

1. Biographical Information

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2. Education

1. University of California Los Angeles, Bachelors of Art in Philosophy, 2002
2. University of California Los Angeles, Master of Public Health in Health Policy and Management (Health Management Specialization), 2005
3. University of California, Berkeley, Ph.D. in Health Services and Policy Analysis (Organizational Behavior Specialization), 2015

3. Professional Positions

1. Fellow, Department of Bioethics, Clinical Center, National Institutes of Health 2003-2004
2. Project Director, Division of Hospital Medicine, Department of Medicine, UCSF School of Medicine 2004-2006 & 2007
3. Data Access and Confidentiality Manager, UCLA Center for Health Policy Research 2007-2009
4. Project Director, UCLA Center for Advanced Surgical and Interventional Technology, David Geffen School of Medicine at UCLA 2010-2011
5. Instructor, Public Health X446 (Quality Improvement, Performance Management, and Information Technology in Health Care Organizations), UCLA Extension Certificate Program in Health Care Management & Leadership, 2007-2012
6. Graduate Student Researcher, Center for Organizational and Innovation Research, UC Berkeley School of Public Health, 2011-2015
7. Lead, Medical Effectiveness, University of California Health Benefits Review Program, 2015-2016
8. Lead, Health Policy, UCSF-Cisco Connected Health Interoperability Platform, UCSF School of Medicine, University of California San Francisco (UCSF) 2015-2016
9. Associate Director of Research, UCSF-Samsung Digital Health Innovation Laboratory 2014-2016
10. Senior Research Scientist (Academic Coordinator - II), UCSF Center for Digital Health Innovation 2014-2016
11. Program Director, Master of Public Health (MPH) in Health Care Management Program, Department of Health Policy and Management, School of Public Health, University of Maryland 2016-2023
12. Assistant Professor, Department of Health Policy and Management, School of Public Health, University of Maryland, 2016-2023
13. Faculty Associate (by courtesy), Division of Hospital Medicine, Department of Medicine, UCSF School of Medicine, University of California San Francisco (UCSF), 2016-Present
14. Adjunct Assistant Professor (by courtesy), Department of Health Policy and Management, School of Public Health, University of Maryland, 2023-Present
15. Austin Ross Endowed Chair in Health Administration, School of Public Health, University of Washington, 2023-Present

16. Associate Professor, Department of Health Systems and Population Health, School of Public Health, University of Washington, 2023-Present
17. Director, Graduate Programs in Health Services Administration, School of Public Health, University of Washington, 2023-Present
18. Faculty Associate, UCLA Center for Health Policy Research, Fielding School of Public Health, University of California, Los Angeles, 2024-Present
19. Faculty Affiliate, University of Washington Center for an Informed Public, 2025-Present

4. Honors, Awards, Scholarships

1. Agency for Healthcare Research and Quality T32 Training Grant, UC Berkeley School of Public Health (Project Number: 1T32HS022241-01), 2013-2014
2. NIH Intramural Research Training Award Fellowship, National Institutes of Health, Clinical Center, Clinical Bioethics, 2003
3. Delta Omega Public Honorary Society, Iota Chapter, 2004
4. STAR Award for Outstanding Contribution to Research, Department of Medicine, UCSF, 2005
5. Staff Appreciation Award for Completion of OMB Certification of the California Health Interview Survey, UCLA Center for Health Policy Research, 2009
6. Upsilon Phi Delta Honorary Society in Healthcare Administration, 2010
7. University of Maryland School of Public Health Gloria S. Friedgen Spirit Award, 2017
8. University of Maryland School of Public Health Jerry P. Wrenn Outstanding Service Award, 2019
9. University of Maryland Outstanding Graduate Mentor Award, 2023

5. Professional Activities (outside of UW)

1. Member, American Public Health Association (APHA), 2002-Present
2. Member, AcademyHealth, 2007-Present
3. Member, Society of Hospital Medicine (SHM), 2012-Present
4. Member, Academy of Management (AOM), 2016-Present
5. Manuscript Reviewer, JAMA: Internal Medicine, 2016-Present
6. Manuscript Reviewer, Journal of Hospital Medicine, 2017-Present
7. Manuscript Reviewer, Quality Management in Health Care, 2019-Present
8. Manuscript Reviewer, Pediatrics, 2021-Present
9. Editorial Board Member, Quality Management in Health Care, 2022-Present
10. Manuscript Reviewer, Journal of General Internal Medicine, 2022-Present
11. External Reviewer, Health Administration Programs at Montana State University Billings, 2025

6. Bibliography

a) Refereed research articles (* designates mentee)

1. Auerbach, A.D., Rasic, M.A., **Sehgal, N.**, Ide, B, Stone, B, & Maselli, J. (2007). Opportunity missed: medical consultation, resource use, and quality of care of patients undergoing major surgery. Archives of internal medicine, 167(21), 2338-2344.
2. Auerbach, A.D., & **Sehgal, N.** (2008). Opportunity Realized? Medical Consultation for Patients Undergoing Major Surgery-Reply. Archives of Internal Medicine, 168(13), 1471-1471.

3. Shortell, S. M., **Sehgal, N. J.**, Bibi, S., Ramsay, P. P., Neuhauser, L., Colla, C. H., & Lewis, V. A. (2015). An early assessment of accountable care organizations' efforts to engage patients and their families. *Medical Care Research and Review*, 72(5), 580-604.
4. Auerbach, A. D., Kripalani, S., Vasilevskis, E. E., **Sehgal, N.**, Lindenauer, P. K., Metlay, J. P., ... & Williams, M. V. (2016). Preventability and causes of readmissions in a national cohort of general medicine patients. *JAMA internal medicine*, 176(4), 484-493.
5. Lee, J. S., Gonzales, R., Fleischmann, K. E., Vittinghoff, E., **Sehgal, N.**, Corbett, K. K., & Auerbach, A. D. (2016). Is appropriate reconciliation of cardiovascular medications after elective surgery associated with fewer post-discharge acute hospital and ambulatory visits?. *Journal of General Internal Medicine* (Vol. 31, pp. S285-S285).
6. Greysen, S. R., Harrison, J. D., Kripalani, S., Vasilevskis, E., Robinson, E., Metlay, J., **Sehgal, N. J.**, ... & Williams, M. V. (2017). Understanding patient-centered readmission factors: a multi-site, mixed-methods study. *BMJ Qual Saf*, 26(1), 33-41.
7. Lee, J. S., Gonzales, R., Vittinghoff, E., Corbett, K. K., Fleischmann, K. E., **Sehgal, N.**, & Auerbach, A. D. (2017). Appropriate Reconciliation of Cardiovascular Medications After Elective Surgery and Postdischarge Acute Hospital and Ambulatory Visits. *Journal of hospital medicine*, 12(9), 723-730.
8. Graham, K. L., Auerbach, A. D., Schnipper, J. L., Flanders, S. A., Kim, C. S., Robinson, E. J., **Sehgal, N. J.**, ... & Fletcher, G. S. (2018). Preventability of early versus late hospital readmissions in a national cohort of general medicine patients. *Annals of internal medicine*, 168(11), 766-774.
9. Greysen, S. R., Harrison, J. D., Rareshide, C., Magan, Y.*, **Sehgal, N.**, Rosenthal, J., Jacobia, R.*, & Auerbach, A. D. (2018). A randomized controlled trial to improve engagement of hospitalized patients with their patient portals. *Journal of the American Medical Informatics Association*, 25(12), 1626-1633.
10. Hughes, K.*, & **Sehgal, N.** (2018). Racial/ethnic Disparities in Lower Extremity Amputation Vs Revascularization: A Brief Review. *Journal of the National Medical Association*, 110(6), 560.
11. Hughes, K.*, Mota, L., Nunez, M., **Sehgal, N.**, Ortega, G. (2019). The effect of income and insurance on the likelihood of major leg amputation. *Journal of Vascular Surgery*, 70(2), 580-587.
12. McElfresh, D. C.*, Dooley, S., Cui, Y., Griesman, K., Wang, W., Will, T., **Sehgal, N.**, & Dickerson, J. P. (2021). Can an Algorithm Be My Healthcare Proxy?. In *Explainable AI in Healthcare and Medicine* (pp. 313-319). Springer, Cham.
13. Akre, E. R. L.*, Boekeloo, B. O., Dyer, T., Fenelon, A. T., Franzini, L., **Sehgal, N. J.**, & Roby, D. H. (2021). Disparities in Health Care Access and Utilization at the Intersections of Urbanicity and Sexual Identity in California. *LGBT health*, 8(3), 231-239.
14. Cardona, S., Felipe, N., Fischer, K., **Sehgal, N. J.**, & Schwartz, B. E. (2021). Vaccination Disparity: Quantifying Racial Inequity in COVID-19 Vaccine Administration in Maryland. *Journal of Urban Health*, 1-5.
15. Hughes, K.*, Olufajo, O. A., Ameyaw, E., White, K., Roby, D. H., Fryer, C. S., ... & **Sehgal, N. J.** (2021). The relationship between peripheral arterial disease severity and allostatic load: A national health and nutrition examination survey study. *African Annals of Thoracic and Cardiovascular Surgery*, 13(2), 20-30.
16. Jackson, D., **Sehgal, N. J.**, Baur, C. How African American and Hispanic Adults Perceive the Benefits of mHealth Co-design: Multi-method Formative Research for a Health Information App. (2021) *Journal of Medical Internet Research Formative Research*.

