COURSE OVERVIEW

Larry Kessler is the instructor for Health Services 511. Katharine Flug is the teaching assistant for the course. Students with concerns or questions about course material or exams should contact Katharine or the course instructor after class or by appointment.

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Office hours: By appointment
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MPH student, Health Services
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Mailbox: H-wing 6th floor
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WEBSITE:

CLASS TIMES:

BRIEF DESCRIPTION:

HSERV 511 provides an overview of the U.S. health care and public health systems, covering: 1) the many factors affecting the population’s need, demand, and utilization of health care services, 2) how health care is financed, organized and regulated; 3) the history, goals, and changing role of public health; and 4) the efficiency, effectiveness and equity of the health system. The course explores the role of the private sector and of government in the financing, provision, and regulation of health services, and in the protection of the health of the population.

The course introduces students to faculty from the Health Sciences schools and practitioners from the Seattle health care and public health communities. Many of the lecturers teach specialized courses on the topics they present in HSERV 511. The course materials and lecturers serve as resources for students who wish to pursue further study in specific areas of interest.
LEARNING OBJECTIVES

HSERV 511 provides a working knowledge of the conceptual and disciplinary perspectives essential to understanding the health system, and provides a basic body of factual knowledge about how the health care and public health systems operate. The course examines the strengths and weaknesses of the U.S. health system, and explores directions for improvement. It serves as a foundation for subsequent course work and for careers in health services management, policy, public health practice, research, and related fields. At the end of this course students will be able to:

- Describe how the health care and public health systems contribute to the public's health and to the intermediate goals of equity, efficiency, and effectiveness.
- Describe the history, components, organization and operation of the health care and public health systems.
- Explain how the structure and functioning of the health system affect its performance.
- Discuss the determinants of health and illness and the contribution health care and public health make to the health status of the population with particular attention to inequities in among populations.
- Describe the major public policy issues that affect health and health care.
- Describe the major strengths and weaknesses of the health care and public health systems and their underlying causes.
- Propose how health care and population health measures can be better integrated.
- Identify and evaluate the major challenges facing the health system and identify alternative approaches to improving the system’s performance.
- Describe the pros and cons (and illustrate by example) the ways health care financing can be achieved through either government or private mechanism; examine the history of and elements of the Patient Protection and Affordable Care Act as an example of trying to fix the financing aspects of the US health care system.
- Discuss and describe the implementation process and challenges to implementation of the Patient Protection and Affordable Care Act.
- Explain how socioeconomic, political, behavioral, and biological factors can determine health and disease and how this knowledge can be used to assess population health and develop strategies for disease prevention and health promotion.
- Articulate the health status of the United States in comparison to other countries over the past several decades; articulate health services organization and financing in the United States in comparison to other countries.

COURSE FRAMEWORK

The U.S. health care and public health systems are complex, difficult to understand, and even more difficult to "reform." This is due in part due to the competing goals and values of different constituencies. The topics in this course fit within an overarching framework or model (displayed on page 4) that is helpful for understanding and analyzing the health care and public health systems, and for integrating the various elements of the system. As you review your readings and lecture notes, refer to this framework to help you integrate the topics covered in each module into a coherent system perspective. The elements of this framework are described below. Friday sessions allow for further discussion of the issues associated with the framework.

STRUCTURE:
Characteristics of the Population at Risk. A central goal of any health system is to provide services to those who need them. Achieving this goal requires an understanding of the determinants of health, the "relative" nature of need, the factors that affect the demand for health care, and patterns of utilization in relation to need.

Policy and the Characteristics of the Medical Care and Public Health Systems. This part of the course deals with the history of public health and medical care in the U.S.; the roles of federal, state, and local government and of private markets; the organization, financing, and provision of health services including health education, prevention and promotion. It also deals with the core functions of public health; the role of curative medicine; population-based and patient-based models/services; community involvement and current issues facing the health system. Although the majority of financing for health care in the U.S. comes from private
sources and most health care providers are non-governmental, government plays a major role in health care as a policy maker and regulator, in financing or providing care for certain segments of the population, and in protecting the public's health. Government has great influence over the structure of the health system and plays a major role in shaping its behavior and performance. Finally, the flow of funds to pay for health services greatly influences who receives care and how the system responds to those seeking care. Understanding the health care system means understanding who pays for health care, who benefits, and how providers are paid.

**PROCESS:**
*Delivery of Health Care and Public Health Services.* Many different types of health care practitioners and health care organizations are involved in providing services to diagnose, treat, and prevent illness at the individual and community level. The relationships among these actors are changing in ways that affect access, cost, quality and performance. Changes in the population, economic incentives, and advances in technology are driving changes in the roles, functioning, and relationships among health care players, both public and private.

