

UCLA School of Public Health
Department of Health Services

Winter 2002

Managed Care Practices

Health Services 442B

Time: Tuesdays and Thursdays, 1:00-2:50 p.m.

Room: CHS 61-269

Instructor: Patricia Parkerton, Ph.D., MPH

Office Hours: Tuesdays/Thursdays 5:00 p.m.
or email for appointment

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Background:

The steadily increasing prevalence of managed care models and practices make it highly likely that anyone working in the health care industry will interact with managed care issues. An understanding of how diverse managed care organizations function and how they structure their goal-seeking behavior is crucial. Furthermore, as these organizations grow both nationally in size and locally in scope, the distance between areas of operation increases. The orientation of this course, from within managed care organizations, will emphasize the primary operations and relationships between them.

Prerequisite

Managed Health Care, Health Services 442A, or permission of the instructor.

Learning Objectives

Upon completion of this course, students should be able to discuss the major objectives and apply the principle techniques of managed care organizations.

Method of the Course

The course will consist of lecture presentations by the instructor, discussion of articles, presentations by professionals from managed care organizations, and team and individual projects. Following a brief review of the external structures of managed care organizations, the internal structures and techniques will be addressed.

Textbook/Readings

Reader available at Course Reader Materials, 1141 Westwood Blvd., Los Angeles 90024, phone 310-443-3300.

Essentials of Managed Care (Fourth Edition) by Peter Kongstvedt, published by Aspen Publishers, available at the UCLA Bookstore. Many chapters will have been read in 442A.

Exercises

Choice paper: “Health Plan Choice and Work”: You’ve moved and taken a new job in the healthcare industry. Which health plan will you select for yourself (or a family member)—why? What kind of job have you taken and how does it relate to the managed care industry? What do you need to learn to do this job well? 4-5 pages

Care Management project: “Service Practice: Policy, Providers, Management, and Quality”
 In teams of 3 or 4, select a controversial service practice, determine health plan policy on its coverage, practices to credential providers, manage utilization, ensure quality, and protect the organization. Define sources and sell practices to your “medical advisory committee” in a: 10-12 page paper, 15 minute presentation

Negotiation: Contracts will be negotiated for a defined service. Roles will be assigned and some materials provided on positions. Teams of 2 or 3 will prepare prior to class negotiation session.

Sales presentation: Present a five-minute sales presentation for a new managed care product to the class and handle questions for five minutes.

Class participation: All will be expected to contribute. Readings must be read prior to class and will be drawn upon in discussion—not summarized.

Grading

<u>Activity</u>	<u>Participants</u>	<u>% Grade</u>	<u>Grader</u>
Choice paper	1	10	100% instructor
Care Management paper	3/4	30	50% team, 50% instructor
Presentation	3/4	10	50% class, 50% instructor
Negotiation	2/3	20	50% team, 50% opposing team
Sales presentation	1	20	50% class, 50% instructor

Class participation	1	10	100% instructor
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Managed Care Practices: Schedule

#	Date	Topic	Speaker/ Assignments	Readings
		MC Organizations		
1	1/7	Introductions. External structure: taxonomy, governance	Quiz, anonymous	EMC: review Chapter 3 and 4
2	1/9	Benefits, rating, risk, resource allocation		EMC: read Chapters 23 and 25 Benefit assessment
3	1/14	Internal structure: positions, diversity, unions		EMC: read Chapter 5 CR: (Knight 1998)
		Provider Relations		
4	1/16	Providers: diversity, perspectives, prevalence	Choice paper due Form Care Mgt teams	CR: (Donaldson, Yordy 1996; Eisenberg, Davis et al. 1998; Karpf and Schultz 2000)
5	1/21	Credentialing: clinicians and institutions		EMC: review Chapters 7 and 10 CR: (Rustia and Bartek 1997; Searcy and Thornley 1997; Burcham 1999)
6	1/23	Quality: QA, CQI, medical records	Ross Miller, M.D. Cigna	EMC: review Chapter 17 CR: (Custer 1995; Allison, Wall et al. 2000)
7	1/28	Utilization management		EMC: review Chapter 13-15 CR: (MacStravic 1996; Mayer 1998)
8	1/30	Profiling, performance evaluation, risk management	A Leggoretta, M.D. Health Benchmarks	EMC: Read Chapter 9 CR: (Spicer 1998; Smith 1999)
		Regulation-Accreditation		
9	2/4	Involuntary: state and federal government	Care Mgt. paper due, presentations	EMC: Review Chapter 28 CR: [Silberman and James 2000]
10	2/6	Voluntary: NCQA	Care Mgt. presentations	EMC: Read Chapter 26 CR: (NCQA 2000; 2001)
		Payment Mechanisms		
11	2/11	Premiums, provider payments, incentives		EMC: review Chapters 8 and 22 CR: (Saikami 1997; Savage, Campbell 2000)
		Contracting		
12	2/13	Contracts	Form contract Teams Catherine Berman, MPH, Permanente	EMC: review chapters 10 and 11 Read Chapter 32 CR: (Alexander 1997; Wolff and Kardell 1998; Garofalo, Horwitz 1999)

EMC: Essentials of Managed Care

CR: course reader

#	Date	Topic	Outside Speaker/ Assignment Due	Readings
13	2/18	Negotiation	UCLA Medical Center	EMC: review chapter 16 CR: (Garofalo, 1999)
14	2/20	Negotiation exercise	Negotiation session	Case distributed class before Roles at beginning of class
		Marketing		
15	2/25	Position: strategy, image, product development		EMC: Read Chapter 23 CR: (Partridge 1996)
16	2/27	Sales: customer relations, PR, situation management	Jacqueline Meaney, MPH	Sales or PR
		Member Services		
17	3/4	New members, communication, member satisfaction	Sales presentations	EMC: read Chapter 24 CR: (Ervin 1999; Gold and Wooldridge 1995)
18	3/6	Health education, promotion, prevention	DMC speaker Sales presentations	CR: (Schauffler, Chapman 1998)
19	3/11	Grievance management, patient rights	Sales presentations	AAHP 2001
		Potential		
20	3/13	Condition, demands, position in US, future		EMC: review Epilogue CR: (Kelly and Phelan 1999; Mechanic 1999; Pedersen 1999)

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