



NYU

**ROBERT F. WAGNER GRADUATE
SCHOOL OF PUBLIC SERVICE**

HPAM-1830

Introduction to Health Policy and Management Fall 2020, Section 002

Instructor Information

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Course Information

- Online Live Sessions: Wednesdays 7:00-8:00 PM ([Zoom in the Classroom](#))
- Note – Class will not meet on Monday, September 9th

Course Description

This course provides a broad survey of key issues and challenges in the field of health policy and management (HPAM). It will help you analyze key issues related to the distribution of health and illness in society, the organization of the healthcare system, and the relationship of one to the other. In our first session, you will learn about the evolution of the U.S. healthcare system and the roles of health policy and management (HPAM) and public health in current debates. We will then go on to view the U.S. healthcare system from a telescope (an international perspective), consider the relative power of stakeholders in the policymaking process, and the roles of government in the health system. We conclude the introduction to this class with a glimpse into the future by focusing on the evolution of patient roles, demography and technology. This is the context in which you will find yourselves tackling problems as your careers evolve.

In the second part of the course, we explore divergent perspectives for analyzing population health and healthcare: clinical; epidemiologic; sociological, geographic and cultural; economic; and ethical. We focus on social determinants of health, racial, ethnic, and income disparities among population groups, and how health policymakers and managers can work collaboratively with leaders in housing, education, transportation, and other sectors to promote public health.

In the third part of the course, we focus on three issues that leaders in the field of HPAM will have to confront: 1) population health and how to improve it; 2) the quality of medical care (how to measure and assess health system performance); and 3) opioid epidemic. In covering these issues, we emphasize the value of understanding diverse disciplinary perspectives, the challenges of meeting

the varied (and often conflicting) needs and motivations of healthcare system stakeholders, and the ways in which the United States healthcare system differs from those of other wealthy nations.

COURSE OVERVIEW

Part I: INTRODUCTION TO HEALTH POLICY AND MANAGEMENT (HPAM)	
Module 0	Course Introduction – Sept.3
Module 1	HPAM, Public Health and the Healthcare System—Sept. 10
Module 2	The U.S. Healthcare System Viewed from a Telescope -- Sept. 17
Module 3	The Roles of Government and Stakeholders in Health Systems and Health Policy—Sept. 24
Module 4	Patients, Technology and the Future of Health Systems—Oct.1
Part II: DIVERGENT PERSPECTIVES ON HPAM	
Module 5	Clinical Perspectives—Oct. 8
Module 6	Epidemiological Perspectives –Oct.15
Module 7	Sociological, Geographic and Cultural Perspectives Oct.22
Module 8	Economic Perspectives – Oct. 29
Module 9	Ethical Perspectives – Nov. 5
Part III: SELECTED ISSUES IN HPAM	
Module 10	The Healthcare System and Population Health: How Can the Healthcare System Intervene on Social Determinants? –Nov. 12
Module 11	The Opioid Epidemic –Nov. 19
Module 12	Quality of Medical Care and Health System Performance –Dec.3
Module 13	Research Dossier Presentations and Discussion – Dec. 10

Course Readings

In every Module, I expect students to read all the assigned articles and/or textbook chapters and view the films noted on this syllabus. The textbook, edited by Kovner and Knickman, focuses on the organization and financing of healthcare delivery in the United States. In addition, there are three books to read (one by J. Groopman, a physician; the second by Lynne Payer, a medical journalist); and the third by T. R. Reid. Groopman's book provides a clinical perspective on healthcare, often not appreciated by managers and policy analysts. Payer's book, however dated, provides an analysis of the less scientific aspects of medicine among selected Western nations. Reid's book around which there is also an optional film you may wish to watch, is a journalistic approach to viewing health systems abroad.

Reference Textbook: Kovner, A. and Knickman, J., eds. *Health Care Delivery in the United States (12th edition)*. New York: Springer Press, 2015. Not required for purchase.

Please note that you should purchase the three books:

Groopman, Jerome. *How Doctors Think*. New York: Mariner, 2007. ISBN 9780547053646. (Introduction and chapters 1, 2, and 9) -- **Module 5**.

