

Pitt Public Health

HPM 2063
The Politics of Health Policy
Credit Hours 2
Spring 2026

Logistics/Contact Information:

Instructor: Miranda Yaver, PhD
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Office Hours: Wednesdays 10-12 or by appointment

Course Rationale

This course, HPM 2063, The Politics of Health Policy, is a required course for all MPH students in the Department of Health Policy & Management (HPM).

Course Description

This 2-credit course is designed to provide an understanding of the key political dimensions of the health policy-making process in the United States. The course is designed for students with an interest in health policy, although no previous formal training in policy or politics is required. We will examine the roles of government institutions and political actors both inside and outside government in developing and implementing health policy. Perspectives from both elite actors and community activists will be considered in the context of using politics and policy to advance public health. Historical and present health policy debates will be used to illustrate the concepts and theories discussed in class. Students will acquire an understanding of the political processes in which health policies are considered and gain practical experience executing political strategies in the context of health policy.

Learning Objectives

Upon completion of this course, students will be able to:

1. Describe U.S. political institutions and understand how they interact in the formulation of health policies.
2. Develop an understanding of the key differences and tensions between *policy* analysis vs. *political*
3. Build skills in the areas of issue advocacy, coalition building, and community organizing.
4. Apply political science theories to current health policy issues and debates.
5. Analyze the role of elite and community actors and processes in the development of health policymaking and implementation.

REQUIRED Textbook

In this course, we will be using the textbook, *Health Politics and Policy, 6th Edition*, by James Morone and Dan Ehlke. This textbook will be supplemented with articles from the disciplines of political science, public policy, and health policy, and will be available on Canvas. These readings may be supplemented and/or changed as deemed appropriate. The previous edition is acceptable, though will be out of date with respect to some topics. The online edition of the textbook is considerably less expensive than the physical copy.

Canvas Instructions

This course utilizes Canvas. Students are expected to regularly utilize Canvas for readings and information regarding assignments. Canvas announcements will be used to provide any updates to readings and assignments so be sure to set your Canvas settings accordingly. This website provides useful information regarding using Canvas: <https://community.canvaslms.com/t5/Student-Guide/tkb-p/student>

Class Expectations/Behavior and Ground Rules

Each student is expected to read the assigned materials and be prepared to discuss them in class. Your active participation in the course is required in the form of in-class exercises, group discussions and debates, exams, attendance at lectures, viewing any recorded material in advance, and presentations.

In order to provide an effective learning environment, *please use computers/iPads for class purposes only and turn off cellphones prior to class.* If you cannot turn your phone off, please set it to vibrate rather than ring.

Student Performance Evaluation

Grades for the course will follow the letter format:

93 – 100%	A	73 – 76%	C
90 – 92%	A-	70 – 72%	C-
87 – 89%	B+	68 – 69%	D+
83 – 86%	B	63 – 67%	D
80 – 82%	B-	60 – 62%	D-
77 – 79%	C+	< 60%	F

Assignments and Descriptions

Course grades are determined as follows, based on a maximum possible 100 points:

- 1. Final Exam** (20 points) – 48 hour take-home open-book, open-note exam comprised of short answer questions.
- 2. Op-Ed** (10 points) – Write a 700-900-word op-ed article on a health politics subject of your choosing. It can be in response to a recent health-related development or something more enduring that you feel has been overlooked and should gain prominence. It can be an issue of national, state, or local importance. *You are encouraged to submit it to a state or local newspaper, and I am willing to assist you in that process.*
- 3. Data Interpretation and Advocacy Assignment** (20 points) – In groups of approximately 3, write a 2-3-page memo and an accompanying graphic (figure or table) based on an interpretation of a public opinion poll data set, from the position of a public health/health care advocacy organization.
- 4. Field Work Assignment** (10 points) – Engage in organizing conversations with three other public health students, regarding avenues for health reform on a subject of choosing. Develop a three-page memo summarizing your assessment.
- 5. Model Legislation Assignment** (30 points) – In groups of approximately 3, write a piece of model legislation (this need not be long, and can be state or federal) on a health policy of your choosing, with an accompanying 2-3 page memo to a legislator outlining the necessity of this policy and a plan to garner the required support from relevant coalitions and stakeholders.

