

**COURSE DATA****Data Subject**

Code	43432
Name	Health economics
Cycle	Master's degree
ECTS Credits	2.0
Academic year	2022 - 2023

Study (s)

Degree	Center	Acad. Period year
2203 - M.U. en Política Económica y Economía Pública	Faculty of Economics	1 First term

Subject-matter

Degree	Subject-matter	Character
2203 - M.U. en Política Económica y Economía Pública	5 - Economics of the public sector	Optional

Coordination

Name	Department
TORTOSA CHULIA, M. ANGELES	110 - Applied Economics

SUMMARY

In this part of the Master subject we will review the basic concepts on Health Economics that are related to the problems of provision, financing, regulation and production and management of these areas. Through the application of the techniques of economic evaluation we will analyze the main health results and the establishment of health priorities. With these entire conceptual and methodological bases we will facilitate the understanding of decision making in the health sector done by private and public institutions, and in the different types of health services

PREVIOUS KNOWLEDGE



Relationship to other subjects of the same degree

There are no specified enrollment restrictions with other subjects of the curriculum.

Other requirements

OUTCOMES

2203 - M.U. en Política Económica y Economía Pública

- Students should apply acquired knowledge to solve problems in unfamiliar contexts within their field of study, including multidisciplinary scenarios.
- Students should be able to integrate knowledge and address the complexity of making informed judgments based on incomplete or limited information, including reflections on the social and ethical responsibilities associated with the application of their knowledge and judgments.
- Students should communicate conclusions and underlying knowledge clearly and unambiguously to both specialized and non-specialized audiences.
- Students should demonstrate self-directed learning skills for continued academic growth.
- Students should possess and understand foundational knowledge that enables original thinking and research in the field.
- Capacidad para preparar, redactar y exponer en público informes y proyectos sobre política económica y economía pública de manera clara y coherente, defenderlos con rigor y tolerancia y responder satisfactoriamente a críticas sobre los mismos.
- Desarrollar la capacidad crítica, impulsar la inquietud y el interés investigador; buscar, ordenar, analizar y sintetizar la información económica, seleccionando aquella que resulta pertinente para la toma de decisiones en política económica.
- Desarrollar la capacidad de trabajo en equipo, coordinación de tareas, liderazgo y compromiso con el grupo en el desarrollo de actividades de análisis de los problemas económicos y sus soluciones.
- Tomar decisiones tanto individuales como colectivas en su labor profesional y/o investigadora relacionada con la resolución de problemas propios de la política económica y la economía pública.
- Integrar las nuevas tecnologías de la información y de la comunicación en su labor profesional y/o investigadora relacionada con el análisis de la intervención del estado en la economía.
- Fomentar, en contextos académicos y profesionales del ámbito de la política económica, el avance tecnológico, social o cultural dentro de una sociedad basada en el conocimiento y en el respeto a: a) los derechos fundamentales y de igualdad de oportunidades entre hombres y mujeres, b) los principios de igualdad de oportunidades y accesibilidad universal de las personas con discapacidad y c) los valores propios de una cultura de paz y valores democrático.
- Distinguir los elementos que condicionan las relaciones entre el sector público y el sector privado en una economía, analizando la incidencia que el sector público mantiene sobre la actividad económica, así como sobre el comportamiento de los agentes.



- Aplicar las técnicas de evaluación de efecto de tratamiento en las intervenciones públicas, así como el uso de datos

LEARNING OUTCOMES

It is expected that at the end of the teaching-learning process, students acquire a deep understanding of public decision making in the field of health and healthcare. Handling of literature and approaches to economic evaluation applied to this policy area is also expected. The student will be ready to handle the big numbers associated with these programs, as well as they will distinguish the available alternatives: services, systems, suppliers, patients, funding streams and regulatory possibilities of healthy behaviors

DESCRIPTION OF CONTENTS

1. HEALTH ECONOMICS AND ECONOMIC EVALUATION

Health and sanitary services, what are they?

Health determinants and their relationships

Who protects us in public health? Regulatory framework in public health in Spain

- Public Health and Health Care policies: main elements
- Divestment in public health and health care
- Measures to improve population health: 1st) improve health management; 2nd) Promotion-prevention-health education; 3rd) Other measures
- Economic evaluation in health and sanitary: main economic evaluation techniques. Advances and setbacks in the economic evaluation.
- Cost-value

2. HEALTH PROVISION

-Models of health care to be supplied

-Health care structure. The case of Spain

Primary care

Specialized care: hospitals, outpatient clinics, etc.

