

- Course Title:** Syllabus for Health Care Economics, Fall 2022
- Course Number:** HBSP 0621
- Course Pre- and Co-requisite(s):** PHCO 0501: Health Systems & Policy
- Course Location:** Room 334
- Course Date & Time:** Wednesday 6-8pm. Students are expected to attend class sessions in-person as scheduled
- Course Instructor:** Alan C. Monheit, Ph.D., Professor of Health Economics, Rutgers School of Public Health (monheiac@sph.rutgers.edu); 732-235-4766
- Office Hours:** By appointment only
- Course Assistant:** None
- Course Website:** [Canvas.rutgers.edu](https://canvas.rutgers.edu)
- Required Course Text:** Santerre & Neun, *Health Economics: Theory, Insights, and Industry Studies*, 6th edition, 2013: South-Western/Cengage Learning.
- Uwe E. Reinhardt. *Priced Out: The Economic and Ethical Costs of American Health Care*. 2019: Princeton University Press.

Supplemental readings: Supplemental readings are an essential part of the course and are included to provide “real world” and policy-relevant applications of concepts developed in class and in the texts. Readings designated with a * **are recommended but not required for MPH students but required for doctoral students (please consult me before reading these articles)**. As much as possible, readings will be posted on the Canvas system for the course. If this is not possible, some readings will be distributed in class, via e-mail, or through links to electronic journals or other web sites.

Course Description: This course is intended to introduce economic concepts and their use in analyses of the health care sector. The concepts developed in class and through readings will be applied to assess the efficiency with which health care resources are used and the equity with which health care is distributed. We will explore considerations of efficiency and equity in a variety of contexts, including the performance of the “health care economy;” the demand for and production of “good health;” the demand for health care services; the costs and benefits of specific health care resource use; decisions to obtain health insurance; the role of government in the health care sector; and reform of the health care sector. Since resources are scarce, health “production” and health care decision making, as in other sectors of the economy, involves considerations of the costs and benefits of alternative resource uses. However, the unique characteristics of the commodity “good health” and of the health care market distinguish it from other commodities and markets, suggesting that special consideration be given to economic analyses of health care issues.

When applying economic analyses to health care issues, we will do so with a critical eye. We will consider how well such analyses explain the realities of health care decision making by private and public entities and the performance of health care markets.

Selected Concentration Competencies Addressed: The competencies addressed in this course for the MPH and Ph.D. in Health Systems and Policy include:

- A. Use economic theories, concepts and methodologies in the analysis and evaluation of current health care issues and problems;
- B. Assess community health needs, disparities, and the health care delivery system within the context of social, cultural, political, legal, and economic forces
- C. Assess and delineate public health policies and practices recognizing legal and ethical implications for individuals and populations

The competencies for doctoral students also include:

- D. Apply economic theories and demographic methods to the analyses of basic issues and trends in the population's health, health care use, spending, and delivery, health insurance status, and with regard to specific health policy interventions.
- E. Critically evaluate both proposed and implemented health policy interventions and the empirical research seeking to assess the impact of policy interventions in the health care sector.
- F. Construct conceptual and empirical models describing the behavior of individuals and households regarding their health status and their access to and use of health care services and private and public health insurance

Please visit the Concentration webpages on the School of Public Health's website at sph.rutgers.edu for additional competencies addressed by this course for other degrees and concentrations.

Course Objectives: By the completion of this course, students will be able to:

- A. Understand the characteristics and institutional features of the US health care system that have prompted calls for health care reform.
- B. Understand key concepts of equity and efficiency that govern policy concerns over health care delivery and access to private and public health insurance in the US.
- C. Apply basic tools of economic analysis to issues in the US health care system.
- E. Understand the conceptual basis for public policy interventions in health care markets and for recently enacted health reform.
- F. Critically evaluate proposed policy interventions to address US health care issues.

Course Requirements and Grading:

Course requirements will consist of four quizzes, a mid-term exam, and a final exam. Class participation is strongly encouraged and will count toward the final grade.

• ***Final course grades will be assessed on the following basis:***

- **Four quizzes: 40% of grade:** Quizzes will be posted on Canvas at specified times throughout the course. Students will have one week to complete the exam via Canvas.

