2005-2006 :: M.S. in Healthcare Management

1. Mission Statement:

The mission of the Master of Science in Healthcare Management is to help physicians advance their professional career by providing them with the critical business skills needed to become more effective leaders of their healthcare organizations.

2. Objectives:

- **2.1 Operating Management:** Demonstrate the ability to improve organizational operating efficiency.
 - **2.1.1 Related General Education Outcome Item(s):** 10. Foundational Knowledge in Discipline(s); 11. Advanced Knowledge in Discipline(s); 16. Independent Thought
 - 2.1.2 Related Strategic Plan Item(s): II-1 The Education of Leaders
 - 2.1.3 Related Institutional Priority Item(s):

SP-4 Tell UTD's Story Better; CPT-3 Significantly improve quality of UTD's graduate students

2.1.4 Standards and Associations:

The Association to Advance Collegiate Schools of Business International (AACSB, http://www.aacsb.edu/). In 2002 UT Dallas' School of Management (SOM) was granted full AACSB accreditation of its undergraduate, master's, and doctoral programs in both business administration and accounting.

- **2.1.5 Student Related Objective:** Yes This is a student related objective.
- **2.2 Financial Management:** Demonstrate the ability to make financial decisions that create economic value.
 - **2.2.1 Related General Education Outcome Item(s):** 2. Mathematics; 10. Foundational Knowledge in Discipline(s); 11. Advanced Knowledge in Discipline(s); 16. Independent Thought
 - 2.2.2 Related Strategic Plan Item(s): II-1 The Education of Leaders
 - 2.2.3 Related Institutional Priority Item(s):

SP-4 Tell UTD's Story Better; CPT-3 Significantly improve quality of UTD's graduate students

2.2.4 Standards and Associations:

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- 2.2.5 Student Related Objective: Yes This is a student related objective.
- **2.3 Competitive Advantage:** Learn how to create sustainable competitive advantage in a healthcare organization.
 - **2.3.1 Related General Education Outcome Item(s):** 10. Foundational Knowledge in Discipline(s); 11. Advanced Knowledge in Discipline(s); 16. Independent Thought
 - 2.3.2 Related Strategic Plan Item(s): II-1 The Education of Leaders
 - 2.3.3 Related Institutional Priority Item(s):

SP-4 Tell UTD's Story Better; CPT-3 Significantly improve quality of UTD's graduate students

2.3.4 Standards and Associations:

The Association to Advance Collegiate Schools of Business International (AACSB, http://www.aacsb.edu/). In 2002 UT Dallas' School of Management (SOM) was granted full AACSB accreditation of its undergraduate, master's, and doctoral programs in both business administration and accounting.

- **2.3.5 Student Related Objective:** Yes This is a student related objective.
- **2.4 Personal and Organizational Effectiveness:** Learn how to increase both personal and organizational effectiveness.
 - 2.4.1 Related General Education Outcome Item(s): 16. Independent Thought
 - 2.4.2 Related Strategic Plan Item(s): II-1 The Education of Leaders
 - **2.4.3 Related Institutional Priority Item(s):** CPT-3 Significantly improve quality of UTD's graduate students
 - 2.4.4 Standards and Associations:

The Association to Advance Collegiate Schools of Business International (AACSB, http://www.aacsb.edu/). In 2002 UT Dallas' School of Management (SOM) was granted full AACSB accreditation of its undergraduate, master's, and doctoral programs in both business administration and accounting.

2.4.5 Student Related Objective: Yes - This is a student related objective.

3. Measures & Findings:

3.1 Case Analysis and Presentation:

MED 6404: (i) Evaluate the efficiency of key medical service processes; (ii) identify and evaluate critical service processes that increases patient satisfaction. MED 6405: Evaluate the reasons for the success or failure of a healthcare IT project. MED 6403: Create performance metrics for a healthcare organization

3.1.1 Success Criteria:

MED 6404: (i) 80% able to able to correctly draw and interpret a process map; (ii) 80% able to correctly apply process improvement tools to a key service process. MED 6405: 80% able to correctly evaluate the reasons for an implementation success or failure. MED 6403: 80% able to correctly construct a balanced scorecard.

