

Barbara McNeil Interview

Barbara McNeil: Okay, I'm Barbara McNeil. I'm head of the Department of Healthcare Policy at Harvard Medical School.

Male Voice: Okay, guys, we're rolling!

Barbara McNeil: Let's go!

Elyse Morelli: Why did you choose to work in the field of health services research?

Barbara McNeil: After I graduated from medical school, I went on and got a PhD that involved analytic modeling, so I was looking for a career that blended clinical medicine and detailed analytic reasoning or thinking. Health services research seemed like a good area. I entered it via technology assessment and cost effectiveness analyses, and then another series of activities after that.

Elyse Morelli: So what area have you focused most of your career on?

Barbara McNeil: Well, it's changed over time. I started out doing a tremendous amount of work in technology assessment comparing clinical service A with clinical service B. I also worked in decision analysis looking at the cost effectiveness of various clinical services. Then went on to looking at the incorporation of patient factors or utilities into the denominator that is in the calculation of the effectiveness of clinical services.

Then I gradually moved on more into studies of quality of care. We, in our department at Harvard, were the recipient of an AHRQ port - patient outcome research team on acute myocardial infarction - so we looked at a number of factors relating to the processes of care and outcomes of care for that disease. That led me more into the area of quality of care, per se.

Elyse Morelli: In your opinion, what are the most significant contributions of health services research?

Barbara McNeil: Well, I'm not sure I know the answer to that question. It's really a pretty broad question, and it really would depend a tremendous amount on the exact areas that you were talking about in answering that question. I think probably the major contribution has been the ability of researchers in the field to work more closely with policymakers and, simultaneously, to have policymakers understand some of the benefits of research in this field. That answer doesn't give you very specific papers or citations. I think it's a more generic answer, which, I think, is the correct one.

Elyse Morelli: What are the biggest opportunities for the field of health services research?

Barbara McNeil: I think going forward the field is going to have a difficult time because of the decrease in funding available to it. That is going to affect everything that we do as researchers over the next five or ten years. If I could look

beyond funding, however, I would say that probably what will help us the most are two things. The first will be the ability to get more data from electronic medical records, more administrative data from states, hopefully more data from Part D in Medicare - basically a richer data set on which to make our conclusions. And the second thing will be the increase in interest of policymakers to see those analyses.

Elyse Morelli: What advice would you give someone thinking of beginning a career in health services research?

Barbara McNeil: Well, I think that's actually a very easy question with a very specific answer. It seems to me that an individual has to get a degree - if it's a PhD, from the best possible place in a strong discipline; if it's an MD, the individual has to do clinical training and then do a postdoctoral fellowship. In both cases, I would caution a new investigator not to try to run out too early on their own. The field gets too competitive, grant funding is too difficult to get, and if they're on their own too soon, then they will not be able to be competitive for grants when they actually try to go out to get them. They need to be part of a big team initially, and they have to be supportive of research that involves different kinds of disciplines. It's a complicated recipe.

Elyse Morelli: Why did you become involved in helping to form a new organization - The Association for Health Services Research?

Barbara McNeil: I became involved, actually, at about the same time that the DRG System went into place. And I was on Propak, which is the predecessor of Medpak. I was one of two or three physicians on the panel at that time, and I was very interested in seeing a better way for physicians in-house [sounds like] and researchers - economists, sociologists, general outcomes researchers - find a better way to interact with policymakers. This seemed like a good way of doing it.

Elyse Morelli: What were the goals of the founders for AHSR when it was first created?

Barbara McNeil: Well, I think the goal is - or goals - were similar to what I said earlier - basically to link researchers with policymakers and policymakers with researchers with the ultimate goal of having better policies at the national level that would ultimately trickle down to influence patient care.

Elyse Morelli: How has your involvement with AHSR influenced your career?

Barbara McNeil: I think that it has influenced it to the extent that we have been able to think about using this as a vehicle for our trainees to get more exposure to the field. It

has also helped me get to know people outside my more immediate network.

Elyse Morelli: What was the original purpose of the AHSR annual research meeting?

Barbara McNeil: I don't think we had a clearly defined purpose. I think our general aim was to link policymakers with researchers.

Elyse Morelli: It's still our goal today, I do know.

Barbara McNeil: Correct. That's right, Elyse.

Elyse Morelli: Where do you see the annual research meeting twenty-five years from now?

Barbara McNeil: Well, I don't know where I see the meeting going. I know where I hope it will go, and they may be different. I think that right now we have a rich set of health services researchers and we have a rich set of policymakers who come to this meeting quite faithfully every year. What we don't have are the, in many cases, are the users of the information. So I'm hoping that in twenty-five years we are going to have more representatives from the provider community - the physician executives, leaders of large hospitals, chairmen, chairpersons of clinical departments, basically individuals who will see that it's in their interest to work closely with researchers in this field to help delineate barriers to and opportunities for the improvement of health policy.

Elyse Morelli: What do you think are some of the challenges to attracting that audience?

Barbara McNeil: Well, people tend to be attracted to their own peers and it's a little bit uncomfortable to move outside a safety net. So I can imagine that one of the difficulties will be to bring those individuals into a group which is quite tightly knit in which they're really not closely attached. We'll have to figure out how to break down that barrier.

Elyse Morelli: Is there anything that Academy Health can do to kind of advance these goals --

Barbara McNeil: Yes, I think there is, specifically. If I were the head of Academy Health, I would want Academy Health to start inviting in those leaders to the annual meeting and to have them play a leadership role in the planning and in the presentation of major addresses.

Elyse Morelli: Is there anything additional you would like to add?

Barbara McNeil: No, I think you've covered everything pretty much.

Elyse Morelli: Great.

Barbara McNeil: Thank you.

Elyse Morelli: Well, we're pleased to have you -- [cross-talking]

Barbara McNeil: My pleasure --

Elyse Morelli: -- and glad that you are part of our group
of founders.

Barbara McNeil: Okay thank you very much.