- **Mid-term exam: 25% of grade**

- **Final exam: 30% of grade**

- **Class participation: 5% of grade**

- **Class participation & problem sets:** Students are expected to participate in class discussions and are encouraged to raise questions regarding readings and material presented in class. Class participation is a way for students to reinforce their grasp of concepts and to help clarify their understanding of concepts presented. To further reinforce familiarity with concepts, I will distribute several short problem sets during the semester. *These will not be graded and are intended so that students can assess their understanding of concepts.*

- **On-line 30 assignments:** In order to ensure that we have at least three course hours, I will be including certain reading and quizzes as on-line 30 assignments. These will be available after certain topics or sections have been completed.

Grading Policy:

94 – 100	A
90 – <94	A-
87 – <90	B+
84 – <87	B
80 – <84	B-
77 – <80	C+
70 – <77	C
<70	F

Course Schedule

I. Introduction to Health Economics (Weeks 1-3, September 7 - 21).

a. The state of the US health care economy (September 7).

Reinhardt, Introduction (pages 1-9), Chapter 1 (pages 13-32), Chapter 2.

Online-30 assignments:

- Nina Bernstein. 2013. “The 10,000 Percent Solution.” *New York Times ScienceTimes*, August 27, 2013. On-line as “How to Charge \$546 for Six Liters of Saltwater.”
- Aaron E. Carol. 2016. “The EpiPen, A Case Study in Health System Dysfunction.” *N.Y. Times*, The Upshot, August 23, 2016.

b. Basic concepts; focus and scope of health economics; tradeoffs and the nature of economic efficiency; the distinction between positive and normative economics (September 14)

Santerre and Neun, Chapters 1 (exclude appendix).

Reinhardt, Chapter 3.

On-line 30 assignments:

- Uwe Reinhardt. "Economics" *JAMA: Journal of the American Medical Association*. 275 (23) June 19, 1996: 1802-1804.

c. Application of the economic approach (September 14 & 21)

Carol Propper. "Why Economics is Good for Your Health." 2004 Royal Economic Society Public Lecture." *Health Economics* 14, 2005. **Read pages 987-991 on the economics of obesity.**

Stephen J. Dubner and Steven J. Levitt. "Flesh Trade: Weighing the Repugnance Factor." *New York Times Magazine*, July 9, 2006.

Mark V. Pauly "Should we be Worried about High Real Medical Spending Growth in the United States?" *Health Affairs Web Exclusive* 8 January 2003.

d. Nature of health care markets: Uncertainty & asymmetric information; trust & health care; distributional considerations (September 14 & 21)

Kenneth J. Arrow. "Uncertainty and the Welfare Economics of Medical Care." *American Economic Review* 54 (December 1963): **Read Sections II and III; Section IV part D.**

On-line 30 assignments:

- Greg Mankiw. "Why is Health Care Policy So Hard?" *New York Times* July 28, 2017 https://www.nytimes.com/2017/07/28/upshot/why-health-care-policy-is-so-hard.html?_r=0

e. Trust as a key element in the medical care marketplace (September 21)

Alan C. Monheit. 2013. "A Matter of Trust." *Inquiry* 50: 3–8.

Van R. Newkirk III. 2016. "A Generation of Bad Blood." *The Atlantic*. June 17. <https://www.theatlantic.com/politics/archive/2016/06/tuskegee-study-medical-distrust-research/487439/> The Terrible Tool of the Tuskegee Study.

*Marcella Alsan and Marianne Wanamaker. 2018. Tuskegee and the Health of Black Men. *The Quarterly Journal of Economics* (2018), 407–455.

Carrie D. Wolenetz and Francis S. Collins. 2020. Recognition of Research Participants' Need for Autonomy: Remembering the Legacy of Henrietta Lacks. *JAMA* 324(11) September 15. 1027-1028.

f. Distributional considerations: Equity in health care, rationing, and priority setting (September 21)

Reinhardt, Chapter 5.

Peter Singer. "Why We Must Ration Health Care." *New York Times Magazine*. July 15, 2009.

Jonathan Oberlander, Theodore Marmor, and Lawrence Jacobs. "Rationing Medical Care: Rhetoric and Reality in the Oregon Health Plan." *Canadian Medical Association Journal* 164 (11), May 29, 2001: 1583 - 1587.

*J.A. Olsen. "Theories of Justice and their Implications for Priority Setting in HealthCare." *Journal of Health Economics* 16(6) 1997: 625-640.

