



University of Maryland College Park School of Public Health

HLSA 601 – Introduction to Health Systems

Semester: Fall 2012
Classroom and Time: SPH 0302 Tuesday 4:00pm-6:45pm
Instructor: Karoline Mortensen
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Office Hours: Tuesday 2-4pm and
By appointment

Course Prerequisites: There are no prerequisites for this course.

Required Texts and Other Readings:

Required: No textbook is required.

This course does have required readings. All required readings are available on Blackboard <https://elms.umd.edu> for download, including articles from journals and sources such as: *Health Affairs*, *Health Services Research*, *Journal of American Medical Association*, *New England Journal of Medicine*, Kaiser Family Foundation, etc.

Recommended: Recommended articles are posted to the Course Documents folder on Blackboard. These readings are encouraged for those who seek more in-depth knowledge on a particular subject.

Additional Materials Required:

None.

Course Description:

This course provides an interdisciplinary approach to gain an overview of the US health care system and its driving forces. Through lecture, interactive discussion of assigned readings, small group discussion, and individual projects, students will learn about the major elements of the healthcare system and consider today's major health policy issues in an historical, economic and political context. Concepts such as unintended consequences, association versus causation, and asymmetric information and their effects on policy and the health services system will be emphasized and analyzed throughout the course.

Course Learning Objectives:

Upon completing this course, the student will be able to:

1. Understand issues related to the evolution and status quo of the US health care system.
2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time.
4. Understand the interactions among access to care, quality of care, and costs of care.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

Program Competencies Addressed in this Course:

The following competencies are addressed in this course:

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Course Requirements:

Participation/Discussion 10%

Midterm Exam 25%

Final Exam 35%

Paper 30%

University policy prohibits mandating course attendance. As attendance is critical to learning and successful attainment of the course objectives and curriculum competencies, students should make their best efforts to attend class. Although attendance will not be directly graded, please note that attendance is reflected in in-class participation and discussion which accounts for 10% of your grade. Thus absences will be reflected in your grade, as it is not possible to make up in-class participation and discussion.

Course Policies:

Email – The Official University Correspondence: **Verify your email address** by going to www.my.umd.edu.

All enrolled students are provided access to the University’s email system and an email account. *All official University email communication will be sent to this email address* (or an alternate address if provided by the student). Email has been adopted as the primary means for sending official communications to students, so email must be checked on a regular basis. Academic advisors, faculty, and campus administrative offices use email to communicate important and time-sensitive notices.

Students are responsible for keeping their email address up to date or for redirecting or forwarding email to another address. Failure to check email, errors in forwarding email, and returned email (from “full mailbox” or “unknown user” errors for example), will not excuse a student from missing University announcement, messages, deadlines, etc. Email addresses can be quickly and easily updated at www.my.umd.edu or in-person at the Student Service Counter on the first floor of the Mitchell Building. For technical support for University email, please visit: www.helpdesk.umd.edu or call 301-405-1400.

Absence Policy:

In accordance with University policy if you are absent for a single (1) lecture due to illness or some form of personal or family emergency, this absence will be considered “excused” and the instructor will accept a note from you attesting to the date of the illness/incident, along with an acknowledgement that the information is true. Whenever feasible, you should try to contact the instructor in advance.

Multiple or prolonged absences, and absences that prevent attendance at a major scheduled grading event (like an exam or test) will require written documentation from an appropriate health care provider/organization.

A link to pull information on the new policy covering absences from class can be found at <http://www.president.umd.edu/policies/v100g.html>

Late work and Missed Exams /Assignments: All work is due when assigned. Any work not completed and handed in at the beginning of class on the due date will receive a reduction of one letter grade. Work not handed in by 5pm the following day will receive an additional letter grade reduction. Work will not be accepted beyond this point except in extreme circumstance approved by your instructor. You **must prearrange** with the instructor to miss a class deadline. There are no make-up tests unless they are prearranged. Participation and in-class discussion cannot be made up.

