

THE HELLER SCHOOL FOR SOCIAL POLICY AND MANAGEMENT

Brandeis University

Waltham, MA 02454

HS 5.13A ISSUES IN NATIONAL HEALTH POLICY

Fall 2018

Tuesdays 2:00-4:50 PM

Heller School, Altman Amphitheater G01

Stuart H. Altman, Ph.D.

Sol C. Chaikin Professor of National Health Policy

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Tuesdays 2:00 – 4:50 PM

Professor Stuart Altman **altman@brandeis.edu**

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Office hours by appointment, contact:
Wendy Colnon **colnon@brandeis.edu**

This course will survey and analyze the health care system in the United States, emphasizing the major issues and trends, which have made the subject of intense public concern. The course will cover the financing, delivery and payment of health care by both the public and private sectors. The history of health reform will be discussed as well as passage of the Patient Protection and Affordable Care Act (PPACA) and the political battle to Repeal and Replace it. The course will analyze the impact of PPACA on the number of uninsured and its geographic distribution. Each of the major components of the U.S. health financing system, Medicare, Medicaid, and Pvt. Insurance will be discussed as well as the high level of health care costs. We will also discuss the importance of “Social Determinants” on health status and the continued existence of disparities in the availability of care and its quality for certain populations. Even though we spend a far higher percentage of our national income on health care services than other countries the quality of care in the U.S, is far from the best and access problems for certain populations abound.

If you are a student with a documented disability on record at Brandeis University and wish to have reasonable accommodation for you in class, please see the Instructor immediately.

Statement on Academic Integrity:
Brandeis University’s *Rights and Responsibilities* states:

Every member of the University community is expected to maintain the highest standards of academic integrity. A student shall not submit work that is falsified or is not the result of the student’s own effort. Infringement of academic honesty by a student subjects that student to serious penalties, which may include failure on the assignment, failure in the course, suspension from the University or other sanctions (see Section 21). A student who is in doubt regarding standards of academic honesty in a course or assignment should consult the faculty member responsible for that course or assignment before submitting the work. A student’s lack of understanding is not a valid defense to a charge of academic dishonesty.

Please see Section 4 here (<http://www.brandeis.edu/studentaffairs/srcs/rr/RR11.12.pdf>) for the full statement.

Course Requirements:

Students will have a choice in terms of the requirements for a final grade. Either a student can only take a final exam which constitutes 100% of the grade, or a term paper and the final each of which contributed 50% to the final grade. The paper should be a policy analysis paper rather than a review, research or survey paper; discussing a health care problem, the reasons for the problem and potential solutions. The paper must be no longer than 12 pages (double-spaced). A short narrative and a title of the policy paper is required prior to paper due date. Please note the paper must not be related to a previous paper written, or if it is, how is it significantly different. There will also be an in-class final exam. Please contact Professor Altman if you have any questions.

POLICY PAPER NARRATIVE DUE:	November 6, 2018
POLICY PAPER DUE:	November 27, 2018
FINAL EXAM:	December 11, 2018

Readings and LATTE:

Because the seminar concentrates on new and emerging issues, it is difficult to construct a reading list that is up-to-date and comprehensive yet challenging and realistic in scope. Scholarly articles, reports, policy briefs, book chapters, and other readings are assigned weekly. There are both required and recommended readings each week. Students are expected to read and synthesize required readings prior to class meetings. Readings are listed in the syllabus and are available to download/print via LATTE. Recommended readings are starred (*). Additional readings that address emerging national health policy issues may be added throughout the semester.

Required Readings

1. Power, Politics, and Universal Health Care: The Inside Story of a Century Long Battle by Stuart H. Altman and David Shactman (Prometheus Books, September 2011) is recommended. Readings from Dr. Altman's book appear in the syllabus with the abbreviation PPUHC. It is available in the print and electronic editions.
2. The following books/reports are available on LATTE under "Introductory Material Reading":
 1. Coverage Matters: Insurance and Health Care (2001), Institute of Medicine.
<http://kff.org/medicare/issue-brief/an-overview-of-medicare/>
 2. Medicaid at 50, Kaiser Commission on Medicaid and Uninsured, Kaiser Family Foundation, May 2015
<http://www.kff.org/medicaid/report/medicaid-at-50/>
 3. The Facts on Medicare Spending and Financing, Kaiser Family Foundation, June 22, 2018
<https://www.kff.org/medicare/issue-brief/the-facts-on-medicare-spending-and-financing/>

A list of health policy resources that may be helpful to review throughout the semester is posted on LATTE. Lecture slides will also be available to download via LATTE.

