

Health Policy and Promotion

Class Meets: Tues 2:00-4:50pm, 238 Social Science Teaching
Reader: TBD
Instructor: tim.bruckner@uci.edu, SE I Rm 218 F
Instructor Office Hours: Thurs 2-4pm and by appointment
EEE: Readings, Grades, and Schedule Available on EEE.

Description:

Although health care expenditures account for almost 20% of the U.S. Gross Domestic Product, most researchers agree that indicators of population health fall well below levels that should be expected for a relatively prosperous society. We will investigate the causes of this paradox by examining two related fields. First, we will identify the main components and issues of the organization, financing and delivery of health services. Second, we will delineate the roles of the individual, the community, the state, and the nation in improving health. We will conclude by considering how knowledge of these two fields informs policymakers and planners in efforts to promote health and optimal delivery of health care. We will emphasize the U.S. case and, wherever possible, draw from the current federal debate on health care reform.

Course Objectives:

By the end of the course, I expect students to have the following knowledge and skills:

- **Identify** the various methods of payment for health care (e.g., Medicaid, Medicare, private insurance, out-of-pocket) as well as the key groups involved in each method.
- **Provide** examples of causes for rising health care costs in the U.S.
- **Understand and apply** economic principles to understanding the demand for, and supply of, health care (including but not limited to): adverse selection, moral hazard, health production function, marginal cost, imperfect information, supplier-induced demand, incentives, comparative effectiveness.
- **Relate** theories of health promotion to policy strategies.
- **Compare and contrast** the following efforts used to improve health: health care reform, legislation, taxation, and health promotion.
- **Describe** the health policymaking process and identify the benefits and drawbacks of policies for the key constituents.
- **Delineate** the relation among ethics, values, health care, and public health.

Required Texts:

Paul Feldstein. Health Policy Issues: An Economic Perspective. Fourth Edition, 2007. Health Administration Press. (referred to below as **HPIE**)

TS Bodenheimer & K Grumbach. Understanding Health Policy: A Clinical Approach. 2008 (5th edition). (referred to below as **UHP**)

I will disseminate other required readings either on EEE or as class handouts.

As the work requirement indicates (below), class participation, in terms of thoughtfulness not quantity, plays an important role in determining the final grade. Many of our discussions will involve assigned readings. To ensure thought-provoking discussions, I expect that students will have read the assignments before the associated class lecture.

Work Requirement:

Approximate grading weights appear as follows:

Quizzes (best 2 out of 3; in class)	20%
Final Paper	40%
Mini presentation	15%
Class Participation	20%
Completion of surveys/evaluations*	<u>5%</u>
TOTAL	100%

Three in-class quizzes will focus on lecture and reading material in the first half of the course (health care). Other requirements include a mini-presentation and a final paper. The mini-presentations will take place in class on either **May 4th** (on a health care system in another country) or **May 11th** (on a specific health promotion effort). The final paper will be due one week after the last class, **June 8th**. I will hand out detailed guidelines for both assignments in class.

* Students receive 1% for First Week Survey, 2% for Midterm Evaluation, 2% for Final Evaluation.

CLASS	TOPIC	Required Reading and Assignments
3/30	Overview of course and introduction to the paradox of excess and deprivation	Complete EEE First Week Survey by 5pm on 4/2 (1% of grade) 1. Fuchs V. Ch 1. Problems and Choices. In: <i>“Who Shall Live?”</i> 2. Gawande A. The Cost Conundrum: What a Texas town can teach us about health care. http://www.newyorker.com/reporting/2009/06/01/090601fa_fact_gawande
4/6	Health: quantitative and qualitative aspects	1. UHP Chapter 1 2. HPIE Chapter 1 3. McKenzie and Pinger: Chapter 4: Epidemiology 4. Gold M, Stevenson D, and Fryback DG. HALYS and QALYS and DALYS, Oh My. <i>Annu. Rev. Public Health</i> 2002. 23:115–34
4/13	The organization, financing, and delivery of health care in the U.S.	QUIZ #1 At beginning of class (includes material in 4/13 reading) 1. UHP Chapters 2,4,5,6 2. HPIE, Chapter 19 3. Dubay L, Holahan J, and Cook A. The Uninsured And The Affordability Of Health Insurance Coverage. <i>Health Affairs</i> 26 (2007): w22–w30.
4/20	Economic principles of health and health care	QUIZ #2 At beginning of class (includes material in 4/20 reading) 1. HPIE Ch 3,4,5,6,7 2. UHP Chapters 8,9 3. Scheffler RM, 2008. Chapter 1: The supply side of doctors. In <i>“Is there a doctor in the house? Market signals and tomorrow's supply of doctors.”</i> 4. Brook RH. The Science of Health Care Reform. <i>JAMA</i> 2009: 301, 2486-7.

