

Carnegie Mellon University

HeinzCollege

Course Name and Number(s): Health Policy (90861 and 90472)

Total Units: 6 units

Location: Hamburg Hall 1005

Modality: In-person

Day and Time: Tuesdays 6:30-9:20pm

⌘ Course Description

This graduate-level course provides a comprehensive overview of health policy, designed to equip students with the ability to critically analyze the factors influencing health outcomes, the challenges facing the health care system, and the array of policy options available to governments. Through our exploration, we will engage with key issues such as societal expectations of medical care and the government's role within the health care sector. While the course will address global health policy concerns pertinent to all industrialized nations, it will particularly concentrate on the intricacies of the health care system and policy landscape in the United States.

⌘ Learning Objectives

By the end of this mini course students will:

- Gain a comprehensive understanding of contemporary health policy as an academic discipline and its overarching societal objectives.
- Explore the historical evolution of U.S. health policy and the contributing factors to the distinctiveness of the American health care system.
- Examine the processes involved in shaping health policies, including the stages of agenda setting and policy formulation.
- Identify and describe the roles of various stakeholders in policy development, such as lobbyists, medical professionals, legislators, insurance firms, employers, communities, and individuals.
- Pledge to recognize and respect diverse values while participating in health policy discourse.
- Integrate and assess the principal components of significant health policy initiatives in the U.S., including the Affordable Care Act and Medicare for All proposals.
- Cultivate the ability to construct, critique, and deliberate on the merits and drawbacks of various health policy proposals.

⌘ Statement of Assumed/Prior Knowledge

Enrollment in this course presupposes a foundational understanding of the U.S. health systems. As such, Heinz College requires completion of the health systems course (90436) prior to this course as a prerequisite. If you lack prior experience with this course or a background in U.S. health systems, please arrange to meet with me as soon as possible.

⌘ Course Structure

The course will be broken into three modules each covering a broad topic area:

- Module One: Introduction to Health Care Policy (Weeks 1-3)
- Module Two: Current Health Care Policy (Weeks 4-5)
- Module Three: Future of Health Care Policy (Week 6-7)

We will have a 10-minute break halfway through each class.

⌘ Accommodations for Students with Disabilities

“If you have a disability and have an accommodations letter from the Disability Resources office, I encourage you to discuss your accommodations and needs with me as early in the semester as possible. I will work with you to ensure that accommodations are provided as appropriate. If you suspect that you may have a disability and would benefit from accommodations but are not yet registered with the Office of Disability Resources, I encourage you to contact them at access@andrew.cmu.edu” This statement was developed by CMU.

⌘ Recording Policy

Recording of classroom activities and lectures is not allowed without a formal accommodation or prior written consent. If permission is granted, recordings are for the student’s personal use only and may not be duplicated or distributed.

⌘ Instructor Contact Information

David J. Dausey, Ph.D., Ed.D.
Distinguished Service Professor
Heinz College
Carnegie Mellon University
Mobile: 412-577-8431 (Text or Call)
E-mail: ddausey@andrew.cmu.edu
Office Hours: By appointment

⌘ Diversity Statement

“We must treat every individual with respect. We are diverse in many ways, and this diversity is fundamental to building and maintaining an equitable and inclusive campus community.

Diversity can refer to multiple ways that we identify ourselves, including but not limited to race, color, national origin, language, sex, disability, age, sexual orientation, gender identity, religion, creed, ancestry, belief, veteran status, or genetic information. Each of these diverse identities, along with many others not mentioned here, shape the perspectives our students, faculty, and staff bring to our campus. We, at CMU, will work to promote diversity, equity, and inclusion not only because diversity fuels excellence and innovation, but because we want to pursue justice. We acknowledge our imperfections while we also fully commit to the work, inside and outside of our classrooms, of building and sustaining a campus community that increasingly embraces these core values.” This statement was developed by the CMU Faculty Senate. For more information on CMU’s commitment to diversity, please visit the Center for Student Diversity and Inclusion or contact: csdi@andrew.cmu.edu, (412) 268-2150.