6. Engagement (10 points possible) – This grade is based on a student’s behavior in the classroom, including attendance, class participation, attendance in office hours, and communication with the professor regarding course content.

In addition to attending class and using technology appropriately, students should actively participate in class discussions, debates, and group exercises in a respectful and constructive manner.

Assignment Submission / Late Work Policy

It is imperative that students turn in work at specified deadlines. Failure to do so will result in a third letter grade reduction per day late unless you have received an extension in advance. Work will not be accepted at all more than one week late unless said extension is granted in advance. If you have concerns regarding your ability to complete your work on time due to physical or mental health reasons, you are encouraged to seek appropriate treatment from campus services and to discuss with me *in advance* whether an extension is needed.

Statement on Classroom Recording

To ensure the free and open discussion of ideas, students may not record classroom lectures, discussion and/or activities without the advance written permission of the instructor, and any such recording properly approved in advance can be used solely for the student’s own private use.

Accommodation for Students with Disabilities

If you have a disability for which you are or may be requesting an accommodation, you are encouraged to contact both your instructor and [Disability Resources and Services](#) (DRS), 140 William Pitt Union, (412) 648-7890, drsrecep@pitt.edu, (412) 228-5347 for P3 ASL users, as early as possible in the term. DRS will verify your disability and determine reasonable accommodations for this course.

Academic Integrity Statement

Students in this course will be expected to comply with the [University of Pittsburgh’s Policy on Academic Integrity](#). Any student suspected of violating this obligation for any reason during the semester will be required to participate in the procedural process, initiated at the instructor level, as outlined in the University Guidelines on Academic Integrity. This may include, but is not limited to, the confiscation of the examination of any individual suspected of violating University Policy. Furthermore, no student may bring any unauthorized materials to an exam, including dictionaries and programmable calculators. To learn more about Academic Integrity, visit the [Academic Integrity Guide](#) for an overview of the topic. For hands-on practice, complete the [Academic Integrity Modules](#).

Use of AI Tools

Intellectual integrity is vital to an academic community and for my fair evaluation of your work. All work completed and/or submitted in this course must be your own, completed in accordance with the University’s Guidelines on Academic Integrity. All sources on which you draw must be cited appropriately. Using an AI tool to generate content without proper attribution qualifies as academic dishonesty.

Civil Rights and Title IX Statement

The University of Pittsburgh does not tolerate any form of discrimination, harassment, or retaliation based on disability, race, color, religion, national origin, ancestry, genetic information, marital status, familial status, sex, age, sexual orientation, veteran status or gender identity or other factors as stated in the University’s Title IX policy. The University is committed to taking prompt action to end a hostile environment that interferes with the University’s mission. For more information about policies, procedures, and practices, visit the [Civil Rights & Title IX Compliance web page](#).

I ask that everyone in the class strive to help ensure that other members of this class can learn in a supportive and respectful environment. If there are instances of the aforementioned issues, please contact

the Title IX Coordinator, by calling 412-648-7860, or e-mailing titleixcoordinator@pitt.edu. Reports can also be [filed online](#). You may also choose to report this to a faculty/staff member; they are required to communicate this to the University's Office of Institutional Engagement and Wellbeing. If you wish to maintain complete confidentiality, you may also contact the University Counseling Center (412-648-7930).

Gender Inclusive Language Statement

Language is gender-inclusive and non-sexist when we use words that affirm and respect how people describe, express, and experience their gender. Just as sexist language excludes women's experiences, non-gender-inclusive language excludes the experiences of individuals whose identities may not fit the gender binary, and/or who may not identify with the sex they were assigned at birth. Identities including trans, intersex, and genderqueer reflect personal descriptions, expressions, and experiences. Gender-inclusive/non-sexist language acknowledges people of any gender (for example, first year student versus freshman, chair versus chairman, humankind versus mankind, etc.). It also affirms non-binary gender identifications, and recognizes the difference between biological sex and gender expression. Students, faculty, and staff may share their preferred pronouns and names, and these gender identities and gender expressions should be honored.