Payer, Lynn. *Medicine and Culture*. New York: Henry Holt, 1996. ISBN 9780805048032. (Chapters 1-2, pp.15-34; and read one or two of the four cases on France, Germany, Great Britain and the United States -- **Module 7**.)

Reid, T.R. *The Healing of America: A Global Quest for Better, Cheaper, and Fairer Health Care*. New York: Penguin, 2010. ISBN 9780143118213.

Journals

I encourage students to browse recent issues of well-respected journals, e.g., *American Journal of Public Health*; *Journal of the American Medical Association*; *New England Journal of Medicine*; *The Journal of Health Politics, Policy and Law*, and *Health Affairs*. Kovner and Knickman's book also contains helpful websites and references.

Assignments

There are several graded components to the course for which you will be responsible. In addition, we encourage you to collaborate through group assignments and discussions. The purpose of your individual and collaborative work is to help you gain a better understanding of HPAM. You will work in small groups (never more than 3) throughout the course in preparing for short class presentations. In this context you will face challenges from your fellow student colleagues, and share your thoughts with the class in our weekly sessions. In the third part of the course, you will begin conducting your individual documentary research with two objectives: 1) dig deeper into one of the health policy issues covered in this part of the course; and 2) illustrate the strengths and limitations of the divergent perspectives introduced in the second part of the course.

In addition to live student participation in each session, the relative importance of assignments in calculating your final grade for this course is as follows:

Position Papers (1 page- no more than 350 words). Five papers - 50%

Though the course prompts you for 8 position papers throughout the semester, you will only complete 5 out of the 8, including the first one, which is mandatory. You will select the 4 additional papers to complete (but you should not submit additional ones). I strongly recommend that you review the first one with a consultant at the writing center and obtain feedback before submitting it to me and your fellow students. Each position paper will count as 10% of your grade.

These assignments are summary answers to questions posed about your views/reactions to the assigned readings in each Module. Your responses should be posted by 11:55 pm on the Monday **after** each class meeting in the appropriate forum listed on NYU Classes.

Research Dossier - 40%

You will conduct documentary research on a specific aspect of the selected issues (Pt. III of the course) and assemble a research dossier consisting of the following parts:

- A one-page (No more than 350 words) project proposal (10% of grade) in which you specify:
 1. For whom you are doing this project (your boss or a client or a specific organization-- can be public or private)?

2. Why is it important? (1 paragraph)
3. What is the broad issue or issues that motivate your inquiry (what you would like to explore)?
4. What is the specific question about which you propose to conduct documentary research (a quick literature review), a selected portion of which you will include in the Appendix to the research dossier?
 - An Appendix (15% of grade) with the articles you decide to share with your boss or client, which provide some answers to the question in #4 (above).
 - A PowerPoint (no more than 5 slides) that you will submit **after** the Live Session in Module 13. This presentation (5% of grade) should state your research question(s) and what you found by reading the materials in your Appendix.
 - A final two-page paper (no more than 750 words) in which you summarize what you found by reading the materials and what you learned from the exercise (10% of grade).

The Research Dossier has four separate deliverables (as noted above) that you will submit during the course. The grading criteria document posted in NYU Classes contains guidelines for all four parts.

Live Session Participation - 10%

For each Module you will be expected to attend and participate in the live session. Your team must be prepared to discuss the group position papers and answer questions from your instructor and peers.

Detailed Course Overview

Part I: INTRODUCTION TO HEALTH POLICY AND MANAGEMENT (HPAM)

Module 1: HEALTH POLICY AND MANAGEMENT (HPAM), PUBLIC HEALTH AND THE HEALTHCARE SYSTEM

Learning Objectives

- Discuss the stability of the U.S. health system and the obstacles to reform.
- Differentiate private services (e.g., medicine) from public services (e.g., public health).
- Explain why it is important for HPAM professionals to understand perspectives related to clinical; epidemiologic; sociological, geographic and cultural; economic; and ethical issues.
- Improve writing and editing skills.