⌘ Statement on Student Wellness

“Take care of yourself. Do your best to maintain a healthy lifestyle this semester by eating well, exercising, avoiding drugs and alcohol, getting enough sleep, and taking some time to relax.

This will help you achieve your goals and cope with stress. All of us benefit from support during times of struggle. There are many helpful resources available on campus and an important part of the college experience is learning how to ask for help. Asking for support sooner rather than later is almost always helpful. If you or anyone you know experiences any academic stress, difficult life events, or feelings like anxiety or depression, we strongly encourage you to seek support. Counseling and Psychological Services (CaPS) is here to help: call 412-268-2922 and visit their website at <http://www.cmu.edu/counseling/>. Consider reaching out to a friend, faculty, or family member you trust for help getting connected to the support that can help.”

This statement was developed by CMU.

⌘ Class Presence and Participation

Class presence and participation are critical components of the learning process, as they directly correlate with the degree of information students assimilate and master. Consequently, no differentiation is made between excused and unexcused absences. Considering the condensed nature of this mini course, which convenes only seven times, regular attendance is highly recommended. All students can earn up to 10 points for consistent attendance and active participation. However, those who frequently arrive late or miss more than two class sessions can earn up to 8 points.

⌘ Course Assessments

Five mechanisms will be used to assess student performance during the course:

- Class attendance and engagement 10%
- Week 2 Assignment: Historical context video reflection 15%
- Week 4 Assignment: Current health care policy analysis 20%
- Week 6 Assignment: Value-based care critique 25%
- Week 8 Assignment: Health care equity reflection 30%

Week 2 Assignment: Historical Context Video Themes

Due: March 19, 2024 before class (6:30pm)

Begin by watching the required historical context videos on Canvas. To do this, select the 'Modules' tab and scroll down to the 'Week Two' module. Within this module, you'll find the 'Health Policy Historical Context Videos (Required)' section. Individually click on each video to watch them. After watching the videos, go to the 'Assignments' tab in Canvas and select the 'Week 2 Assignment'. Directly below the instructions, click the reply bar to post your reflection. Your reflection should be a brief composition (400-500 words) that highlights three distinct themes you identified in U.S. health policy over time from the videos. Additionally, provide a brief response (300-400 words) to another person's reflection by clicking 'reply' in the lower left-hand corner of their post. You will be able to see the posts of others once you complete your post.

This assignment is worth 15 points, and the grading rubric is as follows:

- *Understanding of Historical Context (5 points)*
 - Excellent (4-5 points): Demonstrates a comprehensive understanding of U.S. health policy's historical context, identifying three clear and distinct themes with detailed explanations.
 - Good (3 points): Identifies three themes with adequate explanations, showing a good understanding of the historical context.
 - Fair (1-2 points): Identifies themes but provides minimal explanation or detail, showing a basic understanding.
 - Poor (0 points): Fails to identify themes or shows a lack of understanding of the historical context.
- *Quality of Reflection (5 points)*
 - Excellent (4-5 points): Reflection is insightful, well-structured, and demonstrates critical thinking with a clear connection to the videos.
 - Good (3 points): Reflection is coherent and structured, with some critical thinking evident.
 - Fair (1-2 points): Reflection lacks depth or structure, with limited critical thinking.
 - Poor (0 points): Reflection is unclear, unstructured, or off topic.
- *Engagement with Peer Reflection (5 points)*

- Excellent (4-5 points): Provides a thoughtful and constructive response to a peer's reflection, fostering further discussion.
- Good (3 points): Response is relevant and polite but may not encourage further discussion.
- Fair (1-2 points): Response is relevant but lacks depth or fails to engage with the peer's ideas.
- Poor (0 points): Response is irrelevant, disrespectful, or missing.