17. **Sehgal, N. J.**, Milton, D. K. (2021). Applying the Hierarchy of Controls: What Occupational Safety Can Teach us About Safely Navigating the Next Phase of the Global COVID-19 Pandemic. *Frontiers in Public Health*, 1688.
18. Hughes, K. *, Olufajo, O. A., White, K., Roby, D. H., Fryer, C. S., Wright, J. L., & **Sehgal, N. J.** (2022). The influence of socioeconomic status on outcomes of lower extremity arterial reconstruction. *Journal of Vascular Surgery*, 75(1), 168-176.
19. Huang, S. J. *, & **Sehgal, N. J.** (2022). Association of historic redlining and present-day health in Baltimore. *Plos one*, 17(1), e0261028.
20. **Sehgal, N. J.** (2022). Metrics for Phased Prevention of Coronavirus Disease 2019 Transmission for Institutions of Higher Education: 2022 and Beyond. In *Open Forum Infectious Diseases* (Vol. 9, No. 2, p. ofab627). US: Oxford University Press.
21. Pope, E. *, & **Sehgal, N. J.** (2022). Effects and Trends in Opioid-Related Promotional Payments Between 2014 and 2019: a Panel Data Analysis Among Prescribers in Medicare Part D. *Journal of General Internal Medicine*, 1-3.
22. Jackson, D. N., **Sehgal, N.**, & Baur, C. (2022). Benefits of mHealth Co-design for African American and Hispanic Adults: Multi-Method Participatory Research for a Health Information App. *JMIR Formative Research*, 6(3), e26764.
23. Toussaint, E. *, Roby, D., Yue, D., Franzini, L., & **Sehgal, N.** (2022). Estimating a Model for Mental Healthcare Utilization Using Subjective Unmet Need and Psychological Distress Measures. *The Journal of Behavioral Health Services & Research*, 1-13.
24. **Sehgal, N. J.**, Yue, D., Pope, E. *, Wang, R. H. *, & Roby, D. H. (2022). The Association Between COVID-19 Mortality And The County-Level Partisan Divide In The United States. *Health Affairs*, 41(6), 853-863.
25. **Sehgal, N. J.**, Huang, S. *, Johnson, N. M. *, Dickerson, J., Jackson, D., & Baur, C. (2022). The Benefits of Crowdsourcing to Seed and Align an Algorithm in an mHealth Intervention for African American and Hispanic Adults: Survey Study. *Journal of Medical Internet Research*, 24(6), e30216.
26. **Sehgal, N. J.** (2023). Social Influences on Length of Hospitalization in a Major Academic Medical Center. *Social Science & Humanities Open*.
27. Hughes, K. *, Olufajo, O. A., Wright, K., Roby, D. H., Fryer, C. S., Wright, J. L., & **Sehgal, N. J.** (2023). The Relationship Between Peripheral Arterial Disease Severity and Socioeconomic Status. *Annals of Vascular Surgery*.
28. Pope, E. *, & **Sehgal, N.** (2023). The role of physician networks and receipt of opioid-related payments. *Journal of General Internal Medicine*, 38(8), 1812-1820.
29. Pope, E. *, & **Sehgal, N.** (2023). Characterizing industry payments to US teaching hospitals and affiliated physicians: a cross-sectional analysis of the Open Payments datasets from 2016 to 2022. *Health Affairs Scholar*, 1(2), qxad031.
30. Yan, A. S. *, & **Sehgal, N. J.** (2024). Partisan divide and Racial/Ethnic disparities in COVID-19 vaccine hesitancy among Parents/Guardians and vaccine uptake among children in the US. *Vaccine*, 42(9), 2150-2154.
31. Huang, S. J. *, Boudreaux, M., White Whilby, K., McCoy, R. G., & **Sehgal, N. J.** (2025). Using internet-assisted geocoding of 1940 census addresses to reconstruct enumeration districts for use with redlining and longitudinal health datasets. *PLOS Global Public Health*, 5(1), e0004067.

32. **Sehgal, N. J.**, Jackson, D. N., Herlihy, C.*, Dickerson, J., & Baur, C. (2025). Advancing African American and Hispanic health literacy with a bilingual, personalized, prevention smartphone application. *Health Informatics Journal*, 31(1), 14604582251315604.
33. Robinson-Ector, K. S.*, McCoy, R. G., White Whilby, K., Yue, D., Kleinman, D. V., Huang, S. J.*, **Sehgal, N. J.** (2025). Comprehensive Care Management Variation between Rural and Non-rural Maryland Primary Care Program (MDPCP) Practices. *Health Affairs Scholar*, 3(6), qxaf109.
34. Robinson-Ector, K. S.*, McCoy, R. G., White Whilby, K., Yue, D., Kleinman, D. V., Huang, S. J.*, **Sehgal, N. J.** (2025). MDPCP Primary Care Practice Collaboration with Care Transformation Organizations and Comprehensive Care Management Delivery. *Journal of General Internal Medicine*, In Press, Submitted May 16, 2025
35. Huang, S. J.*, Robinson-Ector, K. S.*, **Sehgal, N. J.**, Golden, S. H., Davis, E. M., Ratzki-Leewing, A., Chen, C., Akintoye, O., Roy, D. J., Abaku, O., Ding, M. L., Maron, B. A., & McCoy, R. G. (2025). Persistent effects of historical redlining on present day hospital siting and size. *Health & place*, 95, 103538.

b) **Other refereed scholarly publications**

1. Schoenfeld, A. J., **Sehgal, N. J.**, & Auerbach, A. (2016). The challenges of mobile health regulation. *JAMA internal medicine*, 176(5), 704-705.

c) **Other non-refereed published scholarly publications** (proceedings, policy reports, technical reports, book reviews, editorials, letters to the editor)

The research briefs and evaluation reports in this section were deliverables under various grants and contracts. They were not explicitly peer-reviewed, but were often used and cited by federal, state, and local stakeholders and officials in making policy or operational decisions.

1. **Sehgal N**, Huber T, Knox M, and Shortell S. 2015. A Review of Emerging Evidence On Interventions for Asthma, Diabetes, and Cardiovascular Care. Resource Guide, The California Endowment and UC Berkeley Center for Healthcare Organizational and Innovation Research.
2. Roby, D.H., **Sehgal, N.J.**, Pope E.*, Seale M, Starr E. 2021. Tackling the Dual Economic and Public Health Crises Caused by COVID-19 in Baltimore: Early Lessons from the Baltimore Health Corps Pilot. Prepared for the Baltimore City Health Department by the University of Maryland Health Systems and Policy Research Lab.

