

June 17, 2020

Paul B. Rothman, M.D.
CEO, Johns Hopkins Medicine
Dean of the Medical Faculty,
Johns Hopkins University School of Medicine
Administration, Suite 100

Re: Matthew K. McNabney, MD Promotion to Professor of Clinical Medicine

Dear Dr. Rothman:

Faculty Appointment

With utmost enthusiasm, we are delighted to propose Matthew McNabney, MD, for promotion to Professor of Clinical Medicine, full-time. This recommendation is based on his sustained record of outstanding clinical care, program design and leadership, and his substantive leadership as Geriatrics Fellowship Program Director. As Medical Director of the Johns Hopkins Program of All-inclusive Care of the Elderly, Dr. McNabney is recognized nationally for his expertise in care of this uniquely, high-risk population.

Background

Dr. McNabney attended the University of Missouri-Kansas City where he completed the accelerated, 6-year combined Bachelor's Degree/Medical Degree program in 1987. After a categorical Internal Medicine residency at Northwestern University in Chicago, IL, he launched his career in geriatric medicine following a two-year fellowship at the University of California-Los Angeles, which he completed in 1993. He spent the first 4 years after fellowship working at Levindale Hebrew Geriatrics Center in Baltimore, MD before joining the faculty as an Assistant Professor of Medicine at Johns Hopkins in the Division of Geriatric Medicine and Gerontology in 1998. He was promoted to Associate Professor of Medicine in 2011.

Clinical Excellence and Effort

Since joining Hopkins faculty in 1998, Dr McNabney has focused his career on the care of older adults with the most complex and frail health status. He has established an outstanding record of accomplishment of direct patient care, program management and national leadership (effort redacted).

Dr. McNabney's principal contributions to clinical care have been as physician and medical director for the Program of All-Inclusive Care for the Elderly (PACE). He is acknowledged by colleagues for his excellent clinical skills as a primary provider of care for a very vulnerable population of older adults. We will outline some of those skills that he has mastered over the years to clearly distinguish his performance as "outstanding". His geriatric assessment skills are superb, as he is tasked with identifying which community-dwelling older adults are appropriate for enrollment into PACE and how that medical care plan should be initiated. Eligibility for enrollment (with financial support from

Medicare and Medicaid) is completely contingent on this assessment process. PACE patients typically have multiple chronic conditions (or “multi-morbidity”) and over half carry the diagnosis of dementia with functional impairment. In addition to managing this level of chronic disease and disability, Dr. McNabney is well known by his peers for his ability to guide patients and their families through the stages of “chronically ill and disabled” to a state of readiness for end of life care and comfortable death.

Regarding specific and measurable outcomes, Dr. McNabney has successfully led the Baltimore PACE program (known as “Hopkins ElderPlus” or HEP) to achieve lower than average hospitalization and nursing home rates when compared to the other 150 PACE sites in the US. In 2016 (the last year that this national data was available), Hopkins ElderPlus hospital days (per 1000 participants) was almost 30% lower than the national PACE average (2561 vs. 3601). In the same year, the nursing home utilization rate was 5% for all other PACE programs, while the HEP rate was 3.5%. Regarding medication use, Dr. McNabney has been successful at controlling polypharmacy in this frail older population with the average number of total meds for his patients being 7.4 prescriptions per month compared to 9.0 (the national average). The national I-SAT satisfaction survey of PACE enrollees (compiled by Vital Research) reported member satisfaction with the HEP medical provider as 93% compared to 88.6% for PACE physicians nationally in 2019.

