PHPM 510: The US Health Care System

Fall 2020

Time: Tuesday and Thursday, 1:00 – 2:15 PM

Location: Drachman Hall A112

Instructor: Joe K. Gerald, MD, PhD
Associate Professor and PHPM Program Director
A237 Drachman Hall
geraldj@email.arizona.edu
(520) 626-4678

Preferred contact: E-mail, with response typically within 24 hours

Teaching Assistants: None

Office Hours (Dr. Gerald): By appointment for involved conversations; immediately before or after class for simple matters. Drop-ins welcome 10A – 4P.

Course Description: This survey course describes how medical care is financed, organized, and delivered in the United States. Policies intended to increase access, reduce cost, and/or improve value are examined through social and market justice frameworks.

Prerequisites: None

Comprehensive Final Exam: Administered remotely via D2L. Students will be able to start the exam between 12:45 – 1:15 PM on Monday, December 17, 2019.

Administrative Deadlines:
- On-line drop with no grade awarded: Sept 22
- On-line withdrawal, grade of W is awarded: Sept 23 – Nov 3
- Paper Late Change Petition with instructor and College permission required: Nov 4

Course Competencies and Learning Objectives

MPH Core Competencies:
- [6] Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.
  - Assessment: Students’ knowledge of health disparities (gender, race/ethnicity, and social class) and institutional and structural discrimination is evaluated in Quiz 1.3 (social determinants) and Unit Exam 3 (inequality).
- [8] Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.
Assessment link: Students’ awareness of America’s 4 dominant cultural values (individualism, distributive justice, distrust of government, and ambivalence toward social equity) is evaluated in Assignments 1AB – 2AB and Unit Exam 1.

- [12] Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.
  
  Assessment link: Students’ knowledge of the federal policy-making process, interest group theory, political theories, and health reform is evaluated in Assignments 5AB - 6AB, Quizzes 3.1 – 3.3, Unit Exam 3, and Quizzes 4.1 – 4.2.

- [14] Advocate for political, social or economic policies and programs that will improve health in diverse populations.
  
  Assessment link: Students’ ability to advocate for specific health policy reforms is evaluated in Assignments 1AB - 6AB.

  
  Assessment link: Students’ ability to evaluate the impact of specific health reforms is evaluated in Assignments 3AB – 6AB, Quizzes 3.2, 3.3, 4.1, and 4.2 and in Unit Exam 3.

- [19] Communicate audience-appropriate public health content, both in writing and through oral presentation.
  
  Assessment link: Students’ ability to communicate public health information is evaluated in Assignments 1AB – 6AB (written) and Final Exam (oral).

DrPH Core Competencies:

- [5] Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies.
  
  Assessment link: Students’ ability to use evidence-based arguments to influence public health policy changes is evaluated in Assignments 1AB – 6AB.

- [16] Integrate scientific information, legal and regulatory approaches, ethical frameworks and varied stakeholder interests in policy development and analysis.
  
  Assessment link: Students’ ability to make complex, comprehensive arguments to promote public health policy change is evaluated in Assignments 1AB – 6AB.

PHPM MPH Core Competencies:

- Use evidence-based concepts to critique the financing and delivery of medical services in the United States.
  
  Assessment link: Students’ ability to use evidence-based arguments to support/oppose health reforms is evaluated in Assignments 3AB – 6AB.

- Describe the state and federal processes that govern the delivery of health services.
  
  Assessment link: Students’ knowledge of the federal, state, and local processes that govern the delivery of health services is evaluated in Assignments 5AB – 6AB, Quizzes 3.1, 3.2, 3.3, 4.1, and 4.2, and Unit Exam 3 (see appendices).
Course Learning Outcomes: Upon completion of this course students will be able to:

- Define and explain how America’s unique values of individualism, distributive justice, equality of opportunity, and distrust of government influence the US health care system.
- Describe the impact that new medical technologies have had on the cost of healthcare, health outcomes, and the value of medical spending.
- Describe and explain to what extent the 4 individual determinants of health (weight, diet, exercise, and smoking) influence the development of disease and longevity.
- Describe and explain to what extent the two major social determinants of health (income and education) influence the development of disease and longevity.
- Describe and explain the strengths and weakness of the four major approaches to determining the value of health interventions: cost-minimization, cost-benefit, cost-effectiveness, and cost-utility analysis.
- Explain why disease prevention and health promotion should be emphasized despite the fact that they are unlikely to reduce health care spending.
- Compare and contrast primary and secondary/tertiary care and explain why secondary/tertiary care is emphasized more in the US than abroad.
- Describe how physician fees are determined by the Medicare RVS Update Committee (RUC) and to what extent this contributes to medical inflation.
- Describe how hospitals are organized, reimbursed, how they compete with other health care entities, and how competition among them impacts cost and quality of care.
- Assess whether a shortage or oversupply of physicians exists and describe how the economic return from educational investment informs this decision.
- Explain how historical “accidents” and incrementalism led to the development of our current multi-payer health care system that relies on private health insurance supplemented by government programs.
- Explain the purpose of health insurance and describe the extent to which health insurance is an economically sound approach to pay for health care services.
- Define and explain the most common reasons for market failure in the health insurance industry including moral hazard, crowd-out, and adverse selection.
- Describe the advantages and disadvantages of the most common private health insurance plan types including preferred provider organizations, health maintenance organizations, point of service plans, and high deductible health plans.
- Describe the role of government in the financing and delivery of health care services for various special populations including the poor, the elderly, and the disabled.
- Explain eligibility for and benefits provided by Medicare Parts A, B, C and D.
- Explain eligibility for and benefits provided by Medicaid.
- Compare and contrast fee-for-service, capitation, and prospective payment systems.
- Describe how the economic theory of government predicts which health reforms are most likely to be successful politically.
- Describe the major elements of the Affordable Care Act and describe the impact of the ACA on cost, access, affordability, and the delivery of health care services in the US.
- Describe and explain why government expenditures on health care impacts the federal budget, deficit, and debt.
- Explain the strengths and weaknesses of the US approach to medical malpractices
COURSE POLICIES

Course Notes: Lecture materials and required readings are available at http://d2l.arizona.edu/. Any official changes in course policy or schedule will be communicated via official UA e-mail addresses and will also be posted on the d2L homepage. Students are encouraged to adjust their D2L settings so that course updates are sent as e-mail notifications.

Required Texts/Readings:

(1) Required Text: There is 1 required text for this course.
   

(2) Recommended Texts: These texts are recommended for those who want to learn more about the concepts introduced in this course. These texts will not necessarily help you succeed in this course, but they are worthy of purchase if interested.
   
   
   Ubel, Peter A. Pricing Life: Why It’s Time for Health Care Rationing. MIT Press. 2001. Presents an accessible account of how cost-effectiveness analysis can be used to guide health care decision-making. It is written by one of my favorite health economists.
   
   Cutler, David M. Your Money or Your Life. Oxford University Press. 2004. Explores the value of past health care spending and argues that continued health spending will provide good value despite its rapid increase. It is written by one of my favorite health economists.
   
   
   Gilens, Martin. Affluence & Influence. Princeton University Press. 2012. While a bit tedious to read, you can skip to the good parts. Provides tremendous insight into the federal policy-making process and explains why it is not responsive to voters.
   
   

Edin KJ and Shaefer HL. $2.00 a Day: Living on Almost Nothing in America. Houghton Mifflin Harcourt. 2015. Provides case histories describing extreme poverty in the US that has become more common since 1990 welfare reforms. It provides a rich contextual depiction of those caught in the grip of modern poverty and why they seem trapped there.

Course Requirements: To be successful, students must demonstrate an understanding of lecture and assigned reading material via weekly quizzes, small unit exams, and a comprehensive final examination. Students must also demonstrate the ability to research, analyze and synthesize information via periodic writing assignments.

Grading: A minimum of 8 weekly quizzes, 2 unit exams, 6 written assignments, and a comprehensive final exam must be completed. The course grade is determined as follows:

<table>
<thead>
<tr>
<th>Graded Activities</th>
<th>Grading Scale</th>
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<tbody>
<tr>
<td>Quiz 1.1--1.3: 30 pts</td>
<td>A≥ 89.5%</td>
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<tr>
<td>Quiz 2.1--2.3: 30 pts</td>
<td>B≥ 79.5% - 89.4%</td>
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<tr>
<td>Quiz 3.1--3.3: 30 pts</td>
<td>C≥ 69.5% - 79.4%</td>
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<tr>
<td>Quiz 4.1--4.2: 30 pts</td>
<td>D≥ 64.5% - 69.4%</td>
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<tr>
<td>Unit Exams 1--3: 80 pts</td>
<td>E&lt; 64.5%</td>
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<td>Assign. 1AB-6AB: 250 pts</td>
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<td>Major Paper: 50 pts</td>
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<td>Oral Final: 50 pts</td>
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<td>Written Final: 50 pts</td>
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<td>Total: 600 pts</td>
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*The lowest grade from the marked sections are dropped from the final course grade. **The grade for Assignment 1 is replaced by the Assignment 2 grade if both are completed.

General Course Expectations: To succeed in this course, students are expected to watch the Panopto lecture and complete the required readings before class. Class periods will be discussion-based with the instructor often utilizing the Socratic Method. Students are expected to ask questions, contribute to discussions, and respond to questions.

Activity Descriptions:

Homework: six written assignments (1AB - 6AB) must be completed. Each assignment is worth 50 points except for Assignment 1AB (see revision below). To receive full credit, assignments must be uploaded to the D2L drop box prior to the deadline. Assignments uploaded within 60 minutes of the deadline will be accepted but will be assessed a 5 point late penalty. Assignments will not be accepted once the grace period expires; these assignments will receive a grade of ZERO. Individual technical difficulties immediately prior to the deadline will not be considered as mitigating circumstances unless a widespread outage is reported.

At least 1 of the assignments must be prepared in the format of an Op-Ed for a major print newspaper (e.g. Washington Post, Phoenix Sun, Tucson Daily Star) and at least 1 must be prepared in the format of a policy brief as published by a major health-focused non-profit organization (e.g., the Kaiser Family Foundation or the Robert Wood Johnson Foundation).
**Homework Revisions:** Students are required to demonstrate the ability to respond to grader feedback on at least 1 written assignment, but may submit up to 3 revisions. All students must complete and revise Assignment 1AB (draft) and submit it as Assignment 2AB (revision). The grade earned on Assignment 2AB will replace the grade earned on Assignment 1AB (draft). **To receive full credit, students must complete both assignments.** Assignment 2AB will be graded on the quality of the revisions; therefore, students are encouraged to address the grader’s criticisms and to independently address additional self-identified weaknesses. It is possible for the revision grade to be lower than the draft grade.

