
BIOGRAPHICAL SKETCH

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NAME: KEMPE, ALLISON

eRA COMMONS USER NAME (credential, e.g., agency login): KEMPE.A

POSITION TITLE: Director of SCORE Fellowship

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Smith College	OTH	05/1973	None
Oberlin College	BA	05/1976	Music
University of Colorado	MD	06/1980	Medicine
University of Rochester	MPH	06/1987	Public Health

A. Personal Statement

I am a tenured Professor in the Department of Pediatrics at the University of Colorado School of Medicine with a secondary appointment in the Colorado School of Public Health. As the Director of ACCORDS (Adult and Child Center for Outcomes Research and Delivery Science), a collaborative program at the Anschutz Medical Center, I oversee training and the expansion of community-translational and outcomes research for a large community of researchers from multiple Schools. I was the principal investigator for an AHRQ-funded Center for Excellence in Implementation Science and Prevention (CRISP), which remains an important training and research program within ACCORDS. I have been a health services researcher for approximately 30 years with a primary focus in implementation science. I have substantial methodological expertise in the conduct of pragmatic trials in clinical and community settings, comparative effectiveness, program evaluation, and the conduct of surveys. I was the principal investigator and fellowship director for both the HRSA-funded Collaborative Primary Care Faculty Development Fellowship and the Institutional NRSA Collaborative Primary Care Research Fellowship between 2002 and 2012. During my career I have been part of the mentorship team for 51 post-doctoral trainees and the primary mentor for 25. I have been a mentor for 8 K awards with all completers transitioning to R funding. My role in this training grant will be as one of the primary mentors. My role is based on my experience in mentoring post-doctoral fellowship and career development award recipients and my extensive research experience in T4 implementation and health services sciences. In addition, as Director of ACCORDS I will assure that the scholars and key personnel will have office space and can benefit from the multidisciplinary T4 research environment at ACCORDS. Representative publications from post-doctoral mentees are included below.

1. Brittan MS, Sills MR, Fox D, Campagna EJ, Shmueli D, Feinstein JA, **Kempe A**. Outpatient follow-up visits and readmission in medically complex children enrolled in Medicaid. J Pediatr. 2015 Apr;166(4):998-1005.e1. PubMed PMID: [25641248](#).
2. Jensen K, Sevick, Carter, Seewald L, Halbower A, Davis, M, McCabe E, **Kempe A**, Abman S. Greater Risk of Hospitalization in Children with Down Syndrome and Obstructive Sleep Apnea at Higher Elevation. CHEST. 2015 May 1;147(5):1344-51.Epub 2015 Feb 5. PMID: 25654790

3. O'Leary ST, Lee M, Lockhart S, Eisert S, Furniss A, Barnard J, Shmueli D, Stokley S, Dickinson LM, **Kempe A**. Effectiveness and cost of bidirectional text messaging for adolescent vaccines and well care. *Pediatrics*. 2015 Oct 5. pii: peds.2015-1089. PubMed PMID:26438703
4. Feinstein JA, Feudtner C, **Kempe A**. Adverse drug event-related emergency department visits associated with complex chronic conditions. *Pediatrics*. 2014 Jun;133(6):e1575-85. PubMed PMID: [24843054](#).

B. Positions and Honors

Positions and Employment

1980 - 1981	Internship in Pediatrics, Strong Memorial Hospital, University of Rochester
1981 - 1982	Primary Care Provider, Comprehensive Children's Health Plan, Children's Hospital, Boston
1982 - 1984	Residency in Pediatrics, Strong Memorial Hospital, University of Rochester
1983 - 1984	Chief Resident of Outpatient Pediatrics, Strong Memorial Hospital, University of Rochester
1984 - 1986	Instructor and Fellow in Pediatrics, University of Rochester
1986 - 1992	Instructor in Pediatrics, Harvard University
1992 - 1998	Assistant Professor of Pediatrics, University of Colorado Health Sciences Center
1999 -	Director of Research, Division of General Academic Pediatrics, University of Colorado Denver
1999 - 2005	Associate Professor of Pediatrics, University of Colorado Health Sciences Center
2002 - 2012	Director of Primary Care Research Fellowship (NRSA) and Faculty Development Fellowship (HRSA), University of Colorado Denver
2005 -	Professor of Pediatrics, University of Colorado Denver
2007 -	Director of Adult and Child Center for Health Outcomes Research and Delivery Science (ACCORDS) , University of Colorado and Children's Hospital Denver
2014 -	Director of SCORE Fellowship, ACCORDS, University of Colorado and Children's Hospital Denver