The reports listed in this section are publications of the California Health Benefit Review Program (CHBRP). CHBRP is required to submit analyses of the cost, public health, and medical effectiveness impact of legislation related to health insurance within 60 days of bill introduction. All reports are peer-reviewed by CHBRP staff and a National Advisory Committee prior to release.

1. California Health Benefits Review Program (Medical Effectiveness Lead). Analysis of California Assembly Bill 533: Out-of-Network Coverage. Report to the 2015-2016 California State Legislature. <http://analyses.chbrp.com/document/view.php?id=1053>, January 7, 2016.

2. California Health Benefits Review Program (Medical Effectiveness Lead). Analysis of California Assembly Bill (AB) 2004 Hearing Aids: Minors. Report to the 2015-2016 California State Legislature. <http://analyses.chbrp.com/document/view.php?id=1181>, April 16, 2016.

The publications listed in this section are opinion pieces, editorials, or invited public commentary, and evidence of impact of my public scholarship. Through my public scholarship and communicating science I have reached more than two million households or individuals, disseminating the findings of my research to broader audiences, engaging in public discourse on important health, equity, or policy issues, translating scientific knowledge into practice and policy conversations, and expanding the impact of my scholarly work.

1. Free masks: the best thing the federal government can do to save lives right now, Baltimore Sun, Print. February 10, 2021. Reprinted in Connersville News Examiner, Finger Lake Times, Hastings Tribune, MetroWest Daily News, Milford Daily News, New Castle News, The Derrick, The Eagle, The Grand Island Independent, The Star Tribune, West Hawaii Today. Combined daily circulation 400,000 households
2. Delta has changed the game; it's time to embrace a national vaccine verification system, Baltimore Sun, Print. August 6, 2021. Reprinted in Connersville News Examiner, Hill Country News, Korea Times, Bangor Daily News. Combined daily circulation 150,000 households
3. Biden's Testing Plan Is Not Enough. Barron's. December 29, 2021. Weekly circulation 1,400,000 subscribers
4. RFK Jr.'s nomination to lead HHS is a direct threat to public health. The Seattle Times. November 20, 2024. Daily circulation 80,000 households
5. Even if you don't use Apple Health, cuts will hurt you, too. The Seattle Times. May 30, 2025. Daily circulation 80,000 households
6. A pause in SNAP benefits is a public health emergency; state must act now. The Seattle Times. October 28, 2025. Daily circulation 80,000 households

The citations in this section are internet media pieces in which I have been quoted.

1. Forbes. Doctors Don't Know What To Do With Data From Fitness Trackers. <https://www.forbes.com/sites/michaelthomsen/2015/11/30/doctors-dont-know-what-to-do-with-data-from-fitness-trackers/>, November 30, 2015.
2. OZY. Can This Ring Diagnose Your Depression? <https://www.ozy.com/fast-forward/can-this-ring-diagnose-your-depression/70850>, August 27, 2016.
3. The Motley Fool. Fitbit Partners With Google Cloud -- but Will Doctors Care? <https://www.fool.com/investing/2018/05/02/fitbit-partners-with-google-cloud-but-will-doctors.aspx>, May 2, 2018.
4. Business Insider India. US public-health experts say they're staying home this Thanksgiving - but some will still gather with family, <https://www.businessinsider.in/science/news/us-public-health-experts-say-theyre-staying-home-this-thanksgiving-but-some-will-still-gather-with-family/articleshow/78984694.cms>, November 1, 2020.
5. The Hill. Retailers, shoppers prepare for scaled-down Black Friday, <https://thehill.com/business-a-lobbying/business-a-lobbying/526633-retailers-shoppers-prepare-for-scaled-down-black>, November 19, 2020.

6. DCist. How Locals Are Making Pandemic Pods Work, <https://dcist.com/story/20/11/30/locals-making-quarantine-pods-covid19-dc-md-va/>, November 30, 2020.
7. Yahoo Money. Commentary: Free masks: The best thing the federal government can do to save lives right now. <https://money.yahoo.com/commentary-free-masks-best-thing-090000834.html>, February 11, 2021.
8. The Hill. Restaurants face a gloomy Valentine's Day, <https://thehill.com/business-a-lobbying/business-a-lobbying/538644-restaurants-face-a-gloomy-valentines-day>, February 13, 2021.
9. Maryland Matters. Game-Changing One-Dose Vaccine Produced In Maryland Could Be Available Shortly, <https://www.marylandmatters.org/2021/02/25/game-changing-one-dose-vaccine-produced-in-maryland-could-be-available-shortly/>, February 25, 2021.
10. Bossier Now. State to See Big Increase in Number of Available COVID Vaccine Doses Next Week, <https://www.bossiernow.com/state-to-see-big-increase-in-number-of-available-covid-vaccine-doses-next-week/>, February 25, 2021.
11. ABC News. Why a 4th COVID-19 wave may look different than previous surges, <https://abcnews.go.com/Health/4th-covid-19-wave-previous-surges/story?id=76655910>, March 28, 2021.
12. The Hill. Businesses weigh issues with 'vaccine passports', <https://thehill.com/business-a-lobbying/business-a-lobbying/546832-businesses-weigh-issues-with-vaccine-passports>, April 7, 2021.
13. National Public Radio. Meet Maryland's Secret Weapon In The Battle To Close The Latino Vaccination Gap, <https://www.npr.org/sections/health-shots/2021/07/07/1012502246/meet-marylands-secret-weapon-in-the-battle-to-close-the-latino-vaccination-gap>, July 7, 2021.
14. DCist. Immunocompromised Residents Felt 'Left Behind' As The D.C. Region Lifted Pandemic Restrictions, <https://dcist.com/story/21/07/29/immunocompromised-dc-residents-say-they-were-forgotten/>, July 29, 2021.
15. DCist. All D.C.-Area Jurisdictions Report 'Substantial' Transmission Of COVID-19, <https://dcist.com/story/21/08/05/all-dc-area-jurisdictions-report-substantial-covid-19-spread/>, August 5, 2021.
16. Yahoo News. Public health collides with politics as latest wave of mask wars take off, <https://news.yahoo.com/public-health-collides-politics-latest-120119435.html>, August 8, 2021.
17. California Healthline. Apple Aims to Push More Patient Data to Doctors. But Who Can Gauge Its Impact on Health? <https://californiahealthline.org/news/article/apple-patient-health-data-pipeline-to-doctors/>, August 11, 2021.
18. The Washington Informer. All But Two Maryland Counties Have 'High' or 'Substantial' COVID Transmission: CDC Data, <https://www.washingtoninformer.com/all-but-two-maryland-counties-have-high-or-substantial-covid-19-transmission-cdc-data/>, August 11, 2021.
19. DCist. 'It Feels Like Groundhog Day': How D.C. Residents Are Readjusting To Life With Delta, <https://dcist.com/story/21/08/13/dc-residents-adjusting-to-life-with-masks-and-delta-variant/>, August 13, 2021.
20. Undark Magazine. Pushing Health App Data to Doctors: A Burden or an Asset? <https://undark.org/2021/08/17/pushing-health-app-data-to-doctors-burden-or-asset/>, August 17, 2021.

