Updated 12.20.12 The Wharton School - University of Pennsylvania

Health Care Management 203: Clinical Issues in Health Care Management—Doctors, Patients, and Managers in Modern Society

Spring, 2013

Tuesdays and Thursdays, 10:30-11:50 Jon M. Huntsman Hall G60

Objectives:

1. To examine the changing provider-patient-manager relationship

2. To explore how contemporary forces in health care influence its organization, delivery, and financing.

Prerequisites: None.

This course presents an overview of how social and economic forces are changing how patients, providers and health care managers interact. Although this course is likely to appeal to students who plan careers as health care providers or managers, it is intended also for students with a broad range of interests, as all of us will at some point be patients, and approximately one sixth of the US economy is devoted to health care. This course complements other Health Care Management courses that take a societal perspective by focusing on the individuals—patients, providers, and managers—who participate in the rapidly changing health care enterprise.

Students who have taken courses in Health Care Systems, Health Law, and/or Health Economics will be able to extend their understanding of health care by examining the interface among patients, providers, and management. However, the course is also appropriate for students from across the university who have not previously studied these issues and who want to know more about the people who control so much of the US economy.

The course will mix lecture and discussion and rely heavily on visiting speakers.

- First, we will examine the current health care marketplace, including changes in how health care is financed, managed, and delivered, and its possible future. These issues will be explored from multiple perspectives, including physicians, non-physician providers, and health care managers on provider and payer sides.
- Second, we will explore the evaluation of medical technology, the relationships between the costs of technology and the benefits it provides, and the uses and limitations of economic analysis to answer vexing questions of ethics, resource allocation, and rationing.
- Third, we will explore some critical issues in the organization and management of health care, including legal issues, marketing and the measurement and improvement of medical quality.
- Fourth, we will examine how patients, providers, and managers are influenced by a variety of social phenomena, including the politics of health care, disease definition, contemporary clinical challenges such as contagion or genetics, privacy, social media, and medical entrepreneurialism.

• We will conclude with some speculations about the future, and the potential impact of these forces on the stakeholders in the health care enterprise.

Instructor: David A. Asch, MD, MBA. Office hours by appointment: 215.746.2705 asch@wharton.upenn.edu. Blockley Hall 1223

Teaching Assistants: Available by e-mail, telephone, or in person as scheduled. Tommy Fu <u>fuy@wharton.upenn.edu</u> 607-341-0522 Office Hours TBD Jane Herzeca <u>jherzeca@wharton.upenn.edu</u> 917-929-5989 Office Hours TBD

Grading and Requirements

The final grade will depend on performance on the midterm exercise (35%), final exercise (35%), class participation (5%), and a brief paper/presentation (25%).

<u>Midterm and Final Essay Exercises (35% each)</u>. These are not traditional examinations, but instead are take-home short essays based on the concepts of the material in each half of the course. The final will not be cumulative—although some basic concepts of the first half of the course will probably be relevant. A session of the course will be devoted to discussing responses to the midterm and final short essay exercises.

<u>Class Participation (5%)</u>. Class participation adds greatly to the quality of the course. **Students should bring name tents to class** and should plan on being active participants.

<u>Paper/Presentation (25%)</u>. By the beginning of the second half of the course, students should align themselves into groups of no more than 4 to produce a short (e.g., 10 minute) presentation or a brief (e.g., less than 7 double-spaced page) paper on a topic to be arranged in advance with the instructor or teaching assistants. The goal of these papers/presentations is to move from the material presented in the course and to speculate on some *future* aspect of health care from a stakeholder perspective. For example, a group may want to speculate on changing stakeholder dynamics in an age of e-commerce. Because this assignment is forward looking, papers and presentations need not be heavily referenced, but should communicate a group's thoughtfulness about a topic and should be designed to educate the class. The last two sessions of the course are devoted to these presentations. Only about 8-9 presentations can be scheduled, so given course size, about half of the groups will do papers and half presentations. Usually, it works out so that most groups get to use the format they prefer. Topics and groups should be approved by Wednesday, March 21st

Materials and Resources

<u>Text</u>. Thomas S. Bodenheimer and Kevin Grumbach. *Understanding Health Policy. A Clinical Approach.* Sixth Edition. 2012. Appleton and Lange. (available at the bookstore or amazon.com).

