

## Educating the Physician Leaders of Tomorrow

Twenty years ago, in 1995, the first students were admitted to the MD/MBA program, a joint venture of Sidney Kimmel Medical College (then Jefferson Medical College) and Widener University. Students in the program could earn an MBA during a full-year of study in the Graduate Program in Healthcare Management in Widener's School of Business Administration, typically between the second and third years of medical school at Jefferson. At that time, there were only 8 MD/MBA programs available in the U.S. Today there are approximately 65 MD/MBA programs across the U.S., with an estimated 500 students.<sup>1</sup> We recently completed a survey of graduates of the Jefferson-Widener program that documents the accomplishments of our 30 MD/MBAs.

The Jefferson-Widener program is atypical, in part, because it involves collaboration between two different universities, but also because the Health Care Management (HCM) Program at Widener has dual accreditation by the Commission on Accreditation of Healthcare Management Education (CAHME) and the Association to Advance Collegiate Schools of Business (AACSB).

The HCM Program combines the basic management disciplines found in most MBA programs with applications to the health care industry. The target population for the HCM Program is working health care professionals who pursue an MBA on a part-time basis. This gives the Jefferson students the opportunity to study with a variety of clinical and non-clinical professionals, including practicing physicians and physicians in managerial positions. The Program gives them the experience of working on projects in interdisciplinary teams, as they will once they complete their training.

We consider this unique arrangement to be a distinct advantage for the Jefferson students. Most MD/MBA programs offer a general MBA that is not connected to the health care industry. While the skills needed by physician managers and general managers are essentially the same, "by divorcing management education from medicine, these training programs and the physicians who participate in them lose much of the opportunity to integrate clinical and management principles into a broad understanding of how best to operate medical organizations."<sup>2</sup>

The Jefferson-Widener MD/MBA program was created in recognition of the need for physician leaders. In the 1990s, there was growing concern about both cost and quality in the U.S. healthcare system and a belief that physician managers were uniquely qualified to meet those challenges. Further, "the blurring of the distinction between management and medical care decision-making mandates that physicians assume a high level of responsibility for administration of health care institutions and systems."<sup>3</sup>

Goldfield and Nash foresaw two different types of physician leaders in the future. One type would design the interventions needed to assure cost effective care, including conducting outcomes research, crafting clinical guidelines, evaluating physician practice patterns, and advising on economic credentialing of medical staff members. The other type of physician leader would communicate those interventions to practicing physicians, serving as the boundary spanners of the future.<sup>4</sup>

Since its inception, the Jefferson-Widener MD/MBA Program has graduated 30 students. All of them have completed, or are currently in, residency programs, even if they did not intend to enter private

practice, based on the assumption that physician leaders cannot work effectively with practicing physicians without some level of clinical credibility. In addition:

- 15 of the graduates are in or have completed fellowship training.
- Residencies have been in a wide variety of specialty fields including psychiatry, anesthesiology, general surgery, neurology, preventive medicine, and pediatrics.
- The modal choice is internal medicine, frequently followed by sub-specialty fellowships.
- Some graduates also have earned Master's degrees in Public Health, Epidemiology, and Clinical Research.

Twelve of our graduates are still in residencies or fellowships. Eighteen of the graduates have completed their graduate medical education. Of the 15 graduates we were able to contact, we learned the following:

- 3 are in private practice and do not have a managerial role
- 5 are in private practice or health systems with significant leadership roles. Five are Medical Directors, one is a Chief Operating Officer, and one is Vice Chief of Staff.
- There is one graduate each working in insurance, pharmaceuticals, and community-based mental health; two working in the public sector; and two in academic positions.

For many of our graduates, leadership began during their residencies. Several were chief residents, and most worked on

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projects during residency that utilized their management education. These included, for example, a process improvement project related to tPA (tissue plasminogen activator) administration for stroke patients; research on the costs of obesity; creation of a house staff quality council and the opportunity to serve as a resident patient safety officer; advocacy through the state medical society; a quality improvement project related to outpatient urologic services; and the design and implementation of a peri-operative clinical care pathway at a major academic medical center. Three graduates have continued to work in quality improvement roles after residency.

We asked the graduates how the MBA has affected their careers. Many commented that the MBA gave them a broader view of the health care system than the one they develop during their medical education. Students often noted this difference between their fellow medical students who had not done the MBA year and themselves, once they returned to Jefferson to finish medical school. "The MBA has certainly given me a different perspective on healthcare and a knowledge that most physicians never receive, or

don't learn until later in their careers."<sup>5</sup> Several noted that the MBA had a positive impact on their residency and job-hunting interviews. "I started looking for jobs and all those who interviewed me commented about how my MBA, health policy internship at Jefferson, and QI work during residency made me stand out."<sup>6</sup>

For many, the skills developed in the MBA contributed directly to their daily management activities, whether working in the public or private sector.<sup>7</sup> "Business skills have been useful for my medical director role, understanding how large health care organizations operate, and leading quality projects."<sup>8</sup> The MBA helped me to "develop a niche of practice development and marketing to take a small practice and grow it through targeted marketing and networking."<sup>9</sup>

For many of our graduates, the MD/MBA profoundly shaped their careers. "I feel the MBA will be one of the most important factors in the trajectory of my career path. Its teachings serve as the basis of my current research projects and lend immediate credibility to my interest in pursuing involvement in my health system's quality improvement initiatives."<sup>10</sup> One graduate

working in a community-based, not-for-profit that he founded said the MBA "has been critical in shaping my career direction, and in helping me to effectively lead and manage organizations, navigate a changing healthcare landscape, and be an effective teacher of fellows and other students."<sup>11</sup>

As someone who has worked with the MD/MBA students from the program's inception, it is gratifying to see the substantial accomplishments of our graduates. It is also reassuring to note that the roles they are playing today are exactly those we saw the need for 20 years ago.

Today the need for well-trained physician leaders is even greater than it was in 1995. We foresee even more opportunities for our MD/MBA graduates as the U.S. health care system continues to evolve, with changes in organizational structure, payment mechanisms, and the process of care.

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