

**Health Policy: The Affordable Care Act and  
The Future of the American Health Care System  
BIOE 575 / HCMG 250 / HCMG 850**

Fall 2013, Tues & Thurs 4:30-6pm, College Hall Room 200

**Faculty**

Dr. Ezekiel Emanuel  
Vice Provost for Global Initiatives  
Diane V.S. Levy and Robert M. Levy University Professor

Dr. J Sanford Schwartz  
Leon Hess Professor of Medicine, Health Care Management, and Economics  
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**Teaching Assistant**

Nicholas J. (Nick) Diamond, JD, MBE  
Department of Medical Ethics and Health Policy  
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Office Hours: Thursdays, 6pm – 7pm or by appointment

Note: When contacting the TA please include the course number in the subject line.

**Administrative Assistant**

Andrew Steinmetz  
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## Course Description

The objective of this course will be to provide students with a rigorous understanding of the health care system in the United States. The course will focus on the challenges of cost, quality, and access, the relationship between market failure and the passage of the Affordable Care Act (ACA), and the expected and potential impact of the ACA on the organization, structure, delivery and outcomes of the health care system.

This course will consist of three interconnected segments. The first segment will provide an in-depth analysis of the current U.S. health care system and the nature and factors underlying the failure of this market. The course will begin with an overview of the history and of the structure of the U.S. health care sector, which accounted for about 18 percent of GDP in 2012. The challenges posed by rapidly rising health care costs, declining health insurance coverage, and uneven quality will then be explored. The second segment of the course will explore the likely effect of key provisions of the ACA on cost, access, and quality, on several sets of stakeholders, including health insurers, health care providers, medical suppliers, employers, and workers and organization of health care services and systems. The course will then examine the ACA's effects on the U.S. economy. The course will summarize the major criticisms of ACA, potentially important challenges, and unintended consequences of the legislation. The final week of the course will consider alternative strategies for slowing the growth rate of health care costs while simultaneously improving quality of care and expanding health insurance coverage in the years ahead.

## Course materials

**There is no textbook for the course** but the readings for the course are listed below. Many are reports and policy documents from the US Department of Health and Human Services, other government organizations, and health policy nonprofits including the Institute of Medicine. Others are articles from the popular press including the *New York Times* and the *Wall Street Journal*. The rest are mainly academic articles from journals such as the *New England Journal of Medicine* or the *Journal of the American Medical Association*.

Most readings should be easily available from the internet, though in some cases it may be necessary to access the electronic files from a University of Pennsylvania IP address (or through the UPenn Libraries website). Additionally, all readings will be posted on the Canvas site for the class.

**Assigned readings should be read in advance of lectures, as this will help you to get much more out of the lectures and be prepared for the quizzes.**

**The only required purchase for the course is a ResponseCard RF Turning Technologies “clicker,” which can be purchased at the bookstore.**

Additionally, we expect you to keep up with health policy-related current events. It is a good idea to periodically read the following websites:

- <http://healthreformgps.org/>
- <http://healthaffairs.org/blog/>
- <http://chirblog.org/>
- <http://www.kaiserhealthnews.org/>
- <http://kff.org/>
- <http://healthaffairs.org/>
- [http://www.urban.org/health\\_policy/index.cfm](http://www.urban.org/health_policy/index.cfm)
- <http://www.cbo.gov/topics/health-care>
- <http://www.rwjf.org/en/topics/rwjf-topic-areas/health-policy.html>
- <http://thehill.com/blogs/healthwatch/>
- <http://blogs.wsj.com/health/>
- <http://www.washingtonpost.com/blogs/wonkblog/wp/tag/health-care/>
- <http://theincidentaleconomist.com/>

### **Requirements and Grades**

11 In-class Quizzes (Dropping 3 lowest grades) (Quizzes will cover the assigned readings and lectures from <i>previous</i> class sessions)	15% of your grade
1 Midterm Exam	25% of your grade
3 Homework Assignments	30% of your grade
1 Final Exam	30% of your grade

These quizzes/exams can only be taken in class and cannot be made-up. Of course, if you are hospitalized or if you encounter a significant and documented medical difficulty, we will consider potential accommodations for your situation. (We might allow you to come in on a stretcher and will find some way to accommodate your IV pole to take the final.)

### **Intellectual Integrity**

This course is being taught by ethicists. We take the virtue of integrity very seriously. We want you to talk about the readings and about the larger topic of health policy with your fellow classmates, family and friends. We all learn by engaging with the ideas and one of the best ways to engage is to discuss and argue about the ideas. Please do that.

However, the work you submit for the quizzes, examinations and the final must be your work. Any plagiarism or other form of cheating will be severely dealt with per the procedures of the University of Pennsylvania. (Too bad they got rid of the stocks.)

## **Rules**

### **Rule 1: Attendance**

We expect you to attend every class meeting. We are designing this course to be engaging and interactive. A significant portion of the learning will occur in the classroom as we discuss the lecture topics and readings. Missing those interactions will significantly diminish your understanding of health policy.

### **Rule 2: Do the Reading**

We expect you to do all the required reading before class. Readings are identified as required, recommended, and optional. We mean those words. You should come prepared to discuss all required readings and engage fully in discussion. We will randomly call on people in the class to discuss various parts of the reading or extend the readings to a new area. You must come prepared.

### **Rule 3: Be Punctual**

We will begin each class promptly at 4:30pm. We will be ready and so should you. Consider our class meetings as you would any job or professional meeting. If you arrive late or leave early you will disrupt the flow of the class and you might miss a quiz, which cannot be made up.

### **Rule 4: No Cell Phones, PDAs, Smartphones**

We work hard to prepare for class. We expect you to be prepared and to thoughtfully participate. We do not want the time disturbed by a ringing phone and we do not want people running out to answer their phones. It disrupts the class. Thus, do not set your phone to silent or vibrate—turn them completely **off** for an hour and a half.

Laptops may be used for note taking if this is your preferred method. However, we consider emailing, texting, Facebooking, and surfing the Internet during class to be a gross insult to your fellow classmates and to us. You cannot multi-task—that is what the science says. Consequently, emailing, texting, Facebooking, and surfing the Internet is the equivalent of being absent from class. If we find you engaging in any of these behaviors we will ask you to leave the classroom.

### **Rule 5: No Blogging, Texting, Tweeting, Facebooking or other public commenting on this course.**

We want this class to be about learning and engaging with difficult material. This class is not a public performance and you are not an Internet critic. You are a student. This is a learning environment. As teachers we will sometimes be intentionally provocative and challenging. We want you as students to take intellectual risks, think creatively, and push your own limits. This requires safety and respect. That is not compatible with publicly broadcasting what is going on in class to titillate unknown interlopers.

**By registering for this course you are agreeing to abide by these rules.  
This is informed consent.**