



NYU

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

**HPAM-GP 2836
Current Issues in Health Policy
Spring 2022**

Instructor Information

- Professor John Billings
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- Phone: (212-998-7455)
- Office Hours: By appointment
- Office Address: 295 Lafayette Street – 2nd Floor

Course Information

- Class Meeting Times: Tuesdays, 4:55PM – 6:35PM
- Class Location: Bobst – 70 Washington Square South – Room LL141

Course Description

This course is an introduction to major health policy issues and examines the role of government in the health care system. An important focus of the course is an assessment of the role of policy analysis in the formation and implementation of national and local health policy. Because much of government health policy relates to or is implemented through payment systems, several sessions involve some discussion of the policy implications of how government pays for care, with a more detailed review of the economics of payment systems available in Health Economics: Principles (HPAM-GP4830). The role of the legal system with respect to adverse medical outcomes, economic rights, and individual rights is also discussed. Proposals for health policy reform at the national and local level are examined throughout the course, as well as Medicare and Medicaid reforms currently being implemented or considered. In an effort to accommodate a subset of students with scheduling challenges, this class will be held in four all-day Friday marathons on September 7th, September 21st, October 5th, and October 19th. There will be a morning and afternoon session on each of these days, with a lunch break between sessions and a brief break during the morning and afternoon sessions. This is a continuing experiment, and I have attempted to adapt the content of course to make these sessions less gruelling, but expect we may make some changes along the way.

Course Learning Objectives

Students completing this course should have an understanding of:

- The role of government at all levels in health care and its limitations;
- How health care “system” is organized (or not) and the implications for health policy;
- How health care is financed (where the money comes from) and the implication for health policy;
- How health providers are paid and the implications for controlling costs and managing care;
- Variation in medical practice, its causes, and the implications for payment policy and cost issues;
- How the Medicare and Medicaid programs work and issues for reform;
- The challenges of disparities in health care, their causes, and opportunities for reform;
- The challenges of rising health care costs and opportunities for reform;
- Issues related to the uninsured and responses at the federal, state, and local level including the Affordable Care Act;
- Policy issues concerning the pharmaceutical industry;
- Medical errors and malpractice and opportunities for reform;
- How to involve patients in medical decision-making, including end-of-life care and choice of treatment alternatives; and
- How to present data to policy makers and managers to effectively inform policy decisions.

Learning Assessment Table

| Program Competency | Corresponding Course Learning Objective | Corresponding Assignment Title | Level of Competency Expected to Be Achieved via the Assignment (Basic = 1, Intermediate = 2, Advanced = 3) |
|--|---|---|---|
| The ability to assess population and community health needs from a public service perspective | Variation in medical practice, its causes, and the implications for payment policy and cost issues; The challenges of disparities in health care, their causes, and opportunities for reform | Dartmouth Atlas memo Class discussion on disparities and the uninsured | 3 - Advanced |
| The ability to examine social and behavioral determinants of health and understand how health systems can address the needs of | The challenges of disparities in health care, their causes, and opportunities for reform; Issues related to the uninsured and | Class discussion on disparities and the uninsured | 3 – Advanced |

| Program Competency | Corresponding Course Learning Objective | Corresponding Assignment Title | Level of Competency Expected to Be Achieved via the Assignment (Basic = 1, Intermediate = 2, Advanced = 3) |
|---|--|--|--|
| vulnerable populations | responses at the federal, state, and local level including the Affordable Care Act | | |
| The ability to present convincingly to individuals and groups the evidence to support a point of view, position or recommendation | How to present data to policy makers and managers to effectively inform policy decisions | Assignment 2 - PowerPoint Presentation on the Dartmouth Atlas Memo | 2 – Intermediate |

Course Requirements/Grading

There are two assignments and a final exam required for the course. The assignments are a paper (≤ 8 pages) and a PowerPoint slide assignment based on paper. These assignments account for 60% of the final grade (35% paper and 25% PowerPoint assignment), with the end-of-term exam (in essence, a third paper) accounting for 25%. The assignments and end-of-term exam are described in more detail on pages 12-13 of this syllabus. Each student will be assigned to a “discussion group” – these groups will be maintained throughout the semester and will be asked to address a specific problem or take on a roll for a specific issue during class discussions. Team assignments are posted in the Discussion Group section of Brightspace. Class discussion/debate and discussion group participation are integral to the course and will account for 15% of the final grade. Assignments can be submitted in class or via Brightspace.