- 3.1.2 Related Objective(s): Operating Management
- **3.1.3 Results Related To Success Criteria:** Data will be gathered when classes are offered later in 2007.
- 3.1.4 Further Action: No

3.2 Case Analysis and Presentation:

MED 6402: (i) Apply appropriate financial methods to capital project decision-making; (ii) evaluate and interpret the financial statements of a healthcare organization. MED 6403: Apply cost analysis and budgeting tools to improve financial performance.

3.2.1 Success Criteria:

MED 6402: (i) 80% able to correctly apply and interpret discounted cash flow model; (ii) 80% able to correctly identify and interpret key liquidity, solvency and profitablity ratios. MED 6403: 80% able to correctly identify and interpret both direct and variable cost data.

- 3.2.2 Related Objective(s): Financial Management
- **3.2.3 Results Related To Success Criteria:** The teaching faculty determined the following: MED 6402 10/2006: (i) 70% of the class was able to correctly identify and estimate projected cash flows and cost of capital in determining the NPV of two discounted cash flow problems; (ii) 85% of the class was able to correctly apply DuPont analysis of key balance sheet and income statement ratios.
- 3.2.4 Achievement Level: Partially Met
- 3.2.5 Further Action: Yes

3.3 Case Analysis and Presentation:

MED 6406 (i) Conduct an external environmental analysis of a healthcare organization; (ii) create alternative competitive strategies for a healthcare organization. MED 6405: Analyze the governance and oversight requirements of a healthcare IT project.

3.3.1 Success Criteria:

MED 6406: (i) 80% able to correctly apply and interpret "five-forces" model; (ii) 80% able to construct a unique, feasible competitive strategy. MED 6405: 80% able to create suitable governance and oversight guidelines.

- **3.3.2 Related Objective(s):** Competitive Advantage
- **3.3.3 Results Related To Success Criteria:** Data will be gathered when classes are offered later in 2007.
- 3.3.4 Further Action: No

3.4 In-Class Discussion - Washington D.C.:

MED 6407: Analyze the interests and positions of key healthcare regulators and interest groups.

3.4.1 Success Criteria:

MED 6407: 80% able to correctly evaluate interests and correctly distinguish between interests and positions.

- **3.4.2 Related Objective(s):** Competitive Advantage
- **3.4.3 Results Related To Success Criteria:** Data will be gathered when class is offered later in 2007.
- 3.4.4 Further Action: No

3.5 In-Class Exercise:

MED 6401: Analyze competing interests and sources of power in a negotiation. MED 6410: (i) Demonstrate intellegent listening and authentic feedback in a coaching situation; (ii) assess an individual's readiness for change in a coaching situation.

3.5.1 Success Criteria:

MED 6401: 80% achieve a negotiating score of 8.0 or better. MED 6410: (i) 80% achieve a coaching evaluation of 8.0 or better on this criteria; (ii) 80% achieve a coaching evaluation of 8.0 or better on this criteria.

- **3.5.2 Related Objective(s):** Personal and Organizational Effectiveness
- 3.5.3 Results Related To Success Criteria:

The teaching faculty determined the following in a classroom coaching exercise: MED 6410 8/2006: (i) 90% of the class was able demonstrate intelligent listening and authentic feedback (average score 9.1); (ii) 85% of the class was able to correctly assess their partner's readiness for change (average score 8.9).

3.5.4 Achievement Level: Met

3.5.5 Further Action: No

3.6 Case Analysis and Presentation:

MED 6408: Evaluate the motivational needs and leadership styles of a successful healthcare leader.

3.6.1 Success Criteria:

80% able to compare individual motivational needs to the motivational requirements of a specific job.

