

Yale Health Turns 50

With so many advances, original values still hold true

ON JULY 1, 1971, Dr. Moreson H. Kaplan planned to meet with Dr. Daniel S. Rowe at 7:30 am to prepare for the first patients to arrive in Yale Health's new healthcare center at 17 Hillhouse Avenue.

When Kaplan and Rowe entered the building, they got quite the surprise.

"We walked in and saw all the construction workers in the lobby with their sawhorses and there was sawdust all over," Kaplan said. "They thought we were opening after the Fourth of July holiday. These guys scrambled. They vacuumed everything up and we opened at 8:30 am, as planned."

With that, the first comprehensive, prepaid medical program in the country to be offered to an entire university began its 50-year run of caring for members of the Yale community.

But those sawhorses would have never been there in the first place if not for a lot of planning by a lot of people. And that planning may have not been needed if not for Charles Taylor's curiosity.

Taylor was known to arrive late to meetings because he would stay in his previous meeting when he found a subject interesting. In the mid-6os, he took an interest in the subject of health maintenance organizations (HMOs).

An HMO is a prepaid plan that offers regular medical care for a monthly fee. It operates on the theory of preventive medicine, where clinicians and patients maintain good health through examinations and prompt treatment to prevent small, inexpensive problems from becoming serious with costly hospitalizations.



TURNS 50 CONTINUED

The Kaiser Plan, one of the earliest HMOs, was organized by industrialist Henry J. Kaiser in 1938 when he could not find any other way to provide medical coverage for his men during the construction of the Grand Coulee Dam in the state of Washington. He hired doctors and built hospitals for his employees, and when the dam was completed, he opened the health plan to the public.

Taylor found this idea fascinating. He and former Yale President Kingman Brewster, Jr. had already been looking into how the Medical School was being run. The Yale faculty doctors were practicing in one of the four New Haven hospitals and they wanted to learn more about how that was being handled. Additionally, Yale's health services were limited to serving a small number of students out of 435 College Street, opened in 1930, with an infirmary at 276 Prospect Street, opened in 1892. These spaces offered few services and would primarily take care of students before sending them out into the community for more advanced care. Employee health services were minimal.

With his knowledge of New Haven hospitals and the health services on campus, Taylor began to wonder about the right way to deliver health care to both students and employees.

"Charlie Taylor had an enormous curiosity about new things and new ideas," said Henry "Sam" Chauncey, Jr. "He proposed to the president that Yale take a look at HMOs. He realized that Yale could create this, but to be successful it would need students, employees, and their families. It appeared to Charlie that this would be the best way to deliver quality care to everyone and it would be cheaper than if we all just paid for the insurance."

1892

Dr. Daniel S. Rowe

In 1965, the Committee on Program Planning was appointed to prepare specific recommendations to be submitted to the Board of University Health to redefine healthcare policy and program. In 1968, Joseph Axelrod, an administrator from New York's Health Insurance Plan, was brought in to organize what would be the new health plan for students, employees, and their families. The plan would include primary care delivered in one building, including its own pharmacy. It also had some specialty care such as ophthalmology and behavioral health, with additional specialty care being provided outside of the building by Yale faculty. A firm of New York architects designed the six-story, \$5.5 million building at 17 Hillhouse Avenue.

"Almost everybody I knew was very excited about it," Chauncey said. "There was a lot of changeover in the faculty and staff and finding a primary doctor in New Haven was a struggle. There was a lot of excitement about a single organization that was going to take care of the health of the whole campus."

Rowe was hired as Yale Health's director in 1970 and began recruiting clinicians

1916

from private practices around New Haven. He brought in established community physicians to head each department.

When Yale Health opened in 1971, it did so with 17 full-time physicians and a total of 171 full-time employees of doctors, nurses, staff, and administrators. On the first day, it had 5,000 members. It grew to 18,000 members totaling 60,000 patient visits by the end of the first year.

"The growth that first year was phenomenal," Kaplan said. "Many of these HMOs have failed for one reason or another, but we persisted."

