Lucy A. Savitz, Ph.D., MBA

Key Qualifications

Lucy Savitz, Ph.D., MBA has nearly 30 years of experience in health care delivery and health services research. Currently, Dr. Savitz serves as Director of Research and Education in the Intermountain Healthcare Institute for Health Care Delivery Research where she is responsible for facilitating mission critical health services research and enhancing the scientific stature of clinical investigators. She is also a Research Professor in Clinical Epidemiology at the University of Utah School of Medicine as well as Adjunct Associate Professor of Nursing, Pediatrics, and Family & Preventive Medicine there. Dr. Savitz also directs the Patient Centered Research Methods Core of Utah's Clinical Translation Science Award. She, further, holds an Adjunct Associate Professor appointment in the Department of Health Policy & Management at the University of North Carolina at Chapel Hill's School of Public Health. At Intermountain Healthcare, Dr. Savitz directs the AHRQ ACTION II, the Partnership for Patients Hospital Engagement Network, and the CMMI Innovation Challenge programs. She co-directs the Delivery Science and Operations Committees for the High Value Health Care Collaborative and is a member of the Steering Committee—a group of 19 leading delivery systems across the U.S. committed to driving transformational change in quality and payment reform. She has worked as an Economist for the Colorado State Legislature, a financial planner at UNC Health Care, a researcher in the Rural Health Program at the Cecil G. Sheps Center for Health Services Research, as a faculty member at the University of North Carolina (UNC-CH) School of Public Health in Chapel Hill, a Senior Health Services Researcher at RTI in the Health Care Quality and Outcomes Program, and a Senior Associate at Abt Associates, Inc. Dr. Savitz also worked with Coastal Family Health Center (a 24 clinic FQCHC system) in Biloxi, Mississippi to provide technical assistance for strategic planning and evaluation of the recovery effort after Hurricane Katrina. She also led an effort on behalf of the Alliance for Pediatric Quality to develop a set of national improvement priorities and identify actionable improvement initiatives with associated measures to drive excellence in pediatric care for the U.S. Her Ph.D. minor was in medical geography and she has applied this knowledge base in over half a dozen projects to assess resource allocation and spatial variations in service delivery. Dr. Savitz has led four projects specific to quality measurement for AHRQ; over a dozen program evaluation projects; and overall led more than two dozen applied projects in health care system settings across the rural-urban continuum. Further, Dr. Savitz has been acknowledged as an Examiner for the 2001 and 2002 Malcolm Baldrige National Quality Program, administered by the National Institute for Standards and Technology in the U.S. Department of Commerce and the American Society for Quality. She teaches the Health Services Research and Patient Centered Research Methods courses at the University of Utah School of Medicine as well as serving on the Institute for Healthcare Improvement's Impacting Cost+Quality, Joint Replacement, and Episodic Bundle Payment collaboratives. She serves on the Association of American Medical Colleges' Research on Care Collaboration Committee as well as a leader on the Consumer, Patient, and Researcher Roundtable and eGEMs Senior Editor for the EDM Forum. At Academy Health, Dr. Savitz serves on the Methods Council, Delivery System Science Fellowship Program Committee, and Committee for Advocacy in Public Policy.

Education

Ph.D., University of North Carolina at Chapel Hill, Health Policy and Administration (Minor in Medical Geography)
M.B.A., University of Denver, Denver, Colorado
B.S.B.A., University of Denver, Denver, Colorado (Major in Finance)

Relevant Professional Experience

2010 to present **Director of Research and Education**, Institute for Health Care Delivery Research, Intermountain Healthcare, Salt Lake City, Utah

Expanded Senior Scientist role to include administrative oversight and strategic planning activities for the Institute and delivery system research agenda.

2007 to 2010 **Senior Scientist**, Intermountain Health Care, Institute for Health Care Delivery Research, Salt Lake City, UT (part-time, expanded role effective 9/17/07, full-time 2008)

Responsible for facilitating mission critical health services research and enhancing the scientific stature of clinical investigators. Developing courses and training outreach activities across the health system, providing mentorship support to clinical investigators, acting as liaison with key University of Utah investigators (i.e., School of Medicine, School of Business, Huntsman Cancer Institute), supporting dissemination activities, monitoring external research opportunities, and maintaining a research portfolio in quality and safety of health care.

2008 to present **Research Professor**, Clinical Epidemiology, University of Utah School of Medicine

Responsible for developing and teaching the Health Services Research and Patient Centered Research Methods courses as part of the K30 clinical training track as well as overseeing the Certificate Program in PCOR/CER. Faculty service is largely dedicated to mentoring trainees and participation on honors and masters thesis committees as well as doctoral dissertation committees.

2009 to present **Adjunct Associate Professor,** Pediatrics, University of Utah School of Medicine

Responsible to mentoring clinical investigators, serving on the Innovative Research Selection Committee, and developing pediatric research initiatives.

2008 to present **Adjunct Associate Professor, Nursing, University of Utah College of Nursing**

Responsible for developing and teaching the Quality Improvement and Clinical Data Analysis course, a required course for the Doctoral Nursing Program.

2008 to present **Adjunct Associate Professor, University of North Carolina at Chapel Hill, Chapel Hill, NC**

Responsible for developing and teaching the Health Care Politics course in the distance Executive Master Degree Program; continuing as guest speaker since 2010.

2006 to 2008 **Senior Associate**, Abt Associates, Inc., Durham, NC (part time)

Leading research portfolio development in quality, safety, and preparedness with a focus on the role of health information technology as an effect modifier. Involved in all aspects of health services research and program evaluation in the area of organizational studies, with a particular emphasis implementation science, strategic planning, and research translation. Directs projects and oversees study design, data collection, qualitative and quantitative data analyses, literature review, and dissemination activities.

2001 to 2006 **Senior Health Services Researcher, RTI International, Research Triangle Park, NC**

Involved in all aspects of health services research and program development in the area of organizational studies, with a particular emphasis on patient safety and clinical process innovations. Directs projects and oversees study design, data collection, qualitative and quantitative data analyses, literature review, and dissemination activities.

