

# **Leadership Evaluation of David Brailer: Insights From Health Informatics and Public Service**

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*This study assesses the leadership style and impact of David Brailer, the former United States National Health Information Technology Coordinator, renowned for his contributions to health informatics. The study employs several methodologies: an examination of both positive and negative leadership attributes, an analysis of his leadership style, and an exploration of his vision-defining abilities. Central to this investigation is the analysis of organizational leadership, undertaken through an innovative leadership theory and guiding principles, which are designed to uncover strategies for enhancing leadership in a rapidly evolving society. Brailer's extensive background in health informatics, coupled with his tenure at the U.S. Department of Health and Human Services, provides a rich foundation for this study. In 2004, President George W. Bush appointed him as the inaugural Health Information Technology Czar, marking a historic moment in advancing electronic health records and the digitization of healthcare information, health informatics and public service.*

*Keywords: leadership insights, David Brailer, health informatics, public service, federal government*

## **INTRODUCTION**

In the modern technological era, it is quite rare to find a such healthcare and business spheres. In most cases, an outstanding and recognizable leader is only successful in one of the two but not both spheres, a dogmatic notion that has been triumphantly disapproved by David Brailer. In a career spanning over four decades in healthcare, business and public service, Brailer has proven that an appropriate and moderate application of different styles and theories is an important skill in leadership. An accomplished academician with doctoral degrees in medicine and economics, Brailer has held several senior leadership positions in healthcare and business and became the first National Health Information Technology Coordinator tasked with the execution of an Executive Order by President George Bush of April 27, 2004. Throughout his career, Brailer has portrayed a figure of governance and leadership, especially in the healthcare aspects associated with using peer-to-peer technologies, sharing of clinical data and exchange of local health information. The current research study evaluates the different leadership styles of David Brailer and provides insights from health informatics and public service leadership based on his career achievements.

## CASE STUDY

### Leadership Career Profile

David J. Brailer was born on July 16, 1959, and spent most of his childhood life in rural West Virginia, where his ancestral family had lived since the mid-19<sup>th</sup> century. He graduated from West Virginia University in 1981 and received his M.D. in 1986 from the School of Medicine. During the period, he was a medical student. He was a Charles A. Dana Scholar to the University of Pennsylvania School of Medicine, where he became certified in internal medicine after completing his residency at the University of Pennsylvania in 1991, where he also became a Robert Wood Johnson Clinical Scholar. During the same period, he studied Bachelor of Arts in Science and Political Science at the University of West Virginia, where he graduated in 1991. After completing his internal residency in 1991, Brailer practiced as a physician in general medicine and immunodeficiency at the University of Pennsylvania while also pursuing his Ph.D. at the Wharton School, which he completed and received the degree in 1992.

Based on his Ph.D. research from the Wharton School, Brailer founded CareScience Inc., a healthcare software management company based in Philadelphia that assisted healthcare facilities in improving efficiency and preventing errors. Since the inception of CareScience Inc to its sale, Brailer served as the Chairman and Chief Executive Officer and his work largely focused on leadership roles such as physician decision-making, measurement of healthcare outcomes, evaluation of medical practicing styles and formulation of operational strategies. For nearly a decade, under his leadership of the company, CareScience became the first company in the US to develop and successfully implement a Healthcare Application Service Provider (ASP), and also oversaw a wide variety of changes and evolution, including multiple financial deals, strategic partnerships, and an initial public offering (IPO). During the period of his leadership of CareScience Inc, between 1992 and 2000, Brailer also served as a member of the adjunct faculty of both the Wharton School and University of Pennsylvania, and held other leadership positions in different medical and business entities. CareScience was ultimately sold to a global software company, Quovadx, in 2003 after an IPO in 2000.

After the sale of CareScience Inc in 2003, Brailer joined the Health Technology Center in San Francisco as a senior advisor for information technology and technology. Health Technology Center is a non-profit research organization with a primary objective of providing strategic information and resources to health facilities associated with technology's impact on healthcare delivery. During his tenure as a senior advisor at the organization, Brailer contributed informative insights on regional and national healthcare data sharing and the usage of peer-to-peer technologies. During the same period, Brailer was an adjunct faculty member in several top educational organizations, including the Wharton School, the University of Pennsylvania, the College of Physicians of Philadelphia, and the American College of Physicians. He played an active role in the development of the health information technology program at the Wharton School Health Management Program and immensely contributed to the development of other health management and economics programs. Also, while holding these positions, Brailer was an active patient-care physician at the University of Pennsylvania, specializing in general medicine and immune deficiency.