3.6.2 Related Objective(s): Personal and Organizational Effectiveness

3.6.3 Results Related To Success Criteria:

Faculty evaluation of written team case analyses plus concurrent in-class discussion indicated: MED 6408 2/2007: 84% of the class was able to accurately assess the motivational requirements of three key leadership positions in a large healthcare organization and compare them to the motivational profile of the jobs. There was considerable variation, however, in the responses to degree of match, pointing to the need for changes the next time the class is taught.

3.6.4 Achievement Level: Partially Met

3.6.5 Further Action: Yes

5. Closing the Loop:

5.1 Revise teaching approach in MED 6402:

The classroom lectures on discounted cash flow analysis were too theoretical for a class that had never had any formal training in finance. The faculty concluded that next time the class is taught, the approach to this topic will will be more application oriented and begin with less complex examples.

5.1.1 Related Objective(s): Financial Management

5.1.2 Related Measure(s): Case Analysis and Presentation

5.1.3 Responsible Person: John McCracken

5.1.4 Target Date: April 2008 Date of next class.

5.1.5 Priority: High Priority

5.2 Provide more examples in MED 6408.:

Spend more time explaining personal motivational needs. Provide class with more examples and have them complete a personal motivational assessment.

5.2.1 Related Objective(s): Personal and Organizational Effectiveness

5.2.2 Related Measure(s): Case Analysis and Presentation

5.2.3 Responsible Person: John McCracken and Rob Hicks

5.2.4 Target Date: September 2008 Date of next class.

5.2.5 Priority: Medium Priority

6. Analysis:

6.1 Program/Unit Strengths:

6.1.1 Objectives/Outcomes Exceeded or Met: The program's principle strengths are that it is case-based and focuses on developing the specific skills physician executives need to assume a more effective role in the leadership of their respective healthcare organizations. Physician feedback and real-time learning assessments are used to continually update both content and instructional methods to achieve the program's stated objectives.

6.2 Program / Unit Weakneses:

6.2.1 Objectives / Outcomes Partially or Not Met: Ongoing assessment indicates that it is vitally important to continually refocus the faculty on emphasizing skill development and application. In this respect, the program is unique and different from other graduate business programs. The same lecture content that may work well in a standard MBA class may be much less effective in this program.

No one is master of both business and medicine, and it is a challenge to develop and retain faculty that are uintimidated by not being masters of all the issues that arise in the course of classroom discussion. It is also important for the business and medical school faculty to work together as a team as well as be open to learning from

the participants (several of whom have far more refereed publications than the teaching faculty, albeit in other subject matter).

Each class must be redesigned from the ground up to incorporate the lessons learned from the last time it was taught.

7. Report:

7.1 Executive Summary:

The Master of Science in Healthcare Management Executive Program is designed to meet the needs of experienced physicians who have moved—or desire to move—into a position of leadership or management responsibility in their medical organization but lack the requisite formal business training. It is jointly taught by senior business and medical faculty from the UTD School of Management and UT Southwestern Medical Center. A select group of physician executives with exceptional credentials also serve on the faculty in order to bring special expertise and experience to the program.

The major strengths of the program are that:

- it is specifically designed to meet the unique needs of physician executives
- the format is designed to accommodate physicians' schedules
- it attracts physicians from all over the US; to date, physicians from 26 states have enrolled in the program
- the physicians are able to learn from real-world healthcare case studies and share experiences with their peers.
- it is accredited by the ACCME to offer Category 1 Continuing Medical Education credit

Learning Assessment

Learning assessment in the MS in Healthcare Management Executive Track consists of five separate but related activities:

- Prior to every course, the participating management and medical faculty meet to establish both daily learning
 objectives and an overall course learning objective. They then develop a curriculum and case exercises that
 support those objectives. The last step is to decide who will teach what subject. Every class is redesigned and
 improved based on the feedback received in step 5.
- At the end of each class day, each participant fills out a continuing medical evaluation (CME) form in which they provide their comments and rate both the subject matter and the instructors for that day.
- Also at the end of each class day, a response card is distributed to each student which asks two questions: (i) What is the main idea you learned today? (ii) What is the main unanswered question(s) you leave class with today? What did you not understand
- Each day the CME forms and response cards are collected and reviewed by the teaching faculty prior to the next day's class.
- At the end of the course, the program director and the lead instructor develop written notes to inform faculty discussions the next time the class is scheduled to be taught (step 1).

