

Course ID	Course Description	Course Objectives
HSMG 7550 Health Care Payment Mechanisms and Policy	<p>This course is designed to describe how providers of health care services have been, are, and will be paid for these services by private- and public sector payers. Knowledge of economic concepts and financial/managerial accounting will be used to analyze policy, implementation, and reporting issues. Topics include (1) the macroeconomic environment within which current payment mechanisms have evolved and continue to evolve; (2) payment mechanisms for institutionally based care, both acute and sub-acute, and for ambulatory care over a range of settings; (3) regulatory processes determining payment for services in entitlement programs; (4) the policy objectives furthered or impeded by public-sector and private-sector payment mechanisms; and (5) analysis of provider responses to payment system incentives.</p>	<ol style="list-style-type: none"> 1. Describe the economic structure of the U.S. health care sector, including major sources of funds and the way in which those funds are distributed across health care uses 2. Demonstrate a working knowledge of the mechanics of traditional fee-for-service payment, cost-based reimbursement, prospective payment (including the nature of classification groupings [<i>e.g.</i>, DRGs, APGs], physician payment with emphasis on the use of the RBRVS, capitation systems, and the interactions of all of the above in mixed payment mode settings. 3. For public systems, extract the key elements and variables from statutory/regulatory documents dealing with changes to any or all of the items in Objective 2 and predict fiscal consequences a provider of health care services is likely to experience as a result. 4. Distinguish among the factors in both public-sector and private-sector payment systems which may further or hinder various public policy objectives. 5. Predict or recommend provider behavior in response to explicit or implicit incentives in payment systems.