Other Experience and Professional Memberships

1987 -	Member, Academic Pediatrics Association
1997 -	Member, American Academy of Pediatrics
2003 -	Member, Society for Pediatric Research
2012 -	Member, AHRQ standing review section--HSVR
2013 -	Member, Advisory Committee on Immunization Practices

Honors

1980	Alpha Omega Alpha, University of Colorado School of Medicine
1984	Robert Wood Johnson Fellow, General Pediatrics Academic Development Program, University of Rochester School of Medicine and Dentistry
1986	Dyson Fellow , Dyson Foundation
2011	Research Award (Lifetime Achievement), Academic Pediatrics Association
2012	Big Shot of the Year, Colorado Children's Immunization Coalition
2013	Career Teaching Award, Department of Pediatrics, University of Colorado Denver

C. Contribution to Science

1. My early research focused on racial and socioeconomic disparities in morbidity and mortality in children. Of greatest significance was a large study in which I collaborated with colleagues at Harvard School of Public Health to compare the clinical conditions leading to very low birth weight (VLBW) delivery among black and white women in multiple states. This study demonstrated that all clinical conditions causing VLBW were more common in black women than in white women. These data were important in refuting a prominent idea at the time that continued racial disparities in low birth weight and infant mortality were related to specific genetic issues, rather than to manifestations of social disparities and what we would now call toxic stress. A focus on racial and economic disparities has continued to be an important part of my research in a variety of areas, as demonstrated in representative publications below.

- a. Kempe A, Wise PH, Barkan SE, Sappenfield WM, Sachs B, Gortmaker SL, Sobol AM, First LR, Pursley D, Rinehart H. Clinical determinants of the racial disparity in very low birth weight. *N Engl J Med*. 1992 Oct 1;327(14):969-73. PubMed PMID: [1518548](#).
 - b. Kempe A, Wise PH, Wampler NS, Cole FS, Wallace H, Dickinson C, Rinehart H, Lezotte DC, Beaty B. Risk status at discharge and cause of death for postneonatal infant deaths: a total population study. *Pediatrics*. 1997 Mar;99(3):338-44. PubMed PMID: [9041284](#).
 - c. Kempe A, Renfrew B, Barrow J, Cherry D, Levinson A, Steiner JF. The first 2 years of a state child health insurance plan: whom are we reaching?. *Pediatrics*. 2003 Apr;111(4 Pt 1):735-40. PubMed PMID: [12671105](#).
 - d. Allison MA, Crane LA, Beaty BL, Davidson AJ, Melinkovich P, Kempe A. School-based health centers: improving access and quality of care for low-income adolescents. *Pediatrics*. 2007 Oct;120(4):e887-94. PubMed PMID: [17846146](#).
2. The development and evaluation of strategies to increase immunization delivery for children and adolescents has been a major focus of my research career. Major contributions in this area have included: 1) the use of centralized reminder/recall approaches using the state immunization information system (IIS) to increase immunization rates at the population level; 2) novel collaborative approaches between private practices and public health departments in the delivery of preventive health care services; 3) novel locations for immunization delivery within schools and community settings; 4) novel mobile health approaches to increasing immunization rates and 5) use of state IIS to guide public health policy. This work involved use of mixed methods in the development of novel approaches and pragmatic clinic trials to assess effectiveness and cost-effectiveness of different approaches. Samples of this body of work are shown below.
- a. Kempe A, Barrow J, Stokley S, Saville A, Glazner JE, Suh C, Federico S, Abrams L, Seewald L, Beaty B, Daley MF, Dickinson LM. Effectiveness and cost of immunization recall at school-based health centers. *Pediatrics*. 2012 Jun;129(6):e1446-52. PubMed PMID: [22566414](#).
 - b. Kempe A, Saville A, Dickinson LM, Eisert S, Reynolds J, Herrero D, Beaty B, Albright K, Dibert E, Koehler V, Lockhart S, Calonge N. Population-based versus practice-based recall for childhood immunizations: a randomized controlled comparative effectiveness trial. *Am J Public Health*. 2013 Jun;103(6):1116-23. PubMed PMID: [23237154](#); PubMed Central PMCID: [PMC3619016](#).
 - c. Kempe A, Daley MF, Pyrzanowski J, Vogt T, Fang H, Rinehart DJ, Morgan N, Riis M, Rodgers S, McCormick E, Hammer A, Campagna EJ, Kile D, Dickinson M, Hambidge SJ, Shlay JC. School-located influenza vaccination with third-party billing: outcomes, cost, and reimbursement. *Acad Pediatr*. 2014 May-Jun;14(3):234-40. PubMed PMID: [24767776](#).
 - d. Kempe A, Albright K, O'Leary S, Kolasa M, Barnard J, Kile D, Lockhart S, Dickinson LM, Shmueli D, Babbal C, Barrow J. Effectiveness of primary care-public health collaborations in the delivery of influenza vaccine: a cluster-randomized pragmatic trial. *Prev Med*. 2014 Dec;69:110-6. PubMed PMID: [25152506](#).
3. Because of the need for information about current physician practices, knowledge and attitudes about vaccine issues that are useful in guiding vaccine policy, I created a new survey methodology for obtaining rapid responses from nationally representative samples of primary care physicians. This methodology utilizes the national primary care organizations to recruit volunteers who agree to complete 2-3 surveys/year. The volunteers are then post-stratified to be representative of the national organizations with respect to key provider and practice variables that are associated vaccine delivery issues and randomly selected within each sampling cell. The methodology has been shown to be comparable to the usual methodology for national physician surveys involving randomly selected samples from AMA masterfiles with respect to physician characteristics and with respect to answers regarding vaccine policy issues. Using this methodology we have conducted 29 surveys about immunization issues relevant to policy. Our group has presented findings 11 times at ACIP, often preceding a vote on relevant policy issues. Findings from our surveys have directly impacted national decisions about immunization policies and recommended practices. Four sample articles (of a total of 33 articles based on these surveys) are listed here.

