

The College of Charleston
POLI 309-01 – Health Policy
Fall Semester 2017
MWF 10 A.M. - 10:50 A.M.
Education Center 316

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Course Description and Objectives

Political Science 390.01 will focus on American health policymaking, with particular focus on (1) the organization and delivery of U.S. health care and (2) how current federal, state and local laws and policies address the three pillars of health care: Access, Cost and Quality. The course will examine the status and financing of health care, the political and social environments in which health policymaking occurs and the key policy actors that drive federal and state decisions regarding health care for all Americans.

The debates around the scope, practice, delivery and sustainability of health care have resulted in policy disagreements and conflicts for decades. The passage of the Social Security Act of 1935 initiated the development of a complex system of health delivery that was followed by federal legislation to create Medicare and Medicaid (President Lyndon Johnson), the Children's Health Insurance Program, the Emergency Medical Treatment and Labor Act (EMTALA) President Ronald Reagan – the Medicare Prescription Drug Act (President George W. Bush) and The Patient Protection and Affordable Care Act (President Barack Obama). Each of these major pieces of federal legislation raised fundamental policy questions of "who benefits? And "who pays?" For the past seven year the Republican controlled U.S. Congress has tried without success to repeal and replace the ACA, the basic problem being an inadequate set policy replacement options.

At the conclusion of the semester students should be able to (a) identify the historic and current policies that shape and inform the delivery of health care in America; (b) understand the effect of these policies on the issues of access, cost and quality; and (3) be able to make informed analyses regarding the effectiveness of current federal and state health policies in addressing the healthcare needs of the nation.

Course Requirements

- A. Regular class attendance. A daily sign-up sheet will be provided.
- B. Expectations for class participation include reading the assignments prior to class, joining in class discussion and turning assignments in on time. Late assignments will incur severe grade penalties.
- C. The use of electronic devices is not permitted in class except for the purpose of taking notes. Students who violate this rule will incur severe grade deductions.

- D. Students are encouraged to utilize posted office hours and/or schedule appointments to discuss assignments and readings.
- E. Students who are receiving services through the Center for Disability Services, are scheduled to travel with an athletic team or will participate in a student government or other official off-campus activity during the semester must present a letter of verification signed by the appropriate college official.
- F. Students are encouraged to utilize the Center for Student Learning (Addlestone Library, First Floor) academic support services for assistance in study strategies and course content. Visit the CSL website at <http://csl.cofc.edu> or call (843)953-5635.
- G. Students who schedule personal trips before the end of the semester (ex. scheduling early travel facing Spring Break or at the end of the semester) will not receive excused absences.

Grades

Students are expected to read, study, analyze and evaluate the role of major policy actors, laws, policies and agencies in shaping present health care policy. The semester grade will be based on 3 Policy Briefs, a Midterm Examination, a Final Examination and class attendance/participation as follows:

A. Policy Brief 1	20%
B. Policy Brief 2	20%
C. Policy Brief 3	20%
D. Midterm Examination	15%
E. Final Examination	20%
F. Class participation/Attendance	5%

Required Textbook

Knickman, James R. and Kovner, Anthony R., Editors: **Health Care Delivery in the United States**, 11th Edition, 2015, Springer Publishing Company, New York, NY.

The articles and reports below are recommended readings for the semester. Additional readings may be assigned.

1. Medicaid – A Primer- 2013- the Kaiser Commission on Medicaid and the Uninsured.
2. Zibulewsky, Joseph, The Emergency Treatment and Active Labor Act (EMTALA): what it is and what it means for physicians. Baylor University Medical Center Proceedings, October 14, 2001. <http://www.ncbi.nih.gov/pmc/articles/PMC1305897/>
3. The Henry Kaiser Family Foundation: Focus on Health Reform: Summary of Patient Protection and Affordable Care Act (P.L 111-148).
4. United Health Foundation- “America’s Health Rankings- U.S. Overview” , 2016 Rankings
5. Kaiser Family Foundation- Focus on Health Reform: “Issue Brief- Massachusetts Health Care Reform Plan-Six Years Later” – May 2012.
6. “Crossing the Quality Chasm: The IOM Health Care Quality Initiative”, The Institute of Medicine of the National Academies.
7. National College of Emergency Physicians: Report on Healthcare Quality.
8. “Cracking the Code on Health care Costs” – A report by the State Health Care Containment Commission- the Miller Center- the University of Virginia.
9. “What is Driving U.S. Health Care Spending?” The Bipartisan Policy Center, September 2012

Course Outline

August 2017

Wed. 23	Introductions and Semester Review
Fri 25	Review of Semester Research Assignments
Mon 28	Public Policy defined
Wed 30	Public Policy – Policy “triggers”

September 2017

Fri 1	The Policy Environment
Mon 4	Major Issues in Health Care Policy: Access
Wed 6	Major Issues in Health Care Policy: Cost
Fri 8	Major Issues in Health Care Policy - Quality

