

Syllabus Health Economics

≠ 213	Health economics in public health
Coordinators	Nicolas Sirven (PhD, economics), Full professor of economics at the Institute of Management, EHESP (France) Julien Mousquès (PhD, economics), lecturer researcher EHESP, research director IRDES.
Dates	November 04-08, 2024
ECTS	3 ECTS
Duration	5 days of 6 hours = 30 hours
Location	Room: , EHESP 20 Avenue George Sand 93210 LA PLAINE ST DENIS
Description	This course presents the basic contribution of economics to public health. We address the main topics from both the individual scale – to study healthcare market mechanisms and identify when government intervention is necessary (microeconomics), and from the point of view of an economy as a whole (macroeconomics) – to analyze the influence of economic growth, public spending, and public health policies on population health. We employ theoretical models and empirical examples (including ‘crunching data’ with Stata©), taken from the international literature and from the work of the teachers themselves. We promote the debate between economists and public health experts combining different approaches, fostering interdisciplinary dialogue and comparing different viewpoints and skills.
Prerequisites	Basic knowledge in economics, statistics, and health & social policy. Basic knowledge of Stata©.
Relevant competencies	<ul style="list-style-type: none"> - Understands and applies the principles of economic thinking in public health (8.9) and performs health economic evaluation and assessment of a given procedure, intervention, strategy or policy (8.10) - Understands health systems’ structure, governance, funding mechanisms and how health-care services are organized (1.10) - Evaluates public health services and interventions, applying sound methods based on recognized evaluation models (1.8)
Course learning objectives	<p><i>At the end of the course, the students should be able to:</i></p> <ul style="list-style-type: none"> - Understand the specific contribution of economics to public health - Handle health economics issues, and key concepts and their measures used in public health policy - Relate to them in order to build more insightful public health decisions - Assess public health situations where government intervention is necessary - Make a critical appraisal of the methods used to evaluate public policies and public health programs - Use datasets and basic econometric models for health economics (using Stata©) - Select relevant research articles, understand the methodology used and critically appraise them - Build public health policy argumentation based on scientific (quantitative) evidence

<p>Structure (details of sessions title/speaker/date/ duration)</p>	<p>Part 1. Microeconomics of health – Julien Mousquès</p> <p>[Day 1] Demand for and Production of Health Sessions 1 (morning) & 2 (afternoon)</p> <ul style="list-style-type: none"> - Key economic ideas: utility maximization subject to constraints, marginal costs and benefits, opportunity costs - The Grossman model of health capital <p>[Day 4] Government Intervention in Health Sessions 3 (morning) & 4 (afternoon)</p> <ul style="list-style-type: none"> - Economic rationales for government intervention for the demand (health and insurance) & supply (Health Care Delivery) - Other rationales - Main Government intervention (reforms) trends <p>Part 2. Macroeconomics of health – Nicolas Sirven</p> <p>[Day 2] Health, Income, and Inequality Sessions 5 (morning) & 6 (afternoon)</p> <ul style="list-style-type: none"> - Cross-country contribution of income to health over time (The Preston Curve) - Income inequality between vs. within countries - Various forms of inequality and health (“deaths of despair”) - The future of capitalism and health <p>[Day 3] Health Systems Sustainability Sessions 7 (morning) & 8 (afternoon)</p> <ul style="list-style-type: none"> - Cross-country analysis of healthcare expenditures (HCE) over time - The determinants of HCE (“the usual suspects”) - Theoretical and empirical elements (“the red herring”, “the cost disease”). <p>Part 3. Wrap-up – Julien Mousquès & Nicolas Sirven</p> <p>[Day 5] Wrap-up Session 9 (morning)</p> <ul style="list-style-type: none"> - Q&A about what we have learned - Presentation by the teachers of their most recent research work on economic evaluation (“economics seminar”), students evaluation. <p>Session 10 (afternoon)</p> <ul style="list-style-type: none"> - Exam
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Resources	Culyer, A. J. (2014). Encyclopedia of health economics. Newnes. Additional material will be provided for each session (articles, databases and software script)
Course requirements	Students are expected to attend all Sessions. Some applied work sessions may require students to use a computer with an updated version of Stata®.
Grading and assessment	Individual in class assignment.
Course policy	<p>Attendance & punctuality Regular and punctual class attendance is a prerequisite for receiving credit in a course. Students are expected to attend each class. Attendance will be taken at each class. The obligations of attendance and punctuality cover every aspect of the course: - lectures, conferences, group projects, assessments, examinations, as described in EHESP Academic Regulations http://mph.ehesp.fr EHESP Academic Regulation Article. 3). If students are not able to make it to class, they are required to send an email to the instructor and to the MPH program coordinating team explaining their absence prior to the scheduled class date. All supporting documents are provided to the end-of-year panel.</p> <p>Students who miss class are responsible for content. Any student who misses a class has the responsibility for obtaining copies of notes, handouts and assignments. If additional assistance is still necessary, an appointment should be scheduled with the instructor. Class time is not to be used to go over material with students who have missed class.</p> <p>Lateness: Students who are more than 10 minutes late may be denied access to a class. Repeated late arrivals may be counted as absences (See http://mph.ehesp.fr EHESP Academic Regulation Article. 3 Attendance & Punctuality)</p> <p>Maximum absences authorized & penalty otherwise Above 20% of absences will be designated a fail for a given class. The students will be entitled to be reassessed in any failed component(s). If they undertake a reassessment or they retake a module this means that they cannot normally obtain more than the minimum pass mark (i.e. 10 out of 20)</p>
Course policy (continued)	<p>Exceptional circumstances Absence from any examination or test, or late submission of assignments due to illness, psychological problems, or exceptional personal reasons must be justified; otherwise, students will be penalized, as above mentioned. Students must directly notify their professor or the MPH academic secretariat before the exam or before the assignment deadline. Before accepting the student's justification, the professor or the MPH academic secretariat has the right to request either a certificate from the attending physician or from a psychologist, or from any other relevant person (See http://mph.ehesp.fr EHESP Academic Regulation Article 4 Examinations).</p> <p>Courtesy: <u>All cell phones/pages MUST be turned off during class time.</u> Students are required to conduct themselves according to professional standards, eating during class time is not permitted during class time, such as course or group work.</p>
Valuing diversity	Diversity enriches learning. It requires an atmosphere of inclusion and tolerance, which oftentimes challenges our own closely-held ideas, as well as our personal comfort zones. The results, however, create a sense of community and promote excellence in the learning environment. This class will follow principles of inclusion, respect, tolerance, and acceptance that support the values of diversity. Diversity includes consideration of: (1) life experiences, including type, variety, uniqueness, duration, personal values, political viewpoints, and intensity; and (2) factors related to "diversity of presence," including, among others, age, economic circumstances, ethnic identification, family educational attainment, disability, gender, geographic origin, maturity, race, religion, sexual orientation and social position.
Course evaluation	EHESP requests that you complete a course evaluation at the end of the school year. Your responses will be anonymous, with feedback provided in the aggregate. Open-ended comments will be shared with instructors, but not identified with individual students. Your participation in course evaluation is an expectation, since providing constructive feedback is a professional obligation. Feedback is critical, moreover, to improving the quality of our courses, as well as for instructor assessment.