To receive full credit for homework assignments, students must:

- Compose 500 - 750 word response excluding title and reference list. The word count must be clearly documented. Longer is not necessarily better.
- Students must use 12-point, double line spacing, and 1 inch margins.
- All references, including any required or recommended reading, must be documented using the American Medical Association (AMA) citation style.
- In addition to any required or recommending reading, students must use and cite 1 additional article indexed in PubMed.
  - **Recommended journals:** JAMA, NEJM, Health Affairs, Health Services Research, and American Journal of Public Health.

The plagiarism software, Turnitin.com, will be used to evaluate all assignments. The originality report is made available to students; therefore, students are wholly responsible for addressing any issues prior to the due date.

**Major Paper:** Democratic Congressmen proposed 12 major pieces of health reform legislation, collectively known as Medicare-for-All, in the 116th Congress. Students must complete a 2500 - 3000 word summary and critique of 1 proposal. This critique should briefly summarize the legislation and connect its key reforms to primary source material provided in this course. Lastly, students should clearly indicate their support or opposition of the bill and explain their rationale. Students must follow the formatting and administrative guidelines for the written homework assignments. The assignment is worth 50 points. **The assignment is due on or before 5PM Friday, November 22nd.**

**Quizzes (D2L):** Each week a 15 point quiz assessing the student’s mastery of the preceding week’s material will be made available on D2L. Questions will be derived from the Panopto lecture, reading and lecture discussion. Quizzes will consist of single best answer multiple-choice, matching, true/false, and short answer questions. Quizzes are divided into multiple sections (e.g., 1.1—1.3) The lowest score in each section is dropped from the final course grade. The exception is Section 4.1--4.2 where both quizzes will count.

Test items are randomly generated from a pool of items. **The test window opens Friday at 5:00 PM and closes the following Monday at 5:00 PM.** Students will have 30 minutes to complete the 15-item quiz once an exam is started. A maximum of 2 attempts is allowed. The highest scored attempt will establish the student’s graded score. Students may not exit and return once started. It is suggested that students save after each question. As long as time remains, it is possible to go back and change answers. As the quiz is accessible on-line during a 72-hour window, there are no opportunities to “make up” missed quizzes. While students are discouraged from using written materials including web-based resources, they may do so. **However, students may not collaborate with others.**
Unit Exams: Each month, a 40 point comprehensive unit exam assessing the student’s mastery of the preceding unit’s material will be made available on D2L. Questions will be derived from the required reading and lecture. Unit exams will consist of single best answer multiple-choice, matching, true/false, and short answer questions. There are 3 unit exams; however, the lowest score will be dropped from the student’s final course grade.

Test items are randomly generated from a pool of items. The test window opens Friday at 5:00 PM and closes the following Monday at 5:00 PM. Students will have 30 minutes to complete the 15-item quiz once started. A maximum of 2 attempts is allowed. The highest scored attempt will establish the student’s graded score. Students may not exit and return once started. It is suggested that students save after each question. As long as time remains, it is possible to go back and change answers. As the quiz is accessible on-line during a 72-hour window, there are no opportunities to “make up” missed quizzes. While students are discouraged from using written materials including web-based resources, they may do so. However, students may not collaborate with others.

Comprehensive Written Final Examination (D2L): The final examination will consist of single best answer multiple-choice, matching, true/false, and short answer questions. Test items are randomly generated by d2L from a pool of items on the assigned material. The exam is comprehensive and the course content will be equally weighted. If the exam is exited for any reason after the official start time, you may not re-enter the exam without instructor permission. The instructor will be available by e-mail during the exam window. Students will have 120 minutes to complete the 50-item exam once started. Only one attempt is allowed. It is suggested that students save after each question. As long as time remains, it is possible to go back and change answers.

Comprehensive Oral Final Examination: During the week of December 2 – 6, students must schedule a 20-minute window to complete an oral, comprehensive final exam. This examine will consist of 3 – 5 questions relevant to the key concepts presented in class, particularly as they relate to health reform (e.g., Medicare-for-All legislation). Student responses will be graded according to a pre-defined rubric (see D2L).

Class Attendance: Class attendance is critical to the learning experience as important concepts from the reading and outside materials will be explained and critically analyzed. Data reveal a moderate positive correlation between attendance and course grades such that regular attendance is beneficial, particularly to lower-performing students. However, as graduate students and adult learners, class attendance will not be monitored and/or graded.

All holidays or special events observed by organized religions will be honored for those students who show affiliation with that particular religion. Absences pre-approved by the UA Dean of Students (or Dean’s designee) will be honored. Excused absences will only prevent the deduction of points for student’s selecting the mandatory attendance policy; they will not provide additional extra credit points for students selecting the optional attendance policy.

The UA’s policy concerning Class Attendance, Participation, and Administrative Drops is available here. The UA policy regarding absences for any sincerely held religious belief, observance or practice will be accommodated where reasonable and is available here. Absences preapproved by the UA Dean of Students (or dean’s designee) will be honored here.
Required Statements:

Academic Integrity: Students are encouraged to share intellectual views and discuss freely the principles and applications of course materials. However, graded work/exercises must be the product of independent effort unless otherwise instructed. Students are expected to adhere to the UA Code of Academic Integrity as described in the UA General Catalog (here).

Selling class notes and/or other course materials to other students or to a third party for resale is not permitted without the instructor’s express written consent. Violations to this and other course rules are subject to the Code of Academic Integrity and may result in course sanctions. Additionally, students who use D2L or UA e-mail to sell or buy these copyrighted materials are subject to Code of Conduct Violations for misuse of student e-mail addresses. This conduct may also constitute copyright infringement.

Accessibility and Accommodations:
At the University of Arizona we strive to make learning experiences as accessible as possible. If you anticipate or experience physical or academic barriers based on disability or pregnancy, you are welcome to let me know so that we can discuss options. You are also encouraged to contact Disability Resources (520-621-3268) to explore reasonable accommodation. If our class meets at a campus location: Please be aware that the accessible table and chairs in this room should remain available for students who find that standard classroom seating is not usable.

Classroom Behavior: The Dean of Students has set up expected standards for student behaviors and has defined and identified what is disruptive and threatening behavior. The UA Threatening Behavior by Students Policy prohibits threats of physical harm to any member of the University community, including to oneself. This information is available here.

To foster a positive learning environment, students and instructors have a shared responsibility. We want a safe, welcoming, and inclusive environment where all of us feel comfortable with each other and where we can challenge ourselves to succeed. To that end, our focus is on the tasks at hand and not on extraneous activities (e.g., texting, chatting, reading a newspaper, making phone calls, web surfing, etc.). Students are asked to refrain from disruptive conversations with people sitting around them during lecture. Students observed engaging in disruptive activity will be asked to cease this behavior. Those who continue to disrupt the class will be asked to leave lecture or discussion and may be reported to the Dean of Students.

Communications: You are responsible for reading emails sent to your UA account from your professor and the announcements that are placed on the course web site. Information about readings, news events, your grades, assignments and other course related topics will be communicated to you with these electronic methods. The official policy can be found here.

Nondiscrimination and anti-harassment policy: The University of Arizona is committed to creating and maintaining an environment free of discrimination. In support of this commitment, the University prohibits discrimination, including harassment and retaliation, based on a protected classification, including race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity, or genetic information. The University encourages anyone who believes he or she has been the subject of discrimination to report the matter immediately as described in the section below, “Reporting Discrimination, Harassment, or Retaliation.” All members of the University community are responsible for participating in creating a campus environment free from all forms of prohibited discrimination and for cooperating with University officials who investigate allegations of policy violations. More detail can be found here.
**Grievance Policy:** Should a student feel he or she has been treated unfairly, there are a number of resources available. With few exceptions, students should first attempt to resolve difficulties informally by bringing those concerns directly to the person responsible for the action, or with the student's graduate advisor, Assistant Dean for Student and Alumni Affairs, department head, or the immediate supervisor of the person responsible for the action. If the problem cannot be resolved informally, the student may file a formal grievance using the Graduate College Grievance Policy found [here](#).

**Grade Appeal Policy** can be found [here](#).

**Plagiarism:** The University Libraries have some excellent tips for avoiding plagiarism, available [here](#). What counts as plagiarism?

- Copying and pasting information from a web site or another source, and then revising it so that it sounds like your original idea.
- Doing an assignment/essay/take home test with a friend and then handing in separate assignments that contain the same ideas, language, phrases, etc.
- Quoting a passage without quotation marks or citations, so that it looks like your own.
- Paraphrasing a passage without citing it, so that it looks like your own.
- Hiring another person to do your work for you, or purchasing a paper through any of the on- or off-line sources.

**Syllabus Changes:** Information contained in the course syllabus, other than the grade and absence policies, may be subject to change with reasonable advance notice, as deemed appropriate.

**Telephone and Computer Use:** Laptops are allowed and use is governed by the following University policy [here](#). Turn your cell phones to silent or vibrate in order to not disrupt the class.

