with in OHP, I am beginning to actually see myself in a federal career. I had no idea what would happen when I

packed up and moved from Oregon to the other side of the country, but I had a lot of support from friends, family, and my professors at PSU. That help has really positioned me to take advantage of the incredible opportunity I have as a PMF. I now plan use it as the beginning of a satisfying and productive government career, although I need to figure out a way to get back to Oregon too. The District is a very interesting place to experience, but Oregon is still my home. ♦

Quick Tips: Fellowships in Public Administration and Public Health

Fellowships are typically post-graduate paid positions that serve to provide graduates with important work experience, professional development, and additional education. There are a plethora of opportunities for public administration or health students and alumni, including the fellowship discussed by alumna Sarah Young. Opportunities include:

1. **Presidential Management Fellowship (PMF)** – Open to any/all degree tracks, this competitive federal program places successful applicants in positions in federal agencies. See Sarah Young’s article or [here](#) for more information.
2. **Local Government Management Fellowship** – Offered through ICMA, this highly competitive fellowship places public administration graduates in local government positions throughout the U.S. See [here](#) for more information.
3. **Public Health Prevention Service** – This program, offered through the Centers for Disease Control, is geared toward public health graduates. See [here](#) for additional information.
4. **Other Fellowships in Local Government Administration** – Many local governments have created their own independent fellowship programs for emerging leaders. The [National Association of Schools of Public Affairs and Administration](#) lists several local government fellowships throughout the country.



Public Administration in Practice

Alumnus Brent Sandmeyer discusses public reporting for healthcare providers and how these reports are being used to improve the cost and quality of healthcare

Public reporting of health care quality has been around for decades, but there is no degree in public reporting—you probably couldn't even find a university course on it. But my Master of Public Health (MPH) coursework at PSU gave me the foundation in health care management and policy that I needed to get started. Public reporting ties together many of the elements of the MPH program, particularly the Health Management & Policy track. Health information systems, epidemiology, health behavior, health policy, economics, law and regulation, continual improvement; if it has to do with measuring and improving health care, it has to do with public reporting. Even today, I frequently turn to fundamentals like the Model for Improvement and the Triple Aim—better health and better care at a lower cost—when considering how health care can be improved through public reporting.

But coursework only takes you so far, which is why the final organizational experience of the MPH program is so important. I had the privilege of completing my final project at the Oregon Health Care Quality Corporation, which introduced me to the potential—and potential pitfalls—of public reporting. Without that experience,

I would not have my current position with the Science of Public Reporting Initiative at the Agency for Healthcare Research & Quality (AHRQ). Rather than risk losing you in the weeds of my day-to-day at AHRQ, let me tell you a little about public reporting.

What is Public Reporting?

In 2001, the Institute of Medicine's landmark report, "To Err is Human", brought the deadly human and economic costs of health care errors into the spotlight—tens of thousands of lives and billions of dollars lost every year due to unnecessary variations in care practices. Meanwhile, health care costs have exploded, with no comparable rise in quality. Of course, for every expensive, error-prone provider there are doctors, nurses, and hospitals that provide high quality care at low costs. But who are they? This is where public reports come in.

Public reports, also known as report cards, are produced by organizations such as state health departments, the Centers for Medicare and Medicaid Services (CMS), community quality collaboratives like the Oregon Health Care Quality Corporation, private companies like Consumer Reports, and others. These public report sponsors take data from insurance claims, clinical records,

or other sources to create ratings based on common standards of care. For example, a report might measure how many of a clinic's patients with heart problems received recommended cholesterol tests, then provide a rating for that clinic's heart care. Originally paper-based, almost all public reports are now available online.

Good public reports provide consumers, providers, employers and insurers with information they can trust to help guide their decisions toward high-value health care. No one report can best serve all these different groups—trying to be all things to all people has never been a good way to design a product or get people to use it. Instead, good reports are generally designed around the needs of their target audiences. For example:

- Consumers need easy-to-understand, readily accessible reports that allow them to compare providers and sites of care of all kinds based on quality and value.
- Providers need reports that provide timely feedback and patient-level data for quality improvement efforts, and information on other providers and facilities for comparison and to guide referral decisions.
- Employers need plan-level data on quality and value with

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trends over time to make informed choices.