Students are expected to have studied the assigned readings. The readings for the course are primarily journal articles that will be posted in the Assigned Readings section of Brightspace. There are also readings from several chapters of the text book *Understanding Health Policy* by T. Bodenheimer and K. Grumbach which is available from the NYU library online site (<https://accessmedicine.mhmedical.com/book.aspx?bookid=2853>). Copies of PowerPoint “handout” materials used in class will be posted in the Session Notes section on the Brightspace site at least 24 hours in advance of the class.

If you have questions about the reading materials or you need other help, please contact my administrative assistant, Christopher Harris [295 Lafayette Street - 3rd Floor - 212-998-7416 – christopher.harris@nyu.edu].

Assignments and participation in class discussions in this course will be used to assess progress against the competencies listed above that the Wagner Health Policy and

Management Program has created pursuant to its accreditation with the Commission on Accreditation for Health Management Education (CAHME). No student will receive a B or higher without demonstrating satisfactory progress toward mastery of each competency listed in the Learning Assessment Table above.

Course Outline

Session 1 – 1/25/22

Square One: The role of government in health/health care

- A discussion of the role of policy analysis in public policy formation and the impact of public policy on the health system
- Objectives of government in health and health care, discussion of limitations of government, and some examples
- Discussion of implications for policy

Required reading:

- S. Schoenbaum, A. Audet, and K. Davis, “Obtaining Greater Value from Health Care: The Roles of the U.S. Government,” *Health Affairs* (November/December 2003): 183-190.
- N. Tang, J. Eisenberg, G Meyer, *The Roles of Government in Improving Health Care Quality and Safety*, Joint Commission Journal on Quality and Safety (January, 2004): 47-54.
- T. Bodenheimer and K. Grumbach, *Understanding Health Policy - Eighth Edition* (New York: McGraw Hill, 2020) – Chapter 1.

Session 2 – 2/1/22

Square Two: How health care is organized, financed, and paid for

- Brief overview of how health care is organized, where the money comes from, and how care is paid for
- A little bit about insurance and “managed” care

Required reading:

- T. Bodenheimer and K. Grumbach, *Understanding Health Policy - Eighth Edition* (New York: McGraw Hill, 2020) – Chapters 2, 4-6.

Session 3 – 2/08/22

Medical practice and health policy

- Review of the enormous variation in medical practice
- Discussion of causes of variation

- Discussion of how to respond to this variation and the implications for policy

Required reading:

- E. Fisher, D. Wennberg, T. Stukel, et al., “The Implications of Regional Variation in Medicare Spending - Part 2: Health Outcomes and Satisfaction with Care,” *Annals of Internal Medicine* 138, No. 4 (2003): 288-299
- J. Wennberg, E. Fisher, T. Stukel, et al., “Use of Hospitals, Physician Visits, and Hospice During the Last Six Months of Life among Cohorts Loyal to Highly Respected Hospitals in the United States,” *British Medical Journal* 328, No. 7440 (March 13, 2004): 607-610.
- K. Kozhimannil, M. Law, and B. Virnig, “Caesarean Delivery Rates Vary Tenfold Among US Hospitals; Reducing Variation May Address Quality and Cost Issues,” **Health Affairs** (March, 2013): 527-535
- A. Gawande, “The Cost Conundrum,” *New Yorker*, June 1, 2009
- K Bronner, et al., “The Dartmouth Atlas of Health Care” 2018 Data Update”, August, 2021.

Suggested reading:

- D. Goodman, et al., “The Dartmouth Atlas of Neonatal Intensive Care”, Fall, 2019

Sessions 4-5 – 2/15/22 and 2/22/22

Medicare: The basics and Issues for reform

- A discussion of the role and objectives of government in health
- Description of who and what is covered by Medicare
- Review of how Medicare pays for health care
- Description of the recent expansion Medicare to provide coverage for prescription drugs
- Issues for reform

Required reading:

- CMS - *Medicare and You: 2022* - <https://www.medicare.gov/media/10991>
- Henry J. Kaiser Family Foundation, *Overview of Medicare*, February, 2019.
- Henry J. Kaiser Family Foundation, *The Facts on Medicare Spending and Financing*, August. 2019.
- Henry J. Kaiser Family Foundation, *An Overview of Medicare Part D Prescription Drug Benefit*, October, 2021.