**OUTCOMES:**
*Cost, Quality, and Outcomes of Health Services.* This part of the course examines the determinants of the cost of health services and of the nation’s aggregate expenditure on health. Also examined are how structure, technology, and processes of delivering care affect appropriateness, quality, and outcomes. Also discussed are approaches to cost containment and quality improvement. The linkage with population-based interventions will be revisited.

Students may find the following definitions helpful in understanding the difference between personal health services and population-based public health services:

**Personal Health Services**\(^1\) – Diagnosis and treatment of disease or provision of clinical preventive services to individuals or families in order to improve individual health status.

**Population-based Public Health Services**\(^2\) – Interventions aimed at disease prevention and health promotion that affect an entire population and extend beyond medical treatment by targeting underlying risks, such as tobacco, drug, and alcohol use; diet and sedentary lifestyles; and environmental factors.

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Framework for Classifying Topics and Issues in Health Services

- **Health Policy**
  - Federal
  - State
  - Local

- **Characteristics of Medical Care & Public Health Systems**
  - Availability
  - Organization
  - Financing

- **Characteristics of Population at Risk**
  - Predisposing
  - Enabling
  - Need

- **Delivery of Medical Care & Provision of Public Health Services**

- **Equity**

- **Efficiency**

- **Effectiveness**

- **Well-Being (Quality of Life)**

- **Structure**

- **Process**

- **Outcome (intermediate)**

- **Outcome (ultimate)**
<table>
<thead>
<tr>
<th>Class Session</th>
<th>Date</th>
<th>Presenter</th>
<th>Topic</th>
<th>Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Thursday, 9/26</td>
<td>Larry Kessler and Jack Thompson</td>
<td>Introduction and Overview of Health Services</td>
<td>B &amp; G 1, 17, Article(s)</td>
</tr>
<tr>
<td>2</td>
<td>Tuesday, 10/1</td>
<td>Jack Thompson</td>
<td>History of Health Care &amp; Public Health in the US</td>
<td>Article(s)</td>
</tr>
<tr>
<td>3</td>
<td>Thursday, 10/3</td>
<td>Jim Krieger</td>
<td>Determinants of Health</td>
<td>Article(s)</td>
</tr>
<tr>
<td>4</td>
<td>Tuesday, 10/8</td>
<td>Larry Kessler</td>
<td>Social Determinants of Health: Group Exercise</td>
<td>Article(s)</td>
</tr>
<tr>
<td>5</td>
<td>Thursday, 10/10</td>
<td>Michael Parchman</td>
<td>Primary Care &amp; Public Health</td>
<td>Article(s)</td>
</tr>
<tr>
<td>6</td>
<td>Tuesday, 10/15</td>
<td>Bill Dowling</td>
<td>Managed Care &amp; Consumer Driven Health Care</td>
<td>B &amp; G 4, Article(s)</td>
</tr>
<tr>
<td>7</td>
<td>Thursday, 10/17</td>
<td>Sallie Sanford</td>
<td>The ACA at Three</td>
<td>B &amp; G 15, Article(s)</td>
</tr>
<tr>
<td>8</td>
<td>Tuesday, 10/22</td>
<td>Doug Conrad</td>
<td>Medicare &amp; Medicaid, Medicaid Expansion</td>
<td>B &amp; G 2, Article(s)</td>
</tr>
<tr>
<td>9</td>
<td>Thursday, 10/24</td>
<td>Aaron Katz &amp; Panel</td>
<td>ACA &amp; Effects on Cost</td>
<td>Article(s)</td>
</tr>
<tr>
<td>10</td>
<td>Tuesday, 10/29</td>
<td>Patrick O'Carroll</td>
<td>Public Health Challenges in the Pacific Northwest</td>
<td>Article(s)</td>
</tr>
<tr>
<td>11</td>
<td>Thursday, 10/31</td>
<td>Jeff Harris &amp; Peggy Hannon</td>
<td>Community Based Prevention</td>
<td>B &amp; G 11, Article(s)</td>
</tr>
<tr>
<td>12</td>
<td>Tuesday, 11/5</td>
<td>Larry Kessler</td>
<td>Organization of Health Care Delivery</td>
<td>B &amp; G 5, 6, 16, Article(s)</td>
</tr>
<tr>
<td>13</td>
<td>Thursday, 11/7</td>
<td>Linda Ko and Joanne Silberner</td>
<td>Health Communication</td>
<td>Article(s)</td>
</tr>
<tr>
<td>14</td>
<td>Tuesday, 11/12</td>
<td>Ann Vander Stoep</td>
<td>Mental Health Systems</td>
<td>Article(s)</td>
</tr>
<tr>
<td>15</td>
<td>Thursday, 11/14</td>
<td>Larry Kessler</td>
<td>Access &amp; THE ACA</td>
<td>Article(s)</td>
</tr>
<tr>
<td>16</td>
<td>Tuesday, 11/19</td>
<td>Larry Kessler &amp; Panel</td>
<td>Costs and Spending in the US and Abroad</td>
<td>B &amp; G 8, 9, 14, Article(s)</td>
</tr>
<tr>
<td>17</td>
<td>Thursday, 11/21</td>
<td>Gunnar Almgren</td>
<td>Long-Term Care</td>
<td>B &amp; G 12, Article(s)</td>
</tr>
<tr>
<td>18</td>
<td>Tuesday, 11/26</td>
<td>Amy Hagopian</td>
<td>Health Care Workforce</td>
<td>B &amp; G 7, Article(s)</td>
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<td>THANKSGIVING</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Tuesday, 12/3</td>
<td>Jonathan Sugarman</td>
<td>Quality</td>
<td>B &amp; G 10, 13, Article(s)</td>
</tr>
<tr>
<td>20</td>
<td>Thursday, 12/5</td>
<td>Sean Sullivan and Larry Kessler</td>
<td>Pharmaceutical Policy in the U.S. and Deploying and Regulating Medical Technology</td>
<td>Article(s)</td>
</tr>
</tbody>
</table>
FRIDAY SESSION OUTLINE (Section A – HSERV Students - Only)