For students with little or no background on the U.S. health system, it is recommended that you read ESSENTIALS OF Health Policy and Law, Third Addition, Joel Teitelbaum and Sara Wilensky Chapter 4,7-12. It is available in print and electronic editions.

CLASS 1 SEPTEMBER 4

OVERVIEW OF COURSE: IS ACCESS TO HEALTH CARE A “RIGHT” FOR ALL AMERICANS; SOCIAL DETERMINANTS OF HEALTH, PAYING FOR HEALTHCARE IN THE U.S.

1. Coverage Matters: Insurance and Health Care (2001), Institute of Medicine. Washington, DC: National Academies Press, 2011. http://books.nap.edu/openbook.php?record_id=10188&page=R11
Read Executive Summary Only
2. Woolf S, Braveman P. Where health disparities begin: the role of social and economic determinants—and why current policies may make matters worse. *Health Affairs*. 2011;30(10):1852-9.
3. Blumenthal D, McGinnis JM. Measuring Vital Signs: An IOM Report on Core Metrics for Health and Health Care Progress. 2015; 313(19):190102.
4. Woodhandler, S. and Himmelstein, D. U. The Relationship of Health Insurance and Mortality: Is Lack of Insurance Deadly? *Ann Intern Med*. June 27, 2017 doi:10.7326/M17-1403
5. Goozner, M., Editorial: Is Healthcare a Right? *Modern Healthcare*, December 31, 2016
6. Stark, R. Why Healthcare is not a ‘Right’ *Washington Times*, April 30, 2017

CLASS 2 SEPTEMBER 11 (DOONAN)

**THE NEED FOR HEALTH CARE REFORM, THE PASSAGE OF OBAMACARE (ACA)
SINGLE PAYER VS. OBAMACARE VS. REPUBLICAN REFORM PLANS/NO REFORM**

1. PPUHC Prologue, Introduction, Forward, Chapters 1-3
2. Obama, Barack H. Repealing the ACA without a Replacement – The Risks to American Health Care. *N Engl J Med* 376;4:2976-299 January 26, 2017
3. Sommers, B.D., Maylone, B., Blendon, R. J. et.al. Three-Year Impacts of The Affordable Care Act: Improved Medical Care and Health Among Low-Income Adults. *Health Affairs* 36, No. 6 (2017):1119-1128 Doi: 10.1377/hithaff.2017.0293
4. Antos, J., Capretta, J., Chen, L., et.al. Improving Health and Health Care: An Agenda for Reform. *Health Affairs Blog*, December 9, 2015
5. GOP Outline Health Plan “A Better Way” *Health Care*, June 22, 2016.
6. Solving The Problem of Bipartisan Health Reform, R.Pozen, *Health Affairs*, Aug. 22 2017

*Estimating the Affordable Care Act’s Impact on Health, *The Commonwealth Fund*, 8/12/15.

*Essentials of Health Policy and Law Second Edition, Joel B. Teitelbaum and Sara E. Wilensky, Chapter 2: Policy and the Policy Making Process, Pages 11-29.

CLASS 3 SEPTEMBER 18 (DOONAN)

MEDICAID ITS HISTORY AND ITS FUTURE

1. PPUHC, Chapters 4 and 7
2. Medicaid at 50 <http://www.kff.org/medicaid/report/medicaid-at-50/>
3. Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA): <http://www.kff.org/medicaid/upload/7863.pdf>
4. Antonisse, L., Garfield, R., Rudowitz, R., and Artiga, S. The Effects of Medicaid Expansion under the ACA: Findings from a Literature Review, Kaiser Family Foundation, June 2016, Issue Brief. <http://kff.org/report-section/the-effects-of-medicaid-expansion-under-the-aca-findings-from-a-literature-review-issue-brief/>
5. Section 1115 Medicaid Waivers: A Look at Key Themes and State Specific Waivers, MB Musameci, Kaiser Family Foundation, Aug. 16, 2017
6. Republican Changes to Medicaid Could Have Longer Impact Than Changes to Obamacare, H. Park, NY Times March 7, 2017

