

Health Policy

NEWSLETTER

Tracking the Future of Healthcare Leadership: The MD/MBA Student

In the tradition of Asclepius, Greek god of medicine, it is difficult to envision a time where physician healers would turn to management science to hone their skills. Yet that is exactly where we stand today. With increasing scrutiny of the medical profession—targeting cost, access and quality of care—a growing number of physicians are seeking formal business training to adapt to the evolving healthcare industry.¹ Recognizing the value of a complementary business education, especially for training physician leaders, medical and business schools across the country have been forging partnerships to address this knowledge gap through the concurrent pursuit of the MD and MBA degrees.

First established in 1970 at the University of Pennsylvania, MD/MBA dual-degree programs have seen rapid growth in recent years. Climbing in number from 6 established programs in 1993 to the 50 that are currently recognized by the Association of American Medical Colleges, educational leaders are recognizing the demand for a modified educational structure.² At the time of a 2003 study, nationwide enrollment for MD/MBA programs reached 329, and will likely continue to rise as awareness increases and more programs are established.³ Yet with such a new phenomenon, questions inevitably arise as to the career paths these students will pursue, the motives inspiring their unorthodox education, and the impact that it will have on medicine and the delivery of healthcare.

Of specific concern is the identity these students will develop as they are schooled in seemingly dichotomous theoretical foundations. While studies have shown that the majority of MD/MBA students intend to continue along the traditional path of medical education into residency, complementing their clinical practice

with administrative duties, opportunities in the healthcare industry are luring some students to postpone or forego residency training to pursue career paths such as management consulting.⁴ This small but important trend creates two different endpoints of the dual-degree product: the clinician with a basic education in business management as opposed to the executive with formal medical knowledge and credentials. Though the market has shown the value and need for both career pathways, how these students will ultimately utilize their training may have great implications for both the future of medical education and the healthcare industry as a whole.

Noting that much could be learned by establishing a means to track these cohorts into the future, Jefferson Medical College has been working with leaders at institutions offering the dual-degree to establish a national registry of MD/MBA programs and their matriculants. Although in its infancy, this database is similar to the Jefferson Longitudinal Study of Medical Education, which has systematically followed the careers of all Jefferson Medical College graduates since 1968. The national registry of MD/MBA graduates will have the potential to serve as the basis for studies of these young physicians to describe their personal characteristics, track their professional development and study the programs from which they obtained their education.

Unlike the practicing physician who returns to obtain an MBA after years of service, these dual-degree students are initiating their careers with an additional skill set. Novel in its theoretical implications, this growing trend deserves systematic observation to elucidate the impact of these individuals on the state of healthcare. Although they may be limited in number, these students are positioning

themselves to assume active roles in defining the future of the delivery and financing of healthcare, and thus the future of medical practice. ■

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