

UCLA School of Public Health
Department of Health Services
Spring 2005

DRAFT 3/9/05

**Managed Care
Health Services 442**

Time: Tuesdays and Thursdays, 1:00-2:50 p.m.
Room: CHS 51-279

Instructor: Patricia Parkerton, Ph.D., MPH
Office Hours: Tuesdays 3:00 to 4:00 p.m.
or email for appointment time
Room: CHS 41-295D
Phone: (310) 825-2926
E-mail: parkert@ucla.edu

Background:

The evolution of managed care has dominated health care change in California and much of the United States. The steadily increasing prevalence of its models and practices make it critical that those leading policy and organizations in the health care industry understand managed care issues. The introductions of technical and process developments have been significant as have the changes in public perception. Therefore, this course will have the primary purpose of making clear what managed care is and what it could do; it will also explore useful mechanisms for the organization and delivery of health care.

Prerequisite

Health Services 200A and 200B or permission of instructor.

Learning Objectives

This is a participatory course intending to highlight teamwork, complexity of processes, and change trajectories. Upon completion of this course, students should be able to discuss the primary issues and the principle techniques of managed care organizations as they might be applied throughout healthcare.

Course Methods

The course is didactic for content and participatory for applications. It will consist of lectures by the instructor, class discussion of issues, presentations by professionals from the managed care industry, and primarily team projects. Class discussions will focus on the readings and current management and policy challenges facing managed care.

This course is meant to be as practically useful and applied as possible. All ideas and suggestions for added topics, background materials, speakers, etc. will be welcomed by the instructor, either for use in this quarter's course or for inclusion in future editions of this class. Students are encouraged to make comments and ask questions during the conduct of the sessions or to schedule appointments with Dr. Parkerton. Session style will vary with speaker and activity.

Readings

Managed Care: What It Is and How It Works, second edition, Peter R. Kongstvedt, 2004, Jones and Bartlett, Sudbury MA. ISBN 0-7637-2498-X.

Supplementary readings, sources, assignments, and lecture slides will be distributed

Topics

Structure, Process, Manage → *Managed Care Organizations*

<u>Topic</u>	<u>Focus</u>	<u>Issues...</u>
1) Organizations:	Evolve	definitions, principles, structures
2) Health Insurance:	Selection	principles, financial arrangements, benefits
3) Checks and Balances:	Contribute Regulate	accredit, voluntary legislate, state and federal government
4) Medical Delivery System:	Interface	network, credential, quality, utilization, risk
5)	Present	explain, simplify the complex, multiple perspectives
6) Complex System Anchor:	Contract	process, negotiate, document
7) Population Applications:	Specify	for the aged, low income, chronically ill, mentally ill
8)	Convince	present, market, teach

Assignments

(In addition to listen, read, learn, write, speak, participate)

Teams will change with assignments--numbered consistently with topic and schedule

Position and Health Plan Choice

1) 'Evolve' paper, 2-3 pages (outline, double space)

You've taken a new job in the healthcare industry.

- What position have you taken?
- How does it relate to the managed care industry?
- Which health plan will you select and why?
- What do you need to learn to do this job well?

2) 'Selection' debate, in class on Health Plan Choice

3) 'Contribute', limited class commitment to make this organization fly: select from list of needs

Care Management Project: Service Practice: Policy, Providers, Management, and Quality

- 4) 'Interface' paper 8 pages
- 5) 'Survive' presentation 15 minutes in class
 - Select controversial clinical service and determine health plan coverage policy
 - Describe sources and Sell practices to your "medical advisory committee"
 - provider credentialing practice • ensure quality
 - manage utilization • protect the organization
- 6) 'Contract' negotiation session: for a defined service in the classroom
 Roles will be assigned, materials provided on positions,
 Teams will prepare prior to class negotiation session.

Population Application: report to a senior healthcare manager proposing needs and solutions

- 7) 'Specify' paper 8-10 pages
- 8) 'Convince' presentation, 15 minutes + discussion
 - Describe population
 - Summarize the points of view possible and why they are important (e.g. local employer, Medicare, Medicaid, census, prison system)
 - While references should be included, this is not meant to be a detailed literature survey; rather, it is meant as a device for you to apply principles and practices of this course and to organize compelling thoughts collectively

Grading

<u>Assignment</u>	<u>Team Size</u>	<u>Points</u>	<u>Grader</u>
1) 'Evolve' <u>Choice</u> paper	1	10	50% graders3, 50% prof
2) 'Selection' <u>Choice</u> debate	3	5	50% graders2, 50% prof
3) 'Contribute' <u>to Class</u>	1	10	100% trackers2
4) 'Interface' <u>Care Management</u> paper	4	20	20% team, 40% graders2, 40% prof
5) 'Survive' <u>Care Mgt.</u> presentation	4	10	20% class, 50% graders2, 30% prof
6) 'Contract' <u>Negotiation Session</u>	3	10	60% team, 40% opposing team
7) 'Specify' <u>Population</u> paper	2	20	100% instructor
8) 'Convince' <u>Population</u> presentation	2	15	20% class, 50% graders2, 30% prof
<u>Total</u>	<u>1-4</u>	<u>100</u>	<u>(5 class, 14 team, 38 graders, 43 prof)</u>

Managed Care Class Schedule (dates and speakers in revision 3/9/05)

#	Date	Topic	Guest Speaker	Assignment
		Industry and Organizational Structure		
1	4/5	Introductions. Course Managed care history/types		Kongstvedt 1, 3) 'Contribute' / Assignment lists
2	4/7	Distribution and governance		Kongstvedt 2 3) 'Contribute' sign up
3	4/12	Health insurance: definitions, benefits, risks	Insurance Speaker	Kongstvedt 5 2) 'Selection' form team
		Checks and Balances		
4	4/14	Involuntary: federal Voluntary: NCQA	2) 'Selection' debate	1) 'Evolve' paper due
5	4/19	State. consumer rights, satisfaction, grievances	State Advocate Speaker	Kongstvedt 7
		Delivery Systems		
6	4/21	Providers: diversity, perspectives, prevalence		4) 'Interface' form team
7	4/26	Provider networks: clinicians institutions, credentialing	Marvin Kanter MD, Pro- gressive Healthcare Sys.	Kongstvedt 3
8	4/28	Quality: assurance and improvement	Michael Belman MD, Blue Cross HMO	Kongstvedt 4) 'Interface' condition
9	5/3	Utilization management		
10	5/5	Profiling, incentives	Pay for Perform. Speaker	
11	5/10	Care Management projects	5) 'Survive' present	4) 'Interface' paper due
		Contractual Bonds		
12	5/12	Negotiation		6) 'Contract' form teams Distribute reading
13	5/17	Contracts	Meredith Flynn, MPH UCLA Health System	Contracting case Handout draft contract
14	5/19	Negotiation session	6) 'Contract' Negotiate	Roles before Class
		Specified Populations		
15	5/24	Managed Medicare	Nancy Monk Pacificare Secure Horizons	7) 'Specify' team
16	5/31	Behavioral Medicine	Alan Savitz, MD, Paci- ficare Behavioral Health	Kongstvedt 6 7) 'Specify' topic
17	5/31	Disease Management		
18	6/2	Population Application	8) 'Convince' present	
19	6/7	Population Application	8) 'Convince' present	
20	6/9	Epilogue, Wrap-up	8) 'Convince' present	7) 'Specify' paper due