Competencies for section I: A, B, C, D & E.
Assessed by Quiz#1 and midterm exam.

On-line 30 assignments:

- Ezekiel J. Emanuel, Govind Persad, J.D., Ph.D., Ross Upshur, M.D., et al. 2020. "Fair Allocation of Medical Resources in the Time of Covid-19." *New England Journal of Medicine*.
- Quiz #1 due before next class

II. The Economics of Health. (September 28 - October 12)

a. Determinants of population health: Economic and noneconomic correlates of "Good Health." (September 28)

Santerre and Neun, Chapter 2 (exclude appendix).

David M. Cutler, Angus S. Deaton, and Adriana Lleras-Muney. "The Determinants of Mortality." *Journal of Economic Perspectives* 20 (3), Summer 2006: 97-120.

Anne Case and Angus Deaton. "Rising Morbidity and Mortality in Midlife among White non-Hispanic Americans in the 21st Century." *Proceedings of the National Academy of Science* 112 (49), December 8, 2015: 15078-15083.

Raj Chetty, Michael Stepner, et al. "The Association between Income and Life Expectancy in the United States, 2001-2014." *JAMA* April 10, 2016. **Read Executive Summary.**

*Alan C. Monheit. "Perspectives Article: Income Inequality, Health, and Household Welfare." *Review of Economics of the Household*. <https://doi.org/10.1007/s11150-021-09589-0>.

On-line 30 assignment

Don Berwick. 2020. "The Moral Determinants of Health." *JAMA*. Available from <https://jamanetwork.com/> on 07/05/2020.

Policy Application (October 5):

Angus Deaton. "Policy Implications of the Gradient of Health and Wealth." *Health Affairs* 21 (March/April 2002): 13-30.

Anne Case, Daren Lubotsky, and Christina Paxson. "Economic Status and Health in Childhood: The Origins of the Gradient." *American Economic Review*. December 2002. **Read introduction.**

*Adriana Lleras-Muney. 2018. "Mind the Gap: A Review of The Health Gap: The Challenge of an Unequal World by Sir Michael Marmot." *Journal of Economic Literature* 56(3): 1080-1101.

*James P. Smith. 1999. "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status." *Journal of Economic Perspectives* 13 (2): 145–66.

****Impact of COVID-19 on Population Health***

*Marcella Alsan, Amitabh Chandra, and Kosali Simon (2021). "The Great Unequalizer: Initial Health Effects of COVID-19 in the United States." *Journal of Economic Perspectives* 35 (3): 25–46.

On-line 30 assignments:

- Stephen Castle. "Shortchanged: Why British Life Expectancy has Stalled." New York Times August 30, 2019.
- David L. Kirp. "A Way to Break the Cycle of Poverty." New York Times December 2, 2021. Available at <https://www.nytimes.com/2021/12/02/opinion/politics/child-poverty-us.html>

b. The production of 'good health: General considerations and the Grossman model (October 12)

Sherman Folland, Alan C. Goodman, and Myron Stano. "The Demand for Health Capital" in *The Economics of Health and Medical Care*. New York, MacMillan, 1993: **136-141. Available on Canvas.**

Alan C. Monheit. "Notes on the Grossman Model." **Available on Canvas.**

*Arleen A. Leibowitz. "The Demand for Health After 30 Years." *Journal of Health Economics* 23 (2004): 663-671.

*Michael Grossman and Robert Kaestner. 1997. Effects of Education on Health. In *The Social Benefits of Education*, J. R. Behrman and N. Stacey, eds. Ann Arbor, Mich. University of Michigan Press. **Available on Canvas.**

On-line 30 assignment:

- David Leonhardt, The Black-White Wage Gap Is as Big as It Was in 1950, NY Times, June 25, 2020. Available at <https://www.nytimes.com/2020/06/25/opinion/race-wage-gap.html?action=click&module=Opinion&pgtype=Homepage>
- *Question for discussion: How might racial/ethnic and gender-based differences in earnings contribute to health disparities?*

c. The Role of Education in the production of health: theory and evidence (October 12):

Carol Hammond, 2003. "How Education Makes Us Healthy." *London Review of Education* 1(1): 61-78.

Dana Goldman. and James Smith. 2002. "Can Patient Self-Management Explain the SES Health Gradient?" *Proceedings of the National Academy of Science* 99(16) August 6: 10929-10934.