VISION AND PHILOSOPHY

Yale Health was founded on the philosophy of providing compassionate, patient-centered care orchestrated by a primary care provider. Many of its founding principles were similar to that of what has become known as a patient-centered medical home (PCMH). See Dr. Genecin's "From the Desk of" on page 7 for more.

"This HMO developed into a patientcentered medical home," said Dr. Lorraine Siggins. "It has evolved in a lot of ways, but that's really what it was and what it still is. The founding principles have remained and been enhanced over time."

Former Yale President Richard C. Levin had a few memorable experiences with Yale Health, starting when he was a graduate student in economics in 1970 and sought follow-up care at the College Street facility after having his front tooth knocked out playing intramural football. He also said Kaplan, who served as his primary care provider for many years, "saved my life" with his early diagnosis of prostate cancer in 2009.

Timeline of healthcare at Yale



Yale Infirmary opened with 12 beds at 276 Prospect Street Department of University Health (DUH) organized to promote general health and physical fitness of the student population. Located at 90 High Street 1930



DUH moved outpatient services to 435 College Street "The vision of Yale Health has persisted so clearly," Levin said. "It is easy to say what the purpose of Yale Health is and what its main features and main goals are. They have really been constant throughout. That's a testament to outstanding leadership."

INCLUSIVITY

Along with the pragmatic reasons for Taylor believing an HMO could work at Yale, he also believed it would help make health care on campus more equitable and inclusive for everyone.

"Charlie wanted everybody at Yale to be dealt with in terms of health care fairly and evenly," Chauncey said. "He believed that everybody who was involved at Yale should have the same quality care. Before, you might have faculty who could afford



Yale Health staff members take part in the 1986 New Haven Bed Race.

one level of care, but some employees who couldn't afford that, and then students who had something totally different. He wanted everyone, whether they were blue collar, white collar or whatever, to get the same quality of care together."

Linda Koch Lorimer would often have an international graduate student live in her house as part of a hosting program. One year, she had a graduate student and his wife from Korea. The couple had their first

child while at Yale and the child was born with an inverted heart.

"In most places, the child would not have made it," Lorimer said. "Yale Health and Yale New Haven Hospital jumped into action and cared for him as if he were a corporate CEO. That child is now a thriving 10-year-old. That has always stood out to me. Every member gets the same exact level of care, regardless of who they are."

Today, the focus on inclusivity remains as high as ever with translation phones available to ensure patients can speak with their provider in the language they feel most comfortable, transgender services and support available, and the ability for patients to identify their preferred name through MyChart.

INNOVATION

Yale Health has long been at the forefront when it comes to advances in technology, but also in the way it provides care to the Yale community. It was the first ambulatory practice in the state to convert to an electronic medical record system in 2005 and was honored with the Connecticut Malcolm Baldridge National Quality Award for Innovation in 2010. As previously mentioned, it was the first comprehensive, prepaid medical program in the country to be offered to an entire university and it was also the first HMO to utilize medical nurse practitioners to deliver care.

Molly Meyer, APRN, was one of the first adult nurse practitioners to be certified nationally through the American Nurses Association in 1972.

"We learned everything on site," she said. "I've been very, very lucky. I came at the right time to the right place. The right things were happening for women and

TURNS 50 CONTINUED ON NEXT PAGE

We want to thank everyone who contributed to this, our 50th Anniversary Edition of Yale Health Care.
We invite you to learn about their distinguished careers.

Dr. Moreson H. Kaplan served as a clinician in Internal Medicine at Yale Health from 1971–2011. He also held roles as the assistant chief of medicine, medical director, acting director (for about four months while Dr. Daniel S. Rowe dealt with a medical issue), chief of Internal Medicine, and associate director for medical affairs.

Dr. Daniel S. Rowe was Yale Health's first director from 1970–1990.

Charles Taylor, a 1950 Yale graduate, became Yale's provost at the age of 33 and served in the position from 1963–1972.