Religious Observances: The University System of Maryland policy provides that students should not be penalized because of observances of their religious beliefs; students shall be given an opportunity, whenever feasible, to make up within a reasonable time any academic assignment that is missed due to individual participation in religious observances. **It is the student's responsibility to inform the instructor in advance of any intended absences for religious observance.**

Special Accommodations / Disability Support Services: If you have a documented disability and wish to discuss academic accommodations for test taking or other needs, you will need documentation from Disability Support Service (301-314-7682). If you are ill or encountering personal difficulties, please let the instructor know as soon as possible. You can also contact Learning Assistance Services (301-314-7693) and/or the Counseling Center (301-314-7651) for assistance.

Academic Integrity: The University's code of academic integrity is designed to ensure that the principle of academic honesty is upheld. Any of the following acts, when committed by a student, constitutes academic dishonesty:

- CHEATING: intentionally using or attempting to use unauthorized materials, information, or study aids in an academic exercise.
- FABRICATION: intentional and unauthorized falsification or invention of any information or citation in an academic exercise.
- FACILITATING ACADEMIC DISHONESTY: intentionally or knowingly helping or attempting to help another to violate any provision of this code.
- PLAGIARISM: intentionally or knowingly representing the words or ideas of another as one's own in any academic exercise.

For more information see: <http://www.shc.umd.edu/code.html>.

The Honor Pledge is a statement undergraduate and graduate students should be asked to write by hand and sign on examinations, papers, or other academic assignments. The Pledge reads:

I pledge on my honor that I have not given or received any unauthorized assistance on this assignment/examination.

The University of Maryland, College Park has a nationally recognized Code of Academic Integrity, administered by the Student Honor Council. This Code sets standards for academic integrity at Maryland for all undergraduate and graduate students. As a student you are responsible for upholding these standards for this course. It is very important for you to be aware of the consequences of cheating, fabrication, facilitation, and plagiarism. For more information on the Code of Academic Integrity or the Student Honor Council, please visit <http://www.shc.umd.edu>.

Inclement Weather / University Closings: In the event that the University is closed for an emergency or extended period of time, the instructor will communicate to students regarding schedule adjustments, including rescheduling of examinations and assignments due to inclement weather and campus emergencies. Official closures and delays are announced on the campus website (<http://www.umd.edu>) and snow phone line (301-405-SNOW), as well as local radio and TV stations.

Course Evaluations:

The University, the School of Public Health, and the Department of Health Services Administration are committed to the use of student course evaluations for improving the student experience, course and curriculum delivery, and faculty instruction. Your evaluations help instructors improve their courses; help deans and department chairs decide on merit pay for faculty, renewal of contracts, and support tenure and promotion decisions; and help current and future students decide on classes. The system (www.CourseEvalUM.umd.edu) will open on or around Tuesday, November 27th and will likely close on Tuesday, December 11th for Fall 2012 courses. (Confirmation of these dates will be provided during the fall semester.)

There will be an in-class evaluation I ask that you fill out mid-semester. This gives me a sense of what works and what is not working as well. I am constantly making significant changes to the course in response to the mid-term and final course evaluations, so I encourage you to fill these out as I do consider the feedback very seriously in modifications to the course.

Available Support Services:

This course requires a 10 page (double-spaced) paper in the APA formatting and style. For assistance with formatting, please see: <http://www.apastyle.org/>. We will discuss the paper process throughout the semester. The reference and instruction librarian for the School of Public Health, Nedelina Tchangalova, holds an office hour on Wednesdays, 2-3 pm at the School of Public Health, Room 0226 to assist students with research and writing skills necessary for the course paper. Please take advantage of this tremendous resource. A library guide for this course has been created and is available at: <http://lib.guides.umd.edu/HLSA601>. I also encourage you to contact the Learning Assistance Center for help.

Grading Procedures:

Discussion Preparation and Participation:

Participation is evaluated through performance in participating in class discussion. Your involvement in discussion in class will be evaluated. You should expect that more than two days of unexcused absences will lower your participation score by at least one letter grade. Participation represents a total of **10% of your final grade**, and the grade will be assigned at the end of the semester. Students will be asked to evaluate themselves on their participation, and this evaluation will be taken into consideration. Feel free to contact the instructor during the semester to gauge your participation score. Students who do not

actively participate in class should not expect an excellent participation score. Texting, personal conversations, visiting unrelated websites and Facebook are not appropriate during class.