Required Readings:

Brown, L. D. (2008). "The Amazing Non-collapsing U.S. Health Care System — Is Reform Finally at Hand?" *New England Journal of Medicine*, 358(4), 325-327.

Chinitz, D. P. and Rodwin, V. G. (2014). "On health policy and management (HPAM): mind the theory-policy-practice gap." *International Journal of Health Policy and Management*, 3(7), 361-363.

Hemenway, D. (2010). "Why we don't spend enough on public health. *NEJM*, 362(18), 1657-58.

Reid, T.R. *The Healing of America*. New York: Penguin, 2009. Chapter 2.

Film

Escape Fire: The Fight to Rescue American Healthcare

Module 2: THE U.S. HEALTHCARE SYSTEM VIEWED FROM A TELESCOPE

Learning Objectives

- Explain the differences among the United States patchwork healthcare system and healthcare systems in other wealthy nations.
- Distinguish models of National Health Insurance (NHI) and National Health Service (NHS) systems.
- Explain how social and behavioral factors may influence population health.

Required Reading

Book:

Reid, T.R. *The Healing of America*. New York: Penguin, 2009. Chapters 1, 4, 7, and 13

Articles:

Schroeder, S. A. (2007). "We Can Do Better—Improving the Health of the American People." *NEJM*, 357(12), 1221-28.

Papanicolas, I., Woskie, L. R., and Jha, A. K. (2018). "Health Care Spending in the United States and Other High-Income Countries." *JAMA* 319(10), 1024-39.

Reid, T.R. *The Healing of America*. New York: Penguin, 2009. Chapter 2.

Film: T.R. Reid: *Sick Around the World*

Module 3: THE ROLES OF GOVERNMENT AND OTHER STAKEHOLDERS IN HEALTH SYSTEMS AND HEALTH POLICY

Learning Objectives

- Distinguish key stakeholders involved in making health policy.
- Analyze the role of ideas, evidence, and interests in the health policymaking process.
- Differentiate Republican and Democratic proposals for healthcare reform.
- Summarize key characteristics of Medicare, Medicaid, and government regulation of the healthcare system.
- Distinguish different levels of government intervention in the U.S. healthcare and public healthcare systems.
- Differentiate multiple roles of government intervention in the healthcare sector.

Required Reading

Textbook (from 11th edition-available in resource materials):

Chapter 3: Government and Health Insurance: The Policy Promise (Sparer, M. and Thompson, F.)

Articles:

Frieden, T. R. (2013). "Government's Role in Protecting Health and Safety." *NEJM*, 368(20), 1857-59.

Longest, B. B. (2007). "The Process of Public Policymaking: A Conceptual Model." In P.R. Lee & C.L. Estes, eds. *The Nation's Health*. Sudbury, MA: Jones & Bartlett.

Navarro, V. (2007). What is a National Health Policy? *International J. of Health Services*, 37(1), 1-14.

Sharfstein, J. M. (2016). Banishing "Stakeholders." *The Milbank Quarterly*, 94(3), 476-79.

Film: Michael Moore's *Sicko*

Module 4: PATIENTS, TECHNOLOGY, AND THE FUTURE OF HEALTH SYSTEMS

Learning Objectives

- Develop a vision of alternative futures for health system development.
- Explain the impending technological and demographic changes affecting the delivery of health services.
- Discuss how healthcare organizations might respond to demographic and technological change.
- Assess trends in the growth of the medical-industrial complex.

Required Reading

Articles:

Leonhardt, David. "Making Health Care Better." *The New York Times*, Nov. 3, 2009.

Topol, E. J., Steinhubl, S. R., and Torkamani, A. (2015). "Digital Medical Tools and Sensors." *JAMA*, 313(4), 353-54.

Emanuel, Ezekiel. "Are hospitals becoming obsolete?" *The New York Times*, Feb. 25, 2018.

Iglehart, J. K. (2015). "The Expansion of Retail Clinics—Corporate Titans vs. Organized Medicine." *NEJM*, 373(4), 371-73.

Mukherjee, Siddhartha. "A.I .vs. M.D." *The New Yorker*, April 3, 2017.