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic(s)</th>
<th>Presenter</th>
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</thead>
<tbody>
<tr>
<td>September 27</td>
<td>Overview of Friday Session; Presentation topics discussion</td>
<td>Larry Kessler, ScD</td>
</tr>
<tr>
<td>October 4</td>
<td>Health Policy</td>
<td>Aaron Katz, C.P.H.</td>
</tr>
<tr>
<td>October 11</td>
<td>PACT approach to care in the VA</td>
<td>Christian Helfrich, PHD, MPH</td>
</tr>
<tr>
<td>October 18 –</td>
<td>Student Presentations</td>
<td>Student Groups</td>
</tr>
<tr>
<td>December 6</td>
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</tbody>
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POTENTIAL FRIDAY TOPICS:

- Effects of Health Care Reform on Safety Net Providers
- Workforce Shortages
- Mid-level Providers
- Community Assessment
- Medical Home Model in Practice
- VA System
- Comparative Effectiveness Research
- Health Reform and Public Health
- Variability in Health Care
- Health Insurance Exchanges
- Accountable Care Organizations
- Homelessness
- Constituency Development in Public Health
- Rural Health/Critical Access Hospitals
- Indian Health Services
- Family Planning/Women’s Health
- Addiction/Mental Health
- International Systems
- Built Environment & Public Health
- Nutrition & Obesity in the US
GUEST LECTURERS:

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patrick.ocarroll@hhs.gov
COURSE ORGANIZATION

CLASS SESSIONS:
Tuesdays and Thursdays, 8:30 - 9:50 am, Room HST- 439
On Tuesdays and Thursdays, HSERV 511 will consist of a lecture followed by a question and answer session. Required readings for these sessions are from the required text and additional articles that will be available on the course website. Lecture slides will be posted on the course website. The nature of the course and the large number of students naturally limit class participation. But, to facilitate discussion, lecturers will be asked to leave time at the end of their presentations for questions.

Fridays, 10:30 am – 11:50 am (Required for MPH Health Services), Room HST - 435
The Friday class is required for MPH Health Services students, and optional with permission of the instructors for other students. Friday sessions will consist of two student teams each giving a 20-minute presentation followed by discussion. An additional one-hour of course credit is given for the Friday class. The purpose of the Friday class is to provide additional information about the health system and to enable students to explore in greater depth the topics covered in the Tuesday-Thursdays sessions. The Friday sessions also give students an opportunity to work in groups, meet with practitioners, strengthen presentation skills, present different points of view, and defend the positions they take on assigned issues in an interactive environment.

COURSE WEBSITE:
Announcements and course materials such as the syllabus and lecture slides will be available on the course website, located at canvas.uw.edu. Assigned readings, including journal articles, will also be accessible on the website. You can log in to the site using your UW NetID and password.

READINGS:
The required textbook is:


The text is available at the South Campus branch of the University Bookstore.

For some of the sessions, additional readings are required. All of these readings, including supplemental readings that are encouraged, are available through the course website (instructions above).