*Grossman, M. (2015). The relationship between health and schooling: What's new? *Nordic Journal of Health Economics*, 3(1), 7-17.

***Competencies for section II: A, B, C, D, E, & F.
Assessed by Quiz#2 and midterm exam.***

On-line 30 assignments:

- Alan C. Monheit. "Education Policy is Health Policy." *Inquiry* 44(3) Fall 2007: 233-237.

III. Cost and Benefit Analysis (October 19-26)

Santerre and Nuen, Chapter 3.

Policy applications:

Louise B. Russell. 2009. "Preventing Chronic Disease: An Important Investment, But Don't Count on Cost Savings." *Health Affairs* January/February 2009: 41-45.

Joseph P. Newhouse. 2021. "An Ounce of Prevention." *Journal of Economic Perspectives* 35(2) Spring: **READ PAGES 101-104, 107-108.**

*Louise B. Russell. 2007. *Prevention's Potential for Slowing the Growth of Medical Spending. Paper prepared for the National Coalition on Health Care.* October.

David M. Cutler and Mark McClellan. 2001. "Is Technological Change in Medicine Worth It?" *Health Affairs* 20 (September/October): 11-29.

***Competencies for section III: A, B, D and E.
Assessed by Quiz 2 and midterm exam.***

On-line 30 assignments:

- Quiz #2

IV. Demand for Medical Care Services (October 26 & November 9)

a. The Basics: Health Care Demand (October 26)

Handout: Table 2, Total health services B. Median and mean expenses per person with expense and distribution of expenses by source of payment: United States, 2000.

Santerre and Nuen, Chapter 5.

Samantha Artiga and Kendal Orgera. *Key Facts on Health and Health Care by Race and Ethnicity*. Kaiser Family Foundation. November 12, 2019. Available at:

<https://www.kff.org/disparities-policy/report/key-facts-on-health-and-health-care-by-race-and-ethnicity/>

On-line 30 assignments:

- Martha Hostetter and Sarah Klein. *In Focus: Using Behavioral Economics to Advance Population Health and Improve the Quality of Health Care Services*. Available at <https://www.commonwealthfund.org/publications/newsletter-article/focus-using-behavioral-economics-advance-population-health-and>

b. Empirical Evidence on the Demand for Health Services (October 26)

Santerre and Nuen, Chapter 5

Jonathan Gruber. *The Role of Consumer Copayments for Health Care: Lessons from the RAND Health Insurance Experiment*. Kaiser Family Foundation. October 2006. Available on Canvas.

*Aviva Aron-Dine, Liran Einav, and Amy Finkelstein. "The Rand Health Insurance Experiment Three Decades Later." *Journal of Economic Perspectives* 27 (1), Winter 2013: 197-222.

MIDTERM EXAM: NOVEMBER 2

c. Moral Hazard and Welfare Loss (November 9):

Traditional perspective on moral hazard welfare loss:

Santerre and Neun, pages 168 (paragraph 2) – 169 (paragraphs 1 & 2)

*Mark V. Pauly. 1968. "The Economics of Moral Hazard." *American Economic Review* 58(3) Part 1, June: 531-537.

d. Departures from the traditional perspective (November 9):

John A Nyman. 2004. "Is Moral Hazard Inefficient? The Policy Implications of a New Theory." *Health Affairs* September/October, 23(5): 194-199.

*Kevin D. Frick and Michael E. Chernew. 2009. "Beneficial Moral Hazard and the Theory of Second Best." *Inquiry* 46(2) Summer 2009:229-240.

e. Is Cost-Sharing Always Efficient? (November 9)

Joseph P. Newhouse. 2006. "Reconsidering the Moral Hazard-Risk Avoidance Tradeoff." *Journal of Health Economics* 25(5) September. **READ FIRST TWO SECTIONS.**

Joseph P. Newhouse. 2021. "An Ounce of Prevention." *Journal of Economic Perspectives* 35(2) Spring: **READ PAGES 108-109.**

Competencies A, B, D, E, and F.
Assessed by midterm exam.

On-line 30:

- Malcom Gladwell. "The Moral Hazard Myth: The Bad Idea Behind our Failed Health-Care System." *The New Yorker* 8-29-2005.

V. Health Insurance (November 9 – November 16)

a. The Demand for Health Insurance (Week 9):

Santerre & Neun, Chapter 6, pages 155-162 on the theory of health insurance.