**UA Smoking and Tobacco Policy:** The University's "Smoking and Tobacco Policy" is designed to promote the health and wellness of all members of the University community, including visitors to campus, and it will prohibit the use of tobacco- and nicotine-containing products on property owned or controlled by the UA. This includes the main campus, the Arizona Health Sciences Center, the Phoenix Biomedical Campus, UA South, all satellite campuses, University vehicles, and any property leased by the UA. Smoking cessation aids, such as nicotine gum, patches, and nasal sprays, will be permitted, but all other forms of tobacco or nicotine - including pipes, cigars, cigarettes and e-cigarettes, all types of smokeless tobacco, and water pipes - will be prohibited. The latest version of the policy is available [here](#).
## PHPM 510 Fall 2019 Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Lecture Topic</th>
<th>Quiz†</th>
<th>Assign</th>
</tr>
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<tbody>
<tr>
<td>Aug 27 (Tu)</td>
<td>Course Overview</td>
<td></td>
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<tr>
<td>Aug 29</td>
<td>Writing a Policy Brief</td>
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<tr>
<td>Sep 3 (Tu)</td>
<td>America’s Unique Values / American Nations</td>
<td>Pre-Test</td>
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<tr>
<td>Sep 5</td>
<td>The Wonders of Modern Medicine</td>
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<tr>
<td>Sep 10 (Tu)</td>
<td>The Cost of Modern Medicine</td>
<td>Q1.1</td>
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<tr>
<td>Sep 12</td>
<td>Individual Determinants of Health</td>
<td>1A</td>
<td></td>
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<tr>
<td>Sep 17 (Tu)</td>
<td>Social Determinants of Health / Racism</td>
<td>Q1.2</td>
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<tr>
<td>Sep 19</td>
<td>The False Promise of Disease Prevention</td>
<td>1B</td>
<td></td>
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<tr>
<td>Sep 24 (Tu)</td>
<td>Physicians: The RBRVS, FFS &amp; Capitation</td>
<td>Q1.3</td>
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<tr>
<td>Sep 26</td>
<td>Physicians: ROI, Shortage, or Glut?</td>
<td>2A</td>
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<tr>
<td>Oct 1 (Tu)</td>
<td>Hospitals: The DRG and Cost-Shifting</td>
<td>Unit 1</td>
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<tr>
<td>Oct 3</td>
<td>Hospitals: Organization and Competition</td>
<td>2B</td>
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<tr>
<td>Oct 8 (Tu)</td>
<td>Insurance 1: Risk Mitigation and Risk Pooling</td>
<td>Q 2.1</td>
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<tr>
<td>Oct 10</td>
<td>Insurance 2: Premium Setting</td>
<td>3A</td>
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<tr>
<td>Oct 15 (Tu)</td>
<td>In-Class Activity: Medical Underwriting</td>
<td>Q 2.2</td>
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<tr>
<td>Oct 17</td>
<td>Insurance 3: Market Failure</td>
<td>3B</td>
<td></td>
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<tr>
<td>Oct 22 (Tu)</td>
<td>Insurance 4: Employer-Based Health Insurance</td>
<td>Q 2.3</td>
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<tr>
<td>Oct 24</td>
<td>Insurance 5: The Uninsured</td>
<td>4A</td>
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<tr>
<td>Oct 29 (Tu)</td>
<td>Medicaid</td>
<td>Unit 2</td>
<td></td>
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<tr>
<td>Oct 31</td>
<td>Medicare</td>
<td>4B</td>
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<tr>
<td>Nov 5 (Tu)</td>
<td>The Pharmaceutical Industry</td>
<td>Q 3.1</td>
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<td>Nov 7</td>
<td>Patient Protection and Affordable Care Act</td>
<td>5A</td>
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<tr>
<td>Nov 12 (Tu)</td>
<td>Health Policy and the Political Process</td>
<td>Q 3.2</td>
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<td>Nov 14</td>
<td>US Tax Policy</td>
<td>5B</td>
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<tr>
<td>Nov 19 (Tu)</td>
<td>Income Inequality and Health</td>
<td>Q 3.3</td>
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<td>Nov 21</td>
<td>Federal Budget Deficit &amp; Entitlement Reform</td>
<td>6A/Book</td>
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<tr>
<td>Nov 26 (Tu)</td>
<td>THANKSGIVING BREAK</td>
<td>Unit 3</td>
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<tr>
<td>Nov 28</td>
<td>THANKSGIVING BREAK</td>
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<tr>
<td>Dec 3 (Tu)</td>
<td>Medicare-for-All: Part 1</td>
<td>Q 4.1</td>
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<tr>
<td>Dec 5</td>
<td>Medicare-for-All: Part 2</td>
<td>6B</td>
<td></td>
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<tr>
<td>Dec 10 (Tu)</td>
<td>Medical Malpractice and Tort Reform</td>
<td>Q 4.2</td>
<td></td>
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<tr>
<td>Dec 17(Mon)*</td>
<td>Final Exam (1:00 PM – 3:00 PM)--ONLINE/D2L</td>
<td>FINAL</td>
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† Quizzes are available on d2L beginning every Sunday at 8:00AM and closing Monday at 5PM.
APPENDICES FOR CEPH REVIEW

(Exam questions and quizzes are not included in the syllabus)
Questions (answer either question 1 or 2):

(1) The March 2018 Kaiser Health Tracking poll found that 80% of Americans feel drug costs are unreasonable and that politicians are not doing enough to bring them down. However, a February 2018 POLITICO poll found that support for reform falls substantially when potential trade-offs like fewer new medications for seniors (90% support declining to 42%) or less drug research (80% support declining to 38%) are considered. While addressing this problem may tempt politicians, they will find it difficult unless trade-offs can be satisfactorily addressed.

In May 2018, President Trump through the Department of Health and Human Services released a Blueprint to Lower Drug Prices and Reduce Out-of-Pocket Costs. This document outlined numerous immediate policy reforms and proposed areas for future effort. One was the well-described difference in prescription medication prices in the United States versus other industrialized countries. The document states (pg. 22697):

“U.S. consumers and taxpayers generally pay more for brand drugs than do consumers and taxpayers in other OEDC countries, which often have reimbursements set by their central government. In effect, other countries are not paying an appropriate share of the necessary research and development to bring
innovative drugs to the market and are instead freeriding off U.S. consumers and taxpayers.”

The section asks for public comment on “what can be done to reduce the pricing disparity and spread the burden for new drug development more equally between…countries?”

Specifically, students should:

a. Propose a policy to reduce the pricing disparity for prescription medications between the United States and other economically developed countries.
b. Consider current market conditions that dictate the price of prescription medications across countries and the magnitude of price differences across countries.
c. Describe the advantages and disadvantages of their policy relative to the price of prescription medications and impact on future innovation.

Required Reading:


Recommended Reading:


(2) On June 28, 2012, the Supreme Court determined the Affordable Care Act’s Medicaid expansion was unconstitutionally coerced states in National Federation of Independent Business (NFIB) v. Sebelius. This ruling made Medicaid expansion optional. So, far 33 states have expanded Medicaid and 17 have not (see map).

Specifically, students should:

a. Choose a state that has not expanded Medicaid and compose an argument for or against expansion.
b. Consider the economic impact Medicaid expansion would have on the state’s budget and its taxpayers.
c. Consider the impact expansion would / would not have on the state’s uninsured rate, access to care, and change in health among its residents who would gain Medicaid coverage.
**Required reading:**


**Recommended Reading** (sources of state specific data and analysis):


To receive full credit for homework assignments, students must:

- Compose 500 - 750 word response excluding title and reference list. The word count must be clearly documented.
- Font must be 12 pt, line spacing must be double-spaced, margins must be exactly 1 inch.
- All references, including any required or recommended reading, must be documented using the American Medical Association citation style (e.g., JAMA or NEJM).
- In addition to any required or recommending reading, students must use and cite 1 additional article indexed in PubMed.
- The plagiarism software, Turnitin.com, will be used to evaluate all assignments. The originality report is made available to students; therefore, students are wholly responsible for addressing any issues prior to the due date.

Questions (answer either question 1 or 2):

1. Medicare’s financial challenges are well described in the 2018 Medicare Trustees Report. Unless changes are made, Medicare is expected to go “bankrupt” soon and be unable to meet its full obligation to provide seniors with affordable access to medical care.

   Broadly speaking, Medicare reform can be undertaken as incremental or wholesale change. Incremental change would likely continue Medicare as a defined-benefit program. To ensure its sustainability, minor changes would be made to eligibility requirements, benefits provided, physician and hospital payments, and supporting taxes. Alternatively, wholesale change would likely redesign Medicare as a defined contribution program where seniors would be given a fixed amount of money to purchase health insurance in the private market.

   Critics of incremental change argue that it doesn’t solve the problem but simply “kicks it down the road” creating ever larger problems for future generations. Critics of wholesale change argue that it will simply shift medical care costs from the government to seniors without addressing the real problems of limited competition, unnecessary care, and distorted payment incentives.
Specifically, students should:

a. Construct an argument supporting incremental reform, keeping Medicare as a defined benefit program, or wholesale reform, redesigning Medicare as a defined contribution program.

b. Consider the magnitude of the current financial problem and how “much” reform will be needed to make Medicare sustainable.

c. Compare and contrast defined benefit and defined contribution programs with regard to their impact on the federal budget and seniors’ finances and access to care.

d. Consider to what extent seniors should be responsible for the costs of their medical care versus how much taxpayers should be responsible for these costs.

Required Reading:


Recommended Reading:


(2) Interest Group Theory argues that organized groups with concentrated interests lobby for legislation that enables them to obtain economic rewards they could not otherwise obtain in a free market. Legislators are willing to support interest groups in return for re-election support (e.g., campaign donations). Conversely, legislators could provide benefits to interest groups to buy their support or prevent their opposition to otherwise unpopular legislation.

Choosing one of the following organizations as an example explain the interest group’s support or opposition to the 2010 Affordable Care Act:

- American Medical Association (AMA)
- Pharmaceutical Research and Manufacturers of America (PhRMA)
- American Hospital Association (AHA)
- United Autoworkers (UAW)
- American Association of Retired Persons (AARP)
- America’s Health Insurance Plans (AHIP)
Specifically, students should:

a. Choose a specific interest group, state whether that group supported or opposed the Affordable Care Act in 2010, and explain their likely rationale.

b. Briefly describe the key elements of the interest group theory as they apply to your chosen interest group.

c. Describe how the ACA has actually impacted your interest’s group’s financial position drawing a conclusion whether it was a “winner” or a “loser.”

Required reading:


Income Inequality (Questions 1 - 8)

**Random Question 1**  Difficulty: 1

Economic inequality can be measured by____?

- how much people earn in a given year: 1 (20%)
- how much people spend in a given year: 0 (0%)
- both: 4 (80%)
- neither: 0 (0%)

**Random Question 2**  Difficulty: 1

Current US tax policy reduces income inequality.

- True: 0 (0%)
- False: 2 (100%)

**Random Question 3**  Difficulty: 1

In the United States, after-tax income is more equally distributed than before tax income.

- True: 100%
1 (25 %)

Average
Grade: 0.25 / 1
(25 %) Standard Deviation: n/a
Random Question 4  Difficulty: 1

Dividing Americans into 5 groups (quintiles) based on their annual income is a good way to define who is "rich" and who is "poor."

True
False

Average Grade: 1 / 1 (100 %)

Random Question 5  Difficulty: 1

In the United States, there are no realistic options to distribute income more equally.

True
False

Average Grade: 1 / 1 (100 %)

Random Question 6  Difficulty: 1

Changes in tax policy help explain why income inequality has worsened in the US.

True
False

Average Grade: 1 / 1 (100 %)

Random Question 7  Difficulty: 1

Dr. Gerald argued that consumption inequality was a bad way to measure economic inequality because it _____.

ignores the importance of savings to protect against financial setbacks and invest in children's well-being

shows that inequality is not very big and we all intuitively know that this is not true

was devised by evil economists who want to rule the world

Average Grade: 0.33 / 1 (33.33 %)

**Random Question 8**  Difficulty: 1

Social mobility, the notion that people born poor can earn high incomes as adults, is higher in the US than in Western Europe?