Learning Goals

The program learning objectives are designed to meet the unique needs of physician leaders of healthcare organizations, primarily hospitals, health systems and physician group practices.

The program is case-based, with a strong focus on managerial skill development and application. The principal focus areas are:

- negotiation and conflict resolution
- healthcare cost and financial management
- strategic leadership of healthcare organizations
- clinical and service quality improvement
- healthcare information systems
- motivational leadership styles in healthcare

Learning Outcomes

Those physicians willing to pay the high opportunity cost of enrolling in a graduate business program tend to be highly motivated and make excellent students. They enroll because they want to develop the knowledge and skills required to be more effective leaders and managers in their healthcare organizations.

As discussed above, student assessments are for the most part based on in-class cases, exercises and problem sets, where the faculty are able to directly observe how well the participants understand and are able to apply the

knowledge and skills being taught. This process has been going on for almost nine years and is well developed.

To date only three classes have been taught under the SACS assessment methodology. Three of the five learning outcomes associated with those classes have been fully met and two have been partially met. Corrective actions for the latter two have been identified and will be implemented the next time those classes are taught.

Evidence of Program Success

The success of the program is suggested by the fact that many graduates have recommended the program to their professional colleagues who have subsequently enrolled. Moreover, many graduates have achieved professional prominence, including:

- Member, US House of Representatives
- President, Trinity Mother Frances Health System
- President, American Gastroenterological Association
- Chief Medical Officer, Seton Health System
- Senior Vice President of Medical Affairs, Christus Health System
- Board of Directors, Triad Hospitals, Inc.
- Trammel Crow Professor of Neurosurgery, UTSW
- Medical Director, Texas Dept. of Mental Health and Mental Retardation
- Chairman, Department of Surgery, Louisiana State University Health System
- Medical Director, CIGNA HealthCare
- Chairman, Center for Minimal Access Surgery, Harvard Medical School
- President, HealthTexas (Baylor Health System's physician group)
- President and Chief of Staff, Zale Lipshy University Hospital

Lessons Learned

Most experienced physician executives tend to be highly motivated and articulate, but lacking in management knowledge or skills. They are highly predisposed to applications as opposed to conceptual frameworks. It is very important to remember and remind faculty that they need to test the physician's ability to correctly apply a concept each time a new one is introduced. The doctors are able to understand and apply quite sophisticated management tools and techniques, but they must have relevance to their day-to-day experience. New knowledge simply for the sake of it is not generally well received.

Notwithstanding that the US spends far more on healthcare (both absolutely and as a share of GDP) than any other nation in the world, it still suffers from uneven quality, administrative inefficiency, skyrocketing costs and lack of access for a significant percentage of the population. Moreover, it is increasingly doubtful that incremental reforms can ameliorate these problems. Many knowledgeable observers have concluded that cataclysmic change will eventually occur.

The US's 800,000 physicians directly account for approximately 25% of the nation's \$2.0 trillion in annual healthcare expenditures, and significantly influence another 50%. In this context, there is a significant shortage of experienced physicians with the business and leadership skills required to play an effective role in the administration and reform of the US healthcare system. It is this void that the Master of Science in Healthcare Management Executive Track is addressing.

7.2 Contributions to UTD:

The Master of Science in Healthcare Management Executive Track contributes to UTD's strategic plan and priorities through (i) the education and development of leaders; and (ii) significantly improving the quality of UTD's graduate students.

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