Henry "Sam" Chauncey, Jr., a 1957 Yale graduate, spent 22 years working in the Yale administration as an assistant dean of Yale College, a special assistant to President Kingman Brewster, Jr., university secretary, lecturer, and head of the health management program in the Yale School of Public Health. He retired in 2001.

Dr. Lorraine Siggins served as a clinician at Yale Health from 1965–2019. She was chief of Mental Health & Counseling from 1988–2019 and Yale Health's acting director from 1995–1997.

Richard C. Levin served as Yale's 22nd president from 1993–2013. He earned his Ph.D in economics from Yale in 1974 and began his career as an assistant professor of economics before becoming an associate professor of economics and management at the Yale School of Management. He was also a Frederick William Beinecke Professor of Economics, chair of the Economics Department, and dean of the Graduate School of Arts and Sciences.

Linda Koch Lorimer joined Yale Health as a first-year law student in 1974 and is celebrating her 40th year as a member. In between, she was a member of the Yale Corporation and for over two decades was one of Yale's vice presidents. She was secretary of the university for 18 years and retired in 2015 as the first vice president for International & Strategic Initiatives.

CONTRIBUTORS CONTINUED ON NEXT PAGE

1965

Committee on program planning appointed to prepare specific recommendations to be submitted to the Board of University Health to redefine healthcare policy and program

1971



Yale University Health Services opened at the University Health Services Center at 17 Hillhouse Avenue



Dr. Samuel Blank, physician in the University Health Services Center, reviews x-rays. Photo courtesy of Yale Alumni Magazine, April 1981.

CONTRIBUTORS CONTINUED

Molly Meyer, APRN, worked in several different departments including Inpatient Care, Acute Care, Athletic Medicine, Student Health, and Internal Medicine throughout her career at Yale Health from 1971–2017. Meyer also cared for Yale Health's cancer patients and was integral in assisting with their care transition to Smilow Cancer Hospital in 2013.

Dr. Stephanie Spangler began her Yale Health career in 1986 as chief of Obstetrics & Gynecology and served as Yale Health's director from 1990–1995. She joined the Office of the Provost in 1995 and is now the vice provost for health affairs & academic integrity as well as the University's Title IX coordinator and COVID-19 coordinator.

Professor Dame Alison Richard served as Yale's provost from 1994–2002. She is a former professor and chair of the Department of Anthropology, former director of the Yale Peabody Museum of Natural History, and now a senior research scientist in the Department of Anthropology. From 2003–2010, she was vice chancellor of the University of Cambridge. Her achievements received recognition in 2010, when she was awarded a DBE (Dame Commander of the British Empire) for her services to higher education.

TURNS 50 CONTINUED

nurses. I think nurse practitioners have blossomed. We're certainly better educated than we once were and the role is expanding. This organization was so great about hiring us, creating us, nurturing us, and acknowledging us. We are certainly more accepted now and are recognized as primary care providers."

"Nurse practitioners have skills that are very appropriate for a university health system," Rowe said in an article in the Yale Daily News on November 20, 1985. "They have the ability to diagnose and treat patients in addition to all that the nursing profession teaches them. They treat patients as whole individuals and emphasize counseling and preventive care. We use both nurse practitioners and doctors because we find that they are excellent providers of health care."

Yale Health was also a leader when it came to mental health services for its student population, with the Division of Mental Hygiene starting in 1925. Siggins arrived at Yale from Australia to complete her residency in the early 1960s and joined the staff at the College Street location in 1965. She said mental hygiene was the only organized large group in the facility at the time with roughly six staff members and a few residents.



Nurse Practitioner Patricia McCarthy consults with mother and child in Pediatrics. Photo courtesy of Yale Alumni Magazine, April, 1981.

1986



Messages are written on a chalkboard in the Student Medicine waiting room. Photo courtesy of Yale Alumni Magazine, April 1981.

"During the time of the Vietnam War, we had students coming in worried about being drafted," Siggins said. "People came in with depression and anxiety as well as working on issues about their identity formation in terms of personal identity as well as relationships and academics."

Mental Health & Counseling now has nearly 40 diverse providers and sees roughly 35 percent of the student population each year.