Sessions 1 to 2	Demand for and Production of Health
Speaker	Juïen Mousquès
Session Outline	<p>Demand for and Production of Health</p> <ul style="list-style-type: none"> - Key economic ideas: utility maximization subject to constraints, marginal costs and benefits, opportunity costs - The Grossman model of health capital
Learning Objectives	See above.
Duration	2 sessions of 3 hours each, for a total of 6 hours
Dates	November 13 th 2023
Training methods	Lecture with discussion
Reading	<p><u>Required Reading:</u> Grossman M. On the Concept of Health Capital and the Demand for Health. The Journal of Political Economy. 1972b; 80(2):223–255. Laporte A. should the Grossman model of investment in health capital retain its iconic status? Working Paper No: 2014-04 www.canadiancentrefortheeconomics.ca January 8, 2015 Zweifel P. (2012). The Grossman model after 40 years. The European journal of health economics : HEPAC : health economics in prevention and care, 13(6), 677–682. https://doi.org/10.1007/s10198-012-0420-9 Grossman M. (2022). The demand for health turns 50: Reflections. Health economics, 31(9), 1807–1822. https://doi.org/10.1002/hec.4563</p> <p><u>Optional Reading:</u> Bishai, et al. 2016. “Putting Public Health Capital in the Grossman Model: Theory and Tests of the Link Between government public health spending and mortality.” Galama & van Kippersluis, 2013. “Health Inequalities through the Lens of Health Capital Theory: Issues, Solutions, and Future Directions” Res Econ Inequal, June: p.263-84. Ghiteji, 2010. “Time Preference, Noncognitive Skills, and Well Being across the Life Course: Do Noncognitive Skills Encourage Healthy Behavior?” AER: Papers & Proceedings, May: p. 200-204. Kenkel, 1991. “Health Behavior, Health Knowledge, and Schooling” JPE vol 99, no 2. P 287-305. Chatterji, 2014. “Education and Health: Disentangling Causal Relationships from Associations” Encyclopedia of Health Economics Rosa Dias, 2014. “Equality of Opportunity in Health” Encyclopedia of Health Economics Almond et al. 2014. “Fetal Origins of Lifetime Health” Encyclopedia of Health Economics</p>
Validation	Final exam