Clinical Performance and Contributions

In 2002, Dr. McNabney became the Medical Director of Hopkins ElderPlus (HEP). This program is a fully-capitated health plan with full risk and \$13 million operating budget. Dr. McNabney oversees all medical services and is accountable for quality of care and patient care outcomes, including health care expenditures. Dr. McNabney’s leadership skills were quickly identified by members of the National PACE Association (NPA) and he has held many national leadership roles for this association. NPA is the national provider organization representing over 150 PACE programs in the U.S. Notably, Dr. McNabney served on the Board of Directors from 2011 to 2016. He has also served as Chair of the NPA Research Committee, which has helped to evaluate and disseminate best practices within PACE (OR#26,27,31). Because of his leadership within Hopkins ElderPlus, he has established HEP as a local, national and international destination for health care leaders seeking knowledge of best practices in community-based long-term care. Dr. McNabney has represented Hopkins as the medical voice of Hopkins ElderPlus to visitors from Center for Medicare and Medicaid Services (CMS), Maryland Department of Health and Mental Hygiene (DHMH) as well as numerous representatives from foreign health systems.

Recognition of Clinical Excellence

Dr. McNabney is an active leader within the American Geriatrics Society (AGS) where he is a fellow (AGSF). He was chair of the highly influential Clinical Practice and Models of Care committee (2010-2013). Under his leadership and co-authorship, the AGS disseminated its position on several key care challenges under the “Choosing Wisely Campaign”. In his most significant contribution, he was co-chair of the Task Force to Evaluate Multimorbidity in Older Adults, which led to the landmark publication, “Guiding Principles of the Care of Older Adults with Multimorbidity”. (OR#19) This led to Dr. McNabney presenting at the national conference of AGS in 2012, as well as presentations at national conferences in Richmond, VA and Orlando, FL.

In recognition of his clinical expertise and awareness of the educational needs of AGS membership, Dr. McNabney served on the program committee of the annual meeting for the American Geriatrics Society 2013-2016 and was chosen as Committee Chair for 2014-2015. In further recognition of his clinical expertise, Dr. McNabney was invited in 2018 by the former president of AGS to become one of the editors for “Ham’s Primary Care Geriatrics, 7th Edition”. This textbook is a key reference in

geriatric medicine and will be published in early 2020. He has also served as Special Advisor and author of two chapters in the Geriatrics Review Syllabus, 10th Edition (published by the American Geriatrics Society in 2019)

His expertise in PACE and community-based integrated health care for older adults has garnered international recognition. In 2015, Dr McNabney presented on the PACE model at the annual “Johns Hopkins-Peking Union Medical College (PUMCH) Symposium on Aging” in Beijing. The remarkable reception of this presentation led to his invitation for a 3-month onsite educational exchange with PUMCH in 2018, where Dr. McNabney worked directly with academic leaders at PUMCH as well as providers at the Taikang Continuing Care Retirement Community (CCRC) in Beijing. The primary objective of this exchange was to evaluate the current approach to provision of health services within Taikang (which was largely urgent care design). His assessment and guidance led to the design and implementation of a primary care approach within the CCRC to improve function and reduce need for higher levels of services. This inspired a geriatrics-focused, interdisciplinary team (similar to PACE but much smaller and less expensive to operate). Dr. McNabney presented his work in Beijing at the 2019 meeting of the American Geriatrics Society.

Dr. McNabney has been recognized internationally in other forums. This includes presentations on his work with community-dwelling older adults at conferences in Mexico (2012), Korea (2014), Norway (2016), China - Chengdu (2018), China - Wuhan (2019) and Nigeria (2020).

In recognition of his years of leadership in the area of diversity and inclusion, Dr. McNabney was awarded the Diversity Recognition Award by the Johns Hopkins Institutions Diversity Leadership Council in 2015. He has continued to personify these values on a daily basis – in his clinical care and leadership, as well in his role as teacher, mentor and fellowship program director. He realizes that success with inclusion is a mindset that occurs continuously, not intermittently.