Week 4 Assignment: Current Health Policy Reflection

Due: April 2, 2024 before class (6:30pm)

Please access the Week 4 materials on Canvas by selecting the 'Modules' tab on the left. Navigate to 'Week 4' and view each 'Required Video.' Then, proceed to the 'Readings to complete at the start of Week 2,' and review each one. Once completed, return to 'Assignments' tab in Canvas and click the 'Reply' button to post an 800–1000-word analysis addressing the questions outlined in the following bullets:

- Describe two significant health policy issues addressed by the American Rescue Plan Act or the Inflation Reduction Act? What necessitated these reforms, and are they sufficient to resolve the issues they aim to address?
- Why do U.S. policymakers often incorporate health care reforms into legislation targeting different issues, such as inflation reduction or economic recovery from COVID-19? What factors lead to the fragmented nature of U.S. health policy?

Additionally, after submitting your initial post, provide a concise response (300-400 words) to another person's post. To do this, click the 'reply' button located at the bottom left of their post. Please note that the posts of others will only become visible to you after you have completed and submitted your own post.

This assignment is worth 20 points. The grading rubric for the assignment is as follows:

- *Comprehension of Health Policy Issues (5 points)*
 - Excellent (4-5 points): Provides a detailed description of two significant health policy issues addressed by the legislation, with a clear explanation of the reasons behind the reforms and an insightful evaluation of their sufficiency.
 - Good (3 points): Describes two health policy issues with a basic explanation of the reforms' necessity and a general assessment of their sufficiency.
 - Fair (1-2 points): Identifies two health policy issues but offers minimal explanation of the reforms' necessity and sufficiency.
 - Poor (0 points): Fails to identify or describe two health policy issues adequately.
- *Analysis of Legislation and Health Care Reforms (5 points)*
 - Excellent (4-5 points): Provides a thorough analysis of why health care reforms are included in broader legislation, with a deep understanding of the factors contributing to the fragmented nature of U.S. health policy.

- Good (3 points): Offers a clear analysis of the inclusion of health care reforms in legislation and identifies factors leading to fragmentation.
- Fair (1-2 points): Provides a basic analysis with limited insight into the inclusion of health care reforms and fragmentation factors.
- Poor (0 points): Lacks analysis or understanding of the reasons behind health care reforms in legislation and policy fragmentation.
- *Writing Quality and Word Count (5 points)*
 - Excellent (4-5 points): The analysis is well-written, within the specified word count, and free of grammatical errors.
 - Good (3 points): The writing is clear with minor errors and is within the word count range.
 - Fair (1-2 points): The writing is understandable but contains several errors or slightly deviates from the word count.
 - Poor (0 points): The writing is unclear, contains numerous errors, or significantly deviates from the word count.
- *Peer Response Quality (5 points)*
 - Excellent (4-5 points): The response to a peer's post is insightful, well-articulated, and within the specified word count, fostering meaningful discussion.
 - Good (3 points): The response is relevant and polite, with minor issues in articulation or word count.
 - Fair (1-2 points): The response is relevant but lacks depth or slightly deviates from the word count.
 - Poor (0 points): The response is irrelevant, disrespectful, or significantly deviates from the word count.

Week 6 Assignment: Value-Based Care Critique

Due: April 16, 2024 before class (6:30pm)

Begin by accessing the "Modules" tab located on the left side of your Canvas interface. Scroll to locate "Week 6." Within the Week 6 module, navigate down to the "Required Videos" section and click on each video to view them. After watching the videos, continue to the "Readings" section. Here, you should individually select each reading to thoroughly review them. Upon completing these steps, return to this platform and locate the "Reply" bar situated directly below these instructions. Craft a succinct analysis (1000-1200 words) that addresses the following points:

- The Affordable Care Act (ACA) includes measures aimed at transforming the US healthcare system through the promotion of "value-based care." Teisberg and colleagues (2020) have provided a strategic framework for this approach. The Center for Medicare and Medicaid Innovation (CMMI) was created to drive innovation in this realm. Despite this, there are persistent inquiries. From your perspective, is the transition towards value-based care delivering the results anticipated by the federal government?

- Khullar and colleagues (2022) have posed questions regarding whether the Centers for Medicare & Medicaid Services' (CMS) focus on value-based care is unfairly disadvantaging hospitals that serve diverse communities. Do you share this concern? What strategies could the federal government implement to investigate this matter more comprehensively?