Twitter is an essential communication tool that is increasingly being recognized and implemented in the field of public health. I ask that you **“tweet” 2 discussion questions for class each week** from the readings. These should not be clarification questions (you may certainly tweet those in addition to your 2 discussion questions). They should be questions we can address in class to stimulate discussion. It is expected that you will discuss your tweets in class. **The tweets are due the Monday before class each week**, and are incorporated into your participation score.

An important tool for our in-class discussion is following the real-time blogging of selected course readings by Dr. Austin Frakt at Boston University and the Boston VA. Dr. Frakt’s posts will be available by Monday mornings at <http://theincidentaleconomist.com/>. It is expected that students will read Dr. Frakt’s analysis and corresponding links once students have completed their course readings for the week. Feel free to tweet your thoughts to Dr. Frakt @frakt.

Examinations: There will be a **midterm exam on Tuesday, October 23, 2012**. The midterm is worth **25% of your final grade**. There will be a **comprehensive final exam at the scheduled time during finals week that is worth 35% of your final grade**. Specific details regarding the exams will be posted to the Blackboard site.

Paper: Each student will write a 10 page policy synthesis paper on a topic of their choice about policies affecting the health system or health management **that are included in the Patient Protection and Affordable Care Act (ACA) of 2010**. The paper should specifically address the progress that has been made in the 2 years since the ACA was enacted. You may consider policy implications and health systems issues addressed in the bill that are relevant to your concentration in public health. **On Class 5**, you must provide a one page written summary or outline and rationale for your topic **for 5% of your final grade**. **During Class 10**, you will submit the literature review section of your paper **for 5% of your final grade**.

Be prepared to discuss an overview of your topic to the class to garner other viewpoints and improve your topic through student feedback. This will give you an opportunity to improve the paper and present the basic overview of your paper.

The paper will be a **referenced policy paper following the American Psychological Association style guide** (<http://lib.guides.umd.edu/content.php?pid=248309&sid=2050920>). **The paper will include an executive summary, per APA style**. Choose subject areas that are related to systems, management and policy instead of exclusively clinical issues. Most of the journals are available in our online library. **Correct spelling, proper grammar, and flowing syntax are expected in your paper. Both pros and cons regarding the topic must be presented**. Seek help from campus resources to strengthen and enhance your written communication skills, such as the Writing Center, Learning Assistance Center, and the library guide for this course that is available at: <http://lib.guides.umd.edu/HLSA601>. Please take advantage of this resource! Remember, the reference and instruction librarian will hold an office hour every Wednesday in room SPH 0226 from 2-3pm. Please take advantage of my office hours and her office hours as well. **The paper is due December 11, 2012 and is worth 20% of your grade**.

Grade Weights: Class participation (10%), midterm (25%), final (35%), one page paper summary/outline (5%), literature review (5%), and paper (20%) will be summed to calculate the earned course grade.

Evaluation	Points	Number Grade	Letter Grade	Points
Participation/Discussion		90-100%	A	360-400
Class Participation	40	80-89%	B	320-359
		70-79%	C	280-319
Exams:		60-69%	D	240-279
Midterm	100			
Final Exam	140			
Paper:		96-100%	A+	384-400
Paper summary/outline	20	93-95%	A	372-383
Literature Review	20	90-92%	A-	360-371
Paper	80	86-89%	B+	344-359
		83-85%	B	332-343
		80-82%	B-	320-331
		76-79%	C+	304-319
		73-75%	C	292-303
		70-72%	C-	280-291
		66-69%	D+	264-279
		63-65%	D	252-263
		60-62%	D-	240-251

Course Schedule Summary			
Session	Date	Topic	Assignments
# 1	9/4/12	Introductions, Class Structure, and Overview of US Health System	Practice in-class assignment
# 2	9/11/12	Status Quo and Major Trends in the US Health Services System: Costs	In-class assignment
# 3	9/18/12	Status Quo and Major Trends in the US Health Services System: Access and Quality	
# 4	9/25/12	Health Insurance, Physician Payment Mechanisms and Managed Care	
# 5	10/2/12	Medicare	In-class assignment One page summary due
# 6	10/9/12	Medicaid and CHIP	
# 7	10/16/12	The Uninsured	In-class assignment
# 8	10/23/12	Midterm Exam	
# 9	10/30/12	Health Care Workforce	
# 10	11/6/12	Preventive Care and *Election Day*	Literature Review due
# 11	11/13/12	Medical Errors	
# 12	11/20/12	Defensive Medicine & Medical Malpractice	In-class assignment
# 13	11/27/12	International Comparisons	
# 14	12/4/12	Chronic Conditions in the US- Focus on Obesity	In-class assignment
# 15	12/11/12	Patient Protection and Affordable Care Act	Final Paper Due