21. The Hill. The Memo: Boos for Trump show scale of vaccine challenge, <https://thehill.com/homenews/the-memo/569089-the-memo-boos-for-trump-show-scale-of-vaccine-challenge>, August 24, 2021.
22. Pew. You've Been Vaccinated. Now Prove It. <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2021/08/20/youve-been-vaccinated-now-prove-it>, August 20, 2021.
23. Yahoo. These 8 States Are Seeing the Worst COVID Surges Right Now, <https://www.yahoo.com/lifestyle/8-states-seeing-worst-covid-193137763.html>, August 31, 2021.
24. The Hill. The Memo: COVID-19 frustrations rise alongside delta surge, school reopenings, <https://thehill.com/homenews/the-memo/570086-the-memo-covid-frustrations-rise-alongside-delta-surge-school-reopenings>, August 21, 2021.
25. DCist. Heading Into Another Pandemic Fall, Experts Say Case Trajectory Hinges On Improved Vaccination Rates, <https://dcist.com/story/21/09/24/regional-covid-cases-may-decline-fall-vaccines/>, September 24, 2021.
26. DCist. Here's What You Need To Know About Vaccine Booster Distribution In The Washington Region, <https://dcist.com/story/21/09/28/what-to-know-about-boosters-in-the-dc-region/>, September 28, 2021.
27. Business Insider. Americans who aren't eligible for a COVID-19 booster are getting the shot no questions asked in pharmacies and doctors' offices, <https://www.businessinsider.com/americans-not-eligible-for-covid-19-booster-getting-it-anyways-2021-9>, September 30, 2021.
28. Axios. Montgomery Co. drops its mask mandate, <https://www.axios.com/local/washington-dc/2021/10/28/montgomery-county-drops-mask-mandate>, October 21, 2021.
29. Axios. Where to wear a mask in the D.C. region, <https://www.axios.com/local/washington-dc/2021/11/12/dc-area-mask-rules>, November 12, 2021.
30. DCist. D.C. To Lift Indoor Mask Mandate Next Week, <https://dcist.com/story/21/11/16/dc-mask-mandate-dropping-next-week/>, November 16, 2021.
31. DCist. This Holiday Season, Unvaccinated Means Uninvited For Some Locals, <https://dcist.com/story/21/11/22/thanksgiving-holidays-unvaccinated-family/>, November 22, 2021.
32. Vox. At-home Covid-19 tests are getting better. Experts say: Stock up for winter. <https://www.vox.com/future-perfect/22790673/home-covid-tests-molecular-antigen-winter-holidays>, November 23, 2021.
33. The Jewish Voice. Want normalcy? Cheap COVID home tests are the way, <https://thejewishvoice.com/2021/12/want-normalcy-cheap-covid-home-tests-are-the-way/>, December 1, 2021.
34. Yahoo Finance. Here's the lowdown on COVID-19 tests right now, <https://finance.yahoo.com/news/heres-the-lowdown-on-covid-tests-right-now-110247733.html>, December 18, 2021.
35. DCist. The DC Region Is Shattering COVID Case Records, <https://dcist.com/story/21/12/21/dc-covid-cases-breaking-records/>, December 21, 2021.
36. DCist. COVID Cases Are At All-Time High In DC - And Among The Worst In The Country, <https://dcist.com/story/21/12/24/covid-cases-all-time-high-in-dc-and-among-worst-in-the-country/>, December 25, 2021.
37. The Hill. Washington, D.C. has reported a record number of COVID-19 infections heading into the holiday weekend, according to DCist/WAMU.,

- <https://thehill.com/policy/healthcare/public-global-health/587286-dc-covid-19-cases-reach-new-high>, December 25, 2021.
38. DCist. COVID-19 Caseloads Are Breaking Records In Northern Virginia, <https://dcist.com/story/21/12/27/covid-breaking-records-northern-virginia/>, December 27, 2021.
 39. NPR. The nation's capital is the worst place for COVID-19 infections right now, <https://www.npr.org/2021/12/28/1068417547/the-nations-capital-is-the-worst-place-for-covid-19-infections-right-now>, December 28, 2021.
 40. KSUT Public Radio. The nation's capital is the worst place for COVID-19 infections right now, <https://www.ksut.org/2021-12-28/the-nations-capital-is-the-worst-place-for-covid-19-infections-right-now>, December 28, 2021.
 41. KNBA Alaska. The nation's capital has the highest COVID risk level in the country | knba, <https://www.knba.org/post/nations-capital-worst-place-covid-19-infections-right-now>, December 29, 2021.
 42. Fox News. Biden admin's plan to distribute 500M COVID tests starting next month not nearly enough, health experts say, <https://www.foxnews.com/health/biden-admin-plan-distribute-500m-rapid-covid-tests-not-enough>, December 30, 2021.
 43. Yahoo News. Biden admin's plan to distribute 500M COVID tests starting next month not nearly enough ..., <https://www.yahoo.com/now/biden-admin-apos-plan-distribute-112620035.html>, December 30, 2021.
 44. DCist. Omicron Surge Drives Hospitalizations To Record-Breaking Levels In DC Region - DCist, <https://dcist.com/story/21/12/31/omicron-surge-drives-hospitalizations-dc-region/>, December 31, 2021.
 45. Yahoo News. Hospitalization data, preventative measures discussed in final press conference of the year, <https://news.yahoo.com/hospitalization-data-preventative-measures-discussed-050100550.html>, December 31, 2021.
 46. Axios. D.C. starts 2021 amid COVID-19 surge, <https://www.axios.com/local/washington-dc/2022/01/03/covid-omicronsurges-dc-2021>, January 3, 2022.
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7. Funding History

a) **Funded projects** (Research, Training Grants, Contracts, etc.)

1. Assessing the Role of Technology in Hospital Design (ART in HD), PI: Peter Schulam, U.S. Army Medical Research and Material Command, \$299,998, Co-Investigator, 100% annual effort, August 1, 2010 to September 29, 2012.
2. Graduate School Research and Scholarship Award, PI: Neil J. Sehgal, University of Maryland, \$10,000, Principal Investigator, Summer 2018.
3. Evaluation of the Delaware Contraceptive Access Now (DEL-CAN) Program, PI: Michael Rendall, Anonymous Private Foundation, \$9,042,287, Co-Investigator, 32% annual effort, June 1, 2016 to May 31, 2021.
4. Monitoring and Evaluation of Baltimore Health Corps Pilot, PI: Dylan Roby, Rockefeller Foundation, \$187,057, Co-PI, 33% annual effort, August 1, 2020 to June 7, 2021.
5. CoVPN 3006: A Study of SARS CoV-2 Infection and Potential Transmission in Individuals Immunized With Moderna COVID-19 Vaccine, Site PI: Neil J. Sehgal, National Institute of Allergy and Infectious Disease, COVID-19 Prevention Network (Operation Warp Speed), Fred Hutchinson Cancer Research Center (Project Number 2UM1AI068635-15), \$92,700, 7% annual effort. March 24, 2021 to December 30, 2021.
6. CoVPN 3006: A Randomized Controlled Study to Assess SARS CoV-2 Infection, Viral Shedding, and Subsequent Potential Transmission in Individuals Immunized With Moderna COVID-19 Vaccine, Site PI: Neil J. Sehgal, National Institute of Allergy and Infectious Disease, COVID-19 Prevention Network (Operation Warp Speed), Fred Hutchinson Cancer Research Center (Project Number: 3UM1AI068635-15S2), \$3,122,835, 33% annual effort. March 24, 2021 to December 30, 2021.
7. HealthyMe/MiSalud Smartphone Application: Identifying Mechanisms to Engage African Americans and Hispanics in Personal Health Libraries, PI: Cynthia Bauer, National Library of Medicine (Project Number: 1R01LM013039), \$1,000,000, Co-Investigator, 32% annual effort, September 18, 2018 to May 31, 2023.
8. Field Intervention Study, PI: Donald K. Milton (University of Maryland School of Public Health), BALVI Philanthropic Fund, \$9,400,000, Co-Investigator, 32% annual effort in 2023.
9. PIPP Phase I: Evaluating the Effectiveness of Messaging and Modeling During Pandemics (PandEval), PI: Louiqa Raschid (University of Maryland), National Science Foundation, \$999,537, Co-Principal Investigator**, 8.33% annual effort, June 27, 2022 to present.