Obermeyer, Z., and Lee, T. H. (2017). *Lost in Thought—The Limits of the Human Mind and the Future of Medicine*. *NEJM*, 377(13), 1209-11.

Nochomovitz, M., and Sharma, R. (2018). "Is it time for a new medical specialty? The medical virtualist." *NEJM*, 319(5), 437-38.

PART II: DIVERGENT PERSPECTIVES ON HPAM

Module 5: CLINICAL PERSPECTIVES

Learning Objectives

- Compare and contrast how doctors and other clinicians think differently than managers and policymakers.
- Examine how units of analysis differ among clinicians, managers, and policymakers.
- Discuss conditions for good clinical differential diagnosis and the forces affecting clinical decision-making.

Required reading

Book:

Groopman, J. *How Doctors Think*. New York: Mariner, 2008.
(Introduction, Chapters 1, 2 and 9).

Module 6: EPIDEMIOLOGICAL PERSPECTIVES

Learning Objectives

- Discuss alternative measures of population health.
- Compare population health among geographic areas.
- Examine how behavior and poverty are determinants of population health.

Required Reading

Textbook:

Russo, P. (2015). Population Health. Chapter 5 in Jonas and Kovner's *Healthcare Delivery in the United States*, 11th ed., J. Knickman, A. Kovner, eds. New York: Springer.

Articles:

Banks, J., Marmot, M., Oldfield, Z., and Smith, J. (2006). "Disease and Disadvantage in the United States and England." *JAMA*, 295(17), 2037-2045.

Mokdad et. al. (2004). "Actual Causes of Death in the United States." *JAMA*, 291(10), 1238-1245.

Optional Recommended Article

Kolata, Gina. "Death Rates Rising for Middle-Aged White Americans, Study Finds." *New York Times*, November 2, 2015.

Module 7: SOCIOLOGICAL, GEOGRAPHIC, AND CULTURAL PERSPECTIVES

Learning Objectives

- Explain cultural dimensions of medical practice across nations.
- Examine the role of socioeconomic status in population health and use of health services.
- Hypothesize how population health and use of healthcare among communities differs based on socioeconomic, geographic, or cultural factors.

Required Reading

Book:

Payer, L. *Medicine and Culture*. New York: Henry Holt, 1988. (Chapters 1-2, pp. 15-34; and read two or three of four cases on France, Germany, Great Britain, and United States.

Articles:

Fuchs, V. (1974) "A Tale of Two States. In *Who Shall Live?*" *Health, Economics and Social Choice*. NY: Basic Books; and update: Rodwin, V., and Croce-Galis, M. (2004). "Population Health in Utah and Nevada: An Update on Victor Fuchs' Tale of Two Cities." In Conrad, P. ed. *Sociology of Health and Illness*. New York: Worth-St. Martin's Press.

Isaacs S.L., and Schroeder S.A. (2004). "Class — The ignored determinant of the nation's health." *NEJM*, 351(11), 1137-42.

Video: Williams, David R. "How Racism Makes Us Sick." Filmed 2017. YouTube video, 17 minutes, 27 seconds. Posted May, 2017.

Optional

Green et. al. (2001). "The Ecology of Medical Care Revisited." *NEJM*, 344(26), 2021-2025.

Module 8. ECONOMIC PERSPECTIVES

Learning Objectives

- Develop understanding about the strengths and limitations of markets in the healthcare sector.
- Discuss the relationships between income and mortality.
- Develop an awareness of the role of values in health services research.

Required Reading

Articles:

Brooks, David. "Do Markets Work in Health Care?" *New York Times*, Jan. 13, 2017.

Reinhardt, Uwe. "Is Health Care Special?" *New York Times*, Aug. 6, 2010.

Reinhardt, Uwe. "Health Care, Uncertainty and Morality." *New York Times*, Aug. 13, 2010.

Baicker, K. and Chandra, A. (2017). "Evidence-Based Health Policy." *NEJM*, 377(25), 2413-2415.