- Policymakers need reports that reflect the impact of policy and program decisions.
- Insurers need reports on a provider level for targeted quality improvement or cost reduction efforts, and plan-level information for market comparison.

Let me focus briefly on two audiences: health care providers such as doctors and hospitals, and health care consumers (you!).

Improving Care

Public reports can help improve the quality of health care in a couple of ways. One is that providers may try and improve their ratings in order to gain competitive advantage and avoid losing their professional reputation due to a low public rating—and the fundamental way to improve ratings is to improve care. The other way that reports can improve quality is that consumers may use public reports to choose better quality providers, resulting in more people receiving care from high quality providers and fewer receiving care from low quality providers. The maximum impact is achieved when both of these effects are strong.

Provider Feedback

Public reports provide vital feedback to providers that they cannot get in other ways. Before public reports started being developed in the 1980s, health care providers had virtually no way of knowing how they compared to other providers in terms of cost or quality, due to a combination of

professional secrecy and a lack of usable data. Information technology, policy changes, and market pressures have broken down many of the barriers to information sharing. With increasing transparency, it has become easier to identify and learn from high performers and motivate lower performers to improve their care and lower costs.

Choosing Care

Consumer choice is another method by which public reports can improve the quality of care. If you had to choose a doctor tomorrow, how would you do it? Perhaps you would ask friends or family, choose a doctor close to where you live, or settle for whoever had the nicest photo on your insurer's website. Or maybe see what Yelp has to say? Remember, this is a person you will trust with your health, your life—don't you want to know more than how close they are to your drycleaner?

Public reports have the potential to help fill this gap by providing objective information on a provider's clinical quality and cost of care, as well as official surveys of other patients' experiences. If enough consumers use that information to choose better providers, more people would see high quality providers, and lower quality providers would feel additional pressure to improve their ratings through quality improvement activities.

Unfortunately, while public reports that allow provider comparison are becoming more common, objective and easy-to-use reports are not yet available in every area or for every consumer.

The Future of Public Reporting

Today, public reports are a little bit like digital music players before the iPod—not many people use them, especially the average consumer. Before the iPod, people weren't interested in digital music players. They were just too clunky and hard to use. Now, we couldn't imagine life without them. Public reports are still waiting for that revolution in design. But as Apple proved, if you develop the right product, it can change an entire industry.

Many people across the country are hard at work on getting to that next level of design and use of public reports, supported by legislation such as the Patient Protection and Affordable Care Act. Here at AHRQ, resources such as TalkingQuality (TalkingQuality.ahrq.gov) and Public Reports on Providers for Consumers (ahrq.gov/path/publicreporting.htm) are helping guide report developers toward best practices for making reports accessible and understandable for everyone. AHRQ also supports a number of public report producers with technical assistance through its Learning Network for Chartered Value Exchanges, Quality Indicators, and MONAHRQ software. The next generation of public reporting is just around the corner. ♦

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The Alumni Association is expanding! There are now many ways to get involved, including:

- **Attend alumni events:** Watch for communication of time/location for monthly gatherings and other events! All are welcome!
- **Check out our Facebook page!** Special thanks to alumna Elia Unverzagt, MPA for expanding the group's social media presence.
- **Join our group on LinkedIn or the listserv:** The Alumni Association LinkedIn page allows you to connect with hundreds of alumni, remain informed of upcoming events, and receive the newsletter.
- **Provide feedback:** This Alumni Association is OURS. We can build it the way we want. Make sure your voice is heard.

The Alumni Association will continue to grow, and your participation is the key to our success. Thank you for your support!

*For more information, to join the listserv, or to provide feedback, email
paalumni@pdx.edu*

We are now soliciting contributions for the spring edition of the newsletter.

Want to contribute to the content?

Email Amanda Lamb, MPA '10
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