



Generalist Physician Faculty Scholars Program

An RWJF national program

SUMMARY

To strengthen the presence of generalist physician faculty in the nation's medical schools, the *Generalist Physician Faculty Scholars Program* awarded four-year career development grants to junior faculty in family medicine, general internal medicine and general pediatrics. The scholars worked on health services research projects under the guidance of mentors from their institutions and the program's national advisory committee.

The program ran from 1992 to 2008, with the last grants made in 2004, and awarded grants to 176 scholars from 81 medical schools.

Key Results

The national program office reported the following results in reports to RWJF.

- 176 junior faculty members in family medicine, general internal medicine or general pediatrics completed the program from 1996 to 2008:
 - 43 scholars were in family medicine.
 - 81 scholars were in general internal medicine.
 - 52 scholars were in general pediatrics.
- The Generalist Physician Faculty Scholars contributed to the scholarly foundation of generalism through their research. The scholars explored many topics and published findings in journals such as *Annals of Internal Medicine*, *Archives of Internal Medicine*, *Journal of the American Medical Association*, *Journal of Family Practice*, *Journal of General Internal Medicine*, *New England Journal of Medicine* and *Pediatrics*.
- Most Generalist Physician Faculty Scholars have received major grants, including from the Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH) and Health Resources and Services Administration (HRSA).

- Most Generalist Physician Faculty Scholars became reviewers for peer-reviewed journals, joined a journal's editorial board and/or became journal editors or associate editors.
- Generalist Physician Faculty Scholars assumed new leadership roles both within and outside of their medical schools.

Program Management

Three institutions served as the national program office for the *Generalist Physician Faculty Scholars Program*: University of Texas Health Science Center at San Antonio (2001 to the program's end in 2008), University of Massachusetts Medical School (mid-1997 to 2001) and Georgetown University School of Medicine (1992 to mid-1997). The directors, in reverse chronological order, were Cynthia D. Mulrow, M.D., M.Sc., M.A.C.P., Evan Charney, M.D., and John M. Eisenberg, M.D.

Funding

Between April 1992 and April 2000, the RWJF Board of Trustees authorized the *Generalist Physician Faculty Scholars Program* up to a total of \$46.8 million through 2008.

THE PROBLEM

By 1988, the United States had too few generalist physicians—family physicians, general internists and general pediatricians—and too many specialists, according to a 1992 report of the Council on Graduate Medical Education entitled *Improving Access to Health Care Through Physician Workforce Reform: Directions for the 21st Century*. Generalist physicians are primary care physicians who:

- Provide first-contact care
- Assume responsibility for patients' health over time
- Coordinate all of the health care needs of their patients

Generalist physicians accounted for 11.4 percent of physicians in 1990, according to an April 1992 article published in *American Family Physician*.

Primary Care Becomes Costly and Scarce

The Council on Graduate Medical Education report found that "other specialists and subspecialists provide a significant amount of primary care. However, physicians who are trained, practice, and receive continuing education in the generalist disciplines provide more comprehensive and cost-effective care than nonprimary care specialists and subspecialists."

In 1992, the council recommended that at least 50 percent of residency graduates enter practice as generalist physicians.

Health Insurers and Payers Become Interested in Generalist Physicians

At about the same time, HMOs, private insurers and state officials began showing greater interest in generalist physicians. HMOs started working with academic medical centers to provide medical students with outpatient training and information about generalist career opportunities.

Health system payers (Medicare, Medicaid and health insurance companies) became increasingly concerned about access to and the high cost of health care and interested in reforming the financing systems that had historically favored specialists over generalists.

CONTEXT

RWJF has a long history of supporting programs to strengthen primary care, through three strategies:

- **Generalist Medical Education**—These efforts (described below), including the *Generalist Physician Faculty Scholars Program*, aimed to improve generalist medical education and attract physicians to generalist careers, and the *Robert Wood Johnson Clinical Scholars Program*.
- **Underserved Populations and Geographic Areas**—These efforts were intended to develop and strengthen general medical practices for underserved people and underserved areas such as inner cities and rural communities.
- **Nurses and Midlevel Practitioners in Primary Care**—These efforts trained nurses to perform primary care tasks and developed midlevel practitioners (such as nurse practitioners and physician assistants).

For more information about programs using the latter two strategies, see [Appendix 1](#).

RWJF's Interest in Supporting Generalist Medical Education

During the 1970s and 1980s, RWJF supported several efforts to increase the number of primary care physicians trained in the nation's medical schools:

- *Primary Care Residency Program* (1973 to 1981, \$10 million) trained general pediatric and internal medicine residents in primary care at nine hospitals and outpatient settings.
- *Family Practice Faculty Fellowships Program* (1976 to 1988, \$10.4 million) helped develop health services research, education and clinical skills among physicians who wanted to pursue full-time academic careers in family medicine.

- *General Pediatric Academic Development Program* (1978 to 1988, \$32.2 million) increased the capacity of academic health centers to train generalist pediatricians.

Despite these efforts, underlying economic trends and other forces continued to favor specialty training, research and care. In the early 1990s, RWJF staff developed programs, including the *Generalist Physician Faculty Scholars Program*, to improve the position and influence of generalist physicians, and thereby increase access to primary care and possibly reduce costs. These programs included:

- *Generalist Physician Initiative* (1991–2001), a \$32.7-million program, challenged 15 medical schools to increase the supply of generalist physicians they trained. The program encouraged the schools to develop institutionwide strategies in admissions, undergraduate medical education, residency training and practice support. It also urged them to develop partnerships with physicians, hospitals and community health centers. (For more information, see [Program Results](#).)
- *Generalist Provider Research Initiative* (1993–1999) supported research projects that addressed determinants of the generalist/specialist ratio and opportunities for—and constraints to—change. (For more information, see [Program Results](#).)

PROGRAM DESIGN

RWJF designed the *Generalist Physician Faculty Scholars Program* to create a cadre of generalist physicians who would influence curriculum, admissions and scholarship and serve as role models to other physicians.

The design centered on providing career development awards to outstanding junior faculty in family medicine, general medicine and general pediatrics, enabling them to improve their research capacity while maintaining their teaching and clinical capacities.

The *Generalist Physician Faculty Scholars Program* would accept up to 15 scholars each year from accredited U.S. medical schools. The dean of a medical school could nominate one physician per year, and the school could have up to three physicians in the program at any time.

Grants of up to \$240,000 (increased to \$300,000 in 2001) would be made to the sponsoring medical school to help cover scholars' salaries and research costs. Each medical school had to agree to protect 40 percent of the scholar's time from clinical and teaching responsibilities. The medical school also had to assign a mentor who would guide the scholar in conducting the research project.

As a condition of participating in the program, scholars had to:

- Commit at least 40 percent of time to the project supported by the award.
- Attend an annual program meeting and one scientific meeting per year.

Scholar Eligibility and Selection

To be considered for the program, generalist physician faculty had to:

- Be a junior faculty member (e.g., assistant professor) in family medicine, general internal medicine or general pediatrics seeking a career in academic medicine.
- Provide evidence of research skills (a research fellowship or equivalent training or experience).
- Have at least two papers published in peer-reviewed journals at the time of the application deadline.
- Demonstrate excellence as a teacher.
- Show a clinical commitment to generalism by caring for a defined set of patients.
- Be a physician who is a U.S. citizen or permanent resident.

THE PROGRAM

Beginning in April 1992, the RWJF Board of Trustees authorized the *Generalist Physician Faculty Scholars Program* for up to \$46.8 million over 16 years.

Management

National Program Offices

Three institutions served as the national program office for the *Generalist Physician Faculty Scholars Program*: University of Texas Health Science Center at San Antonio, University of Massachusetts Medical School and Georgetown University.