-Who should make provision? Market failures or inefficiencies in private and public health care.

-What to provide? Health information.

-Phases in provision: from wishes to spending.

The demand for health and health care. Induced demand

Use (in fact, optimal, appropriate ...) and variability use of health services

News in the provision: use of ICTs and Artificial Intelligence

-Equity in the provision of health and health services



3. HEALTH CARE FUNDING

- Analysis of health expenditure. Data sources. Expense decomposition and explanatory factors for its growth.
- Health spending and aging
- New financing challenges: chronic patients and COVID-19
- Financing systems for health services:
Health insurance and prices
What copays?
Transfers via budget and risk-adjusted capitation
I use taxes, which ones?
- The health financing system in Spain. Autonomous financing.
- Hospital financing How to reformulate capitation financing? Allocating healthcare resources efficiently:
Risk adjustment and disease management systems
- Future changes in financing: drugs and payments for results

4. HEALTH PRODUCTION AND HEALTH MANAGEMENT

- Principales ineficiencias en la producción/gestión servicios sanitarios.
Qué es la producción/gestión
Tipos sistemas gestión/producción (centralizado/descentralizado/autónomo), directo e indirecto.
Las colaboraciones público-privadas.
Gestión directa e información sobre:
- Centers: Actividad financiera, analítica o de costes. Logística de los centros, y sistemas pago a proveedores
 - Relaciones con otros centros: Integración y coordinación sistemas y servicios sanitarios
 - Relaciones con usuarios: GDR y CMD.
- La calidad de los servicios sanitarios

5. REGULATION

- Public Health and health care regulation. Concept and instruments, and economic evaluation.
- Merit wants in the field of health care
- Main public health and health care regulations:
Drugs: Tobacco, alcohol and others
Obesity
emergency situations: Covid-19
Medications and therapies: types, quantities, prices, etc.
Technological: genetic use and robotics,
Other lifestyles: trasplants and donations, physical exercise, euthanasia, etc.
- Limitations: Men behavior boundaries



WORKLOAD

ACTIVITY	Hours	% To be attended
Theory classes	20,00	100
Attendance at events and external activities	2,00	0
Development of group work	3,00	0
Development of individual work	3,00	0
Study and independent work	8,00	0
Readings supplementary material	2,00	0
Preparation of evaluation activities	2,00	0
Preparing lectures	6,00	0
Preparation of practical classes and problem	2,00	0
Resolution of case studies	2,00	0
TOTAL	50,00	

TEACHING METHODOLOGY

MD1 -. Lectures (participatory masterful lesson)

MD3 -. Discussion Items (readings)

MD4 - Case Studies

MD8 - Seminars and conferences.

MD9 - Debate and discussion Case studies directed

MD10 - Case Studies

MD12 - search, reading scientific literature and analysis of case studies

MD.- Role playing

As an added instrument to promote creative skills, imagination, good atmosphere and health, background music will be incorporated during some classes.

In this course there will be an invited lecturer called Mary Martínez Martínez that will teach you about public private management of long term care. She will use real cases analysis. And, if we obtain permission, we will visit a service of our public hospitals in Valencia.

The learning model to use during the course seeks to carry out almost all the tasks during class hours, except for the seminar and the preparation of the poster to present on the day of the exam. And it will mean that the student who wants these tasks to be graded will have to attend classes and actively participate demonstrating her/his skills.



The teaching model adopted in the PEEP master is governed by full and compulsory attendance. The non-attendance scenario is only foreseen as an exception in the event of possible cases of confinement of the population or others that make class attendance impossible, provided they are decreed by the competent authorities. In the event of these non-attendance assumptions, the different options available to the University of Valencia will be used to teach online, and the evaluation system and the weight applicable to the different evaluable sections may also be modified.

EVALUATION

2 types systems evaluation:

- a) Continuous, through case studies, readings, discussion classes, rol playing and attending seminars (30% grade)
- b) Final exam of the subject through a poster presentation (70% grade). The exam will be an oral presentation of a pòster at the IX INTERNATIONAL MEETING THE ECONOMY IMPROBES YOUR HEALTH" For the evaluation, the following criteria will be taken into account the content and theme of the póster, that the póster structure adaptado to the general recommendations donde pósters, adequate oral defienda; degree of talento, Ingenuity oro arte.