Content Warning and Class Climate Statement

Our course readings and classroom discussions will often focus on mature, difficult, and potentially challenging topics. As with any course in the Gender, Sexuality, and Women's Studies Program, course topics are often political and personal. Readings and discussions might trigger strong feelings—anger, discomfort, anxiety, confusion, excitement, humor, and even boredom. Some of us will have emotional responses to the readings; some of us will have emotional responses to our peers' understanding of the readings; all of us should feel responsible for creating a space that is both intellectually rigorous and respectful. Above all, be respectful (even when you strongly disagree) and be mindful of the ways that our identities position us in the classroom.

I expect everyone to come to class prepared to discuss the readings in a mature and respectful way. If you are struggling with the course materials, here are some tips: read the syllabus so that you are prepared in advance. You can approach your instructor ahead of time if you'd like more information about a topic or reading. If you think a particular reading or topic might be especially challenging or unsettling, you can arrive to class early and take a seat by the door so that you can easily exit the classroom as needed. If you need to leave or miss class, you are still responsible for the work you miss. If you are struggling to keep up with the work because of the course content, you should speak with me and/or seek help from the counseling center.

Statement on Scholarly Discourse

In this course we will be discussing very complex issues of which all of us have strong feelings and, in most cases, unfounded attitudes. It is essential that we approach this endeavor with our minds open to evidence that may conflict with our presuppositions. Moreover, it is vital that we treat each other's opinions and comments with courtesy even when they diverge and conflict with our own. We must avoid personal attacks and the use of ad hominem arguments to invalidate each other's positions. Instead, we must develop a culture of civil argumentation, wherein all positions have the right to be defended and argued against in intellectually reasoned ways. It is this standard that everyone must accept in order to stay in this class; a standard that applies to all inquiry in the university, but whose observance is especially important in a course whose subject matter is so emotionally charged.

Your Wellbeing Matters!

College can be an exciting and challenging time for students. Taking time to maintain your well-being and seek appropriate support can help you achieve your goals and lead a fulfilling life. It can be helpful to remember that we all benefit from assistance and guidance at times, and there are many resources available

to support your well-being while you are at Pitt. You are encouraged to visit [Thrive@Pitt](#) to learn more about well-being and the many campus resources available to help you thrive.

If you or anyone you know experiences overwhelming academic stress, persistent difficult feelings and/or challenging life events, you are strongly encouraged to seek support. In addition to reaching out to friends and loved ones, consider connecting with a faculty member you trust for assistance connecting to helpful resources.

The [University Counseling Center](#) is also here for you. You can call 412-648-7930 at any time to connect with a clinician. If you or someone you know is feeling suicidal, please call the University Counseling Center at any time at 412-648-7930. You can also contact Resolve Crisis Network at 888-796-8226. If the situation is life threatening, call Pitt Police at 412-624-2121 or dial 911.

SCHEDULE OF SESSIONS, READINGS, AND ASSIGNMENTS

I reserve the right to change the syllabus as needed to improve your learning experience. If I change the syllabus, I will explain the rationale and the changes at least one week in advance.