Stone, Deborah. "Efficiency." Chapter 3 in *Policy Paradox: The Art of Political Decision Making*, 3rd ed. New York: W.W. Norton and Co., 2011.

Module 9: ETHICAL PERSPECTIVES

Learning Objectives

- Apply concepts of ethical analysis to HPAM.

- Explain what Rosner calls “injurious inequalities.”
- Discuss the ethics of healthcare rationing.

Required Reading

Articles:

Roberts, M., and Reich, M. (2002). Ethical Analysis in Public Health. *The Lancet*, 359(9311), 1055-1059.

Brock, Dan. “Rationing: Why It Is Ethical.” *The Hastings Center*. July 16, 2009. www.thehastingscenter.org.

Singer, Peter. “Why We Must Ration Health Care.” *New York Times*, July 15, 2009.

White, Joseph. “The Limited Ethics of Rationing: A Response to Dan Brock.” *The Hastings Center*. July 24, 2009. www.thehastingscenter.org.

Rosner, D. (2016). Injurious Inequalities. *The Milbank Quarterly*, 94(1), 47-50.

DeAngelis, C. (2016). Big Pharma Profits and the Public Loses. *Milbank Quarterly*, 94(1), 30-33.

Cohn, J. (2016). The Drug Price Controversy Nobody Notices. *Milbank Quarterly*, 94(2), 260-263.

Fink, Sheri. “Drug Shortages Forcing Hard Decisions on Rationing Treatments.” *The New York Times*, January 29, 2016.

PART III: SELECTED ISSUES IN HPAM

Module 10: THE HEALTHCARE SYSTEM AND POPULATION HEALTH: HOW CAN THE HEALTHCARE SYSTEM INTERVENE ON SOCIAL DETERMINANTS?

Learning Objectives

- Propose alternative strategies for improving different dimensions of population health.
- Evaluate the role of healthcare organizations in addressing the social determinants of population health.
- Discuss how policymakers and managers can respond to the evidence on social determinants of health.

Required Reading

Articles:

Perla, R., Onie, R., and Lee, T. H. (2016). “Population Health: The Ghost Aim.” *NEJM Catalyst*.

Fuchs, V. (2017). “Social Determinants of Health: Caveats and Nuances.” *JAMA*, 317(1), 25-26.

Sequist, T., and Taveras, E. (2014). “Clinic–Community Linkages for High-Value Care.” *NEJM*, 371(23), 2148-2150.

Adler, N. E., Glymour, M. M., and Fielding, J. (2016). "Addressing Social Determinants of Health and Health Inequalities." *JAMA*, 316(16), 1641-1642.

Marmot, M. (2006). "Status syndrome: a challenge to medicine." *JAMA*, 295(11), 1304-1307.

McGinnis, J. M. (2016). "Income, Life Expectancy, and Community Health: Underscoring the Opportunity." *JAMA*, 315(16), 1709-1710.

Film: Rebecca Onie Ted Talk: What if Our Healthcare System Kept Us Healthy?

Module 11: THE OPIOID EPIDEMIC

Learning Objectives

- Distinguish clinical, epidemiologic, geographic, and political-economic approaches to the opioid epidemic.
- Explain the differences between demand, need, and induced demand.
- Discuss regulatory challenges in controlling the opioid epidemic.

Required Reading

Articles:

Humphreys, Keith, et al. (2018). "Opioids of the Masses: Stopping an American Epidemic From Going Global." *Foreign Affairs*, May/June 2018.

U.S. Senate Homeland Security & Governmental Affairs Committee. *Fueling an epidemic*, 2018.

Barnett, M., et al. (2017). "Coupling Policymaking with Evaluation — The Case of the Opioid Crisis." *NEJM*, 377(24), 2306-2309.

Frieden, T., and Houry, D. (2016). "Reducing the Risks of Relief — The CDC Opioid-Prescribing Guideline." *NEJM*, 374(16), 1501-1504.

Film: 60 Minutes. "The Whistleblower."

Higham, Scott, and Lenny Bernstein. "How Congress Allied with Drug Company Lobbyists to Derail the DEA's War on Opioids." *The Washington Post*. WP Company, October 5, 2017.