2001 to 2004 **Adjunct Assistant Professor, University of North Carolina at Chapel Hill, Chapel Hill, NC**

Sits on dissertation and master's thesis committees and provides guest lectures as well as co-teaching the Social Marketing curriculum in the CDC Management Academy.

1996 to 2001 **Assistant Professor/Research Assistant Professor, University of North Carolina at Chapel Hill, Chapel Hill, NC**

Taught the core strategic management course and elective marketing class in the master's program. Has been a popular guest lecturer across campus and typically carried an advisee load of 16 students per academic year. Wrote grant proposals and conducted research, published in peer-review literature, and provided community service to the research, university, and general community.

1993 to 1996 **Research Associate, University of North Carolina at Chapel Hill, Chapel Hill, NC**

Wrote grant proposals, conducted health services research, and served as Associate Director of the NRSA Doctoral Fellowship Program at the Cecil G. Sheps Center for Health Services Research.

1991 to 1993 **Graduate Research Assistant, University of North Carolina at Chapel Hill, Chapel Hill, NC**

Conducted literature reviews, drafted report and proposal text, managed proposal preparation, conducted interviews, analyzed secondary data, and drafted and pilot-tested questionnaires at the Cecil G. Sheps Center for Health Services Research.

1989 to 1992 **Independent Health Care Consultant, Self-Employed**

Provided financial analysis, utilization projections, and analytic justifications to clients for Certificate of Need applications and hospital planning initiatives.

1987 to 1989 **Financial Planning/Managed Care Reimbursement Specialist (1987-1989), Assistant to the Director of Fiscal Services for Patient Accounting (1987), University of North Carolina Hospitals, Chapel Hill, NC**

Provided analytic financial support services for UNC facilities. Conducted special studies in reimbursement payment patterns, waiting time, lease-purchase decisions, alternative IT system acquisition, cost-benefit analysis, and estimating the future impact of patient burden for specific diseases. Assisted in preparing the Medicare cost report and periodic financial and annual reports. Implemented cash collection policies to remain in compliance with government reimbursement regulations. Negotiated and administered the hospitals' managed care contracts, coordinating these activities with the physician practice group. Tracked patient and third party payments and special services such as the Air Flight program. Conducted special studies related to vulnerable patient groups (i.e., hemophiliac patients and patients covered by the Crippled Children's Fund). Updated IT system programs and trained staff around Medicaid, Medicare, and commercial insurer reimbursement changes. Recommended changes in the sliding scale reimbursement schedule based on updates in the Federal poverty guidelines for self-pay patients and policies for collections.

1984 to 1985 **Economist. Colorado Legislative Council, Colorado State Government, Denver, CO**

Estimated General Fund revenues and provided bi-partisan leadership support to the General Assembly with simulation analysis and fiscal notes on proposed and pending legislation and budgetary issues. Provided committee testimony and met regularly with the President of the Senate and Speaker of the House to update them on current economic trends and state fiscal issues. Prepared white papers and consulted with staff on financial analysis matters.

1983 to 1984 **Technical Writer. Jefferson County Bank and Trust, Lakewood, CO**

Prepared a monthly customer newsletter, translating financial trends, technical investment and loan terms, and multiple savings opportunities for customers.

1983 to 1984 **Graduate Research Assistant, Center for Business and Economic Forecasting, University of Denver, Denver, CO**

Provided statistical analysis and data merging support services for Center management and clients in State government, public utilities, and banking institutions, who used the Center's econometric model values to drive their own forecasting models.

1982 to 1983 **Administrative Assistant, Oberndorf Properties, Ltd., Denver, CO**

Prepared financial reports, managed property repairs and maintenance, and balanced ledgers for all property holdings under the supervision of the president and owner.

1977 to 1981 **Administrative Assistant (1979 to 1981), Senior Secretary (1977 to 1979); Psychiatric Epidemiology Program, Western Psychiatric Institute and Clinic, University of Pittsburgh, Pittsburgh, PA**

Managed program business functions associated with student stipends, prepared NIMH progress reports, prepared grant proposal budgets and justifications, supervised five clerical staff, and provided general support services for the maintenance of program activities. Provided clerical support services including typing, grant proposal assembly and packaging, meeting scheduling, making travel arrangements for faculty, conducting literature searches, coding data, filing, and faculty scheduling.

Teaching Experience

LEAD INSTRUCTOR, MDCRC 6230, Health Services Research K-30 Track Required Course, University of Utah School of Medicine, Summer 2008-present. [offered one semester per year, now in the Fall]

LEAD INSTRUCTOR, MDCRC 6460, Patient Centered Research Methods, PCOR/CER Certificate Program requirement, University of Utah School of Medicine, Summer, 2010- present [offered every other year, now in the Spring]

INSTRUCTOR, Social Marketing, CDC Management Academy for Public Health, University of North Carolina at Chapel Hill, Summer, 1999-2011. [Webinar format as of 2009]

SENIOR SCIENTIST/INSTRUCTOR: Intermountain Healthcare University, skill-based training for clinical investigators—proposal writing, systematic literature search, writing for publication, and qualitative research methods, 2005-present.

LEAD INSTRUCTOR, Nursing 6772, Quality Improvement and Clinical Data Analysis, University of Utah School of Nursing, Fall 2008-2010.

LEAD INSTRUCTOR, HPM 755, Health Care Politics, Executive Masters Program, University of North Carolina at Chapel Hill, Summer 2008-Summer 2009.

PROGRAM DIRECTOR/INSTRUCTOR: ACOG Leadership Program in Women's Health Policy at UNC Chapel Hill, Departments of Health Policy and Administration and Obstetrics and Gynecology, 1997-2002 (35 ACOG fellows are nominated by the 10 regions across the US to attend this one-week, intensive course in Chapel Hill each year); invited to return as Program Advisor and Instructor for 2006 program resurrection.

LEAD INSTRUCTOR, HPAA 141, Marketing in Health Service Organizations, Department of Health Policy and Administration, University of North Carolina at Chapel Hill, Spring Semester, 1998-2001.