10. Developing a Waiver Framework for California's Potential Unified Financing Model, PI: Neil J. Sehgal (subcontractor to Prime: UC Irvine), California Health and Human Services Agency, \$10,000, 5% annual effort, June 30, 2025 to June 30, 2026.

b) Pending Applications

1. PIPP Phase II: Theme 4: PRO-social Technologies & Equitable Communication Tools (PROTECT) Center for Pandemics, PI: Louiqa Raschid (University of Maryland), National Science Foundation, \$18,000,000, Co-Principal Investigator**, 8.33% annual effort.
2. Expeditions in Computing: Persona Centered Community Digital Twin for Improved Resilience (CommunityTwin), PI: Louiqa Raschid (University of Maryland), National Science Foundation, \$15,000,000, Co-Principal Investigator**, 15% annual effort.
3. CommunityTwin Moonshot: AI Civic Infrastructure for Community Resilience, PI: Louiqa Raschid (University of Maryland), Laude Institute Moonshots Program, \$250,000, Co-Principal Investigator, 10% annual effort.

* Conducted as University of Maryland Principal Investigator for the COVID-19 Prevention Network (CoVPN), a functional unit within Operation Warp Speed and established by the National Institute of Allergy and Infectious Diseases to assist in the coordination and implementation of phase 3 efficacy trials for COVID-19 vaccine candidates. These trials ultimately led to the successful completion of multiple studies and US Food and Drug Administration authorized COVID-19 vaccines. For a description of the CoVPN see: Mena Lora AJ, Long JE, Huang Y, et al. Rapid Development of an Integrated Network Infrastructure to Conduct Phase 3 COVID-19 Vaccine Trials. *JAMA Netw Open*. 2023;6(1):e2251974. doi:10.1001/jamanetworkopen.2022.51974

** NSF does not infer any distinction in scientific stature among multiple PIs, whether referred to as PI or co-PI. NSF designates (co) Principal Investigators (PI) as "the individuals designated by the proposing/recipient organization and approved by the Federal research funding agency who contribute in a substantive, meaningful way to the scientific development or execution of a research and development project proposed to be carried out with a research and development award." On projects with more than one Principal Investigator, the first one listed is the "contact PI", with whom all communications between NSF program officials and the project relating to the scientific, technical, and budgetary aspects of the project take place.

8. Public Health Practice Activities

1. COVID-19 Vaccine Effectiveness and Public Health Response Research: As Site Principal Investigator for two NIAID-funded and Fred Hutchinson Cancer Research Center coordinated COVID-19 Prevention Network (CoVPN) studies, I led clinical research assessing SARS-CoV-2 infection rates, vaccine efficacy, and viral transmission among vaccinated populations. This work supported Operation Warp Speed, contributed to national and international public health guidance about mRNA vaccine efficacy and deepened understanding of vaccine impact, informing Centers for Disease Control and Prevention policy and practice for current and future pandemic responses.
2. Campus COVID-19 Response: At the University of Maryland I was invited by the president of the university to serve on the Health, Safety & Risk Management Task Force and the Return

- to Campus Work Group, and to consult on the COVID-19 Testing, Metrics & Operations Monitoring Group. In this work I advocated for science-based risk-mitigation to the highest levels of University (and State) administration, and closely coordinated with state and local officials on response to and recovery from the pandemic.
3. Public Health Workforce Development: As Co-Investigator for the Rockefeller Foundation–funded evaluation of the Baltimore Health Corps Pilot, I collaborated with government, philanthropic, and community partners to assess an innovative workforce development initiative that integrated pandemic response with economic opportunity. This project prioritized employment of individuals from historically marginalized communities and generated evidence to inform equitable public health workforce strategies nationally. I also have a significant ongoing set of projects examining gender and race-based disparities in salary and promotion among healthcare workers.

9. Conferences and Symposiums (* denotes invited presentation)

1. Hospital Medicine Re-engineering, Society for Hospital Medicine Annual Research Meeting, Las Vegas, NV, March 2014.
2. Predictors of Readmission in a National Cohort of Hospitalized Patients, AcademyHealth Annual Research Meeting, San Diego, CA, June 9, 2014.
3. Digital Health Innovation. CTSI, UCSF Medical Center. San Francisco, CA, August 13, 2014.*
4. An Early Assessment of Accountable Care Organizations Efforts to Engage Patients and Their Families. AcademyHealth Annual Research Meeting, Minneapolis, MN, June 2015.
5. Social Spillover Among Hospitalized Roommates. AcademyHealth Annual Research Meeting, Boston, MA, June 2016.
6. Preventability and Causes of Readmissions in a National Cohort of General Medicine Patients. AcademyHealth Annual Research Meeting, Boston, MA, June 2016.
7. Disparities in Health Insurance Uptake after the Affordable Care Act By Limited English Proficient (LEP) Asians and Latinos in California. APHA's 2018 Annual Meeting & Expo, Nov. 10-Nov. 14, 2018.
8. Gender Pay Parity Among Physicians in the University of California. AcademyHealth Annual Research Meeting, Washington, DC, June 2019.
9. Exploring the Gender Pay Gap Among Physicians in the University of California. Center for Health Services and Outcomes Research, Johns Hopkins Bloomberg School of Public Health. May 2, 2020.*
10. Cohort Turnover and the July Effect on Mortality in California Hospitals. AcademyHealth Virtual Annual Research Meeting, 2020.
11. Exploring the Gender Pay Gap Among Clinicians in the University of California. AcademyHealth Virtual Annual Research Meeting, 2020.
12. The Relationship between Functional and Activity Limitations and Dental Services Use Among Older Adults with Dental Insurance Coverage. AcademyHealth Virtual Annual Research Meeting, 2020.
13. Generosity and benefit design of graduate student health insurance in the United States. APHA's 2020 VIRTUAL Annual Meeting and Expo, Oct. 24-28, 2020.
14. Exploring the Gender Pay Gap Among Physicians in the University of California. Program in Health Economics and Outcomes Research Methodologies, University of Washington School of Pharmacy. December 8, 2021.*

15. The Association Between COVID-19 Mortality and County Level Partisan Divide in the United States. Program in Public Health Inaugural Research Seminar, University of California, Irvine April 27, 2022.*
16. Integrating AI and Prompt Engineering Skills into MHA Programs: A Future Imperative. Association of University Programs in Health Administration Annual Conference (accepted), Columbus, OH, June 2025.

10. University Service

a) Academic Leadership

1. Director, Master of Health Administration Program, Department of Health Policy and Management, University of Maryland School of Public Health, 2016-2023
2. Director, Master of Public Health in Health Care Management Program, Department of Health Policy and Management, University of Maryland School of Public Health, 2020-2023
3. Director, Graduate Programs in Health Services Administration (MHA and EMHA), Department of Health Systems and Population Health, University of Washington School of Public Health, 2023-

b) University Service

1. Representative, Graduate Assembly, UC Berkeley School of Public Health, 2012-2015
2. Representative, University Senate, Department of Health Policy and Management, University of Maryland School of Public Health, 2018-2023
3. Member, Senate Executive Committee, Department of Health Policy and Management, University of Maryland School of Public Health, 2018-2023
4. Member, COVID-19 Health, Safety & Risk Management Task Force, University of Maryland, 2020-2022
5. Member, COVID-19 Return to Campus Work Group, University of Maryland, 2020-2022
6. Consultant, COVID-19 Testing, Metrics & Operations Monitoring Group, University of Maryland, 2020-2022
7. Member, Research Technology Working Group, Division of Information Technology, University of Maryland, 2017-2023
8. Founding Member, Core Team, University of Washington Civic Health Initiative, 2024-
9. Facilitator, Quarterly Tri-Campus University of Washington Democracy Scholars Meetups, University of Washington Civic Health Initiative, 2025-
10. Representative, Faculty Senate, Department of Health Systems and Population Health, University of Washington School of Public Health, 2025-

c) Service to College/Unit

1. Member, School of Public Health Diversity Committee, University of Maryland School of Public Health, 2016-2017
2. Faculty Representative, School of Public Health Alumni Association, University of Maryland School of Public Health, 2016-2023
3. Chair, Robert and Barbara Gold Public Health Innovation Award Committee (Founding Chair), University of Maryland, University of Maryland School of Public Health, 2017-2023

d) Departmental Service

1. Member, Executive Committee, Division of Health Services and Policy Analysis, UC Berkeley School of Public Health, 2011-2013
2. Member, Admissions Committee, Department of Health Policy and Management, University of Maryland School of Public Health, 2016-2023
3. Member, Merit Review Committee, Department of Health Policy and Management, University of Maryland School of Public Health, 2016-2023
4. Chair, Master of Health Administration Admissions Committee, Department of Health Systems and Population Health, University of Washington School of Public Health, 2023-
5. Chair, Executive Master of Health Administration Admissions Committee, Department of Health Systems and Population Health, University of Washington School of Public Health, 2023-
6. Member, Equity, Diversity and Inclusion Committee, Department of Health Systems and Population Health, University of Washington School of Public Health, 2023-

