

**CORE COURSE IN HEALTH POLICY 2019-2020  
HEALTH POLICY 2000A/SUP957/HPM246-01****CLASS MEETINGS**

Tuesday & Thursday, 4:15-6:00pm  
14 Story Street, 4<sup>th</sup> Floor Conference Room

**INSTRUCTORS**

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**TEACHING FELLOW**

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**COURSE OVERVIEW**

This yearlong seminar is required for doctoral candidates in health policy and is open to other doctoral students at Harvard. The course is intended to familiarize students with the health policy research literature and selected questions in the field.

The course is organized around lectures by faculty from the Faculty of Arts & Sciences, the Kennedy School of Government, the T.H. Chan School of Public Health, the Medical School, the Business School, and the Law School. Discussion sessions will be interspersed with the invited lectures and will examine the policy relevance, research methods, and technical details of many of the presented topics in more depth.

**READINGS**

Readings for the course will generally consist of journal articles assigned by the lecturer and should be read in advance of each lecture. When provided by the lecturers, the syllabus includes

an overview of the goals for the lecture and identifies key points for which to read in order to help you better prepare for class.

The majority of assigned readings are available electronically. Links are provided in the syllabus and on [Canvas](#) (under “Modules”), or students can search for the articles using the Harvard Library research website: <https://hollis.harvard.edu>. Some readings are available on the course website. Where readings are not available electronically or on the course website, it is suggested that students use the Harvard Library’s Scan & Deliver service: <http://library.harvard.edu/scan-deliver>.

It is also suggested that you purchase the following books, which are also on reserve at the HKS library:

- JP Newhouse and the Health Insurance Experiment Group. *Free for All? Lessons from the RAND Health Insurance Experiment*. Cambridge: Harvard University Press, 1996.
- JP Newhouse. *Pricing the Priceless: A Health Care Conundrum*. Cambridge: The MIT Press, 2002.
- J Oberlander. *The Political Life of Medicare*. Chicago: University of Chicago Press, 2003.
- N Daniels. *Just Health: Meeting Health Needs Fairly*. Cambridge: Cambridge University Press, 2007.
- V Fuchs. *Who Shall Live? Health, Economics, and Social Choice (2<sup>nd</sup> Expanded Edition)*. Hackensack, NJ: World Scientific Publishing, 2011.
- W Shadish, Thomas D. Cook, Donald T. Campbell, *Experimental and Quasi-Experimental Designs for Generalized Causal Inference*, Boston: Houghton Mifflin, 2002.

### **LIBRARY TRAINING SESSION**

The teaching fellow has arranged for a library training session to be held during the fall semester. Paul Bain, a reference librarian at Countway, will provide training on how to use PubMed. This session will take place on Thurs., Oct. 24<sup>th</sup> from 6-8pm at 14 Story Street (dinner will be provided). This session will help students prepare for the literature review due at the end of the semester.

### **COURSE REQUIREMENTS**

#### ***Attendance & Participation:***

**33%**

This course meets twice per week. Students are expected to attend and participate in the 2-hour lecture and discussion sessions. This participation includes reading 3-4 relevant articles assigned by the lecturers prior to each class. If you are unable to attend a lecture, please let the teaching fellow know by email in advance of the session.

You will be expected to actively participate in each course session by listening attentively to your peers and constructively contributing to the conversation. The rubric below provides evaluation criteria for your class participation.

**Participation Rubric**

	<b>Exemplary</b> (90%-100%)	<b>Proficient</b> (80%-90%)	<b>Developing</b> (70%-80%)	<b>Needs improvement</b> (<70%)
Frequency of Participation	Student is always able to answer discussion questions when called on and initiates contributions in each class session.	Student is mostly able to answer discussion questions when called on and initiates contributions in most sessions.	Student is able to answer discussion questions when called on half of the time and occasionally initiates contributions in class sessions.	Student mostly is unable to answer discussion questions when called on and rarely initiates contributions in class sessions.
	Never dominates the conversation (preventing others from having an opportunity to contribute)	Rarely dominates the conversation (preventing others from having an opportunity to contribute)	Occasionally dominates the conversation (preventing others from having an opportunity to contribute)	Frequently dominates the conversation, (preventing others from having an opportunity to contribute)
Listening/ Attentiveness	Student listens attentively to both faculty and peers, and regularly offers comments that build on the class discussion and others' remarks (i.e. the student hears what others say and contributes to the dialogue).	Student is mostly attentive during class and offers comments that build on others' remarks.	Student is sometimes inattentive and rarely makes comments based on others' contributions.	Does not pay attention in class or make comments based on others' contributions.
Quality of Comments	Student contributions always indicate careful attention to assigned readings and are always insightful and constructive.	Student contributions mostly indicate careful attention to assigned readings and are mostly insightful and constructive.	Comments are sometimes constructive and informed, with occasional signs of insight.	Comments do not reflect careful reading and are not constructive. Comments are not relevant to discussion.

**Written Assignments:**

67%

Each semester, there will be two written assignments related to the content and concepts presented in the seminar sessions. In the fall, students will produce a 10-12 page literature review as a final paper. Throughout the spring semester, students will produce a 10-15 page research proposal. Due dates are as follows:

**Fall****Assignment:** Post potential literature review topic to Canvas: **10/10****Assignment:** Provide feedback to classmates on Canvas: **10/17****Assignment:** Email Rebecca final research proposal topic: **10/31****Essay #1** (Politics or Decision Science): **11/5****Essay #2** (Ethics or Quality): **12/3****Literature Review:** **12/10****Spring** (Tentative Dates)**Assignment:** 2-3-Paragraph Update on Research Proposal: **2/6****Essay #3/Article Critique** (Research Methods): **3/5****Assignment:** 2-page Description of Study Design/Methods: **3/26****Essay #4** (Economics of Health): **4/17****Presentation of Research Proposal:** **4/21** and **4/22** (6:00-8:00 pm)**Final Research Proposal:** **5/5**

For details on the literature review assignment, please see the separate document posted on Canvas.

The research proposal should be written in the form of an F31 predoctoral fellowship application to NIH or AHRQ. You should download the instructions for PHS form 398 at <http://grants.nih.gov/grants/funding/phs398/phs398.html>. Go to Section 5.5 “Content of Research Plan” and follow the instructions. Note that there is a human subjects section, which pertains to the next requirement.

***Human Subjects Training:***

To pass the Spring semester, students will be expected to complete an online Human Subjects Training Course and present verification. The training can be accessed through the following link: <https://www.citiprogram.org/default.asp>. Students should do the Basic Course in the Protection of Human Subjects for Social and Behavioral Research Investigators. For affiliation, please select Harvard University (Cambridge/Allston Campus). Completed training certificates should be e-mailed to both the teaching fellow and to Colleen Yout ([colleen\\_yout@harvard.edu](mailto:colleen_yout@harvard.edu)).