U.S. Health Care Delivery – Overview

Mon 11	Defining Characteristics of the U.S. Health Care Delivery System Knickman, Chapter One
Wed. 13	Major Issues in the Delivery System Chapter One
Fri 15	Major Issues in the Delivery System
Mon 18	The Federal Health Care “Safety Net” (Hand Out) Chapter Three
Wed 20	The Federal Health Care “Safety Net”
Fri 22	The Federal Health Care Departments- roles, policy influences Chapters Three and Nine
Mon 25	The Federal Health Care Departments- roles, policy influences
Wed 27	The U.S. Congress and Health Care Policy – House of Representative
Fri 29	The U.S. Congress and Health Care Policy- The House of Representatives Policy Brief One Due

October 2017

- Mon 2 The United States Congress – Overview
- Wed 4 The U.S. Congress and Health Care Policy: The Senate
- Fr 1 6 The U.S. Congress and Health Care Policy– The Senate
- Mon 9 Current Major Issues in Federal Health Care Policy

W 11

Midterm Examination

State Roles in Health Care Delivery

- Fri 13 Federalism Defined
- Mon 16 **Fall Break**
- Wed 18 State Government Roles in Health Care Policy – Handout
- Fri 20 State Government Roles in Health Care Policy - Executive Branch
Chapter Two
- Mon 23 State Government Roles in Health Care Policy – Executive Branch
- Wed 25 State Government Roles in Health Care Policy- State Legislatures
- Fri 27 State Government Roles in Health Care Policy- State Legislatures
Policy Brief Two Due

Local Governments Roles in Health Care Policy

- Mon 30 Local Governments Roles in Health Care Policy

November 2017

- Wed 1 Local Governments Roles in Health Care Policy

Health Care in America – Who Benefits? Who Pays?

- Fri 3 Defining “Access to Health Care” - Handout
- Mon 6 Defining “Access to Health Care”
- Wed 8 Defining “Health Care Costs”
Chapters Eleven and Twelve
- Fri 10 Defining “Health Care Costs”

Mon 13	Defining “Health Care Quality” Chapter Thirteen
Wed 15	Defining “Health Care Quality”
Fri 17	Decoding Health Insurance (handout)
Mon 20	Decoding Health Insurance Policy Brief Three due
Wed 22	Thanksgiving Holiday
Fri 24	Thanksgiving Holiday
Mon 27	Outstanding Federal Issues in Health Care
Wed. 29	Outstanding State and Federal Issues in Health Care Chapter Sixteen

December 2017

Mon 4	Last Day of Class – Semester Recap
Tu 5	Reading Day
Fri 8	Final Examination 8 A.M.-11 A.M. Education Center 116

Required Research Assignments

The required research assignments provide the opportunity to study three separate health care policy issues that are currently the topics of policy debates. The research will be in the form of **Policy Briefs written to the Chair of the Legislative Committee or the administrator that has jurisdiction over the issue** in your role as the **Legislative Assistant** for the Committee. A Policy Brief presents a concise summary of information that can help policymakers make decisions about government policies on which they may be required to take a position to support or oppose.

A Policy Brief has a specific format as follows:

1. **The Title** – State the Title of the Policy Brief
2. **The Recipient**- Identify (**by name and title**) the Recipient of the Policy Brief (Committee Chair, Administrator, etc.)
3. **Identify yourself** as the sender; state your position
4. **Executive Summary** – One or two paragraphs that include an overview of the problem and the proposed policy action.
5. **Content or scope of problem** – What is the specific problem? Why is this problem important? What is the impact of the problem- what data supports this assumption? Who are the stakeholders? What is the most persuasive case that a new (or different) policy action is required?

6. **Policy Alternatives** – What is the current policy approach? What are currently discussed and/or proposed options? Make the case for why the policy option you propose in the Brief is the most relevant and effective in finding a sustainable solution.
7. **Policy Recommendations**: This section contains the most detailed explanation of the concrete steps you are suggesting should be taken to address the policy issue.
8. **Appendices** – relevant current laws and/or policies, research data, charts, graphs, etc.
9. **Works cited** – MLA style citation format is recommended.

Your Policy Brief assignments are as follows:

Policy Brief 1 – **The Opioid “Epidemic”** – How major is the problem – and what should be the role of the **U.S. Congress** in seeking a solution to this complex issue? Should this issue be considered a part of the national health policy agenda?

Policy Brief 2 – **Teen Suicides** – Should the **South Carolina State Legislature** declare the increase in teen suicides- as described in recent public dialogue- a public health issue for the State? Should there be a specific role for the S.C. State Health Department’s policy agenda in addressing this issue?

Policy Brief 3- **Transgender students** - Should **South Carolina Public School Districts** be required to develop policies on the selection of public restrooms for transgender students? Should this issue be considered relevant to the State’s overall health policy agenda?