Date	Topic	Required Readings
January 15	Course Overview Introduction to Health Politics and Political Determinants of Health	<i>Health Politics and Policy</i> , Introduction Lynch, Julia. “ The Political Economy of Health: Bringing Political Science Back In. ” <i>Annual Review of Political Science</i> . Greer, Scott, Holly Jarman, Rachel Kulikoff, and Miranda Yaver. 2025. “ Trump’s second presidency begins: evaluating effects on the US health system. ” <i>Lancet Regional Health-Americas</i> .
January 22	A Brief History of Health Policy	<i>Health Politics and Policy</i> , Ch. 1 Oberlander, Jonathan. “Learning from Failure in Health Reform.” <i>New England Journal of Medicine</i> . https://www.nejm.org/doi/full/10.1056/NEJMp078201 Cohn, Jonathan. “The ACA, Repeal, and the Politics of Backlash.” <i>Health Affairs</i> , https://www.healthaffairs.org/content/forefront/aca-repeal-and-politics-backlash Optional: Starr, Paul. “Rebounding with Medicare: Reform and Counterreform in American Health Policy.” <i>Journal of Health Politics, Policy, and Law</i> . https://read.dukeupress.edu/jhpl/article/43/4/707/134455/Rebounding-with-Medicare-Reform-and-Counterreform <u>Class activity:</u> In groups of 3-4, discuss a failed or partial health reform effort: Truman’s efforts toward national health insurance, Clinton’s 1993-94 reform effort, Patient’s Bill of Rights, ACA repeal efforts in 2017. Analyze the political environment (party control, public opinion, interest groups), institutional constraints (federalism, courts, etc.), how factors such as race shaped policy outcomes, and lessons policymakers carried forward to later reforms.
January 29	Structural Racism in American Politics and Health Policy	<i>Health Politics and Policy</i> , Ch. 4

Date	Topic	Required Readings
		<p>Yearby, Ruqaiijah, Brietta Clark, and Jose Figueroa. 2022. “Structural Racism in Historical and Modern US Health Care Policy.” <i>Health Affairs</i> https://www.healthaffairs.org/doi/10.1377/hlthaff.2021.01466</p> <p>“The Black Maternal Health Crisis: Federal and State Policy Solutions.” Institute for Women’s Policy Research Issue Brief. https://iwpr.org/the-black-maternal-health-crisis-federal-and-state-policy-solutions/</p> <p>Michener, Jamila and Alana LeBron. “Racism, Health, and Politics: Advancing Interdisciplinary Knowledge.” <i>Journal of Health Politics, Policy, and Law</i>. https://read.dukeupress.edu/jhpl/article/47/2/111/181612/Racism-Health-and-Politics-Advancing</p> <p><u>Class activity:</u> In groups of 3-4, you will develop a power map for a concrete policy issue (e.g., maternal mortality, Medicaid work requirements, hospital closures). Identify key stakeholders and their goals and where structural racism is embedded in the policy design or implementation.</p>
February 5	Congress and Health Politics	<p><i>Health Politics and Policy</i>, Ch. 5</p> <p>Volden, Craig and Alan Wiseman. “Breaking Gridlock: The Determinants of Health Policy Change in Congress.” <i>Journal of Health Politics, Policy, and Law</i> https://read.dukeupress.edu/jhpl/article-abstract/36/2/227/13357/Breaking-Gridlock-The-Determinants-of-Health</p> <p>Garlick, Alex. “Mercy and Malice: An Inside View of the Push to Repeal and Replace Obamacare.” <i>PS: Political Science & Politics</i> https://www.cambridge.org/core/journals/ps-political-science-and-politics/article/mercy-and-malice-an-inside-view-of-the-push-to-repeal-and-replace-obamacare/D99E9DDD8FD7D5050B97DBA589E1487A</p> <p>Guest Lecture: David Bowen</p>
February 12	Presidents and Health Politics	<p><i>Health Politics and Policy</i>, Ch. 6</p> <p>Bagley, Nicholas. “Executive Power and the ACA.” <i>Book chapter</i>. https://repository.law.umich.edu/cgi/viewcontent.cgi?article=1223&context=book_chapters</p> <p>Gusmano, Michael and Frank Thompson. “The Administrative Presidency, Waivers, and the Affordable Care Act.” <i>Journal of Health Politics, Policy, and Law</i>, https://read.dukeupress.edu/jhpl/article/45/4/633/160623/The-Administrative-Presidency-Waivers-and-the</p> <p><u>Class activity:</u> Students receive a 1-page scenario memo. Working in groups of 3-4, advise the president on available tools (executive orders, agency guidance), political risks and constraints, and likely legal and federalism challenges. Deliver a 3-minute briefing to class.</p>
February 19	Courts and Health Politics: <i>NFIB</i> , <i>Dobbs</i> , and Beyond	<p><i>Health Politics and Policy</i>, Ch. 7</p> <p>Sunkara, Vasu and Sara Rosenbaum. “The Constitution and the Public’s Health: The Consequences of the U.S. Supreme Court’s Medicaid Decision</p>

