

UCLA SCHOOL OF PUBLIC HEALTH
Department of Health Services

HEALTH SERVICES 200A

HEALTH SERVICES ORGANIZATION AND FINANCING

Fall Quarter 2005

Faculty:

Keri Gardner, MD, MPH
Office: CHS 31-293A
Phone: (310) 268-3291
E-mail: kerik@ucla.edu

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Monday, Wednesday, Friday
2.00 PM – 3.50 PM
Room 23-105 CHS

Faculty

Keri Gardner, M.D., MPH
Office hours: By appointment
CHS 31-293A
e-mail: kerik@ucla.edu
Phone: (310) 268-3291

Teaching Assistants

Erin Hahn
Office hours: By appointment
e-mail: eehahn@ucla.edu

Heather Richardson
Office hours: By appointment
e-mail: richardson2005@lawnet.ucla.edu

INTRODUCTION

This course is the first of a two course sequence required of all students in the Department of Health Services. The sequence is structured as follows:

- HS 200A: Understanding the Organization and Financing of the Health Services System

- HS 200B: Assessing the Key Problems and Efforts to Reform the Health Services System.

HS200A will be coordinated by Dr. Gardner, who will teach a number of sessions. In addition, other faculty from the Department of Health Services and elsewhere in the University, as well as select health policy makers from the Southern California community. Students are expected to gain basic competencies in the topics covered. The required sequence of courses will serve as a basis upon which to select additional courses emphasizing topics and skills which the student wishes to study in greater depth.

KNOWLEDGE AND SKILL OBJECTIVES

HS 200A is designed to provide an extensive introduction to health services in the United States. Upon completion of the course the student should:

- (1) Understand the historical development, current structure, and ways of conceptualizing the health care system;
- (2) Understand how the system responds to health care needs of the population and demand for services;
- (3) Grasp the essential ways health services are paid for in the United States; and
- (4) Have considerable familiarity with the major types of health care organizations and personnel delivering health services.

COURSE REQUIREMENTS

- (1) Mastering of course content through reading, attendance and participation at the lecture sessions and Friday discussion sections. Participation will be evaluated based on your attendance and active participation in the lecture and discussion sections.

- (2) Completion of each homework assignment showing understanding and ability to apply principles and skills emphasized in each part of the course. Succinct writing with excellent grammar and syntax is expected in these assignments.

- (3) Completion of a group project describing the structure and functions of a series of specific health services organizations within the context of a larger health services system.
- (4) Timely completion of all assignments. Late work will be penalized (two points for every day the paper is late) and assignments will not be accepted if turned in more than a week after the due date (unless prior arrangements have been made with the TAs).

CLASS PROCEDURES

Lecture sessions will be mostly on Monday and Wednesday. The Friday lab session conducted by the Teaching Assistants will serve multiple purposes. One of the main purposes is to discuss the readings which have been provided to you. To this end, you are expected to be very familiar with the week's readings, and you will be called upon to discuss the readings during class. Lab sessions will provide opportunities for questions and clarifications on topics covered in the lectures; discussion of homework and other assignments; and elaboration of other interesting topics. Students are encouraged to use the Teaching Assistants as resource persons.

Please turn off your cell phones and pagers at the beginning of class. If you miss a class, you should obtain a copy of any handouts from a classmate. If you expect to be late for a lecture due to clinical or work schedule conflict, please notify the TAs in advance. Class participation is both encouraged and required.