<http://www.washingtonpost.com/graphics/2017/investigations/dea-drug-industry-congress/>.

Module 12: QUALITY OF MEDICAL CARE AND HEALTH SYSTEM PERFORMANCE

Learning Objectives

- Discuss possible reasons for variations in medical practice.
- Distinguish process from outcome measures of healthcare and their role in continuous quality improvement (CQI) and public reporting of quality information.
- Assemble all components of your research dossier.

Required Reading

Huckman, R. S., and Kelley, M.A. (2013). "Public Reporting, Consumerism, and Patient Empowerment." *NEJM*, 369(20), 1875-1877.

Wennberg, J. et al. (1989). "Hospital Use and Mortality Among Medicare Beneficiaries in Boston and New Haven." *NEJM*, 321(17), 1168-1173.

Berwick, D. (1989). "Continuous improvement as an ideal in health care." *NEJM*, 320(1), 53-56.

Blumenthal D., and McGinnis, J.M. (2015). "Measuring Vital Signs: An IOM report on core metrics for health and health care progress." *JAMA*, 313(19), 1901-1902.

MacLean, C.H. et al. (2018). "Time Out—Charting a Path for Improving Performance Measurement." *NEJM*, 378(19), 1757-1761.

Muller, Jerry Z. "Medicine." Chap. 9 in *The Tyranny of Metrics*. Princeton, NJ: Princeton University Press, 2018.

Film: Dr. Don Berwick, YouTube, My Right Knee

Module 13. RESEARCH DOSSIER PRESENTATIONS

Class Policies

Attendance

You should attend all live sessions. Any absence must be explained and justified beforehand; your grade will be lowered if you do not do so.

Late assignments

Extensions will be granted only in case of an emergency, out of respect for those who abide by deadlines despite hectic schedules. Late submissions without prior permission will be penalized by ½ a letter grade per day (e.g., B+ to B).

Grades

Final grades will be calculated according to the percentages noted on pages 3-4 of the syllabus. These assignments are designed to assess understanding of course readings and progress against the course competencies noted in the syllabus, and no student will receive a B or higher without demonstration of satisfactory progress toward the mastery of each competency. Letter grades for the entire course will be assigned as follows:

Letter Grade	Points
A	4.0 points
A-	3.7 points
B+	3.3 points
B	3.0 points
B-	2.7 points
C+	2.3 points
C	2.0 points
C-	1.7 points
F	0.0 points

Student grades will be assigned according to the following criteria:

- (A) Excellent: Exceptional work for a graduate student. Work at this level is unusually thorough, well-reasoned, creative, methodologically sophisticated, and well written. Work is of exceptional, professional quality.

- (A-) Very good: Very strong work for a graduate student. Work at this level shows signs of creativity, is thorough and well-reasoned, indicates strong understanding of appropriate methodological or analytical approaches, and meets professional standards.
- (B+) Good: Sound work for a graduate student; well-reasoned and thorough, methodologically sound. This is the graduate student grade that indicates the student has fully accomplished the basic objectives of the course.
- (B) Adequate: Competent work for a graduate student even though some weaknesses are evident. Demonstrates competency in the key course objectives but shows some indication that understanding of some important issues is less than complete. Methodological or analytical approaches used are adequate but student has not been thorough or has shown other weaknesses or limitations.
- (B-) Borderline: Weak work for a graduate student; meets the minimal expectations for a graduate student in the course. Understanding of salient issues is somewhat incomplete. Methodological or analytical work performed in the course is minimally adequate. Overall performance, if consistent in graduate courses, would not suffice to sustain graduate status in “good standing.”
- (C/-/+) Deficient: Inadequate work for a graduate student; does not meet the minimal expectations for a graduate student in the course. Work is inadequately developed or flawed by numerous errors and misunderstanding of important issues. Methodological or analytical work performed is weak and fails to demonstrate knowledge or technical competence expected of graduate students.
- (F) Fail: Work fails to meet even minimal expectations for course credit for a graduate student. Performance has been consistently weak in methodology and understanding, with serious limits in many areas. Weaknesses or limits are pervasive.