LEAD INSTRUCTOR, HPAA 240, Strategic Planning for Health Systems, Department of Health Policy and

Administration, University of North Carolina at Chapel Hill, Fall Semester, 1995-2000.

CO-INSTRUCTOR: HPAA 141, Marketing for Health Care Organizations (Executive Masters Program), Department of Health Policy and Administration, University of North Carolina at Chapel Hill, Summer Session, 1998-2000

C0-COORDINATOR & SPEAKER: HPAA, Managed Care for Faculty in the Health Sciences, University of North Carolina at Chapel Hill, Spring Semester, 1998. This was a special initiative led by Deans William Roper and Jeffrey Houpt at the UNC-CH schools of Public Health and Medicine.

LEAD INSTRUCTOR, HPAA 145, Introduction to Health Administration and Planning, Department of Health Policy and Administration, University of North Carolina at Chapel Hill, Spring semesters, 1993 through 1997.

Publications

Peer-Reviewed Articles:

Savitz, ST, M Charlton, T Belnap, JL Scott**, LA Savitz**. "Decision to Time and Treat Chronic HCV Using New Therapies from a Cost-Effectiveness Perspective," *Hepatology*, submitted for publication.

Horne, B, D Budge, A Masica, **LA Savitz**, J Benuzillo, G Cantu, et al. "Inpatient Heart Failure 30-day Readmission Risk Scores Empower In-hospital Modification of Future Readmission Risk," *Circulation*, forthcoming, 2015.

Savitz, LA, K Luther. "Patient-Reported Measures: Data Critical to the Value Equation," *Healthcare Executive*, Jan/Feb: 74-77, 2015.

Brunisholz, K, L Joy, **LA Savitz et al. "**Does the Impact of Diabetes Self-Management Education Portend Improvement in Diabetes Bundle Compliance?" *Journal of Multidisciplinary Healthcar*e, 7:533-542, 2014.

Knepper, BC, H Young, SM Reese, **LA Savitz**, CS Price. "Identifying Colon and Open Reduction of Fracture Surgical Site Infections Using a Partially Automated Electronic Algorithm," *American Journal of Infection Control*, 42(10 Suppl):S291-5, 2014.

Savitz, LA, SL Moore, W Biffl, C Price, H Gilmartin. "A Participatory Research Approach to Reducing Surgical Site Infections (SSIs): Development of an Automated SSI Surveillance Tool, "," in Battles, JB, Cleeman, JI, Kahn KK, and Weinberg DA (Editors), *Advances in the Prevention and Control of Health Care-Associated Infections*, Rockville, MD: Agency for Healthcare Research and Quality (US), available at http://www.ahrq.gov/professionals/quality-patient -safety/patient-safety-resources/resources/advances-in-hai/hai-article17.html AHRQ Publication No. 14-0003, June, 2014.

Rubin, MA, M Jones, JL Huntington, L Guy, MJ Durfee, JF Lloyd, C Nielson, H Gilmartin, RS Evans, WL Biffl, **LA Savitz**, CS Price (2014) "Screening for Surgical Site Infections by Applying Classification Trees to Electronic Data," in Batles, JB, Cleeman, JI, Kahn KK, and Weinberg DA (Editors), *Advances in the Prevention and Control of Health Care-Associated Infections*, Rockville, MD: Agency for Healthcare Research and Quality (US), http://www.ahrq.gov/professionals/quality-patient -safety/patient-safety-resources/resources/advances-in-hai/hai-article5.html, AHRQ Publication No. 14-0003, June, 2014.

.

Savitz, LA, BC James, P Briot, S Barlow. "International Trends in Healthcare System and Health Insurance Reform: The Intermountain Healthcare Way," *Journal de Droit de la Sante et de l'Assurance Maladie*, 1:33-40, 2014.

Bayley, KB, T Belnap, **LA Savitz**, A Masica, N Shah, NS Fleming. "Challenges in Using Electronic Health Record Data for CER: Experience of Four Learning Organizations and Solutions Applied," EDM Forum commissioned paper; *Medical Care*, 51(Suppl 3):S80-6, 2013.

Keenan, HT, NA Murphy, R Staheli, **LA Savitz**. "Healthcare Utilization in the First Year After Pediatric Traumatic Brain Injury in an Insured Population," *J Head Trauma Rehabil*, 28(6):426-32, 2013.

Luther K, **LA Savitz**. Leaders challenged to reduce cost, deliver more. *Healthcare Executive*, Jan/Feb;27(1):78-81, 2012.

Tomek, IM, AL Sabel, MI Froimson, G Muschler, D Jevsevar, KM Koenig, DG Lewallen, JM Naessens, **LA Savitz**, JL Westrich, WB Weeks, JN Weinstein. "A Collaborative Of Leading Health Systems Finds Wide Variations In Total Knee Replacement Delivery And Takes Steps To Improve Value," *Health Affairs*, 31(6):1329-38, 2012.

Byington, CL, **LA Savitz**, M Varner, D McClain. "The Utah Center for Clinical and Translational Science: Transformation Through Collaboration," *Clinical and Translational Science*, 5(5):377-78, 2012, available at www.ctsjournal.com, 2012.

Welch, S., JJ Augustine, L Dong, **L Savitz**, G Snow, BC James. "Volume-related Differences in Emergency Department Performance, *The Joint Commission Journal on Quality and Patient Safety*, 38(9):395-402, 2012.

Byington, CL, CC Reynolds, K Korgenski, X Sheng, KJ Valentine, RE Nelson, JA Daly, RJ Osguthorpe, B James, **L Savitz**, AT Pavia, EB Clark. "Costs and Infant Outcomes After Implementation of a Care Process Model for Febrile Infants, *Pediatrics*, http://pediatrics.aappublications.org/content/130/1/e16.full.html, 2012.

Welch, S, **LA Savitz**. "Exploring Strategies to Improve Emergency Department Intake," *Journal of Emergency Medicine*, 26 May, 2011.