Session 3 to 4	Government Intervention in Health
Speaker	Julien Mousquès
Session Outline	<p>Government Intervention in Health</p> <ul style="list-style-type: none"> - Economic rationales for government intervention for the demand (health and insurance) & supply (Health Care Delivery) - Other rationales - Main Government intervention (reforms) trends

Learning Objectives	See above.
Duration	2 sessions of 3 hours each, for a total of 6 hours
Dates	November 16 th 2023
Training methods	Lecture with discussion
Reading	<p><u>Required Reading:</u></p> <p>Rand. The Health Insurance Experiment A Classic RAND Study Speaks to the Current Health Care Reform Debate, Rand, research highlights, 2006</p> <p>Franc, C., Perronnin, M., & Pierre, A. (2016). Supplemental Health Insurance and Healthcare Consumption-A Dynamic Approach to Moral Hazard. <i>Health economics</i>, 25(12), 1582–1598. https://doi.org/10.1002/hec.3271</p> <p>Coudin, E., Pla, A., & Samson, A. L. (2015). GP responses to price regulation: evidence from a French nationwide reform. <i>Health economics</i>, 24(9), 1118–1130. https://doi.org/10.1002/hec.3216</p> <p>Grytten, J., & Sørensen, R. (2001). Type of contract and supplier-induced demand for primary physicians in Norway. <i>Journal of health economics</i>, 20(3), 379–393. https://doi.org/10.1016/s0167-6296(00)00087-4</p> <p><u>Optional Reading:</u></p> <p>Emmett B. Keeler. "Eff ects of Cost Sharing on Use of Medical Services and Health." <i>Medical Practice Management</i>, Summer 1992, pp. 317–321. Available online at http://www.rand.org/pubs/reprints/RP1114/index.html.</p> <p>Ragan and Lipsey, Chapter 16: Market Failure and Government Intervention</p> <p>Loewenstein G, Brennan T, Volp KG, 2007. "Asymmetric Paternalism to Improve Health Behaviors," <i>JAMA</i> 298(20):2415-2417.</p> <p>Rice T, 1997. "Can Markets Give Us the Health System We Want?" <i>Journal of Health Politics, Policy and Law</i>, 22(2)</p> <p>Chaloupka et al., 2015. "An evaluation of the FDA's analysis of the costs and benefits of the graphic warning label regulation," <i>Tobacco Control</i>, 24: p. 112-119.</p> <p>Cookson and Suhrcke, 2014. "Public Health: Overview" <i>Encyclopedia of Health Economics</i></p> <p>Gersovitz, 2014. "Infectious Disease Externalities" <i>Encyclopedia of Health Economics</i></p> <p>Smith, 2014. <i>Global Public Goods and Health</i>" <i>Encyclopedia of Health Economics</i></p>
Validation	Final exam

Session 5 to 6	Health, Income, and Inequality
Speaker	Nicolas Sirven
Session Outline	<ul style="list-style-type: none"> - Cross-country contribution of income to health over time (The Preston Curve) - Income inequality between vs. within countries - Various forms of inequality and health (“deaths of despair”) - The future of capitalism and health
Learning Objectives	See above.
Duration	2 sessions of 3 hours each, for a total of 6 hours
Dates	November 14 th 2023
Training methods	Lecture with discussion
Reading	Culyer, A. J. (2014). Encyclopedia of health economics. Newnes. Additional material will be provided for each session (articles, databases and software script)
Validation	Final exam

Session 7 to 8	Health Systems Sustainability
Speaker	Nicolas Sirven
Session Outline	<ul style="list-style-type: none"> - Cross-country analysis of healthcare expenditures (HCE) over time - The determinants of HCE (“the usual suspects”) - Theoretical and empirical elements (“the red herring”, “the cost disease”)
Learning Objectives	See above.
Duration	2 sessions of 3 hours each, for a total of 6 hours
Dates	November 15 th 2023
Training methods	Lecture with discussion
Reading	Culyer, A. J. (2014). Encyclopedia of health economics. Newnes. Additional material will be provided for each session (articles, databases and software script)
Validation	Final exam

Session 9	Wrap-up
Speaker	Nicolas Sirven & Julien Mousquès
Session Outline	<ul style="list-style-type: none"> - Q&A about what we have learned - Presentation by the teachers of their most recent research work on economic evaluation ("economics seminar"),
Learning Objectives	See above.
Duration	1 session of 3 hours
Dates	November 17 th 2023, 9h-12h
Training methods	Discussion, Presentation of research work by the teachers
Reading	
Validation	Final exam

Session 10	Final Exam
Speaker	Julien Mousquès
Session Outline	Final exam
Learning Objectives	See above.
Duration	1 session of 3 hours
Dates	November 19 th 2023, 14h-17h
Training methods	Exam
Reading	None.
Validation	Final exam