The following book is highly recommended reading for anyone interested in the recent health care reform:


COURSE REQUIREMENTS

FOR ALL STUDENTS:
1. Mastering of course content through the readings and lectures. Attendance is required. Not attending may affect your course grade.
2. Completion of a written question about the reading, to be handed in at the beginning of each class session. Questions will be randomly graded four times throughout the quarter; Dr. Kessler will assess for purposes of attendance as well as completion of required readings.
3. Participation in two group exercises. Please note that these two class sessions will take place in the South Campus Center.
4. A take-home mid-term. The mid-term will be posted on the course website after class on Tuesday, October 29 and will be due at the beginning of class on Tuesday, November 5. The exam should be turned into the online dropbox on the class website. The exam will include two essay questions.
5. An in-class final. The final will be given on Tuesday, December 10 from 10:30 AM – 12:20 PM. The exam will include a combination of question types – short answer, multiple choice, etc.
FOR STUDENTS IN FRIDAY SESSIONS (4 CREDIT OPTION):

Student groups will present assigned research topics. Students will be asked to indicate their top three topic preferences via an online form the first week of class and will be assigned into groups of 2-3 students. Alternate topics may be proposed via an email sent to Dr. Kessler and Katharine. Email should include the topic, a short description, and potential group members. Starting October 18th, the Friday class will consist of two groups each giving a 20-minute presentation followed by discussion. All group members will receive the same grade. Grading will be based on both content and effectiveness of presentation. The greatest weight will be given to clarity of the position taken and how well it is supported. Every member of the group will receive the same grade. If there are any concerns about the working dynamic of your group, please see Katharine or Dr. Kessler as soon as possible. All students enrolled in section A (4 credit option) are expected to attend and actively participate in every Friday session.

The following points provide guidance for the presentations:

- Through literature research, interviews, and group discussion, prepare a 20-minute total presentation that takes a position on the assigned question(s) and justifies and defends that position.

- A Community Experts List is available on the course website. This list will help students identify practitioners or other experts that can be interviewed as part of your research.

- Be prepared to facilitate a discussion of the material presented.

- Each group member should give part of the presentation.

- Use PowerPoint slides or overheads. Bring three copies of your slides to class on the date of your presentation to turn in to the faculty and Katharine.

- On the day of your presentation, provide the instructors with a bibliography of the main resources used and people interviewed. Extensive library research is not expected, since the focus should be on interviews with community practitioners.

- Demonstrate a clear, logical and well-organized relationship between the topics in your presentation. Your presentation should be specific and focused on answering the assigned question(s).

- Prioritize the most important information. The presentations are not meant to be comprehensive. Rather, they should focus on the most critical information.

- Students should practice to ensure their presentations can be given within the total 20-minute time limit per group so that time is available at the end for discussion. Time limits will be strictly enforced.

GRADING:
A student's grade in the course is based on the total number of points earned on questions about the readings, group exercises, the mid-term exam, and the final exam. The course is not graded on a curve. For students taking the Friday class, the grades from the presentation will be factored into the overall course grade.

<table>
<thead>
<tr>
<th></th>
<th>Tuesday-Thursday students</th>
<th>Tuesday-Thursday-Friday students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reading questions</td>
<td>10 points</td>
<td>10 points</td>
</tr>
<tr>
<td>Group exercises</td>
<td>10 points</td>
<td>10 points</td>
</tr>
<tr>
<td>Mid-term exam</td>
<td>40 points</td>
<td>40 points</td>
</tr>
<tr>
<td>Final exam</td>
<td>40 points</td>
<td>40 points</td>
</tr>
<tr>
<td>Friday presentation</td>
<td>N/A</td>
<td>20 points</td>
</tr>
<tr>
<td>Total</td>
<td>100 points</td>
<td>120 points</td>
</tr>
</tbody>
</table>

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Grades will be posted on the class Canvas page as they become available. **Students in the Friday session should note that the presentation grades are not factored into the total grade in the Canvas Gradebook, so the total grade on the site is not completely reflective of actual class progress.**

**ATTENDANCE:**
Since the material presented in this course represents knowledge expected of all MPH graduates, attendance for this course is required. If you must miss a class, you are expected to notify Katharine to develop an alternate plan. Your attendance will be assessed by written questions about the reading that will be handed in at the beginning of the class period and randomly graded five times throughout the quarter.

The course instructor understands that additional responsibilities may require an occasional absence. If you must miss class, it is your responsibility to notify Katharine **before class** to receive an alternate assignment.

**DEPARTMENTAL GUIDELINES FOR EVALUATION:**
The following descriptive statements guide the assignment of grades to graduate students taking courses offered by the Department of Health Services. The Department has endorsed the guidelines.