The University of Texas Health Science Center at San Antonio was the final national program office, with management responsibilities from 2001 to 2008, when the program closed. Cynthia Mulrow, M.D., M.Sc., M.A.C.P., a professor of internal medicine, served as director. Mulrow had been a member of the program's national advisory committee since 1995.

Karen Stamm was the deputy director for most of the period the program was housed at the University of Texas. Beth Shepard served as acting deputy director for about a year after Stamm left in 2006.

The national program office's duties included:

- Providing information about the program
- Managing the scholar application and selection process
- Monitoring the progress of the scholars while in the program

- Providing assistance to the scholars in their career development and research

Staff also provided technical assistance through:

- An annual scholars meeting planned by scholars during which scholars presented their research and discussed their projects and career in one-on-one meetings with their mentors. In 2005, the annual meeting included alumni scholars, which provided additional networking opportunities. Some 75 alumni attended, and 13 gave presentations about their post-award careers.
- Communications workshops and one-on-one coaching at four annual meetings, and assistance with obtaining media coverage of selected research by the scholars. The national program office subcontracted this work to [Burness Communications](#), a public relations firm in Bethesda, Md. (2001 to 2004).
- A management and leadership workshop for each class of scholars. RWJF awarded separate grants to the national program office for these workshops (Grant ID#s 045219, 048276 and 056857; May 2002 to January 2007).

The national program office also engaged in communications about the program:

- It developed and maintained a program Website (no longer available).
- It spearheaded the development and publication of four articles for a supplement to *Annals of Internal Medicine* on "The Future of Generalism in Medicine" (April 19, 2005). RWJF provided a grant to the American College of Physicians-American Society of Internal Medicine to support publication of the supplement (Grant ID# 050817; July to December 2005). For more information about these activities, see [Communications](#).

Prior National Program Offices

From 1997 to 2001, the University of Massachusetts Medical School managed the program. Evan Charney, M.D., served as the director. Charney, a professor and chair of the department of pediatrics, had served on the program's national advisory committee since its inception. There was no deputy director during this period.

When Charney retired from the medical school, he also stepped down as director of the *Generalist Physician Faculty Scholars Program*. At that time, RWJF moved the program to the University of Texas Health Science Center at San Antonio. Charney continued to serve on the national advisory committee.

From 1992 through mid to 1997, Georgetown University School of Medicine served as the national program office. John M. Eisenberg, M.D., professor and chairman of the department of medicine, served as director. Nancy E. Foster was the deputy director.

RWJF moved the program to the University of Massachusetts Medical School after Eisenberg left Georgetown University in 1997 to head up the federal Agency for Healthcare Research and Quality (AHRQ).

Both of these national program offices managed the application process and provided assistance to scholars, including an annual scholars meeting.

In 1999, program staff at the University of Massachusetts Medical School and the national advisory committee conducted an internal assessment of the *Generalist Physician Faculty Scholars Program*. Findings from this assessment appear in [Overall Program Results](#).

National Advisory Committee

RWJF established a national advisory committee composed of leaders in academic medicine, with a focus on family physicians, internists and pediatricians. The committee reviewed applications for the *Generalist Physician Faculty Scholars Program* and made recommendations for scholars.

Members also served as secondary mentors to scholars, along with mentors from scholars' institution. For more information about the national advisory committee members' mentoring activities, see [Participating Scholars](#), further down in this section.

Members included chair Kenneth I. Shine, M.D., executive vice chancellor for health affairs at the University of Texas System, Harold C. Sox, M.D., editor of *Annals of Internal Medicine*, and Charney.

Program Implementation

Each September, deans of medical schools could nominate one scholar from among junior faculty. Nominated scholars prepared a short research proposal to accompany the nomination. National program office staff screened nominations and narrowed the selection to about 25 semifinalists. In January, members of the national advisory committee interviewed the finalists and recommended 15. National program office staff announced the awards in April.

From 1993 to 2004, the *Generalist Physician Faculty Scholars Program* awarded four-year career development grants to 176 junior faculty in family medicine, general internal medicine and general pediatrics. In most years, the program awarded 15 career development grants (in two years it awarded 13 grants; in one year 14 grants; and in one year 16 grants).

The 81 sponsoring medical schools received up to \$300,000 for each scholar over four years; the total for most scholars was between \$240,000 and \$300,000. (In 2001, the maximum annual grant was raised from \$60,000 to \$75,000).

The national program offices faced recurring challenges in creating a large and diverse pool of nominees. For example, in the early years, the program attracted a disproportionate percentage of internists compared with family practitioners and pediatricians. In one year, only one woman received an award. Many schools were unaware of the program.

National program office staff and the national advisory committee took several steps to broaden and enlarge the pool of nominees:

- They made presentations at meetings of organizations such as the Society of Teachers of Family Medicine and the Ambulatory Pediatric Association.
- The national advisory committee simplified the nomination process for medical schools and the application process for potential scholars.
- The national program office and the national advisory committee changed the applicant scoring system, making it more objective and less cumbersome.

Participating Medical Schools

Over the course of the *Generalist Physician Faculty Scholars Program*, the 81 sponsoring medical schools had from one to 19 scholars in the program. Most schools had one to three scholars in the program. Thirteen medical schools had four or more scholars:

- 19 scholars:
 - University of California (Davis, Irvine, Los Angeles, San Diego and San Francisco)
- 7 scholars:
 - University of Michigan Medical School
- 6 scholars:
 - Boston University School of Medicine
 - Yale University School of Medicine
- 5 scholars:
 - Dartmouth Medical School
 - University of Colorado at Denver and Health Sciences Center
 - University of North Carolina at Chapel Hill
 - University of Pennsylvania School of Medicine

- University of Washington School of Medicine
- 4 scholars:
 - Case Western Reserve University School of Medicine
 - Indiana University School of Medicine
 - Oregon Health & Science University
 - University of Missouri-Columbia School of Medicine.

See [Appendix 2](#) for details about each scholar and his/her affiliation.

Participating Scholars

The scholars worked on the research projects described in their proposals under the guidance of their mentors. Each scholar had a research mentor from his/her institution (the primary mentor) and a career mentor from the national advisory committee.

The mentor from the scholar's institution was a senior researcher whose work often focused on issues similar to the scholar's area of interest. In a few cases, scholars had primary mentors who worked for a different institution. During the scholar's first year in the program, the primary mentor attended the annual scholars meeting.

The mentor from the national advisory committee served as a neutral advisor on the scholar's career and helped the scholar engage with a network of senior academic generalists, including other members of the committee. The amount of interaction varied, with the mentor spending more time with scholars who needed more help. The advisory committee mentor also reported on the scholar's progress to the national program office.

Scholars also built networks with the other scholars in the program, through annual meetings and conference calls. They sometimes had other research mentors as well, including mentors they met at the annual scholars meetings or through their national advisory committee mentor.

"We were investing in people, not research projects," said Charney. "We wanted to give them elbow room to think. You never get that in academic medicine." Charney noted that scholars could change their research projects as needed, and in some cases, move in a different direction than their original plans. "We allowed them to cultivate their growth," he said.

For examples of scholars' research studies, see [Overall Program Results](#).

Assessment Activities

There were two assessments of the *Generalist Physician Faculty Scholars Program*: an internal assessment conducted by the national program office and an external assessment commissioned by RWJF.

Program Assessment by the National Program Office

In 1998, the national program office, then at the University of Massachusetts Medical School, began a process to assess the *Generalist Physician Faculty Scholars Program* in order to demonstrate its value to RWJF. The national program office appointed an assessment committee comprised of three national advisory committee members and three scholars who had recently completed the program.

