1. Hello and welcome to the introductory lecture on Health Policy.” The content for this lecture is taken from Health Policy Making in the United States by Beaufort Longest Jr. and the Essentials of the Health Care system by Leiyu Shi and Douglas A. Singh.”

2. The objectives of this lecture are as follows: 1) Define policy competence, 2) Define public policy and health policy, 3) Identify the roles of the 3 branches of government in policymaking, 4) Identify and compare forms of health policy, and 5) Explore factors influencing health policy in the US.

3. There is a powerful connection between health policy and health. Anyone professionally involved in the pursuit of health through health determinants such as the physical environment, behavior and biology, social factors, and health services has a vested interest in understanding how policy is made at all levels of government. The following statement is quoted in the in the Longest text on policy competence.

   “Many public health practitioners fear getting involved with the policy world. There is no question that public health practice is valuable and fulfilling when the task is to gather data, issue reports, and find solutions that modify individual behavior. However, if the nation is ever to achieve optimal population health, then the public health dialogue must include the policy dimension. To advance the health of the population, the public health system must train a work force capable of, and ready to embrace, policy leadership as the inherent and critical element of the profession”.

   Similar conclusions apply for healthcare mangers, physicians, nurses, and other health professionals.

4. Policy competence can be valuable to healthcare mangers and health professionals, who can use it to affect health by affecting the determinants of health. Policy competence is made up of the dual abilities to analyze the impact of public policies on one’s domain of interest or responsibility and exert influence in the public policymaking process. This competence begins with an understanding of the policymaking process and the context in which it takes place.

5. The policy process includes three intertwined and interdependent phases: formulation, implementation, and modification. These phases do not occur in a neat sequence. They blend together in a gestalt of actors, actions, and sometimes, inactions that yield policy. This figure illustrates the cyclical, ongoing, without a beginning or end, characteristic of the policymaking process.

6. So, what is health policy? Health policy is a particular version of public policy. Public policies are authoritative decisions made in the Legislative, Executive, or, Judicial branches of government intended to direct or influence the actions, behaviors, and/or decisions of others.

7. In the US, public policies, whether they pertain to health or defense, education, transportation, or commerce, are made through a dynamic public policymaking process. The figure in this slide
8. So, again, what is health policy? Health policies are public policies that pertain to or influence the pursuit of health. Health policy are authoritative decisions made within government that are intended to direct or influence the actions, behaviors, or decisions of others pertaining to health and its determinants.

9. Health policies are established at the federal, state and local government, although usually for different purposes. Health policies can influence for example physicians, the poor, the elderly, or types or categories of organizations (e.g., medical schools, health plans, pharmaceutical companies, employers). The Affordable Care Act is a health policy that will impact many groups and types of organizations.

10. Health policies, which we defined earlier as authoritative decisions, take several basic forms.
   1) Laws: like the 2010 federal public law the Affordable Care Act.
   2) Rules and regulations (the terms are used interchangeably in the policy context established by agencies responsible for implementing the laws. 3) Operational decisions are the decision made when organizations or agencies in the executive branch of any level of government implement laws: for example, determining the eligibility for Medicare and Medicaid.
   4) Judicial Decisions are another form of policy. For example, when the Supreme Court ruled that the 2010 ACA law was constitutional. Another example is when the Supreme Court ruled in 2000 that the FDA cannot regulate tobacco.

11. Another way to consider health policies is to recognize that any type of policy, whether law, rule or regulation, operational decision, or judicial decision can fit into two board categories: regulatory and allocative. In regulatory policies, the government prescribes and controls the behavior of a target group by monitoring the group and imposing sanctions if they fails to comply. For example, the government’s control of the rates at which it reimburses hospitals for care provided to Medicare patients.

 Allocative policies provide net benefits to some distinct groups or class of individuals or organizations at the expense of others to meet public objectives. For example, the continuation of health insurance coverage for unemployed workers in the American Recovery and Reinvestment Act of 2009.