Date	Topic	Required Readings
		<p>in <i>NFIB v. Sebelius</i>.” <i>Public Health Reports</i>, https://journals.sagepub.com/doi/full/10.1177/0033354916670870</p> <p>Bagley, Nicholas. “California v. Texas – Ending the Campaign to Undo the ACA in Courts.” <i>New England Journal of Medicine</i> https://www.nejm.org/doi/full/10.1056/NEJMp2110516</p> <p>Harned, Elizabeth and Liza Fuentes. “Abortion Out of Reach: The Exacerbation of Wealth Disparities After <i>Dobbs v. Jackson Women’s Health Organization</i>.” <i>Human Rights</i>, https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/wealth-disparities-in-civil-rights/abortion-out-of-reach/</p> <p>Class activity: Students will be given short excerpts from majority, concurring, and dissenting opinions in <i>NFIB</i> or <i>Dobbs</i>. In groups of 3-4, analyze the vision of power the justice is endorsing, how health policy goals are framed or ignored, and what future policies the reasoning enables or forecloses. Then rewrite one paragraph from the perspective of a different judicial philosophy (e.g., shifting to being more/less federalism-oriented). Briefly discuss how the legal reasoning shapes health policy.</p>
February 26	The Health Care Bureaucracy and the Administrative State	<p><i>Health Politics and Policy</i>, Ch. 8</p> <p>Herd, Pamela and Donald Moynihan. “Administrative Burdens in Health Policy.” <i>Journal of Health and Human Services Administration</i>. https://journals.sagepub.com/doi/abs/10.37808/jhhsa.43.1.2</p> <p>Hoffman, Allison, Lauren Hallice, Noah Stein, and Rachel Totz. “Drilling Down on <i>Loper Bright</i> and Health Care Regulation.” <i>The Regulatory Review</i>, https://www.theregreview.org/2024/11/04/hoffman-hallice-stein-basila-drilling-down-on-loper-bright-and-health-care-regulation/#:~:text=The%20Loper%20Bright%20decision%20leaves,%E2%80%9Cbest%20reading%E2%80%9D%20of%20statutes</p> <p>Optional: Yaver, Miranda. 2024. “Rationing by Inconvenience: How Insurance Denials Induce Administrative Burdens.” <i>Journal of Health Politics, Policy, and Law</i>. https://read.dukeupress.edu/jhpl/article-abstract/49/4/539/385337/Rationing-by-Inconvenience-How-Insurance-Denials?redirectedFrom=fulltext</p> <p>Class activity: In 4 groups – each assigned to an agency (CMS, CDC, FDA, state health department) – you are tasked with implementing a controversial policy (e.g., vaccine mandates, Medicaid redeterminations, Title X rules). You must decide on some rules to promulgate, an enforcement strategy, and a communication strategy to both the public and Congress.</p>
March 5	Federalism and Health Policy Diffusion	<p><i>Health Politics and Policy</i>, Ch. 9</p> <p>Volden, Craig. “Policy Diffusion in Polarized Times: The Case of the Affordable Care Act.” <i>Journal of Health Politics, Policy, and Law</i>, https://read.dukeupress.edu/jhpl/article/42/2/363/13890/Policy-Diffusion-in-Polarized-Times-The-Case-of</p>