<table>
<thead>
<tr>
<th>Numerical Grade</th>
<th>Interpretative Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.0</td>
<td>Excellent and exceptional work for a graduate student. Work at this level is unusually thorough, well reasoned, methodologically sophisticated, and well written. Work is of good professional quality, shows an incisive understanding of health services-related issues and demonstrates clear recognition of appropriate analytical approaches to address health problems and questions.</td>
</tr>
<tr>
<td>3.7</td>
<td>Strong work for a graduate student. Work at this level shows some signs of creativity, is thorough and well reasoned, indicates strong understanding of appropriate methodological or analytical approaches, and demonstrates clear recognition and good understanding of salient health services-related issues and problems.</td>
</tr>
<tr>
<td>3.5</td>
<td>Competent and sound work for a graduate student; well reasoned and thorough, methodologically sound, but not especially creative or insightful or technically sophisticated; shows adequate understanding of health services-related issues and problems, although that understanding may be somewhat incomplete. This is the graduate student grade that indicates neither unusual strength nor exceptional weakness.</td>
</tr>
<tr>
<td>3.3</td>
<td>Adequate work for a graduate student even though some weaknesses are evident. Moderately thorough and well reasoned, but some indication that understanding of the important issues is less than complete and perhaps inadequate in other respects as well. Methodological or analytical approaches used are generally adequate but have one or more weaknesses or limitations.</td>
</tr>
<tr>
<td>3.0</td>
<td>Borderline work for a graduate student; barely meets the minimal expectations for a graduate student in the course; understanding of salient issues is incomplete, methodological or analytical work performed in the course is minimally adequate. Overall performance, if consistent in graduate courses, would barely suffice to sustain graduate status in &quot;good standing.&quot;</td>
</tr>
<tr>
<td>2.7</td>
<td>Deficient work for a graduate student; does not meet the minimal expectations for a graduate student in the course. Work is inadequately developed or flawed by numerous errors and misunderstanding of important issues. Methodological or analytical work performed is weak and fails to demonstrate knowledge or technical competence expected of graduate students.</td>
</tr>
</tbody>
</table>
RUBRIC FOR FRIDAY PRESENTATIONS:

<table>
<thead>
<tr>
<th></th>
<th>Excellent (4.0)</th>
<th>Good (3.8)</th>
<th>Fair (3.6)</th>
<th>Poor (&lt;3.6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage of Topic</td>
<td>Provides comprehensive definition of the larger public health problem and specific focus for presentation</td>
<td>Comprehensive description of specific focus for presentation</td>
<td>Description of specific focus is inaccurate or incomplete</td>
<td>Major gaps in coverage of topic</td>
</tr>
<tr>
<td>Accuracy of Information</td>
<td>Provides evidence of extensive and valid research with multiple and varied sources</td>
<td>Presents evidence of valid research with multiple sources</td>
<td>Presents evidence of research</td>
<td>Presents little or no evidence of valid research</td>
</tr>
<tr>
<td>Organization of Presentation</td>
<td>Group presents all information in logical, interesting sequence</td>
<td>Group presents most information in logical, interesting sequence</td>
<td>Group jumps around from topic to topic</td>
<td>Presentation is choppy and disjointed; no apparent order of presentation</td>
</tr>
<tr>
<td>Clarity and Usefulness of Slides</td>
<td>Slides are used to reinforce presentation; details are minimized and main points stand out</td>
<td>Appropriate slides are prepared</td>
<td>Slides are poorly prepared; too much information is included; unimportant material is highlighted</td>
<td>Uses slides that detract from the presentation; font is too small to be seen</td>
</tr>
<tr>
<td>Team Participation and Style</td>
<td>Effectively engages audience and includes smooth, clever transitions</td>
<td>Engages audience but stronger transitions from topic to topic are needed</td>
<td>Includes some transitions but there is difficulty following the presentation</td>
<td>Uses ineffective transitions that rarely connect points</td>
</tr>
<tr>
<td>Analysis of Data</td>
<td>Combines, evaluates, and synthesizes existing ideas or data to form new insights</td>
<td>Combines existing ideas or data to form new insights</td>
<td>Combines existing ideas or data</td>
<td>Shows little evidence of combination of ideas or data</td>
</tr>
<tr>
<td>Conclusions Clear and Appropriate</td>
<td>Accurate conclusions showing thoughtful, strong evaluation of the evidence presented</td>
<td>Ends with a summary of the main points showing some evaluation of the evidence presented</td>
<td>Ends with a summary or conclusion, little evidence of evaluating content based on evidence</td>
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Length of Presentation: __________ minutes

Grader’s comments:
SESSION #1: Thursday, September 26, 2013

Introduction/Conceptual Framework/Overview of Health Services
Larry Kessler, ScD
Jack Thompson, MSW

Objectives:

1. Describe the goals, content, and organization of HSERV 511.
2. Delineate the course requirements and mechanics.
3. Contrast population-focused and individual-focused approaches to health, prevention and treatment, and the respective roles of the public health and medical care system.
4. Define the field of Health Services and describe the major challenges facing the United States health system.
5. Describe the structure and financing of public health and health care at the local, state, and federal levels.
6. Describe the U.S. health care system in terms of selected measures of cost of care, access to care, and quality of care.