12. The purpose of health policy as far as government is concerned is to support the people in their quest for health. As illustrated by exhibit 1.4, health policies affect health through an intervening set of factors or health determinants. Health determinants, in turn, directly affect health. Let’s consider the role of health policy in the physical environment in which people live and work. Air, polluted by certain agents like asbestos, has a direct measurable effect on such diseases as asthma,
emphysema, and lung cancer and aggravates cardiovascular disease. Federal policies such as the Clean Air Act, the Occupational Safety and Health Act have served to mitigate the environmental hazards of chemical toxins on society’s health.

Additionally, a good example of a health policy which will impact behavior and biology, social factors, and health services is the Affordable Care Act.

13. There are several principle features that define and influence US health policy which are as follows:
   1) The government acts as subsidiary to the private sector
   2) It is fragmented, incremental, piece-meal reform
   3) It involves pluralistic and special interest group politics
   4) There is a decentralized role for the states
   5) Impacted by presidential leadership

These features often act or interact to influence the development and evolution of health policies.

14. The gov’t acts as a subsidiary because healthcare is not seen as a right of citizenship or primary responsibility of gov’t. Americans prefer market solutions over gov’t intervention. Thus, the private sector plays a dominant role. The government's role has increased in areas where the private sector has not been very effective. Government responds to most-cited problems such as escalating costs, bureaucratic inflexibility and red tape. Government spending for health care has been largely confined to filling the gaps in the private sector, such as environmental protection and preventive services.

15. There is a mix of gov’t and private insurance which give rise to a complex and fragmented system of health care financing in which 1) the employed are mainly covered by voluntary insurance through contributions made by themselves and their employers 2) the elderly are insured through a combination of coverage financed out of Social Security tax revenues, voluntary insurance for physician and supplementary coverage, and voluntary purchase of Medigap plans, 4) the poor are covered through Medicaid via federal, state, and local revenues, and 5) special population groups, such as veterans, Native Americans, and members of the armed forces, have coverage provided directly by the federal government.

16. Interest groups are the most effective demanders of policies and are adamant about resisting any major change. Incremental policies result from compromises designed to satisfy demands of: 1) interest groups like the American Medical Association, American Association of Retired persons, and the American Hospital Association. 2) Employers are mostly concerned about cost and benefits of health insurance for their employees, dependent, and retirees. Most small businesses oppose mandates of coverage because of cost. 3) There are consumer groups whose interests are not uniform and who do not have sufficient financial means to organize and advocate for their best interest. 4) There are manufactures of technology, which have incredible amounts of money and resources to influence health policy. 5) Groups and organizations also form alliances to influence health policies.
17. Most incremental policy actions originate at the state level. Importance of the role of individual states can be seen in programs involving: financial support for the care and treatment of the poor and chronically disabled, quality assurance and oversight of health care practitioners and facilities, regulation of health care costs and insurance carriers, health personnel training, and authorization of local government health services.

18. Presidents have the opportunity to influence congressional outcomes through their efforts to develop compromises that allow bills with at least some of their preferred agendas to be passed. Americans look to their Presidents for major changes in health policies. For example, President Lyndon B. Johnson’s role in the passage of Medicare and Medicaid; Harry Truman helped pass the Hill-Burton Hospital Construction Act and President Barack Obama signed into law the Affordable Care Act (ACA) which comprises comprehensive reform legislation designed to increase Americans’ access to health care.

19. In summary, health policies are authoritative decisions made within gov’t intended to direct or influence the actions, behaviors, or decisions of others pertaining to health and its determinants.

    Authoritative decisions are made in Legislative Executive, and Judicial branches of gov’t.

    Health policies can take the form of laws, rules and regulations, operational decisions & judicial decisions.

    Health policies can be broadly categorized as regulatory or allocative.

    Health policies are driven by the private sector, piece-meal reform, special interest groups, decentralized role of the states, and presidential leadership.

This brings us to an end to this lecture. Thank you for listening. Please take a look at the questions at the end of the lecture. These questions can help you prepare for the exam.