11. Professionally-Related Community Service

1. Coach, Health Services Healthcare Executives of Southern California Healthcare Administration College Bowl Case Competition Team Coach, Department of Health Policy and Management, UCLA, 2009-2011
2. Consulting Member, UCLA Ashe Student Health Center, Quality Advisory Board, 2010-2011
3. Member, UCLA Ashe Student Health Center, Quality Improvement Committee, 2011-2012
4. Coach, National Association of Health Services Executives Everett V. Fox Student Case Competition Coach, Department of Health Policy and Management, University of Maryland School of Public Health, 2017-2023
5. Coach, Washington Metropolitan Area Chapter of the National Association of Health Services Executives Health Innovation Competition Coach, Department of Health Policy and Management, University of Maryland School of Public Health, 2017-2023
6. Coach, Cornell Sloan Program in Health Administration Case Competition, Department of Health Systems and Population Health, University of Washington School of Public Health, 2023-

12. Teaching History

a) Formal Courses

1. HSMGMT 523: Informatics in Healthcare Management
3-credit graduate-level course that introduces students to medical informatics, focusing on the representation, organization, and manipulation of biomedical information and knowledge, and explores its applications in healthcare management.
28 graduate students, 100% responsibility, Autumn 2024
2. HLSA 300: Introduction to Health Policy & Services (UMD School of Public Health)
3-credit undergraduate course that provides a multidimensional view of public health policy and services, the nature and development of policy, public health policy, and the financing and delivery of health care services, with a significant emphasis on understanding the health care system and health care reform.
136 undergraduate students, 100% responsibility, Fall 2018
138 undergraduate students, 100% responsibility, Spring 2019
159 undergraduate students, 100% responsibility, Fall 2019
141 undergraduate students, 100% responsibility, Spring 2020

- 139 undergraduate students, 100% responsibility, Fall 2020
- 160 undergraduate students, 100% responsibility, Spring 2021
- 167 undergraduate students, 100% responsibility, Fall 2021
- 178 undergraduate students, 100% responsibility, Spring 2022
- 180 undergraduate students, 100% responsibility, Fall 2022
- 200 undergraduate students, 100% responsibility, Spring 2023
- 3. HLSA 750: Healthcare Management Information Systems (UMD School of Public Health)
3-credit graduate-level course that provides a comprehensive overview of the analysis, design, evaluation, selection, installation, use, and management of information systems in healthcare settings.
6 graduate students, 100% responsibility, Fall 2018
5 graduate students, 100% responsibility, Spring 2018
10 graduate students, 100% responsibility, Fall 2019
- 4. HLSA 710: Healthcare Management: Foundations and Principles (UMD School of Public Health)
3-credit graduate-level course that examines essential managerial concepts and activities necessary to achieve the goals of healthcare organizations.
20 graduate students, 100% responsibility, Spring 2017
12 graduate students, 100% responsibility, Spring 2018
12 graduate students, 100% responsibility, Spring 2019
- 5. BUDT 758M: Healthcare Information Systems (UMD Robert H. Smith School of Business)
3-credit graduate-level course that provides students with a comprehensive understanding of the analysis, design, evaluation, selection, installation, use, and management of information systems in healthcare settings.
21 graduate students, 100% responsibility, Fall 2016
38 graduate students, 100% responsibility, Fall 2017
22 graduate students, 100% responsibility, Fall 2018
28 graduate students, 100% responsibility, Fall 2019
- 6. HLSA 766: Foundational Readings in Health Services Research (UMD School of Public Health)
3-credit doctoral-level course in preparation for the qualifying exam in the Health Services Ph.D. program. Provides an overview of the foundational papers that inform health services research and its related disciplines, including literature on key conceptual models, classic empirical studies, and research illustrating cutting edge methods or findings.
7 graduate students, 50% responsibility with Michel Boudreaux (co-developed course and qualifying examination), Spring 2016
- b) Other Teaching (Guest Lectures, Continuing Education, Clinical Teaching, etc.)
 - 1. PH X446: Performance Management, Quality Improvement & Information Technology in Health Care Organizations (UCLA Extension Certificate Program in Health Care Management & Leadership)
32 continuing education students, 50% responsibility with Dylan Roby, Spring 2011
32 continuing education students, 50% responsibility with Dylan Roby, Spring 2012
 - 2. HLSA 300: Introduction to Health Policy & Services (UMD School of Public Health)
Guest lecture on quality of care, Fall 2016
Guest lecture on patient safety, Fall 2016
Guest lecture on quality of care, Spring 2017

- Guest lecture on patient safety, Spring 2017
- Guest lecture on quality of care, Fall 2017
- Guest lecture on patient safety, Fall 2017
- Guest lecture on quality of care, Spring 2018
- Guest lecture on patient safety, Spring 2018
- 3. HLSA 610: Introduction to Health Systems (UMD School of Public Health)
 - Guest lecture on quality of care, Fall 2016
 - Guest lecture on patient safety, Fall 2016

c) Independent Study

1. Shuo Huang, Fall 2018
2. Jun Chu, Fall 2018
3. Ivy Benjenk, Fall 2018
4. Veeraj Shah, Spring 2018
5. Nadiyah Alvi, Spring 2018
6. Mifrah Baqui, Spring 2018
7. Najla Alfares, 2023-2025

13. Advising and Formal Mentoring

a) PhD Dissertations, chair

1. Kaka Hughes, 2017-2020
2. Elle Pope, 2018-2023
3. Shuo Huang, 2017-2024*
4. Kaitlynn Robinson-Ector, 2019-2024*
5. Michelle Le Truong, 2020-2024*

* denotes doctoral mentee in the Ph.D. program in Health Services Research in the Department of Health Policy and Management at the University of Maryland School of Public Health. Dissertations chaired while in-rank at the University of Washington.

b) Masters Theses, chair

1. Sanjeev Ganesh, MHA, 2016-2018
2. Virginia Powell, MHA, 2016-2018
3. Milad Marani, MHA, 2016-2018
4. Nikita D'Souza, MHA, 2016-2018
5. Avni Patel, MHA, 2016-2018
6. Brianna Jones, MHA, 2017-2019
7. Allison Burt, MHA, 2017-2019
8. Joana Romero, MHA, 2017-2019
9. Nicole Stephenson, MHA, 2017-2019
10. Imari Riley, MHA, 2017-2019
11. Gillian Hamilton, MHA, 2018-2020
12. Mordecai Bell, MHA, 2018-2020
13. Desmond Dinapo, MHA, 2018-2020
14. Bailey Johnson, MHA, 2019-2021
15. Nadiyah Alvi, MHA, 2019-2021