James, B, **LA Savitz**."How Intermountain Trimmed Health Care Costs Through Robust Quality Improvement Efforts," *Health Affairs*, 30(6):1185-91, 2011.

Rosen AK, HJ Mull, H Kaafarani, J Nebeker, **LA Savitz**, S Shimada, A Helwig, et al. "Applying Trigger Tools to Detect Adverse Events Associated with Outpatient Surgery". *Journal of Patient Safety* 7(1): 45-59, 2011.

Clark DD, **Savitz LA**, Pingree SB. "Cost Cutting in Heath Systems Without Compromising Quality Care". *Frontiers Health Services Management*, 27(2):19-30 Winter, 2010.

Kafarani, H, AK Rosen, JR Nebeker, S Shimada, H Mull, PE Rivard, **LA Savitz** et al. "Development of Trigger Tools for Surveillance of Adverse Events in Ambulatory Surgery", *Quality and Safety in Health Care*, 19(5):425-9, October, 2010.

Blaschke, A, LS Pulver, EK Korgenski, **LA Savitz,** JA Daly, CL Byington. "Clindamycin-resistant Group B Stregptococcus and Failure of Intrapartum Prophylaxis to Prevent Early-Onset Disease", *Journal of Pediatrics*, 156(3):501-503, 2010.

Reiss-Brennan, B, P Briot, **LA Savitz**, W Cannon, R Staheli. "Cost & Quality Impact of Intermountain's Mental Health Integration Program," *Journal of Healthcare Management*, 55(2):97-113, Mar-Apr, 2010 .

Savitz, LA: Strategies that Work: The Intermountain Way to Positively Impact Costs and Quality, Chapter in Institute of Medicine Publication, *Strategies that Work to Contain Healthcare Costs*, 2009.

Faulk, JF, **LA Savitz**. "Intensive Care Nurses' Interest in Clinical Personal Digital Assistants", *Critical Care Nurse*, 29(5), October, 2009.

Reiss-Brennan, B., **L Savitz**., P Briot., M Dejardins., W Cannon. "Reducing Harm through Quality Improvement Interventions". *British Medical Journal*, doi:10.1136/bmj.39520.730370.94, 2009.

Wallace, J, **LA Savitz**. "Estimating Waste in Frontline Health Care Workers", *Journal of Evaluation in Clinical Practice*, 14:178-180, 2008.

Savitz, LA. "Managing Effective Participatory Research Partnerships." *Joint Commission Journal on Quality and Safety*, 33(12):7-15, Supplement, 2007.

Nebeker, JR, PR Yarnold, RC Soltysik, BC Sauer, SA Sims, MH Samore, RW Rupper, KM Swanson, **LA Savitz**, J Shinogle, W Xu. "Developing Indicators of Inpatient Adverse Drug Events through Non-Linear Analysis Using Administrative Data", *Medical Care*, 45(10 Supl 2):S81-8, October, 2007.

KB Bayley, **LA Savitz**, T Maddalone, S Stoner, JS Hunt, R Wells. "Evaluation of Patient Care Interventions and Recommendations by a Transitional Care Pharmacist." *Therapeutics and Clinical Risk Management*, 3(4):695-703, August, 2007.

Helfrich, C, **LA Savitz**, K Swiger, BJ Weiner. "Adoption and Implementation of Diabetes Registries by Community Health Centers", *American Journal of Preventive Medicine*, 33 (1 Suppl):S50-8; quiz S59-65, 2007.

Weiner, BJ, C Helfrich, **LA Savitz**, K Swiger. "Adoption and Implementation of Strategies for Diabetes Management in Primary Care Practices". *American Journal of Preventative Medicine*. Jul;33 (1 Suppl):S35-44; quiz S45-9, 2007.

Suyama J, **Savitz LA**, Chang H, Allswede M. "Financial Implications of Hospital Response to Bioterrorism Based on Diagnosis-related Group Analysis." *Prehospital and Disaster Medicine*; 22(2): 145-148. Mar-Apr, 2007.

Devita, MA, R Bellomo, K Hillman, J Kellum, A Rotondi, D Teres, A Auerach, WJ Chen, K Duncan, G Kenward, M Bell, M Buist, J Chen, J Bion, A Kiby, G Lighthall, J Ovreveit, RS Braithwaite, J Gosbee, E Milbrandt, M Peberdy, **L Savitz**, L Young, S Galhotra: "Findings of the First Consensus Conference on Medical Emergency Teams," *Critical Care Medicine*, 34(9):2463-2478.

Savitz, LA, C Jones, S Bernard. "Quality Indicators Associated with Nurse Staffing in Acute Care Settings," Advances in Patient Safety: From Research to Implementation, invited manuscript accepted with revisions, May, AHRQ Publication No. 05-0021-4, pages 375-385, 2005.

Bayley, KB, **LA Savitz**, G Rodriguez, W Gillanders, S Stoner. "Risks and Barriers Associated with Health Care Hand-offs" Advances in Patient Safety: From Research to Implementation, invited manuscript accepted with revisions, May, AHRQ Publication No. 05-0021-3, pages 87-101, 2005.

Williams, R.E., K. Hartman, R.F. Sandler, W. C. Miller, **L.A. Savitz**, J. F. Steege. "Recognition and Treatment of Irritable Bowel Syndrome Among Women With Chronic Pelvic Pain," *American Journal of Obstetrics and Gynecology*, 192:761-767, 2005.

Savitz, LA., "Envisioning Safer Healthcare," Healthcare Papers (Canadian journal), 5(3):69-74, 2004 [available on-line at http://www.longwoods.com/hp/5-3PatSafety/HP53index.html].

Weiner, BJ, **LA Savitz**, L Pucci and S Bernard. "How Do Integrated Delivery Systems Adopt and Implement Clinical Information Systems?" *Health Care Management Review*, 29(1):51-66, 2004.

Ibrahim, M, **LA Savitz**, E Wagner, and T Carey. "Population-Based Health Principles in Medical and Public Health Practice." *Journal of Public Health Management and Practice*, 7(3):75-81, 2001.

