UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH
DEPARTMENT OF POPULATION HEALTH SCIENCES

PHS 879
POLITICS OF HEALTH POLICY

FALL 2015
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This course is designed to help students understand how and why health policies reflect the political system in which they are developed and implemented.

COURSE INSTRUCTOR

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COURSE OBJECTIVES

1. To analyze the current and historical role of government in health policy, primarily focusing on the United States.

2. To introduce important concepts, theories, and literature concerning the impact of politics on public policy and population health.

3. To explain the roles, resources, and strategies of key participants, both inside and outside of government, who influence health policy development and implementation.

4. To compare how political determinants influence different types of health policy issues (e.g., access to insurance and health services, cost containment, disease and injury prevention).

5. To translate knowledge of health politics and the policy process into more effective strategies for public health advocacy.

6. To improve skills in communication, leadership, and systems thinking through formal and informal analysis of key issues in health politics and policy.
COURSE REQUIREMENTS

Blog Posts and Discussions (40 points)
Students will write considered reactions to key contemporary issues in health policy and politics via blog posts and a discussion board.

Strategy Memos (80 points)
Students will write short strategy memos to a key stakeholder on a public health issue of their choice to apply key concepts and analytical frameworks throughout the course.

Case Study Project (80 points)
Students will produce a case study of the politics of health policy development. The case study will apply concepts and analytical frameworks to explain the course of action on a policy issue selected by each student. Students will write an individual 12-15 page paper based on the case study project.

REQUIRED TEXT


All other required course readings are available as PDF files or links on the course Learn@UW site.

SUGGESTED SUPPLEMENTAL READING


In addition to the required course materials, good sources of information on health politics and policy issues include the Journal of Health Politics, Policy and Law, Health Affairs, Milbank Quarterly, New England Journal of Medicine, Journal of the American Medical Association, BMJ, and American Journal of Public Health.

There are also a number of periodicals that provide insight into the general policy making process and a variety of specific policy areas, including health. Among these are the National Journal, Congressional Quarterly, Roll Call, Washington Post and New York Times.
Finally, a large number of governmental agencies, foundations, and health care organizations operate websites with useful information about health policies and programs. A good starting point is THOMAS, operated by the U.S. Library of Congress, as well as the U.S. Government Accountability Office, Centers for Medicare and Medicaid Services, Centers for Disease Control and Prevention, National Conference of State Legislatures, National Governors Association, Kaiser Family Foundation, and AcademyHealth.

COURSE SCHEDULE AND MATERIALS

Module 1  Politics as a Core Determinant of Health

Materials:  


American Politics and the Role of Government in Health Policy


Due 10/22

Blog Post: Argue why California—along with Mississippi and West Virginia—is right or wrong to eliminate non-medical exemptions to childhood immunizations. Will the new law be effective in increasing immunization rates and improving population health?


Due 10/26

Strategy Memo: Choose a public health issue (other than vaccines) and identify the strongest rationale for government involvement—e.g., police powers, spillover effects, protecting constitutional rights, promoting general welfare. Why is this an issue that cannot or should not be resolved by private parties?

Module 2

Federalism and Intergovernmental Relations


Grassroots Change: Connecting for Better Health. 
http://grassrootschange.net/preemption-map/

Due 10/29
Blog Post: Comment on the wisdom of the architects of the Affordable Care Act in allowing states to accept or reject federal funding to expand eligibility for Medicaid. Was this good or bad politics? Good or bad policy? In 5-10 years, will this still matter?

Due 11/2
Strategy Memo: Analyze a selected public health issue and provide an assessment of whether advocates should pursue a “top-down” or a “bottom-up” strategy for policy change. If state-level action is needed or desired, would state preemption of local policies help or hurt your cause?

Module 3 Political Mobilization and the Policy Agenda


**Due 11/5**  
**Blog Post:**  
Comment on the resources and potential influence of broad associations like the U.S. Chamber of Commerce and AARP versus individual corporations (CVS, McDonalds, Coca-Cola) or trade associations (PhRMA, AMA) or independent advocacy groups (Children’s Defense Fund, National Breast Cancer Coalition). Is the decision of CVS to leave the Chamber of Commerce likely to have an impact on policy, either here in the U.S. or abroad?