Date	Topic	Required Readings
		<p>Gordon, Sarah, Nicole Huberfeld, and David Jones. “What Federalism Means for the US Response to Coronavirus Disease 2019.” <i>JAMA</i>, https://jamanetwork.com/journals/jama-health-forum/fullarticle/2766033</p> <p>Yaver, Miranda. 2026. “From Flexibility to Forced Alignment: The One Big Beautiful Bill Act’s Reshaping of Medicaid Federalism.” <i>Working paper</i>.</p> <p><u>Class activity:</u> You will be given policy domains (e.g., Medicaid eligibility, abortion access, vaccines, public health emergencies). In groups of 3-4, decide on federal vs. state vs. local control, justifications (equity, efficiency, political feasibility), and likely winners and losers.</p>
March 12	SPRING BREAK – NO CLASS 😊	
March 19	Lobbying Over Health Policy	<p><i>Health Politics and Policy</i>, Ch. 16</p> <p>Hertel-Fernandez, Alex, Theda Skocpol, and Daniel Lynch. 2016. “Business Associations, Conservative Networks, and the Ongoing Republican War Over Medicaid Expansion.” <i>Journal of Health Politics, Policy, and Law</i> https://read.dukeupress.edu/jh ppl/article/41/2/239/13814/Business-Associations-Conservative-Networks-and</p> <p>Hacker, Jacob. “Out of Balance: Medicare, Interest Groups, and American Politics.” <i>Generations</i>, https://www.ingentaconnect.com/content/asag/gen/2015/00000039/0000002/art00020</p> <p>“ALEC: Healthcare Policy at a Glance.”</p> <p>Optional: Schpero, William, Thomas Wiener, Samuel Carter, and Paula Chatterjee. “Lobbying Expenditures in the U.S. Health Sector, 2000-2020.” <i>JAMA Health Forum</i>, https://jamanetwork.com/journals/jama-health-forum/fullarticle/2797734</p> <p><u>Class activity:</u> Students assigned roles as lobbyists (hospital associations, insurers, pharma, patient advocacy groups, unions) or as congressional or agency staff. A specific policy issue (e.g., drug price negotiation, Medicaid funding) will be announced. Lobbyists will have 10 minutes to craft a targeted pitch, decide what to emphasize (data, equity, jobs, political risk), choose which decision-makers to approach. Staffers decide whose meetings to take, what information they trust, and how to proceed. Class will evaluate which arguments were persuasive and why, and how lobbying pressure shaped the final policy outcome.</p>
March 26	Medicare Politics and Policy	<p><i>Health Politics and Policy</i>, Ch. 11</p> <p>Hacker, Jacob. “Medicare Expansion as a Path as well as Destination: Achieving Universal Insurance through a New Politics of Medicare.” https://journals.sagepub.com/doi/full/10.1177/0002716219871017</p> <p>Campbell, Andrea Louise and Kimberly Morgan. 2025. “Consequences of Medicare Advantage for Beneficiaries and Politics: Revisiting <i>The</i></p>