***Grades:***

Grades will be assigned separately for the first semester and the second semester.

***Academic Honesty:***

Students must observe Harvard University rules regarding the citation of sources. Any sentences or paragraphs taken verbatim from the writing of any other person or persons, or from your own

writing that has been published elsewhere, must be placed in quotation marks and their source must be clearly identified. Changing the wording of a sentence or passage slightly does not evade the requirement for citation. Indeed, whenever you are drawing an important argument or insight from someone else, even if you reword it into your own words, a reference to the source is required. Including material from others in the assignments without appropriate quotation marks and citations is regarded, as a matter of School and University policy, as a serious violation of academic and professional standards and can lead to a failing grade in the course, failure to graduate, and even expulsion from the University.

### **FALL SEMESTER SYLLABUS**

*Please note that locations of readings are indicated in brackets beside each citation. Email the teaching fellow if you have any trouble accessing the readings.*

## **SECTION I: OVERVIEW (SECTION LEADER: JOE NEWHOUSE)**

### **9/3: Determinants of Health (David Cutler)**

This class discusses the evolution of human health over time, and briefly across space. The goal is to familiarize you with basic demographic trends that affect health policy debates.

- Case, Anne, and Angus Deaton, “Mortality and Morbidity in the 21<sup>st</sup> Century.” *Brookings Papers on Economic Activity*, Spring 2017. [[https://www.brookings.edu/wp-content/uploads/2017/03/casedeaton\\_sp17\\_finaldraft.pdf](https://www.brookings.edu/wp-content/uploads/2017/03/casedeaton_sp17_finaldraft.pdf)]
- Cutler, David M., Angus Deaton, and Adriana Lleras-Muney, “The Determinants of Mortality.” *Journal of Economic Perspectives*, 20(3), Summer 2006, 97-120. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1257/jep.20.3.97?nosfx=y>]
- Fogel, Robert W. *The Escape from Hunger and Premature Death, 1700-2100*. Cambridge: Cambridge University Press, 2004. [Courseweb]
  - Chapters 1 and 2
- World Health Organization. World Health Report, 2003, Chapter 1, pages 1-22. [<http://www.who.int/whr/2003/en/Chapter1.pdf?ua=1>]
- Preston, Samuel H., “American Longevity: Past, Present, and Future,” Policy Brief; publisher: Maxwell School of Citizenship and Public Affairs/Center for Policy Research; 1996; pp. 1-18. [Courseweb]

### **9/5: Health Care Spending (Joe Newhouse)**

Please send an email to Joe ([newhouse@hcp.med.harvard.edu](mailto:newhouse@hcp.med.harvard.edu)) by Wednesday noon, 9/4, with the following: what you found most puzzling in the reading, what you found most interesting, and what you would like to discuss. I have put this topic first because US spending on health care is one of the most important domestic policy issues.

- Read the following parts of Victor Fuchs, *Who Shall Live? Health, Economics, and Social Choice* (2<sup>nd</sup> Expanded Edition). Hackensack, NJ: World Scientific Publishing,

2011. [Library] Be prepared to comment on the themes of the Fuchs book, which is a classic.

- o Introduction to This [the 2<sup>nd</sup> Expanded] Edition
  - o Introduction [this was part of the 1<sup>st</sup> edition]
  - o Chapters 1 and 6
  - o “What Every Philosopher Should Know About Economics”
- Irene Papanicolas, Liana R. Woskie, and Ashish K. Jha, “Health Care Spending in the United States and Other High Income Countries,” *JAMA*, March 13, 2018, 319(10):1024-39. They point to unit prices and secondarily to administrative cost. What would you infer from this paper about the feasibility of a single payer system in the US? <https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2674671>
  - Katherine Baicker and Amitabh Chandra, “Challenges in Understanding Differences in Health Care Spending Between the United States and Other High-Income Countries,” *JAMA*, March 13, 2018, 319(10):986-7. Baicker and Chandra is an editorial on Papanicolas, et al., outlining the major objections from an economics perspective to Papanicolas, et al.’s conclusions. <https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2674648>  
If you are interested in this topic, there are three other editorials (!) on this paper in the March 13 issue, from Parente, Emanuel, and the editors of *JAMA*. Although the first two in particular are worth reading, in the interests of keeping the required reading down, all three are optional.

### **9/10: Introduction to the U.S. Health Care System (Haiden Huskamp)**

This session is intended to provide a broad overview of the U.S. health care system: how much we spend, the role of the government in financing health care, gaps in our health insurance system, and issues of value and quality of care. Most of the topics we will cover will be addressed in greater length in individual sessions later in the year. Although most of the class will be in lecture format given the amount of material to cover and the nature of the session, be prepared to discuss what you see as the strengths and weaknesses of our system, how the ACA affected them, and the potential impacts of recent health reform proposals.

#### *Required Reading:*

- A.B. Martin, M. Hartman, B. Washington, A. Catlin, and The National Health Expenditure Accounts Team, “National Health Care Spending in 2017: Growth Slows to Post-Great Recession Rates; Share of GDP Stabilizes,” *Health Affairs* 38(1):96-106, 2018. [<https://www-healthaffairs-org.ezp-prod1.hul.harvard.edu/doi/pdf/10.1377/hlthaff.2018.05085>]
- D. Altman and W.H. Frist, “Medicare and Medicaid at 50 Years: Perspectives of Beneficiaries, Health Care Professionals and Institutions, and Policy Makers,” *JAMA* 314(4):384-395, 2015. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2411288>]

- B.D. Sommers and D.C. Grabowski, “What is Medicaid? More than Meets the Eye,” *JAMA* 318(8):695-696, 2017. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2644965>]

*Optional Reading (for those who would like more background):*

- Kaiser Family Foundation. “Summary of the Affordable Care Act.” [<http://kff.org/health-reform/fact-sheet/summary-of-the-affordable-care-act/>]
- Kaiser Family Foundation. “An Overview of Medicare.” [<http://files.kff.org/attachment/issue-brief-an-overview-of-medicare>]
- Kaiser Family Foundation. “10 Things to Know about Medicaid: Setting the Facts Straight.” [<https://www.kff.org/medicaid/issue-brief/10-things-to-know-about-medicaid-setting-the-facts-straight/>]
- Kaiser Family Foundation. “2018 Employer Health Benefits Survey.” [<https://www.kff.org/health-costs/report/2018-employer-health-benefits-survey/>]
- Kaiser Family Foundation. “Medicare Advantage.” [<http://files.kff.org/attachment/Fact-Sheet-Medicare-Advantage>]
- L. Levitt, “Medicare for All or Medicare for More?” [<https://newsatjama.jama.com/2019/05/22/jama-forum-medicare-for-all-or-medicare-for-more/>]

## **9/12: Comparative Health Systems (Rifat Atun)**

*Required reading:*

- Geldsetzer P, et al. The state of hypertension care in 44 low-income and middle-income countries: a cross-sectional study of nationally representative individual-level data from 1.1 million adults. *Lancet* 2019; 394(10199): 652-662. [<https://www-sciencedirect-com.ezp-prod1.hul.harvard.edu/science/article/pii/S0140673619309559>]
- Atun R, et al. Universal health coverage in Turkey: enhancement of equity. *Lancet* 2013; 382: 65-99. [<https://www-sciencedirect-com.ezp-prod1.hul.harvard.edu/science/article/pii/S014067361361051X?via%3Dihub>]
- Atun R, Andrade LOM, Almeida G, et al. Health system reform and universal health coverage in Latin America. *Lancet* 2015; 385(9974):1230-47 [[http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1016/S0140-6736\(14\)61646-9?nosfx=y](http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1016/S0140-6736(14)61646-9?nosfx=y)]
- Hone T, Rasella D, Barreto M, Atun R, Majeed A, Millett C. Large Reductions in Amenable Mortality Associated With Brazil's Primary Care Expansion And Strong Health Governance. *Health Affairs* 2017;36(1):149-158. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1377/hlthaff.2016.0966?nosfx=y>]

## SECTION II: POLITICS OF HEALTH (SECTION LEADER: BOB BLENDON)

### 9/17: Public Opinion + Politics of Health (Robert Blendon)

- Robert J. Blendon, Mollyann Brodie, Drew E. Altman, and John Benson. *American Public Opinion and Health Care*. CQ Press, 2010.
  - Chapter 1 [Courseweb]
- Blank JM, Shaw D. “Does Partisanship Shape Attitudes toward Science and Public Policy? The Case for Ideology and Religion.” *The ANNALS of the American Academy of Political and Social Science*, March 2015, 658(1):18-35. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1177/0002716214554756?nosfx=y>]
- Blendon RJ, Benson JM, McMurtry CL. “Health Care in the 2018 Election.” *New England Journal of Medicine*, 2018, 379:e32. [<https://www-nejm-org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMs1813425>]
- Hero JO, Zaslavsky AM, Blendon RJ. “The United States Leads Other Nations in Differences by Income in Perceptions of Health and Health Care.” *Health Affairs*, 2017, 36:6:1032-1040. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1377/hlthaff.2017.0006?nosfx=y>]
- Blendon RJ, Benson JM, McMurtry CL. “The Upcoming U.S. Health Care Cost Debate – The Public’s Views.” *New England Journal of Medicine*, 2019, 380(26):2487-2492. [[https://www-nejm-org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMp1905710?url\\_ver=Z39.88-2003&rfr\\_id=ori%3Arid%3Acrossref.org&rfr\\_dat=cr\\_pub%3Dpubmed](https://www-nejm-org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMp1905710?url_ver=Z39.88-2003&rfr_id=ori%3Arid%3Acrossref.org&rfr_dat=cr_pub%3Dpubmed)]

### 9/19: The US Congress (David King)

#### Objective:

We will explore a recent piece of health legislation (the “Mental Health Parity Act”) as a window into how health policy is handled on Capitol Hill. What roles do the various institutions play, and why do legislators take on some topics while avoiding others? Students will come to class with two brief written assignments that they should be ready to share with others, as described in “assignments” (2) and (5) below.

#### Assignments:

1. Please read the Haskell chapter first, because it is a useful overview of how the Congress works, at least in “theory.” The chapter focuses on process and procedure, not on personalities or expertise, but I need you to understand the mechanics well before reading the case.
2. Read the 13-page “Mental Health Parity” case twice. The **first time** through, just try to get a sense of who was involved, and why they got involved, and what institutional chutes



- folks went through. On the **second reading**, please make a list with two columns. Label one column “typical” and the other “not typical.” As you are reading, please write down elements of the case that you think are fairly typical of the way health policy is handled in Congress (the referrals to committees, for example), and elements that strike you as not typical. **Don’t worry about getting a “right” answer – just put things down on paper.**
3. Review the health subcommittee rosters for Ways and Means and for Commerce, using the links below. Note that we are now in the “115<sup>th</sup>” Congress – and you should know what that means. Choose **one** elected representative from **each** committee, and find information that might help you understand why they are on those subcommittees. For example, you might choose Kathy Castor (D-FL) from Commerce and Devin Nunes (R-CA) from Ways and Means. Explore, for a while, their wiki pages or other sources, and get a sense for why they might be interested in health policy. Be sure to note a major city for each of the members you choose. (Clovis, CA is in Representative Nunes’ district, for example, and Caster represents much of Tampa, FL.)
  4. Using the 990 finder from the National Center for Charitable Statistics, please find the most recently-available 990 for **any** health care organization in each of the congressional districts you identified above. You may find the 990 locator through [foundationcenter.org](http://foundationcenter.org) to be a bit easier to use (<http://990finder.foundationcenter.org/>). **My goal is for you simply to find and open a couple of 990s** – which will help give you a sense of how these non-profits are engaged in a congressional districts. In the example above, and focusing on Tampa, the University Community Hospital would be a natural choice.
  5. Using [opensecrets.org](http://opensecrets.org), please navigate to the 2016 “race summaries” for the two legislators you’ve chosen above. Please write down the names of the top five contributors to the member’s campaigns in the 2016 cycle, and be ready to share that list with the class.

#### Readings:

- John Haskell, Marian Currinder, Sarah A. Grove. 2014. *Congress in Context*, 2<sup>nd</sup> Edition. Boulder, CO: Westview Press. Chapter 5, “Understanding the Legislative Process.” [Courseweb]
- “Achieving Mental Health Parity.” 2010. Harvard Kennedy School Case # 1948. [Courseweb]
- House Committee on Energy and Commerce, Subcommittee on Health (link here: <https://energycommerce.house.gov/subcommittees/health-116th-congress>)
- House Committee on Ways and Means, Subcommittee on Health (link here: <https://waysandmeans.house.gov/subcommittees/health-116th-congress>)
- National Center for Charitable Statistics, 990 Finder, (link off of the homepage here: <http://nccs.urban.org/>)
- Fundraising summaries by industry, for members of the House of Representatives, linked here: <http://www.opensecrets.org/>

#### 9/24: US Health Reform and the Affordable Care Act (John McDonough)

Please think about the following questions as you do the readings:

1. In light of the failure of prior national health reform efforts in the U.S., why did the Affordable Care Act pass?
2. Consider: a. the 1993-94 Clinton health reform failure; b. the 2010 ACA success; and c. the 2017 Republican AHCA/BCRA efforts to repeal and replace the ACA (unsuccessful as of this writing) – is there a model that helps to explain the outcomes in all three cases?
3. How might you design a study to determine the factors that cause health reform to fail versus succeed?
4. What is the difference between political analysis and policy analysis?

*Required Reading:*

- J McDonough. *Inside National Health Reform*. University of California Press, 2011. [Library]
  - Read the introduction and chapters 1, 2, 3, 4 closely. Skim chapters 5-conclusion.
- J Morone. “Presidents and Health Reform: From Franklin D. Roosevelt to Barack Obama.” *Health Affairs*. June 2010, 29(6): 1096-1100. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1377/hlthaff.2010.0420?nosfx=y>]

*Recommended Reading:*

- J Hacker. “The Historical Logic of National Health Insurance: Structure and Sequence in the Development of British, Canadian, and U.S. Medical Policy.” *Studies in American Political Development*, 12 (Spring 1998), 57-130. [[http://hollis.harvard.edu/HVD:primo\\_central:TN\\_cambridgesgmS0898588X98001308](http://hollis.harvard.edu/HVD:primo_central:TN_cambridgesgmS0898588X98001308)]
  - This is a lengthy but useful (though dated) article. Skimming it effectively will expose you to the competing explanatory frameworks that exist within political science to understand the different forms of national health insurance (NHI) efforts (and outcomes) in Canada, Britain, and the US. It is less important to focus on the details (who, what, where) within each of the country case studies (after page 84), though I encourage you to all to look at the US case study pp.106-126.

**9/26: The Politics of Medicare (Adrianna McIntyre)**

- Galvin D, and Hacker J. “The Political Effects of Policy Drift: Policy Stalemate and American Political Development.” *Northwestern Institute for Policy Research Working Paper Series*, April 2019. Working Paper # 19-12. [Courseweb]
  - Read only pages 1-15, 23-29, and 46-47.
- Campbell A, and Morgan K. “Delegated Governance in Health Policy.” *Health Politics and Policy* (ed. Jim Morone). April 30, 2012. [Courseweb].
- Mettler S. “Why Americans Can’t See Government – And Why It Matters.” *Scholars Strategy Network*. October 2011. [Courseweb]

- Campbell A. “Policy Feedbacks and the Impact of Policy Designs on Public Opinion.” *Journal of Health Politics, Policy and Law*. 36(6):961-972. December 2011. [Courseweb]

### **SECTION III: HEALTH DECISION SCIENCE (SECTION LEADER: ANKUR PANDYA)**

#### OBJECTIVES:

Decision science is the study of how we make decisions and how to make better decisions in the presence of uncertainty, complexity and competing values. While most fields of research focus on producing new knowledge, decision science is concerned with making choices based on available information. Health decision science is the application of these quantitative tools to help policy developers, physicians, and patients make the best decisions in light of their specific objectives and constraints.

This section concerns the inevitable need to allocate (i.e., ration) health care services, and various approaches that have been attempted or proposed to apply explicit, outcome-based criteria (e.g., cost-effectiveness analysis) for resource allocation.

Specific objectives for the section will include:

1. Weighing the tradeoffs among health benefits, risks, and costs using quantitative health decision science methods;
2. Compare descriptive, prescriptive, and normative framings of health decision-making; and
3. Examining the role of health decision science methods, given their inherent strengths limitations, in designing efficient and equitable health policies.

#### **10/1: Introduction to Health Decision Science and Cost-Effectiveness Analysis (Ankur Pandya)**

Cost-effectiveness analysis is used widely in most of the industrial world to guide decisions about payment and reimbursement of medical services. In the US, use of cost-effectiveness analysis using quality-adjusted life years as the measure of health improvement is forbidden from policy decision making by the Affordable Care Act. It is used mainly behind the scenes in the private insurance sector, by medical professional organizations in guideline formulation, and to evaluate prevention programs such as vaccination. Can and should cost-effectiveness information be used in US health care decision-making, and if so, how?

#### *Required Reading:*

- Pandya A. Adding cost-effectiveness to define low-value care. *JAMA*. 2018; 319(19):1977-1978. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/article-abstract/2679461>]

- Neumann PJ, Cohen JT. QALYs in 2018 – Advantages and concerns. *JAMA*. 2018; 319(24):2473-2474. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/article-abstract/2682917>]
- Weinstein MC, Skinner JA. Comparative effectiveness and health care spending: implications for reform. *NEJM* 2010; 362:460-465. [<http://www.nejm.org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMs0911104>]

*Supplementary Articles:*

- Sanders GD, Neumann PJ, Basu A, et al. Recommendations for Conduct, Methodological Practices, and Reporting of Cost-effectiveness Analyses: Second Panel on Cost-Effectiveness in Health and Medicine. *JAMA*. 2016 Sep 13;316(10):1093-103. [<https://www-ncbi-nlm-nih-gov.ezp-prod1.hul.harvard.edu/pubmed/27623463>]
- Neumann PJ, Rosen A, Weinstein MC: Medicare and Cost-Effectiveness Analysis. *NEJM* 2005; 353:1516-1522. [<http://www.nejm.org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMs050564>]
- Garber AM: A menu without prices. *Ann Intern Med* 2008; 148 (12): 964-966. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.7326/0003-4819-148-12-200806170-00223?nosfx=y>]
- Meltzer DO, Chung JW. The Population Value of Quality Indicator Reporting: A Framework For Prioritizing Health Care Performance Measures. *Health Aff* 2014; 33(1):132-139. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1377/hlthaff.2011.1283?nosfx=y>]
- Ord T. The Moral Imperative toward Cost-Effectiveness in Global Health. Center for Global Development (essay), Mar. 2013. [[https://www.cgdev.org/sites/default/files/1427016\\_file\\_moral\\_imperative\\_cost\\_effective\\_ness.pdf](https://www.cgdev.org/sites/default/files/1427016_file_moral_imperative_cost_effective_ness.pdf)]

**10/3: From CEA to BCA: Estimating the Money Value of Health (Lisa Robinson)**

*Required:*

- Chapters 1, 2, and 4 from: Reference Case Guidelines for Benefit-Cost Analysis in Global Health and Development. <https://cdn2.sph.harvard.edu/wp-content/uploads/sites/94/2019/05/BCA-Guidelines-May-2019.pdf>
- Neumann, Peter J., Joshua T. Cohen, and Milton C. Weinstein. Updating Cost-Effectiveness — The Curious Resilience of the \$50,000-per-QALY Threshold. *N Engl J Med* 2014; 371:796-797 DOI: 10.1056/NEJMp1405158. <https://www.nejm-org.ezp-prod1.hul.harvard.edu/doi/10.1056/NEJMp1405158>

*Optional:*

- Blomquist, G. 2004. "Self-Protection and Averting Behavior, Values of Statistical Lives, and Benefit Cost Analysis of Environmental Policy." *Review of the Economics of the Household*. 2: 89-110. <https://link-springer-com.ezp-prod1.hul.harvard.edu/content/pdf/10.1023/B%3AREHO.0000018024.53114.3a.pdf>
- Cameron, T.A. and J.R. DeShazo. 2013. "Demand for Health Risk Reductions." *Journal of Environmental Economics and Management*. 65: 87-109. <https://www-sciencedirect-com.ezp-prod1.hul.harvard.edu/science/article/pii/S0095069612000769>
- Corso, P.S., J.K. Hammitt, and J.D. Graham. 2001. "Valuing Mortality-Risk Reduction: Using Visual Aids to Improve the Validity of Contingent Valuation." *Journal of Risk and Uncertainty*. 23(2):165-184. [https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/203540872?accountid=11311&rfr\\_id=info%3Axri%2Fsid%3Aprim0](https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/203540872?accountid=11311&rfr_id=info%3Axri%2Fsid%3Aprim0)
- Viscusi, W.K. 2013. Using Data from the Census of Fatal Occupational Injuries (CFOI) to Estimate the 'Value of a Statistical Life'. *Monthly Labor Review*. Bureau of Labor Statistics. <https://www.bls.gov/opub/mlr/2013/article/using-data-from-the-census-of-fatal-occupational-injuries-to-estimate-the.htm>
- Robinson, L.A., J.K. Hammitt, A.Y. Chang, and S. Resch. "Understanding and Improving the One and Three Times GDP per Capita Cost-Effectiveness Thresholds," *Health Policy and Planning*, 32: 141-145. 2017. doi: 10.1093/heapol/czw096. <https://academic-oup-com.ezp-prod1.hul.harvard.edu/heapol/article/32/1/141/2555408>
- Claxton, Karl Claxton, Jessica Ochalek, Paul Revill, Alex Rollinger, and Damian Walker. 2016. Informing decisions in Global Health Cost per DALY thresholds and health opportunity costs, *Policy & Research Briefing* <https://www.york.ac.uk/che/news/2016/informing-decisions-in-global-health/>

**10/8: Extended Cost-Effectiveness Analysis (Stéphane Verguet)**

- Verguet S, Laxminarayan R, Jamison DT. Universal public finance of tuberculosis treatment in India: an extended cost-effectiveness analysis. *Health Economics* 2015; 24(3):318-332. <https://onlinelibrary-wiley-com.ezp-prod1.hul.harvard.edu/doi/full/10.1002/hec.3019>
- Verguet S, Kim JJ, Jamison DT. Extended cost-effectiveness analysis for health policy assessment: a tutorial. *Pharmacoeconomics* 2016; 34(9):913-923. <https://dash.harvard.edu/handle/1/29002661>
- Phelps CE, Lakdawalla DN, Basu A, Drummond MF, Towse A, Tazon PM. Approaches to aggregation and decision making – a health economics approach: an ISPOR special

task force report. *Value in Health* 2018; 21:146-154.

[http://eprints.whiterose.ac.uk/129543/1/CP\\_DL\\_AB\\_MD\\_AT\\_PD\\_Agregatn\\_Decsn\\_mking\\_ISPOR\\_ViH\\_21\\_146\\_154\\_2018.pdf](http://eprints.whiterose.ac.uk/129543/1/CP_DL_AB_MD_AT_PD_Agregatn_Decsn_mking_ISPOR_ViH_21_146_154_2018.pdf)

### 10/10: Policy Example: HPV and Cervical Cancer (Jane Kim)

- Kim JJ, Tosteson ANA, Zauber AG, Sprague BL, Stout NK, Alagoz O, Trentham-Dietz A, Armstrong K, Pruitt SL, Rutter CM, on behalf of the PROSPR (Population-based Research Optimizing Screening through Personalized Regimens) consortium. Cancer models and real-world data: Better together. *J Natl Cancer Inst* 2015;108(2). [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1093/jnci/djv316?nosfx=y>]
- Kim JJ, Campos NG, Sy S, Burger EA, Cuzick J, Castle PE, Hunt WC, Waxman A, Wheeler CM on behalf of the New Mexico HPV Pap Registry Steering Committee. Inefficiencies and high-value improvements in current U.S. cervical cancer screening practice: A cost-effectiveness analysis. *Ann Intern Med* 2015; 163:589-597. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.7326/M15-0420?nosfx=y>]
- Goldie SJ, Kim JJ, Myers ER. Chapter 19: Cost-effectiveness of cervical cancer screening. *Vaccine* 2006; 24 Suppl 3:S164-70. [<http://www.sciencedirect.com.ezp-prod1.hul.harvard.edu/science/article/pii/S0264410X06006189>]

<b>10/10 ASSIGNMENT DUE: Post potential literature review topic to Canvas</b>
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### 10/15: Beyond Modeling: Preferences and Health Metrics (E. Wittenberg and D. Wright)

- Hunink, M. G. Myriam, Milton C. Weinstein, Eve Wittenberg, Michael F. Drummond, Joseph S. Pliskin, John B. Wong, and Paul P. Glasziou. "Valuing Outcomes." In *Decision Making in Health and Medicine: Integrating Evidence and Values*, 2nd ed., 78–117. Cambridge University Press, 2014.
- Coast J, Al-Janabi H, Sutton EJ, Horrocks SA, Vosper AJ, Swancutt DR, Flynn TN. Using qualitative methods for attribute development for discrete choice experiments: issues and recommendations. *Health Econ.* 2012 Jun;21(6):730-41. <https://onlinelibrary-wiley-com.ezp-prod1.hul.harvard.edu/doi/epdf/10.1002/hec.1739>
- Wittenberg E, Bharel M, Bridges JF, Ward Z, Weinreb L. Using Best-Worst Scaling to Understand Patient Priorities: A Case Example of Papanicolaou Tests for Homeless Women. *Ann Fam Med.* 2016 Jul;14(4):359-64. <http://www.annfammed.org/content/14/4/359.full.pdf+html>
- Wright DR, Saelens BE, Fontes A, Lavelle TA. Assessment of Parents' Preferences for Incentives to Promote Engagement in Family-Based Childhood Obesity Treatment. *JAMA Netw Open.* 2019 Mar 1;2(3):e191490. <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2729480>

**10/17 ASSIGNMENT DUE: Provide feedback to classmates on Canvas****SECTION IV: ETHICS (SECTION LEADER: DAVID JONES)****10/17: Intro to Population-Level Bioethics + Distributive Justice (David Jones)***Required Readings:*

- Wikler, Daniel, and Daniel W. Brock. "Population-Level Bioethics: Mapping a New Agenda." In *Global Bioethics: Issues of Conscience for the Twenty-First Century*, ed. Ronald Michael Green, Aine Donovan, and Steven A. Jauss, pp. 15-35. Oxford: Oxford University Press, 2008.
- Annas, George J. "The Prostitute, the Playboy, and the Poet : Rationing Schemes for Organ Transplantation." *American Journal of Public Health* 72 (1985) : 187-189. [<https://www.ncbi.nlm.nih.gov/ezp-prod1.hul.harvard.edu/pmc/articles/PMC1645985/pdf/amjph00278-0081.pdf>]
- Persad, Govind, Alan Wertheimer, and Ezekiel J. Emanuel. "Principles for Allocation of Scarce Medical Interventions." *Lancet* 373 (31 January 2009) : 423-431. [[http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1016/S0140-6736\(09\)60137-9?nosfx=y](http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1016/S0140-6736(09)60137-9?nosfx=y)]
- Daniels, Norman. "When Are Health Inequalities Unjust: The Social Determinants of Health." *Just Health*, pp. 79-102. Cambridge: Cambridge University Press, 2008. [Courseweb]
- Lippert-Rasmussen, K., and N. Eyal. "Equality and Egalitarianism." In *Encyclopedia of Applied Ethics*, ed. Ruth Chadwick, pp. 141-148. San Diego: Elsevier, 2012. [Courseweb]

*Optional Readings:*

- Sen, Amartya K. "Why Health Equity?" *Health Economics* 11(2002): 659-666. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1002/hec.762?nosfx=y>]
- Segall, Shlomi. "Luck Prioritarian Justice in Health." In *Responsibility and Distributive Justice*, ed. Carla Knight and Zofia Stemplowska, pp. 246-265. Oxford: Oxford University Press, 2011. [Courseweb]
- Ottersen, Trygve. "Lifetime QALY Prioritarianism in Priority Setting." *Journal of Medical Ethics* 39 (2013): 175-180. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1136/medethics-2012-100740?nosfx=y>]
- Eyal, Nir. "Inequality in Political Philosophy and Epidemiology: A Remarriage." *Journal of Applied Philosophy* 35 (February 2018): 149-167. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1111/japp.12150?nosfx=y>]

**10/22: Ethical Issues in Cost-Effectiveness Analysis (Dan Wikler)***Required Reading:*

- Brock D et al, “Ethical and Distributive Considerations,” Ch. 12 of Peter Neumann et al, *Cost Effectiveness in Health and Medicine*, 2<sup>nd</sup> edition, Oxford U. Press 2016, pp. 319-341 [Courseweb]

*Supplementary Readings:*

- Brock D, “Cost Effectiveness and Disability Discrimination ,” *Economics and Philosophy*, 25 (2009) 27-47 [<http://journals.cambridge.org.ezp-prod1.hul.harvard.edu/action/displayFulltext?type=1&fid=5533320&jid=EAP&volumeId=25&issueId=01&aid=5533312>]
- Norheim O.F., et al. “Guidance on priority setting in health care (GPS Health): fairness and equity criteria not adequately captured by cost-effectiveness analysis” *Cost-Effectiveness and Resource Allocation* 12: 18, 2014 [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1186/1478-7547-12-18>]

**10/24: Harm Reduction (Allan Brandt)**

This session will assess the history and philosophy of health interventions that focus on reducing risks of morbidity and mortality. Over recent decades these strategies and technologies have proven controversial. These debates have centered on problems of reducing versus eliminating serious risks to health, and the relationship of alternative approaches. The class will center attention on several cases: methadone and other medically-assisted treatments for substance use disorders; safe-injection equipment and sites for opiate use; e-cigarettes and vaping technology to reduce tobacco related harms.

***Methadone and medically assisted treatment:***

- Riley, Diane, Ed Sawka, Peter Conley, David Hewitt, Wayne Mitic, Christiane Poulin, Robin Room, Eric Single, and John Topp. “Harm Reduction: Concepts and Practice. A Policy Discussion Paper.” *Substance Use & Misuse* 34, no. 1 (January 1, 1999): 9–24. [Courseweb]
- Kuehn, Bridget M. “Methadone Treatment Marks 40 Years.” *JAMA* 294, no. 8 (August 24, 2005): 887–89. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/1719708>]
- Kalk, Nicola J. “Harm Reduction in Opioid Treatment: An Established Idea under Threat.” *Addiction* 114, no. 1 (2019): 20–21. [<https://onlinelibrary-wiley-com.ezp-prod1.hul.harvard.edu/doi/full/10.1111/add.14468>]
- *Optional:* Gomart, Emilie. “Methadone: Six Effects in Search of a Substance.” *Social Studies of Science* 32, no. 1 (February 1, 2002): 93–135. [<https://journals-sagepub-com.ezp-prod1.hul.harvard.edu/doi/pdf/10.1177/0306312702032001005>]

***Safe injection of opiates:***

- Elliott, Denielle. “Debating Safe Injecting Sites in Vancouver’s Inner City: Advocacy, Conservatism and Neoliberalism.” *Contemporary Drug Problems*; London 41, no. 1 (Spring 2014): 5-40,3. [[https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/1524246552?accountid=11311&rfr\\_id=info%3Aaxri%2Fsid%3Aprimo](https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/1524246552?accountid=11311&rfr_id=info%3Aaxri%2Fsid%3Aprimo)]



- Meyers, Emilie, and Ellen Snyder. “Harm Reduction at Its Best: A Case for Promoting Safe Injection Facilities.” *University of Ottawa Journal of Medicine* 4, no. 2 (November 1, 2014). [<https://uottawa.scholarsportal.info/ottawa/index.php/uojm-jmuo/article/view/1052/1094>]

### ***E-cigarettes:***

- Fairchild AL, Lee JS, Bayer R, Curran J. “E-cigarettes and the harm-reduction continuum.” *N Engl J Med* 2018; 378:216-219. [<https://www-nejm-org.ezp-prod1.hul.harvard.edu/doi/10.1056/NEJMp1711991>]
- Abrams, D, Glasser AC, Pearson JL, Villanti AC, Collin LKs, and Niaura RS. “Harm Minimization and Tobacco Control: Reframing Societal Views of Nicotine Use to Rapidly Save Lives.” *Annu. Rev. Public Health* 2018. 39:193–213. [<https://www-annualreviews-org.ezp-prod1.hul.harvard.edu/doi/pdf/10.1146%2Fannurev-publhealth-040617-013849>]
- *Optional:* Chang, Andrew Y., and Michele Barry. “The Global Health Implications of E-Cigarettes.” *JAMA* 314, no. 7 (August 18, 2015): 663–64. [<https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2428965>]
- *Optional:* Dawson, Angus, and Marcel Verweij. “No Smoke Without Fire: Harm Reduction, E-Cigarettes and the Smoking Endgame.” *Public Health Ethics* 10, no. 1 (April 1, 2017): 1–4. [<https://doi.org/10.1093/phe/phx003>].

### **10/24 6:00-8:00 pm: PubMed Training (Paul Bain)**

### **10/29: Commodification: Selling Organs, Eggs, and Other Things (Glenn Cohen)**

- In Re Baby M, 537 A.2d 1227 (N.J. 1988) [Courseweb, taken from Joseph Singer, Property Law]
- Margaret Jane Radin. *Contested Commodities*. Cambridge: Harvard University Press, 1996. [Courseweb]
  - pp. 131-140 (Beginning of chapter on Prostitution and Baby Selling only until “A Special Case of Commissioned Adoptions”)
- Elizabeth S. Anderson, Is Women’s Labor a Commodity? 19 *Phil. & Pub. Affairs* 71 (1990) [<http://www.jstor.org.ezp-prod1.hul.harvard.edu/stable/2265363>]
- Cécile Fabre, *Whose Body Is It Anyway? Justice and the Integrity of the Person*. New York : Oxford University Press, 2006. [<http://www.oxfordscholarship.com.ezp-prod1.hul.harvard.edu/view/10.1093/0199289999.001.0001/acprof-9780199289998-chapter-6>]
  - Chapter 6 (Organ Sales)
- I. Glenn Cohen, Note: The Price of Everything, The Value of Nothing: Reframing the Commodification Debate, 117 *Harv. L. Rev.* 689 (2003) [<http://www.jstor.org.ezp-prod1.hul.harvard.edu/stable/3651950>]

**10/31: Responsibility for Health (Dan Wikler)***Required Reading:*

- Daniel Wikler. “Personal and Social Responsibility for Health.” In Sudhir Anand, Fabienne Peter, and Amartya Sen, eds. *Public Health, Ethics, and Equity*. Oxford: Oxford University Press, 2005, 107-131. [Courseweb]
- Steinbrook, Robert, “[Imposing Personal Responsibility for Health](#)” *NEJM* 355(8), Aug. 24 2006, 753-6.
- Scott Halpern, Peter Ubel, and David Asch, “[Harnessing the Power of Default Options to Improve Health Care](#).” *NEJM* 357(13), Sept. 27 2007, 1340-1344.

*Optional Reading on “Healthy Indiana” – designed by Seema Verma, current Administrator, Centers for Medicare and Medicaid Services*

- Seema Verma and Brian Neale, “[Healthy Indiana 2.0 is Challenging Medicaid Norms](#)”. *Health Affairs Blog*, Aug. 29, 2016
- Lewin Group, “[Indiana Healthy Indiana Plan 2.0: Interim Evaluation Report](#)”.
- Judith Solomon, “[Indiana Medicaid Waiver Evaluation Shows Why Kentucky’s Medicaid Proposal Shouldn’t Be Approved](#)”, Center for Budget and Policy Priorities, Aug. 1 2016

*Optional Reading:*

- Mounk Y. “The Age of Responsibility”. Ch 1 of his *The Age of Responsibility: On the Role of Choice, Luck and Personal Responsibility in Contemporary Politics and Philosophy* 2014 (Ph.D. dissertation; similar to his *The Age of Responsibility: Luck, Choice, and the Welfare State*, Harvard U. Press 2017); and as much of the rest of the work that you have time for.
- Barry, Brian, “The Cult of Personal Responsibility”, Part IV of his *Why Social Justice Matters* (Polity, 2005) [Courseweb]
- Eyal, Nir, Luck egalitarianism, harshness, and the rule of rescue. In SM Liao & C O’Neill *Current Controversies in Bioethics*. New York, Routledge; 2017. [Courseweb]
- Friedman L et al, “[Tobacco Industry Use of Personal Responsibility Rhetoric in Public Relations and Litigation: Disguising Freedom to Blame as Freedom of Choice](#),” *AmJ Public Health*. 2015;105:250–260.
- Kristin Voigt, “[Appeals to Individual Responsibility for Health: Reconsidering the Luck Egalitarian Perspective](#).” *Cambridge Quarterly of Healthcare Ethics* 22(2), April 2013, 146-158 [See also [erratum notice](#), *loc cit* July 2013 issue, 328-329]

- World Bank. 2015. “[World Development Report 2015: Mind, Society, and Behavior](#).” Washington, DC: World Bank. doi: 10.1596/978-1-4648-0342-0. License: Creative Commons Attribution CC BY 3.0 IGO]

**10/31 ASSIGNMENT DUE: Email Rebecca your final literature review/research proposal topic.**

## SECTION V: QUALITY (SECTION LEADER: ZIRUI SONG)

### 11/5: Health Care Organizations and Operations (Mariam Atkinson)

SA Snook and JC Connor. 2010. “Children’s Hospital and Clinics (A).” HBS Case #9-411-041. Boston: Harv Bus School Publishing. [Courseweb]

Please consider the following objectives and questions when reading the case:

#### Case Objectives:

- Analyze the linkage between structure and individual action in organizations
- Examine how healthcare organizations learn and improve over time

#### Case Preparation Questions:

1. With so many doctors in the room, what is the major reason you believe someone didn't save Matty?
2. What are some structural and cultural factors of the hospital you believe led to Matty's death?
3. How do you think clinicians' individual perspectives and decision-making played a role in this tragedy?
4. What are some solutions you would propose to prevent care delivery accidents from happening?

#### *Additional Readings:*

- Sutcliffe, Kathleen M., Lori Paine, and Peter J. Pronovost. "Re-examining high reliability: actively organising for safety." *BMJ Qual Saf* 26.3 (2017): 248-251. <https://qualitysafety-bmj-com.ezp-prod1.hul.harvard.edu/content/26/3/248.longLinks to an external site.>
- Hannah, Michael T., and John Freeman. "Structural inertia and organizational change." *American sociological review* (1984): 149-164. [https://www-jstor-org.ezp-prod1.hul.harvard.edu/stable/2095567?sid=primo&origin=crossref&seq=1#metadata\\_info\\_tab\\_contentsLinks to an external site.](https://www-jstor-org.ezp-prod1.hul.harvard.edu/stable/2095567?sid=primo&origin=crossref&seq=1#metadata_info_tab_contentsLinks to an external site.)
- Cannon, Mark D., and Amy C. Edmonson. "Failing to learn and learning to fail (intelligently): How great organizations put failure to work to innovate and improve." *Long range planning* 38.3 (2005): 299-319. <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.472.5356&rep=rep1&type=pdf>

**11/5 ASSIGNMENT DUE: Essay 1 (Politics or Decision Science)****11/7: Patient Safety and Medical Errors (Tom Sequist)**

- Bates DW, Gawande AA. Improving safety with information technology. *N Engl J Med*. 2003 Jun 19;348(25):2526-3 [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1056/NEJMsa020847?nosfx=y>]
  - Describes the ways that HIT can be used to improve safety
- Koppel R. Metlay JP. Cohen A. Abaluck B. Localio AR. Kimmel SE. Strom BL. Role of computerized physician order entry systems in facilitating medication errors. *JAMA*. 293(10):1197-203, 2005 Mar 9. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1001/jama.293.10.1197?nosfx=y>]
  - Illustrates the risks of healthcare IT.
- Buntin MB, Burke MF, Hoaglin MC, Blumenthal D. The benefits of health information technology: a review of the recent literature shows predominantly positive results. *Health Affairs*. 2011;30(3):464-71. [<https://www.healthaffairs-org.ezp-prod1.hul.harvard.edu/doi/abs/10.1377/hlthaff.2011.0178>]