- **True**
  - 0 (0%)

- **False**
  - 4 (100%)

Average Grade: 1 / 1 (100%)

Standard Deviation: n/a

Point Biserial: n/a

Discrimination Index: n/a

**Random Question 9**  Difficulty: 1

Children born today are more likely to earn more than their parents than children born 40 or 50 years ago?

- **True**
  - 2 (50%)

- **False**
  - 2 (50%)

Average Grade: 0.5 / 1 (50%)

Standard Deviation: n/a

Point Biserial: n/a

Discrimination Index: n/a

**Random Question 10**  Difficulty: 1

Which inequality measure shows inequality to be largest?

- **consumption**
  - 0 (0%)

- **income**
  - 0 (0%)

- **wealth**
  - 7 (100%)

All show inequality to be equally large

**Random Question 11**  Difficulty: 1

For most Americans, ____ accounts for their largest source of wealth?

- **business equity**
  - 0 (0%)

- **investments**
  - 0 (0%)

- **pensions**
  - 0 (0%)

- **principal residence**
  - 4 (100%)

**Random Question 12**  Difficulty: 1

Between 1980 and 2010, average after-tax income grew for Americans with incomes____?
<20th percentile 0 (0 %)
Between 1980 and 2005, income from ____ sources was distributed in a more unequal manner?

- business: 0 (0 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- capital gains: 0 (0 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- wages: 0 (0 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- all became more unequally distributed: 3 (100 %)
  Average Grade: 0.5 / 1 (50 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

Among economically advanced countries, ____ is the best predictor of life expectancy

- income inequality: 2 (50 %)  
  Average Grade: 0.5 / 1 (50 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- per capita income: 2 (50 %)  
  Average Grade: 0.5 / 1 (50 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- both equally predict life expectancy: 0 (0 %)
  Average Grade: 0.5 / 1 (50 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- neither predict life expectancy: 0 (0 %)
  Average Grade: 0.5 / 1 (50 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

The primary goal of Medicare and Social Security is to protect the elderly from poverty.

- True: 4 (100 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a

- False: 0 (0 %)  
  Average Grade: 0 / 1 (0 %)
  Standard Deviation: n/a  
  Point Biserial: n/a  
  Discrimination Index: n/a
Random Question 2  Difficulty: 1
Increasing the payroll tax would improve the financial status of the entire Medicare program?

- True
- False

Average Grade: 0.6 / 1 (60 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 3  Difficulty: 1

If one assumes that Medicare reform is inevitable, what type of reform is most likely?

- incremental change
- wholesale change

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 4  Difficulty: 1

The traditional measure of poverty may underestimate poverty among the elderly because it does not account for____?

- general inflation
- long-term care costs
- out-of-pocket health care spending
- taxation of social security benefits

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 5  Difficulty: 1

The most important reason to reform Medicare is to____?

- ensure federal revenue matches the desired level of services
- increase access to additional medical services and treatments
- increase the quality of care seniors receive
- reduce out-of-pocket medical spending by seniors

Average Grade: 0.75 / 1 (75 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
Random Question 6  Difficulty: 1
Requiring seniors to pay for more of their medical expenses out-of-pocket is a reform that is likely to ___?

- occur: 0 (0 %)
- increase seniors' financial burden: 1 (20 %)
- both: 4 (80 %)
- neither: 0 (0 %)

Average Grade: 0.8 / 1 (80 %)
Point Biserial: n/a
Discrimination Index: n/a

Random Question 7  Difficulty: 1

The primary advantage of a defined contribution program is that it limits the amount of money the federal government is obligated to pay.

- True: 5 (100 %)
- False: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Point Biserial: n/a
Discrimination Index: n/a

Random Question 8  Difficulty: 1

Raising the Medicare eligibility age from 65 to 67 years would disadvantage this group?

- low income: 0 (0 %)
- poorly educated: 0 (0 %)
- both: 3 (100 %)
- neither: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Point Biserial: n/a
Discrimination Index: n/a

Random Question 9  Difficulty: 1

What group would be benefit most from changing Medicare and Medicaid to defined contribution programs?

- elderly: 0 (0 %)
- federal taxpayers: 3 (100 %)
- low-income Americans: 0 (0 %)
- state governments: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Point Biserial: n/a
Discrimination Index: n/a

Random Question 10  Difficulty: 1

Entitlement reform primarily refers to changes in which of the following pieces of federal legislation?

- Affordable Care Act: 0 (0 %)

Average Grade: 1 / 1
(100 %)
Random Question 11  Difficulty: 1

Which statement regarding Social Security income is TRUE?

Considering the income earned by all seniors, Social Security income represents less than half of all earned income.

Both.

For the majority of seniors, Social Security income represents more than one-half of their individual earned income.

Both.

Random Question 12  Difficulty: 1

Seniors at greatest risk of poverty include those who are ____?

The oldest.

Single.

Non-white.

All of the above.

Random Question 13  Difficulty: 1

Social Security payments and Medicare benefits fully protect American seniors from out-of-pocket spending for medical care.

True.

False.

Random Question 14  Difficulty: 1

The primary advantage of a defined benefit program is that beneficiaries are guaranteed to receive a specific set of services once
True 3 (75 %)  
False 1 (25 %)  

Average Grade: 0.75 / 1 (75 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

Unit 3 Review (Questions 16 - 25)

Random Question 1  Difficulty: 1

This Medicare program was instituted to increase access to prescription medications.

<table>
<thead>
<tr>
<th>Part</th>
<th>Correct Answers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>0</td>
<td>0 %</td>
</tr>
<tr>
<td>B</td>
<td>0</td>
<td>0 %</td>
</tr>
<tr>
<td>C</td>
<td>0</td>
<td>0 %</td>
</tr>
<tr>
<td>D</td>
<td>6</td>
<td>100 %</td>
</tr>
</tbody>
</table>

Random Question 2  Difficulty: 1

This Medicare program requires a $1100 deductible for each hospitalization.

<table>
<thead>
<tr>
<th>Part</th>
<th>Correct Answers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
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</tr>
<tr>
<td>B</td>
<td>0</td>
<td>0 %</td>
</tr>
<tr>
<td>C</td>
<td>0</td>
<td>0 %</td>
</tr>
<tr>
<td>D</td>
<td>0</td>
<td>0 %</td>
</tr>
</tbody>
</table>

Random Question 3  Difficulty: 1

The advantage associated with Medicare Part C is greater physician and hospital choice.

<table>
<thead>
<tr>
<th>Correct Answers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>0 (0 %)</td>
</tr>
<tr>
<td>False</td>
<td>3 (100 %)</td>
</tr>
</tbody>
</table>

Random Question 4  Difficulty: 1

Government imposed price controls on prescription medications would benefit ____ consumers and harm ____ consumers?

today's and tomorrow's, respectively

today's and today's respectively

today's and tomorrow's respectively
0
(0 %)

Average Grade: 1/1 (100%)

Random Question 5  Difficulty: 1

The term "dual eligible" applies to individuals who ____?

- are age 65 or older: 0 (0%)
- extremely impoverished: 0 (0%)
- both: 5 (100%)
- neither: 0 (0%)

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 6  Difficulty: 1

Medicaid comprises a larger share of state budgets than the federal budget.

- True: 1 (33.33%)
- False: 2 (66.67%)

Average Grade: 0.33 / 1 (33.33%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 7  Difficulty: 1

In the US, the majority of filled prescriptions are for _____ medications; the majority of spending is for_____ medications.

- branded and branded, respectively: 0 (0%)
- branded and generic, respectively: 0 (0%)
- generic and branded, respectively: 4 (100%)
- generic and generic, respectively: 0 (0%)

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 8  Difficulty: 1

The impact of income inequality can reduced by ____?
giving people cash (e.g., Social Security) | 1 (20%)
Random Question 9 Difficulty: 1

**Federal legislation** is primarily driven by the preferences of this group?

- health care providers, hospitals, and pharmaceutical industry: 0 (0%)
- high income voters: 5 (100%)
- middle class, median voters: 0 (0%)
- the poor: 0 (0%)

Random Question 10 Difficulty: 1

Interest group theory suggests elected officials cast votes to ____?

- increase the legislator’s chance of re-election: 3 (100%)
- promote the well-being of American citizens: 0 (0%)
- both: 0 (0%)
- neither: 0 (0%)

Random Question 11 Difficulty: 1

The single largest source of federal revenue is ____?

- corporate taxes: 0 (0%)
- excise taxes: 0 (0%)
- income taxes: 3 (100%)
- sales taxes: 0 (0%)
Random Question 12  Difficulty: 1

Since 1980, tax policy has ______?

- lowered the highest marginal income tax rate 1 (25 %)
- lowered the amount of income needed to be in the highest income tax bracket 0 (0 %)
- both 3 (75 %)
- neither 0 (0 %)

Average Grade: 0.75 / 1 (75 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 13  Difficulty: 1

Prior to 1980, the federal budget was balanced in most years meaning revenue was equal to expenditures.

- True 0 (0 %)
- False 5 (100 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 14  Difficulty: 1

The largest category of Medicaid beneficiaries is ______; the most costly category of beneficiaries is ______?

- children and children, respectively 0 (0 %)
- children and disabled, respectively 2 (50 %)
- disabled and children, respectively 0 (0 %)
- disabled and disabled, respectively 2 (50 %)

Average Grade: 0.5 / 1 (50 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 15  Difficulty: 1

The concept explaining why the same prescription medication is sold for a higher price in the US than Europe is called?

- economic theory of government regulation 0 (0 %)
- monopoly pricing 2 (50 %)
- patent law 2 (50 %)
- price discrimination 0 (0 %)

Average Grade: 0 / 1 (0 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
Random Question 16  Difficulty: 1

In the US, taxpayers should be concerned about the possibility that legislators will court the vote of the poor by promising to expand social insurance programs.

<table>
<thead>
<tr>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Bars" /></td>
<td><img src="image2" alt="Bars" /></td>
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</tbody>
</table>

Average Grade: 0.5 / 1 (50 %)

Random Question 17  Difficulty: 1

The Affordable Care Act included an individual mandate to address this problem?

<table>
<thead>
<tr>
<th>adverse selection</th>
<th>crowd out</th>
<th>moral hazard</th>
<th>price discrimination</th>
</tr>
</thead>
<tbody>
<tr>
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<td><img src="image5" alt="Bars" /></td>
<td><img src="image6" alt="Bars" /></td>
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</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Random Question 18  Difficulty: 1

The Affordable Care Act includes laws that requires _____ to provide health insurance to designated groups of Americans?