Marc L. Berk and Alan C. Monheit. 2001. "The Concentration of Health Care Expenditures, Revisited." *Health Affairs* 20 (2) (March/April 2001): 9-18.

Deborah Stone. 1993. "The Struggle for the Soul of Health Insurance." *Journal of Health Politics, Policy and Law*. 18 (2) Summer: 289 - 317.

*John. A. Nyman. 1999. "The Value of Health Insurance: The Access Motive." *Journal of Health Economics* 18 (2): 141-52

b. The Market for Private Health Insurance (Weeks 9 -10)

i. General overview

Santerre and Neun, Chapter 11 (***omit sections on 'Barriers to Entry', 'Dominant Insurer Pricing Model' 'Do HMOs Possess Monopsony Power, Output of Private Insurance in the United States).***)

ii. Employment-Based Health Insurance

Thomas C. Buchmueller and Alan C. Monheit. "Employer-Sponsored Health Insurance and the Promise of Health Insurance Reform." *Inquiry* 46(2) Summer 2009: 187-202.

Linda J. Blumberg. "Who Pays for Employer-Sponsored Health Insurance?" *Health Affairs*. November/December 1999: 58 - 61.

*Alan C. Monheit, Len M. Nichols, and Thomas M. Selden. "How are Net Health Insurance Benefits Distributed in the Market for Employment-Based Health Insurance?" *Inquiry* 32 (4) Winter 1995/96: 379-391

iii. Individual Health Insurance

Melinda Beeuwkes Butin, M. Susan Marquis, and Jill M. Yergian. "The Role of the Individual Health Insurance Market and Prospect for Change." *Health Affairs* 23(6) December 2004: 79-90.

Competencies A, B, C, D, E, F.
Assessed by Quiz#3 and final exam.

On-line 30 assignments:

- **Quiz #3 due before next class**

VI. Prescription drug pricing – why so high? (November 30)

Reinhardt, pages 32-38.

Aaron S. Kesselheim, Jerry Avorn, and Ameet Sarpatwari. 2016. "The High Cost of Prescription Drugs in the United States: Origins and Prospects for Reform." *JAMA*. 2016: 316(8): 858-871.

Competencies A, B, C, & D.
Assessed by Quiz#4 and midterm exam.

On-line 30 assignments:

Katie Thomas. "The Complex Math Behind Spiraling Prescription Drug Prices." *N.Y. Times*, August 24, 2016.

VII. The Role of Government in Health Care - Theoretical Rationale (November 30 - December 7)

a. Justifications for government intervention in health care:

Santerre and Nuen, Chapter 9 (*omit sections on regulation and anti-trust laws, pages 268-284*).

On-line 30 assignment:

- Thomas R. Frieden. 2013. "Government's Role in Health and Safety." *New England Journal of Medicine*. April 17.

b. Explicit interventions or “nudges”

Richard H. Thaler and Cass R. Sunstein. “Libertarian Paternalism.” *American Economic Review* 93(2) May 2003: 175-179.

Scott D. Halpern, Richard Truong, and Franklin G. Miller. 2020. “Cognitive Bias and Public Health Policy During the COVID-19 Pandemic.” *JAMA* July 28, 324(4): 337-338.

c. Policy Application: Smoking Behavior and Government Intervention

Economics of Smoking Regulation. Available on CANVAS.

Jonathan Gruber. 2002/2003. “Smoking’s Internalities”. *Regulation*, Winter: 52-57.

*Frank J. Chaloupka, David Sweanor, and Kenneth E. Warner. 2015. “Differential Taxes for differential risks: Toward Reduced Harm from Tobacco-Yielding Products.” *New England Journal of Medicine* 373: 594-597.

d. Policy Application: Government Response to COVID-19

Joseph Stiglitz. 2021. “The proper role of government in the market economy: The case of the post-COVID recovery.” *Journal of Government and Economics* (1): 1-7.

Competencies A, B, C, E, F.

Assessed by Quiz#4 and final exam.

On-line 30 assignment:

- **Quiz#4 due at next class.**

VIII. Health Care Reform (December 14)

Reinhardt, Chapters 8 and 9.

Meredith B. Rosenthal. “What Works in Market-Oriented Health Policy?” *New England Journal of Medicine* 360:21 May 21: 2157 – 2160.

