

Fall 2003 Elective: Health Care Values and Formative Culture
An intensive weekend and online course

Although it often seems that the current problems we face in health care emerged overnight, they are a direct result of the accumulated cultural constructions, values, vision, policy decisions and market choices made over the last century.

Health care reform at the national level unraveled in the mid-1990's. The defacto managed care marketplace didn't deliver on its promise. We are now in a place where we have run out of workable ideas and the times are ripe for trying ill-conceived solutions in desperation. Policies at the state and federal levels are hung up on provider fraud and abuse and managed care regulation, both a patch on a "non-system" at best, and further adding to provider losses and reluctance to serve Medicaid or Medicare enrollees at the worse end of the spectrum.

This foundation elective will explore how we got to where we are today. We will examine the underpinnings of the US medical model looking at historical development and underlying values; viewing through functionalism, political economy and social constructionist lenses; mind/body/spirit and pathways of delivery through alternative and traditional medicine. We will pay special attention to how special interest groups capture and frame rhetoric.

This elective will prepare students for further study in the health care policy and administration track.



To help improve the quality of health care delivery, the quality of health data, and reduce unnecessary administrative costs, the eHealth Consortium, a nonprofit group, seeks to continue the development of public domain software by maintaining an eHealth Software Registry and Repository. To support this effort, eHealth Consortium also sponsors the Sue Crystal memorial eHealth Institute at The Evergreen State College, Olympia, Washington. The eHealth Institute is comprised of faculty and interns dedicated to non-profit research and consulting with special emphasis on optimizing eHealth interchange for Government Funded Health Programs, including Medicaid, Medicare, and Public Health.

Purpose and Mandate

The eCon non-profit corporation was established to provide regional health care community collaboration to develop electronic health information policy and initiatives. eCon's mission is to support, explore, and develop health information policy and initiatives while exploring interactions with administrative cost reduction and other impediments of health care quality and access.

eCon currently supports two primary components to further its mission: a Shareware Registry and Repository and a Policy Institute.

econ (eHealth Shareware Registry and Repository)

A critical component to policy decision-making, theory, and development is access to information technology. The shareware registry and repository will provide an opportunity for eHealth Shareware Members to utilize and contribute to the development and design of information technology products. The software developed by eHealth Shareware is available to be shared throughout the industry.

eHealth Institute, in Memory of Sue Crystal, "The Sue Crystal Memorial eHealth Institute"

eHealth Institute provides an academic environment for all industry and public sectors to develop collaborative projects, promote education and information sharing, and caucus on critical issues. Other benefits include research topics, access to institute resources, network with industry and public participants, ability to share similar concerns, issues, problems, successes, best practices, common policies, procedures, and other resources. eHealth Institute academic setting and experience increases grant potential and participation in State Legislature initiated research and policy development.

The Evergreen State College is strongly committed to an educational environment where theory is put into practice by encouraging community-based partnerships to address pertinent issues for the public good. Evergreen policy institutes have yielded tremendous public and educational benefits.

eHealth Institute also enhances the attendance, visibility, and quality of Washington's participation in increasingly

critical national health "congress" and industry groups by sending delegates representing the region or coalition based groups.

Business environment/background

The early 1990s wave of health care reform targeted electronic capabilities seeking to ease administrative inefficiencies. Emerging technologies also held the promise of new opportunity and efficiency.

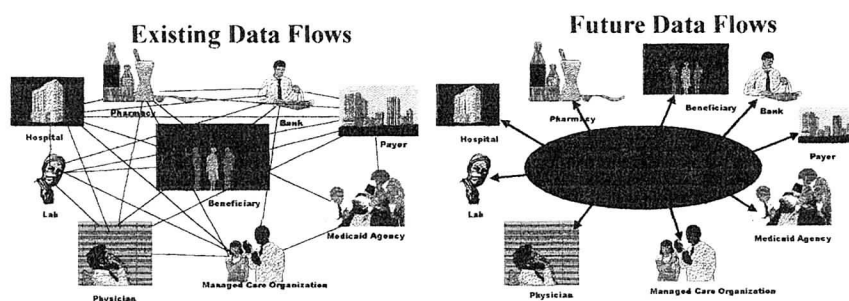
However, without clearly defined mandates efforts towards administrative cost reductions disintegrated into traditional, competitive-based payer defined solutions. The managed care model of business showed early returns and savings further shifting the focus from administrative cost reduction.

However, as medical costs have again begun to rise at astronomical inflation rates and managed care mandated documentation has overwhelmed provider industry interest has been rekindled in cost saving options. It is estimated that 25% of all health care dollars are spent on administration, not services. With rising overall medical costs, reducing administrative costs is imperative. Reconciling data for conducting research and comparative analysis however, is difficult to impossible due to poor quality, incomplete, and incompatible data.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) federal mandates have provided a renewed catalyst for the industry to form alliances and explore e-health initiatives. HIPAA changes the industry landscape and policies can no longer be formed in isolation nor driven by payers alone. In order for new standards and policies to address local and regional needs, the Northwest regional presence must be leveraged in national congress and other national industry groups.

This change requires strong new alliances to influence national policies and inform new health congresses. Alliances by region, public and industry sectors need to have a neutral setting to encourage an open, participatory and collaborative environment.

The forum must encourage participation from all members of the health community – including private and public payers and providers, government benefits, public health, advocacy groups, patients, industry associations, non-traditional provider industry representatives and academia. Membership must include equal participation not based solely on political or financial influence and other factors.



Participation/ Membership/Sponsorship

To carry out the goals of the institute, participation will be broad based and membership must be