Cummings, S., **LA Savitz**, and TR Konrad. "Reported Response Rates to Mailed Physician Questionnaires." *Health Services Research*, 35(6):1347-1355, 2001.

Clark, SJ, **LA Savitz**, and RK Randolph. "Rural Children's Health." *Western Journal of Medicine, 2001*.

Savitz, LA, AD Kaluzny, and DL. Kelly. "Life Cycle Model of Continuous Clinical Process Innovation." *Journal of Healthcare Management*, 45(5):307-316, 2000.
Savitz, LA, and A.D. Kaluzny. "Assessing the Implementation of Clinical Process Innovations: A Cross Case Comparison." *Journal of Healthcare Management*, 45(6):366-379, 2000.

Ricketts, TC, D Taylor, and **LA Savitz**. "Using Logistic Regression to Make County-Level Estimates of the Uninsured Problem in North Carolina." *Policy Studies Review*, 14(3): 323-339, 1996.

Monroe, AC, TC Ricketts, and **LA Savitz**. "Cancer in Rural Versus Urban Populations: A Review." *The Journal of Rural Health*, 8(3):212-220, 1992.

Campbell, LS, J. Stein, LK Fondren, WP Kory, **LA Savitz**, KE Kilpatrick, TC Ricketts, K Dalton, RA Meriwether, and WE Roye. "Inpatients with AIDS and AIDS-Related Complex: Economic Impact on Hospitals in North Carolina." *Southern Medical Journal*, 84(1):22-26. 1991.

Invited Commentaries in Peer Review Journals:

Savitz, LA: "Prospects for Using Epidemiologic Principles in Assessing Perinatal Outcomes," Pediatric and Perinatal Epidemiology, 13:405-407, 1999.

Kaluzny, AD and **LA Savitz**: "Using Measurement for Improved Decision Making: Assuring Implementation," Zdrowie Iz Zarzadzanie, 1999.

Books and Book Chapters:

Phillips, S, R Hughes, LA Savitz (2008). "Synergistic Opportunity to Connect Quality Improvement and Emergency Preparedness, in Hughes RG (Editor), *Patient Safety and Quality: An Evidence-based Handbook for Nurses*, Rockville MD: Agency for Healthcare Research and Quality (US), Chapter 9

Savitz, L.A., R. P. Lavin, E. Root (2007). "Geographic Information Systems as a Strategic Tool for Better Planning, Response, and Recovery, chapter 9 in National Security Issues in Science, Law, and Technology, T. A. Johnson editor, Boca Raton, FL: CRC Press.

Savitz, L.A. and S.L. Bernard (2005). "Measuring & Assessing Adverse Medical Events to Promote Patient Safety," refereed book chapter to appear in Continuous Quality Improvement in Health Care, C.P. McLaughlin and A.D. Kaluzny editors, Third Edition.

Bernard, S. L., L.A. Savitz (2005). "Measuring Consumer Satisfaction," refereed book chapter to appear in Continuous Quality Improvement in Health Care, C.P. McLaughlin and A.D. Kaluzny editors, Third Edition.

Savitz, L.A (1999). Measuring Consumer Satisfaction. In McLaughlin, C.P. andA.D. Kaluzny (Eds.), Continuous Quality Improvement in Health Care: Theory, Implementation, and Applications. Second Edition. Gaithersburg, MD: Aspen Publishers, Inc.

Lishner, D.M., E.H. Larson, R.A. Rosenblatt, S. Clark, L.A. Savitz, and R. Randolph (1999). Rural Maternal and Perinatal Health. In Rural Health in the 1990s. Washington, DC: Federal Office of Rural Health Policy.

Gesler, W.M., L.A. Savitz, and P.S. Wittie (1998). Geographic Methods for the Description of the Health Care Consumptive Behavior of Rural Communities. In Gesler, W., D.J. Rabiner, and G.D. DeFriese (Eds.), Rural Health and Aging Research: Theory, Methods, and Practical Applications. Amityville, NY: Baywood Publishing Company, Inc.

Clark, S.J., K. Randoph, L.A. Savitz, and T.C. Ricketts (1997). A Quantitative Profile of Rural Maternal and Child Health. US Office of Rural Rural Health Policy Report. Washington, DC: US Government Printing Office.
Ricketts, T.C., III, L.A. Savitz, W.M. Gesler, and D.N. Osborne (Eds.) (1994). Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum, University Press of America.
Ricketts, T.C., III, and L.A. Savitz (1994). Access to Health Services. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Gesler, W.M., and L.A. Savitz (1994). Health Professions Distribution. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Florin, J., W.M. Gesler, L.A. Savitz, and L.K. Fondren (1994). Regionalization of Health Care. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Aldrich, T., L.A. Savitz, and P. Wittie (1994). Evaluating Clusters of Adverse Health Outcomes. In Geographic Methods for Health Services Research, a Focus on the Rural-Urban Continuum. University Press of America.

Savitz, L.A., and L.K. Fondren (1994). Data Sources for Health Services Research. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Savitz, L.A., and D.P. Albert (1994). Access and Cartography. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Osborne, D., and L.A. Savitz (1994). Issues Related to Population Density. In Geographic Methods for Health Services Research, A Focus on the Rural-Urban Continuum. University Press of America.

Selected Project Experiences

Evaluation of Oregon's Coordinated Care Organizations, RWJF State health Access Reform Evaluation Program (2013-2015)—LA Savitz, Co-Investigator. This project involves a cross-case comparison of two purposefully selected CCOs in Oregon, Health Share (an urban CCO) and Pacific Source Community Solutions (a rural CCO).

Disruptive Innovation @ Intermountain, CMMI Innovation Challenge Award (2012-2015)—LA Savitz Project Director. This project is intended to accelerate the pace of transformational, organization-wide change in support of Intermountain's Shared Accountable Organization by aligning financial payment incentives, implementing primary-care based shared decision making, and using IT-supported tools for population management.

CMMI Innovation Challenge to the High Value Healthcare Collaborative (2012-2015)—LA Savitz, Subcontract PI. This project aims to engage patients in treatment planning via shared decision making tools that are implemented to support patient-provider interactions on preference sensitive conditions.