The assessment had three components:

- A survey of Generalist Physician Faculty Scholars on their career paths and accomplishments since becoming a scholar. In June 1999, members of the assessment team surveyed 81 scholars from the first five groups (those who started between 1993 and 1997). Some 72 scholars responded.

RWJF contracted with Carolyn E. Miller, in Princeton, N.J., to conduct the survey (ID# 037459).

- A literature search comparing publications of the scholars who started between 1997 and 1999 with program applicants who were interviewed but not selected during the same years. The assessment team completed this analysis in December 1999.
- Identification of seminal research contributions to general medicine made by scholars. The assessment team e-mailed scholars and national advisory committee members to solicit their input on publications that had influenced scholarship in generalism.

Sixteen scholars and national advisory committee members responded. The assessment team completed this in October 1999.

See [Assessment Findings](#) for more information.

Program Assessment Commissioned by RWJF

During the same time period, at the request of RWJF, Jonathan Showstak, Ph.D., M.P.H., from the University of California, San Francisco, conducted a qualitative assessment of the program. This assessment solicited comments, opinions and judgments from department chairs and divisions chiefs in the sponsoring medical schools regarding the impact and outcomes of the program.

Showstak interviewed by telephone department chairs or division chiefs at 28 participating medical schools. The interviews focused on the impact of the award on the scholar's career and on the development of generalism at the scholar's institution.

See [Assessment Findings](#) for more information.

OVERALL PROGRAM RESULTS

The following results are based upon reports by the national program office to RWJF and interviews with selected scholars. (Details are current as of December 2008.) The findings of the two assessments are in [Assessment Findings](#).

- **176 junior faculty in family medicine, general internal medicine or general pediatrics completed the program from 1996 to 2008:**
 - 43 scholars were in family medicine.
 - 81 scholars were in general internal medicine.
 - 52 scholars were in general pediatrics.
- **The Generalist Physician Faculty Scholars contributed to the scholarly foundation of generalism through their research.**

Scholars explored a range of topics in their research and published findings in journals such as *Annals of Internal Medicine*, *Archives of Internal Medicine*, *Journal of the American Medical Association*, *Journal of Family Practice*, *Journal of General Internal Medicine*, *New England Journal of Medicine* and *Pediatrics*.

Common Categories of Scholars' Research

- Diabetes
- End-of-life and palliative care
- Health care insurance (utilization or impact on health)
- Improving the quality of health care
- Patient-physician communication (the role of, or improving)
- Pediatric health care
- Substance abuse (alcohol or smoking)
- Use of technology in health care (for training, education or managing care)
- Violence prevention

For a sample of scholars' research, see the [Scholars' Selected Publications Bibliography](#) and [Scholars' Seminal Publications Bibliography](#)).

"The program helped promote the reputation of generalists as being accomplished researchers, which was not so when this program started. It promoted generalist researchers as being legitimate citizens at the academic research table," said Cynthia D. Mulrow, M.D., M.Sc., M.A.C.P., national program director from 2001 to 2008.

"The research of the scholars has really made a substantial contribution and more importantly, they're now better positioned to have 20- or 30-year careers of making real contributions," said Harold C. Sox, M.D., editor of *Annals of Internal Medicine* and a member of the program's national advisory committee.

Examples of Scholars' Research

- Dimitri A. Christakis, M.D., M.P.H. (1999–2004) studied the benefits of continuity of care (consistent contact with a primary care provider) for children. He published study findings in *Pediatrics* (2001 and 2002) and *Ambulatory Pediatrics* (2003 and 2004); see the [Scholars' Selected Publications Bibliography](#) for details.

As a result of this work, the University of Washington's Pediatric Care Center started routinely collecting and reporting data on continuity of care for all patients using a reminder system developed during the project. Washington State Medicaid now requires disease management vendors to target improving continuity of care for chronic disease patients.

Christakis is the George Adkins Professor of Pediatrics at the University of Washington School of Public Health and Community Medicine, Seattle. Read more about Christakis in his [profile](#).

- Joann G. Elmore, M.D., M.P.H. (1996–1999) focused on breast cancer screening and diagnosis among White and Black women. She published study findings in *Annals of Internal Medicine* (1999) and *Cancer* (1998); see the [Scholars' Selected Publications Bibliography](#) for details. Elmore is a professor of medicine and epidemiology at the University of Washington, Seattle.
- Amy M. Heneghan, M.D. (2001–2006), studied pediatricians' recognition of maternal depression and developed *A Guide for Moms and Mothers-to-be* subsequently used by local hospitals and providers.

A pediatrician and adjunct associate professor of pediatrics at the Case Western Reserve University and Rainbow Babies and Children's Hospital, Cleveland, Heneghan published her findings in *Pediatrics* and *Child: Care Health and Development*. (See the [Scholars' Selected Publications Bibliography](#) for details.)

Based on the *Pediatrics* article, in 2004, Burness Communications and Home Front Communications developed a video news release as part of RWJF's Broadcast Health Series. The release resulted in 284 stories on local television stations, reaching more than 8.5-million viewers.

- Peter Margolis, M.D., Ph.D. (1994–1998) studied the implementation and impact of Linkages to Prevention—a program he developed before becoming an scholar—on maternal and child health and development. Linkages to Prevention is a comprehensive home visiting program for low-income parents supported by interventions in physicians' offices.

The interventions helped physicians' offices enhance the preventive services they provide and enabled them to maximize Medicaid billing for those services.

In 1997, the state of North Carolina funded a home visiting demonstration program in seven counties, three of which chose Linkages for Prevention as their demonstration program.

Margolis is a professor of pediatrics at the University of Cincinnati College of Medicine and co-director of the Center for Health Care Quality Cincinnati Children's Hospital Medical Center.

- Chien-Win Tseng, M.D., M.P.H. (2004–2008) created a system to help primary care providers in Hawaii easily access cost information for drugs for diabetes and high cholesterol. Tseng developed a prescribing guide, available in hard copy and [online](#), containing formulary coverage, copayment and retail prices.

Tseng, an associate professor and associate director of research in the department of family medicine and community health at the University of Hawaii, Honolulu, also formed a network of 260 physicians to test the guide. She published two articles about the project in the *Journal of the American Medical Association (JAMA)*.

Read more about Tseng's work in her [profile](#). See the [Scholars' Selected Publications Bibliography](#) for publication details.

- **Most Generalist Physician Faculty Scholars received major grants.** Funders include the Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH) and Health Resources and Services Administration (HRSA). For example:

- Julia Arnsten, M.D., M.P.H. (2002–2006) received a \$1.4-million grant from the NIH to establish a research-intensive fellowship for physicians who have completed residency in internal medicine and want to combine drug abuse research and clinical work. Arnsten is chief of the division of general internal medicine and a professor of medicine, epidemiology and population health, and psychiatry and behavioral sciences at the Albert Einstein College of Medicine of Yeshiva University, New York.
- Tina L. Cheng, M.D., M.P.H. (1996–1999), received a \$1.2-million grant from HRSA's Maternal and Child Health Bureau to study community-based violence prevention for high risk youth.

Cheng is chief of general pediatrics and adolescent medicine and a professor of pediatrics at Johns Hopkins University, Baltimore. Read more about Cheng in her [profile](#).

- Carol M. Mangione, M.D., M.S.P.H. (1996–2001), received a \$2.6-million grant from the CDC for the multicenter study, Translating Research Into Action for Diabetes. Mangione is a professor of public health and medicine at the University of California, Los Angeles. Read more in her [profile](#).
- David O. Meltzer, M.D., Ph.D. (1998–2002), received a \$3-million grant from the CDC to direct the Chicago Center of Excellence in Health Promotion. The center develops and applies economic methods to advance knowledge about the role of economic factors in health behaviors, the value of health promotion initiatives and health disparities.

