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**


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

4. United Health Foundation- “America’s Health Rankings- U.S. Overview” , 2016 Rankings
6. “Crossing the Quality Chasm: The IOM Health Care Quality Initiative”, The Institute of Medicine of the National Academies.
8. “Cracking the Code on Health care Costs” – A report by the State Health Care Containment Commission- the Miller Center- the University of Virginia.
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
Fr1 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
Mon 23  Chapter Two
Wed 25  State Government Roles in Health Care Policy – Executive Branch
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?