

# Contents

<b>1 US Health Care Policymaking: Ideological, Social and Cultural Differences and Major Influences.....</b>	<b>1</b>
Systemic Problems, Definitional and Ideological Issues .....	1
The Health Care System's Problems.....	3
Problem Definition.....	5
Some Models of Policymaking .....	7
Institutional or Political Systems Model.....	8
Rational Model.....	8
Public Choice Model.....	9
Institutional Rational Theory .....	9
Process Model.....	10
Incremental Model.....	10
Group Model and Advocacy Coalitions.....	11
Elite Model.....	11
Game Theory.....	12
The Garbage Can Model.....	13
The Structural Choice Model.....	13
Analyses .....	14
The Approach of the Study .....	16
The Organization of the Book.....	20
Conclusion .....	23
Review Questions .....	23
References .....	23
<b>2 The Evolution of the US Health Care System .....</b>	<b>27</b>
The Preindustrial Period .....	29
The Maximization of the Market .....	31
The Postindustrial Period .....	32
Restoration of Licensing.....	33
Hospitals Transformed .....	35
The Quest for Health Insurance .....	36

The Great Depression .....	37
The Depression and Health Insurance .....	38
The Advent of Redistributive Health Policies .....	39
The Cost Containment Period .....	40
Summary of Cost Containment Measures, 1970–Present.....	41
Conclusion .....	43
Review Questions .....	44
References.....	45
<b>3 Constitutional, Political, and Legal Influences.....</b>	<b>47</b>
Constitutional Influences .....	47
Political Influences.....	50
US Political Culture and Ideology .....	51
Presidential Leadership.....	53
The Congressional Policymaking Process .....	59
Public Opinion and the Media .....	61
Interest Groups.....	62
Political Parties .....	63
The Electoral Cycle.....	64
The Government-Politics Model of Decision-Making .....	65
Legal Influences .....	66
Medical Malpractice .....	67
Pros and Cons of the Existing Tort System.....	68
Court Cases Involving Abortion and Contraceptives.....	69
Conclusion .....	71
Review Questions .....	71
References.....	72
<b>4 Economic and Provider Influences.....</b>	<b>75</b>
Health Care Expenditure Growth.....	76
The Physician as Captain of the Health Care Ship .....	80
Talcott Parsons and the Physician–Patient Relationship .....	80
Kenneth Arrow and the Medical Market .....	81
Eliot Freidson and Professional Dominance .....	82
Health Insurance and Medical Care Since Parsons, Arrow and Freidson.....	84
Cost Containment and the Corporatization of American Medicine.....	85
The Economic Stabilization Act of 1970 (84 Stat. 799) .....	85
PSROs .....	86
Certificates of need (CON) or health planning .....	88
Managed care .....	90
The History of Managed Care.....	91
Managed Care Cost Containment Methods .....	92
Choice Restriction.....	93
Gatekeeping .....	93
Case Management .....	93

Utilization Review (UR).....	93
Payment Reforms.....	94
Practice Profiling.....	94
Types of Managed Care Plans.....	95
HMOs.....	95
PPOs.....	97
POS Plans.....	97
Consumer and Provider Concerns and the HMO Decline.....	98
Physician-Equity Models.....	99
Other Cost Containment Practices.....	100
Increased Employee Cost Sharing .....	100
Consumer-Directed Health Plans.....	101
Paying for Performance .....	102
Disease Management .....	102
Health Promotion .....	102
Conclusion .....	103
Note.....	104
Review Questions .....	104
References.....	104
<b>5 Technological Influences.....</b>	<b>109</b>
Physical Technologies.....	109
Social Technologies .....	110
The Growth and Diffusion of Medical Technology.....	111
Factors Responsible for the Growth and Diffusion of Medical Technologies .....	112
Demand-Side Variables.....	112
Cultural Beliefs and Values.....	112
Differences in Patient Characteristics .....	113
Role of Health Insurance in Fueling Innovation.....	113
Supply-Side Factors .....	114
Physician Characteristics and Medical Specialization.....	114
Competition and the Availability of Resources.....	115
Research and Development Costs.....	116
Medical Uncertainty and Defensive Medicine .....	116
Government Policy .....	117
Government Support for Biomedical Research .....	118
The Construction of Health Facilities .....	118
Health Planning or Efforts to Curtail Health Facilities' Expansion .....	119
Government Regulation of Drugs and Medical Devices .....	119
The Food and Drug Administration .....	119
The Effects of Medical Technology .....	120
Effects on Medical Training and Practice .....	120
Effects on Medical Costs .....	122
Effects on Quality of Care and Quality of Life.....	123