4/27	Federally Funded Health Care: Medicaid and Medicare	<p>QUIZ #3 At beginning of class (includes material in 4/27 reading) Complete EEE Midterm Survey by 5pm on 5/4 (2% of grade)</p> <ol style="list-style-type: none"> 1. HPIE Chapters 8,9 2. Goldman DP, Joyce GF. Medicare Part D: A Successful Start With Room for Improvement. JAMA. 2008;299(16):1954-1955 . 3. Sara Rosenbaum. Medicaid and National Health Care Reform. NEJM 2009; 361;21. 4. Kaiser Permanente: Medicaid and the Uninsured. (#7580-05).
5/4	Health care systems: international comparisons	<p>Student Presentations</p> <ol style="list-style-type: none"> 1. HPIE Chapters 32, 34 2. UHP Chapter 14 3. Anderson GF, Frogner BK, Reinhardt UE. Health Spending In OECD Countries In 2004: An Update. Health Affairs 2007; 26(5):1481–1489.
5/11	Strategies of Health Promotion	<p>Student Presentations</p> <ol style="list-style-type: none"> 1. UHP Chapter 11 2. Rose G. Sick individuals and sick populations. Int J Epidemiol. 1985;14(1):32-8. 3. Cutler, David, “Behavioral Health Interventions,” June 2002, Prepared for National Academy of Science panel. 4. Stokols D. Translating social ecological theory into guidelines for community health promotion. Am J Health Promot. 1996;10(4):282-98.

5/18	Policy Case Studies: Tobacco and Obesity	<ol style="list-style-type: none"> 1. Warner KE. Tobacco Policy in the United States: Lessons for the Obesity Epidemic. pp.99-114. 2. Brownson RC et al. Environmental Tobacco Smoke: Health Effects and Policies to Reduce Exposure. Annu. Rev. Public Health. 1997. 18:163–85 3. Flegal KM et al. Cause-Specific Excess Deaths Associated With Underweight, Overweight, and Obesity. JAMA. 2007;298(17):2028-37. 4. French SA, Mary Story M, Jeffery RW. Environmental Influences on Eating and Physical Activity. Annu. Rev. Public Health 2001. 22:309–35. 5. http://www.seattlehousing.org/redevelopment/high-point/
5/25	Health Care Debate: The role of the individual, the community, the market, and the State	<ol style="list-style-type: none"> 1. HPIE Chapters 30,31 2. Marmor T, Oberlander J, White J. The Obama Administration’s Options for Health Care Cost Control: Hope Versus Reality. Ann Intern Med. 2009;150:485-489. 3. Wilensky GR. Health Care Reform — Where Do We Go from Here? NEJM 2010. 4. Kirch DG. The Healthcare Innovation Zone: A Platform for True Reform JAMA. 2010;303(9):874-875 (doi:10.1001/jama.2010.224)
6/1	Ethics and Values in Health Policy	<ol style="list-style-type: none"> 1. Mechanic D. Policy Challenges in Addressing Racial Disparities and Improving Population Health. Health Affairs 2005; 24:335-8. 2. Daniels N. Four Unsolved Rationing Problems: A Challenge. The Hastings Center Report, 24(4), 27-9. 3. Hadorn, DC. Setting Health Care Priorities in Oregon. JAMA v17, 2218-25, 1991. 4. Eddy D 1991. The Individual vs. Society: Resolving the Conflict. JAMA 265, 2399. 5. Millenson ML. The Silence. Health Affairs 2003;22:103-112. 6. Mello MM, Brennan TA. The controversy over high-dose chemotherapy with autologous bone marrow transplant for breast cancer. Health Aff. 2001;20:101-17.
6/8		Final Paper Due Tuesday 6/8, 5pm, Room 218F Social Ecology I

GENERAL CONDUCT

Two Weeks to Drop the Course

You may drop the course until 5 PM, Friday, April 9, 2010.

Academic Honesty and Civility

I will not tolerate academic dishonesty. I endorse and enforce University policies regarding academic integrity. Our conduct in this course is based on civility and mutual respect. Please review these important principles, set forth in the *UCI General Catalogue*.

Cell phones are **NOT** permitted in the classroom unless you are certain they are in the OFF or VIBRATE position; they cannot be used during quizzes.

Quiz Dates

I will administer the quizzes at the time scheduled; no make-ups will be given

30-Day Clause for Materials

Student papers and exams (including the final) will be saved for 1 month after Spring quarter ends, after which time all papers will be recycled.