Required Readings:

Bodenheimer and Grumbach: Chapters 1, 17


Supplemental Readings:


SESSION #2: Tuesday, October 1, 2013

A Very Brief History of Health Care and Public Health in the United States
Jack Thompson, MSW

Objectives:

1. Describe the history of public health and health services in the United States.
2. Identify and define the three theories influencing the development of public health.
3. Understand the development of health policy in the United States, and the competing political, economic, and social goals of health policy objectives.
4. Discuss how the needs of providers, consumers, insurers, and regulators have shaped the development of the health care sector.
5. Recognize the actual and potential roles of government in health care and how they have changed the delivery of health and social services over the past several decades.

Required Reading:

Session #3: Thursday, October 3, 2013

Determinants of Health
Jim Krieger, MD, MPH

Objectives:

1. Describe factors in the social and physical environments that influence health behaviors and health status.

2. Understand the role of public health and other sectors in shaping the environmental determinants of health.

3. Describe policies, systems changes and programs that can change environmental determinants of health so as to promote community well-being.

4. Discuss the role of cross-sectoral collaborations in addressing environmental determinants of health.

Required Readings:


Supplemental Readings:


Friday Session #2: Friday, October 4th, 2013

Policy Development & Health Care Reform
Aaron Katz, C.P.H.

Objectives:

1. Discuss and define health policy and discuss how public policies can be used as tools to influence the health care sector.

2. Discuss the role of stakeholders in the development of public policy.

3. Identify and define tools of public policy.

4. Analyze the role of stakeholders and policy tools in the Patient Protection and Affordable Care Act.

Readings:


SESSION #4: Tuesday, October 8, 2013

Social Determinants of Health
Class Exercise, South Campus Center
Larry Kessler, ScD

Objectives:

Required Readings:
SESSION #5: Thursday, October 10, 2013

Primary Care and Public Health
Michael Parchman, MD, MPH

Objectives:

1. What are the key defining characteristics of primary care?
2. What is the role of primary care in prevention?
3. What is the role of primary care providers in the treatment of patients with complex chronic illness? What is the relationship between primary care providers and specialists, in these cases and otherwise?
4. What is the role of primary care providers in new models of medical homes and accountable care organizations?
5. Is there a future in primary care, and who will be entering that workforce?

Required Readings:


Objectives:

After the class, students will be able to:

1. Describe the basic rationale and structure for why the VA has a medical system for care of Veterans.
2. Explain the fundamental changes being implemented as part of the VA's medical home
3. Define the big 3 questions of the medical home evaluation
4. Describe initial key findings

Readings:


SESSION #6: Tuesday, October 15, 2013

Managed Care & Consumer Driven Health Care
Bill Dowling, MBA, PhD

Objectives:

1. Define “managed care” and describe its major features, including selective contracting with providers, financial incentives, utilization controls, care management mechanisms, and provider responsibility for the total care of a defined population.

2. Discuss the evidence regarding the performance of managed care.

3. Discuss the forces that have led to the decline of highly structured managed care health plans. But, are ACOs the emerging form of HMO?

4. Define "consumer-driven health care" and explain how consumer-driven health plans are likely to affect the demand for/utilization of health services, quality, and consumer satisfaction.

5. Describe how the incentives inherent in consumer-driven health plans are supposed to work.

6. Describe how such plans are likely to affect the demand for different types of healthcare services.

Required Readings:

Bodenheimer and Grumbach: Chapter 4


Supplemental Readings:


SEASON #7: Thursday, October 17, 2013

The ACA at Three
Sallie Thieme Sanford, J.D.

Objectives:

1. Describe key policy goals of the Affordable Care Act.
2. Explain the potential impacts of the Supreme Court’s decision on these goals.
3. Discuss the role of the states in ACA implementation.

Required Activities and Readings Prior to Class:

Bodenheimer and Grumbach: Chapter 15, with particular attention to pages 190 – 199.


Supplemental Activities and Readings:

Expand the links by year on the Kaiser Health Reform Implementation Timeline and read the details of several ACA provisions, including particularly those for 2014: http://kff.org/interactive/implementation-timeline/


SESSION #8: Tuesday, October 22, 2013

Medicare & Medicaid, Medicaid Expansion
Doug Conrad

Objectives:

1. Describe the history of Medicare and Medicaid.
2. Discuss eligibility, benefits, mechanisms for finance, and key administrative features of
3. Show how these programs integrate with private health care.
4. Outline the controversies and challenges that face Medicare and Medicaid, especially in light
5. Discuss the cost trends and causes for the cost trends of government programs.
6. Discuss how government program eligibility criteria align with public health goals and

Required Reading:

Bodenheimer and Grumbach: Chapter 2.