<u>Other readings</u>. Many of the readings assigned in this course represent important material that will **not** be covered in lectures and discussions (but might show up on the midterm and final exercises). For some lectures, what looks like a considerable amount of reading is assigned. Don't be alarmed. I have marked critical readings with an asterisk (*). Other readings should be skimmed, and are included for additional interest. In general, articles will be posted at XXXX.

Quality Circle

Approximately 4-6 students (preferably some each from SAS, Wharton, Nursing, SEAS) should volunteer to participate in a quality circle to meet with the instructor and TA approximately twice to suggest ways of improving the course.

Guest Lecturers

- Michael Cirigliano, MD Associate Professor of Medicine
- Robert Aronowitz, MD Professor of History and Sociology of Science
- Michael Dandorph, Senior Vice President, UPHS
- David Grande, MD, MPA Assistant Professor of Medicine
- Terri Lipman, PhD Professor of Nursing
- Peter Groeneveld, MD, MS Associate Professor of Medicine
- Raina Merchant, MD, MSHP Assistant Professor of Emergency Medicine
- Richard Murray, MD Merck and Company
- Suzanne Sawyer Chief Marketing Officer, UPHS
- Michael Breslow, MD Executive Vice President, R&D, VISICU
- Zachary Meisel, MD Assistant Professor of Emergency Medicine
- Joshua P. Metlay, MD, PhD Professor of Medicine and Epidemiology

Schedule of Lectures, Readings (Readings with an asterisk (*) are critical. Others can be skimmed for interest)

10-Jan-2013 Asch Introduction

- *American College of Physicians. Achieving a high performance health system with universal access: What the United States can learn from other countries. Ann Intern Med. 2008;145:55-75. [A good overview of a large number of health care system issues and possible policy responses.]
- *Wilson D. Pfizer gives details on payments to doctors. The New York Times. March 31, 2010
- *Weber T, Orenstein C. Med schools flunk at keeping faculty off pharma speaking circuit. Probulica. December 19, 2010
- *Lieber R. Incentivize your way to good health in 2011. The New York Times. December 31, 2011
- *Pollack A. Coupons for payments but higher bills for insurers. The New York Times. January 1, 2011
- *Bach PB, Saltz LB, Wittes RE. In cancer care, cost matters. The New York Times. October 14, 2012

15-Jan-2013 Asch The Health Care Marketplace

- *Eisenberg J. Doctors' Decisions and the Cost of Medical Care Health Administration Press Perspectives "Variation in Medical Decision Making" (Chapter 1)
- *Eisenberg J. "The Physician as Guarantor of Social Good" (Chapter 4)
- *Eisenberg J. "Changing Physicians' Practice Patterns: Why Should We Care?" (Chapter 9)
- *Gawande A. "The cost conundrum," The New Yorker. June 1, 2009
- *Reinhardt UE. "The fork in the road for health care." The New York Times. May 25, 2012

17-Jan-2013AschPaying for Health Care: Making Sense of the Alphabet Soup22-Jan-2013Asch

22-Jan-2013 Asch

- *Bodenheimer & Grumbach (B&G) Chapters 1, 2, 4, 9, 16
- *Bloche, MG. Consumer-Directed Health Care. N Engl J Med 2006;355:1756-9

24-Jan-2013 Dandorph Health System Contracting

- *Markel H. Multiple missions put teaching hospitals at risk. The New York Times. February 3, 2004
- *Reinhardt E. How do hospitals get paid? A primer. The New York Times. January 23, 2009

29-Jan-2013 Lipman Nurses

- *Bodenheimer & Grumbach (B&G) Pages 77-80
- *Aiken, L. H. (2003). Workforce policy perspectives on advance practice nursing. In M. Mezey, D. O. McGivern, & E. M. Sullivan-Marx (eds.) Nurse Practitioners. New York: Springer

31 Jan-2013 Cirigliano Physicians and Patients

- *Horwitz L. A shortcut to wasted time. NY Times. November 22, 2012
- *Zuger A. Dissatisfaction with medical practice. N Engl J Med. 2004:350:69-75
- *Jauhar S. Eyes bloodshot, doctors vent their discontent. The New York Times. June 17, 2008
- Gawande A. Whose Body is it, Anyway? The New Yorker October 4, 1999: 84-91. [Not required, but interesting reading.]
- Trillin AS. Betting Your Life. The New Yorker. January 29, 2001: 38-41. [Not required, but interesting reading.]