<table>
<thead>
<tr>
<th>employers</th>
<th>states</th>
<th>both</th>
<th>neither</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Average Grade: 1 / 1 (100 %)

Random Question 19  Difficulty: 1

The Affordable Care Act made __ ?

<table>
<thead>
<tr>
<th>health insurance more affordable to low income Americans</th>
<th>it easier for those with chronic disease to afford health insurance</th>
<th>it easier to obtain preventive health services</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image11" alt="Bars" /></td>
<td><img src="image12" alt="Bars" /></td>
<td><img src="image13" alt="Bars" /></td>
</tr>
</tbody>
</table>

Average Grade: 0.8 / 1 (80 %)

true 2 (50 %)
false 2 (50 %)

Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
<table>
<thead>
<tr>
<th>Answer</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>all of the above</td>
<td>4 (80%)</td>
</tr>
</tbody>
</table>
Medicaid (Questions 1 - 7)

Random Question 1  Difficulty: 1

The federal government spends more on Medicaid than Medicare?

- True
- False

Average Grade: 0.8 / 1 (80%)  Standard Deviation: n/a  Point Biserial: n/a  Discrimination Index: n/a

Random Question 2  Difficulty: 1

The medical services covered by Medicaid can vary from state to state?

- True
- False

Average Grade: 1 / 1 (100%)  Standard Deviation: n/a  Point Biserial: n/a  Discrimination Index: n/a

Random Question 3  Difficulty: 1

To receive matching federal dollars, state Medicaid programs must pay for prescription medications, dental care, and vision care.

- True
- False

Average Grade: 1 / 1 (100%)  Standard Deviation: n/a  Point Biserial: n/a  Discrimination Index: n/a
Random Question 4  Difficulty: 1
If an individual is eligible for Medicaid in one state, they are guaranteed to be eligible in another?

- True
- False

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

**Random Question 5**  Difficulty: 1

Children and working age adults represent ____ than one-half of all Medicaid beneficiaries and account for ____ than one-half of all Medicaid spending.

- less and less, respectively
- less and more, respectively
- more and less, respectively
- more and more, respectively

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

**Random Question 6**  Difficulty: 1

The federal government accounts for at least 50% of Medicaid spending in ____ states?

- all
- most
- some
- no

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

**Random Question 7**  Difficulty: 1

The Arizona Medicaid program, Arizona Health Care Cost Containment System (AHCCCS), is unique because ____?

- it receives fewer matching dollars from the federal government than other states
- it is the only state that did not expand its eligibility requirements to meet those required by the Affordable Care Act

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Random Question 8  Difficulty: 1

Medicaid spending per beneficiary is highest for ___?

- adults: 0 (0 %)
- children: 0 (0 %)
- disabled: 6 (100 %)
- all have about equal Medicaid expenditures: 0 (0 %)

Random Question 9  Difficulty: 1

Dual eligibles tend to be____ than traditional Medicaid beneficiaries.

- more costly: 0 (0 %)
- sicker: 0 (0 %)
- both: 3 (100 %)
- neither: 0 (0 %)

Random Question 10  Difficulty: 1

Medicaid ____should they become ill?

- protects individuals from financial harm: 0 (0 %)
- provides individuals access to medical services: 0 (0 %)
- both: 6 (100 %)
- neither: 0 (0 %)
Random Question 11  Difficulty: 1

The Affordable Care Act intended to make Medicaid eligibility criteria more consistent and equitable across the 50 states.

True  False  
Average Grade: 0 / 1 (0 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a  

Random Question 12  Difficulty: 1

Who provides the largest amount of funding to operate Arizona's Medicaid program?

Arizona state government  
US federal government  
they provide an equal amount  
Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a  

Random Question 13  Difficulty: 1

Prior to the ACA, Medicaid policies suggested that ____ were least deserving of taxpayer assistance to obtain health insurance?

childless adults  
children  
parents  
pregnant women  
Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a  

Random Question 14  Difficulty: 1

Medicaid expansion in Arizona placed a much greater burden on Arizona taxpayers than federal taxpayers.

True  False  
Average Grade: 0 / 1 (0 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a  

Random Question 15  Difficulty: 1

Medicaid will pay for long term nursing home care for elderly individuals who are poor and are unsafe to live in the community.

True  False  
Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a
Random Question 16  Difficulty: 1

Dual eligibles are individuals who are eligible for _____.

- hospital and prescription drug coverage: 0 (0 %)
- medical care and nursing home care: 0 (0 %)
- Medicaid and Medicare: 5 (100 %)
- Medicaid in two or more states: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 17  Difficulty: 1

Individuals who have Medicaid insurance have similar access to medical care as ____?

- the uninsured: 0 (0 %)
- those with employer-based health insurance: 2 (100 %)
- they all have equal access to care: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Medicare (Questions 8 - 15)

Random Question 1  Difficulty: 1

This Medicare program provides coverage for physician services and diagnostic testing.

- Part A: 0 (0 %)
- Part B: 1 (100 %)
- Part C: 0 (0 %)
- Part D: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 2  Difficulty: 1

This Medicare program requires a monthly premium?
Random Question 3  Difficulty: 1

The number of Americans eligible for Medicare is expected to increase over the coming years.

- **True**: 7 (100 %)
- **False**: 0 (0 %)

Random Question 4  Difficulty: 1

This Medicare program's benefits and payment structure most resembles a health maintenance organization.

- **Part A**: 0 (0 %)
- **Part B**: 0 (0 %)
- **Part C**: 2 (100 %)
- **Part D**: 0 (0 %)

Random Question 5  Difficulty: 1

This Medicare program is financed mostly by the Medicare payroll tax.

- **Part A**: 2 (100 %)
- **Part B**: 0 (0 %)
- **Part C**: 6 (100 %)
- **Part D**: 0 (0 %)

Random Question 6  Difficulty: 1

This Medicare program has the flexibility to offer coverage for dental care, vision care, and wellness programs.

- **Part A**: 0 (0 %)
- **Part B**: 0 (0 %)
- **Part C**: 6 (100 %)
- **Part D**: 0 (0 %)
**Random Question 7**  Difficulty: 1

Because Medicare requires substantial out-of-pocket spending, many Medicare beneficiaries have private insurance to cover these expenditures.

Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

**Random Question 8**  Difficulty: 1

If Medicare goes "bankrupt" it will be because the tax revenue for this Medicare program will be insufficient to meet the program's needs?

<table>
<thead>
<tr>
<th>Part</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part A</td>
<td>3 (100 %)</td>
<td></td>
</tr>
<tr>
<td>Part B</td>
<td>0 (0 %)</td>
<td></td>
</tr>
<tr>
<td>Part C</td>
<td>0 (0 %)</td>
<td></td>
</tr>
<tr>
<td>Part D</td>
<td>0 (0 %)</td>
<td></td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

**Random Question 9**  Difficulty: 1

What happens in the "donut" hole?

<table>
<thead>
<tr>
<th>Action</th>
<th>Total</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>patients have to pay all of their prescription medication costs out-of-pocket</td>
<td>3 (60 %)</td>
<td></td>
</tr>
<tr>
<td>the federal government pays all of patients prescription medication costs</td>
<td>0 (0 %)</td>
<td></td>
</tr>
<tr>
<td>Medicaid payments are used to cover out-of-pocket expenses that are not covered by Medicare</td>
<td>1 (20 %)</td>
<td></td>
</tr>
<tr>
<td>stays in the &quot;donut&quot; hole</td>
<td>1 (20 %)</td>
<td></td>
</tr>
</tbody>
</table>

Average Grade: 0.6 / 1 (60 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

**Random Question 10**  Difficulty: 1

This Medicare program pays for long-term nursing home care.
Random Question 11  Difficulty: 1

What is the role of the federal government in Medicare?

- **employ physicians**: 0 (0 %)  
- **own hospitals**: 0 (0 %)  
- **pay providers for medical services**: 3 (100 %)  
- **set annual spending limits**: 0 (0 %)

Random Question 12  Difficulty: 1

Overall, what percent of Medicare expenditures are funded by beneficiary premiums?

- **10-15%**: 2 (66.67 %)  
- **35-45%**: 0 (0 %)  
- **55-65%**: 1 (33.33 %)  
- **85-95%**: 0 (0 %)

Random Question 13  Difficulty: 1

The elderly spend ____ of their household budget on health care than the nonelderly.

- **less**: 0 (0 %)  
- **about the same**: 0 (0 %)  
- **more**: 4 (100 %)

Random Question 14  Difficulty: 1

Medicare spending increases as beneficiaries get older.
<table>
<thead>
<tr>
<th>True</th>
<th>False</th>
<th>Average Grade: 0.83 / 1 (83.33 %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 (83.33 %)</td>
<td>1 (16.67 %)</td>
<td>Standard Deviation: n/a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Point Biserial: n/a</td>
</tr>
</tbody>
</table>

Random Question 15  Difficulty: 1

The risk of Medicare going bankrupt is a new problem that has not been faced before.

Average Grade: 0.83 / 1 (83.33 %)

<table>
<thead>
<tr>
<th>True</th>
<th>1 (16.67 %)</th>
<th>Standard Deviation: n/a</th>
</tr>
</thead>
<tbody>
<tr>
<td>False</td>
<td>5 (83.33 %)</td>
<td>Point Biserial: n/a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discrimination Index: n/a</td>
</tr>
</tbody>
</table>

Random Question 16  Difficulty: 1

Most Medicare beneficiaries have chosen to enroll in a program that fosters competition between health providers so that beneficiaries can lower their monthly premiums.

Average Grade: 0.83 / 1 (83.33 %)

<table>
<thead>
<tr>
<th>True</th>
<th>1 (16.67 %)</th>
<th>Standard Deviation: n/a</th>
</tr>
</thead>
<tbody>
<tr>
<td>False</td>
<td>5 (83.33 %)</td>
<td>Point Biserial: n/a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discrimination Index: n/a</td>
</tr>
</tbody>
</table>

Random Question 17  Difficulty: 1

Medicare, by itself, protects most beneficiaries from catastrophic out-of-pocket health expenditures should they become seriously ill.

Average Grade: 0.67 / 1 (66.67 %)

<table>
<thead>
<tr>
<th>True</th>
<th>1 (33.33 %)</th>
<th>Standard Deviation: n/a</th>
</tr>
</thead>
<tbody>
<tr>
<td>False</td>
<td>2 (66.67 %)</td>
<td>Point Biserial: n/a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discrimination Index: n/a</td>
</tr>
</tbody>
</table>
Random Question 1  Difficulty: 1

Based on profit margins, the pharmaceutical industry appears to highly competitive.