Sept. 25 – NO Class – Brandeis Monday

CLASS 4, OCTOBER 2

THE CHANGING STRUCTURE OF PRIVATE INSURANCE

1. Berenson, "The Growing Power of Providers To Win Steep Payment Increases From Insurers Suggest Policy Remedies May Be Needed", Health Affairs, 2012 31:973-981.
2. Medicare Payment Advisory Commission June 2013 Report: Chapters 2-4.
3. Uwe E. Reinhardt, "Is Employer-Based Health Insurance Worth Saving?" NY Times, May 22, 2009.
4. James Robinson, "The End of Managed Care" JAMA, 285 (20): 2622-2628, May 23/30, 2001
5. Sommers et al, Why Did Employer Coverage Fall in Massachusetts After the ACA? Potential Consequences of a Changing Employer Mandate, Health Affairs, July 2018. <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2018.0220>

CLASS 5 OCTOBER 9

MEDICARE AND ITS FUTURE

1. PPUHC, Chapters 5, 6, and 8
2. Policy Options to Sustain Medicare for the Future, Kaiser Family Foundation, January 2013
3. The Facts on Medicare Spending and Financing, Kaiser Family Foundation, June 22, 2018 <https://www.kff.org/medicare/issue-brief/the-facts-on-medicare-spending-and-financing/>
4. Glied, S. Financing Medicare Into The Future: Premium Support Fails The Risk-Bearing Test, Health Affairs, July 2018; 37:7 <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2018.0008>

CLASS 6, OCTOBER 16 (THOMAS)

MEDICAL TECHNOLOGY AND PRESCRIPTION DRUGS: THEIR USE AND COSTS

Required Readings:

Diffusion of innovation/ technology and health care costs

1. Dearing JE, Cox JG. Diffusion of innovations theory, principles and practice. Health Affairs 2018 (February);37(2):183-197. Available from: <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2017.1104>
2. The New York Times Upshot. In forecasting health care, let technology be your guide. March 9, 2015. Available at: https://www.nytimes.com/2015/03/10/upshot/in-forecasting-health-costs-let-technology-be-your-guide.html?rref=collection%2Fsectioncollection%2Fupshot&action=click&contentCollection=upshot®ion=stream&module=stream_unit&version=search&contentPlacement=3&pgtype=sectionfront
3. Kesselheim AS, Avorn J, Sarpatwari A. The High Cost of Prescription Drugs in the United States - Origins and Prospects for Reform. JAMA 2016;316(8):858-871. Available at: <https://jamanetwork.com/resources.library.brandeis.edu/journals/jama/fullarticle/2545691>
4. Conti RM and Rosenthal MB. Pharmaceutical Policy Reform — Balancing Affordability with Incentives for Innovation. The New England Journal of Medicine 2016;374(8):703-706. Available at: <https://www.nejm.org/doi/pdf/10.1056/NEJMp1515068>
5. New York Case Study (application of ICER estimates for policy): Hwang TJ, Kesselheim AS, Sarpatwari A. Value based pricing and state reform of prescription drug pricing. JAMA 2017;318(7):609-610. Available at: <https://jamanetwork.com/resources.library.brandeis.edu/journals/jama/fullarticle/2643729>

Additional references/interest :

The White House Blueprint to lower drug prices. Available at:

<https://www.whitehouse.gov/briefings-statements/president-donald-j-trumps-blueprint-lower-drug-prices/>

National Academy for State Health Policy Blog: While the Administration Mulls How to Curb Prescription Costs, State Legislatures Take the Lead. Available at: <https://nashp.org/while-the-administration-mulls-how-to-curb-drug-costs-state-legislatures-are-acting/>

Kaiser Family Foundation, 2018. What Are the Recent and Forecasted Trends in Prescription Drug Spending? Chart collection. Available from: <http://kff.org/slideshow/what-are-the-recent-and-forecasted-trends-in-prescription-drug-spending/>

CLASS 7 OCTOBER 23

GROWTH IN HEALTH COSTS, ATTEMPTS TO CONTROL IT AND END OF LIFE SPENDING

1. PPUHC Chapters 9 & 10
2. Micah Hartman, et al. National Health Care Spending in 2016: Spending and Enrollment Growth Slow After Initial Coverage Expansions, Health Affairs, January 2018. <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2017.1299>

3. David M Cutler, What is the US Health Spending Problem? Health Affairs, March 2018. <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2017.1626>
4. Roehrig and Rousseau, "The Growth In Cost Per Case Explains Far More of US Health Spending Increases Than Rising Disease Prevalence", Health Affairs September 2011, 30:1657-1663 <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2010.0644>
5. Cubanski, J., Neuman, T., Griffin, S., and Damico, A. Medicare Spending at the End of Life: A Snapshot of Beneficiaries Who Died in 2014 and the Cost of Their Care. Kaiser Family Foundation, July 2016.
6. 2013 Comparative Price Report, Variation in Medical and Hospital Prices by Country, International Federation of Health Plans.