THE MOVE

As Yale Health continued to progress, it soon became clear that it was also quickly outgrowing its home at 17 Hillhouse Avenue. In the mid-1990s, administration researched the possibility of outsourcing Yale Health to another insurance provider and drastically changing the model of care.

"There were times when the university questioned the model itself because it was so unusual compared to other "insurance" plans," said Dr. Stephanie Spangler. "However, the risk of outsourcing health care was that we would lose the population-based focus and integrated delivery system that allowed Yale Health care to be both high quality and cost effective—and that

TURNS 50 CONTINUED ON PAGE 6

1972



18,000 members, 60,000 patient visits, 200 babies delivered by end of first year 1986

24,500 members, AIDS Resource and Counseling Center developed, Travel Clinic opened



Ultrasound machine added to Radiology Department 1996

26,000 members, 142,500 patient visits

Implementation of computerized appointment scheduling

YALE HEALTH DIRECTORS



1970 – 1990 Dr. Daniel S. Rowe



1990 – 1995 Dr. Stephanie Spangler



1995–1997 Dr. Lorraine Siggins (Acting Director)



1997 - present Dr. Paul Genecin

"Yale Health has had an extraordinary series of leaders. Every one of them looked ahead to see how services could be improved and how advances in medical technology could be harnessed. But the heart of their leadership has always been a laser-like focus on "how do we take the best care of our patients?" We all have been blessed to have such a succession of outstanding directors."

—Linda Koch Lorimer

First Impressions No matter how long a clinician has been providing care at Yale Health, they all remember what it was like when they first arrived. Here is a quick look at the difference between starting a career at Yale Health in 2021 vs. 1993.

"... you had to call down there and they would put the records in a bucket on a dumbwaiter and send it to the office ..."



David Smith, MD, Internal Medicine at Yale Health since January 1993

We were in the old building on Hillhouse. It wasn't very inviting and Urgent Visit and Internal Medicine had those bright orange linoleum countertops like

from your grandparents' kitchen in the 6os or 7os.

We had paper records and hand wrote all of our notes. When you got a phone message from a patient, it was written on a pink slip of paper and put in your cubby that you would have to check throughout the day.

The medical records were in the basement and you had to call down there and they would put the records in a bucket on a dumbwaiter and send it to the office. If you had a question on a patient from a call, you had to send a request and wait for the chart to come back up to answer the question.

We didn't have emails or cell phones. If I was on call at night, I would have my beeper and would be driving home to Fairfield on 95 and have to stop at a rest area and use the payphone if I got paged. I always had to make sure I had quarters with me to make the call.

As I talk about it now, it seems pretty amazing that we were able to practice medicine that way.

"you could ... send them down for an x-ray, read the x-ray, give them a prescription, and they walk out of here with everything done."



Manuel Orta, MD, Pediatrics at Yale Health since February 2021

I was supposed to start on February 1, but due to COVID, my first day was February 15. My first day was the first time I was able

to actually go inside the Yale Health Center since all of my interviews took place virtually. I took a tour around the building and thought it was gorgeous, modern, and just beautiful.

The first week or so was a lot of paperwork and learning the systems, learning how to put in a referral. I started having some in-person visits and about a month later started with telemedicine visits.

My experience has been very positive so far and I'm very impressed with how the whole plan works. You could have a child with pneumonia, send them down for an x-ray, read the x-ray, give them a prescription, and they walk out of here with everything done. They have all the resources they need in one building.

Everything seems very modern, but I'm sure looking at the contrast between 20 to 30 years ago and now is going to be pretty remarkable.

1997



Computers rolled out throughout organization. Staff encouraged to play solitaire to become familiar with mouse

2002

Yale Health Online launched



2005

First ambulatory practice in the state to convert to electronic medical record system

First earned accreditation by The Joint Commission with continuous accreditation since



Dr. John lannarone and Kelly Martens, PA-C, examine an x-ray in Urgent Visit in 1989.

TURNS 50 CONTINUED FROM PAGE 4
enabled us to care for the health of the
community as well as each patient."