MedPAC Report to Congress. Executive Summary:pp.xi – xvii, June 2013


Supplemental Reading:

SESSION #9: Thursday, October 24, 2013

The ACA and Its Effects on Cost
Aaron Katz, C.P.H., moderator
Panelists

Objectives:

1. Describe key provisions of the ACA that are intended to reduce health care costs or improve system efficiency.

2. Describe what local organizations are doing to implement key provisions of the ACA and their motivations for doing so.

3. Discuss the strength of the evidence that supports the contention that these ACA provisions and local implementation activities will reduce health care costs or improve system efficiency.

Required Reading:

Bodenheimer and Grumbach: Chapter 15.


Spend some time on these websites to get a sense of what’s happening right now for consumers as they search for information on the ACA changes that may affect them.

- http://wahealthplanfinder.org/
- http://kff.org/health-reform/

Supplemental Readings:
SESSION #10: Tuesday, October 29, 2013

Public Health Challenges in the Pacific Northwest
Patrick O’Carroll, MD, MPH

Objectives:

1. Explain the role of the HHS regional offices and the regional health administrator with regard to population health and public health practice in the region.

2. Describe the nature of at least three major public health challenges that we face here in the Pacific Northwest.

3. Discuss the positive effects as well as the inherent limitations of increasing access to medical care as a strategy for improving overall population health.

Required Reading:


SESSION #11: Thursday, October 31, 2013

Community-based Prevention
Jeff Harris, MD, MPH, MBA
Peggy Hannon, PhD, MPH

Objectives:

1. Discuss high-priority prevention and health-promotion interventions.
2. Describe sources of evidence-based information on community-based prevention.
3. Discuss examples of community-based prevention research and its translation into practice.
4. Discuss major barriers faced by individuals trying to practice prevention of chronic diseases and discuss steps that employers can take to help overcome these barriers.
5. Discuss challenges to conducting prevention research in community settings.
6. Identify the workplace as a promising site for health promotion among adults and discuss reasons why.

Required Readings:

Bodenheimer and Grumbach: Chapter 11.


Supplemental Readings:


Maciosek MV, Coffield AB, Flottemesch TJ, Edwards NM, Solberg LI. Greater use of preventive services in U.S. Health care could save lives at little or no cost. HealthAff (Millwood). 2010 Sep;29(9):1656-60.


1. Describe the determinants of the availability (supply, mix, and distribution) of health care facilities in the U.S. in comparison to countries with more centrally-planned health systems.

2. Briefly overview the changing role of hospitals in the health system, and the forces leading to the shift away from inpatient care.

3. Describe contemporary trends in the organization of medical practice, including the shifts from solo to group practice, from single-specialty to multi-specialty and primary care groups, and from independent to organization-based practice.

4. Discuss the types of integration occurring among hospitals and physicians, the forces leading to integration among providers, the economic and strategic benefits of integration, the elements and organizational structures of integrated systems, and the promise and performance of such systems.

5. Describe how the organization of care addressed is addressed in the health care reform legislation.

6. Discuss the use of P4P, "bundled" payments, ACO sharing of cost savings, and other payment incentives to "drive" better coordination of care across providers.

7. Describe the concept and current status of the “medical home” and of the “accountable care organization.”

**Required Reading:**

Bodenheimer and Grumbach: Chapters 5, 6


**Supplemental Reading:**


SESSION #13: Tuesday, November 6, 2012

Health Communication
Linda Ko, PhD
Joanne Silberner, MS

Objectives:

1. Understand the role of health communication in disease prevention and control

2. Describe the steps involved in the development of a health communication message for disease prevention (will show an example)

3. Get the attention of the media

4. Feel comfortable (or at least, less uncomfortable) in an interview

Required Readings:


Watch this video about a Jacksonville, FL TB outbreak in July 2012. Available at [http://www.youtube.com/watch?v=zBq6raNkaCo&feature=player_detailpage](http://www.youtube.com/watch?v=zBq6raNkaCo&feature=player_detailpage)

SESSION #14: Tuesday, November 12, 2013

Mental Health System
Ann Vander Stoep, PhD, MS

Objectives:

1. Describe the types, frequency of occurrence, distribution and causes of mental health problems in adult and child populations in the U.S.

2. Demonstrate familiarity with how mental health services are organized to address the needs of adults and children with mental illness in the U.S.