*White, C., J. D. Reschovsky, and A. M. Bond. 2014. "Understanding Differences Between High- And Low-Price Hospitals: Implications For Efforts To Rein In Costs." Health Aff (Millwood).

CLASS 8, OCTOBER 30 (MECHANIC)

DELIVERY SYSTEM CHANGES & PAYMENT REFORM BY GOVERNMENT AND PRIVATE INSURANCE

1. Mechanic RE, Santos P, Landon BE, Chernew ME. Medical Group Responses to Global Payment: Early Lessons From the 'Alternative Quality Contract' in Massachusetts. *Health Aff (Millwood)*. 2011 September; 30(9): 1734-1742.
2. Mechanic RE. Opportunities and Challenges for Payment Reform: Observations from Massachusetts. *Journal of Health Policy, Politics and Law* (2016)
3. MedPAC Report to Congress, June 2016, Chapter 2: Medicare's new framework for paying clinicians.
4. Porter, M. and Kaplan, R.S. How to Pay for Health Care. *Harvard Business Review, Economics & Society*. July-August 2016 issue.
5. James, B.C. and Poulsen, G. P. The Case for Capitation. *Harvard Business Review, Economics & Society*. July-August 2016 issue.

Recommended reading (optional but short):

- *Mechanic R, Tompkins C. Lessons Learned Preparing for Medicare Bundled Payment. *N Engl J Med* 2012; 367:1873-1875.
- *Mechanic R. When New Medicare Payments Collide. *N Engl J Med* 2016; 374:1706-1709.
- *Nyweide DJ, Lee W, Cuerdon TT et al. Association of Pioneer Accountable Care Organizations vs Traditional Medicare Fee for Service With Spending, Utilization, and Patient Experience. *JAMA*. 2015;313(21):2152-2161.

CLASS 9, NOVEMBER 6 (TBA) (POLICY PAPER NARRATIVE DUE TODAY)

HEALTH DISPARITIES AND EMERGING ISSUES

1. M. C. Arcaya and J. F. Figueroa. Emerging Trends Could Exacerbate Health Inequities in the United States. *Health Affairs* 36, No. 6 (2017); 992-998 Doi: 10.1377/hlthaff.2017.0011
2. Washington, D.L., Steers, W. N. Huynh, A.K. et.al. Racial and Ethnic Disparities Persist at Veterans health Administration Patient-Centered Medical Homes. *Health Affairs* 36, No. 6 (2017):1086-1094. doi: 10.1377/hlthaff.2017.0029
3. Agency for Healthcare Research and Quality, National Healthcare Disparities Report - 2011: Chapter 10, Priority Populations: <http://www.ahrq.gov/qual/nhdr11/chap10.htm>
4. Kaiser Family Foundation, Reform and Communities of Color – Implications for Racial and Ethnic Health Disparities (September 2010) <http://kff.org/disparities-policy/issue-brief/health-reform-and-communities-of-color-implications/>

5. Jha AK, Orav EJ, Epstein AM. Low-Quality, High-Cost Hospitals Mainly in South, Care for Sharply Higher Shares of Elderly Black, Hispanic and Medicaid Patients. *Health Affairs*. 2011; 30(10): 1904 – 1911.
6. Trivedi AM, Grebla RC, Wright SM, and Washington DL. Despite Improved Quality of Care in the Veteran's Affairs Health System, Racial Disparity Persists for Important Clinical Outcomes. *Health Affairs*. 2011; 30(4): 707-715.

*The American Public Health Association (APHA) is hosting a series of webinars about the effects of racism on the health of the United States. This looks like a terrific series. You can find details here:

<http://www.apha.org/events-and-meetings/webinars/racism-and-health>

Emerging Issues

*Corlette, S., Volk, J., Berenson, R. and Feder, J. Narrow Provider Networks in New Health Plans: Balancing Affordability with Access to Quality Care. The Center on Health Insurance Reforms, Georgetown University Health Policy Institute, and Urban Institute. May 2014

