



Rashi Fein



Photograph courtesy of the Department of Global Health and Social Medicine at Harvard Medical School

Rashi Fein, Professor of the Economics of Medicine, was born in New York City in 1926, the son of immigrant Jews who had left Russia during the revolution. He died on September 8, 2014, while being treated for melanoma. He was widely known for his research and policy work designed to expand health insurance and access to medical care. Throughout his career in the academia and government, he was a passionate advocate of “health care for all.” The hallmark of Fein’s contributions centers on his research in health economics and his commitment to the essential values of equity and fairness in obtaining medical care.

Fein earned his BA and PhD at Johns Hopkins University, where he specialized in political economy. While working on his doctorate he became a staff member of President Truman’s Commission on the Health Needs of the Nation, his initial introduction into fundamental aspects of medical needs, health services, and health insurance. In 1952, he joined the faculty of the University of North Carolina where he began research into problems of the costs of care, access to essential medical services, the medical workforce, as

well as obstacles to the funding of care. While at UNC he became a leader in faculty efforts to support the desegregation of the college in 1955. In 1961, he joined the Kennedy Administration as a senior staff member of the Council of Economic Advisors. In this role, Fein worked closely with Assistant Secretary of Health, Education, and Welfare, Wilbur Cohen, on developing the essential organization and architecture of the Medicare legislation, which would ultimately be enacted in 1965. Fein came to be widely recognized as “a father of Medicare.”

After enactment of Medicare and Medicaid in 1965, Cohen appointed Fein as the chair of the Medical Assistance Advisory Committee, a 21-member council that was to advise on matters related to the Medicaid program, including its relationship to Medicare. Medicare was nearly universal for the elderly, was for practical purposes uniform across the country, and was not means tested; by contrast, Medicaid was a means-tested program in which eligibility, covered services, and provider reimbursement varied widely by state. These differences reinforced Fein’s belief in the superiority of the social insurance model, and he became a committed advocate of Medicare for all and a federal single payer health system. As he explained in his 1986 book, *Medical Care, Medical Costs*: “My preference for a universal insurance

program derives from my image of a just society. It's an image based on a broadly defined concept of liberty and justice, nurtured by stories my parents told me. . . . To them, liberty meant more than political freedom; it also meant freedom from destitution—in Roosevelt's phrase, 'freedom from want.'"

Beginning in 1963 he became a senior fellow at the Brookings Institution. In 1968, he left Brookings to begin his tenure as Professor of the Economics of Medicine at Harvard Medical School, with a secondary appointment at the John F. Kennedy School of Government. Fein was the first economist to be appointed a professor at HMS. His appointment indicated a growing recognition that medical education would need to incorporate research and teaching on health economics, as well as critical aspects of access to and the costs of medical services. Fein became a prominent advisor to Dean Robert Ebert who founded the Harvard Community Health Plan in 1969, the first not-for-profit prepaid health organization in New England. As a member of the Department of Social Medicine at HMS, Fein centered attention on issues of the expansion of health insurance and the development of universal, national health insurance programs. Closely related to this interest was ongoing research and writing about the medical workforce and the shortage of physicians, medical education, and disparities in access to care. Teaching a range of courses on health policy and medical economics, Fein was a much-sought mentor for medical students with interests in health policy and politics. He was deeply committed to the notion that medical students and physicians needed to understand the economic and political context of medical care and its costs. According to Fein, an educated physician's knowledge and skills should transcend the scientific and clinical aspects of healthcare to include a sophisticated perspective on the medical workforce, the financing of care, and health policy.

A central tenet of Fein's work was that medical care was not like other market commodities. As a result, access to services required governmental financing and regulatory policy. In a widely cited essay in the *New England Journal of Medicine* in 1982, Fein lamented the turn to notions of medicine as part of a consumer economy and culture:

A new language is infecting the culture of American medicine. It is the language of the marketplace, of the tradesman, and of the cost accountant. It is a language that depersonalizes both patients and physicians and describes medical care as just another commodity. It is a language that is dangerous. . . . A decent medical-care system that helps all the people cannot be built without the language of equity and care. If this language is permitted to die and is completely replaced by the language of efficiency and cost control, all of us — including physicians — will lose something precious.

Fein's work was broadly interdisciplinary, integrating economics with political science, history, and policymaking. For Fein, principle and idealism were never at odds with pragmatism and politics; knowledge and advocacy were inseparable. He is remembered for his skill as a raconteur and for his wit. Serious and thoughtful, he also had a capacious and self-effacing humor.

Fein became emeritus in 1999, but he continued to be an active member of the department and medical school community. With his longtime colleague and friend Julius Richmond, the former Surgeon General of the US, he published, *The Health Care Mess: How We Got into It and What It Will Take to Get Out* (2005). His final book, *Lessons Learned: Medicine, Economics, and Public Policy*, which offered personal reflections on the policymaking process, appeared in 2010.

Fein was widely known for his advocacy and leadership, and throughout his career at Harvard Medical School he consulted extensively within government and non-governmental agencies. He was a charter member of the Institute of Medicine (now National Academy of Medicine) and a founding member of the National Academy for Social Insurance. He also served as the Chair of the National Advisory Committee for the Robert Wood Johnson Scholars in Health Policy Program, among many other roles in not-for-profit, philanthropic, and government organizations.

Fein is survived by his wife, Ruth (Breslau) Fein, three children, Alan, Michael, and Karen. Another daughter, Bena, died in 1995.

Many current leaders in medicine, health policy, and advocates for universal access to care continue to look to Fein's influence and inspiration for advancing social justice and the cause of universal access to high quality health care.

Respectfully submitted,
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