Date	Topic	Required Readings
		<p><i>Delegated Welfare State.</i>” <i>Journal of Health Politics, Policy, and Law</i> https://read.dukeupress.edu/jhpl/article-abstract/50/4/629/396994/Consequences-of-Medicare-Advantage-for</p> <p>Yaver, Miranda. 2025. “Dr. Oz’s new plan to root out Medicare ‘waste’ is actually a recipe for disaster.” <i>MSNBC</i> https://www.ms.now/opinion/msnbc-opinion/medicare-pilot-program-ai-prior-authorization-rcna229434</p>
April 2	Medicaid Politics and Policy	<p><i>Health Politics and Policy</i>, Ch. 12</p> <p>Grogan, Colleen. “Medicaid’s Post-ACA Paradoxes.” <i>Journal of Health Politics, Policy, and Law</i> https://read.dukeupress.edu/jhpl/article/45/4/617/160621</p> <p>Michener, Jamila. “Medicaid and Policy Feedback Foundations for Universal Health Care.” <i>Annals of the American Academy of Political and Social Science</i>, https://journals.sagepub.com/doi/full/10.1177/0002716219867905</p> <p>KFF. 2025. “Tracking the Medicaid Provisions in the 2025 Federal Budget Reconciliation Bill.” https://www.kff.org/medicaid/tracking-the-medicaid-provisions-in-the-2025-budget-bill/</p> <p>Shepherd, Michael and Miranda Yaver. “Medicaid Cuts Will Harm Rural Republican Communities Most.” <i>The Hill</i> https://thehill.com/opinion/healthcare/5325977-trump-budget-impact-rural-medicaid/</p> <p><u>Class activity:</u> Students will be divided into four groups that will be engaged in designing PA’s Medicaid work requirement as mandated by the OBBBA: Pennsylvania DHS/Governor’s Office (aiming for an efficient implementation that complies with federal law with minimal coverage loss), Advocacy/Equity Coalition (e.g., safety-net providers, civil rights groups) (aiming to prevent coverage loss, protect vulnerable populations, and minimize administrative burden), Employer/Workforce Development Community(aiming to connect Medicaid beneficiaries to jobs/training and respond to labor market realities), and County Assistance Office Practitioners (front-line eligibility workers) (aiming to promote administrative feasibility, clear rules, accurate compliance verification, and community outreach). Each group should decide how PA should set up its reporting/verification system, which exemptions and good cause policies the state should adopt to reduce wrongful coverage loss, partners to engage, constituencies most likely to support/oppose the state’s approach, populations at risk of disproportionate harm, and how the plan would address public opinion and media framing.</p>
April 9	Public Opinion on Health Policy	<p><i>Health Politics and Policy</i>, Ch. 17</p> <p>Jacobs, Lawrence and Suzanne Mettler. “When and How New Policy Creates New Politics: Examining the Feedback Effects of the Affordable Care Act on Public Opinion.” <i>Perspectives on Politics</i>, https://www.cambridge.org/core/journals/perspectives-on-</p>

Date	Topic	Required Readings
		<p>politics/article/when-and-how-new-policy-creates-new-politics-examining-the-feedback-effects-of-the-affordable-care-act-on-public-opinion/D6AB7C1731CC530B5674473642C21E45</p> <p>McIntyre, Adrianna, Josh McCrain, and Danielle Pavliv. 2024. "Medicaid by Any Other Name? Investigating Malleability of Partisan Attitudes toward the Program." <i>Journal of Health Politics, Policy, and Law</i> https://read.dukeupress.edu/jhpl/article-abstract/49/3/451/383875/Medicaid-by-Any-Other-Name-Investigating</p> <p>Campbell, Andrea, Nolan Kavanaugh, and Adrianna McIntyre. "Medicare Eligibility and Reported Support for Proposals to Expand Medicare." <i>JAMA</i>, https://jamanetwork.com/journals/jama/fullarticle/2815256</p> <p><u>Class activity:</u> Students will be given simplified polling data on a health issue. In groups of 3-4, identify which opinions policymakers are most likely to prioritize; decide whether to lead, follow, or reframe public opinion; and propose messaging that could shift opinion without backlash.</p>
April 16	Public Trust in Medicine and the Health Care System	<p><i>Health Politics and Policy</i>, Ch. 20</p> <p>Del Ponte, Alessandro, Alan Gerber, and Eric Patashnik. "Polarization, the Pandemic, and Public Trust in Health System Actors." <i>Journal of Health Politics, Policy, and Law</i>. https://read.dukeupress.edu/jhpl/article/49/3/375/383872</p> <p>Jones, David and Monika McDermott. "Partisanship and the Politics of Vaccine Hesitancy." <i>Polity</i>, https://www.journals.uchicago.edu/doi/full/10.1086/719918</p> <p>Blendon, Robert and John Benson. "Trust in Medicine, the Health System & Public Health." <i>Daedalus</i> https://www.amacad.org/publication/daedalus/trust-medicine-health-system-public-health</p>
April 23 (remote)	Wrap-up, discuss model bills	