Optional reading:

- T. Oliver, P. Lee, and H. Lipton, “A Political History of Medicare and Prescription Drug Coverage,” *The Milbank Quarterly* 82, No. 2 (2004): 283-354.

Sessions 5-6 – 2/22/22 and 3/01/22

Medicaid: The basics and issues for reform

- History and financing of Medicaid
- Description of who and what is covered by Medicaid
- What needs to be fixed/Issues for reform
- Responding to the needs of high cost/high risk patients

Required reading:

- Henry J. Kaiser Family Foundation, *Medicaid Financing: The Basics*, May, 2021.
- Henry J. Kaiser Family Foundation, *10 Things to Know About Medicaid*, March, 2019.
- Henry J. Kaiser Family Foundation, *10 Things to Know About Medicaid Managed Care*, October, 2020
- Henry J. Kaiser Family Foundation, *Medicaid and Long-Term Services and Supports: A Primer*, December, 2016.
- J. Billings, T. Mijanovich, “Improving The Management of Care for High-Cost Medicaid Patients” *Health Affairs* no 6 (2007) 1643-1655.

Session 7 – 3/08/22

The major challenges confronting the health “system”: Part 1 - Disparities, Part 2- Uninsurance

- Discussion of the factors that are contributing to these disparities
- Description of the size and characteristics of the uninsured population
- Review of the causes of uninsurance
- Discussion of the implications of these challenges for policy makers and providers and for the current health reform initiative

Required Reading:

- J. Billings, L. Zeitel, J. Lukomnik, et al., “Impact of Socioeconomic Status on Hospital Use in New York City” *Health Affairs* (Spring 1993): 162-173.
- J. Billings, “Management Matters: Strengthening the Research Base to Help Improve Performance of Safety Net Providers,” *Health Care Management Review* 28, No 4 (2003): 323-334.
- Kaiser Family Foundation – *What Does the CPS Tell Us about Health Insurance Coverage in 2020* – September, 2021
- Kaiser Family Foundation – *A Closer Look at the Remaining Uninsured Population Eligible for Medicaid and CHIP* – November, 2021
- Kaiser Family Foundation – *The Uninsured and the ACA: A Primer* – January, 2019.

Spring Break – 3/15/22

Session 8 – 3/22/22

The major challenges confronting the health “system”: Part 3 – Costs

- Description of the dynamics of current cost increases
- Review of the causes and implications of cost increase
- Discussion of the implications of these challenges for policy makers and providers and for the current health reform initiative

Required Reading:

- T. Bodenheimer and K. Grumbach, *Understanding Health Policy - Eighth Edition* (New York: McGraw Hill, 2020) – Chapters 8-9.
- Shrank, W. et al., Waste in the U.S. Health Care System – *JAMA* (October 7, 2019), 1501-1509.
- Dunn A, Liebman E, and Shapiro A, “Decomposing Medical-Care Expenditure Growth,” Working Paper 23117, <http://www.nber.org/papers/w23117> - February, 2017.

Session 9 – 3/29/22

Prior efforts to respond to these challenges: The role of the states, the Clinton Health Plan, and other federal initiatives)

- Overview of policies/programs at the federal, state, and local level to reduce disparities, expand coverage, and control costs
- Discussion of the strengths and limits of state/local initiatives
- Discussion of the Clinton health plan, what problems it might have solved or created, and why it failed
- Implications for current reform initiatives

Required Reading:

- J. Holahan, L. Blumberg, A. Weil, et al, “Roadmap to Coverage – Report for the Blue Cross Blue Shield of Massachusetts Foundation,” October, 2005
- D. Yankelovich, “The Debate That Wasn’t: The Public and the Clinton Health Plan,” *Health Affairs* (Spring 1995): 7-23.
- Liu, J, et al., *An Assessment of the New York Health Act: A Single-Payer Option for New York State* – RAND Corporation, August, 2018.