CLASS 10 NOVEMBER 13

HOW HOSPITALS AND PHYSICIANS ARE PAID

1. MedPac – Payment Basics. Hospital Acute Inpatient Services Payment System. Rev. October 2016
2. Stuart Altman, “The Lessons of Medicare’s Prospective Payment System Show That the Bundled Payment Program Faces Challengers” *Health Affairs* September 2012.
3. Quentin, et al., “Hospital Payment Based on Diagnosis Related Groups Differs In Europe And Holds Lessons For The United States”, *Health Affairs* April 2013, 32:713-723.
4. MedPac, Report to Congress, March 2018, Chapters 3 & 4. http://www.medpac.gov/docs/default-source/reports/mar18_medpac_entirereport_sec.pdf?sfvrsn=0

CLASS 11, NOVEMBER 20 (GARNICK)

QUALITY OF CARE AND PERFORMANCE IMPROVEMENT PROGRAMS

1. Jha, Ashish K. "Back to the Future: Volume as a Quality Metric." *JAMA* 314, no. 3 (2015): 214-215.
2. Donabedian, Avedis. "Evaluating the quality of medical care." *The Milbank memorial fund quarterly* (1966): 166-206. For a clear description of the structure/process/outcome framework introduced in this article, also look at the AHRQ National Quality Measures Clearinghouse, Tutorials on Quality Measures, Varieties of Measures in NQMC, <http://www.qualitymeasures.ahrq.gov/tutorial/varieties.aspx>.
3. 2014 National Healthcare Quality & Disparities Report, <http://www.ahrq.gov/research/findings/nhqrd/index.html>
4. Ofri, Danielle. "Ashamed to admit it: owning up to medical error." *Health Affairs* 29, no. 8 (2010): 1549-1551.
5. Pronovost, Peter, Dale Needham, Sean Berenholtz, David Sinopoli, Haitao Chu, Sara Cosgrove, Bryan Sexton et al. "An intervention to decrease catheter-related bloodstream infections in the ICU." *New England Journal of Medicine* 355, no. 26 (2006): 2725-2732.
6. Leape, Lucian L. "The checklist conundrum." *N Engl J Med* 370, no. 11 (2014): 1063-1064.

CLASS 12, NOVEMBER 27 **POLICY PAPER DUE TODAY**

INTERNATIONAL COMPARISON IN HEALTHCARE SYSTEMS, UTILIZATION AND PRICES

1. Health Care Systems In Transition: United Kingdom and Germany.
2. R. Steinbrook. "Private Health Care in Canada" *New England Journal of Medicine*, 354;16 (April 2006) 1661-1664.
3. J. Zwanziger and S. Brammli-Greenberg. "Strong Government Influence Over the Israeli Health Care System has led to low rates of spending growth" *Health Affairs*, 30, no.9 (2011):1779-1785.
4. M. Stabile et al. Health Care Cost Containment Strategies Used In Four Other High Income Countries Hold Lessons for the United States: *Health Affairs* 2013 37:639-642
5. Davies, K. Commonwealth Fund, "Mirror Mirror on the Wall, 2014 Update: How the U.S. Health Care System Compares Internationally"

Supplement

*Schoen, C., et al. Access, Affordability, and Insurance Complexity Are Often Worse in The United States Compared To Ten Other Countries. DOI: 10.1377/hlthaff.2013.0879. *Health Affairs* 32, No. 12 (2013): 2205-2215. <http://content.healthaffairs.org/content/32/12/2205.full.pdf+html>

CLASS 13, DECEMBER 4

PHYSICIAN SUPPLY & PAYMENTS AND THE ROLE OF NON-PHYSICIAN PROFESSIONALS

1. W. Hsaio et al, "Results and Policy Implications of the Resource-Based Relative-Value Study" *NEJM*, 1988, Vol. 319, No. 13.
2. MEDPAC Report March 2009, Physician Payment, Spring pp. 77-105.
3. R. A. Cooper, "Weighing the Evidence for Expanding Physician Supply," *Annals of Internal Medicine*, 141;705-714, 2004. (www.annals.org)
4. Grover, A. and Niecko-Najjum, L.M. Building a Health Care Workforce for the Future: More Physicians, Professional Reforms and Technological Advances. *Health Affairs* 2013. 32(11): 1922 – 1927.
5. Barnes, H., et al. Rural and Nonrural Primary Care Physician Practices Increasingly Rely on Nurse Practitioners. *Health Affairs*, June 2018.
<https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2017.1158>

CLASS 14

FINAL EXAM IN CLASS

DECEMBER 11, 2018

TA SESSION DATE/TIME TBD (OPTIONAL)

TA SESSION DATE/TIME TBD (OPTIONAL)