Session Outline	
Session 1	September 4, 2012
Topic: Introductions, Class Structure, and Overview of US Health System	
<p>Learning Objectives for Session</p> <ol style="list-style-type: none"> 1. Understand issues related to the evolution and status quo of the US health care system. 2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy. 3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time. 4. Understand the interactions among access to care, quality of care, and costs of care. 5. Assess the interrelationships of incentives that drive our health care system. 6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system. <p>CEPH Competencies for Session</p> <ol style="list-style-type: none"> 1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US. 2. Describe legal and ethical bases for public health, health care management and health services. 3. Discuss policy process for improving health status of populations as well as effects on health care organizations. 4. Communicate health policy and management issues using appropriate channels and technologies. 5. Apply organizational theory as well as “systems thinking” for resolving organization problems. <p>Required readings</p> <p>Institute of Medicine. (2001). <i>Crossing the Quality Chasm: A New Health System for the 21st Century</i>.</p> <p>Sommer, A. (2001). How public health policy is created: scientific process and political reality. <i>American Journal of Epidemiology</i>, 154, (12 SUPPL.): S4-S6.</p> <p>Calhoun, A. (2008, August 7). Giving birth at home. <i>Time</i>.</p> <p>Assignments – There will be a practice in-class assignment, covering the <i>Time</i> article.</p>	
Session 2	September 11, 2012
Topic: Status Quo and Major Trends in the US Health Services System: Costs	
<p>Learning Objectives for Session</p> <ol style="list-style-type: none"> 2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy. 3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time. 4. Understand the interactions among access to care, quality of care, and costs of care. <p>CEPH Competencies for Session</p> <ol style="list-style-type: none"> 1. Identify the main components and issues of the organization, financing, and delivery of health 	

services and public health system in the US.

Required readings

Newhouse, J. P. (1992). Medical care costs: How much welfare loss? *The Journal of Economic Perspectives: A Journal of the American Economic Association*, 6, 3-21.

Anderson, G. F., Reinhardt, U.E., Hussey, P.S., & Petrosyan, V. (2003). It's the prices, stupid: Why the United States is so different from other countries. *Health Affairs*, 22, 89-105.

Bodenheimer, T. (2005). High and rising health care costs. Part 1: Seeking an explanation. *Annals of Internal Medicine*, 142, 847-854

Bodenheimer, T. (2005). High and rising health care costs. Part 2: Technologic innovation. *Annals of Internal Medicine*, 142, 932-937

Lee, D. W., & Levy, F. (2012). The sharp slowdown in growth of medical imaging: An early analysis suggests combination of policies was the cause. *Health Affairs*, 31, 1-9.

Recommended readings

Bodenheimer, T. (2005). High and rising health care costs. Part 3: The role of health care providers. *Annals of Internal Medicine*, 142, 996-1002.

Bodenheimer, T. (2005). High and rising health care costs. Part 4: Can costs be controlled? *Annals of Internal Medicine*, 143, 26-31.

Gawande, A. (2009, July 1). The cost conundrum. *The New Yorker*.

Assignments - There will be an in-class assignment.

Session 3

September 18, 2012

Topic: Status Quo and Major Trends in the US Health Services System: Access and Quality

Learning Objectives for Session

2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
4. Understand the interactions among access to care, quality of care, and costs of care.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.

Required readings

McGlynn, E. A., Asch, S.M., Adams, J., Keeseey, J., Hicks, J., DeCristofaro, A. & Kerr, E.A.. (2003). The

quality of health care delivered to adults in the united states. *New England Journal of Medicine*, 348, (26): 2635-2645.

Penchansky, R., & Thomas, J.W. (1981). The concept of access. Definition and relationship to consumer satisfaction. *Medical care*, 19, 127-140.