READINGS

1. There are two **textbooks** for the class; these will be used for Health Services 200A and 200B. These are:
 - S. J. Williams and P.R. Torrens (2002). *Introduction to Health Services*. Delmar series in health services administration. Delmar, Albany.
 - R. Andersen, T. Rice and G. Kominski (2001). *Changing the US Healthcare system: Key Issues in health services, policy and management*. Jossey-Bass. San Francisco.
2. This will be supplemented with a **reader** encapsulating current literature on lecture topics.
3. Students are expected to be up to date on health policy issues. While this can be accomplished by the aid of a daily newspaper, it is recommended that students sign up for either of these daily/weekly e-mail services:

- **California Healthline:** Published by the California Healthcare Foundation, the California Healthline is a free daily e-mail service that provides news of current events within the health care field, focusing primarily on California. To register (registration is free) for this go to www.californiahealthline.org and click on the 'Login' button at the top of your screen.
 - **Kaiser Health Policy Report:** Published by the Kaiser Family Foundation, this is also a free e-mail service similar to the California Healthline, but with a more national focus. You can register for it at www.kaisernetwork.org. (Click on the 'email-signup' button on the top right hand side of the screen)
4. It is expected that the students will be conversant with the use of National Center for Health Statistics (NCHS) website as a **reference** - this site is an invaluable source of data and statistics (www.cdc.gov/nchs). They should make optimal use of data and statistics from this site in their papers and other written assignments, as this will stand them in good stead during their professional career.

STUDENT EVALUATION

Course requirements will be weighted according to the following:

<u>Requirement</u>	<u>Weight</u>
Paper	30
Group Project	
• Written Assignment	15
• Oral Presentation	10
• Peer Evaluation	5
Final Exam	30
Class Participation	10
TOTAL	100 POINTS

Letter grades for the course will be assigned as follows:

98-100 = A+	88-89 = B+	78-79 = C+
93-97 = A	83-87 = B	73-77 = C
90-92 = A-	80-82 = B-	70-72 = C-
		Below 70 = F

You will get out of this course what you put into it. A's mean excellent work; B's are acceptable grades – they mean good work. You will receive a C in this course if you do not put in enough effort.

LECTURE SCHEDULE

Monday, Wednesday & Friday
2.00 PM – 4.00 PM

Date	Module	Session	Presenter	Deliverable
9/30 Fri	Part I Introduction & Historical Development	History & Development of the Healthcare System	Torrens	
10/3 Mon		Introduction to HS200 What is health/health care	Gardner	
10/5 Wed		Health Care Models/Rationing	Kaplan	
10/7 Fri		Lab	TAs	
10/10 Mon	Part II Social Determinants of Health	Measuring Need and Access for Health Services	Andersen	
10/12 Wed		What Determines Health of a population?	Fielding	
10/14 Fri		Lab	TAs	Turn in groups for projects
10/17 Mon	Part III Economics	Health Care expenditures	Gardner	
10/19 Wed		Cost Containment	Rice	
10/21 Fri		Lab/group meetings	TAs	2 page summary due
10/24 Mon	Part IV Organizational structure	Medicare	Kominski	
10/26 Wed		Medicaid	Gardner	
10/28 Fri		Lab	TAs	First Paper due
10/31 Mon		Managed Care and health plans	Torrens	
11/2 Wed		Other government health programs: VA, IHS, INS, and Prisoner Health	Gardner	
11/4 Fri		Lab	TAs	
11/7 Mon		Hospitals	Vriesman	

11/9 Wed		Nurses	Needleman	
11/11 Fri	Veteran's Day holiday			
11/14 Mon	Part V: Components	EMS systems	Mallon	
11/16 Wed		Physicians	Gardner	
11/18 Fri	Group presentations			
11/21 Mon	Group presentations			
11/23 Wed		Lab		
11/25 Fri	Thanksgiving Holiday			
11/28 Mon		Employer based health insurance, more cost, more safety net	Gardner	Written group presentations due
11/30 Wed		Pharma	Joyce	
12/2 Fri	Part V: Politics and policy	The uninsured-who they are and why there are so many	Rick Brown	
12/5 Mon		Health Care Policy Choices	Dr. Peterson	
12/7 Wed		TBA		
12/9 Fri		Summary/Lab	TA's	

