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Health Policy: An Introduction to the Health Care System – A Required First-Year Course

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Health Policy: An Introduction to the Health Care System – A Required First-Year Course

Key changes in the health care marketplace such as the increasing cost of health care, the increase in the number of people without health insurance, greater emphasis on quality measurement and improvement, and the growth of managed care have had a significant impact on the practice patterns of physicians in recent decades.¹⁻⁵ Government and private organizations have raised questions about the adequacy of undergraduate medical education in preparing students for this changing health care environment.⁶⁻⁷ Their views are shared by medical educators and physicians who acknowledge the need to understand the health care system and to promote competencies essential to effective practice.^{4,8}

In the early 1990s, to address this need, Jefferson Medical College designed and subsequently implemented a new course to help students understand contemporary issues in the U.S. healthcare system. In 1994, "Health Policy: An Introduction to the Health Care System" became a required course for all first-year students. Taught by David B. Nash, MD, MBA, and Daniel Z. Louis, MS, the course includes 12 one-hour lectures over a three-week period. A broad array of health care issues are covered, including cost of health care, the health insurance system, health care financing, approaches to hospital and physician payment, quality improvement initiatives, an introduction to managed care, and proposals for health care reform.

In 1994, the first year the course was offered, a pre-test was administered to all 223 first-year medical students on the topics to be covered in the course. The mean pre-test score was 40% correct, with a minimum score of 23% and a maximum of 69%. (A visiting health care newspaper reporter was the only one to achieve a passing grade on the pre-test, with a score in the mid-80s.) Clearly the students did not have a good understanding of the health care system prior to the course. Despite the fact that none of the students passed the pre-test, the mean score on the final exam was 87% with only 3 of 229 students not achieving a passing grade of at least 70%. Because of limited class time, the pre-test has not been repeated. Similar final exam scores have been achieved in subsequent years; in 2002 the mean score was 86%, and only one student (out of 224) did not achieve a passing score. At the end of the course, students are asked to complete a course evaluation. The majority of student evaluations of the course were highly favorable. For example, in the evaluation of the 2002 course, 93% of the students reported being satisfied with the course. Many students commented that the course provided useful and relevant information. One student wrote, "The course provided an excellent introduction to many of the health policy issues that we, as future physicians, will face." Another said that a strength of the course is "teaching students about the health care system, which is essential for a career in medicine, but usually goes untaught." A third said, "I feel that this material is very important to my future."

To further evaluate the course, we analyzed students' responses on the Association of American Medical Colleges Graduation Questionnaire (AAMC GQ) obtained three years after the course, during their senior year. The AAMC GQ asks senior students at all 125 U.S. allopathic medical schools to indicate whether the time devoted to instruction on various topics was inadequate, appropriate, or excessive. A

comparison was made between Jefferson students and students at all medical schools in their responses to six topics that were covered in the Health Policy course. In every comparison, Jefferson seniors were more likely than the seniors at all medical schools to report that instruction in these areas was "appropriate." Further, the proportion of Jefferson seniors reporting "appropriate" instruction in course related areas increased after the implementation of the course.

We believe that the positive attitudes and feedback from students validate the feasibility and usefulness of such a course as one component of curricular reform. While responses to questions regarding the appropriateness of instruction are subjective, we believe that the students' strong and positive responses demonstrate that even a relatively brief course can increase their knowledge and understanding of important contemporary issues in the health care system.

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