Kullgren, J.T., McLaughlin, C.G., Mitra, N., & Armstrong, K. (2012). Nonfinancial barriers and access to care for US adults. *Health Services Research*, 47, 462-485.

Session 4

September 25, 2012

Topic: Health Insurance, Physician Payment Mechanisms and Managed Care

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
4. Understand the interactions among access to care, quality of care, and costs of care.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

Gruber, J. (2006.) The role of consumer copayments for health care: Lessons from the RAND Health Insurance Experiment and beyond. *The Henry J. Kaiser Family Foundation*.

Claxton, G. & Lundy, J. (2008). How private health coverage works: A primer – 2008 update. *The Henry J. Kaiser Family Foundation*. Report #7766.

Blumenthal, D. (2006). Employer-sponsored insurance - riding the health care tiger. *New England Journal of Medicine*, 355, 195-202.

Robinson, J. C. (2001). Theory and practice in the design of physician payment incentives. *Milbank Quarterly*, 79, 149-177.

Session 5

October 2, 2012

Topic: Medicare

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.

Required readings

Mortensen, K. & Villani, J. (Forthcoming 2012). Health care and health insurance in retirement. In Wang, M. (Ed.), *The Oxford Handbook of Retirement*. Oxford University Press.

Hsu, J., M. Price, J. Huang, R., Brand, V., Fung, R., Hui, B., Fireman, J. P., Newhouse, J.P. & Selby, J.V. (2006). Unintended consequences of caps on Medicare drug benefits. *New England Journal of Medicine*, 354, 2349-2359.

Recommended readings

Kaiser Family Foundation. (2011). Medicare at a glance. Fact sheet.

Assignments – In-class assignment.

Session 6 **October 9, 2012**

Topic: Medicaid and CHIP

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.

Required readings

Kaiser Family Foundation. (2010). Medicaid: a primer. The Kaiser Commission on the Uninsured.

Sommers, B.D., Baicker, K., & Epstein, A.E. (2012). Mortality and access to care among adults after state Medicaid expansions. *New England Journal of Medicine*, Online First.

Frakt, A., Carroll, A.E., Pollack, H.A., & Reinhardt, U. (2011). Our flawed but beneficial Medicaid program. *New England Journal of Medicine*, 364: e31.

Meyer, J.A. & Mortensen, K. (2012, July 25). Compromise needed on the Affordable Care Act. *The Baltimore Sun*.

Session 7

October 16, 2012

Topic: The Uninsured

Learning Objectives for Session

- 4. Understand the interactions among access to care, quality of care, and costs of care.
- 6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

- 1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
- 2. Describe legal and ethical bases for public health, health care management and health services.
- 3. Discuss policy process for improving health status of populations as well as effects on health care organizations.

Required readings

Kaiser Family Foundation. (2011). The uninsured: a primer. Key facts about Americans without health insurance. The Kaiser Commission on the Uninsured.

Wilper, A.P., Wooldhandler, S., Lasser, K.E., McCormick, D., Bor, D. H. & Himmelstein, D.U. (2009). Health insurance and mortality in US adults. *American Journal of Public Health*, 99, 2289-2295.

Assignments - There will be an in-class assignment.

Session 8

October 23, 2012

MIDTERM EXAM

Session 9

October 30, 2012

Topic: Health Care Workforce

Learning Objectives for Session

- 1. Understand issues related to the evolution and status quo of the US health care system.
- 2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
- 5. Assess the interrelationships of incentives that drive our health care system.

6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

Bodenheimer, T. (2006). Primary care - will it survive? *New England Journal of Medicine*, 355, 861-864.

Buerhaus, P. I., Auerbach, D.I., & Staiger D.O. (2009). The recent surge in nurse employment: Causes and implications. *Health Affairs*, 28, w657-w668.

Association of American Medical Colleges. (2012). Physician shortages to worsen without increases in residency training (link on Blackboard).

Wayne, A. (August 29, 2012). Doctor shortage may swell to 130,000 with US Cap. *Bloomberg*.

Session 10

November 6, 2012

Topic: Preventive Care *Election Day* Vote!