READING ASSIGNMENTS

SESSION	Andersen, Rice & Kominski	Williams & Torrens	Reader
9/30 Torrens	-	Chap 1 Chap 15	P. Starr (1982) The social transformation of American medicine pp. 420-450
10/3 Gardner		Chapter 7 p.140-152	
10/5 Kaplan		Chap 2 pp 18-30; Chap 8 pp 162-174	
10/10 Andersen	Chap 1		
10/12 Fielding	-	-	<ul style="list-style-type: none"> Marmot, M "The Influence of Income on Health: Views of an epidemiologist" <i>Health Affairs (Millwood)</i> 21 92) pp. 31-46 Lynch JW, Smith GD, Kaplan GA, House JS "Income inequality and mortality: importance to health of individual income, psychosocial environment, or material conditions" <i>BMJ</i> (2000) Vol 320 pp 1200-1204
10/17 Gardner	Chap 3	Chap 5, pp. 92 - 102	<ul style="list-style-type: none"> Strunk BC, Ginsburg PB, Cookson JP "Tracking Health Care Costs: Declining Growth Trend Pauses in 2004". <i>Health Aff (Millwood)</i>. Web exclusive w5-286-295 Martin A, Whittle L, Levit K, Wond G, Hinman L "Health Care Spending During 1991-1998: A Fifty-State Review. <i>Health Aff (Millwood)</i>. July/Aug 2002, 112-126.
10/19 Rice	Chap 4		
10/24 Kominski	Chap 16	Chap 5, pp. 104-108, 110-121	<ul style="list-style-type: none"> Henry J. Kaiser Family Foundation (April 2005). Medicare At A Glance. The Henry J. Kaiser Family Foundation (April 2005). Medicare Advantage. The Henry J. Kaiser Family Foundation (March 2005). Medicare Prescription Drug Benefit The Henry J. Kaiser Family Foundation (March 2005). Medicare Spending and Financing
10/26 Gardner	Chap 2, pp 39-46		<ul style="list-style-type: none"> Jolahan J and Ghosh A "Understanding the Recent Growth in Medicaid Spending, 2000-2003" <i>Health Affairs</i> Jan 2005 W5-52-62 JK Iglehard (2003) The Dilemma of Medicaid <i>N Engl J Med</i> 348, 2140-8
10/31 Torrens	Chap. 15	Chap. 6	•

11/2 Gardner		Chap 2, pp26-30	<ul style="list-style-type: none"> • Peter J Cunningham “Access to Care in the Indian Health Service” <i>Health Affairs</i> (1993) ppl 224-233 • INS Manual “DIHS Detainee Covered Service Package” • Shalit M and Lewin M “Medical Care of Prisoners in the USA” (2004) <i>Lancet</i> (364) pp34-35 • John A Gronvall “Medical Care of Low-Income Veterans in the VA Health Care System” <i>Health Affairs</i> (1987)
11/7 Vriesman		Chap. 10	<ul style="list-style-type: none"> • Howowitz JR (2005). Making Profits and Providing Care: Comparing Nonprofit, For-Profit, and Government Hospitals. <i>Health Aff (Millwood)</i>. 24,(3) 790-800 • Bassoli GJ, Lindrooth RC, An Update on Safety-Net Hospitals: Coping With the Late 1990's and Early 2000's <i>Health Aff (Millwood)</i>. 24, (4)p.1047-1057 • Cuellar AE, Gertler PJ(2005). How the Expansion of Hospital Systems has Affected Consumers <i>Health Aff (Millwood)</i>. 24, 213-220.
11/9 Needleman		Chap 14, pp. 341 – 347	<ul style="list-style-type: none"> • BL Brush, J Sochalski and AM Berger (2004). Imported care: recruiting foreign nurses to U.S. health care facilities. <i>Health Aff (Millwood)</i>. 23, 78-87. • PI Buerhaus, DO Staiger and DI Auerbach (2003). Is the current shortage of hospital nurses ending? <i>Health Aff (Millwood)</i>. 22, 191-8. • J Needleman, P Buerhaus, S Mattke, M Stewart and K Zelevinsky (2002) Nurse-staffing levels and the quality of care in hospitals. <i>N Engl J Med</i>. 346, 1715-22
11/14 Mallon	-	-	<ul style="list-style-type: none"> • “Costs of Emergency Care” American College of Emergency Medicine (2005) • Rick Bukata (2005) “Emergency Department National Statistics” Emergency Medicine and Acute Care Essays • Howard A Peth JR “The Emergency Medical Treatment and Active Labor Act (EMTALA): guidelines for compliance” <i>Em Med Clinics of NA</i> 22 (2004) 225-240 • Lambe S, et al “Trends in the Use and Capacity of California’s Emergency Departments, 1990-1999” <i>Ann of Em Med</i> (2002) 39:4 p 389-396 -
11/16 Gardner		Chap 14, pp 327-341	<ul style="list-style-type: none"> • Weeks, WB and Wallace AE “Financial Returns on Specialty Training for Surgeons” <i>Surgery</i> (2002) 132: 795-802 • Landon BE, Reschovsky J, Blumenthal D “Changes in Career Satisfaction Among Primary