Intermountain-led Hospital Engagement Network (2011-2014)—LA Savitz, Project Director. This project is intended to identify, provide training and technical assistance to 108 hospitals across the U.S. in achieving Partnership for Patients (CMMI) goals of reducing healthcare acquired conditions by 40% and unnecessary readmissions by 20%.

Accelerating the Cycle of Research in Integrated Delivery Systems II (2010-2015)—LA Savitz, Intermountain Project Director. This master task order was one of seventeen awards made by AHRQ, extending the Integrated Delivery System Research Network and ACTION I.

Improving Post-Hospital Transitions and Ambulatory Care for Children with Asthma, AHRQ, (2010-2013)—LA Savitz, Senior Advisor; F Nkoy PI. The major objectives of the project are to: 1) Implement the EB-CPM at 3 urban and 3 rural community hospitals. 2) Determine organizational factors associated with successful implementation of the EB-CPM at 6 community and 1academic hospitals.3) Evaluate the impact of implementing the EB-CPM by measuring change in 1) hospital length of stay, 2) cost, and 3) ED/hospital readmission rates. 4) Evaluate the extent to which use of the self-monitoring scorecard improves post-hospitalization ambulatory asthma care and reduces ED/hospital readmission.

Utah Medicaid/CHIPRA Quality Demonstration Grant, CMS (2010-2012)—LA Savitz, Independent Evaluator; C Norlin, PI. The major objectives of this project is to evaluate implementation of a patient centered medical home in pediatric practices in Utah and Idaho.

Organizational Factors Associated with Improved Inpatient Pediatric Asthma Care, AHRQ (2009-2012)—LA Savitz, Senior Advisor; F Nkoy PI. The purpose of this project is to develop and study the implementation of a paper-based tool to prevent unnecessary hospital readmissions for pediatric patients.

Improving the Measurement of Surgical Site Infection (SSI) Risk Stratification and Outcome Detection, AHRQ (2009-2011)—LA Savitz, Co-PI. This project identified, tested, and disseminated an enhanced risk adjustment model for SSI by incorporating previously unincorporated risk factors.

Evaluation of an Evidence-Based Care Process Model (EB-CPM) for Febrile Infants, AHRQ (2009-2011)—LA Savitz, Co-Investigator. This project studied the spread in implementation of a care process model within a single health care delivery system as well as the impact of MOC eligibility for QI project requirement fulfillment on diffusion outside the system.

Exploring New ED Research Strategies, AHRQ (2009-2010)—LA Savitz, Co-Investigator. This project was a small conference grant aimed at identifying, sharing, and disseminating best practices in ED throughput.

Clinical Translation Science Award, NCRR (2008-2016)—LA Savitz, Patient Centered Research Methods Core Director (formerly Community Engagement Core for first 5 years). This infrastructure grant is intended to build capacity to accelerate the translation of research into practice as well as to facilitate bi-directional flow and engagement in clinical research activities.

Ambulatory Targeted Injury Detection Systems, AHRQ (2007-2009)—LA Savitz, Subcontract Project Director. A mixed methods study aimed at developing and testing adverse drug and surgical event triggers aimed at reducing patient harm.

Disaster Case Management, ACF (4/08-9/08)—LA Savitz, Expert Consultant. Developing a model program for disaster case management service delivery and support; leading on the task to make recommendations for cross-jurisdictional coordination, training, and model implementation.

Evaluation of the Social Services Block Grant, Coastal Family Health Centers (2006-2007)—LA Savitz, Project Director. Conducting a developmental assessment of rebuilding and service restoration, providing technical assistance for strategic and operational planning, and assessing health information technology infrastructure across 14 clinical sites, following Hurricane Katrina.

Improve First, Measures Initiative, Alliance for Pediatric Quality (3/07-12/07)—LA Savitz, PD. Creating an inventory of pediatric quality measures, achieving consensus on a starter set of measures, and disseminating an approved set with change package to support widespread adoption and implementation.

Developing Evidence to Inform Decisions about Effectiveness: The DEcIDE Network. (2005-2006)—RTI Co-Project Director: This master task order is one of thirteen awards made by AHRQ. The DEcIDE Network is a master task order that basically combines Evidence-based Practice Center (EPC) and Integrated Delivery System Research Network (IDSRN) competencies to provide a mechanism by which AHRQ can request special studies to derive evidence on an accelerated cycle. In doing so, they will establish a collaborative research and practice-based

network program to assist AHRQ and other Federal agencies with implementation of Section 1013 of the Medicare Modernization Act of 2003 (MMA).

Partnership for Advancing Quality Together: AHRQ Grant 1 U18 HS13706-01 (2002-2006)—Principal Investigator. This grant is one of 20 projects funded as part of the AHRQ Partnership Program. The purpose of the project is to strengthen the RTI IDSRN partnership and examine the diffusion of innovation process within and across health systems. Dr. Savitz served as Chair of the Partnership Science Subcommittee on the AHRQ Council of Partners.

Accelerating the Cycle of Research in Integrated Delivery Systems (2000-2001; 2005-2006; 2010-present[i])—RTI Project Director. This master task order was one of fifteen awards made by AHRQ, extending the Integrated Delivery System Research Network. The RTI Research Network for IDSRN and ACTION I was created by Dr. Savitz to respond to specific task orders by establishing a network of IDSs that represent a cross-section of the health care industry. The network is based on working relationships that Dr. Savitz has nurtured over an 14-year period and are reflected in the current ACTION II award. Seventeen task orders have been awarded to date under the original IDSRN, most notably:

Task Order 1: **Assessing the IT Infrastructure in IDSs** (2000 to 2001)—Project Director. This task order sought to assess the structure and content of IT systems in IDSs with particular attention on issues involving decision making, implementation, and cost of development/acquisition, implementation, and maintenance across six IDSs.