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
4. Understand the interactions among access to care, quality of care, and costs of care.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
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3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

Mortensen, K. & Atherly A. Receipt of United States Preventive Services Task Force recommended clinical preventive services: variation by insurance status and state. (Under review- for class use only, please do not disseminate.)

Cohen, J. T., Neumann, P.J., & Weinstein, M.C. 2008. Does preventive care save money? Health economics and the presidential candidates. *New England Journal of Medicine*, 358, 661-663.

Offit, P. A. (2007). Thimerosal and vaccines - A cautionary tale. *New England Journal of Medicine*, 357, 1278-1279.

Gerber, J. S., & Offit, P.A. (2009). Vaccines and autism: A tale of shifting hypotheses. *Clinical Infectious Diseases*, 48, 456-461.

Recommended readings

Institute of Medicine. (2011). *Adverse Effects of Vaccines Evidence and Causality*.

Assignments

In-class comparisons of the candidate's health care agenda.

Session 11

November 13, 2012

Topic: Patient Safety/Medical Errors

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
4. Understand the interactions among access to care, quality of care, and costs of care.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as "systems thinking" for resolving organization problems.

Required readings

Gawande, A. (1999, Feb 1). When doctors make mistakes. *The New Yorker*.

Gawande, A. (1998, Mar 30). No mistake: The future of medical care—machines that act like doctors, and doctors who act like machines. *The New Yorker*.

Landrigan, C. P., J. M. Rothschild, J. W. Cronin, R. Kaushal, E. Burdick, J. T. Katz, C. M. Lilly, et al. (2004). Effect of reducing interns' work hours on serious medical errors in intensive care units. *New England Journal of Medicine* 351, (18): 1838-1848.

Romano, P.S. & Volpp, K. (2012). The ACGME's 2011 changes to resident duty hours: are they an unfunded mandate on teaching hospitals? *Journal of General Internal Medicine*, 27 (2): 136-8.

Recommended reading

Gawande, A. (1997, multiple entries). Diary from Slate.com (link on Blackboard).

Brown, T. (2012, July 14). Don't get sick in July. *The New Yorker*.

Assignments

In-class assignment.

Session 12

November 20, 2012

Topic: Defensive Medicine & Medical Malpractice

Learning Objectives for Session

5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
5. Apply organizational theory as well as "systems thinking" for resolving organization problems.

Required readings

Studdert, D. M., Mello, M.M., Sage, W.M., DesRoches, C.M., Peugh, J., Zapert, K., & Brennan, T.A. 2005. Defensive medicine among high-risk specialist physicians in a volatile malpractice environment. *Journal of the American Medical Association*, 293, 2609-2617.

Mello, M.M. (2008). Understanding Medical Malpractice Insurance: A primer. Research Synthesis Report #8. *The Robert Wood Johnson Foundation*.

Rodwin, M.A., Change, H.J., & Clausen, J.(2006). Malpractice premiums and physicians' income: Perceptions of a Crisis Conflict with Empirical Evidence. *Health Affairs*, 25, 750-758.

AMA refutes medical liability study. (2006, May 10). Medical Staff Leader Connection.

Recommended readings

Kessler, D. & McClellan M. (1996). Do doctors practice defensive medicine? *The Quarterly Journal of Economics*, 111, 353-390.

Carrier, E.R., Reschovsky, J.D., Mello, M.M., Mayrell R.C., & Katz, D. (2010). Physician's fears of malpractice lawsuits are not assuaged by tort reforms. *Health Affairs*, 29, 1585-1592.

Assignments - There will be an in-class assignment.

Session 13

November 27, 2012

Topic: International Comparisons

Learning Objectives for Session

2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

Cutler, D.M., & Ly, D.P. (2011). The (paper) work of medicine: understanding international medical costs. *Journal of Economic Perspectives*, 25, 3-25.

The Commonwealth Fund. (2011). International profiles of health care systems: Australia, Canada, Denmark, England, France, Germany, Italy, Japan, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the United States.

Session 14

December 4, 2012

Topic Chronic Conditions in the US- Focus on Obesity

Learning Objectives for Session

5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

Nestle, M. & Jacobson, M.F. (2000). Halting the obesity epidemic: a public health policy approach. *Public Health Reports*, 115, 12-24.