			<p>Care and Specialist Physicians, 1997-2001” <i>JAMA</i> (2003) 289: 442-449</p> <ul style="list-style-type: none"> •
11/28 Gardner			<ul style="list-style-type: none"> • Gabel J, et al “Health Benefits in 2005: Premium Increases Slow Down, Coverage Continues to Erode” <i>Health Affairs</i> (2005) Vol 24, N. 5 pp 1273-1280 • Richardson LD, Hwang U “America’s Health Care Safety Net: Intact or Unraveling?” <i>Academic Emergency Medicine</i> (2001) 8: 1056-1063 • “Health Spending in the US and the Rest of the Industrialized World” <i>Health Affairs</i> (2005) v. 24, n. 5, pp 903-914
11/30 Joyce	Chap 5	Chap. 13	<ul style="list-style-type: none"> • FM Scherer "The Pharmaceutical Industry-- Prices and Progress" <i>NEJM</i> 2005 351: 927-932 • Uwe Reinhardt "Perspectives on the Pharmaceutical Industry" <i>Health Affairs</i> (2001) V. 20 n. 5 pp 136-149 • Light DW, Warburton RN “Extraordinary Claims Require Extraordinary Evidence” <i>Journal Of Health Economics</i> (2005) 24: 1030-1033
12/2 Brown		Ch 2 pp23-26	<ul style="list-style-type: none"> • Gladwell M, The Moral-Hazard Myth, <i>The New Yorker</i>, Aug 29, 2005 • Brown ER, Lavarreda SA, Rice T, Kincheloe JR, and Gatchell MS, Executive summary, <i>The State of Health Insurance in California: Findings from the 2003 California Health Interview Survey</i>, Los Angeles: UCLA Center for Health Policy Research, August 2005 Full Report at: http://www.healthpolicy.ucla.edu/pubs/publication.asp?pubID=146 . • Hoffman (2004) Holes in the health insurance system—who lacks coverage and why, <i>The Journal of Law, Medicine, and Ethics</i> vol 32 pp 1073-1105
12/5 Peterson		Chapter 15	<ul style="list-style-type: none"> • Peterson MA, “Health Reform and the Congressional Graveyard” <i>Healthy, Wealthy, and Fair: Health Care and the Good Society</i>. New York: Oxford University Press 2004