"Outsourcing was an incredibly bad idea in my view," said Professor Dame Alison Richard. "I was very doubtful the quality of care the Yale community had grown to value would survive. I can say now, thank goodness, it did not happen."

Richard and Spangler were integral in finding a piece of land to build a new health center and they knew it needed to happen quickly. Luckily, they found just what they were looking for at 55 Lock Street.

"17 Hillhouse was clearly suboptimal to put it mildly," Richard said. "If we waited too much longer, there would have been no site left central to campus and once you locate a health facility on the outskirts of campus, people stop going."

The new Yale Health Center opened in the fall of 2010. Designed by Mack Scogin Merrill Elam Architects out of Georgia, the 144,000-square-foot building features over 800 rooms, including more than 100 examination and treatment rooms, and

is more than 60 percent larger than the building at 17 Hillhouse Avenue. It also included a 17-bed inpatient unit, new automation technology in a state-of-the-art pharmacy, a healing garden on the fourth floor, and better parking options.

The facility was built using environmentally-friendly materials and received a gold rating in Leadership in Energy and Environmental Design by the United States Green Building Council for its sustainable design. It was also registered with the Green Guide for Healthcare, the first organization in the state to earn the distinction.

"It became apparent when we were making the decisions about more space for Yale Health that there was no way we could renovate 17 Hillhouse that would allow us to provide state-of-the-art care and appropriate access for our increasing numbers of patients," Spangler said.

Richard said a new health center also helped solidify the university's commitment to this model of care and continued to expand on the partnership it has built with its members over the past five decades.



Dr. Stephanie Spangler signs a beam that became part of the new Yale Health Center.

"Yale Health offers a relationship with its membership base, which I think is important for your health, but also on a personal level, to build relationships based on trust," Richard said. "The enrollment numbers tell you a success story. People will not sign up for health care if they have no confidence in it. Yale Health, ultimately, is something of Yale and something for Yale."



2010



Yale Health Center opened at 55 Lock Street 2012

Yale Health designated as a Patient-Centered Medical Home by the National Committee for Quality Assurance 2014

Transitioned electronic medical record system to EPIC, which includes MyChart 2016

Renewed focus on Partnership for Patient-Centered Care initiative



2021

39,000 members, 29,705 COVID vaccines administered as of 10/1/21



Dr. Lorraine Siggins (left) with the late Dr. Howard Blue (center) and Dr. Paul Genecin (right).

For five decades,
Yale Health clinicians
have enjoyed
robust relationships
with our members,
learning their
priorities, respecting
their values and goals,
and coordinating
their care.

FROM THE DESK OF PAUL GENECIN, MD

Yale Health was just 18 years old when I arrived as a new primary care internist in 1989. There was a vitality to the organization in those days that I attribute to the novelty of our care model, our inspiring mission, our dedicated staff, and our exceptional patient population. We were optimistic about the potential of Yale Health and we were eager to develop it on the foundations built by visionary Yale leaders who founded this unique healthcare system in 1971. As we celebrate our 50th anniversary, I am proud that this enthusiasm has never waned.

The university community has always been discerning about health care. When I became director of Yale Health in 1997, I knew we had to be good. We needed to offer patients great relationships with exceptional clinicians as well as to provide coordinated, convenient, and affordable services. Above all, we needed new systems to measure and achieve world-class quality.

The electronic health record was a giant leap forward, making information immediately accessible and allowing us to measure quality across multiple dimensions ranging from appointment access to clinical outcomes. We sought and achieved Joint Commission accreditation, enabling us to benchmark our systems against the country's best healthcare organizations. We collected patient feedback and gained expertise in improving patient experience. We created a partnership with Yale Medicine for specialty care, permitting a synergy of clinical excellence for our members. In a transformative vote of confidence, Yale's officers built us a state-of-the-art facility, the Yale Health Center, giving us room to expand and provide our members with a remarkable array of on-site services.