Task Order 3: **Validating AHRQ's Patient Safety Indicators** (2001-2004)—Project Director. This task order sought to understand and document how patient safety indicators are used in hospital settings to drive quality improvement. Further, we explored validation issues identified by users at Intermountain Healthcare. This project received an add-on dissemination award (**Developing a PSI Web Query Tool**, Task 7) to develop a web-based query system hosted by the Utah Department of Health. Focus groups were held with prospective users to determine: (1) intended applications; (2) preferred visual displays and reporting formats; (3) documentation and/or evidence supporting materials to be linked; and (4) usability of the tool.

Task Order 4: **Assessing IDS Solutions for Medication Information Transfer Across the Care Continuum** (2001-2002)—Project Director. This task order aimed to explore the medication information transfer process, create an evaluation framework, and evaluate the impact of an IT solution on this process using failure mode and effect analysis (FMEA) with a particular emphasis on examining the risk of adverse medical events and identifying key areas for improved safety.

Task Order 6: **Estimating Risk Reduction and Cost of Enhancing Medication Information Across Patient Care Settings** (2003-2005)—Project Director. This project is a follow-on to Task 4 where we now update our FMEA, apply probabilistic risk assessment methods, and examine the business case for the indicated intervention—a transition pharmacist—being implemented at Providence Health System.

Task Order 9: **Quality Indicator Training** (2003-2005)—Project Director. This project was funded to develop and deliver a set of three Quality Indicator training workshops for AHRQ, training targeted user groups in how to generate, display, and interpret AHRQs Quality Indicators—Prevention Quality, Hospital Quality, and Patient Safety. A core curriculum was tailored to meet the needs of identified stakeholders including: clinical and administrative staff in hospitals, payers, and health plans. An add-on task (Train-the-Trainer, Task 12) was awarded by AHRQ for the development and presentation of a train-the-trainer module, where task staff trained the Battelle contractor providing user support on behalf of the Agency.

Task Order 10: **Assessing the Special Needs and Potential Role of Nursing Homes in Rural Surge Capacity** (2004-2005)— Project Director: This project will allow us to examine the degree to which various planning areas overlap and are coordinated in distributing resources and regulating response. A series of seven state-specific case studies will elucidate the special needs of and potential role for nursing homes in surge capacity. A resulting survey tool will be offered for more widespread planning together with an Atlas to drive coordinated planning and response.

Task Order 11: **Assessing the Cost of Waste and Poor Quality in Health Care** (2004-2006)—Project Director: This project draws on the literature and a series of completed quality improvement projects at two partner IDSs to create a taxonomy for waste/poor quality in health care. Structured observation and management engineering studies in select areas will be used to develop a financial system for capturing waste and redeploying resources more efficiently.

Task Order 13: **Developing an Injury Detection System** (2005-2006)—Project Director. This study will used a model for prospective injury detection that will be updated and applied to three key injury areas. A series of user manuals will be developed and alpha tested in 6 IDS settings in Utah and Texas. Senior research team members will guide beta testing in three (to be named) IDS settings.

Task Order 15: **Medical Emergency Team Conference** (2005-2006)—Project Director. This project is intended to support international shared learning on medical emergency team innovations (also referred to as Rapid Response Teams in the IHI 100,000 Lives Campaign). Funds will augment conference resources, provide resources to contribute to peer-reviewed publication of manuscripts resulting from the conference discussions, and production of DVDs for more widespread learning.

Task Order 16: **Implementing a Targeted Injury Detection System** (2005-2006)—Project Director. This study builds on task 13, brining in 4 beta test sites to further test and assess the implementation of the developed tools.

Evaluation of the Robert Wood Johnson Foundation Diabetes Initiative (2003-2004)—Qualitative Research Director. RTI is the external evaluator of the Foundation's initiative, charged with conducting a cross-site evaluation of 6 Advancing Diabetes Self-Management projects and 8 Building Community Supports for Diabetes Care sites across the U.S. In addition to the mixed methods, quasi-experimental evaluation, staff provide technical assistance to grantees and ensure proper research procedures are used.

Evaluation of the CDC Guidelines for Prevention of Surgical Wound Infections Surgical *(2003-2004)****—Qualitative Research Director.*** This CDC-funded study is a quasi-experimental, mixed methods assessment of SSI guideline adherence in in-house surgical care across four hospitals. The qualitative study involves focus groups at national meetings with surgeons and nurses to inform case study site visits at hospitals as well as guiding and informing interpretation of quantitative analyses of guideline concordant care derived from chart abstractions integrated with electronic patient information available from pharmacy, operating room, and case mix systems.

Patient Safety Corps Feasibility Study (2001-2002)—Senior Research Analyst. This AHRQ-sponsored study was a collaborative effort between RTI and UNC researchers. It involved a systematic assessment of intensive, educational strategies for focused training of field-based health care executives and administrators, clinicians, public health staff, and/or legislators. This was supported by review of both the peer-review and gray literature. Additionally, key informant interviews with a select group of multidisciplinary experts were conducted. A set of recommendations was made to the Agency to support program development.

Evaluating the Area Health Education Research Program (2002)—Senior Qualitative Researcher/Site Visit Leader. This HRSA-funded study evaluated AHEC programs and reported findings to the Congress to support policy and resource allocation decision making. A mixed methods study largely relied on qualitative case studies of 8 AHECs with site visits conducted by teams led by senior researchers across the U.S.

Evaluation of State-Specific Medical Error and Patient Safety Seminars (2001-2002)—Project Director. This OASPE-funded project was intended to evaluate the impact of a series of patient safety seminars sponsored by the AHRQ User Liaison Program and make recommendations for future initiatives. A systematic assessment of the program offerings was conducted. This was supplemented by qualitative case studies in a sample of 6 states via in-person and telephone-based site visits.

Evaluability Study of the AHRQ Translating Research into Practice Program (2001-2002)—Project Director. This AHRQ-sponsored project involved a systematic assessment of the TRIP II program via inputs from in-depth

discussions with research staff, abstraction of data elements and attributes of research projects and resultant artifacts. A recommendation on indicated evaluation strategies was made to the Agency.