**Due 11/9**  
**Strategy Memo:**  
Choose a public health issue that, in your judgment, has not been adequately addressed—or, alternatively, subject to action that poses a threat to public health. Compare it to an issue that has received considerable attention and action. Examine how the two issues have been defined or framed, what organized interests are actively involved, and any other factors that might explain the disparity in political mobilization and agenda setting. Based on your analysis, recommend steps that advocates could take to boost the prospects for constructive policy change by reframing the issue or altering the “scope of conflict” by to create a more favorable mix of supporters and opponents.

**Module 4**  
**Legislative and Executive Roles in Health Policy**


**Due 11/12**  
**Blog Post:** Comment on the surprising twists and turns of the legislative process leading to adoption of the Affordable Care Act and its companion legislation in 2010. In your judgment, what are the chief institutional obstacles to producing effective health policy?

**Due 11/16**  
**Strategy memo:** For an issue of your choice, recommend important steps to creating the smoothest path possible through the legislative process. Would you begin with the president, or in Congress? Which house of Congress, and which committee(s), would have jurisdiction over your proposal? Which house would be most receptive to your proposal? Which potential sponsors would be most effective, and why? Is your proposal something that would likely require the support of party leaders, or is it unlikely to generate partisan conflict?

**Module 5**  
**The Policy Process and Politics of Reform**


**Due 11/19**

**Blog Post:** Using James Q. Wilson’s typology for analyzing the connection between policy design and political feasibility, comment on the most important factors that distinguished the “success” of the Affordable Care Act and Medicare Modernization Act from the “failure” of the Clinton-era Health Security Act. How did the initial design and key modifications along the way improve the chances of success for ACA and MMA?

**Due 11/23**

**Strategy Memo:** For a selected public health issue, identify the most probable factors that could create a “window of opportunity” for policy change. Would that window most likely open in the “problem stream” or the “politics stream”? In the event a window indeed opened, what steps could advocates take to “couple” their preferred alternative with the problem and politics streams and advance it on the policy agenda?

**Due 11/25**

**Case Study** Case study paper outline with timeline of key events and basic line of analysis is due in Learn@UW dropbox.

**Module 6** **The Role of Courts in Health Policy**


**Due 11/28**
Blog Post: Comment on the reaction to the June 2015 Supreme Court decision King v. Burwell, which upheld the subsidies to enrollees in federally-facilitated health insurance exchanges under the Patient Protection and Affordable Care Act. What was the reaction from leaders in the respective political parties? How did that compare to the reaction of organized interests in the health care industry and consumer advocates?


Due 11/30
Strategy Memo: For a selected public health issue, assess the advantages and disadvantages of pursuing policy changes through legislation and litigation. Which would likely be the most effective strategy, at least in the short term?

Module 7 Policy Implementation


Due 12/3
Blog Post: What were the key factors that created such problems in setting up the federally-facilitated health insurance exchanges authorized by the Affordable Care Act? Were such difficulties easy to foresee, or not? What lessons from the literature on policy implementation seem especially relevant in light of the fiasco in late 2013?


Due 12/7
Strategy Memo:

Based on real experience or a scenario of what might follow “successful” policy change for a selected public health issue, identify the “weak links” in moving from policy to actual population health improvement.

Module 8

The Challenges of Public Administration and Health Policy

Materials:


Strengthening Intersectoral Governance for Health


McQueen, David V., Matthias Wismar, Vivian Lin, Catherine M. Jones, and Maggie Davies, eds. 2012. Intersectoral Governance for Health in All Policies: Structures, Actions, and Experiences. Copenhagen, Denmark: World Health Organization and European Observatory on Health Systems and Policies. (Scan and browse)

Due 12/10

Blog Post:

How do cultural attitudes and the political environment affect the ability of the Wisconsin Department of Agriculture, Trade and Consumer Protection to enforce current policies restricting the sale of unpasteurized (“raw”) milk?


**Due 12/14**  
**Strategy Memo:**  
Option 1: Select a public health issue and identify the most important challenges facing the principal governmental agency responsible for policy implementation and enforcement in that issue area. How could the agency do a better job, and what are the steps that could be taken to help it do so?

Option 2: Apply the “health lens” to existing policies, programs, and procedures in a non-health governmental agency and explain one or two key actions that could promote a “health in all policies” approach to a selected issue.

**Due 12/18**  
**Case Study**  
Final case study paper with abstract, timeline of key events, and list of references is due in Learn@UW dropbox.