NYU Classes

All announcements, resources, and assignments will be delivered through the NYU Classes site. I may modify assignments, due dates, and other aspects of the course as we go through the term with advance notice provided as soon as possible through the course website.

Academic Integrity

Academic integrity is a vital component of Wagner and NYU. All students enrolled in this class are required to read and abide by Wagner’s Academic Code. All Wagner students have already read and signed the Wagner Academic Oath. Plagiarism of any form will not be tolerated and students in this class are expected to report violations to me. If any student in this class is unsure about what is expected of you and how to abide by the academic code, you should consult with me.

Henry and Lucy Moses Center for Students with Disabilities at NYU

Academic accommodations are available for students with disabilities. Please visit the Moses Center for Students with Disabilities (CSD) website and click on the Reasonable Accommodations and How to Register tab or call or email CSD at (212-998-4980 or mosescsd@nyu.edu) for information. Students who are requesting academic accommodations are strongly advised to reach out to the Moses Center as early as possible in the semester for assistance.

NYU's Calendar Policy on Religious Holidays

NYU's Calendar Policy on Religious Holidays states that members of any religious group may, without penalty, absent themselves from classes when required in compliance with their religious obligations. Please notify me in advance of religious holidays coinciding with assignment due dates and exams to schedule mutually acceptable alternatives.

Course and Learning Objectives

At the end of the course, you should be able to:

- **CO 1:** Discuss major controversies in the field of Health Policy and Management (HPAM) and learn to identify and analyze the positions of major stakeholders in the healthcare system—insurers, providers, producers of pharmaceuticals and equipment/devices, governments and patients.
- **CO 2:** Discuss the strengths of divergent perspectives for analyzing population health and healthcare diversity and articulate your own position with respect to major controversies in the field of HPAM.
- **CO 3:** Make arguments that distinguish individual from population and community health needs, particularly with respect to vulnerable populations.
- **CO 4:** Examine social and behavioral determinants of health and understand how healthcare systems can address them or collaborate with other actors in a better position to do so.
- **CO 5:** Analyze healthcare policymaking processes and how they rely on a combination of evidence, ideas, and negotiation with powerful stakeholders who stand to lose or gain from different policies.
- **CO 6:** Apply ethical principles to resource allocation decisions in the health sector.
- **CO 7:** Communicate, interact productively (by listening, speaking, and writing) and present convincingly (to individuals and groups) evidence to support a position on matters of healthcare with a diverse and changing industry, work force, and citizenry.

Learning Assessment Table

Assignments and class participation in the course will assess progress against these competencies, and no student will receive a B or higher without demonstration of satisfactory progress towards mastery of each competency. Expected levels of competency are denoted below:

[1] = Basic: Foundational understanding of knowledge/skill/competency

[2] = Intermediate: Student demonstrates greater depth of understanding of this knowledge/skill/competency and can use this ability to analyze a problem

[3] = Advanced: Student demonstrates expertise in this knowledge/skill/competency and can use this ability to evaluate, judge, and synthesize information

Learning Assessment Table

Program Competency	Corresponding Course Learning Objective and Modules	Corresponding Assignments	Expected Level of Competency
<p>PC 01: Manage and leading people, teams, and organizations, including the ability to work effectively with diverse colleagues to build inclusive organizations.</p>	<p>CO 7: Communicate, interact productively (by listening, speaking, and writing) and present convincingly (to individuals and groups) evidence to support a position on matters of healthcare with a diverse and changing industry, work force, and citizenry.</p>	<p>Group discussions</p>	<p>2</p>
<p>PC 02: Develop strategies and align organizational design to support and achieve an organization's mission and vision.</p>	<p>CO 4: Examine social and behavioral determinants of health and understand how healthcare systems can address them or collaborate with other actors in a better position to do so.</p>	<p>Position Paper</p>	<p>2</p>
<p>PC 03: Apply knowledge about the social determinants of health and work collaboratively with leaders across sectors—including housing, education, transportation, and others—to reduce disparities and inequities and to</p>	<p>CO 1: Discuss major controversies in the field of Health Policy and Management (HPAM) and learn to identify and analyze the positions of major stakeholders in the healthcare system—insurers, providers, producers of pharmaceuticals and equipment/devices, governments and patients. CO 2: Discuss the strengths of divergent perspectives for</p>	<p>Position Paper Research Project</p>	<p>2</p>