16. Fabian Donate, MHA, 2019-2021
17. Elizabeth Hutman, MHA, 2019-2021
18. Austin Cantrell, MHA, 2020-2022
19. Bria Moore, MHA, 2020-2022
20. Cassidy Hufford, MHA, 2020-2022
21. Samantha Sinay, MHA, 2021-2023
22. Rachel Cohen, MHA, 2021-2023
23. Chawin Reilly, MHA, 2021-2023
24. Julia Wolfrey, MHA, 2021-2023
25. Shweta Kannan, MPH, 2022-2023
26. Abirami Thyagarajan, MPH, 2022-2023
27. Hammad Baqui, MPH, 2022-2023
28. Emily Feigenbaum, MPH, 2022-2023
29. Emily Sterling, MPH, 2022-2023

c) Mentored Scientists and Postdocs

1. Dimiter Milev, MPH, 2013
2. Ryan Greysen, MD, 2013-2015
3. Nihar Patel, MD, 2014-2016
4. Molly Reid, PhD, MPH, 2015-2017
5. Samantha Phillips, MD, 2015-2016

d) MS and PhD committees in non chair role

1. Ellesse Roselee Akre, 2017-2020
2. Ebony Toussaint, 2018-2021
3. Duncan McElfresh, 2016-2021
4. Ren Hao Wang*, 2022-2024
5. Herve Fossou (UW Epidemiology), 2025-

* denotes doctoral mentee in the Ph.D. program in Health Services Research in the Department of Health Policy and Management at the University of Maryland School of Public Health. Dissertations committee service while in-rank at the University of Washington.

e) Other Mentoring, undergraduate research

1. Veeraj Shah, 2018-2021

f) Academic Advising

1. Kathryn Litwinski, MHA, 2023-
2. Josie Ulrich, MHA, 2023-
3. Brayden McLaughlin, MHA, 2023-

November 21, 2025

Dear Drs. Dill and Huckfeldt and Members of the Search Committee,

I am writing to apply for the position of Associate Professor (with tenure) and Director of the Master of Healthcare Administration (MHA) Program in the Division of Health Policy & Management at the University of Minnesota School of Public Health. I am a health services researcher and educator with a scholarly focus on healthcare organizations and management, with specific expertise in delivery system performance, workforce development, and digital health transformation. I currently serve as Associate Professor in the Department of Health Systems and Population Health and Austin Ross Endowed Chair in Health Administration at the University of Washington, where I direct the Graduate Programs in Health Services Administration, including our CAHME-accredited MHA and Executive MHA programs.

Across my career, I have integrated program leadership, research, teaching, and public health practice in ways that align closely with the expectations you describe. I have been accountable for the strategic, operational, and financial performance of graduate health administration programs; overseen curriculum and competency frameworks in CAHME-accredited settings; mentored and supervised faculty, affiliate and adjunct instructors, and staff; led accreditation and graduate program review processes; addressed complex student performance and professionalism issues; represented programs in school and university governance; and built strong relationships with health systems, professional organizations, and peer programs. It would be an honor to bring these experiences to Minnesota's highly ranked MHA program and to contribute to the Division's missions of education, research, and community engagement.

MHA Program Leadership and Administration

At the University of Washington, I serve as Director of the Graduate Programs in Health Services Administration and provide academic and operational leadership for both our residential MHA and Executive MHA programs. In this role I am responsible for overall program strategy, operational performance, and stewardship of resources, working closely with faculty, staff, and departmental and school leadership. I collaborate with our senior administrator on annual budgeting and financial planning, guide enrollment strategy and admissions targets, and consider the implications of instructional staffing models for both quality and sustainability. These responsibilities mirror the University of Minnesota's expectation that the MHA Director be accountable for strategic, operational, and financial performance. A central focus of my leadership has been curriculum and competency stewardship. I co-chair our Curriculum and Teaching Workgroup for the MHA and EMHA programs, where I lead efforts to review and refine our curriculum using data from alumni and employer feedback, peer program benchmarking, and CAHME standards. This work has included examining program structure, credit loads, course sequencing, and the integration of competencies across the curriculum. In my role I oversee curriculum and competency frameworks and collaborate with divisional leadership on instructional staffing.

I have significant experience with accreditation and review processes. At UW, I lead our CAHME and CEPH accreditation efforts for the MHA and EMHA programs, including providing timely data submissions, coordinating curriculum mapping and competency documentation, and preparing for our next self-study and site visit. I also led our recent university-level Graduate Program Review, which required assembling a comprehensive self-study, engaging with internal and external reviewers, and translating their

recommendations into a focused improvement plan. These processes sharpened my skills in using data to inform strategic decisions and align program structures with internal expectations and external standards.

As our MHA programs are interdisciplinary and housed academically in the office of the dean, my leadership portfolio also includes chair-level supervision, mentoring, and development of faculty, intermittent lecturers, and staff. I supervise professional staff who manage day-to-day operations and student services, and I work closely with them to ensure that advising, practicum placement, and administrative processes are responsive and student-centered. I mentor ladder-rank faculty, as well as affiliate, adjunct, and clinical (AAC) faculty who teach in our programs, many of whom bring deep practice experience but have less experience with pedagogy or competency-based education. I provide guidance on course design, assessment, inclusive instructional practices, and the incorporation of current health services research into applied courses. I have also created structures to support new instructors entering our programs, with a particular focus on preparing them to teach professional master's students.

Student performance and academic integrity are another aspect of my work. As Program Director and a member of departmental leadership, I routinely address issues related to academic progress, professionalism, and misconduct. I partner with faculty, staff, and disability and student affairs colleagues to respond to challenges in ways that uphold standards while caring for student well-being. These responsibilities have required clear communication, fairness, and an understanding of university policy and process, all of which are central to the Minnesota director role.

Beyond the MHA programs themselves, I represent our graduate administration programs in departmental and school-wide settings. I serve in the UW Faculty Senate, bringing perspectives from health systems and public health to campus-wide governance. I also helped launch and continue to support the School's Civic Health Initiative, which sponsors teaching and scholarship on civic engagement and democratic resilience. These experiences prepared me to represent the MHA program on Division and School education policy committees and to contribute to shared governance at Minnesota.

Finally, I actively cultivate relationships with alumni, practice partners, donors, and peer programs. I have worked to strengthen our ties with health systems and community organizations across the Seattle area, including UW Medicine, Providence Swedish, MultiCare, and a wide range of smaller clinical and social service organizations, to sustain high-quality practicum placements and applied projects. I engage alumni as guest speakers, mentors, and advisory voices, and I collaborate with colleagues participating in associations and networks such as AUPHA and AcademyHealth to share best practices across programs. These experiences position me well to work with School leadership to promote strong alumni engagement and to maintain Minnesota's leadership among MHA programs nationally.

Teaching and Advising in Healthcare Management

Teaching and advising are central to my academic identity. I teach core and elective courses in healthcare organizations and management, health systems, and health informatics to MHA, EMHA, and MPH students. Across settings, I seek to prepare students to lead complex organizations, manage teams, and act with integrity and equity in decision making.

One defining feature of my teaching is my use of case-based pedagogy. I was trained in this method during my doctoral studies at the Haas School of Business at UC Berkeley and have refined it over years of teaching in both business and public health schools. Through carefully constructed cases, students assume the role of decision makers confronting strategic, operational, workforce, and ethical challenges. I

guide them through analyses that require attention to clinical realities, organizational structures, financial constraints, political context, and community impact. This approach builds analytic rigor and helps students practice the communication and facilitation skills they will need as managers.

My teaching has earned consistently strong student and peer evaluations. In my current role at the University of Washington, my graduate teaching has received median student ratings near the top of the scale, and peer reviews describe my classes as intellectually demanding, well organized, and inclusive. I am equally committed to mentoring other instructors. As co-chair of our Curriculum and Teaching Workgroup, I work with colleagues to interpret student feedback, revise assignments, clarify expectations, and incorporate inclusive pedagogical practices. I mentor AAC faculty in designing and delivering courses that connect their practice expertise with concepts in health services research and management.