Meltzer is chief of the section of hospital medicine and an associate professor of medicine at the University of Chicago. Read more about Meltzer in his [profile](#).

- Diane R. Rittenhouse, M.D., M.P.H. (2004–2008), is evaluating progress made in creating a new system of primary care in post-Katrina New Orleans under a \$408,545 grant from the Commonwealth Fund. Rittenhouse is an assistant professor in residence at the University of California, San Francisco.
- Chien-Wen Tseng, M.D., M.S.P.H. (2004–2008), is co-investigator on a \$3.2-million grant from the CDC for the Translational Research Centers for Diabetes within Managed Care Settings. She is examining how medication costs affect treatment adherence and health outcomes, and potential ways to lower drug costs. Read more about Tseng's work in her [profile](#).

- **Many Generalist Physician Faculty Scholars became reviewers for peer-reviewed journals, joined a journal's editorial board and/or became journal editors or associate editors.** Scholars were doing this work for journals such as: *Annals of Internal Medicine*, *Journal of the American Geriatrics Society*, *Journal of the American Medical Association*, *Journal of General Internal Medicine* and *New England Journal of Medicine*. For example:

- Elena Fuentes-Afflick, M.D., M.P.H. (1998–2003), is editor of the Perspectives Section of *Ambulatory Pediatrics*. She also served on the journal's editorial board. Fuentes-Afflick is a professor of pediatrics at the University of California, San Francisco. Read more in her [profile](#).
- Thomas M. Gill, M.D. (1997–2001), is an associate editor of the *Journal of Gerontology Medical Sciences* and a member of the editorial board of the *Journal of the American Geriatrics Society*. Gill is a professor of medicine at Yale School of Medicine, New Haven, Conn. and co-director of the Yale Program on Aging and the Claude D. Pepper Older Americans Independence Center.

- Somnath Saha, M.D., M.P.H. (2003–2007), is deputy editor of the *Journal of General Internal Medicine*. Saha is an associate professor of medicine at the Oregon Health & Science University, Portland, and a staff physician at the Portland Veterans Affairs Medical Center. Read more about Saha in his [profile](#).
- Wally Smith, M.D. (1993–1997), is the North American editor of *Clinical Governance* and a deputy editor of the *Journal of General Internal Medicine*. Smith is a professor of medicine and chair of the division of quality health care at Virginia Commonwealth University, Richmond.
- **Generalist Physician Faculty Scholars assumed new leadership roles within their medical schools.** For example:
 - Karen DeSalvo, M.D., M.P.H., M.Sc. (2002–2007), established the Center for Health Equality Research at Tulane University, New Orleans. The center conducts multidisciplinary, translational research to improve the health of priority populations. DeSalvo is the C. Thorpe Ray Chair in Internal Medicine at Tulane. Read more about DeSalvo in her [profile](#).
 - Kevin Grumbuch, M.D. (1994–1999), was appointed chief of family and community medicine at San Francisco General Hospital and vice chair of the department of family and community medicine at the University of California, San Francisco.
 - Richard Saitz, M.D., M.P.H., F.A.S.A.M., F.A.C.P. (1997–2002), was appointed director of the Clinical Addiction Research and Education Unit at Boston University School of Medicine. The unit addresses clinical, education and research aspects of alcohol and other drug use and disorders. Saitz is a professor of medicine at Boston University School of Medicine.
 - Thomas N. Robinson, M.D., M.P.H. (1999–2004), was appointed director of the Center for Healthy Weight at the Lucile Packard Children's Hospital at Stanford University, Palo Alto, Calif. The center provides children, their families and their communities with education, support and treatment services to help them achieve and maintain a healthy weight. Robinson is the Irvin Schulman, M.D. Endowed Professor in Child Health at Stanford University.
- **Generalist Physician Faculty Scholars assumed leadership positions outside of their medical schools and were involved in other activities to strengthen generalism.** For example:
 - For his research on measuring the supply and practices of primary care physicians and other physician workforce issues, Kevin L. Grumbuch, M.D. (1994–1999), was appointed to the Physician Workforce Advisory Group of the Association of American Medical Colleges and a U.S. delegate to the International Medical Workforce Conference.

Marshall H. Chin, M.D., M.P.H. (2000–2005), led *Finding Answers: Disparities Research for Change*, a national initiative RWJF funded in 2005 to eliminate racial and ethnic disparities in health care. During this three-year initiative, Chin and colleagues awarded and managed \$5 million in research grants to organizations that implemented and evaluated interventions aimed at reducing disparities. Chin is an associate professor of medicine at the University of Chicago.

- Karen DeSalvo, M.D., M.P.H., M.Sc. (2002–2007), was active in planning health activities post-Hurricane Katrina. She was a member of the core team for the U.S. Public Health Service Framework for a Healthier New Orleans and the Louisiana Recovery Authority. She also served on the Mayor's Bring New Orleans Back Commission. Read more about DeSalvo in her [profile](#).
- Elena Fuentes-Afflick, M.D., M.P.H. (1998–2003), is a member of the national advisory committee for the *Robert Wood Johnson Clinical Scholars Program*. She also served as president of the Society for Pediatric Research in 2008. Read more about Fuentes-Afflick in her [profile](#).
- David O. Meltzer, M.D., Ph.D. (1998–2002), serves on the federal Department of Health and Human Services Secretary's Advisory Committee on Healthy People 2020, which aims to establish health objectives for Americans. Read more about Meltzer in his [profile](#).
- Joseph W. Thompson, M.D., M.P.H. (2000–2005), is the director of RWJF's BMI Database Project that is part of its program in Arkansas, *Information for Action: School Policies to Prevent Childhood Obesity* (see [Program Results](#) for more information). He also directs the [Robert Wood Johnson Foundation Center to Prevent Childhood Obesity](#) at the University of Arkansas for Medical Sciences, Little Rock.

The center, authorized by RWJF in 2008 for up to \$20 million, will be the nation's "go-to" resource for best policies and practices for preventing childhood obesity. It will:

- Support community, state, regional and national action programs
- Provide resources, such as hands-on technical assistance and information
- Align RWJF programs with other prominent initiatives

Thompson is an associate professor of pediatrics at the University of Arkansas for Medical Sciences, and director of the Arkansas Center for Health Improvement. The center is a partnership between the university and the Arkansas Department of Health that works with three community health care networks in rural Arkansas to address rural health care issues on a broad scale.

He also serves as the state's Surgeon General.

- **Generalist Physician Faculty Scholars have become members of study sections for NIH, AHRQ and the Veterans Administration.** Members of study sections are peer reviewers who evaluate research grant applications.

Selection for study sections is a rigorous process. Candidates must be recognized authorities in their field and be a principal investigator on a research project comparable to those under review. Generalist Physician Faculty Scholars who are members of study sections include:

- Julia Arnsten, M.D., M.P.H. (2002–2006), has been a permanent member of the NIH's Behavioral and Social Consequences of HIV/AIDS Study Section since 2003.
- Marshall Chin, M.D. (2000–2005), is a member of the AHRQ's Health Care Quality and Effectiveness Research Study Section.
- Dimitri A. Christakis, M.D., M.P.H. (2000–2004), is a member of the NIH's Health Services Organization and Delivery study section. Read more about Christakis in his [profile](#).
- Somnath Saha, M.D., M.P.H. (2003–2007), is a member of the NIH Center for Scientific Review's Health Services Outcomes and Delivery Study Section. Read more about Saha in his [profile](#).