After posting your analysis, offer a brief commentary (300-400 words) on another participant's analysis by selecting "reply" in the lower left-hand corner of their contribution. Note that you must submit your analysis to view and respond to the analyses of other participants.

The assignment will be worth 25 points, and will have the following rubric:

- *Content Understanding (8 points)*
 - Excellent (6-8 points): Demonstrates a deep understanding of the ACA's value-based care and the strategic framework described by Teisberg and colleagues (2020). Insightful and well-reasoned response to Khullar and colleagues (2022).
 - Good (4-5 points): Shows a good grasp of the topics but may lack depth in understanding or critical analysis.
 - Fair (2-3 points): Addresses the topics but with limited insight or understanding.
 - Poor (0-1 points): Fails to address the topics adequately or shows a misunderstanding of the core concepts.
- *Analysis and Critical Thinking (8 points)*
 - Excellent (6-8 points): Thorough analysis with clear arguments, critical insights, and a well-supported opinion on value-based care effectiveness.
 - Good (4-5 points): Includes a reasonable argument and opinion but may lack depth or supporting evidence.
 - Fair (2-3 points): Basic analysis with some argumentation but lacking in depth and critical insight.
 - Poor (0-1 points): Superficial analysis with no clear argument or critical thinking evident.
- *Writing Quality (4 points)*
 - Excellent (3-4 points): Clear, concise, and free of grammatical or spelling errors.
 - Good (2 points): Mostly clear with minor grammatical or spelling errors.
 - Fair (1 point): Understandable but contains several grammatical or spelling errors.
 - Poor (0 points): Unclear and significantly hindered by grammatical or spelling errors.
- *Engagement with Peers (5 points)*
 - Excellent (4-5 points): Insightful, respectful response that fosters further discussion.
 - Good (3 points): Respectful and relevant response but may not encourage further discussion.
 - Fair (1-2 points): Relevant response but lacks depth or may not be respectful.
 - Poor (0 points): Off-topic, disrespectful, or absent response.

Week 8 Assignment: Health Disparities Policy Analysis

Due: May 3, 2024 at the end of the day (11:59pm)

As the final requirement for this course, in place of a traditional final exam, you are tasked with an individual assignment that calls for a critical examination of health disparities in the United States. To begin, access the “Modules” tab on the left side of your Canvas interface and locate “Week 7.” Within the “Week 7” module, navigate to the “Readings” section. You are expected to select and thoroughly review each reading listed there. Your task is to construct a policy analysis, grounded in these readings and those you’ve engaged with throughout the semester, to evaluate the effectiveness of current U.S. health policies in addressing health disparities. This policy analysis should be a comprehensive analysis, 5-7 pages in length, summarizing the key insights gained during the course. More importantly, it should include your personal assessment of whether the policy measures in place are adequate in addressing the disparities. This assignment provides you with the opportunity to integrate your accumulated knowledge, exercise critical thinking, and express your informed viewpoint on the success of health policies in reducing the persistent healthcare inequalities that challenge our society.

Please adhere to proper academic conventions by using in-text citations and providing a bibliography for any works that you quote or paraphrase throughout your reflection. Ensure that all sources are credited appropriately to maintain academic integrity.

The assignment will be worth 30 points, and will have the following rubric:

- *Depth of Analysis (10 points)*
 - Excellent (8-10 points): Provides a nuanced and comprehensive analysis of health disparities and current U.S. health policies, with a well-supported argument that includes multiple perspectives and considerations.
 - Good (6-7 points): Offers a clear analysis of health disparities and policies, with a well-reasoned argument that considers several key factors.
 - Fair (3-5 points): Presents a basic analysis with some argument about health disparities and policies but lacks depth or consideration of multiple factors.
 - Poor (0-2 points): Analysis is superficial or incomplete, with little to no argument or consideration of the complexities of health disparities and policies.
- *Integration of Course Concepts (10 points)*
 - Excellent (8-10 points): Demonstrates an exceptional ability to integrate and apply key concepts from the semester’s readings to the analysis of health disparities and policy efforts.
 - Good (6-7 points): Shows a good understanding of course concepts and applies them appropriately to the analysis.
 - Fair (3-5 points): Some course concepts are integrated, but the application is basic or lacks connection to the analysis.
 - Poor (0-2 points): Fails to integrate or apply course concepts to the analysis of health disparities and policy efforts.
- *Critical Reflection and Originality (10 points)*