Kuchler, F., E. Golan, J.N. Variyann, & Crutchfield, S.R. (2005). Obesity policy and the law of unintended consequences. *Amber Waves*, 3, 26-33.

Robert Wood Johnson Foundation. (2011). F as in fat: How obesity threatens America’s future.

Recommended readings

I recommend you watch the HBO series The Weight of the Nation.

Assignments - There will be an in-class assignment.

Session 15

December 11, 2012

Topic: Patient Protection and Affordable Care Act

Learning Objectives for Session

1. Understand issues related to the evolution and status quo of the US health care system.
2. Define terms and understand key issues in health services organization, management, financing, delivery, access, quality, costs and policy.
3. Evaluate the degree to which national health care expenditures are efficient, effective and sustainable over time.
4. Understand the interactions among access to care, quality of care, and costs of care.
5. Assess the interrelationships of incentives that drive our health care system.
6. Identify the infrastructure, programs and policies that exist in our health care system and assess the degree to which they meet the health needs of the population and goals of a safe, efficient, and effective health care system.

CEPH Competencies for Session

1. Identify the main components and issues of the organization, financing, and delivery of health services and public health system in the US.
2. Describe legal and ethical bases for public health, health care management and health services.
3. Discuss policy process for improving health status of populations as well as effects on health care organizations.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Apply organizational theory as well as “systems thinking” for resolving organization problems.

Required readings

(Links are all available on Blackboard.)

The Henry J. Kaiser Family Foundation. (2010). Summary of new health reform law.

The Henry J. Kaiser Family Foundation. (2010). Health reform implementation timeline.

Patient Protection and Affordable Care Act, Pub. L. No. 111-148, §2702, 124 Stat. 119, 318-319 (2010).

Assignments – Final paper is due.

Final Exam:

The final exam is on the date to be scheduled by the University. The final exam is **cumulative**, covering readings, lectures, guest speakers, and class discussion. The exam will consist of short answer and essay questions.

Additional Literature, Websites and Other Resources:

Personal Favorites

I subscribe to daily briefings on health policy from a variety of sources.

The Morning Consult (email Michael@themorningconsult.com)

The Robert Wood Johnson Foundation Daily News Digest (register at <http://my.rwjf.org/login.do>)

Kaiser Health News (register at <http://www.kaiserhealthnews.org/Email-Subscriptions.aspx>)

The Incidental Economist (register at <http://theincidentaleconomist.com/wordpress/>)

Federal/Congressional

U.S. Department of Health and Human Services www.hhs.gov

Centers on Medicare and Medicaid Services www.cms.hhs.gov

Centers for Disease Control and Prevention. www.cdc.gov

National Center for Healthcare Statistics www.cdc.gov/nchs

Agency for Healthcare Research and Quality www.ahrq.gov

Medicare Payment Advisory Commission. www.medpac.gov

Health Resources Services Administration www.hrsa.gov

Food and Drug Administration www.fda.gov

U.S. Congressional Budget Office www.cbo.gov

Library of Congress (Thomson service)

U.S. Department of Health and Human Services' Assistant Secretary for Planning and Evaluation

www.aspe.hhs.gov

U.S. Government Accountability Office www.gao.gov

State:

Maryland Dept. of Health and Hygiene www.dhmh.state.md.us

Maryland Health Services Cost and Review Commission www.hscrc.state.md.us

Maryland Health Connection (new Exchange) <http://www.marylandhealthconnection.gov/>

International:

World Health Organization www.who.int/en

World Bank www.worldbank.org

Organisation for Economic and Co-operative Development www.oecd.org

The following are health policy websites that may provide resources. Some of these are nonprofits, think tanks or research contract organizations. Remember that some may be biased.

Kaiser Family Foundation www.kff.org

Kaiser Health News <http://www.kaiserhealthnews.org/>

The Commonwealth Fund www.commonwealthfund.org

The Urban Institute www.urban.org

Brooking Institute www.brookings.edu

AEI www.aei.org

Heritage Foundation www.heritage.org

RAND www.rand.org

National Academy of Social Insurance www.nasi.org

RWJ Foundation www.rwj.org

NEJM Health Care Reform <http://healthcarereform.nejm.org/>