

Health Equity Policy and Primary Care Fellowship

Duke Family Medicine and Community Health and Duke-Margolis Center for Health Policy

 **Duke Family Medicine & Community Health**

Duke University School of Medicine

Duke | **MARGOLIS CENTER**
for Health Policy

Structural racism and the unequal distribution of opportunities and resources routinely create systemic barriers to health care for marginalized and minoritized populations, including individuals based on their gender, immigrant status, or disability. This disenfranchisement is a root cause of disparities in health access, outcomes, and patient experience in the United States and around the world. Health policy is a route to resolve these systemic inequities. But, health inequities in health policy and research often result from decisions about what research topics are pursued, who is included, and what and how data is collected, analyzed and presented. These decisions can perpetuate or dismantle historic and current health inequities.

The Duke-Margolis Center for Health Policy conducts research and policy analysis to understand how health policies dismantle or perpetuate health inequities and identify policy solutions to advance health equity. As part of its mission, Duke-Margolis works with sectors across the Duke to educate and train the next generation of health policy leaders through an interdisciplinary approach

Together with the Duke Department of Family Medicine and Community Health (DFMCH), Duke-Margolis launched a year-long **Health Equity Policy and Primary Care Fellowship** for a physician to gain knowledge and experience in translating the concepts of health equity and health policy to improve their clinical practice.



Fellows will learn from leading experts in the fields of medical education, research, public health, health equity, and health care policy. Research findings will provide a foundation for transformational change in primary care at Duke and other health systems. With the support of DFMCH and Duke-Margolis mentors, faculty, researchers, and staff, more Fellows will present at the end of the Fellowship to demonstrate their achievement of the program's learning objectives.

Margolis Rotation Director: [Andrea Thoumi, Duke-Margolis Health Equity Policy Fellow](#)
Family Medicine Rotation Director: [Brian Antono, Fellowship Director](#)

Fellowship Objectives:

- Collaborate on projects with Duke-Margolis, and multiple faculty and entities within Duke Health, to develop policy recommendations for health care delivery and payment reforms that aim to increase access to and provide more equitable health care; refine recommendations through qualitative and quantitative data analysis; and deliver recommendations for transformational change in primary care
- Identify how new trends in health equity affect health policy, payment and care delivery practices at the state and regional level, national, or international levels
- Support Duke Health's strategic direction and leadership in health equity

Location: Duke-Margolis Center for Health Policy and Duke Family Medicine Center, Durham, NC

Fellowship Commitment and Activities:

- Fellows must make a 12-month commitment to participate in the Fellowship from August 1st through July 31st
- With approval from DFMCH Chair Anthony Viera, MD, Fellows are expected to dedicate approximately 50 percent of their time (~75-80 hours per month) to the Fellowship
- Fellows will spend the remaining 50 percent per month in clinical care within DFMCH
- Fellows must participate in orientation, learning activities, and meet regularly with their mentor, and DFMCH and Duke-Margolis researchers and staff via conference calls/webinars, and in-person meetings
- Attend research project-related meetings and strategy sessions
- Conduct research and data analysis on health policies, regulations, and practices
- Propose health policy recommendations that embed health equity to senior leadership at Duke-Margolis and DFMCH

Research projects will be determined based on Duke-Margolis and DFMCH faculty and researcher alignment. Sample projects are described below:

- Develop a use case to inform a medical home model or an approach that embeds community health workers at Duke University
- Propose equity-focused considerations for value-based payment models to support longitudinal care management for specialized conditions, especially for conditions that require substantial specialist roles and coordination between specialists and primary care
- Evaluate the effectiveness of new care delivery and payment approaches to provide flexibility for addressing clinical needs and underlying social determinants of health among historically marginalized populations (e.g., [North Carolina's Healthy Opportunities pilots](#))
- Identify actionable policy solutions for state and local policymakers implementing measures for pandemic preparedness and public health infrastructure (e.g., common data elements to apply Social Vulnerability Index and other indices to allocate resources to communities exhibiting the greatest need)
- Evaluate the effectiveness of value-based payment reforms to reduce health disparities among marginalized and minoritized communities or by rural health care access including an intersectional lens (e.g., gender, immigrant status, disability status)
- Evaluate existing performance measures that aim to measure equity and develop policy considerations to improve measurement for health equity

Criteria of a Successful Rotation:

- Immersion in and understanding of health equity for health policy and implications for a) providers and health systems; b) increasing access to health care and needed payment reforms; c) communities the policies are intended to serve
- Demonstrated ability to develop, document, and conduct policy analysis and its implications on advancing health equity that leads to health policy change
- Successful participation in the objectives, roles and responsibilities in the Fellowship commitments outlined above

FOR MORE INFORMATION about the Health Equity Policy and Primary Care Fellowship, contact:

Andrea Thoumi, andrea.thoumi@duke.edu and Brian Antono, brian.antono@duke.edu.

“The most important imprint we can make on a future, more affordable, more equitable health care system is to prepare new health policy leaders who are committed to value in health care that truly improves patient's lives.”

- Robert J. Margolis, MD'71, HS'70-'72
Founder, Duke-Margolis Center for Health Policy

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