Engagement in the Teaching Mission & Mentorship

Throughout his tenure on faculty at Hopkins, Dr. McNabney has recognized that his skills and clinical venue offer special opportunity to educate learners of all levels of training and across disciplines. Management of chronic disease, counseling older adults on end of life care and working within an interdisciplinary team have been the mainstays of his educational mission. It is from this base that he has been recognized as an outstanding clinician educator within Johns Hopkins, including twice being named Teacher of the Year by the geriatric medicine fellows.

In 2006, Dr. McNabney’s teaching skills and leadership within the Division of Geriatric Medicine and Gerontology were recognized when he was named the Fellowship Program Director. He has held that position since 2006 and has developed into a national leader among U.S. fellowship directors. Since he has been program director, there have been 60 fellowship graduates, including sixteen (16) who have joined JHU faculty and many more have entered academic medicine at other institutions in the U.S. (n=21). There are 4 trainees matched in the Hopkins geriatric medicine fellowship each year. He has been an active member of the Association of Directors of Geriatric Academic Programs (ADGAP) since becoming fellowship director in 2006 and been a member of the national meeting planning committee since 2016. He has also been internationally recognized with a presentation on US geriatric fellowship programs in Korea (2018).

Dr. McNabney has been extremely proactive in growing the capacity of the geriatrics fellowship at Johns Hopkins. Dr. McNabney has led several efforts to address challenges to funding fellowship positions, including a creative collaboration with the Baltimore VA Medical Center/University of Maryland, where there has been an arrangement that the VA funds JHU for one additional fellowship

position per year. In return, the JHU geriatrics fellows spend 2-3 months rotating at the VA with a total of 12 months served by JHU fellows, collectively. This has allowed us to train one additional fellow per year since 2016 and for our fellows to gain valuable experience within the VA health system (a key provider of geriatric care in the US and also a large volume employer of academic geriatricians). Dr. McNabney has also collaborated with the leadership at Moorings Park Retirement Communities in Naples, FL to establish an entirely new “Clinical Leadership” fellowship track, fully funded by Moorings Park. This involves 12 months of clinical training at JHU in Baltimore followed by 6-12 months of leadership training with medical directors and business managers at Moorings Park. It is a unique collaboration and is a model of training innovation for the rest of the U.S., where there is a significant shortage of geriatricians with this type of leadership preparation.

Dr. McNabney has been a mentor throughout his career to several trainees and colleagues of various disciplines. All geriatric medicine fellows work with him as a mentor in general skills development and career transition. He meets with all fellows several times a year, providing direct mentorship and guidance about careers in geriatric medicine. His CV outlines the diversity of career placement of graduates. He has also served as primary mentor for several fellows in the past 10 years; at least two of whom have taken positions within the Program of All-Inclusive Care for the Elderly (PACE) and NHs.

Dr. McNabney has also served as the primary mentor for all geriatric nurse practitioners at HEP. Since he began, he has assisted each of these NPs in skill development, and has mentored each of them in application and presentation of their work at national conferences (2002, 2008, 2010, 2012, 2014, and 2015). He has also successfully mentored the NPs at HEP to be semi-independent preceptors for Osler residents, Urban Health residents and Bayview residents which has greatly expanded the teaching bandwidth of geriatrics. To disseminate these teaching methods, he worked with his two NP colleagues to publish their experience as successful educational efforts with medicine residents (OR#39).

Since 2005, Dr. McNabney has consistently served as primary mentor to summer scholars (1st year medical students); total n=11. This initiative, funded by National Institutes on Aging, allows several students to work with faculty at Johns Hopkins. All of the students mentored by Dr. McNabney have presented at the annual meeting of the AGS and several have publications (OR#14,18,31,42).

Engagement and Contributions to the JHM Research & Discovery Mission

Dr. McNabney is author of over 40 peer-reviewed articles and 13 book chapters and has served as editor of Primary Care Geriatrics, 7th Edition. Finally, Dr. McNabney is editor of the first edition of the only book describing the PACE model, Community-based, Integrated care for Older Adults. This agreement has been finalized, all authors are committed and is scheduled to be completed in 2021.