The final tests will be done in person. However, it should be noted that there may be changes depending on the evolution of the pandemic and the indications of the competent authorities, in which case, it will be reported.

REFERENCES

Basic

- CULYER; J.P. NEWHOUSE; M.V PAULY; T.G. MCGUIRE; &P. PITA BARROS. Health economics. Amsterdam; New York: Elsevier, 2000-2012. Vol 1 y 2.
- DRUMMOND, M F. ET AL., Métodos para la evaluación económica de los programas de asistencia sanitaria, Díaz de Santos, Madrid, 2001
- ABELLÁN, J.M. (ed.) El sistema sanitario público en España y sus comunidades autónomas. Sostenibilidad y reformas. Fundación BBVA. Bilbao.2013.
- HIDALGO VEGA, A. y otros, Economía de la salud, Madrid, Pirámide, 2011.
- REPULLO, J Y IÑESTA, A. (Eds.) Sistemas y servicios sanitarios. Ed. Díaz de Santos, Madrid, 2007. Capítulos 2,3 y 4. Libro electrónico en Biblioteca Universitat Valencia:
<http://site.ebrary.com/lib/universvaln/docDetail.action?docID=10179644&p00=repullo>
- PENCHEON, D. GUEST, C. MELZER, D. Oxford Handbooks: Oxford Handbook of Public Health Practice (2nd Edition). Libro electrónico en Biblioteca Universitat Valencia:
<http://site.ebrary.com/lib/universvaln/detail.action?docID=10581574>



- LÓPEZ CASASNOVAS, G. El bienestar desigual, Ediciones Península, Barcelona, 2015.
- PENCHEON, D. GUEST, C. MELZER, D. Oxford Handbooks : Oxford Handbook of Public Health Practice (2nd Edition). Part 4. Libro electrónico en Biblioteca Universitat Valencia: <http://site.ebrary.com/lib/universvaln/detail.action?docID=10581574>
- OLIVA MORENO, J; GONZÁLEZ LÓPEZ-VALCARCEL, B; TRAPERO BELTRÁN, M; HIDALGO VEGA, A; Y DEL LLANO SEÑARÍS, J.E. Economía de la Sauld. Madrid: Pirámide, 2018.

Additional

- ORTUN, V. Gestión Clínica y Sanitaria. De la práctica diaria a la academia, ida y vuelta. Barcelona: Masson; 2003.
- REPULLO J. R. Identificación y modulación del comportamiento sistemáticamente irracional en medicina y salud pública. Revista Española de Salud Pública, 2009, 83: 43-57.
- MARMOT, M. informe sobre determinantes sociales y desigualdades en materia de salud. OMS. Ginebra.2013.
- Publicaciones CRES:
<http://www.upf.edu/cres/publicacions/masson.html>
Catalogo EVES:
<http://www.eves.san.gva.es/web/guest/presentacion4>
- PUIG-JUNOY, J. ¿Quién teme al copago? Barcelona: Los libros de lince. 2008.
- REPULLO, J.R. Políticas tutelares asimétricas: conciliando preferencias individuales y sociales en salud pública. Gaceta Sanitaria. 2009;23(4):342347.
- LÓPEZ I CASASNOVAS, G. y BEATRIZ GONZÁLEZ LÓPEZ-VALCARCEL. El sistema sanitario en España, entre lo que no acaba de morir y lo que no termina de nacer. Papeles de Economía Española 147 febrero 2016. <http://www.funcas.es/Publicaciones/Detalle.aspx?IdArt=2226>
- NARANJO-GIL, DAVID. Cómo los equipos de dirección usan los sistemas de información y control en la gestión hospitalaria. Gaceta Sanitaria. 2016; 30(4):287292.
- PADILLA BERNALDEZ, J. ¿A quién vamos a dejar morir? Sanidad pública, crisis y la importancia de lo político. Capitán Swing, Madrid, 2020.
- MAS, R; BARONA, C NINYOLES, G et al, Salud en todas las políticas de la Comunitat Valenciana: pasos hacia la evaluación de impacto en salud. Gaceta Sanitaria, 2019; 33(6): 593-597.
- RODRIGUEZ, M. El sector público y el sector privado de la sanidad ¿estabilidad o cambio? Gaceta Sanitaria, 2019; 33(6).
- RUSSELL, C. Does more medicine make us sicker? Ivan Illich revisited. Gaceta Sanitaria; 2019; 33(6): 579-583.