In 2004, under President Bush's Executive Order of April 27, 2004, Brailer was appointed as the first National Health Information Technology Coordinator by the Secretary of Health and Human Services. Under his role, Brailer was responsible for the broad deployment of health information technology across the country and oversaw the strategic development of national electronic records, empowerment of consumers, and the transformation of the public health sector. During his public service tenure, which lasted for two years, he set the foundation for the rapid adoption of digital health technologies that is currently being used by most hospitals across the country. Also, during this period, Brailer set in motion the systems for forming crucial healthcare agencies such as National Health Information Network and the Meaningful Use incentive program, that focused on implementing electronic records in healthcare facilities. After public service, in 2007, Brailer returned to the private sector and founded Health Evolution Partners which focused on specific opportunities across the healthcare sector. The private equity fund was involved in huge healthcare financial deals, including mergers, acquisitions, and significant investments. In 2022, Brailer joined Cigna as the Chief Health Officer and serves as on the company's Enterprise Leadership Team.

## **Positive and Negative Leadership Analysis**

Any successful leader has strong and weak leadership attributes, which serve as leadership sharpening tools and lessons for improvement. During his career, David Brailer has portrayed both traits as discussed in the current section of the study. Based on his accomplishments, Brailer possesses wide traits of strong leadership attributes and traits including integrity, innovativeness, technical expertise, and relationship-building capabilities. First, in leadership, integrity is an important quality that defines the moral principles of a leader and doing the right thing. A leader with integrity creates a lasting impression on the organization and the involved stakeholders and sets the right tone within the company by acting based on its values. In his leadership roles at different organizations, Brailer has demonstrated integrity by setting a clear set of beliefs that guide his actions and decision-making. For instance, as the Chairman and Chief Executive officer of his start-up, CareScience Inc., Brailer focused on setting a foundation based on moral principles and consistency in a commitment to doing the right thing. He led the company through a tumultuous period of changes largely based on the position of physicians in the healthcare sector.

Innovativeness is a critical leadership quality, especially in healthcare and business. In both sectors, successful leaders have often employed innovation as a skill of imagination of the creation of new things such as products and processes. Since 1991, Brailer has demonstrated high level of innovativeness based on the tendency to engage in and support new ideas, novelty experimentation and development of creative processes that resulted in new products, companies, programs, and services. In 1991, based on his academic research, Brailer created the first company in the US to develop and successfully implement Healthcare Application Service Provider (ASP), a clear indication of his innovative ability. Also, during his ten years as the Chairman and the CEO of the company, he developed ground-breaking innovations, including the first peer-to-peer health information exchange technology and the first outsourced partnership for care management business process. As the National Health Information Technology Coordinator, Brailer initiated innovative technological projects including the national electronic records system and programs that enhanced consumer empowerment and transformation of the public health sector. In academia, Brailer played an innovative role of the development of educational programs for the Wharton School and University of Pennsylvania.

Regarding technical expertise and business acumen, Brailer has proven his leadership skills in four different sectors; healthcare, business, academia, and public service. In leadership literature, technical expertise and business acumen entails the ability or knowledge of a leader to undertake a particular task. The skill does not necessarily involve experience, social skills, or attitude; therefore, a leader might possess technical expertise to undertake an activity but lack other leadership skills. In the healthcare sector, Brailer showed the technical expertise to lead the implementation of a wide variety of technological projects, including using peer-to-peer technologies and developing technology for sharing clinical data and exchanging healthcare information. In the business sector, he showed enough prowess and understanding associated with business practices such as acquisitions, investments, and even the sale of companies. Further, Brailer has served in several business advisory boards which shows his technical expertise and business acumen. In academia, Brailer has been responsible for some of healthcare and economic educational programs taught at some of the schools where he has been part of faculty. In the public service sector, he was the architect of the deployment and implementation of healthcare technology across the country, showing his technical expertise and know-how of the associated aspects.

During his career, Brailer had a unique set of qualifications compounded with the appropriate academic knowledge for leadership except one quality; lack of political knowledge. When he was appointed as the National Health Information Technology Coordinator, Brailer lacked the political experience for life in Washington. This political haven requires a whole new set of skills. As a result of the lack of the lobbying and political experience, his projects were dealt a major blow by the political class, including the Congress which refused to grant the appropriations to his office, leading to a 13-month setback. However, Brailer was resilient enough not to give up and with the limited funding and resources, he created a groundswell of support and built a national consensus to get support for the projects. He embarked on an exhaustive travel schedule to give lectures and keynote speeches and lobbied different special interest groups to support his agenda. Still, he could not manage to convince the political class of his intentions largely because the latter

did not understand healthcare. Based on the inability to convince the political class to support his mission, it can be hypothesized that he was partially unsuccessful at meeting the set goals due to a lack of political knowledge and lobbying capabilities. Therefore, concerning weak leadership attributes, the lack of political knowledge and experience can be considered a setback for Brailer.