PRESENTERS LIST

<p>Ronald Andersen, PhD Professor Department of Health Services UCLA School of Public Health</p>	<p>E. Richard Brown Professor, UCLA School of Public Health Director, UCLA Center for Health Policy Research UCLA School of Public Health</p>
<p>Jonathan Fielding, MD, MBA, MA, MPH Professor, Health Services and Pediatrics Department of Health Services UCLA School of Public Health</p>	<p>Geoffrey Joyce, PhD Senior Economist RAND corporation</p>
<p>Robert Kaplan, PhD Professor and Chair Department of Health Services UCLA School of Public Health</p>	<p>Gerald Kominski, PhD Professor Department of Health Services UCLA School of Public Health</p>
<p>William Mallon, MD Associate Professor of Clinical Emergency Medicine Residency Director, LAC/USC School of Medicine, Department of Medicine</p>	<p>Jack Needleman, PhD Associate Professor Department of Health Services UCLA School of Public Health</p>
<p>Mark Peterson, PhD Professor of Public Policy and Political Science UCLA School of Public Policy and Political Science</p>	<p>Tom Rice, PhD Professor Department of Health Services 31-293 CHS CAMPUS</p>
<p>Paul Torrens, MD, MPH Professor Department of Health Services 31-299C CHS CAMPUS</p>	<p>Leah Vrismetan, PhD Visiting Assistant Professor Department of Health Services UCLA School of Public Health</p>

First written paper

You will answer the one of the three questions listed below. These questions not only test your grasp of the material presented but also your ability to synthesize ideas and thoughts into cogent written arguments.

Please note that each paper :

- should be 5-8 pages (double spaced, 1" margins, 12 point font);
- should be turned in with student ID numbers and NOT your name;
- is worth a maximum of 15 points;
- should be succinct with excellent grammar and syntax.
- Must be well referenced and supported

An example of a previous students' paper will be handed out in class so that you have an idea of the quality of work that will be expected.

Remember:

- Papers longer than 8 pages in length will not be accepted.
- Late work will be penalized (two points for every day the paper is late) and assignments will not be accepted if turned in more than a week after the due date (unless prior arrangements have been made with the TAs).

For your paper, choose a population (prisoners, wealthy, underprivileged, new immigrants, children, elderly, nursing home patients, etc.), and answer ONE of the following questions:

1. Finance and policy present day:
 - a. Summarize the health care expenditures and system of financing. (The system of financing may well be a combination of the systems)
 - b. Describe the key policy issue(s) facing the health system(s) providing care to your population group.
2. Finance and policy future:

State how you would design a better health care system for that population, addressing a and b above. (You MUST support your design with references!)
3. Finance and policy historical:

Discuss the progress of this group's access to health care from a historical perspective. What were the important milestones in finances and policy choices, and how were these changes effected. What were the gains and losses over time for your population?

GROUP PROJECT

HEALTH SERVICES EXPLORATORY RESEARCH

Exploratory research is utilized when one is seeking insight into the general nature of some area of interest and there is little or no prior knowledge on which to build. Methods are usually qualitative, unstructured and highly flexible which permits a pursuit of ideas, thoughts and questions about the area of interest.

As a requirement for the fulfillment of HS 200A, you will be asked to complete an exploratory group research project in health services. The primary goal of the project is to provide you with the opportunity to familiarize yourself with financing, policy, management and organizational attributes of health services in both the public and private sectors. This will be accomplished by completing research about direct services and supportive/ancillary health care providers.

This is a team project. Nearly all projects in health services will necessitate working as a member of a team. Thus, it is important for you to learn how to work effectively as part of a team early in your career. The ability to work as part of a team is relevant for careers in health services research, health policy, and health management.

Each team should consist of five members. Your team should be formed by the second week of class. A list of team members will be submitted to the TA no later than **Friday, October 14, 2005**. Each group will be responsible for managing its own division of labor by assigning tasks and responsibilities. Additionally, a 2 page, double-spaced word-processed proposal detailing 1) each team member's responsibilities, 2) which individuals and organizations each member is contacting, and 3) what progress has been made is due to the TA no later than **Friday, October 21, 2005**.

You will complete and submit a team written report of no more than 25 word-processed pages and present your findings in a formal presentation of no more than 20 minutes (15 minutes for presentation, 5 minutes for discussion). Late papers will be penalized, as will presentations that exceed the allotted time.

The format for the written report and oral presentation are outlined below. It is imperative that you start your project as early in the quarter as possible as it requires formation of your group as well as coordination of data collection, analysis and report preparation. You may choose to collect data via primary or secondary data sources, e.g., interviews with administrative or managerial personnel working at the selected organizations, annual reports, marketing materials, program narratives, etc. All of these activities take time, so plan carefully.