**True**
- Average Grade: 0.5 / 1 (50 %)
- Standard Deviation: n/a
- Point Biserial: n/a
- Discrimination Index: n/a

**False**
- 3 (50 %)

Random Question 2  Difficulty: 1

Prescription medication spending represents the largest component of national health spending?

**True**
- Average Grade: 1 / 1 (100 %)
- Standard Deviation: n/a
- Point Biserial: n/a
- Discrimination Index: n/a

**False**
- 5 (100 %)

Random Question 3  Difficulty: 1

The majority of Americans report difficulty paying for prescription medications?

**True**
- Average Grade: 0.75 / 1 (75 %)
- Standard Deviation: n/a
- Point Biserial: n/a
- Discrimination Index: n/a

**False**
- 3 (75 %)
Which factor is the most important determinant of a drug's price?

- marketing cost: 0 (0 %)
- production cost: 0 (0 %)
- research and development cost: 0 (0 %)
- value to consumer: 4 (100 %)

Random Question 5  Difficulty: 1

Prescription medication use increases with age?

- True: 2 (100 %)
- False: 0 (0 %)

Random Question 6  Difficulty: 1

Prescription medication spending is growing faster than any other component of national health expenditures.

- True: 0 (0 %)
- False: 6 (100 %)

Random Question 7  Difficulty: 1

If the government required pharmaceutical manufacturers to lower prices on patented prescription medications, it would decrease __ ?

- innovation: 1 (25 %)
- profits: 1 (25 %)
- both: 2 (50 %)
- neither: 0 (0 %)

Random Question 8  Difficulty: 1

Greater use of non-opioid prescription medications has ___?

- improved the quality of our lives: 0 (0 %)
- reduced spending on: 0 (0 %)
Average Grade:
0.83 / 1 (83.33 %)
Standard Deviation:
n/a
Random Question 9  Difficulty: 1

_____ consumers stand to benefit most if the government sets lower prices for prescription drugs?

<table>
<thead>
<tr>
<th></th>
<th>Today's</th>
<th>Tomorrow's</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4 (100%)</td>
<td>0 (0 %)</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Random Question 10  Difficulty: 1

Generic medications account for the ____ of units sold and the ____ of drug manufacturer profits?

<table>
<thead>
<tr>
<th></th>
<th>minority and minority, respectively</th>
<th>minority and majority, respectively</th>
<th>majority and minority, respectively</th>
<th>majority and majority, respectively</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 (0 %)</td>
<td>0 (0 %)</td>
<td>3 (100 %)</td>
<td>0 (0 %)</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Random Question 11  Difficulty: 1

Prescription medication spending is growing faster than any other category of health spending.

<table>
<thead>
<tr>
<th></th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 (0 %)</td>
<td>6 (100 %)</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Random Question 12  Difficulty: 1

Compared to Americans living in the early 1900s, Americans today spend ____ of their health care dollar on prescription medications.

<table>
<thead>
<tr>
<th></th>
<th>a greater portion</th>
<th>a smaller portion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Average Grade: 0.8 / 1 (80%) Standard Deviation: n/a

1 (20%)
Random Question 13  Difficulty: 1

Overall, medication spending accounts for ___ of national health expenditures?

- 5%: 0 (0 %)
- 15%: 8 (100 %)
- 25%: 0 (0 %)
- 35%: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 14  Difficulty: 1

If a prescription medication is expensive, then ____?

- The medication may offer a lot of health benefit: 0 (0 %)
- The pharmaceutical manufacturer may have a monopoly: 1 (20 %)
- There are no good treatment alternatives: 0 (0 %)
- All of the above: 4 (80 %)

Average Grade: 0.8 / 1 (80 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 15  Difficulty: 1

When thinking about the price of cancer drugs, ____?

- Americans do not want to die from cancer: 0 (0 %)
- Americans obtain positive value from cancer drug spending: 0 (0 %)
- Americans spend more than citizens of other countries: 1 (25 %)
- All of the above: 3 (75 %)

Average Grade: 0.75 / 1 (75 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
The ACA (Questions 9 - 15)

**Random Question 1** Difficulty: 1

The major goal of the Affordable Care Act (ACA) was to ___?

- improve the quality of health care
  - 0 (0 %)
- improve the value of health care
  - 0 (0 %)  
- reduce the cost of health care
  - 0 (0 %)  
- reduce the number of uninsured
  - 5 (100 %)

**Average Grade: 1 / 1 (100 %)**

**Standard Deviation: n/a**

**Point Biserial: n/a**

**Discrimination Index: n/a**

**Random Question 2** Difficulty: 1

The Affordable Care Act (ACA) required health insurance companies to?

- cover dependents up to age 26
  - 0 (0 %)
- eliminate annual and lifetime coverage caps
  - 0 (0 %)
- offer health insurance to those with pre-existing conditions
  - 0 (0 %)
- all of the above
  - 4 (100 %)

**Average Grade: 1 / 1 (100 %)**

**Standard Deviation: n/a**

**Point Biserial: n/a**

**Discrimination Index: n/a**

**Random Question 3** Difficulty: 1

The largest number of Americans have signed up for ____ plans on the Marketplace?

- bronze
  - 0 (0 %)
- silver
  - 5 (100 %)
- gold
  - 0 (0 %)
- platinum
  - 0 (0 %)

**Random Question 4** Difficulty: 1

Which geographic region in the US has the highest uninsured rates?

- 5 (100 %)
Average Grade: 1 / 1 (100 %) Standard Deviation: n/a
Point Biserial: n/a Discrimination Index: n/a
Random Question 5  Difficulty: 1
For a 2 adults and 2 child household with an income >400% of the Federal Poverty Level, which is MORE expensive?

- **the annual penalty for not purchasing insurance**: 1 (25 %)  
  Average Grade: 0.75 / 1 (75 %)
- **the annual premium for purchasing health insurance**: 3 (75 %)  
  Standard Deviation: n/a
  Point Bserial: n/a
  Discrimination Index: n/a
- **they are about equal**: 0 (0 %)

Random Question 6  Difficulty: 1
After full implementation of the Affordable Care Act, the largest category of remaining uninsured have incomes___ ?

- **above 400% of the federal poverty level**: 0 (0 %)  
  Average Grade: 1 / 1 (100 %)
- **between 138% - 400% of federal poverty level**: 0 (0 %)  
  Standard Deviation: n/a
  Point Biserial: n/a
  Discrimination Index: n/a
- **below 138% of the federal poverty level**: 6 (100 %)

Random Question 7  Difficulty: 1
Which statement about the uninsured is TRUE?

- **most uninsured are age 65 and older**: 0 (0 %)
- **most uninsured have incomes less than 250% of federal poverty level**: 4 (100 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a
  Point Biserial: n/a
  Discrimination Index: n/a
- **most uninsured live in deep South**: 6 (100 %)  
  Average Grade: 1 / 1 (100 %)
  Standard Deviation: n/a
  Point Biserial: n/a
  Discrimination Index: n/a
in households without any workers

all of the above are TRUE

Random Question 8  Difficulty: 1
Which employer is LEAST likely to offer health insurance to its workers? A firm that employees ____ workers?

5  3 (100 %)
50  0 (0 %)
500  0 (0 %)
5000  0 (0 %)

Random Question 9  Difficulty: 1
The Affordable Care Act attempted to reduce the number of uninsured by ____?

creating uniform Medicaid eligibility criteria across all 50 states  0 (0 %)
requiring employers to offer and employees to purchase health insurance  0 (0 %)
subsidizing the purchase of health insurance by middle income workers  0 (0 %)

all of the above  3 (100 %)

Random Question 10  Difficulty: 1
About one-half of the uninsured were expected to gain health insurance via the ACA’s Medicaid expansion provision.

True  4 (100 %)
False  0 (0 %)

Random Question 11  Difficulty: 1
Which group of Americans gained the most from the ACA's Medicaid expansion?
Random Question 12  Difficulty: 1

The individual mandate was intended to counter this problem?

- adverse selection  7 (100 %)  Average Grade: 1 / 1 (100 %)  Standard Deviation: n/a  Point Biserial: n/a  Discrimination Index: n/a
- crowd out  0 (0 %)
- moral hazard  0 (0 %)
- all of the above  0 (0 %)

Random Question 13  Difficulty: 1

The term "affordable" in the Affordable Care Act (ACA) is best understood as ____?

- lowering the price of medical services for everyone  1 (16.67 %)  Average Grade: 0.83 / 1 (83.33 %)  Standard Deviation: n/a  Point Biserial: n/a  Discrimination Index: n/a
- restricting the amount and frequency of services  0 (0 %)
- subsidizing cost of medical services for those with low incomes  5 (83.33 %)
- all of the above  0 (0 %)

Random Question 14  Difficulty: 1

The number of Americans without health insurance declined among which groups?

- age 19 - 64 years  138 - 400% federal
<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>(0 %)</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)
<table>
<thead>
<tr>
<th>Poverty Level</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Neither</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
What do the statistics on this page mean?

Health Policy (Questions 1 - 7)

Random Question 1  Difficulty: 1

Which group's preferences are BEST represented by our nation's laws and regulations?

- business groups: 0 (0 %)
- civic groups and organization: 0 (0 %)
- high income citizens: 4 (100 %)
- middle income citizens: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 2  Difficulty: 1

Voters are an important check against legislative abuses.

- True: 2 (40 %)
- False: 3 (60 %)

Average Grade: 0.6 / 1 (60 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 3  Difficulty: 1

Public opinion is one of the most important determinants of legislative success.
Average Grade: 1 / 1 (100 %)
Random Question 4  Difficulty: 1

Regulatory capture of executive branch agencies is of greatest concern when the agencies are ___.

- first-formed 1 (25 %)
- well-established 3 (75 %)

Average Grade: 0.75 / 1 (75 %)

Random Question 5  Difficulty: 1

Why do business groups lobby Congress?

- to obtain higher profits than competitive markets will allow 3 (100 %)
- to strengthen America’s public institutions 0 (0 %)
- to promote the democratic process 0 (0 %)
- all of the above 0 (0 %)

Average Grade: 1 / 1 (100 %)

Random Question 6  Difficulty: 1

Most Americans believe that there is too little government regulation.

- True 0 (0 %)
- False 7 (100 %)

Average Grade: 0.5 / 1 (50 %)

Random Question 7  Difficulty: 1

From the perspective of interest group theory, the Affordable Care Act represented elected officials’ desire to ___?