05-Feb-2103 TA Team Physician Workforce

- *Bodenheimer T, Berenson RA, Rudolph P. The primary care-specialty income gap—why it matters. Ann Intern Med. 2007;146:301-6
- *Gawande A. Piecework. The New Yorker. April 4, 2005
- *Bodenheimer & Grumbach (B&G) Chapter 7
- Weeks W, Wallace A, et. al. A Comparison of the Educational Costs and Incomes of Physicians and Other Professionals. N Engl J Med 1994; 330: 1280-86

07 February 2013 Grande Health Reform

- *Bodenheimer & Grumbach (B&G) Chapter 15
- *"Health Reform Meets Main Street" video from the Kaiser Family Foundation narrated by Cokie Roberts. Watch the video at: <u>http://healthreform.kff.org/the-animation.aspx</u>
- *Cunningham P. Center for Studying Health System Change. Research Brief No. 18: Who are the uninsured eligible for premium subsidies in the health insurance exchanges? December 2010. Available at: <u>http://www.hschange.com/CONTENT/1170/</u>
- *Kocher R, Sahni N. Physicians versus hospitals as leaders of Accountable Care Organizations. NEJM; 363:2579-2582
- *Burns LR, Pauly MV. Accountable Care Organizations: Back to the Future? LDI Issue Brief. November, December 2012
- *Kaiser Family Foundation. Summary of new health reform law. Publication no. 8061. Available at: <u>http://kff.org/healthreform/upload/8061.pdf</u>

12-Feb-2013 Asch Resident Physicians

- *Gawande A. The Learning Curve. <u>The New Yorker</u> January 28, 2002; 52-61
- *Steinbrook R. The Debate Over Residents' Work Hours. <u>N Engl J Med.</u> 2002; 347:1296-1302
- *Volpp KG, Silber JH. A wake up call: quality of care after resident duty hour reform. LDI Issue Brief. Sept/Oct 2007
- *Asch DA, Parker RM. The Libby Zion case: One step forward or two steps backward? <u>N Engl J</u> <u>Med</u>. 1988; 318:771-5
- Friedman RA. Accepting the Risks in Creating Confident Doctors. <u>The New York</u> Times March 17, 2009

14-Feb-2013 Groeneveld Diffusion and Adoption of Technology

- *Kolata G. Lung cancer test is much in demand, but benefit is murky. The New York Times. June 21, 2000
- *Pollack. Medicare blow to virtual colonoscopies. The New York Times. February 13, 2009
- *Groeneveld, PW. Technology and the rising cost of health care. Harvard Health Policy Review. 2010; 11(1).

19-Feb-2013 Asch Technology Assessment I: Principles

- *Eisenberg J. Clinical economics: a guide to the economic analysis of clinical practices. JAMA 1989; 262: 2879-86
- *Bodenheimer & Grumbach (B&G) Chapter 8
- *Groopman J. A Knife in the Back: Is Surgery the Best Approach to Chronic Back Pain? The New Yorker. April 8, 2002; 66-73

*Case: <u>Bedrock</u>: Read and prepare your thoughts for a discussion of this case in class 2/21/2013

21-Feb-2013 Asch Technology Assessment II: Limitations

- *Bodenheimer & Grumbach (B&G) Chapter 13
- *Eddy D. The Individual vs. Society. JAMA 1991; 265: 1446-50
- *Eddy D. Cost-effectiveness analysis: A conversation with my father. JAMA 1992; 267: 1669-75

*Case: <u>Bedrock</u>: Read and prepare your thoughts for a discussion of this case in class 2/21/2013

Midterm Short Essay Exercise Distributed in Class for Completion at "Home"

26-Feb-2013 Asch

Individuals vs. Populations

- *Asch D, Hershey J. Why Some Health Policies Don't Make Sense at the Bedside. Annals of Internal Medicine 1995; 122: 846-50
- Ubel P, DeKay M, Baron J, Asch D. Cost-Effectiveness Analysis in a Setting of Budget Constraints. N Engl J Med 1996; 334: 1174-77
- *Rose G. Sick Individuals and Sick Populations. International Journal of Epidemiology 1985; 14: 32-38

28-Feb-2013 Midterm Due at START of class, Discussion of Midterm in Class

Spring Break

March 2-10, 2013

12-Mar-2013 Asch Quality

- *Bodenheimer & Grumbach (B&G) Chapter 10
- *Werner RM, Asch DA. The unintended consequences of publicly reporting quality information. JAMA 2005;293:1239-44
- *Hayward RA, Kent DM. 6 EZ steps to improving your performance. JAMA. 2008;300:255-6
- *Hartzband P. and Groopman J. Money and the Changing Culture of Medicine. N Engl J Med 2009; 360;(2): 101-103
- *Grady. Should patients be told of better care elsewhere? The New York Times. January 6, 2009
- Gawande A. The checklist. The New Yorker. December 10, 2007