- Excellent (8-10 points): Reflection is original, insightful, and demonstrates critical thinking, offering unique perspectives on health disparities and policy efforts.
- Good (6-7 points): Reflection is coherent and shows evidence of critical thinking, with some original perspectives.
- Fair (3-5 points): Reflection includes personal assessment but is limited in originality and critical thinking.
- Poor (0-2 points): Reflection lacks originality, critical thinking, or personal assessment of health disparities and policy efforts.

⌘ Late/Make-up Work Policy

Assignments submitted on time can receive up to full credit. Assignments handed in no more than one week late are eligible for a maximum of 90% of the total points. Those submitted within two weeks of the deadline may receive up to 80%. Any assignments more than two weeks late, will be ineligible for credit. Assignments are not eligible for re-grading.

⌘ Grading Scale

Letter grade followed by equivalent percentage.

A+	99-100%	B+	88-90%	C+	78-80%
A	95-98%	B	84-87%	C	74-77%
A-	91-94%	B-	81-83%	C-	71-73%

The grade of A+ is reserved for truly exceptional performance. Grades of 70% or less will receive an R.

⌘ Academic Integrity

“Academic credit awarded to an individual should represent the work of that individual. Therefore, students at Carnegie Mellon are expected to produce their own original academic work. Collaboration or assistance on academic work to be graded is not permitted unless explicitly authorized by the course instructor(s). The citation of all sources is required. When collaboration or assistance is permitted by the course instructor(s), the acknowledgement of any collaboration or source of assistance is likewise required. Failure to do so is dishonest and is the basis for a charge of cheating, plagiarism, or unauthorized assistance. Such charges are subject to disciplinary action.” This quote was taken from the CMU webpage dedicated to academic integrity. For more information CMU’s policies for academic integrity, please see: <https://www.cmu.edu/policies/student-and-student-life/academic-integrity.html>

⌘ Use of Artificial Intelligence

In the spirit of academic integrity and the educational mission of this institution, the use of artificial intelligence (AI) tools in completing assignments is permitted with the following stipulations:

- **Disclosure Requirement:** Students must disclose the use of AI assistance in their assignments. This disclosure should be included at the beginning of the submitted work and must specify the extent to which AI was utilized.
- **Extent of Use:** AI may be used as a supplementary tool for tasks such as generating ideas, providing initial drafts, or aiding in research. However, the core analysis, synthesis of ideas, and critical thinking must be the original work of the student.
- **Prohibition of Complete AI Dependency:** Assignments must not be completed entirely by AI. The student's contribution should reflect a significant portion of the intellectual effort. Relying solely on AI to complete an assignment is a violation of the academic integrity policy outlined in the syllabus.
- **Educational Purpose:** The allowance of AI tools aims to enhance the learning experience by exposing students to emerging technologies. However, the primary goal remains the development of the student's own analytical and critical abilities.

By adhering to this policy, students ensure that their educational journey remains authentic and that the skills they acquire are genuinely reflective of their personal efforts and abilities. This policy is designed to encourage responsible use of AI while maintaining the integrity of the educational process. Adjustments can be made to align with specific course objectives or institutional guidelines.

⌘ Expected Semester Schedule

All course readings and course materials can be found on the Canvas website for the course. The expected schedule for the course is below.

Module One: Introduction to Health Care Policy (Weeks 1-3)

Week One (March 12, 2024) Introduction to health care policy

- Schneider, E. C. (2020). Health care as an ongoing policy project. *New England Journal of Medicine*, 383(5), 405-408.

Week Two (March 19, 2024) History of U.S. health care policy

- Magarinos, J., Patel, T., Strunk, J., Naunheim, K., & Erkmen, C. P. (2022). A history of health policy and health disparity. *Thoracic Surgery Clinics*, 32(1), 1-11.