- curry favor with concentrated interests 2 (50 %)
- help the poor 2 (50 %)
- improve health outcomes 0 (0 %)

Average Grade: 0.5 / 1 (50 %)

Random Question 8  Difficulty: 1

Groups that have ____ are most likely to be successful in the political process?

- large numbers of people who have ill-defined interests in legislation that might impose small financial penalties. 0 (0 %)
- small, well-defined groups in which specific legislation might bear large financial rewards. 4 (80 %)
- both 1 (20 %)
- neither 0 (0 %)

Average Grade: 0.8 / 1 (80 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

Random Question 9  Difficulty: 1

From the perspective of the public interest view of government, the Affordable Care Act represented elected officials’ desire to ____?

- improve the health of all Americans 2 (100 %)  
- increase their re-election chances 0 (0 %)  
- redistribute resources to groups with concentrated interests 0 (0 %)  
- all of the above 0 (0 %)

Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

Random Question 10  Difficulty: 1

From the perspective of interest group theory, ____ represents “currency” interest groups might use to purchase legislation?

- campaign contributions 0 (0 %)  
- volunteers 0 (0 %)  
- voting blocks 0 (0 %)  
- all of the above 6 (100 %)
Discrimination Index: n/a
**Random Question 11**  Difficulty: 1

It is easy for the general public to hold legislators accountable for their decisions because ____?

- elections occur frequently, so it is easy to "throw the bums" out 0 (0 %)
- most of the important votes are taken in the full congress where legislators' actions are highly visible 0 (0 %)
- both 1 (33.33 %)
- neither 2 (66.67 %)

Average Grade: 0.67 / 1 (66.67 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

**Random Question 12**  Difficulty: 1

Democratic voters are more likely to support government regulation than Republican voters?

- True 3 (100 %)
- False 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

**Random Question 13**  Difficulty: 1

To save time and energy, voters may take one or more of the following "shortcuts" when voting?

- identify candidates' positions on a single, important policy 0 (0 %)
- vote a "straight" party ticket 0 (0 %)
- both 3 (100 %)
- neither 0 (0 %)

**Random Question 14**  Difficulty: 1

Affluent voters may have an outsized impact on legislative success because they are more likely to ____?

Random Question 15  Difficulty: 1

Legislation is most likely to pass when it is supported by ___?

- affluent voters
  - 1 (50 %) Average Grade: 0.5 / 1 (50 %)
  - 0 (0 %) Standard Deviation: n/a
  - -
  - Point Biserial: n/a
  - Discrimination Index: n/a

- interest groups
  - 0 (0 %)

- both
  - 1 (50 %)

- neither
  - 0 (0 %)

Random Question 16  Difficulty: 1

Legislation is most likely to align with the preferences of average voters when ___?

- presidential election years
  - 0 (0 %) Average Grade: 1 / 1 (100 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- small political majorities in Congress
  - 0 (0 %)

- both
  - 1 (100 %)

- neither
  - 0 (0 %)

Tax Policy (Questions 8 - 15)

Random Question 1  Difficulty: 1

Taxes can be used to encourage or discourage social behavior.

- True
  - 3 (100 %) Average Grade: 1 / 1 (100 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- False
  - 0 (0 %)
Random Question 2  Difficulty: 1
Over the past 40 years, this tax has accounted for an ever growing share to total government revenue?

- **Corporate**
  - Number: 0 (0 %)
  - Average Grade: 0.75 / 1 (75 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- **Excise**
  - Number: 0 (0 %)

- **Income**
  - Number: 1 (25 %)

- **Payroll**
  - Number: 3 (75 %)

**Random Question 3** Difficulty: 1

Federal deficits are a relatively new problem; in the past, most years have seen balanced budgets.

- **True**
  - Number: 0 (0 %)
  - Average Grade: 1 / 1 (100 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- **False**
  - Number: 2 (100 %)

**Random Question 4** Difficulty: 1

Arizona is a state that has a relatively progressive tax structure.

- **True**
  - Number: 0 (0 %)
  - Average Grade: 1 / 1 (100 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- **False**
  - Number: 3 (100 %)

**Random Question 5** Difficulty: 1

Compared to other economically advanced countries, taxes in the US are ____?

- **Much lower**
  - Number: 3 (75 %)
  - Average Grade: 0.75 / 1 (75 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- **Somewhat lower**
  - Number: 1 (25 %)

- **About the same**
  - Number: 0 (0 %)

- **Somewhat higher**
  - Number: 0 (0 %)

- **Much higher**
  - Number: 0 (0 %)

**Random Question 6** Difficulty: 1

A progressive tax is one in which high income earners pay a greater proportion of their income toward that tax than low income earners do.

- **True**
  - Number: 6 (100 %)
  - Average Grade: 1 / 1 (100 %)
  - Standard Deviation: n/a
  - Point Biserial: n/a
  - Discrimination Index: n/a

- **False**
  - Number: 0 (0 %)
Random Question 7  Difficulty: 1

On average, federal taxes tend to be _____ and state taxes tend to be ____?

- progressive and progressive, respectively 0 (0 %)
- progressive and regressive, respectively 6 (100 %) Average Grade: 1 / 1 (100 %) Standard Deviation: n/a Point Biserial: n/a Discrimination Index: n/a
- regressive and progressive, respectively 0 (0 %)
- regressive and regressive, respectively 0 (0 %)

Random Question 8  Difficulty: 1

Over the past 40 years, spending on this activity has consumed an ever growing share of total federal spending.

- defense 1 (25 %)
- health care 3 (75 %) Average Grade: 0.75 / 1 (75 %) Standard Deviation: n/a Point Biserial: n/a Discrimination Index: n/a
- interest 0 (0 %)
- non-defense discretionary 0 (0 %)

Random Question 9  Difficulty: 1

The federal government's largest source of revenue comes from ____?

- corporate taxes 0 (0 %) Average Grade: 1 / 1 (100 %) Standard Deviation: n/a Point Biserial: n/a Discrimination Index: n/a
- excise taxes 0 (0 %)
- income taxes 3 (100 %)
- payroll taxes 0 (0 %)

Random Question 10  Difficulty: 1

Which type of tax is progressive?

- excise 0 (0 %)
Average Grade: 1 / 1 (100 %)
Random Question 11  Difficulty: 1
Which type of tax is regressive?

- capital gains
- income
- sales
- all are regressive taxes

Random Question 12  Difficulty: 1
For average Americans, federal income taxes are ____. For affluent Americans, federal income taxes are ____.

- progressive and proportional, respectively
- progressive and regressive, respectively
- regressive and progressive, respectively
- regressive and proportional, respectively

Random Question 13  Difficulty: 1
Since 1980, changes in federal tax policy have led to a large reduction in taxes paid by Americans in this group.

- bottom 20%
- middle 20%
- top 20%
- top 1%
Random Question 14  Difficulty: 1

Federal spending on Medicare is considered a ___ budget item?

- discretionary 0 (0 %)
- mandatory 4 (100 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 15  Difficulty: 1

As a percentage of GDP, federal spending on ___ has declined the most since 1960?

- discretionary, national defense 4 (80 %)
- discretionary, non-defense 1 (20 %)
- interest on federal debt 0 (0 %)
- mandatory 0 (0 %)

Average Grade: 0.8 / 1 (80 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 16  Difficulty: 1

If a federal taxpayer earns enough income to qualify for a marginal tax rate of 22%, that means 22% of their total income must be paid taxes.

- True 0 (0 %)
- False 4 (100 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 17  Difficulty: 1

A majority of the general public support making ___?

- affluent Americans pay higher federal income tax rates 0 (0 %)
- more Americans pay federal income tax 0 (0 %)
- both 3 (100 %)
- neither 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 18  Difficulty: 1

True 0 (0 %)
False 4 (100 %)

Point Biserial: n/a
Discrimination Index: n/a
Voters are likely to support legislation that increases their personal taxes to balance the federal budget.
<table>
<thead>
<tr>
<th>True</th>
<th>0 (0 %)</th>
<th>Standard Deviation: n/a</th>
</tr>
</thead>
<tbody>
<tr>
<td>False</td>
<td>2 (100 %)</td>
<td>Point Biserial: n/a</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Discrimination Index: n/a
What do the statistics on this page mean?

Entitlement Reform (Questions 1 - 7)

Random Question 1  Difficulty: 1

The primary goal of Medicare and Social Security is to protect the elderly from poverty.

True: 2 (100 %)
False: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 2  Difficulty: 1

Increasing the payroll tax would improve the financial status of the entire Medicare program?

True: 0 (0 %)
False: 2 (100 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 3  Difficulty: 1

If one assumes that Medicare reform is inevitable, what type of reform is most likely?

incremental change: 0 (-)
wholesale change: 0 (-)

Average Grade: 0 / 1 (0 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
Random Question 4  Difficulty: 1
The traditional measure of poverty may underestimate poverty among the elderly because it does not account for ___?

- general inflation
- long-term care costs
- **out-of-pocket health care spending**
- taxation of social security benefits

Random Question 5  Difficulty: 1

The most important reason to reform Medicare is to ___?

- ensure federal revenue matches the desired level of services
- increase access to additional medical services and treatments
- increase the quality of care seniors receive
- reduce out-of-pocket medical spending by seniors

Random Question 6  Difficulty: 1

Requiring seniors to pay for more of their medical expenses out-of-pocket is a reform that is likely to ___?

- occur
- increase seniors' financial burden
- **both**
- neither

Random Question 7  Difficulty: 1
The primary advantage of a defined contribution program is that it limits the amount of money the federal government is obligated to pay.
Random Question 8  Difficulty: 1

Raising the Medicare eligibility age from 65 to 67 years would disadvantage this group?

- low income: 0 (0%)
- poorly educated: 0 (0%)
- both: 1 (100%)
- neither: 0 (0%)

Random Question 9  Difficulty: 1

What group would be benefit most from changing Medicare and Medicaid to defined contribution programs?

- elderly: 0 (0%)
- federal taxpayers: 1 (100%)
- low-income Americans: 0 (0%)
- state governments: 0 (0%)

Random Question 10  Difficulty: 1

Entitlement reform primarily refers to changes in which of the following pieces of federal legislation?

- Affordable Care Act: 0 (0%)
- Medicare: 3 (100%)
- both equally: 0 (0%)
- neither: 0 (0%)

Random Question 11  Difficulty: 1

Which statement regarding Social Security income is TRUE?