I have also led and contributed to educational innovation. While at the University of Maryland (2016-2023), I redesigned a large undergraduate course during the early COVID-19 pandemic into a modular online format that used short videos and frequent assessments and received a Teaching Innovation Grant to support this work. At the University of Washington, I led the development of a faculty recording studio equipped for high-quality asynchronous content, and I mentor faculty in using digital tools to support HyFlex and online learning. In collaboration with AAC colleagues from industry, I recently co-led a project, accepted for presentation at the 2025 AUPHA Annual Meeting, on integrating AI and prompt engineering skills into MHA curricula. This work reflects my commitment to preparing students and faculty for a digital health environment in which leaders must interpret, govern, and effectively use advanced technologies.

Advising and mentoring are core parts of my teaching portfolio. I have formally advised many MHA and MPH students and supervised five PhD students as primary advisor, all of whom come from backgrounds underrepresented in academia and all of whom have secured positions in academic medicine or research-intensive roles. I provide guidance on course selection, practicum and fellowship opportunities, job searches, and professional identity formation. My mentorship emphasizes both high standards and humane, individualized support. The University of Maryland Graduate School recognized this commitment with its Graduate Faculty Mentor of the Year Award, which remains one of the honors I value most.

Research on Healthcare Organizations and Delivery Systems

My research program and disciplinary training align with the posting's emphasis on healthcare organizations and management, and throughout my career I have examined how health systems and the people within them respond to changing clinical, technological, and policy environments. My work spans three interrelated domains: delivery system performance and care transitions, structural and political determinants of health that shape organizational context, and digital health and information systems.

Early work, much of it in collaboration with colleagues at UCSF and UC Berkeley, focused on hospital medicine, care transitions, and organizational performance. These studies examined, among other topics, preventable readmissions, patient-centered factors influencing rehospitalization, and the relationships between medication reconciliation, team structures, and outcomes. This research informed health system efforts to improve quality and safety in the acute care setting and built my understanding of how hospital-level structures and management practices affect patient outcomes.

As my career progressed, my research expanded to examine structural and political determinants of health and their implications for organizations and communities. I led and co-authored work on historic redlining and contemporary health disparities, as well as analyses of COVID-19 mortality and vaccination

that drew attention to the ways political polarization and policy responses shaped health outcomes. A notable example is my Health Affairs article on the association between county-level partisan composition and COVID-19 mortality in the United States, which has been widely cited in public health, political science, and related fields and discussed by media outlets domestically and internationally. This work has informed conversations about how political context influences not only population health but also the operating environment of health systems and public health agencies.

In parallel, I have conducted research at the intersection of digital health, information systems, and patient engagement. This includes work on mHealth interventions, health literacy, co-designed digital tools for African American and Hispanic adults, and the implications of consumer health technologies and data streams for clinicians and organizations. Collaborative projects have brought together computer scientists, information scientists, and linguists to study how information flows, messaging, and digital infrastructure affect both individual behavior and system-level responses.

My funded research has included support from the National Science Foundation, the National Institute of Allergy and Infectious Diseases, foundations, and other partners. I have served as Principal Investigator, co-Principal Investigator, and Site Principal Investigator on multi-year grants that build interdisciplinary teams and cross-sector partnerships. I have also mentored colleagues and trainees in writing successful grant applications and in integrating community and practice partners into proposal development.

I look forward to contributing this research program to the Division of Health Policy & Management, collaborating with colleagues in health services research, policy, and administration, and engaging with the Division's research centers. I am particularly excited about opportunities to connect work on organizational behavior, structural determinants, and digital transformation with Minnesota's strengths in health policy and management and with the practice environment in the Twin Cities and beyond.

Professional, Community, and Disciplinary Service

At the University of Maryland, I served on the Academic Senate and its Executive Committee, contributing to deliberations on academic policy, student support, and institutional resilience. At the University of Washington, I represent my department in the Faculty Senate and serve on departmental committees related to equity, curriculum, and graduate education.

Within my home departments and schools, I have chaired or co-chaired admissions committees, curriculum committees, and special review groups. I co-led the Graduate Program Review of our MHA and EMHA programs at Washington. I helped launch and continue to lead aspects of the University of Washington's Civic Health Initiative, organizing Democracy Scholars meetups that bring faculty together to discuss civic engagement, misinformation, and our role in strengthening democratic institutions.

Professionally, I am an active member of AcademyHealth, the Academy of Management, the Organization Theory in Health Care Association, and AUPHA. I review manuscripts for leading journals, serve on the editorial board of Quality Management in Health Care, and mentor junior scholars through conference programs and informal networks. My public scholarship and media engagement are another dimension of service. By sharing evidence-based perspectives on COVID-19, health equity, and health policy with journalists, community organizations, and policymakers, I have sought to expand the reach and impact of research and to contribute to more informed public discourse. This work reflects my belief that academic public health practice includes not only research and teaching but also communication and advocacy.

grounded in rigorous evidence. Recently, I have experience success in publishing several op-eds about the passage of HR1's cuts to Medicaid and the effect of the government shutdown on SNAP.

Commitment to Diversity, Equity, and Inclusion

A sustained commitment to working effectively with individuals from diverse communities and cultures, and to advancing equity and inclusion, underlies my research, teaching, and leadership. My scholarship addresses health disparities related to race, ethnicity, socioeconomic status, and political marginalization, with projects on redlining, vaccination inequities, partisan gaps in COVID-19 mortality, and the experiences of historically underserved communities. These studies highlight how structural factors and institutional decisions perpetuate inequities and inform policy conversations at local and national levels.

Within academic programs, I have led and contributed to initiatives that integrate diversity, equity, inclusion, and anti-racism into curriculum and pedagogy. As co-chair of the MHA Curriculum Advocacy Team, I work with students, faculty, and staff to embed DEI principles throughout our courses. We review syllabi for representation and accessibility, develop shared learning goals related to equity, and create accountability mechanisms that support continuous improvement rather than one-time adjustments. I also serve on departmental equity committees and recently hosted a speaker on AAPI youth mental health and in-race provider availability, connecting departmental conversations about mental health, representation, and culturally responsive care.

My mentoring practices center equity and inclusion. My doctoral mentees have been students from backgrounds underrepresented in academia, and all have moved into careers in academic medicine or research. Many of my MHA and MPH advisees similarly identify as coming from groups historically excluded from leadership in healthcare management. I strive to create mentorship relationships that are attentive to structural barriers, that affirm students' identities and experiences, and that equip them with tools to navigate and transform institutions.

I would bring this same commitment to Minnesota, working collaboratively with colleagues, students, and staff to sustain inclusive learning environments, support a diverse student body, and ensure that the MHA program continues to prepare leaders who can advance equity in health systems. The University of Minnesota's MHA program and the 'Minnesota Model' have long set the standard for excellence in healthcare administration education. The opportunity to join the Division of Health Policy & Management as an Associate Professor with tenure and to serve as MHA Program Director is deeply compelling. I believe my experience directing CAHME-accredited programs, leading curriculum and accreditation work, mentoring faculty and students, securing and stewarding sponsored funding, and engaging with health systems and professional organizations aligns well with the responsibilities and aspirations of this role.

I welcome the opportunity to discuss how my background and vision could contribute to the continued success of Minnesota's MHA program and to the broader missions of the School of Public Health.

Sincerely,

A handwritten signature in black ink, appearing to read 'Neil J. Sehgal', with a stylized, looping flourish at the end.

Neil J. Sehgal, PhD, MPH

Associate Professor of Health Systems and Population Health
Austin Ross Endowed Chair in Health Administration
University of Washington School of Public Health

Application Forms

Instructions

I agree to the Terms and Conditions

Agree

Conflict of Interest Statements

Are either of the above conflict of interest statements true?

No

Are you authorized to work in the United States?

Yes

Would you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status) and/or support for a STEM OPT training program in order to maintain employment with the University of Minnesota?

No