<p>promote population and community health.</p>	<p>analyzing population health and healthcare diversity and articulate your own position with respect to major controversies in the field of HPAM. CO 3: Make arguments that distinguish individual from population and community health needs, particularly with respect to vulnerable populations. CO 4: Examine social and behavioral determinants of health and understand how healthcare systems can address them or collaborate with other actors in a better position to do so. CO 6: Apply ethical principles to resource allocation decisions in the health sector.</p>		
<p>PC 04: Use data and evidence-based management practices to improve managerial decision-making and organizational performance, including efficiency, quality of care, patient engagement, and equitable access to services.</p>	<p>CO 2: Discuss the strengths of divergent perspectives for analyzing population health and healthcare diversity and articulate your own position with respect to major controversies in the field of HPAM. CO 3: Make arguments that distinguish individual from population and community health needs, particularly with respect to vulnerable populations. CO 5: Analyze healthcare policymaking processes and how they rely on a combination of evidence, ideas, and negotiation with powerful stakeholders who stand to lose or gain from different policies. CO: 6 Apply ethical principles to resource allocation decisions in the health sector.</p>	<p>Position Paper Research Project</p>	<p>2</p>

<p>PC 05: Provide effective financial management for healthcare organizations, including effective use of accounting and budgeting practices.</p>	<p>CO 2: Discuss the strengths of divergent perspectives for analyzing population health and healthcare diversity and articulate your own position with respect to major controversies in the field of HPAM.</p> <p>CO 7: Communicate, interact productively (by listening, speaking, and writing) and present convincingly (to individuals and groups) evidence to support a position on matters of healthcare with a diverse and changing industry, work force, and citizenry.</p>		2
<p>PC 06: Influence and respond to policies that promote the performance of the U.S. healthcare system and healthcare organizations, based on understanding and analysis of the system's history, organization, and financing.</p>	<p>CO 1: Discuss major controversies in the field of Health Policy and Management (HPAM) and learn to identify and analyze the positions of major stakeholders in the healthcare system—insurers, providers, producers of pharmaceuticals and equipment/devices, governments and patients.</p> <p>CO 5: Analyze healthcare policymaking processes and how they rely on a combination of evidence, ideas, and negotiation with powerful stakeholders who stand to lose or gain from different policies.</p> <p>CO 7: Communicate, interact productively (by listening, speaking, and writing) and present convincingly (to individuals and groups) evidence to support a position on matters of healthcare with a diverse and changing industry, work force, and citizenry.</p>	Position Paper	2

<p>PC 07: Communicate effectively with diverse stakeholders using a variety of communication approaches.</p>	<p>CO 7: Communicate, interact productively (by listening, speaking, and writing) and present convincingly (to individuals and groups) evidence to support a position on matters of healthcare with a diverse and changing industry, work force, and citizenry.</p>	<p>Position Paper Research Project</p>	<p>2</p>
<p>PC08: Develop and manage innovations to improve organizational performance and population health.</p>	<p>CO 2: Discuss the strengths of divergent perspectives for analyzing population health and healthcare diversity and articulate your own position with respect to major controversies in the field of HPAM. CO 3: Make arguments that distinguish individual from population and community health needs, particularly with respect to vulnerable populations. CO 4: Examine social and behavioral determinants of health and understand how healthcare systems can address them or collaborate with other actors in a better position to do so.</p>	<p>Position Paper Research Project</p>	<p>2</p>
<p>PC 09: Manage and behave legally and ethically in a complex, highly regulated healthcare environment.</p>	<p>CO 6 Apply ethical principles to resource allocation decisions in the health sector.</p>	<p>Position Papers</p>	<p>2</p>