- **Generalist Physician Faculty Scholars received awards for their research.** For example:

- Thomas M. Gill, M.D. (1997–2001), received a MERIT Award from the NIH. The award provides up to 10 years of support for his ongoing study, "Epidemiology of Disability and Recovery in Older Persons." Gill has published more than 20 articles about this study.
- Erik J. Lindbloom, M.D., M.S.P.H. (2002–2006), received the University of Missouri-Columbia's Distinguished Research Award. Lindbloom is an associate professor at the University of Missouri-Columbia.
- Richard Saitz, M.D., M.P.H. (1997–2002), received the Best Abstract Award from the Association for Medical Education and Research on Substance Abuse for his abstract, "Providing Physicians with Patient-Specific Information Increased the Likelihood of Alcohol Counseling and Decreased Patient Drinking."
- Michael Shlipak, M.D., M.P.H. (2003–2007), received the Paul Beeson Physician Faculty Scholars Award from the American Federation for Aging Research and an Established Investigator Award from the American Heart Association. Shlipak is an associate professor in residence at the University of California, San Francisco.

- **Generalist Physician Faculty Scholars mentored later scholars and other generalist faculty physicians.** For example:
 - Julia Arnsten, M.D., M.P.H. (2002–2006), trained physicians as clinical researchers to advance biomedical research in New York's academic health centers. Arnsten was the principal sponsor and mentor of the New York State Council on Graduate Medical Education's Empire Clinical Research Program.
 - Dimitri A. Christakis M.D., M.P.H. (2000–2004), served as associate director of the *Robert Wood Johnson Foundation Clinical Scholars Program* at the University of Washington. In this role, he mentored scholars, and received a mentorship award from the scholars in 1999 and 2000. Read more about Christakis in his [profile](#).
 - Amy M. Heneghan, M.D. (2001–2006), was appointed to the national advisory committee of the *Robert Wood Johnson Physician Faculty Scholars Program*. In this role, she is mentoring scholars participating in that program.
 - Carol M. Mangione, M.D., M.S.P.H. (1996–2001), received the Society of General Internal Medicine's 2005 Mid-Career Research Mentorship Award, for her mentoring of junior investigators. Read more about Mangione in her [profile](#).
- **The *Generalist Physician Faculty Scholars Program* strengthened the status and presence of academic generalists in academic medicine.** Members of the national advisory committee and one scholar made the following comments about the program's impact:
 - "The leaders of academic generalism today are people who were in this program. We can't take all of the credit; we picked stars. But the program was a factor," said Evan Charney, M.D., former national program director.
 - "The fellows who have graduated from this program are going to be leaders in health care, health research and health policy for the next generation. They're going to be the mentors to the generation that comes after that," said Kenneth I. Shine, M.D., national advisory committee chair.
 - "The program was instrumental in fostering the young academic generalist leaders of this generation. Many of the scholars have gone on to be in positions of leadership at their institutions or nationally," said Cynthia Mulrow, M.D., M.Sc., M.A.C.P., national program director from 2001 to 2008.
 - "This program is not about furthering a single person's career. It's really taking a group of people who are passionate and helping them become leaders and change health policy," added Chien-Wen Tseng, M.D., M.P.H., Generalist Physician Faculty Scholar.
- **The *Generalist Physician Faculty Scholars Program* brought together faculty in family medicine, general internal medicine and pediatricians.** These generalists

rarely have the opportunity to work together. Members of the national advisory committee made the following comments about this:

- "By the nature of this program, it's brought general pediatricians, family physicians and general internists together to talk about issues that cut across the disciplines and departments and to look at research issues that are relevant to generalism and the health of our patients as well as the public," said Eliseo J. Perez-Stable, M.D., a professor of medicine at the University of California, San Francisco. "That's pretty unique and had not been done before."
- "Family practitioners, internists and pediatricians who are in the program have come to see that they really share goals, attitudes and approaches to health care, often more with each other than with colleagues in their own disciplines," said Charney.

"It is very exciting to hear a family practitioner present his or her work and hear it viewed by the internists and pediatricians. They've told me that they gain insights into their work that they wouldn't otherwise from people in their own discipline."

- "The generalist program is the only program in which generalists from general pediatrics, general internal medicine and family medicine have had an opportunity to interact and to learn together. This has produced some very productive collaborations. That collaboration is very important now and will be even more important in the future," said Shine. (In RWJF Clinical Scholars, generalists can sometimes collaborate.)"

ASSESSMENT FINDINGS

The assessments cover the *Generalist Physician Faculty Scholars Program* during the its first six years, 1993 to 1999. The program continued through 2008. Findings from the assessments were provided in reports to RWJF.

Findings from the National Program Office's Assessment

The national program office's assessment team reported the following findings from the survey.

Career Paths and Accomplishments Since Receiving the Grant

- **Two-thirds of the scholars said they felt supported by their institutions.**
- **Two-thirds of the scholars believed the grant led to a more favorable attitude toward generalism in their medical school.**
- **Some 61 percent of the scholars increased the number of articles published in peer-reviewed journals.**

- **Some 90 percent of the scholars became reviewers for peer-reviewed journals, and 28 percent joined a peer-reviewed journal's editorial board.**
- **More than three-quarters (78 percent) of the scholars were principal investigators for a major grant.** More than one-quarter were selected as members of study sections for the National Institutes of Health or the Veteran's Administration.
- **Some 61 percent of the scholars assumed a new leadership role in their institution and 59 percent were promoted.**
- **Nearly 40 percent of the scholars collaborated on scholarly writing, grants and curriculum.**
- **Less than 25 percent of the scholars gave up any professional activity (e.g., teaching, clinical time or administration), and 75 percent added a new professional activity.**

The assessment also found significant differences based on gender and discipline.

Gender Differences

- **Women were less likely than men to expect to become chair of a department or chief of a division.**
- **Women were more likely than men to see the possibility of leaving academia and to report improvement in their institution's attitude toward generalism.**
- **Women had fewer peer-reviewed publications than men.**
- **Women were less likely than men to have:**
 - Joined a study section
 - Become a journal reviewer
 - Been promoted
 - Assumed a new leadership role
 - Been a principal investigator on a major grant
 - Collaborated with other scholars

Although not part of the evaluation report, Charney noted that female faculty members were not as successful as their male counterparts due to reasons unrelated to the program. For example, bias against women in the field and the disproportionate responsibility women took for their families at that time impacted their success.

"The people in our program were subject to that like any candidates," said Charney. "There was no program-specific reason for the gender differences."

Discipline Differences

- **Family medicine faculty members were more likely to become a department chair than faculty in general internal medicine or general pediatrics.** They also reported more publications and were more likely to have been promoted.
- **Family medicine faculty members were less likely than faculty in general internal medicine or general pediatrics to have joined a study section.**
- **General pediatrics faculty members were less likely than their colleagues to have assumed leadership roles related to journals but more likely to have assumed a new leadership role in their institution.**
- **There was a nearly unanimous sense that the *Generalist Physician Faculty Scholars Program* will have a long-lasting positive impact on the scholars' careers.** The scholars noted the most important benefits of the program include:
 - Protected time/funding security to continue and expand research
 - Networking with peers and mentors
 - Prestige and recognition

Findings from the Literature Search

Publications

The search involved publications of scholars who had completed the program as of 1999 and finalists who were not chosen who would have entered the program in the same years as these scholars.

- **The average number of MEDLINE citations was 18.3 for the scholars, compared with 11.5 citations for the finalists.**
- **For first-authored articles, the average number of MEDLINE citations was 9.0 for the scholars and 6.1 for the finalists.**
- **There was no significant difference between the two groups on these criteria prior to selection or the interview.** This suggests that the program led to increased research productivity.

