

Vincent Mor Interview

Vincent Mor: Oh, it's just wonderful.

Jennifer Muldoon: --there's just so many people and such a huge process to oversee.

Male Voice: Tell us your name, spell your name, profession.

Vincent Mor: Okay.

Male Voice: Three, two, thirty-seven, forty-eight--

Vincent Mor: I'm Vincent Mor. V-I-N-C-E-N-T M-O-R. This year I'm chair of the annual research meeting here at the Academy Health, and I am professor and chair of the Department of Community Health at Brown University.

Jennifer Muldoon: So Doctor Mor, why did you choose a career in health services research?

Vincent Mor: I didn't know I was choosing a career in health services research. I sort of - I chose a career finding a mentor who was doing interesting questions, and they happened to be questions about aging. And I always thought of myself sort of as an aging researcher doing policy research, but it wasn't until somebody came up with a label ten years after I had been doing this that it was health services research, but it was always what I had been doing since the early '70s so it seemed natural after somebody came up with the name.

Jennifer Muldoon: In your opinion, what are some of the most significant contributions of health services research?

Vincent Mor: Oh, boy. Well, perhaps, at the macro level articulating the importance of access, quality and cost and actually accepting the fact that this is a field and that this is an issue that affects people, in that sense. I think without it being given a name, you don't really have a field and it doesn't get articulated for the people, the public. So that's, I think, a very important issue.

I think in every area - so, for example, the articulation of costs - of where costs get spent, where healthcare costs get spent - there's a high concentration of cost at the end of life, and that's been the same since the 1960s from the early work of Ann Skatoffsky [phonetic] to the work that I've contributed and to the work that other people have contributed saying that that shape is the same regardless of how much the costs are, they accumulate there. So it gives you a sense of this is where - it's a real story; it's a real message for the public in general.

On the quality side, it's the story of the improvement in the VA system, which used to be, most of us would think, it's kind of an embarrassment. But now, it's a shining example of what's possible, and that's really important.

Jennifer Muldoon: What are some of the biggest opportunities for the field?

Vincent Mor: Biggest opportunities for the field? Well, I suppose, again, shaping the question, as Stu Altman talked about today, just sort of getting the public to understand that this, the absence of access to healthcare is important not just for a drug or for a this, but for all of their lives - for income security on the one hand and for someone they can trust in a time of need at another - and those things are connected. Just like saving for retirement is connected, having the connection between healthcare and health services and having someone you can trust in a time of need. That's really important. And making that connection for the public, I think, is a really big deal.

Jennifer Muldoon: Do you have any advice for someone considering a career in health services research?

Vincent Mor: I give it to my graduate students and my fellows all the time. There are lots of different options. So for the people who want to be investigators, they have to understand that your question, your focus, your push and your ability to learn methods and those kinds of things - you're a scientist; you're just asking a nonlab question.

But there's lots of opportunities for people who sort of want to be interlopers - to take that information and make it

digestible for policymakers. And there's just as many opportunities for people on the policy side, which is where when I teach undergraduates, a number of them sort of go off to Congress or go off to staff at the legislatures, and that's important.

Jennifer Muldoon: How has your involvement in AHSR and now Academy Health influenced your career?

Vincent Mor: I suppose with the emergence of AHSR, I probably no longer - while I do aging research, I no longer think of myself *only* as an aging researcher. I think of myself as a health services researcher where I take what I look at and use it as an example of general principles and issues so that I can say, this is the same as people who do hospital stuff or this is the same as people who do work in insurance because the same principles apply.

Jennifer Muldoon: Thinking back to the early days of the annual meeting, what were the important health policy and health services research issues then?

Vincent Mor: The first meeting, 1984 - I sort of briefly mentioned it - in 1984, DRGs were just getting the signal as to what was going to be the impact. And the world I was working in was, what's the impact of introducing hospice as a Medicare benefit? I'd been the director of the National Hospice Study

and had hundreds of researchers all over the country working on this topic and we were presenting the results.

The benefit had already been passed, the legislation had been passed at probably the same time the DRGs were passed, but the payment system hadn't actually been put into place yet, and so we had been very influential in trying to make the payment system responsive to the data that we had. And so that was just a great experience. I mean, actually having that influence with the data on hand; recognize that it was highly serendipitous to make a difference. It was fun.

Jennifer Muldoon: What do you see as the important health policy issues for the future?

Vincent Mor: How to understand the mechanism by which provider groups will be accountable for the care that they deliver. One of the most frustrating things that I experience is that, whether it's Medicare or various kinds of managed care, is that people bounce from one provider to the other precisely when they need continuity - when they're sick - and there doesn't appear to be much incentive in the system to have people or institutions become accountable for that.

The real challenge is to figure out how to organize, not just financing, but sort of accountability in an obligated way for institutions, groups of doctors, say, yes, you are my patient and somebody in my group is going to answer the phone

24/7 for you and I'll care what happens to you when you walk out the door of this place. That's a very big challenge. It's not just a challenge in the U.S., however, it's a challenge everywhere. So it's not just financing; it's the structure.

Jennifer Muldoon: Is there a role for Academy Health to play?

Vincent Mor: In that?

Jennifer Muldoon: In helping?

Vincent Mor: Absolutely, because it's the interface between financing and delivery, which means you need all those clinicians who are fully engaged in delivery understand some of the bumps in the road, as it were, and then the economists and other people will worry about how the financing structure goes, what incentives institutions and individual providers have. How to make those two things fit together is the challenge for the future.

Jennifer Muldoon: How about a favorite memory of the annual meeting?

Vincent Mor: Oh, God. I suppose Stu Altman delivering, maybe, a lecture in the third year where we were - 1986, '88, something like that - Medicare Catastrophic had just passed and there was the chance that health could be back on the agenda - and he's always so funny, and I recall that one particularly, although there have been lots. Oohvay [phonetic] Reinhart

giving any number of different events, which is just riotous. And the best, I think, of all is I bring my AHRQ-funded fellows every year - four, five or six of them - to the meeting and it's the generation to generation passing of the torch, and they get to see that and that's really important.

Jennifer Muldoon: Anything else you'd like to add?

Vincent Mor: I think that's it. This has been fun.

Jennifer Muldoon: That's great!

Vincent Mor: Okay?

Jennifer Muldoon: I especially liked that last bit.