- a. Kempe A, Daley MF, Parashar UD, Crane LA, Beaty BL, Stokley S, Barrow J, Babbel C, Dickinson LM, Widdowson MA, Alexander JP, Berman S. Will pediatricians adopt the new rotavirus vaccine?. *Pediatrics*. 2007 Jan;119(1):1-10. PubMed PMID: [17200265](#).
 - b. Kempe A, Hurley L, Stokley S, Daley MF, Crane LA, Beaty BL, Dickinson LM, Babbel C, Barrow J, Steiner JF. Pneumococcal vaccination in general internal medicine practice: current practice and future possibilities. *J Gen Intern Med*. 2008 Dec;23(12):2010-3. PubMed PMID: [18830765](#); PubMed Central PMCID: [PMC2596512](#).
 - c. Hurley LP, Bridges CB, Harpaz R, Allison MA, O'Leary ST, Crane LA, Brtnikova M, Stokley S, Beaty BL, Jimenez-Zambrano A, Ahmed F, Hales C, Kempe A. U.S. physicians' perspective of adult vaccine delivery. *Ann Intern Med*. 2014 Feb 4;160(3):161. PubMed PMID: [24658693](#).
 - d. O'Leary ST, Allison MA, Lindley MC, Crane LA, Hurley LP, Brtnikova M, Beaty BL, Babbel CI, Jimenez-Zambrano A, Berman S, Kempe A. Vaccine financing from the perspective of primary care physicians. *Pediatrics*. 2014 Mar;133(3):367-74. PubMed PMID: [24567011](#).
4. Another focus of my research has been telephone triage by call centers staffed by nurses using computer-based algorithms. I was the first to evaluate under and over-triage for such centers, as well as examine the effect of second-level triage on urgent referral rates. These studies were important in guiding triage practices within such centers, which continue to increase in prevalence around the country. Representative articles are included here.
- a. Kempe A, Dempsey C, Hegarty T, Frei N, Chandramouli V, Poole SR. Reducing after-hours referrals by an after-hours call center with second-level physician triage. *Pediatrics*. 2000 Jul;106(1 Pt 2):226-30. PubMed PMID: [10888697](#).
 - b. Kempe A, Luberti AA, Hertz AR, Sherman HB, Amin D, Dempsey C, Chandramouli V, MacKenzie T, Hegarty TW. Delivery of pediatric after-hours care by call centers: a multicenter study of parental perceptions and compliance. *Pediatrics*. 2001 Dec;108(6):E111. PubMed PMID: [11731638](#).
 - c. Kempe A, Bunik M, Ellis J, Magid D, Hegarty T, Dickinson LM, Steiner JF. How safe is triage by an after-hours telephone call center?. *Pediatrics*. 2006 Aug;118(2):457-63. PubMed PMID: [16882795](#).
 - d. Bunik M, Glazner JE, Chandramouli V, Emsermann CB, Hegarty T, Kempe A. Pediatric telephone call centers: how do they affect health care use and costs?. *Pediatrics*. 2007 Feb;119(2):e305-13. PubMed PMID: [17272593](#).
5. I have also focused on insurance coverage for children and its effect on outcomes. My major contributions to this area include: 1) studies examining reasons for failure to enroll and disenrollment into the State Child Health Insurance Plan (SCHIP), 2) examination of health outcomes associated with enrollment into SCHIP, 3) examination of the deleterious effects of churn and length of time uninsured on child health outcomes. This work has had a direct impact on legislative action in my state and nationally.
- a. Kempe A, Renfrew B, Barrow J, Cherry D, Levinson A, Steiner JF. The first 2 years of a state child health insurance plan: whom are we reaching?. *Pediatrics*. 2003 Apr;111(4 Pt 1):735-40. PubMed PMID: [12671105](#).
 - b. Kempe A, Beaty BL, Crane LA, Barrow J, Stokstad J, Belman S, Steiner JF. Disenrollment from a state child health insurance plan: are families jumping S(c)HIP?. *Ambul Pediatr*. 2004 Mar-Apr;4(2):154-61. PubMed PMID: [15018598](#).
 - c. Kempe A, Beaty BL, Crane LA, Stokstad J, Barrow J, Belman S, Steiner JF. Changes in access, utilization, and quality of care after enrollment into a state child health insurance plan. *Pediatrics*. 2005 Feb;115(2):364-71. PubMed PMID: [15687446](#).
 - d. Federico SG, Steiner JF, Beaty B, Crane L, Kempe A. Disruptions in insurance coverage: patterns and relationship to health care access, unmet need, and utilization before enrollment in the State Children's Health Insurance Program. *Pediatrics*. 2007 Oct;120(4):e1009-16. PubMed PMID: [17908722](#).