Seminal Research Contributions to General Medicine

- **Scholars and national advisory committee members identified 34 articles and one book by Generalist Physician Faculty Scholars as seminal contributions.**

The articles covered topics ranging from caring for specific populations (e.g., low-income patients and homeless patients) to specific diseases (e.g., cancer and obesity) to patient-physician communication and preventive services. They were published in journals such as:

- Archives of Internal Medicine
- Health Services Research
- Journal of Family Practice
- Journal of General Internal Medicine
- New England Journal of Medicine

For complete citations, see the [Scholar's Seminal Publications Bibliography](#).

Findings from the RWJF-Commissioned Assessment

Jonathan Showstak, Ph.D., M.P.H., reported the following findings from the qualitative study of the impact and outcomes of the *Generalist Physician Faculty Scholars Program* to RWJF (*The Career and Institutional Impact of the Generalist Physician Faculty Scholars Program*, February 2000).

Impact on the Scholar's Career

- **The chairs were, in general, very positive about the impact of the *Generalist Physician Faculty Scholars Program* on the scholars' careers**, although few identified specific examples of an accomplishment that might not have happened without the scholars' participation in the program.

Most comments related to the need for this type of funding since departments within medical schools did not have funding for faculty development activities.

Impact on the Scholar's Department and Medical School

- **The chairs usually described the impact of the program on the scholar's department and medical school as positive, although in many cases, they reported little or no perceivable impact.** Many said that the grant provided legitimacy to both the scholar and the department.

Several chairs indicated that the program's policy of restricting applicants to one per institution per year posed problems for the school. These chairs said they had to create a mechanism to choose among worthy candidates, putting the institution in the position of creating its own selection criteria, beyond the program's criteria. They also indicated that this limitation often pitted departments against each other.

Impact on the Medical School

- **There was a noticeable difference in the comments about the impact on the medical school depending on the size and research focus of the institution:**
 - The most positive comments were from chairs at institutions that were more focused on clinical care and teaching and less focused on research.

- Chairs from medical schools that were larger and received more external funding were generally positive about the program but were less able to identify any impact on either their department/division or their medical school.

Communications

The national program office developed a Website (no longer available) for the program and facilitated publication of a supplement to *Annals of Internal Medicine*.

The Website includes information about the program and a database and profiles of scholars and members of the national advisory committee. While the program was active, the Website also had an applications section and a section that promoted the accomplishments of scholars and national advisory committee members.

Annals of Internal Medicine published the [supplement](#) on "The Future of Generalism in Medicine," with four articles written by Generalist Physician Faculty Scholars, on April 19, 2005. The articles are:

- "The Future of Generalism in Medicine," by Eric B. Larson, M.D., M.P.H., Kevin Grumbach, M.D., and Kenneth B. Roberts, M.D.
- "The Essential Role of Generalists in Health Care Systems," by Robert L. Ferrer, M.D., M.P.H., Simon J. Hambridge, M.D., Ph.D., and Rose C. Maly, M.D., M.S.P.H.
- "Coordinating Care Across Diseases, Settings and Clinicians: a Key Role for the Generalist in Practice," by Christopher J. Stille, M.D., M.P.H., Anthony Jerant, M.D., Douglas Bell, M.D., Ph.D., David Meltzer, M.D., Ph.D., and Joann Elmore, M.D., M.P.H.
- "Processes for Effective Communication in Primary Care," by Saul J. Weiner, M.D., Beth Barnet, M.D., Tina L. Cheng, M.D., and Timothy P. Daaleman, D.O.

The national program office mailed reprints of the supplement to 600 scholars, alumni, national advisory committee members and opinion leaders.

LESSONS LEARNED

1. **Facilitate networking among program participants.** The national program office at the University of Texas Health Science Center at San Antonio facilitated networking among scholars nationwide through a Website and listserv, monthly conference calls and activities at annual meetings. This gave scholars multiple opportunities using multiple formats to interact and keep in touch with each other. "They thought that those opportunities were one of the most valuable aspects of the program," said Cynthia D. Mulrow, M.D., M.Sc., M.A.C.P., national program director.
2. **Expect grants management procedures of medical schools to vary widely.** The differing grants management procedures of the scholars' medical schools made it

challenging for the scholars, the national program office and RWJF to reconcile budgets for revisions, extensions and transfers. (National Program Director/Mulrow)

AFTERWARD

RWJF launched *Robert Wood Johnson Foundation Physician Faculty Scholars* as the successor to the *Generalist Physician Faculty Scholars Program* in February 2006. *Physician Faculty Scholars* expanded the physicians eligible from faculty in family medicine, general internal medicine and general pediatrics to faculty in any tenure-track medical discipline.

RWJF included all tenure-track medical school faculty in the new program in order to have a wider pool of candidates to choose from and to not divert too many Generalist Physician Faculty Scholars into focusing on research.

During the *Generalist Physician Faculty Scholars Program*, RWJF and national program office staff found that there were not as many generalist physician faculty eligible for and interested in the program as expected. Thus, trying to strengthen the field through a program that focused on research ended up diverting a considerable percentage of these faculty members into careers that focused on research rather than clinical care and teaching.

Like the *Generalist Physician Faculty Scholars Program*, *Physician Faculty Scholars* provides junior faculty with mentoring, protected time, networking and the opportunity to gain research experience. It is designed to help outstanding junior faculty in medical schools, particularly those interested in health policy research, epidemiology, health services research or community-based research, develop their careers in academic medicine.

The national program office is at Stanford University. Iris Litt, M.D., a member of the national advisory committee for the *Generalist Physician Faculty Scholars Program*, and former program director of *RWJF's Clinical Scholars Program*, is the program director. The national program office also started an alumni network and sponsored an annual meeting in 2007 for scholars from both faculty scholars programs (ID# 061490—August 2007–July 2008).

Each year, *RWJF Physician Faculty Scholars* awards up to 15 three-year grants of up to \$300,000 each. The program also selects up to five physicians annually as Veterans Affairs Faculty Scholars.

Medical schools and Veterans Affairs medical centers can nominate junior faculty for the program, and may have up to two physicians in different disciplines in the program at any one time. For scholars from medical schools, RWJF makes grants to sponsoring

institutions to help cover the scholars' salary and research costs. Veterans Affairs Faculty Scholars are funded as part of their Veterans Affairs Career Development Awards.

For more information about requirements for *RWJF Physician Faculty Scholars*, see [Becoming a Scholar](#) on the program's Website.

Physician Faculty Scholars made its first awards in 2006. As of fall 2008, the program had 45 scholars, with awards totaling \$13,384,334.

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APPENDIX 1

RWJF Strategy Related to Strengthening Primary Care

Programs Related to Underserved Populations and Geographic Areas

- *Rural Practice Project* (1975–1984, \$5.7 million)
- *Health Care for the Homeless* (1983–1990, \$18 million)
- *Practice Sights: State Primary Care Development Strategies* (1991–1999, \$11.5 million; see [Program Results](#))
- *Southern Rural Access Program* (1997–2006, \$35 million; see [Program Results](#))

Programs Related to Nurses and Midlevel Practitioners in Primary Care

- *Nurse Faculty Fellowship Program* (1975–1982, \$4.4 million)
- *Primary Care Training for Emergency Nurses* (1976–1982, \$1.7 million)
- *Nursing Services Manpower Development Program* (1989–1998, \$3.2 million)
- *Partnerships for Training: Regional Education Systems for Nurse Practitioners, Certified Nurse-Midwives and Physician Assistants* (1994–2004, \$4.1 million; see [Program Results](#))

APPENDIX 2

List of Generalist Physician Faculty Scholars

This list is organized by the year the scholar received his or her grant; the medical school or organization listed is the one at which the scholar was located when the grant funding ended.