Service Line Impact and Implementation (1999 to 2001)—Co-Principal Investigator. This study for the Center for Health Management Research/Center for Organized Delivery Systems brings together researchers from Boston University and UNC to examine the structure and process changes related to degree of clinical integration for cardiovascular, orthopedics, women's health, oncology, trauma, behavioral health, diabetes, geriatrics/long-term care (LTC), and transplant service lines. Service lines in 22 hospitals participating in six IDSs across the United States are collaborating to study implementation, performance indicators, outcome measures, and management strategies. A rich qualitative and quantitative data set has yielded important findings that are being concurrently reported to the Industry Advisory Board, a group of senior managers from 12 member IDSs.

Assessment of Dissemination and Use of Clinical Process Innovations in an IDS Environment (1998 to 1999)—Principal Investigator. This project was conducted in collaboration with five IDSs across the country for the Center for Health Management Research/Center for Organized Delivery Systems. A tracer methodology approach was developed to identify clinical practice guidelines for study. A replicated case study approach was used to conduct a cross-case analysis of the implementation of clinical process innovations with data gathered from key informant interviews, surveys, and archival records.

Cardiovascular Health: Identifying a Core Measure Set (2000-2003)—Principal Investigator. This project for CDC was aimed at inventorying available, valid measures of cardiovascular health and arriving at consensus on a core set of measures. We also identified relevant national and regional initiatives together with environmental constraints that would influence use and actionability of these measures. Using a modified Delphi approach, we worked with a group of national experts to create a core set of measures that the CDC could use for monitoring and reporting purposes.

A Model for Collaboratively Managing the Public's Health (2000- 2004)—Principal Investigator. This project for CDC uses evidence-based guidelines for treating Type 2 diabetes as a tracer to study how research is translated into practice. A physician survey aimed at understanding structure and process attributes of primary care practices used to treat persons with chronic disease was developed and tested and was fielded across North Carolina. From the survey, primary care practice sites with reported best practices were identified and site visits conducted. A pooled data registry created from claims data voluntarily contributed by managed health care plans operating in the state was used to assess differential patient outcomes and guideline concordant care practices. Findings are currently being compiled with researchers from the University of New Mexico in a supplemental issue of the American Journal of Preventive Medicine.

Service Line Impact and Implementation (1999- 2001)—Co-Principal Investigator. This study for the Center for Health Management Research/Center for Organized Delivery Systems brings together researchers from Boston University and UNC to examine the structure and process changes related to degree of clinical integration for cardiovascular, orthopedics, women's health, oncology, trauma, behavioral health, diabetes, geriatrics/long-term care (LTC), and transplant service lines. Service lines in 22 hospitals participating in six IDSs across the United States are collaborating to study implementation, performance indicators, outcome measures, and management strategies. A rich qualitative and quantitative data set has yielded important findings that are being concurrently reported to the Industry Advisory Board, a group of senior managers from 12 member IDSs.

Alternative Modalities for Dissemination of Clinical Practice Guidelines (1998- 1999)—Principal Investigator. This model for the Paralyzed Veterans of America sought to develop one Internet- and one nontechnology-based continuing medical education/continuing education unit (CME/CEU) offering for disseminating a set of four clinical practice guidelines for spinal cord injury. A survey and report of CME on the Internet was prepared as well as a report summarizing a comprehensive literature search on effective clinical practice guideline dissemination.

Consumer Choice and the Rural Hospital (1993-1996)—Project Coordinator. This Agency for Health Care Policy and Research project was the largest rural community hospital study yet conducted. It included surveys of 10,000 consumers, 1,500 physicians, and 100 hospital administrators living, practicing, or providing health care services in 100 sole community hospital areas around the country. CATI and mail surveys were developed, tested, and

conducted.

The Influence of Maternal Workplace Location on Obstetrical Health Care Seeking Behavior (1992-1994)—Lead Investigator. This study for the US Office of Rural Health Policy involved in-person interviews and medical record abstraction for 240 postpartum women at UNC Hospitals. Data were used to assess the influence of maternal employment on obstetrical health care seeking behavior to inform planners and policy makers in spatial location decisions.

Preparation of a Geographical Study of Rural Health (1991-1992)—Project Coordinator. This project for the Agency for Health Care Policy and Research involved the planning, preparation, editing, and publication of a resource guide for integrating geographic methods into health services research. It resulted in the publication of a book, Geographic Methods for Health Services Research, published by University Press of America.

Honors, Appointments, and Awards

Member, High Value Healthcare Collaborative Steering Committee, 2013-present
Senior Editor, eGEMs Journal, 2013-present
Founding Member, Delivery System Science Fellowship Program, Academy Health, 2012-present
Co-Director, High Value Healthcare Collaborative Scientific Review & Delivery Science Committee, 2011-present
Elected Member, Committee on Advocacy for Public Policy, Academy Health, 2011-present
Career Author Award, RTI International, 2006
Nominated, UNC-CH School of Public Health McGavran Teaching Award, 1998
Nominated and Semifinalist for the University of North Carolina Distinguished Teaching Award for Post-Baccalaureate Instruction, 1998
Seventh Place (female weight division), St. George Marathon, Utah, 1992
Selected, Outstanding Young Women of America, 1991
Nominee, Top Colorado Graduate Business Student, 1984
Invited Member, Golden Key National Honor Society, 1983
Graduate School of Business and Public Management Tuition Scholarship, University of Denver, 1982-84
Hornbeck Scholar Award, University of Denver, 1982

Memberships

American Society for Quality, 2001 to date
National Association of Health Data Organizations (NAHDO), 2000 to date
Academy Health (formerly Association of Health Services Research), 1995 to date
American Hospital Association (AHA), 1993 to date
American Public Health Association (APHA), 1993 to 2003

---

[i] **DR. SAVITZ LED THE IDSRN AND ACTION I AT RTI INTERNATIONAL; SHE LEFT RTI DURING ACTION I. SHE SUCCESSFULLY COMPETED FOR AND WAS AWARDED AN ACTION II IDIQ AT INTERMOUNTAIN.**