Jonathan Oberlander and Theodore Marmor. “The Health Bill Explained at Last.” *New York Review of Books* LVII (13) August 19 2010: 61-63.

Jonathan Gruber. “*The Impacts of the Affordable Care Act: How Reasonable are the Projections?*” *National Bureau of Economic Research Working Paper* 17168, **Read pages 2-13.**

Thomas C. Buchmueller and Helen Levy. “The ACA's Impact on Racial and Ethnic Disparities in Health Insurance Coverage and Access to Care.” *Health Affairs* 39(3), March 2020, 395–402.

*Kaiser Family Foundation. Summary of the Affordable Care Act. Available at

<http://www.kff.org/healthreform/upload/8061.pdf>

Competencies A, B, C, & E.

Assessed by final exam.

On-line 30 assignments

- Jonathan Oberlander. “Unfinished Journey – A Century of Health Care Reform in the United States.” *New England Journal of Medicine* 367:7 (August 16, 2012): 585-593.
- Barack Obama. “United States Health Reform: Progress to Date and Next Steps.” *JAMA* July 11, 2016.

FINAL EXAM DECEMBER 21

Course Schedule: Listed above

Learning Management System: Canvas will be used extensively throughout the semester for course syllabus, assignments, announcements, communication and/or other course-related activities. It is the student’s responsibility to familiarize themselves with Canvas and check it regularly. If you have difficulties accessing Canvas, please inform the instructor and Canvas Support (help@canvas.rutgers.edu). Canvas is accessible at canvas.rutgers.edu.

School of Public Health Honor Code: The School of Public Health Honor Code is found in the School Catalog (sph.rutgers.edu/academics/catalog.html). Each student bears a fundamental responsibility for maintaining academic integrity and intellectual honesty in his or her graduate work. For example, all students are expected to observe the generally accepted principles of scholarly work, to submit their own rather than another’s work, to refrain from falsifying data, and to refrain from receiving and/or giving aid on examinations or other assigned work requiring independent effort. In submitting written material, the writer takes full responsibility for the work as a whole and implies that, except as properly noted by use of quotation marks, footnotes, etc., both the ideas and the works used are his or her own. In addition to maintaining personal academic integrity, each student is expected to contribute to the academic integrity of the School community by not facilitating inappropriate use of her/his own work by others and by reporting acts of academic dishonesty by others to an appropriate school authority. It should be clearly understood that plagiarism, cheating, or other forms of academic dishonesty will not be tolerated and can lead to sanctions up to and including separation from the Rutgers School of Public Health.

Students with Disabilities: Rutgers University welcomes students with disabilities into all of the University’s educational programs. In order to receive consideration for reasonable accommodations, a student must apply for Services by first completing a Registration Form with the Rutgers Office of Disability Services (ODS) at ods.rutgers.edu. The student will also be required to participate in an ODS intake interview and provide documentation. If reasonable accommodations are granted, ODS will provide you with a Letter of Accommodations which should be shared with your instructors as early in your courses as possible.

Commitment to Safe Learning Environment: The Rutgers School of Public Health is committed to helping create a safe learning environment for all students and for the School as a whole. Free expression in an academic community is essential to the mission of providing the highest caliber of education possible. The School encourages civil discourse, reasoned thought, sustained discussion, and constructive engagement. Provocative ideas respectfully presented are an expected result. An enlightened academic community, however, connects freedom with responsibility. The School encourages all students to disclose any situations where you may feel unsafe, discriminated against, or harassed. Harassment or discrimination of any kind will be not tolerated and violations may lead to disciplinary actions.

Reporting Discrimination or Harassment: If you experience any form of gender or sex-based discrimination or harassment, including sexual assault, sexual harassment, relationship violence, or stalking, know that help and support are available. You may report such incidents to the [RBHS Title IX Office](#) or to the School of Public Health's [Office of Student Affairs](#). Rutgers University has staff members trained to support survivors in navigating campus life, accessing health and counseling services, providing academic and housing accommodations, and more. If you experience any other form of discrimination or harassment, including racial, ethnic, religious, political, or academic, please report any such incidents to the School's [Office of Student Affairs](#). The School strongly encourages all students to report any incidents of discrimination or harassment to the School. Please be aware that all Rutgers employees (other than those designated as confidential resources such as advocates, counselors, clergy and healthcare providers as listed in Appendix A to [Policy 10.3.12](#)) are required to report information about such discrimination and harassment to the School and potentially the University. For example, if you tell a faculty or staff member about a situation of sexual harassment or sexual violence, or other related misconduct, the faculty or staff member must share that information with the [RBHS Title IX Coordinator](#). If you wish to speak to a confidential employee who does not have this reporting responsibility, you can find a list of resources in Appendix A to University [Policy 10.3.12](#). For more information about your options at Rutgers, please visit [Rutgers Violence Prevention and Victim Assistance](#).