3. Characterize the distribution and adequacy of available mental health services for adults and children in the U.S.

Required Reading:

Read the following articles:


- Power AK, “Transforming the nation’s health: next steps in mental health promotion,” p. 2343
- Parry M, “From a patient’s perspective: Clifford Whittingham Beers’ work to reform mental health services,” p. 2356-2357.
- Fledderus M et al, “Mental health promotion as a new goal in public mental health care: a randomized controlled trial of an intervention enhancing psychological flexibility,” p. 2372-78.


SESSION #15: Thursday, November 14, 2013
Larry Kessler, ScD
Access & The ACA

Objectives:

1. Identify the generic needs of individuals with chronic conditions, and the features of care delivery systems that best meet those needs.

2. Identify the differences between the population-based approach to care management as compared to other utilization management approaches (i.e. utilization reviews).

3. Define the steps involved in population-based care of a clinical sub-population, and distinguish between care strategies based in primary medical care and those that bypass primary care.

4. Discuss efforts to incorporate population-based care models in health care reform initiatives.

Required Reading:


Supplemental Readings:


SESSION #16: Thursday, November 15, 2012

Costs and Spending in the US and Abroad
Larry Kessler, ScD & Panelists

Required Readings:

Bodenheimer and Grumbach: Chapter 8 and 9


Supplemental Reading:
SESSION #17: Thursday, November 21, 2013

Long-Term Care
Gunnar Almgren

Objectives:

1. Define long-term care (LTC) and describe the range of typical LTC settings, services, and financing/payment options.

2. Distinguish between the populations who receive LTC and those populations currently not well-served by LTC systems in the United States.

3. Compare and contrast the kinds of individuals who provide LTC versus acute care.

4. Identify at least three state and/or national policies that specifically address quality of LTC for older adults.

5. Discuss current trends in aging that are prompting review/reform in LTC settings, services, financing, workforce, and policies.

Required Reading:

Bodenheimer and Grumbach: Chapter 12.


Supplemental Reading:


Miller EA. The Affordable Care Act and long-term care: Comprehensive reform or just tinkering around the edges? J Aging Soc Policy. 2012 April;24:101-117.

SESSION #18: Tuesday, November 26, 2013

Health Care Workforce
Amy Hagopian

Objectives:

1) Reflect on how health workforce development is one of the public health "10 essentials." Describe how countries make workforce policy, and how the important characteristics of a nation's health workforce are tracked.

2) Identify the factors affecting health workforce migration from poor countries to rich ones, including theoretical elements. Pinpoint the efforts of workforce policy advocates to stem the migration in the context of the international human right to migrate.

3) Describe where in U.S. policy it is decided that one in four American physicians will be trained abroad, two-thirds of them in a low or lower-middle income country. Identify how these policy domestic goals compete with U.S. global health policy.

4) Critique the elements of the U.S. health care system that create the market conditions for a workforce composition that doesn't serve us particularly well, and that encourages inappropriate migration from poor countries.

Required Reading:

Bodenheimer and Grumbach: Chapter 7


Mullan F. Some thoughts on the white-follows-green law. Health Aff (Millwood) 2002;21:158-9


Supplemental Readings:

Hagopian A, Mohanty MK, Das A, House P. “Applying WHO’s ‘workforce indicators of staffing need’ (WISN) method to calculate the health worker requirements for India’s maternal and child health service guarantees in Orissa State” Health Policy Plan. 2012 Jan;27(1):11-8


nursing students in Uganda: measures of the brain drain in the next generation of health professionals. Hum Resour Health, 6:5.
SESSION #19: Tuesday, December 3, 2013

Quality
Jonathan Sugarman, MD, MPH

Objectives:

1. Define health care quality.

2. Provide a brief overview of opportunities for improvement in the quality of American healthcare.

3. Identify approaches and strategies that are likely to be most influential in improving quality.

Required Reading:

Bodenheimer and Grumbach: Chapter 10.

Supplemental Readings:


Optional Activity:

Visit the website listed below. How effective do you believe websites like this will be for plans, consumers, and providers?

www.wacommunitycheckup.org
SESSION #20: Thursday, December 5, 2013

Pharmaceutical Policy in the United States and Deploying and Regulating Medical Technology
Sean D. Sullivan, PhD
Larry Kessler, ScD

Objectives:

1. Describe the trends and predictors of expenditures on pharmaceuticals.
2. Describe methods used to control the cost of pharmaceuticals and how pharmaceuticals are priced and marketed.
3. Discuss the future of pharmaceuticals.
4. Discuss the challenges in managing pharmaceutical benefits and potential approaches to balancing cost, access, and quality.
5. Discuss the trends and forces affecting the development and deployment of medical technology.
6. Discuss the regulatory structure for medical technologies with a focus on devices and procedures.
7. Identify gaps in the US regulatory system related to medical technologies.
8. Describe the concept and current interest in comparative effectiveness research.

Required Readings:


Supplemental Readings:


