

School of Public Health

Syllabus and Course Information



UNIVERSITY OF MINNESOTA
Driven to DiscoverSM

PubH 6735 Principles of Health Policy Spring 2017

Credits: 3

Meeting Place: Online

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I. Course Description

The purpose of this course is to introduce students to the policy environment that influences and shapes public health and the provision of health care services, to enhance understanding of the historical and political context of health policy, to develop strategies for analysis of health policy issues, and to communicate effectively in the policy environment. Through lectures, readings, collaborative debate and discussion, oral presentation, written work, social media participation, and direct engagement with policymakers students will develop the background and skills to approach a range of problems in the interdisciplinary field of public health, where the major policy issues are constantly evolving. As a result, this course aims to convey not just specific facts, but to help students develop the ability and confidence to critically assess current health policy issues in a thoughtful, comprehensive, and rigorous manner and to engage in the policy process. While the course content focuses on the U.S. health care environment, policy analytic and communication skills are presented in a way that is transferrable to other contexts.

The goal of the course is to teach the following **specific professional skills**:

1. Familiarity with the legislative aspects of the health policy process
2. Effective written, oral, and/or in-person communication with a legislator about a public health policy issue
3. Experience defining a public health policy problem and diagnosing the political nature of the problem
4. Writing an issue brief to communicate the magnitude, significance, and urgency of a policy problem to a policy audience
5. Preparing and giving an elevator speech to demonstrate persuasive speaking within time constraints
6. Writing and submitting an Op/Ed with an appropriately targeted policy message, using news media, for a lay audience
7. Writing a policy proposal that analyzes potential solutions to complex health policy challenges and presents a clearly-justified, feasible and appropriate recommendation to a policy audience

II. Course Prerequisites

This course is open to students in the following SPH degree programs: MPH, MHA, MS, PhD; students in the MPA program at HHH; or instructor consent. Basic knowledge of the U.S. health care system is required for this course and can be obtained by taking PubH 6724: The Health Care System and Public Health.

III. Course Goals and Objectives

The **broad learning objectives** of this course are as follows:

1. Identify key stakeholders in U.S. health care policy and understand the historical and contemporary roles that they play in the policymaking process.
2. Understand the context in which health policy is created at the state and federal levels, including the influence of values, ideology, institutions, government structures, public opinion, ethics and research.
3. Demonstrate transferable analytic skills within a general framework, and apply these skills to fluently discuss and engage in current policy debates in the fields of public health and health care.
4. Frame and analyze complex health policy challenges, synthesize and effectively communicate ideas through written and oral work.

Several excellent courses taught within SPH highlight other aspects of public health policy, including prevention strategies (PubH 6078, EpiCH), legislative advocacy (PubH 6049, EpiCH), skills for policy development (PubH 6045, EpiCH), and environmental and occupational health policy (PubH 6105, EnvHS).

IV. Methods of Instruction and Work Expectations

Teaching and learning:

This class will utilize a variety of learning techniques, including lecture, discussion, peer feedback, and both oral and written presentations of policy analyses. This course is intended to impart key policy analytic skills and to foster an environment of peer learning and collaboration as professionals and colleagues; as such, you are expected to attend lectures, complete the readings, and actively participate within your small group and the larger class. Each activity and assignment has a purpose and each reading was chosen judiciously, knowing that you are busy professionals with competing priorities. Please read the assignments document in its entirety. This outlines all of the required work for the course and describes how the assignments build upon one another and link to course content. We do not believe in busy work and will respect your time and endeavor to focus on skill-building, practical activities. Lectures, assignments, and peer interactions are grounded in the assigned readings, so please complete the weekly reading assignments. Your preparation and participation are vital to the success of the course.

Social media:

The course has a dedicated twitter account (@PubH6735), which will be actively managed during class. We encourage students to join twitter and use social media for conversation and dissemination of relevant information during the semester. Twitter participation is not required, but it is encouraged as a means of both class participation and engagement with legislators and a broader policy community. To that end, we would encourage you to consider following your state and federal legislators on twitter, as well as the course instructors (Dr. Kozhimannil: @katybkoz, Megan Lahr: @mlahr1008, Anna Irestone: @AnIrestone, Sundal Hashwani: @SundalHashwani, Maddie Johnson: @MadelineJayneJ) or other faculty, advocacy groups relevant to your issue area, and potentially also health policy wonks, journalists, or news sites (these are just suggestions, not endorsements): Julia Belluz (@juliaoftoronto), Tara Haelle (@tarahaelle), Jonathan Cohn (@CitizenCohn), Sarah Kliff (@sarahkliff), Dan Diamond (@ddiamond), Camara Jones (@CamaraJones), Ashish Jha (@ashishkjha), Austin Frakt (@afrakt), Emma Sandoe (@emma_sandoe), Aaron Carroll (@aaronecarroll), Adriana McIntyre (@onceuponA), StatNews (@statnews), Vox.com (@voxdotcom), Systemic Disease (@systemicdisease).

Communication:

Establishing clear and effective communication between the instructor team and the students in this course is a top priority. To this end, we would like to share the following guidelines and expectations:

- We encourage you to interact with us via office hours. We encourage you to email questions in advance or share documents on which you would like comments or feedback.
- We will respond to emails within 24 hours, Monday-Friday. Emails sent after 5pm CT on Friday will not likely be answered before Monday morning at 9am; please plan accordingly.
- If you anticipate challenges in meeting the expectations of the course for any reason, please contact us as soon as possible, ideally well in advance of the anticipated challenge.

V. Course Text and Readings

The course requires a combination of readings from a seminal text (Kingdon), a contemporary text (Dawes), journal articles, book chapters, and reports. The Kingdon text provides a foundational policy analytic framework and historical context for the current health policy environment. The Dawes book, articles and reports illustrate current health policy issues, provide timely analysis, and highlight specific applications of policy in the fields of health care and public health. The textbooks are available at the U of M Bookstore and also through online retailers, such as amazon.com.

Required textbooks:

Kingdon JW. *Agendas, Alternatives, and Public Policies, Updated edition with epilogue on health care (2nd ed.)*, New York, Longman Publishers, 2010.

Dawes DE. *150 Years of ObamaCare*. Johns Hopkins University Press, 2016.

Required readings must be completed prior to each week's lecture. Optional readings are provided for those who have particular interest in a topic or for those who seek to strengthen their knowledge base in key areas.

Optional additional text resources:

1. House JS. *Beyond Obamacare: Life, Death, and Social Policy*. Russell Sage Foundation, 2015. This is an extraordinarily interesting look at the intersection of policy and social determinants in the wake of the 2010 Affordable Care Act.
2. Starr P. *Remedy and Reaction: The Peculiar American Struggle over Health Care Reform*. Yale University Press, 2013 revised edition. A brilliant historical sociologist's perspective on the history of health reform in the US and how it culminated in the 2010 passage of the Affordable Care Act.
3. Bodenheimer TS, Grumbach K. *Understanding Health Policy: A Clinical Approach, 6th edition*. New York, Lange Medical Books/McGraw-Hill; 2012. This is a key health policy text used in training clinicians; provides particularly good information on organizational and financial logistics of the health care delivery system and health care reform, from a clinician's perspective.
4. Longest BB. *Health Policymaking in the United States*. Health Administration Press and AUPHA Press; 2010. This is a recent and comprehensive health policy text; it provides useful discussion of health policy formulation and implementation along with an exposition of recent health-related legislation (Appendix 3). Although it was published in 2010, it does not contain information on the recent landmark health care reform. For more on health care reform, see:
5. Jacobs L, Skocpol T. *Health Care Reform and American Politics: What Everyone Needs to Know*. Oxford University Press; 2010. This text provides an excellent political science perspective on health care reform in the US.

VI. Course Outline/Weekly Schedule

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Jan 17-21</p> <p>Week 1: Intro to U.S. Health Care Policy and Orientation to the Course (Problem Stream)</p> <ul style="list-style-type: none"> To describe the course and goals and expectations for students To provide an overview of the U.S. health care delivery system and the role of policy in shaping it 	<ul style="list-style-type: none"> Course Introduction Health Care in America Interviews with Jon Welch and Lynn Blewett 	<ul style="list-style-type: none"> Welch J. "As She Lay Dying: How I Fought to Stop Medical Errors from Killing My Mom." <i>Health Affairs</i>. 31, no.12 (2012):2817-2820. Carroll, A. (2015, September 21). Trapped in the System: A Sick Doctor's Story. <i>The New York Times</i>. <p>For a better understanding of the current policy context:</p> <ul style="list-style-type: none"> Wilensky GR. "The Future of the ACA and Health Care Policy in the United States." <i>JAMA</i>. Published online November 28, 2016. Oberlander J. "The End of Obamacare." <i>NEJM</i>. Published online November 16, 2016. Obama B. "Repealing the ACA without a Replacement — The Risks to American Health Care." <i>NEJM</i>. Published online January 6, 2017. 	<ul style="list-style-type: none"> Complete the Introductions Forum by Thursday 1/26 Complete the About Me survey by Friday 1/27 Complete the Syllabus Quiz by Friday 1/27
<p>Jan 23 – 29</p> <p>Week 2: Identifying Policy Problems and Framework for Policy Analysis (Problem Stream)</p> <ul style="list-style-type: none"> To give a brief overview of the politics of health policy To discuss the process of identifying problems with potential policy solutions To present a framework for policy analysis, and identify how each of the components of this course fit into the framework To provide clear and concrete examples of policy analytic writing 	<ul style="list-style-type: none"> Politics of Health Policy Suggested Approach to Policy Analysis (the framework for developing our policy toolkit) Framework for Analysis Identifying Policy Problems 	<ul style="list-style-type: none"> Kington book—Ch 1 pg. 1-20, Ch 5 pg 90-115 O'Hare M. A Typology of Governmental Action. <i>Journal of Policy Analysis and Management</i>. 8(4):670-672;1989. Top ten writing tips and the psychology behind them Please briefly review the Professional Examples at the top of the Moodle site (these examples do not follow the same format that we use in class, but demonstrate policy writing in the real world). Student Examples are also available on the Moodle site as a reference for writing style for your assignments. <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> While our course uses a policy-analytic framework derived from Kingdon, another helpful model is presented in the following book: Bardach, Eugene. <i>A Practical Guide for Policy Analysis: The Eightfold Path to More Effective Problem Solving</i>. Frick, T., Dagli, C., Barrett, A., Myers, R., & Kwon, K. (2016). <i>How to recognize plagiarism: Tutorial and tests</i>. Bloomington, IN: Department of Instructional Systems Technology, School of Education, Indiana University. 	<ul style="list-style-type: none"> Assignment 1, Part A: List Your Legislators (due Friday 1/27)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Jan 30 - Feb 5</p> <p>Week 3: History of National Health Reform Efforts (Problem Stream)</p> <ul style="list-style-type: none"> To describe past efforts to reform the U.S. health care system To identify reasons for success or failure of past efforts and to understand the contemporary relevance of the historical context of health reform 	<ul style="list-style-type: none"> History of the National Health Insurance/Health Reform Debate: Teddy Roosevelt through LBJ and Medicare lecture History of the National Health Insurance/Health Reform Debate: Nixon through Obama and the ACA lecture Highlighting Political Lessons lecture 	<ul style="list-style-type: none"> Kingdon book—Epilogue 231-247 Dawes book—Ch 2, pg 23-54 Blumenthal D, Morone J. The Lessons of Success - Revisiting the Medicare Story. <i>The New England Journal of Medicine</i>. 359(22); 2384-2389, 2008. Starr P. Transformation in Defeat: The Changing Objectives of National Health Insurance, 1915-1980. <i>American Journal of Public Health</i>, 72(1);78-88,1982. <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> Hacker J. The Historical Logic of National Health Insurance: Structure and Sequence in the Development of British, Canadian, and U.S. Medical Policy. <i>Studies in American Political Development</i>, 12(1)57-130,1998. Starr P. <i>Social Transformation of American Medicine</i>, New York, Basic Books, 1982. Dawes book – Ch 6, pg 192-225. 	<ul style="list-style-type: none"> Assignment 2, Part A: Issue Brief Topic Selection (due Friday 2/3) Assignment 2, Part B: Issue Brief Critical Review (due Friday 2/3)
<p>Feb 6 – 12</p> <p>Week 4: Costs, Quality, and Disparities (Problem Stream)</p> <ul style="list-style-type: none"> To provide an overview of the challenges faced in improving access and quality of health care in the U.S. To reflect on the costs of disparities in U.S. health care To reflect on the scope and reasons for increasing costs of U.S. health care To conduct a peer review of issue briefs 	<ul style="list-style-type: none"> Costs of Health Care by Rachel Hardeman Quality of Health Care in the United States by Rachel Hardeman Videos on Finding Data Sources for Your Issue Briefs by Natalie Noha and Laura Attanasio 	<ul style="list-style-type: none"> Newkirk. VR. America's Health Segregation Problem. <i>The Atlantic</i>. May 18, 2016. Ayanian JZ. The Costs of Racial Disparities in Health Care. <i>The Harvard Business Review</i>. October 1, 2015. Dieleman JL, Baral R, Birger M, et al. US Spending on Personal Health Care and Public Health, 1996-2013. <i>JAMA</i>. 2016;316(24):2627-2646. LaVeist TA, Gaskin D, Richard P. Estimating the Economic Burden of Racial Health Inequalities in the United States. <i>Int J Health Serv</i>. 41(2):231-8, 2011. <p>If you have not already read these seminal papers on health care quality, please read them:</p> <ul style="list-style-type: none"> McGlynn E, Asch SM, Adams J, et al. The Quality of Health Care Delivered to Adults in the United States. <i>The New England Journal of Medicine</i>. 348(26): 2635-2645, 2003. Berwick D. A user's manual for the IOM's "Quality Chasm" report. <i>Health Affairs</i>. 21(3):80–90, 2002. Smedley, B, Stith, A, Nelson, A. <i>Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care (Executive Summary)</i>. 	<ul style="list-style-type: none"> Assignment 2, Part C: Issue Brief Peer Review (draft due Friday 2/6, feedback due Friday 2/10)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Feb 13 - 19</p> <p>Week 5: Government Institutions and Processes; Obamacare (Politics Stream)</p> <ul style="list-style-type: none"> To delineate the key government structures and institutions involved in health care policy making To understand the steps and processes involved in creating legislation in health policy To use the recent health reform law as a case study in congressional legislative action 	<ul style="list-style-type: none"> The U.S. Congress and Health Policy The Patient Protection and Affordable Care Act The Aftermath: Efforts to Undo Obamacare Listen to interviews with Sachin Jain (HITECH Act) and Traci Toomey (alcohol policy) Watch the Schoolhouse Rock videos 	<ul style="list-style-type: none"> Kingdon book—Ch 2 pg 21-44, Ch 4 pg 71-89 Dawes book—Ch 5: Brushes with Death: How many lives does Obamacare have? Pg 163-187 Oleszek M, Oleszek W. "Legislative Sausage Making: Health Reform in the 111th Congress." in Party and Procedure in the U.S. Congress. Straus JR (ed). Roman and Littlefield Publishers, Inc. 2012. Kliff S. "I read 7 Republican Obamacare replacement plans. Here's what I learned." Vox November 17, 2016 Pollack, H. "Here's why creating single-payer health care in America is so hard." Vox. January 16, 2016. <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> KFF tutorials on Congress and Health Policy and on Health Policy and the Federal Budget Cohen J. 2010. "The Inside Account of Health Care Reform's Triumph." New Republic, June 10, 1425. Seidman, L. The Affordable Care Act versus Medicare for All. Journal of Health Politics, Policy and Law. 40(4): 911-921, 2015. Pollack, H. Medicare for All - If It Were Politically Possible - Would Necessarily Replicate the Defects of Our Current System. Journal of Health Politics, Policy and Law. 40(4): 923-931, 2015. 	<ul style="list-style-type: none"> No assignments due
<p>Feb 20 - 26</p> <p>Week 6: Stakeholders and Ideology (Politics Stream)</p> <ul style="list-style-type: none"> To identify key stakeholders and to understand the role they play in the creation of health policy To evaluate the role of campaigns and elections in governance To discuss ideology and political parties in the context of health policy 	<ul style="list-style-type: none"> Stakeholders & Interest Groups Campaigns, Elections, and Health Policy 	<ul style="list-style-type: none"> Kingdon book—Ch 3 pg 45-57 Berman ML. From Health Care Reform to Public Health Reform. Journal of Law, Medicine, and Ethics. 39(3);328-339, 2011. Jacobs LR. What Health Reform Teaches Us about American Politics. Political Science & Politics. 43: 619-623, 2010. <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> Bodenheimer T. The Political Divide in Health Care: A Liberal Perspective. <i>Health Affairs</i> 24(6):1426-1435, 2005. Butler SM. The Conservative Agenda for Incremental Reform. <i>Health Affairs</i> 150-161, 1995. 	<ul style="list-style-type: none"> Assignment 2, Part C: Issue brief (due Friday 2/24)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Feb 27 - Mar 5</p> <p>Week 7: Advocacy, Power, and Privilege in Political Processes (Politics Stream)</p> <ul style="list-style-type: none"> To discuss the role of power and privilege in shaping policy dialogue related to health equity 	<ul style="list-style-type: none"> Guest Lecture by Patrick Ness & Rinal Ray, Parts 1, 2, 3 Example of a Texas legislator giving a brief weekly update Utah state legislature Elevator Pitches by Senators Dayton and Weiler 	<ul style="list-style-type: none"> Hardeman, R, Medina, E, & Kozhimannil, K. 2016. Structural Racism and Supporting Black Lives - The Role of Health Professionals. <i>New England Journal of Medicine</i>. Ellsworth E. "How to effectively talk to your member of Congress." and optionally, you may wish to invest in "Call the Halls: contacting your member of Congress the smart way." November 2016. Bierschbach B. "A citizen's guide to effectively engaging Minnesota lawmakers." <i>MinnPost</i>. December 19, 2016. PolicyLink's Getting Equity Advocacy Results Race Forward's Racial Equity Impact Assessment CEP Think Tank <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> Fall 2016 NYU syllabus for a course being taught about the Black Lives Matter movement 	<ul style="list-style-type: none"> Assignment 1, Part B: Strategy Memo (due Friday 3/3) Take the Implicit Association Test
<p>Mar 6 – 12</p> <p>Week 8: Media and Public Opinion (Politics Stream)</p> <ul style="list-style-type: none"> To describe the role of the media in the policymaking process To understand the general orientation of the American public around health policy issues and changes over time in public opinion about health policy 	<ul style="list-style-type: none"> Media and Public Opinion, guest lecture by Sarah Gollust 	<ul style="list-style-type: none"> Kingdon book—Ch 3 pg 57-70 Brodie M, Altman D, Deane C, Buscho S, Hamel E. Liking The Pieces, Not The Package: Contradictions In Public Opinion During Health Reform. <i>Health Affairs</i>. 29(6): 1125-1130, 2010. Jacobs, L.R. and Mettler, S. 2011. Why Public Opinion Changes: The Implications for Health and Health Policy. <i>JHPPL</i> 36(6): 917-933. Fowler, Gollust "The content and effect of politicized health controversies" <i>Annals, AAPPSS</i>, March 2015 	<ul style="list-style-type: none"> Assignment 3: Elevator Speech (due Friday 3/10, responses due Friday 3/20) Health Policy Public Opinion Data Exercise (optional - strongly encouraged!)
<p>Mar 13 - 19</p>	<p>SPRING BREAK</p>		<ul style="list-style-type: none">

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Mar 20 – 26</p> <p>Week 9: Generating Policy Ideas and Agenda Setting (Policy Stream)</p> <ul style="list-style-type: none"> To develop an understanding of how particular policy problems rise to the top of the political agenda To describe the way in which potential solutions, alternatives, and policy proposals are generated and prioritized To learn how to take advantage of opportunities to present an idea and shape an agenda To begin to explore the role of media and public opinion in health policy 	<ul style="list-style-type: none"> Generating Policy Ideas and Setting a (Successful) Legislative Agenda - guest lecture by Lauren Gilchrist Generating Policy Ideas & Agenda-Setting 	<ul style="list-style-type: none"> Kingdon book—Ch 8, 9 pg 165-208; please skin Ch 6 pg 116-144 Dawes book—Ch 7, pg 238-253 Summary of Governor Dayton's equity proposal for the 2016 legislative session Overview of MN Senate equity proposal Voices for Racial Justice 2016 Legislative Report Card Thornton RL, Glover CM, Cene CW, Glik DC, Henderson JA, & Williams DR. 2016. Evaluating Strategies for Reducing Health Disparities by Addressing the Social Determinants of Health. Health Affairs, 35(8), 1416-1423. <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> Pacheco, J., & Boushey, G. (2014). Public health and agenda setting: determinants of state attention to tobacco and vaccines. Journal of Health Politics, Policy & Law, 39(3), 565-89. 	<ul style="list-style-type: none"> Assignment 4: Op Ed (due Friday 3/24)
<p>Mar 27 - Apr 2</p> <p>Week 10: Influencing the Policy Process (Policy Stream)</p> <ul style="list-style-type: none"> To understand the role of lobbyists in setting the policy agenda To hear firsthand perspectives about the strategies, challenges, and opportunities faced by those who seek to influence health policy 	<ul style="list-style-type: none"> Interviews with Bindiya Patel and Sachin Jain Lobbyist Panel of experts who share firsthand perspectives about the strategies, challenges, and opportunities faced by those who seek to influence health policy and the delivery of health care 	<ul style="list-style-type: none"> Kersh, R. Lobbyists - Ten Myths about Power and Influence from Part III, The Health Policy Process in Monroe, Litman, and Robbins. Health Politics and Policy. 4th ed. Delmar Cengage Learning, 2008. Mebane F, Blendon R. Political Strategy 101: How to Make Health Policy and Influence Political People. Journal of Child Neurology.16:513-519, 2001. The Onion: American People Hire High-Powered Lobbyist to Push Interests in Congress 	<ul style="list-style-type: none"> Assignment 5, Part A: Policy Proposal Critical Review (due Friday 3/31)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Apr 3 - 9</p> <p>Week 11: Policy in Action - From Idea to Law (Policy Stream)</p> <ul style="list-style-type: none"> To consolidate the main concepts of the semester and connect course content with professional skills within the policy process To understand the politics, complexity, and eventual impacts of the way in which health laws and policies are implemented To provide a policy perspective on how innovative ideas become policy realities To conduct peer review of policy proposals for classmates 	<ul style="list-style-type: none"> Policy in Action: From Idea to Law 	<ul style="list-style-type: none"> Kozhimannil KB, Hardeman R, Attanasio L, Blauer-Peterson C, O'Brien M. Doula care and birth outcomes: the potential for improving care and reducing costs for diverse, low-income women. <i>American Journal of Public Health</i>, 2013;103(4): e113-121. Kozhimannil KB, Hardeman RR. Coverage for doula services: How state Medicaid programs can address concerns about maternity care costs and quality. <i>Birth</i>, 2016; 43(2)97-99. Hodnett ED, Gates S, Hofmeyr G, Sakala C. Continuous support for women during childbirth. <i>Cochrane Database of Systematic Reviews</i> 2013, Issue 7. Minnesota statutes, Chapter 108, HF1233, Art. 6, Sec. 11, Doula services medical assistance (MA) coverage requirement 	<ul style="list-style-type: none"> Assignment 5, Part B: Policy Proposal Peer Review (due Monday 4/3, feedback due Friday 4/7)
<p>Apr 10 - 16</p> <p>Week 12: After a Bill Becomes Law: Evaluation, Implementation (Policy Stream)</p> <ul style="list-style-type: none"> To discuss key issues in policy implementation To present the logic model as a conceptual framework for policy evaluation To describe real-world implementation and evaluation 	<ul style="list-style-type: none"> Implementation Evaluation Consolidation 	<ul style="list-style-type: none"> Kozhimannil KB, Almanza J, Vogelsang CA, Hardeman RR. Medicaid Coverage of Doula Services in Minnesota: Findings from the first year. University of Minnesota. Executive Summary. December 2015. Rulemaking in Minnesota: A Guide Review Minnesota legislature website on rulemaking: Healthcare in America: Going Public and Private, <i>The Economist</i>. December 21, 2013 <p><i>Optional Readings</i></p> <ul style="list-style-type: none"> U.S. Centers for Disease Control and Prevention. Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide 	<ul style="list-style-type: none"> Assignment 5, Part C: Policy Proposal (due Friday 4/14)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Apr 17 – 23</p> <p>Week 13: The Interaction Between Legislative and Executive Agencies in Implementation and Policymaking (Policy Stream)</p> <ul style="list-style-type: none"> To understand how research and information inform health policy (or not) To understand the role of state and federal agencies in policymaking To describe how legislative and executive agencies interact in the process of policy implementation To hear firsthand perspectives about the strategies, challenges, and opportunities for agencies to influence implementation of policies 	<ul style="list-style-type: none"> Guest lecture by Jon Christenson: Medicare Part 1 and 2 Guest lecture by Amy Dellwo: Role of State and Federal Agencies in Policymaking & Strategies, Opportunities and Challenges for Influencing Implementation of Policies Pathways Between Evidence & Policy Problems with the Evidence in Health Policy 	<ul style="list-style-type: none"> Glied SA, Miller EA. Economics and Health Reform: Academic Research and Public Policy. Med Care Res Rev August 2015 vol. 72 no. 4 379-394. Kristof, N. Professors, We Need You! New York Times, February 16, 2014 Gold M. Pathways to the Use of Health Services Research in Policy. Health Services Research 44(4):1111-1135, 2009. <p>Optional</p> <p>Pauly M. What researchers don't yet know about the ACA. ASHEcon Presidential Address, July 2016. http://ldi.upenn.edu/news/what-researchers-dont-yet-know-about-aca</p>	<ul style="list-style-type: none"> Assignment 1, Part C: Next Steps Memo (due Friday 4/21)

Topic, Stream, Goals	Lectures	Readings	Assignments & Activities
<p>Apr 24 - 30</p> <p>Week 14: Feedback Loops: Evidence, Ethics, and Policymaking (Policy Stream)</p> <ul style="list-style-type: none"> To describe some of the limitations of health policy research for policymaking To frame health policy issues in the context of ethical trade-offs and uncertainty To consider the recent example of postpartum depression screening legislation as a case of the complex relationship between evidence and public policy 	<ul style="list-style-type: none"> Postpartum Depression Screening Legislation 	<ul style="list-style-type: none"> Aitkins D, Siegel J, Slutsky J. Making Policy When the Evidence is in Dispute. <i>Health Affairs</i> 24:102-113, 2005. Kozhimannil KB, Adams AS, Soumerai SB, Busch AB, Huskamp HA. New Jersey's postpartum depression screening law did not change treatment patterns for women on Medicaid. <i>Health Affairs</i>. 30(2):293-301, 2011. Leavens A, Arthurs E, Thombs BD. Should Postpartum Depression Screening Policies Be Reevaluated? <i>Health Affairs</i> 30(6):1216-1217, 2011. Stone SD. Study Challenges Effectiveness of NJ PPD Initiatives for Medicaid Populations. <i>Perinatal Pro Blog</i>. February 7, 2011. Belluck P. Panel Calls for Depression Screening During and After Pregnancy. <i>New York Times</i>. January 26, 2016 <p><i>Optional Readings:</i></p> <ul style="list-style-type: none"> Majumdar SR, Soumerai SB. The Unhealthy State of Health Policy Research. <i>Health Affairs</i> 28(5):900w-908w, 2009 	<ul style="list-style-type: none"> Assignment 5, Part C: One-Pager (due Friday 4/28)
<p>May 1 - 7</p> <p>Week 15: Student Presentations</p> <ul style="list-style-type: none"> To summarize your public health policy work over the course of the semester To clearly, concisely present your policy issue, proposed solution, and experience interacting with a legislator to influence policy on this topic. 			<ul style="list-style-type: none"> Assignment 6: Final Presentations (due Monday, 5/1, responses due Friday 5/5)

VII. Evaluation and Grading

This course utilizes a criterion-referenced grading system in order to enhance collaboration and shared learning. The course is graded out of a total of 100 points, which are earned through class participation as well as the completion of written and oral assignments. Please carefully follow the instructions in the Detailed Assignments Document, and the format laid out in the Suggested Approach to Policy Analysis. These two documents provide crucial information about the course requirements and the skills we are building. Please contact us with questions about the goals, required format, or evaluation criteria for each assignment.

Class participation 10 points

Points are earned by 1) participation in full-class and small group discussions, 2) preparation for and participation in interactive learning with peers, and 3) insightful questions, broad engagement with policy issues and course content, including on the forums on the course website, or via twitter.

Written/oral assignments 90 points

Specific evaluation criteria will be distributed with each assignment.

- Assignment 1: Contact legislator (9 points)
- Assignment 2: Issue brief (21 points)
- Assignment 3: Elevator speech (8 points)
- Assignment 4: Op/Ed (10 points)
- Assignment 5: Policy proposal (33 points)
- Assignment 6: Presentation (9 points)

Late assignments

All assignments must be submitted at the assigned time (Central Time) on the stated due date. *Late work will be penalized either ½ point or 10% of the total points for each day it is late, whichever is greater.* Exceptions may be granted by the instructor on a case-by-case basis. If you anticipate having difficulty meeting due date deadline(s), you must make *prior* arrangements to be eligible for full credit on your work. Students must contact the instructor in advance of the deadline, and the instructor must agree that the student's circumstances warrant a new deadline. If you think an excuse may be tenuous; it is. Students with disabilities are also encouraged to contact Disability Services to have a confidential discussion of their individual needs for accommodations.

Grade disputes

If you wish to dispute the number of points you receive on a class assignment, you must do so *in writing* not more than 1 week after receiving your grade. You must submit a request (500 words maximum) that includes a specific rationale for why the assignment deserves a higher grade and where additional points were earned but not allocated. The instructor reserves the right to either increase or decrease the final point allocation upon review, based upon the merits of the assignment and the request.

Grading scale

The following grading scale is based on *Teaching at the University of Minnesota: A Handbook for Faculty and Instructional Staff*. University of Minnesota, Center for Teaching and Learning Services. Available at: <http://www1.umn.edu/ohr/teachlearn/facbook.pdf>

A	95 - 100
A-	90 – 94
B+	85 – 89
B	80 – 84
B-	75 – 79
C+	70 – 74
C	65 – 69
C-	60 – 64
D+	55 – 59
D	50 - 54
F	< 50

Those choosing an S/N grading option must complete all assignments and pass with a C- letter grade determined by total effort.

- S Represents achievement that is satisfactory, which is equivalent to a C- or better unless specifically designated in writing by the instructor at a higher level of acceptable performance.
- N Represents no credit and signifies that the work was not completed at a level of achievement and carries no grade points.

Course Evaluation

The SPH will collect student course evaluations electronically using a software system called CourseEval: www.sph.umn.edu/courseeval. The system will send email notifications to students when they can access and complete their course evaluations. Students who complete their course evaluations promptly will be able to access their final grades just as soon as the faculty member renders the grade in SPHGrades: www.sph.umn.edu/grades. All students will have access to their final grades through OneStop two weeks after the last day of the semester regardless of whether they completed their course evaluation or not. Student feedback on course content and faculty teaching skills are an important means for improving our work. Please take the time to complete a course evaluation for each of the courses for which you are registered.

Incomplete Contracts

A grade of incomplete "I" shall be assigned at the discretion of the instructor when, due to extraordinary circumstances (e.g., documented illness or hospitalization, death in family, etc.), the student was prevented from completing the work of the course on time. The assignment of an "I" requires that a contract be initiated and completed by the student before the last official day of class, and signed by both the student and instructor. If an incomplete is deemed appropriate by the instructor, the student in consultation with the instructor, will specify the time and manner in which the student will complete course requirements. Extension for completion of the work will not exceed one year (or earlier if designated by the student's college). For more information and to initiate an incomplete contract, students should go to SPHGrades at: www.sph.umn.edu/grades.

University of Minnesota Uniform Grading and Transcript Policy - A link to the policy can be found at onestop.umn.edu.

VIII. Other Course Information and Policies

***This section of the syllabus contains information that is required by the School of Public Health and pertains to all courses taught in the school.**

Grade Option Change (if applicable)

For full-semester courses, students may change their grade option, if applicable, through the second week of the semester. Grade option change deadlines for other terms (i.e. summer and half-semester courses) can be found at onestop.umn.edu.

Course Withdrawal

Students should refer to the Refund and Drop/Add Deadlines for the particular term at onestop.umn.edu for information and deadlines for withdrawing from a course. As a courtesy, students should notify their instructor and, if applicable, advisor of their intent to withdraw.

Students wishing to withdraw from a course after the noted final deadline for a particular term must contact the School of Public Health Office of Admissions and Student Resources at sph-ssc@umn.edu for further information.

Student Conduct Code

The University seeks an environment that promotes academic achievement and integrity, that is protective of free inquiry, and that serves the educational mission of the University. Similarly, the University seeks a community that is free from violence, threats, and intimidation; that is respectful of the rights, opportunities, and welfare of students, faculty, staff, and guests of the University; and that does not threaten the physical or mental health or safety of members of the University community.

As a student at the University you are expected adhere to Board of Regents Policy: *Student Conduct Code*. To review the Student Conduct Code, please see:

http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf.

Note that the conduct code specifically addresses disruptive classroom conduct, which means "engaging in behavior that substantially or repeatedly interrupts either the instructor's ability to teach or student learning. The classroom extends to any setting where a student is engaged in work toward academic credit or satisfaction of program-based requirements or related activities."

Use of Personal Electronic Devices in the Classroom

Using personal electronic devices in the classroom setting can hinder instruction and learning, not only for the student using the device but also for other students in the class. To this end, the University establishes the right of each faculty member to determine if and how personal electronic devices are allowed to be used in the classroom. For complete information, please reference:

<http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

Scholastic Dishonesty

You are expected to do your own academic work and cite sources as necessary. Failing to do so is scholastic dishonesty. Scholastic dishonesty means plagiarizing; cheating on assignments or examinations; engaging in unauthorized collaboration on academic work; taking, acquiring, or using test materials without faculty permission; submitting false or incomplete records of academic achievement; acting alone or in cooperation with another to falsify records or to obtain dishonestly grades, honors, awards, or professional endorsement; altering, forging, or misusing a University academic record; or fabricating or falsifying data, research procedures, or data analysis. (Student Conduct Code:

http://regents.umn.edu/sites/default/files/policies/Student_Conduct_Code.pdf) If it is determined that a student has cheated, he or she may be given an "F" or an "N" for the course, and may face additional sanctions from the University. For additional information, please see:

<http://policy.umn.edu/Policies/Education/Education/INSTRUCTORRESP.html>.

The Office for Student Conduct and Academic Integrity has compiled a useful list of Frequently Asked Questions pertaining to scholastic dishonesty: <http://www1.umn.edu/oscai/integrity/student/index.html>. If you have additional questions, please clarify with your instructor for the course. Your instructor can respond to your specific questions regarding what would constitute scholastic dishonesty in the context of a particular class-e.g., whether collaboration on assignments is permitted, requirements and methods for citing sources, if electronic aids are permitted or prohibited during an exam.

Makeup Work for Legitimate Absences

Students will not be penalized for absence during the semester due to unavoidable or legitimate circumstances. Such circumstances include verified illness, participation in intercollegiate athletic events, subpoenas, jury duty, military service, bereavement, and religious observances. Such circumstances do not include voting in local, state, or national elections. For complete information, please see:

<http://policy.umn.edu/Policies/Education/Education/MAKEUPWORK.html>.

Appropriate Student Use of Class Notes and Course Materials

Taking notes is a means of recording information but more importantly of personally absorbing and integrating the educational experience. However, broadly disseminating class notes beyond the classroom community or accepting compensation for taking and distributing classroom notes undermines instructor interests in their intellectual work product while not substantially furthering instructor and student interests in effective learning. Such actions violate shared norms and standards of the academic community. For additional information, please see: <http://policy.umn.edu/Policies/Education/Education/STUDENTRESP.html>.

Sexual Harassment

"Sexual harassment" means unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical conduct of a sexual nature. Such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working or academic environment in any University activity or program. Such behavior is not acceptable in the University setting. For additional information, please consult Board of Regents Policy:

<http://regents.umn.edu/sites/default/files/policies/SexHarassment.pdf>

Equity, Diversity, Equal Opportunity, and Affirmative Action

The University will provide equal access to and opportunity in its programs and facilities, without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, sexual orientation, gender identity, or gender expression. For more information, please consult Board of Regents Policy:

http://regents.umn.edu/sites/default/files/policies/Equity_Diversity_EO_AA.pdf.

Disability Accommodations

The University of Minnesota is committed to providing equitable access to learning opportunities for all students. Disability Services (DS) is the campus office that collaborates with students who have disabilities to provide and/or arrange reasonable accommodations. If you have, or think you may have, a disability (e.g., mental health, attentional, learning, chronic health, sensory, or physical), please contact DS at 612-626-1333 to arrange a confidential discussion regarding equitable access and reasonable accommodations.

If you are registered with DS and have a current letter requesting reasonable accommodations, please contact your instructor as early in the semester as possible to discuss how the accommodations will be applied in the course.

For more information, please see the DS website, <https://diversity.umn.edu/disability/>.

Mental Health and Stress Management

As a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug problems, feeling down, difficulty concentrating and/or lack of motivation. These mental health concerns or stressful events may lead to diminished academic performance and may reduce your ability to participate in daily activities. University of Minnesota services are available to assist you. You can learn more about the broad range of confidential mental health services available on campus via the Student Mental Health Website: <http://www.mentalhealth.umn.edu>.

The Office of Student Affairs at the University of Minnesota

The Office for Student Affairs provides services, programs, and facilities that advance student success, inspire students to make life-long positive contributions to society, promote an inclusive environment, and enrich the University of Minnesota community.

Units within the Office for Student Affairs include, the Aurora Center for Advocacy & Education, Boynton Health Service, Central Career Initiatives (CCE, CDes, CFANS), Leadership Education and Development –Undergraduate Programs (LEAD-UP), the Office for Fraternity and Sorority Life, the Office for Student Conduct and Academic Integrity, the Office for Student Engagement, the Parent Program, Recreational Sports, Student and Community Relations, the Student Conflict Resolution Center, the Student Parent HELP Center, Student Unions & Activities, University Counseling & Consulting Services, and University Student Legal Service.

For more information, please see the Office of Student Affairs at <http://www.osa.umn.edu/index.html>.

Academic Freedom and Responsibility, for courses that involve students in research

Academic freedom is a cornerstone of the University. Within the scope and content of the course as defined by the instructor, it includes the freedom to discuss relevant matters in the classroom and conduct relevant research. Along with this freedom comes responsibility. Students are encouraged to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. Students are free to take reasoned exception to the views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.* When conducting research, pertinent institutional approvals must be obtained and the research must be consistent with University policies.

Reports of concerns about academic freedom are taken seriously, and there are individuals and offices available for help. Contact the instructor, the Department Chair, your adviser, the associate dean of the college, or the Vice Provost for Faculty and Academic Affairs in the Office of the Provost.

* Language adapted from the American Association of University Professors "Joint Statement on Rights and Freedoms of Students".