Written Assignment

Each team will select a **topic** or **population** and five different organizations that provide services to the population selected. For example, AIDS, elderly, children and long-term care are all areas that encompass different types of service organizations such as nursing homes, hospices, home health agencies or acute rehabilitation facilities. Identify five organizations that address the needs of your specified population or area.

The five organizations must be selected to reflect the following functions and categories. Two (2) organizations must be direct service (Categories One and Two) and the remaining three (3) organizations can be selected from various supportive and ancillary services (Categories Three - Eight). A further definition of the functions listed below is attached ("Trends in Organization of Health Services" by Andersen and Mullner, Handbook of Medical Sociology by Howard Freeman and Sol Levine - which is also included in the reader).

FUNCTION	DEFINITION	CATEGORIES
I. Direct service	Directly treating populations to maintain or improve health	1. Individual patient-based 2. Community based
II. Supportive & ancillary	Supply or maintain service organizations	3. Finance 4 Suppliers 5. Regulation 6. Representation 7. Research 8. Consulting

Each team will be expected to collect data and answer the following questions for each organization, as relevant for each organization. You can refer to the operational indicators of the Expanded Behavioral Model in Williams and Torrens for further description of Numbers 3-5 listed below.

1. What are the purpose, mission and goals of each organization?
2. What are the characteristics of the organization?
3. What are the characteristics of the consumer?
4. What are the characteristics of utilization of the organization's services?
5. An assessment and summary of the organization's strengths and weaknesses.
6. Methods of data collection (primary, secondary, problems).
7. How do all the organizations fit together within the general framework of a health services system and its functions?

Remember, you must contain your report to no more than 25, double-spaced pages plus appendices. Please review your final report for grammar and spelling,

as these will be considered in the grading process. Introductory and concluding sections should integrate the reports covering each organization and illustrate how these organizations represent the various functions of the health services system. The due date for the written report will be **Monday, November 28th, 2005**. The peer evaluation forms must be completed and submitted in an envelope to the TA no later than **Monday, December 9, 2005**.

Oral Presentation:

Each team will present a summary of their project and their findings to the rest of the class. The presentations will occur on November 18th and 21st. Each team will receive its assigned day and time by the 6th week of class from the TAs. It is not required that all team members present but at least two of the team members must participate in the oral presentation. The oral presentation must cover the following:

1. Overview of the organization(s) (purpose, mission, & goals)
2. How does this organization fit into the overall team project and relate to other organizations surveyed for the project?
3. Strengths and weaknesses of the organization, future outlook and level of integration with health services in general.
4. What possible research questions, hypotheses, policy concerns and potential problems are evidenced through exploratory observations of the selected organization?
5. Anything especially surprising or interesting that your team would like to share with the class.

You are free to be as creative as you like with the presentation but make certain you communicate the basic objectives listed above, and adhere to the time limitations.

Grading

Each task associated with the group project will be evaluated as follows:

Written report	15 points
Oral presentation	10 points
Peer evaluation	5 points

**GROUP PROJECT
PEER EVALUATION FORM**

Peer Rating

Each team member is required to submit a peer rating form. This form provides an evaluation of each team member and will be kept in strict confidence. In the space provided below, please fill in the names of your team members and record your peer rating for each. The form must be signed and submitted to your T.A. on **Monday, December 9, 2005.**

Grade each group member, excluding yourself, on a scale of 0-5, with 5 being the highest score and 0 being the lowest score. Consider in your assessment:

1. Willingness of the individual to complete assigned tasks and responsibilities.
2. Ability of the individual to meet deadlines.
3. Cooperation with other team members.
4. Quality of the individual's work.
5. Individual's overall contribution to the discussion and completion of the group project.

Group Identification

(Group # and Project Title)

TEAM MEMBER	POINTS AWARDED

Signature (write legibly)

** Please make any additional comments on the reverse side if necessary **