Effects on Access to Care.....	126
Ethical Concerns Raised by Medical Technology .....	126
Questions About Overutilization and Underutilization.....	128
Oregon's Medicaid Priority List .....	129
Reproductive, Life-Sustaining, and End-of-Life Decisions .....	130
The Beginning of Life.....	131
The End of Life .....	131
The Karen Ann Quinlan Case .....	132
The Nancy Cruzan Case.....	133
The Dr. Jack Kevorkian Case.....	134
Technology Assessment (TA) .....	135
Efficacy and Effectiveness.....	136
Safety .....	136
Cost-Effectiveness .....	136
Cost-Benefit .....	137
The Incorporation of Ethical Concerns into TA.....	137
Conclusion .....	138
Review Questions .....	138
References.....	139
<b>6 Physical, Social and Cultural, and Global Influences.....</b>	<b>145</b>
The Definition of Health .....	146
The Medical Model.....	146
The Wellness Model.....	146
The Determinants of Health.....	147
Preventive Medicine .....	148
The USPSTF .....	149
Genetic Disposition.....	150
Social and Economic Circumstances .....	152
Environmental Conditions .....	154
Lifestyle and Behaviors .....	156
Medical Care .....	157
The Ten Leading Causes of Death in the United States, 2006–2007 .....	157
Global Factors and Health .....	159
International Trade and Finance.....	160
Infectious Disease Epidemics .....	161
Global Warming or Climate Change .....	163
Population Mobility .....	163
Natural Disasters and Terrorism .....	164
Conclusion .....	166
Review Questions .....	166
References.....	167
<b>7 Demographic Influences .....</b>	<b>175</b>
Access to Health Care Services .....	175
Access Frameworks .....	176

Aday's and Andersen's Access Framework .....	176
The Objectives of Health Policy .....	176
The Characteristics of the Health Care System .....	177
The Characteristics of Patients.....	177
The Actual Utilization of Services.....	178
Patient Satisfaction with Utilized Services .....	178
Penchansky's and Thomas' Access Framework.....	179
Gulliford's and Colleagues' Access Framework.....	180
Albrition's and Eden's Access Framework .....	181
Justice Principles and Access to Health Care .....	181
The Social Justice Model of the Allocation of Health Services.....	182
The Market Justice Model of the Allocation of Health Services.....	183
The Extent, Causes, and Consequences of Uninsurance .....	184
The Causes of Uninsurance .....	187
Underinsurance .....	190
The Consequences of Uninsurance .....	190
Noneconomic Barriers to Access .....	192
Demographic Differences in Select Health Indicators	
Among the Population.....	193
Differences in Life Expectancy.....	193
Variations in Homicide and HIV Deaths.....	193
Variations in Behavioral Risk Factors.....	196
Differences in Mammography Usage .....	196
Variations in Obesity and Physical Activity.....	197
Variations in Prenatal Care and Infant and Maternal Mortality Rates.....	197
Conclusion .....	198
Review Questions .....	198
References.....	199
<b>8 Safety Net Programs: Medicare, Medicaid, and SCHIP (CHIP) .....</b>	<b>203</b>
Medicare .....	203
The History of Medicare .....	204
Medicare Financing, Organization, and Goals.....	206
Program Structure and Benefits .....	206
Part A: Hospital Insurance .....	206
Part B: Medical Insurance.....	207
Part C: Medicare Advantage .....	208
Part D: Prescription Drugs .....	209
Medigap Policies.....	210
Buying Medigap Policies .....	212
Medicare's Indirect Benefits .....	212
Support for Graduate Medical Education .....	212
Subsidies to Intermediaries and Providers.....	213
Support for Health Services Research .....	214

Information Collection and Dissemination.....	214
Beneficiary Education Programs.....	215
Financial and Psychological Relief for Families .....	215
Medicare Cost Containment .....	217
Medicare and Long-Term Care .....	219
Medicaid .....	220
Medicaid Beneficiaries.....	222
Mandatory Beneficiaries .....	222
Nonmandatory or Optional Beneficiaries .....	223
Medicaid Expenditures .....	224
Medicaid Cost Containment .....	226
Medicaid Waivers .....	228
The Repeal of the AFDC Program and the Creation of SCHIP.....	229
Conclusion .....	231
Review Questions .....	231
References.....	232
<b>9 Health Care Reform in the United States.....</b>	<b>235</b>
Early History of Health Care Reform.....	235
Theodore Roosevelt .....	236
The AALL.....	237
The Franklin D. Roosevelt Administration.....	237
The Harry Truman Administration.....	238
The John F. Kennedy Administration .....	239
The Lyndon B. Johnson White House .....	239
The William Clinton White House.....	240
Hawaiian Health Care Reform.....	243
Massachusetts' Health Care Reform.....	244
The Barack Obama Administration .....	245
The Patient Protection and Affordable Care Act of 2010 .....	248
Anticipated Effects on Access to Care .....	253
Anticipated Effects on Costs.....	254
Anticipated Effects on Quality of Care.....	254
Anticipated Effects on Health Disparities.....	255
Criticisms and Controversies .....	256
Did the PPACA Go Far Enough?.....	256
Did the PPACA Go Too Far? .....	257
Challenges to the PPACA .....	259
The Choices Facing the Supreme Court .....	260
Conclusion .....	260
Review Questions .....	261
References.....	262

<b>10 Conclusion and Future Direction of Health Politics and Policies.....</b>	<b>265</b>
Future Direction of Health Politics and Policies.....	268
Option 1: The PPACA Is Constitutional .....	269
Option 2: The Individual Mandate Is Unconstitutional .....	269
Option 3: The Legal Challenges to the PPACA Are Premature.....	270
Option 4: The Entire Law Is Unconstitutional.....	270
Additional Issues.....	271
References.....	273
<b>Index.....</b>	<b>275</b>