Session 10 – 4/05/22

National health reform 2010 (ACA) and efforts to repeal/replace the ACA

- Overview of Affordable Care Act (ACA) and efforts to repeal/replace the ACA
- Discussion policy, politics, and power – What happened and why?

Required Reading:

- Kaiser Family Foundation: *Summary of the Affordable Care Act* – <http://kaiserfamilyfoundation.files.wordpress.com/2011/04/8061-021.pdf>
- Kaiser Family Foundation: *Health Reform Implementation Timeline* – <http://kff.org/interactive/implementation-timeline/>
- J. Oberlander, “Long Time Coming: Why Health Reform Finally Passed,” *Health Affairs* (June 2010): 1112-1116.
- Summary of the Affordable Care Act (<http://files.kff.org/attachment/Summary-of-the-Affordable-Care-Act>); Compare Proposals to Replace the Affordable Care Act - [Proposals to Replace ACA](http://www.kff.org/interactive/proposals-to-replace-the-affordable-care-act/) (<http://www.kff.org/interactive/proposals-to-replace-the-affordable-care-act/>) [Note: These documents are also available on Brightspace Assigned Readings tab.

Session 11 - 4/12/2022

More policy issues concerning the pharmaceutical industry

- Overview of the major policy issues concerning the pharmaceutical industry
- Discussion of the factors that are contributing to these emergences of these issues now
- Discussion of the role of government with respect to the pharmaceutical industry

Required Reading:

- J. Weisman, D. Blumenthal, A Silk, et al., “Consumers’ Reports on the Health Effects of Direct-to-Consumer Drug Advertising,” *Health Affairs - Web Exclusive* (26 February 2003): W3 82-95.
- R. Califf et al., “Seven Former FDA Commissioners: The FDA Should Be An Independent Federal Agency,” *Health Affairs* (January, 2019): 84-86.
- N. Parekh et al., “Dangers and Opportunities of Direct-to-Consumer Advertising,” *J Gen Internal Med* (February, 2018): 586-7.

Session 12 - 4/19/2022

Medical errors – Medical malpractice

- Brief overview of current malpractice law
- Description of what is known about medical errors

- Analysis of the effectiveness of the legal system and malpractice law in assuring quality and compensating victims of harm

Required reading:

- Institute of Medicine, *Report Brief - To Err is Human: Building a Safer Health System* - <http://www.nap.edu/catalog/9728.html>
- M. Mello, et al., "National Costs of the Medical Liability System," *Health Affairs* (September, 2010): 1569-1577.
- D. Waxman, M. Greenberg, M. Ridgely, et al., "The Effect of Malpractice Reform on Emergency Department Care," *NEJM* (October 16, 2014) 371;16: 1518-1525
- A.J. Starmer, N.D Spector, R. Srivastave, et al., "Change in Medical Errors after Implementation of a Handoff Program," *NEJM* (November 6, 2014) 371;19: 1803-12.
- M. Mello et al., "Malpractice Liability and Health Care Quality." *JAMA* (January 28, 2020) 323:4: 352-366.

Session 13 - 4/26/22

Role of Patients – Making informed decisions

- Patient's rights to refuse/withdraw treatment
- What information do patients need to make health care decisions (choice of treatment, doctor/hospital, health plan, etc.) what's the best way to get information to patients

Required reading:

- Cruzan v. Director, Missouri Department of Health – 497 U.S. 261 (1990) Case Law (<http://caselaw.lp.findlaw.com/scripts/getcase.pl?court=us&vol=497&invol=261>)
- D. Arterburn, R Wellman, E Westbrook, et al., "Introducing Decision Aids at Group Health Was Linked to Sharply Lower Hip and Knee Surgery Rates and Costs," *Health Affairs* (September, 2012): 2094-2104.
- E.O. Lee, E.J. Emanuel, "Shared Decision Making to Improve Care and Reduce Costs," *NEJM* (January 3, 2013) 368;1: 6-8.
- New York State Department of Health, *Adult Cardiac Surgery in New York State: 2014-2016* (April, 2019).

Session 14 – 5/03/2022 – End-of-Term "Exam" (Take Home) – See description below

Required Assignments/Final “Exam”

Assignment 1 – Personal Resume (Pass/Fail)

Provide a very brief resume/vita/something that describes who you are, employment experience (if any), and career goals (if any) and attach a recent photo of yourself (try Xeroxing you ID if you can't do any better).