D. Research Support

Ongoing Research Support

R01 CA187707 Szilagyi (PI) 08/15/15-07/31/19
National Institute of Allergy and Infectious Diseases (NIAID)
State Immunization Information Systems to Improve HPV Vaccination Rates
This dissemination/implementation project will evaluate the impact of patient reminder/recall performed by state immunization information systems (immunization registers) to improve HPV vaccination rates.
Role: Co-PI

R01 AI114903 Kempe (PI) 05/15/15-04/30/19
National Cancer Institute (NCI)
Centralized IIS-Based Reminder-Recall to Increase Influenza Vaccination Rates
The goal of this project is to compare the effect of varying intensities of centralized reminder/recall on receipt of influenza vaccine among children age 6 months – 17 years.
Role: PI

R18 HS022648 Kempe (PI) 09/30/13-09/29/18
Agency for Health Care Research and Quality (AHRQ)
ACO/Public Health Collaborative Preventive Care Delivery to Priority Populations
The Institute of Medicine recently highlighted the importance of creating partnerships between accountable care organizations (ACOs) and public health entities in order to broaden the scope and efficiency of delivering clinical preventive services to populations. This project focuses on implementing and evaluating an evidence-based collaborative method of increasing immunization rates among preschool children, adolescents and adults within an ACO-Public Health collaborative. The infrastructure developed around immunizations will serve as the framework for future collaborative delivery of other preventive services.
Role: PI

U01 IP000849 Kempe (PI) 09/01/14-08/31/17
National Center for Immunization and Respiratory Diseases (NCIRD)
Rapid-cycle Survey Collaborative for Provider Input on Immunization Issues
This project will provide a mechanism for obtaining rapid turnaround information about provider knowledge, attitudes and beliefs regarding immunization challenges on a national level. These data will be presented at ACIP meetings and will assist the CDC in making policy recommendations about new vaccines, in developing strategies to improve vaccination coverage and in planning for urgent immunization problems that arise, such as vaccine supply shortages.
Role: PI

Completed Research Support

P01 HS021138 Kempe (PI) 09/30/11-09/29/15
Agency for Health Care Research and Quality (AHRQ)
Center for Research in Implementation Science and Prevention (CRISP)
This project will bring together local and national experts in primary care and public health delivery to conduct research on ways to increase use of preventive health services within primary care settings.
Role: PI