- Considering the income earned by all seniors, Social Security income represents less one: 0 (0%)

Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Average Grade: 1 / 1 (100%)
Point Biserial: n/a
Discrimination Index: n/a

Random Question 8

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 9

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 10

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 11

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
half of all earned income.

For the majority of seniors, Social Security income represents more than one-half of their individual earned income.

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>both</td>
<td>2 (100 %)</td>
</tr>
<tr>
<td>neither</td>
<td>0 (0 %)</td>
</tr>
</tbody>
</table>

**Random Question 12**  Difficulty: 1

Seniors at greatest risk of poverty include those who are _____?

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>the oldest</td>
<td>0 (0 %)</td>
</tr>
<tr>
<td>single</td>
<td>0 (0 %)</td>
</tr>
<tr>
<td>non-white</td>
<td>0 (0 %)</td>
</tr>
<tr>
<td>all of the above</td>
<td>1 (100 %)</td>
</tr>
</tbody>
</table>

**Random Question 13**  Difficulty: 1

Social Security payments and Medicare benefits **fully** protect American seniors from out-of-pocket spending for medical care.

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>0 (0 %)</td>
</tr>
<tr>
<td>False</td>
<td>3 (100 %)</td>
</tr>
</tbody>
</table>

**Random Question 14**  Difficulty: 1

The primary advantage of a defined benefit program is that beneficiaries are guaranteed to receive a specific set of services once eligible.

<table>
<thead>
<tr>
<th>Option</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>1 (100 %)</td>
</tr>
<tr>
<td>False</td>
<td>0 (0 %)</td>
</tr>
</tbody>
</table>

Affordable Care Act (Questions 8 - 15)

**Random Question 1**  Difficulty: 1

In general, Republicans tend to dislike the Affordable Care Act and Democrats tend to like it.
Random Question 2  Difficulty: 1

The major goal of the Affordable Care Act was to ____?

- increase the quality of health care
- promote market justice values
- reduce the number of uninsured
- slow the growth of health spending

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 3  Difficulty: 1

The Affordable Care Act prevents insurance companies from ____?

- denying coverage based on pre-existing health conditions
- setting lifetime caps on health care expenditures
- both
- neither

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 4  Difficulty: 1

The penalty for NOT purchasing health insurance is actually larger than the price of health insurance itself.

True
False

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 5  Difficulty: 1

States that expand Medicaid must cover all adults who have incomes below 138% of the federal poverty line.

True
False
Random Question 6  Difficulty: 1

Individuals whose income is greater than ___% of the federal poverty line will NOT receive any government assistance to purchase health insurance.

- 200% 0 (0 %)
- 300% 0 (0 %)
- 400% 2 (100 %)
- 500% 0 (0 %)

Random Question 7  Difficulty: 1

The "Affordable" Care Act makes health care more affordable by ___?

- providing taxpayer subsidies to Americans with low incomes 2 (100 %)
- reducing the amount government insurance pays doctors and hospitals 0 (0 %)
- setting price controls on patented prescription medications 0 (0 %)
- using cost-effectiveness analyses to encourage value-based purchasing 0 (0 %)

Random Question 8  Difficulty: 1

The individual mandate is intended to combat ___?

- adverse selection all of the above
- crowd out
- moral hazard

Average Grade: 0 / 1 (0 %) Standard Deviation: n/a
Point Biserial: n/a Discrimination Index: n/a
Random Question 9  Difficulty: 1

The majority of Americans who gain health insurance because of the ACA will obtain it through Medicaid.

Average Grade: 0.33 / 1 (33.33 %)  
True  1 (33.33 %)  Standard Deviation: n/a  
False  2 (66.67 %)  Point Biserial: n/a  
Discrimination Index: n/a

Random Question 10  Difficulty: 1

Once the ACA is fully implemented, the US will have a health system that ensures universal access to health care.

Average Grade: 1 / 1 (100 %)  
True  0 (0 %)  Standard Deviation: n/a  
False  2 (100 %)  Point Biserial: n/a  
Discrimination Index: n/a

Random Question 11  Difficulty: 1

The individual mandate is intended to incentivize ___ to sign up for health care insurance?

healthy  0 ( - )  Average Grade: 0 / 1 (0 %)  
sick  0 ( - )  Standard Deviation: n/a  
both  0 ( - )  Point Biserial: n/a  
either  0 ( - )  Discrimination Index: n/a

Random Question 12  Difficulty: 1

Compared to Bronze plans, Platinum plans will have higher___?

out-of-pocket spending  0 (0 %)  Average Grade: 1 / 1 (100 %)  
premums  1 (100 %)  Standard Deviation: n/a  
both  0 (0 %)  Point Biserial: n/a  
either  0 (0 %)  Discrimination Index: n/a

Random Question 13  Difficulty: 1

Most of the uninsured poor live in states that have expanded Medicaid eligibility.

False
<table>
<thead>
<tr>
<th>Score</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>4</td>
<td>(0 %)</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>(100 %)</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %) Standard Deviation: n/a
Point Biserial: n/a
### Random Question 14  Difficulty: 1

In states that do not expand Medicaid, this group will be most disadvantaged?

| <50% FPL | 0 (-) |
| 50-150% FPL | 0 (-) |
| 150 - 250% FPL | 0 (-) |
| 250-350% FPL | 0 (-) |

Average Grade: 0 / 1 (0 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

### Random Question 15  Difficulty: 1

The total number of YEA votes the Affordable Care Act obtained from Republican senators and congressmen was ___.

| 0 | 0 (-) |
| 1-10 | 0 (-) |
| 11-20 | 0 (-) |
| >20 | 0 (-) |

Average Grade: 0 / 1 (0 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a

### Random Question 16  Difficulty: 1

To reduce the economic risk of illness, most residents (either Massachusetts or Americans in general) have opted to buy health insurance with high premiums and low cost-sharing requirements.

| True | 0 (0 %) |
| False | 3 (100 %) |

Average Grade: 1 / 1 (100 %)  
Standard Deviation: n/a  
Point Biserial: n/a  
Discrimination Index: n/a
Random Question 1  Difficulty: 1

None of the current Medicare-for-All proposals would add new populations to the existing Medicare program?

- True: 8 (88.89%)
- False: 1 (11.11%)

Average Grade: 0.89 / 1 (88.89%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 2  Difficulty: 1

The major legislative proposals known as "Medicare-for-All" have been developed by legislators in this political party?

- Democratic: 9 (100%)
- Republican: 0 (0%)

Average Grade: 1 / 1 (100%)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 3  Difficulty: 1

The current Medicare-for-All proposals would make medical care more affordable to ____?
consumers 7 (77.78 %)

Average Grade: 0.78 / 1 (77.78 %)
Random Question 4  Difficulty: 1

Which type of Medicare-for-All proposal would allow states to do nothing?

- Medicare single payer: 0 (0 %)
- Medicare buy-in option: 2 (22.22 %)
- Medicaid buy-in option: 7 (77.78 %)
- ACA repair: 0 (0 %)

Average Grade: 0.78 / 1 (77.78 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 5  Difficulty: 1

The continued need for health care reform is primarily driven by the high uninsured rate among this age group?

- children: 0 (0 %)
- working-age adults: 9 (100 %)
- elderly: 0 (0 %)
- all of the above are equally at-risk of being uninsured: 0 (0 %)

Average Grade: 1 / 1 (100 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a

Random Question 6  Difficulty: 1

Politically, the Medicare-for-All proposals are attempting to appeals to voters’ ____ views?

- economically conservative: 0 (0 %)
- economically liberal: 4 (44.44 %)
- socially conservative: 1 (11.11 %)
- socially liberal: 4 (44.44 %)

Average Grade: 0.44 / 1 (44.44 %)
Standard Deviation: n/a
Point Biserial: n/a
Discrimination Index: n/a
Random Question 7  Difficulty: 1
The Medicare single-payer proposals would make health insurance more affordable by reducing____?

- cost-sharing: 0 (0%)
- premiums: 1 (11.11%)
- both: 7 (77.78%)
- neither: 1 (11.11%)

Random Question 8  Difficulty: 1

Medicare buy-in proposals would make health insurance more affordable by reducing the ____?

- loading charge: 7 (77.78%)
- pure premium: 1 (11.11%)
- both: 1 (11.11%)
- neither: 0 (0%)

Random Question 9  Difficulty: 1

Why have legislators chosen to use the Medicare program to achieve their desired health reform goals?

- Medicare is inexpensive for patients: 0 (0%)
- Medicare is popular among the general public: 7 (77.78%)
- both: 2 (22.22%)
- neither: 0 (0%)

Random Question 10  Difficulty: 1

The Medicare single-payer proposals would make these workers employees of the federal government?

- hospital administrators: all of the above
<table>
<thead>
<tr>
<th>Category</th>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claims Processors</td>
<td>9</td>
<td>100%</td>
</tr>
<tr>
<td>Doctors</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100%) Standard Deviation: n/a

Point Biserial: n/a Discrimination Index: n/a
Random Question 11  Difficulty: 1

Both Medicare single-payer proposals would add these services to the list of covered services?

- Dental care: 0 (0 %)  Average Grade: 0.89 / 1 (88.89 %)
- Eye care: 1 (11.11 %)
- Hearing care: 0 (0 %)
- All of the above: 8 (88.89 %)

Random Question 12  Difficulty: 1

The Medicare buy-in proposals would make health insurance more affordable to patients by offering them extra government subsidies if they sign-up for the Medicare plan.

- True: 4 (44.44 %)  Average Grade: 0.56 / 1 (55.56 %)
- False: 5 (55.56 %)

Random Question 13  Difficulty: 1

Voters of this particular political party have stronger opinions about which Medicare-for-All proposal is best.

- Democratic: 3 (33.33 %)  Average Grade: 0.67 / 1 (66.67 %)
- Republican: 6 (66.67 %)
- Voter of both political parties have similar preferences: 0 (0 %)

Random Question 14  Difficulty: 1

The Medicare buy-in proposals differ from one another due to differences in which?

- Whether the government offer more generous subsidies: 0 (0 %)
- Who is eligible to participate: 3 (33.33 %)
Aver age
Grade: 
0.67 / 1 
(66.67 
%)
Standard Deviation 
: n/a
P o i n t B i s e r i a l 
: n/a
D i s c r i m i n a t i o n Index: n/a
### Random Question 15  Difficulty: 1

The Medicare buy-in proposals would achieve universal care.

<p>| | | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>True</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>False</td>
<td></td>
</tr>
</tbody>
</table>

Average Grade: 1 / 1 (100 %)

Standard Deviation: n/a

Point Biserial: n/a

Discrimination Index: n/a