Fifty years ago, Yale Health was founded on a philosophy similar to what came to be known as patient-centered medical home (PCMH). While this terminology and official designation did not yet exist in 1971, as PCMH developed into a nationwide movement, we found its principles to align perfectly with those of Yale Health. Those core values include close primary care relationships, team-based care, whole-person orientation, coordinated care, a commitment to quality and safety, accessibility, and patient participation. This model of care epitomizes my vision for Yale Health and was a natural progression into our Partnership for Patient-Centered Care initiative, which is designed to strengthen the relationships between you and your clinical care team and to ensure that your opinions, choices, values, beliefs, and cultural background guide the care you receive.

For five decades, Yale Health clinicians have enjoyed robust relationships with our members, learning their priorities, respecting their values and goals, and coordinating their care. We strive to communicate clearly and engage our patients in shared decision making while utilizing data to improve quality, safety, and accessibility. We invite member participation on our committees and workgroups. We work to fulfill our commitment to patient-centered care and uphold our belief that health care is a partnership between providers and patients. In other words, we are *Better Together*.

I am proud that Yale Health has 50-year members and multigenerational families, but, whatever the duration of your membership, THANK YOU for the trust you place in us. I look forward to our next 50 years together!

Paul Genecin

Chief Executive Officer



YALE HEALTH news from Yale Health fall 2021 CARE

Maria Ama Bella San Juan (member since 1972)

FROM OUR MEMBERS

"When I started at Yale, I was single and now I have a grandchild at Boston College. I never thought I would last this long. Overall, Yale Health has been very good to me. As a patient, the care was always there. My provider is always checking on me when they see me around the building. It's one of the best places to work and to get my care. Why do you think I've been here for 50 years?"

Maria began working in Housekeeping Services at the Yale Health Center as a permanent employee in 1972. She has had four children all born at Yale Health.



Cindy Cabral (member since 1982)

"I've been very lucky to have the same primary clinician for a really long time. The care has always been very good to me and my family. For me, it's been great. I don't know why anyone would not choose to be with Yale Health."

Cindy has been working as a printing assistant in Yale Printing & Publishing since 1982. Her husband, Cesar Cabral, also started working at Yale in 1982 and has been a Yale Health member since that time. He now works in the Kline Stockroom. Cindy has had five children all born at Yale Health, her first delivered by Dr. Stephanie Spangler. Published by Yale Health 55 Lock Street New Haven, CT 06511 203 432 0246 yalehealth.yale.edu EMAIL member.services@yale.edu

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Peter Salovey playing the banjo when he was a Yale assistant professor of psychology. Photo courtesy of the Yale Daily News, November 17, 1990.

Dear Colleagues,

I am thrilled to congratulate Yale Health on its 50th anniversary!

During my 40 years at Yale, one of my great joys has been seeing various groups at the university grow and expand their reach. Yale Health Services opened on July 1, 1971, at 17 Hillhouse Avenue. I joined Yale Health, the first HMO in Connecticut, 10 years later as a graduate student, and my wife, Marta, became a member in 1982. Marta and I have received our health care exclusively at Yale Health since then — and in fact, in our four decades as members, we have had only two primary physicians. It has been wonderful to be a part of Yale Health for so much of its history!

In 2010, Yale Health moved to 55 Lock Street, its current home. I was provost at the time and was proud to note then that the practice had always been ahead of its time, implementing concepts such as the medical home, the accountable healthcare organization, chronic disease management, health promotion, and prevention programs.

A decade later, the practice remains at the fore of cutting-edge clinical care. Yale Health has nearly 400 full-time staff who serve our community in so many ways. They provide free flu shots each year to thousands at our university, for example. And, in the last year, they have worked tirelessly to help our community navigate the challenges of the COVID-19 pandemic. Their contributions are wide-ranging and include providing testing, assisting those who tested positive, finding innovative ways to continue non-COVID routine and urgent care, and administering vaccine doses across the campus.

To the staff of Yale Health who have worked so hard to provide excellent care, thank you. Marta and I are grateful for all that you do, and congratulations on reaching this incredible milestone!

Sincerely,



Peter Salovey President Chris Argyris Professor of Psychology