### **Vision of a Transformative Leader**

In all his leadership roles, Brailer has become a quality and transformative leader with detailed plans for achieving set objectives and organizational visions. With authoritative academic knowledge of healthcare and business, he has proven to be a leader in the strategy and financing of quality and efficiency in healthcare, with a focus on health information technology and health systems management. In a fireside chat discussion with Richard Gibson, M.D., Ph.D., Brailer provided deeper insights on his role in shaping the vision of the federal healthcare information technology policy and his transformative effect on the healthcare sector. According to Brailer, when he joined the federal government in 2004, there was no established framework and game plan for health IT in the federal government. To transform the sector, he developed a transformative framework based on four basic elements, including the development of consumer-centric records, interoperability, support of public health research efforts, and placing electronic health records in the physicians' hands (Byers, 2017). However, he admits the framework was not entirely successful, with an original scorecard of at best 50 percent, but still managed to achieve the set objectives and goals. With the transformative ideas, Brailer singlehandedly shaped the vision and set the foundation for the country's healthcare IT initiatives and programs.

In an interview with Susan V. White, PhD RN CPHQ FNAHQ, on the infrastructure of private and public health information technology, Brailer discussed the different levels of healthcare quality and costs based on his pioneer ideas. According to Brailer, the transformation of the healthcare sector is based on giving physicians an advocacy role to lead organizational success (White, 2004). In this regard, he notes that he set the foundation for clinician-driven physician groups in patient care organizations where doctors are in the middle of all or most of the operations, leading to improved quality of patient outcomes and organizational successes (White, 2004). Also, Brailer has advocated for incorporating technology in healthcare and has often used statistics such as multi-variate correlations for decision-making purposes based on causality. Throughout his career in the federal government and the private sector, Brailer focused on improving health outcomes through the deployment and implementation of technology-based tools and infrastructure (Byers, 2017). Further, to optimize the use of health information technology, he instituted fundamental transformative changes in policy, including the patient ownership of healthcare information and universal access to provide performance information. For Brailer, health information technology is not a destination but a vehicle constantly on transit.

Brailer showed exquisite leadership and organizational skills in his academic medicine career despite the complex and unique challenges associated with the sphere. For the period he was a faculty member at the Wharton School and the University of Pennsylvania, he took part in different organizational and academic development strategies, including national faculty development workshops, longitudinal faculty development fellowship programs, and organizational change efforts within an academic department or residency training program. To an extent, Brailer has been instrumental in promoting academic medicine in the context of career satisfaction, reduced turnover, and achievement of administrative roles and career progression (Milstein, 2007). As the first chief health office at Cigna, Brailer has reimagined the company's existing products and services to improve the overall health of the clients and staff (Cigna Group, 2023). Also, under his leadership at CareScience Inc., he initiated many programs aimed at enhancing the quality of patient outcomes based on improved health information technology infrastructure and seamless operations (Edmunds et al., 2016). Further, he effectively and successfully applied economic perspectives to improve the cost and quality of the U.S health care system (Milstein, 2007). The leadership qualities and respective actions of David Brailer are outlined in the table below.

**TABLE 1**  
**SIGNIFICANT LEADERSHIP QUALITIES**

| Quality             | Action  |
|---------------------|---|
| Integrity           | <ul style="list-style-type: none"> <li>• As the Chairman and Chief Executive Office of his start-up, CareScience Inc., Brailer set a foundation based on moral principles and consistency on commitment to doing the right thing.</li> </ul>                                      |
| Innovativeness      | <ul style="list-style-type: none"> <li>• Created the first company in the US to develop and successfully implement Healthcare Application Service Provider (ASP)</li> <li>• Development of educational programs for the Wharton School and University of Pennsylvania.</li> </ul> |
| Technical Expertise | <ul style="list-style-type: none"> <li>• Implementation of a wide variety of technological projects including the usage of peer-to-peer technologies and the development of technology for sharing clinical data and exchange of healthcare information.</li> </ul>               |
| Business Acumen     | <ul style="list-style-type: none"> <li>• Performed business practices such as acquisitions, investments and even the sale of companies.</li> <li>• Served in several business advisory boards</li> </ul>  |

**CONCLUSIONS**

Leadership in the modern era is defined by different qualities and attributes, especially with technological information and infrastructure advancement. In the current dynamic society, it is rare to find a successful leader in multiple spheres, a notion that has been successfully disapproved by David Brailer - an accomplished healthcare and business leader with unique qualifications and academic knowledge including doctoral degrees in medicine and economics. He has held several leadership positions in both public and private sectors in healthcare, business, academia, and government. Throughout his career, Brailer portrayed various leadership qualities and attributes applicable in health informatics and public service, including integrity, innovativeness, technical expertise, and relationship-building capabilities. The research shows that the lack of political knowledge and lobbying capabilities was a major setback for the renowned health leader, even though he managed to sharpen his skills with his experience in the government. Brailer provides a perfect example of a flexible and transformative leader who can provide significant mentorship and lessons to upcoming leaders in healthcare and business.

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