14-Mar-2013 Sawyer Marketing Providers and Institutions

- *Asch DA, Volpp KG. What business are we in? The emergence of health as the business of health care. N Engl J Med. 2012;367:888-9.
- *Hagland, M. Focused Factories: Giving consumers what they want. Healthcare Forum Journal 1997: 23-2.
- *Reichheld, Frederick. Learning from Customer Defections: Harvard Business Review 1996: 56-69
- *Beckham J. Branding. Healthcare Forum Journal 1996: 51-55

Topics and groups for end-of-term class presentations/papers should be approved by this date.

19-Mar-2013 Merchant Social Media

- *Merchant RM, Elmer S, Lurie N. Integrating social media into emergency preparedness. N Engl J Med. 2011;364: 289-91.
- * Merchant RM, Asch DA. Can you find an AED if a life depends on it? Circulation: Cardiovascular and Quality Outcomes. 2012;5:1-3.

21-Mar-2013 Rosin Health Care Innovation

 The Economist. How China and India can help cut Western medical bills Asian medical innovation. January 20, 2011

26-Mar-2013 Murray Pharmaceuticals

- *Carlat D. Dr Drug Rep. The New York Times. November 25, 2007
- *Woloshin S, Schwartz LM, Tremmel J, Welch HG, Direct-to-consumer advertisements for prescription drugs: What are Americans being sold? Lancet, 2001 358:1141-46
- *Gladwell M. High Prices. The New Yorker. Oct. 25, 2004: 86-90

28-Mar-2013 Aronowitz Defining Disease

- *Angell M. Shattuck Lecture Evaluating the Health Risks of Breast Implants. N Engl J Med 1996; 334: 1513-18
- *Making Sense of Illness "Lyme Disease: The Social Construction of a New Disease and its Social Consequences" (Chapter 3)
- *Wegman D, Woods N, Bailar J. How Would We Know a Gulf War Syndrome if We Saw One? American Journal of Epidemiology 1997; 146: 704-11

2-Apr-2013 Metlay Antibiotics: Individuals and Populations

- *Metlay JP. Tensions in antibiotic prescribing. LDI Issue Brief. May, 2002
- *CNN. Man with tuberculosis jailed for not wearing mask. April 3, 2007
- *Levy SB. The challenge of antibiotic resistance. Sci Amer. March 1998. 46-53

4-Apr-2013 Asch Health Care Behavioral Economics

- *Loewenstein G, Brennan T, Volpp KG. Asymmetric paternalism to improve health behaviors. JAMA. 2007;298:2415-7
- * "One Way to Lower Health Costs: Pay People to Be Healthy" Knowledge@Wharton. June 24, 2009
- *Halpern SD, Ubel PA, Asch DA. Harnessing the power of default options to improve health care. N Engl J Med. 2007;357:1340-4

09-Apr-2013 Meisel New Media

- *Meisel ZF, Karlawish J. Narrative vs evidence-based medicine--and, not or. JAMA. 2011 Nov 9;306(18):2022-3.
- *Meisel ZF. Googling Symptoms Helps Doctors and Patients. Time.com. Jan 19, 2011.
- *Offitt, P. (2008). Science and the Media. *Austism's False Prophets: Bad Science, Risky Medicine, and the Search for a Cure.*
- <u>http://gutcheck.nci.nih.gov/</u> This is a new media project using personal narratives to enhance the dissemination of comparative effectiveness research. It was built by the innovative design consulting firm IDEO for the Department of Health and Human Services. Please peruse it.

11-Apr-2013 Breslow VisiQ eICU

- *Breslow MJ. Remote ICU care programs: current status. J Crit Care. 2007;22:66-76
- *Thomas EJ, et al. Association of telemedicine for remote monitoring of intensive care patients with mortality, complications, and length of stay. JAMA. 2009;302(24):2671-2678

Final Short Essay Exercise Distributed in Class for Completion at "Home"

16-Apr-2013	Final Due at START of class, Discussion of Final (In Class)	
18-Apr-2013	Class	Student Presentations/Miscellaneous (In Class)
23-Apr-2013	Class	Student Presentations/Miscellaneous (In Class)