- Oberlander, J. (2012). Unfinished journey—a century of health care reform in the United States. *New England Journal of Medicine*, 367(7), 585-590.

Week Three (March 26, 2024) Employer sponsored insurance

- Blumenthal, D. (2006). Employer-sponsored health insurance in the United States—origins and implications. *New England Journal of Medicine*, 355(1), 82.

Module Two: Current Health Care Policy (Weeks 4-5)

Week Four (April 2, 2024) Affordable Care Act

- Gaffney, A., & McCormick, D. (2017). The Affordable Care Act: implications for health-care equity. *The Lancet*, 389(10077), 1442-1452.
- Blumenthal, D., & Abrams, M. (2020). The Affordable Care Act at 10 years—payment and delivery system reforms. *New England Journal of Medicine*, 382(11), 1057-1063.
- Adashi, E. Y., & Cohen, I. G. (2021). The American Rescue Plan Act of 2021: A historic if transitory expansion of the ACA. *JAMA*, 326(1), 27-28.
- Hwang, T. J., Kesselheim, A. S., & Rome, B. N. (2022). New reforms to prescription drug pricing in the US: opportunities and challenges. *JAMA*.
- Dusetzina, S. B., & Huskamp, H. A. (2022). Impending relief for Medicare beneficiaries - The Inflation Reduction Act. *New England Journal of Medicine* 387(16), 1437-1439.

Week Five (April 9, 2024) Health care equity (CLASS WILL BE REMOTE)

- Navathe, A. S., & Liao, J. M. (2022). Aligning Value-Based Payments With Health Equity: A Framework for Reforming Payment Reforms. *JAMA*, 328(10), 925-926.
- Brown et al. (2019). Structural Interventions to Reduce and Eliminate Health Disparities. *Am J Public Health*. 109(Suppl 1): S72–S78.
- Thornton et al. (2016) Evaluating Strategies For Reducing Health Disparities By Addressing The Social Determinants Of Health. *Health Affairs* Aug 1;35(8):1416-23.

Module Three: Future of Health Care Policy (Weeks 6-7)

Week Six (April 16, 2024) Value-based care

- Gondi, S., Joynt Maddox, K., & Wadhera, R. K. (2022). “REACHing” for Equity—Moving from Regressive toward Progressive Value-Based Payment. *New England Journal of Medicine*, 387(2), 97-99.
- McDonough, J. E., & Adashi, E. Y. (2022). The Center for Medicare and Medicaid Innovation—Toward Value-Based Care. *JAMA*, 327(20), 1957-1958.

- Teisberg, E., Wallace, S., & O’Hara, S. (2020). Defining and implementing value-based health care: a strategic framework. *Academic Medicine*, 95(5), 682.
- Ryan, A. M., Krinsky, S., Maurer, K. A., & Dimick, J. B. (2017). Changes in hospital quality associated with hospital value-based purchasing. *New England Journal of Medicine*, 376(24), 2358-2366.
- Khullar, D., Tian, W., & Wadhera, R. K. (2022, July). High-Performing and Low-Performing Hospitals Across Medicare Value-Based Payment Programs. In *JAMA Health Forum* (Vol. 3, No. 7, pp. e221864-e221864). American Medical Association.

Week Seven (April 23, 2024) Future of health care policy

- Douglas et al. (2019). Applying a Health Equity Lens to Evaluate and Inform Policy. *Ethn Dis.* 29(Suppl 2): 329–342.
- Ayanian, J. Z. (2021). Crucial questions for US health policy in the next decade. *JAMA*, 325(14), 1397-1399.
- Fiedler, M. (2020). Competing visions for the future of health policy. *New England Journal of Medicine*, 383(13), 1197-1199.

The course description, learning objectives, assessments, expected semester schedule, selected readings, and overall course structure were developed by the instructor. This syllabus was refined for grammar and clarity with the assistance of Microsoft Copilot, an artificial intelligence (AI) tool. Additionally, Microsoft Copilot contributed to the creation of grading rubrics for assignments.