Dr. McNabney’s role in the discovery mission at Hopkins has been diverse. He has initiated primary research (first author papers) in the realms of NH care (OR#3-6), PACE (OR# 41), and dementia care within assisted living (OR#11, 25). He has also has several papers where he served as collaborator and mentor (senior author) to trainees and junior faculty in a range of clinical topics and venues.

Publications, presentations and other communications disseminating clinical excellence

Dr. McNabney has been very active throughout his academic career with regard to presentations that have disseminated his skills and knowledge broadly. He has regularly presented at the national meeting of the National PACE Association (’02, ’04-’05, ’07-’15, ’17, ’19). His specialized skill set is well represented in these presentations, ranging from collaboration with sub-specialists in the care of older adults (’15) to the details of optimal coding in a risk-adjustment model of payment (’11). Several of his presentations have been invited by the NPA for “encore” presentations via webinar to the larger NPA audience (for those unable to attend the annual conference).

Dr. McNabney's most notable contribution to the American Geriatrics Society was serving as co-chair to the working group who created the Guiding Principles in the Care of Older Adults with Multimorbidity. He chaired the presentation of this work at the 2012 annual meeting in Seattle and was lead author of the publication in the Journal of the American Geriatrics Society in 2012 (GL#1).

Contribution to JHM initiatives and/or committees

Dr. McNabney's contribution to JHM has been through his leadership within the Division of Geriatric Medicine and Gerontology, as well as the DOM at Bayview and the SOM. He has been the co-chair of the Joint Practice Committee of Hopkins ElderPlus (HEP) since 2002, where he led quality improvement efforts to improve care and control utilizations. Notable initiatives have addressed end-of-life care, chronic pain management and use of the ER in the care of HEP enrollees.

From 2004-2007, Dr. McNabney worked as a medical volunteer at the Caroline Street Clinic which served the uninsured in East Baltimore. In 2020, he was recruited to assist the Hopkins Go Teams on evaluation missions to skilled nursing facilities disproportionately affected by COVID 19. In this capacity, he performed assessments on hundreds of vulnerable patients. He was also interviewed on NPR regarding this Hopkins effort.

The Mosaic Initiative in Geriatric Medicine and Gerontology was formed in 2011 to promote diversity and inclusion within the division, for the benefit of faculty, fellows and staff. Dr McNabney was the original PI of this grant, funded by the Provost Office of JHU, and has continued as the chair since that time. The efforts of this initiative have had a profound impact on the Division, including staff education and recruitment of trainees from medical schools that primarily educate under-represented minorities, including Howard University. Dr. McNabney has established a strong relationship with the LGBTQ community and the Gertrude Stein Society at the JHU Schools of Nursing, Public Health and Medicine. This has included participation on a panel presentation on transgender health and he has also completed "safe zone" training (2019) to ensure that he is most prepared to be supportive of trainees and colleagues.

Dr. McNabney has been a regular presenter in the Hopkins "Call to Care" initiative which reaches out to Baltimore communities, as well Centro Sol in the Latino community near Bayview. He also serves on the advisory board for the Oblate Sisters of Providence, a convent in Baltimore County, providing several educational sessions for that community of aging nuns and is on the Board of Directors for Linden Senior Apartments cooperative.

Summary

Dr. McNabney is a national leader in geriatric medicine and has achieved international recognition for his clinical skill and program leadership. He has consistently conveyed the message that medically complex older adults require careful medical oversight and advocacy, but can be managed in the community when utilizing proper and coordinated care models. As an outstanding clinician, he has used his expertise to improve the care of older adults well beyond the program at Johns Hopkins. Based on these many accomplishments, we enthusiastically support Dr. Matthew McNabney for promotion to Professor of Clinical Medicine.

Sincerely,

Mark E. Anderson, MD, PhD
William Osler Professor of Medicine
Director, Department of Medicine