1993

- Andrew B. Bindman, M.D. (Internal Medicine), University of California, San Francisco, School of Medicine
- Daron G. Ferris, M.D. (Family Practice), Medical College of Georgia
- Michael J. Fine, M.D. (Internal Medicine), University of Pittsburgh School of Medicine
- Francesca Gany, M.D., M.S. (Internal Medicine), New York University School of Medicine

- Laura C. Hanson, M.D. (Internal Medicine), University of North Carolina at Chapel Hill School of Medicine
- Mark Helfand, M.D. (Internal Medicine), Oregon Health & Science University
- Debra K. Litzelman, M.D. (Internal Medicine), Regenstrief Institute for Health Care at Indiana University School of Medicine
- Lorna Lynn, M.D. (Internal Medicine), American Board of Internal Medicine
- Thomas S. Nesbitt, M.D., M.P.H. (Family Practice), University of California, Davis, School of Medicine
- Jeffrey H. Samet, M.D., M.P.H., M.A. (Internal Medicine), Boston University School of Medicine
- James D. Sargent, M.D. (Pediatrics), Dartmouth Medical School
- Robert Sege, M.D., Ph.D. (Pediatrics), Tufts University School of Medicine
- Wally R. Smith, M.D. (Internal Medicine), Virginia Commonwealth University School of Medicine
- Kevin B. Weiss, M.D., M.P.H., M.S. (Internal Medicine), George Washington University Medical Center
- John W. Williams, M.D., M.H.S. (Internal Medicine), Duke University School of Medicine

1994

- Robert A. Aronowitz, M.D. (Internal Medicine), University of Pennsylvania School of Medicine
- John Z. Ayanian, M.D., M.P.P. (Internal Medicine), Harvard Medical School
- Joann G. Elmore, M.D. (Internal Medicine), University of Washington School of Medicine
- Ronald M. Epstein, M.D. (Family Practice), University of Rochester School of Medicine and Dentistry
- Crayton A. Fargason, M.D., M.M. (Pediatrics), University of Alabama School of Medicine (Birmingham)
- Carlos F. Gomez, M.D., Ph.D. (Internal Medicine), University of Virginia School of Medicine
- Michael R. Grey, M.D. (Internal Medicine), University of Connecticut School of Medicine

- Kevin Grumbach, M.D. (Family Practice), University of California, San Francisco, School of Medicine
- William J. Hueston, M.D. (Family Practice), Medical University of South Carolina
- Peter Margolis, M.D., Ph.D. (Pediatrics), University of North Carolina at Chapel Hill School of Medicine
- William P. Moran, M.D. (Internal Medicine), Bowman Gray School of Medicine
- Mark D. Schwartz, M.D. (Internal Medicine), New York University Medical Center
- Kurt C. Stange, M.D., Ph.D. (Family Practice), Case Western Reserve University School of Medicine
- Daniel C. Vinson, M.D. (Family Practice), University of Missouri-Columbia School of Medicine
- Robert C. Whitaker, M.D., M.P.H. (Pediatrics), University of Cincinnati College of Medicine

1995

- William G. Adams, M.D. (Pediatrics), Boston University School of Medicine
- Ann Bates, M.D. (Pediatrics), Indiana University School of Medicine
- Annette Bernard, M.D. (Internal Medicine), Emory University School of Medicine
- Sharon A. Dobie, M.D. (Family Practice), University of Washington School of Medicine
- Lillian Gelberg, M.D. (Family Practice), University of California, Los Angeles, David Geffen School of Medicine
- Diane M. Harper, M.D., M.P.H., M.S. (Family Practice), Dartmouth Medical School
- Carlos R. Jaen, M.D., Ph.D. (Family Practice), University of Texas Health Science Center at San Antonio
- Steven J. Katz, M.D., M.P.H. (Internal Medicine), University of Michigan Medical School
- Jonathan D. Klein, M.D. (Pediatrics), University of Rochester School of Medicine and Dentistry
- Carol A. Mancuso, M.D. (Internal Medicine), Weill Cornell Medical College
- David R. Mehr, M.D., M.S. (Internal Medicine), University of Missouri-Columbia School of Medicine

- Gregg Meyer, M.D., M.Sc. (Internal Medicine), Uniform Services University of the Health Sciences
- Eugene Z. Oddone, M.D. (Internal Medicine), Duke University School of Medicine
- Richard Roetzheim, M.D. (Family Practice), University of South Florida College of Medicine
- Robin J. Womeodu, M.D. (Internal Medicine), University of Tennessee Health Science Center College of Medicine (Memphis)

1996

- Jeralyn A. Bernier, M.D. (Pediatrics), Georgetown University Medical Center
- Carrie L. Byington, M.D. (Pediatrics), University of Utah School of Medicine
- Tina L. Cheng, M.D., M.P.H. (Pediatrics), Johns Hopkins University School of Medicine
- Matthew W. Gillman, M.D. (Internal Medicine), Harvard Medical School
- Jorge E. Gomez, M.D. (Pediatrics), University of Texas Health Science Center at San Antonio
- Carol M. Mangione, M.D., M.S.P.H. (Internal Medicine), University of California, Los Angeles, David Geffen School of Medicine
- Howard Markel, M.D., Ph.D. (Pediatrics), University of Michigan Medical School
- Mary M. McGrae McDermott, M.D. (Internal Medicine), Northwestern University Feinberg School of Medicine
- Malathi Srinivasan, M.D. (Internal Medicine), Weill Cornell Medical College
- Richard N. Shiffman, M.D., M.C.I.S. (Pediatrics), Yale University School of Medicine
- Valerie E. Stone, M.D., M.P.H. (Internal Medicine), Harvard Medical School
- Robert Williams, M.D. (Family Practice), University of New Mexico Health Science Center

1997

- Jasjit S. Ahluwalia, M.D., M.P.H., M.S. (Internal Medicine), University of Minnesota Medical School
- Beth Barnett, M.D. (Family Practice), University of Maryland School of Medicine (Baltimore)

- Joseph A. Carrese, M.D., M.P.H. (Internal Medicine), Johns Hopkins University School of Medicine
- Joseph Conigliaro, M.D., M.P.H. (Internal Medicine), University of Kentucky College of Medicine
- Timothy P. Daaleman, D.O., M.P.H. (Family Practice), University of North Carolina at Chapel Hill School of Medicine
- H. Hughes Evans, M.D., Ph.D. (Pediatrics), University of Alabama School of Medicine (Birmingham)
- Thomas M. Gill, M.D. (Internal Medicine), Yale University School of Medicine
- Barron H. Lerner, M.D., Ph.D. (Internal Medicine), Columbia University College of Physicians and Surgeons
- Linda J Romero, M.D. (Family Practice), University of New Mexico Health Science Center
- Richard Saitz, M.D. (Internal Medicine), Boston University School of Medicine
- James A. Tulskey, M.D. (Internal Medicine), Duke University School of Medicine
- Peter A. Ubel, M.D. (Internal Medicine), University of Michigan Medical School
- Patrick M. Vivier, M.D., Ph.D. (Pediatrics), Brown University School of Medicine
- John Westfall, M.D. (Family Practice), University of Colorado Denver Health Sciences Center
- Ira B. Wilson, M.D. (Internal Medicine), New England Medical Center