Due Date: Session 2 or 2/01/22 – 11:59pm (use Brightspace or put it in my mail box)

Note:

For Assignment 2 and 3, you may work in teams of up to 3 students, although working on team is not required. Teams must have members from at least two different programs at Wagner or NYU and two different “professions”. Player trades are allowed, and you can work on different teams for papers 1 and 2 (or no team on one or the other). For assignment 2, you may submit as a team or individually. If submitting as a team, submit only one paper/assignment per team and list all the team members.

Assignment 2 – The Dartmouth Atlas Memo (35% of final grade) – ≤ 8 pages

Go to the Dartmouth Atlas website that has sets of Excel files documenting variation in health care utilization (<http://archive.dartmouthatlas.org/tools/downloads.aspx?tab=41>). Pick an example of variation in utilization that you believe is unwarranted and describe the range of factors that are likely to contribute to the differences among areas (or hospitals). Examples utilization rates on the site include:

- Care of chronically ill patients during the last two years of life Care of Chronically Ill Patients (<http://archive.dartmouthatlas.org/tools/downloads.aspx?tab=40>)
- Selected medical and surgical discharge rates Hospital Discharges and Post-Acute Care (<http://archive.dartmouthatlas.org/tools/downloads.aspx?tab=41#surgical>)
- A broad range of various utilization rates including:
 - Children's health care in Northern New England, 2007-10
 - Prescription drug use, 2010
 - A range of specific surgical procedures and diagnostic tests

Please look at utilization levels, not variation in mortality, costs/spending/reimbursement or resource inputs that are reported in some files or tables. While you can write about some of the “quality” measures (primary care access and quality or post discharge events) if you have an abiding interest in these topics, I would much prefer you to focus on variation in rates of utilization – also please note that these “quality” measures will be more difficult to tie into the discussions we had in class.

After discussing the range of factors that affect variation in rates, pick one contributing factor that you think is important (or that you think something can be done about it) and make some suggestions about what might be done to reduce variation. Be specific and detailed in your suggestions, including who ought to do what to whom. Be realistic, don't make suggestions that cannot be implemented because of technical, financial, or political considerations. This is a conceptual piece and not a research paper, but footnote sources of ideas from others that you use for the causes of variation (or the suggested solutions if the ideas come from a specific source). **Please see even more detailed instructions/suggestions in the PowerPoint presentation located in the Other Material tab of Brightspace.**

Due Date: Session 6 or submit via Brightspace by 3/01/22 – 11:59PM.

Assignment 3 – Dartmouth Atlas PowerPoint Slides (25% of final grade)

Take your Dartmouth Atlas paper and make it into a PowerPoint presentation. As with the paper, describe the “unwarranted” variation, discuss the potential causes of the variation, and make recommendations on what might be done about it. Incorporate or address any suggestions that I made in grading the paper. While substantive content matters, you will be graded primarily on how clearly and effectively the material is presented. Look and feel matter. Don't make slides too busy or have too much text on a slide, and avoid cute graphics. You will not actually have to present the slides, but keep the length to a presentation that would take not more than 15 minutes. If you worked on team on the paper, you may submit as a team or individually.

Due Date: Session 10 or submit via Brightspace by 4/05/22 – 11:59PM

End-of-Term “Exam” – [Session 14] – 25% of final grade

The End-of-Term “Exam” will be posted electronically on the Final Exam tab on the Brightspace site at 4:55 during the regular class period on 5/03/22 and must be completed and uploaded via Brightspace by 6:35 on 5/03/22. You may take the exam at any location. The exam is open book, and you may use readings, slides, or any other material. On the exam you will be asked to answer two of four essay questions. A more detailed description of the exam will be posted in the Other Material tab on Brightspace in April. Note that slides shown in class often go beyond required readings, so class attendance is likely to be critical for performing well on the exam. If you have a conflict (e.g., class immediately before or after), contact Professor Billings in advance and other arrangements can be made

Class Discussion/Participation – 15% of final grade

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 that might coincide with exams to schedule mutually acceptable alternatives.