Graduate Student Computer Policy: Students are required to possess a personal laptop, no older than approximately two years, that must meet minimum requirements which may be found online at: sph.rutgers.edu/student-life/computer-support.html

Policy Concerning Use of Recording Devices and Other Electronic Communications Systems: When personally owned communication/recording devices are used by students to record lectures and/or classroom lessons, such use must be authorized by the faculty member or instructor who must give either oral or written permission prior to the start of the semester and identify restrictions, if any, on the use of mobile communications or recording devices.

Policy Concerning Use of Turnitin: Students agree that by taking this course all required papers may be subject to submission for textual similarity review to Turnitin.com (directly or via learning management system, i.e. Canvas) for the detection of plagiarism. All submitted papers will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of such papers. Use of the Turnitin.com service is subject to the Usage Policy posted on the Turnitin.com site. Students who do not agree should contact the course instructor immediately.

Withdrawal/Refund Schedule: Students who stop attending their course(s) without submitting a completed [Add/Drop Course](#) form will receive a failing grade. Furthermore, students dropping to zero credits for the semester are considered withdrawn and must submit a completed [Leave of Absence](#) form from the School of Public Health's Office of Student Affairs. The School of Public Health refunds tuition only. Administrative and technology fees are non-refundable. You may find the Withdrawal/Refund Schedule on the School of Public Health website at: sph.rutgers.edu/academics/academic-calendar.html

Special Circumstances During COVID-19, For Fall 2021 (Version Date 8/20/21)

To keep our on-campus communities safe, compliance with all current guidance and policies as set forth in the Guide to Returning to Rutgers is required at all times and without exception. Students, faculty, staff, or visitors who do not comply with these policies will not be permitted to remain on-site. The use of face-coverings indoors *IS* required in classrooms and offices as well as shared spaces (such as hallways and bathrooms). Rutgers employees and students must use the My Campus Pass symptom checker, a self-screening application, each day when traveling to campus or entering a Rutgers building. Please remember to wash your hands, wear a mask while indoors, particularly in crowded spaces and groups, and stay up-to-date on university guidance by consulting the Guide to Returning to Rutgers and the university's COVID-19 website.

In addition, the School of Public Health recognizes that students may experience challenges or be negatively impacted due to the COVID-19 pandemic, mental and emotional health toll from systemic racism, altered personal and professional obligations, and other crises existing at the moment in our local, national, and global communities. Students are encouraged to discuss these challenges and circumstances with their instructor, if they feel they may need additional support or temporary accommodations at the beginning or during this course. The course instructor may consider making reasonable temporary adjustments depending on the student's situation. If additional support is needed, students may reach out to the Office of Student Affairs (studentaffairs@sph.rutgers.edu) or any of the appropriate referral resources listed on the SPH Student Connect Canvas page.

<https://rutgers.zoom.us/j/9547957804?pwd=UnljNWliWjFoeERMNUFDNwY4cXdCQT09>

<https://rutgers.zoom.us/s/9547957804>

Student Well-Being: The School of Public Health recognizes that students may experience stressors or challenges that can impact both their academic experience and their personal well-being. If the source of your stressors or challenges is academic, students are encouraged to discuss these challenges and circumstances with their instructor, if they feel they may need additional support or temporary accommodations at the beginning or during this course. The course instructor may consider making reasonable temporary adjustments depending on the student's situation. For personal concerns or if additional support is needed, students may reach out to the [Office of Student Affairs](#) (studentaffairs@sph.rutgers.edu) or any of the appropriate referral resources listed on the [SPH Student Connect Canvas page](#).

Overview of School Policies: Academic and non-academic policies and procedures, such as Auditing a Course, Retaking Courses, Grade Grievance and others that cover registration, courses and grading, academic standing and progress, student rights and responsibilities, graduation and more may be found under [Policies](#) on the School of Public Health website.