**11/12: Scientific Basis of Quality Improvement (Don Goldmann)**

- Poots, Alan J, et al. “How to Attribute Causality in Quality Improvement: Lessons from Epidemiology.” *BMJ Quality & Safety*, 2017. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1136/bmjqs-2017-006756?nosfx=y>]
- Parry, et al. “Recommendations for Evaluation of Health Care Improvement Initiatives.” *Academic Pediatrics*, vol. 13, no. 6, 2013, pp. S23–S30. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1016/j.acap.2013.04.007?nosfx=y>]

**11/14: Clinical and Policy Efforts to Improve Quality (Zirui Song)***Required Reading*

- McGlynn EA, Asch SM, Adams J, Keesey J, Hicks J, DeCristofaro A, Kerr EA. The quality of health care delivered to adults in the United States. *N Engl J Med*. 2003 Jun 26;348(26):2635-45. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1056/NEJMsa022615?nosfx=y>]
- Wennberg J, Gittelsohn A. Small area variations in health care delivery. *Science* 1973;182:1102-1108. [<http://www.jstor.org.ezp-prod1.hul.harvard.edu/stable/1737008>]
- Blumenthal D. Quality of Health Care, Part 1: Quality of Care: What Is It? *N Engl J Med*. 1996 Sept 19; 335:891-94. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1056/NEJM199609193351213?nosfx=y>]

*Suggested Additional Reading*

- Levine DM, Linder JA, Landon BE. The quality of outpatient care delivered to adults in the United States, 2002 to 2013. *JAMA Intern Med.* 2016;176(12):1778-1790. [<http://ezp-prod1.hul.harvard.edu/login?url=http://dx.doi.org/10.1001/jamainternmed.2016.6217?nosfx=y>]

**11/19: Medical Malpractice (Anupam Jena)**

- Studdert DM, et. al., Claims, Errors, and Compensation Payments in Medical Malpractice Litigation. *N Engl J Med* 2006; 354:2024-2033. [<http://www.nejm.org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMsa054479>]
- Jena AB, et al., Malpractice Risk According to Physician Specialty. *NEJM* 2006;354:2024-3033. [<https://www-nejm-org.ezp-prod1.hul.harvard.edu/doi/full/10.1056/NEJMsa1012370>]
- Michael Frakes. The Impact of Medical Liability Standards on Regional Variations in Physician Behavior: Evidence from the Adoption of National-Standard Rules. *AER* 2013;103:257-76. [[https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/1283345547?accountid=11311&rfr\\_id=info%3Axri%2Fsid%3Aprimo](https://search-proquest-com.ezp-prod1.hul.harvard.edu/docview/1283345547?accountid=11311&rfr_id=info%3Axri%2Fsid%3Aprimo)]

**SECTION VI: PUBLIC HEALTH (SECTION LEADER: JOE NEWHOUSE)****11/20: Research on Firearms (David Hemenway)**

- Hemenway, D. Reducing Firearm Violence. In *Crime & Violence* 2017; 46:201-230. Tonry M, Nagin DS, eds. *Reinventing American Criminal Justice*. Chicago: University of Chicago Press, 2017. [Courseweb]
- Hemenway, David, Deborah Azrael, Andrew Conner, and Matthew Miller. "Variation in Rates of Fatal Police Shootings across US States: The Role of Firearm Availability." *Journal of Urban Health: Bulletin of the New York Academy of Medicine* 96, no. 1 (February 2019): 63–73. [<https://link-springer-com.ezp-prod1.hul.harvard.edu/article/10.1007%2Fs11524-018-0313-z>]

**11/26: Obesity: Causes, Consequences, and Solutions (Sara Bleich)**

- Abarca-Gómez L, Abdeen, ZA, Hamid ZA, et al. Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128·9 million children, adolescents, and adults. *The lancet.* 2017;390(10113): 2627-2642. [[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)32129-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)32129-3/fulltext)]

- This is a trends paper that highlights the global scope and scale of obesity. It has some nice maps of obesity ‘hot spots’ around the world
- Bleich SN, Cutler D, Murray C, Adams A. Why is the developed world obese? *Annual Review of Public Health*.2008;29:273-95. [<https://www-annualreviews-org.ezp-prod1.hul.harvard.edu/doi/pdf/10.1146/annurev.publhealth.29.020907.090954>]
  - There is a fair amount of controversy about whether the obesity epidemic is more due to too many calories or too little exercise. This paper pools all available data (at the time) to answer this question among adults. It also looks at macro drivers of over consumption of calories. It was my first dissertation paper. ☺
- Swinburn BA, Sacks G, Hall KD, et al. The global obesity pandemic: Shaped by global drivers and local environments. *The Lancet*, 2011;378(9793):804-14. [<https://www-sciencedirect-com.ezp-prod1.hul.harvard.edu/science/article/pii/S0140673611608131>]
  - This is a good overview paper since it talks about the burden of obesity, as well as causes, consequences, and potential solutions. It is part of a larger 2011 series in [Lancet](#), which is a great resource for interested students.
- Hawkes C, Smith TG, Jewell J, et al. Smart food policy alternatives for obesity prevention. *The Lancet*, 2015;385(9985):2410-21. [<https://www-sciencedirect-com.ezp-prod1.hul.harvard.edu/science/article/pii/S0140673614617451>]
  - This is a good overview paper on possible food policy alternatives for obesity prevention. It is part of the second 2015 [Lancet](#) series on obesity. For those of you interested in the clinical side of obesity, here is the most recent 2017 in [Lancet](#).
- Roberto CA, Lawman HG, LeVasseur MT, Mitra N, Peterhans A, Herring BJ, Bleich SN (2019). Association of a beverage tax on sugar and artificially-sweetened beverages with changes in beverage prices and sales at chain retailers in a large urban setting. *Journal of the American Medical Association*. 321(18):1799-1810. <https://jamanetwork-com.ezp-prod1.hul.harvard.edu/journals/jama/fullarticle/2733208>
  - These are results from the Philly beverage tax – it is looking at the impact on prices and sales in large chain stores.

### 11/28: No Class (Thanksgiving)

### 12/3: Discussion/Debate Session (Laura Garabedian)

We will hold a debate on the legalization of recreational marijuana.

Please read the following prior to the session. Additional (optional) background reading can be found in the debate prompt documents.

- Debate prompt [Courseweb – to be posted]

**12/3 ASSIGNMENT DUE: Essay 2 (Ethics or Quality)**

**12/4-12/9 FALL READING PERIOD**

**12/10-12/19 FALL EXAM PERIOD**

**12/10 ASSIGNMENT DUE: Literature Review**

**12/21–1/26 WINTER RECESS**