1998

- Mary E. Aitken, M.D. (Pediatrics), University of Arkansas for Medical Sciences
- Julia H. Arnsten, M.D., M.P.H. (Internal Medicine), Albert Einstein College of Medicine
- Jeffrey P. Brosco, M.D., Ph.D. (Pediatrics), University of Miami Leonard M. Miller School of Medicine
- Nananda F. Col, M.D., M.P.P., M.P.H. (Internal Medicine), Brown University School of Medicine
- Stephen M. Downs, M.D., M.S. (Pediatrics), Indiana University School of Medicine
- Mark H. Ebell, M.D., M.S. (Family Practice), Michigan State University College of Human Medicine

- Elena Fuentes-Afflick, M.D., M.P.H. (Pediatrics), University of California, San Francisco, School of Medicine
- Melanie A. Gold, D.O. (Pediatrics), University of Pittsburgh School of Medicine
- Amy C. Justice, M.D., Ph.D. (Internal Medicine), Yale University School of Medicine
- David A. Katz, M.D., M.Sc. (Internal Medicine), University of Wisconsin School of Medicine and Public Health (Madison)
- David Meltzer, M.D., Ph.D. (Internal Medicine), University of Chicago Pritzker School of Medicine
- Steven D. Pearson, M.D. (Internal Medicine), Harvard Medical School
- Joseph B. Stanford, M.D., M.S.P.H. (Family Practice), University of Utah School of Medicine
- Mark W. Yeazel, M.D., Ph.D. (Family Practice), University of Minnesota Medical School

1999

- Iris Borowsky, M.D., Ph.D. (Pediatrics), University of Minnesota Medical School
- Olveen Carrasquillo, M.D., M.P.H. (Internal Medicine), Columbia University College of Physicians and Surgeons
- Dimitri A Christakis, M.D., M.P.H. (Pediatrics), University of Washington School of Medicine
- William O. Cooper, M.D., M.P.H. (Pediatrics), Vanderbilt University School of Medicine
- Donna D'Alessandro, M.D. (Pediatrics), University of Iowa Roy J. and Lucille A. Carver College of Medicine
- Carol A. Ford, M.D. (Pediatrics), University of North Carolina at Chapel Hill School of Medicine
- Susan D. Goold Dorr, M.D., M.H.S.A., M.A. (Internal Medicine), University of Michigan Medical School
- Jane L. Holl, M.D., M.P.H. (Pediatrics), Northwestern University Medical School
- Rose C. Maly, M.D., M.S.P.H. (Family Practice), University of California, Los Angeles, David Geffen School of Medicine
- Joshua P. Metlay, M.D., Ph.D. (Internal Medicine), University of Pennsylvania School of Medicine

- Kevin C. Oeffinger, M.D. (Family Practice), Memorial Sloan-Kettering Cancer Center
- Thomas N. Robinson, M.D. (Pediatrics), Stanford University School of Medicine
- Stephen F. Rothemich, M.D. (Family Practice), Virginia Commonwealth School of Medicine
- Eric J. Thomas, M.D. (Internal Medicine), University of Texas Medical School at Houston
- John M. Weicha, M.D. (Internal Medicine), Boston University School of Medicine

2000

- Shari Barkin, M.D. (Pediatrics), Vanderbilt University School of Medicine
- William T. Basco, M.D. (Pediatrics), Medical University of South Carolina
- Katharine Bradley, M.D., M.P.H. (Internal Medicine), University of Washington School of Medicine
- Maria T. Britto, M.D., M.P.H. (Pediatrics), University of Cincinnati College of Medicine
- Marshall H. Chin, M.D., M.P.H. (Internal Medicine), University of Chicago Pritzker School of Medicine
- Michael D. Fetters, M.D., M.P.H., M.A. (Family Practice), University of Michigan Medical School
- Peter D. Friedmann, M.D., M.P.H. (Internal Medicine), Brown University School of Medicine
- Ethan A. Halm, M.D., M.P.H. (Internal Medicine), Mount Sinai School of Medicine
- Elaine M. Hylek, M.D. (Internal Medicine), Boston University School of Medicine
- Anthony F. Jerant, M.D. (Family Practice), University of California, Davis, School of Medicine
- Jean S. Kutner, M.D., M.S.P.H. (Internal Medicine), University of Colorado Health Sciences Center
- Rita Mangione-Smith, M.D. (Pediatrics), University of Washington School of Medicine
- Elizabeth Morrison, M.D., M.S.Ed. (Family Practice), University of California, Irvine, School of Medicine
- Cary Reid, M.D. (Internal Medicine), Weill Cornell Medical College

- Joseph W. Thompson, M.D., M.P.H. (Pediatrics), University of Arkansas for Medical Sciences College of Medicine
- Glenda R. Westmoreland, M.D., M.P.H. (Internal Medicine), Indiana University School of Medicine

2001

- Katrina Armstrong, M.D. (Internal Medicine), University of Pennsylvania School of Medicine
- R. Graham Barr, M.D., Dr.P.H., C.M. (Internal Medicine), Columbia University College of Physicians and Surgeons
- Tom A. Elasy, M.D., M.P.H. (Internal Medicine), Vanderbilt University School of Medicine
- David A. Fiellin, M.D. (Internal Medicine), Yale University School of Medicine
- Glenn Flores, M.D. (Pediatrics), Medical College of Wisconsin
- Allen L. Gifford, M.D. (Internal Medicine), University of California, San Diego, School of Medicine
- Amy M. Heneghan, M.D. (Pediatrics), Case Western Reserve University School of Medicine
- Mary Ann Limbos, M.D., M.P.H. (Pediatrics), Keck School of Medicine of the University of Southern California
- M. Diane McKee, M.D., M.S. (Family Practice), Albert Einstein College of Medicine
- Rebecca A. Meriwether, M.D., M.P.H. (Family Practice), Tulane University School of Medicine
- Christopher J. Stille, M.D., M.P.H. (Pediatrics), University of Massachusetts Medical School
- Saul J. Weiner, M.D. (Pediatrics), University of Illinois College of Medicine (Chicago)
- Mary A. Whooley, M.D. (Internal Medicine), University of California, San Francisco, School of Medicine
- Therese M. Zink, M.D., M.P.H. (Family Practice), University of Minnesota Medical School

2002

- Douglas Bell, M.D., Ph.D. (Internal Medicine), University of California, Los Angeles, David Geffen School of Medicine

- Sean David, M.D. (Family Practice), Brown University School of Medicine
- Matthew Davis, M.D., M.A.P.P. (Pediatrics), University of Michigan Medical School
- Karen DeSalvo, M.D., M.P.H., M.Sc. (Internal Medicine), Tulane University School of Medicine
- Robert Ferrer, M.D., M.P.H. (Family Practice), University of Texas Health Science Center at San Antonio
- Kim Griswold, M.D., M.P.H. (Family Practice), University at Buffalo, State University of New York School of Medicine & Biomedical Sciences
- Jill S. Halterman, M.D., M.P.H. (Pediatrics), University of Rochester School of Medicine and Dentistry
- Lauris C. Kaldjian, M.D., Ph.D. (Internal Medicine), University of Iowa Roy J. and Lucille A. Carver College of Medicine
- Valerie King, M.D., M.P.H. (Family Practice), Oregon Health & Science University School of Medicine
- Benjamin H. Levi, M.D., Ph.D. (Pediatrics), Pennsylvania State University College of Medicine
- Jane Liebschutz, M.D., M.P.H. (Internal Medicine), Boston University School of Medicine
- Erik J. Lindbloom, M.D., M.S.P.H. (Family Practice), University of Missouri-Columbia School of Medicine
- Laura A. Petersen, M.D., M.P.H. (Internal Medicine), Baylor College of Medicine
- Walton O. Schalick, III, M.D., Ph.D. (Pediatrics), Washington University in St. Louis School of Medicine
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