

**Course Title:** *Health Care Economics, Fall 2024*

**Course Number:** *HBSP 0621*

**Course Pre- and Co-requisite(s):** PHCO 0501: Health Systems & Policy

**Course Location:** Piscataway 2A

**Course Date & Time:** Wednesday, 6-8pm

**Course Instructor:** Slawa Rokicki, Ph.D., Assistant Professor, Rutgers School of Public Health ([sr1467@sph.rutgers.edu](mailto:sr1467@sph.rutgers.edu))

**Office Hours:** By Appointment Only

**Course Assistant:** None

**Course Website:** [canvas.rutgers.edu](https://canvas.rutgers.edu)

**Required Course Text:** None – all readings will be made available on Canvas. This course will be guided by the book “Economics of Healthcare New Edition” by Andrew Friedson. You may purchase this book if you wish to delve further into the material but it is not required.

**Required Readings:** Readings are an essential part of the course to support understanding of class material as well as to provide “real world” and policy-relevant applications of concepts developed in class. Readings will be posted on the Canvas system for the course under each module.

- Please keep up with readings.
- *Readings designated with a \*[PhD] are recommended but not required for MPH students but are required for doctoral students.*

**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.

**Selected Concentration Competencies Addressed:**

The competencies addressed in this course for the MPH and PhD in Health Systems & Policy include:

- MPH-HSAP1. Use social science theories or methodologies in the analysis of current health care issues, such as health or health care inequalities

- MPH-HSAP3. Assess the role of social, cultural, political, legal, or economic factors in shaping health care delivery systems or public health policy
- PhD-HSAP1. Review and interpret scientific literature in health systems and policy
- PhD-HSAP2. Apply social science theories and methods to the analyses of key issues in health systems and policy
- PhD-HSAP4. Analyze a contemporary health policy issue

Please visit the Concentration webpages on the School of Public Health's website at [sph.rutgers.edu](http://sph.rutgers.edu) for more information about the curriculum and competencies for our degrees and concentrations.

**Course Objectives:** *Provide a bulleted list of the objectives of the course (do not present as a paragraph). Begin this section with the following statement: 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.
- D. Understand the conceptual basis for public policy interventions in health care markets and for recently enacted health reform;
- E. Critically evaluate proposed policy interventions to address US health care issues.

#### **Course Requirements and Grading:**

- **Attendance Policy:** Being present in class allows you to fully engage with the material, ask questions in real-time, and participate in discussions that enhance your understanding. Therefore, attendance is expected but not strictly enforced. Students are responsible for catching up on missed work.
- **Final course grades will be assessed on the following basis (all assessments will be submitted via Canvas):**
  - **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. All questions will be multiple choice and the quizzes are open-book. You have two attempts with the highest score counted. Lectures, readings, and online30 material is assessed.
  - **Homework: 10% of grade.** During the semester, there were will be 5 homework assignments distributed, each worth 2% of your grade.
  - **Mid-term exam: 25% of grade.** Midterm is on Zoom during class (2 hrs), open book, and will be a mix of multiple choice and open-ended short response questions.
  - **Final exam: 25% of grade.** Final exam is on Zoom during class (2 hrs), open book, and will be a mix of multiple choice and open-ended short response questions.

- **Online-30 assignments:** I will be including certain readings and videos/podcasts as online-30 assignments, along with class discussion questions. Please complete these **in advance** of the class and be ready to engage in class discussion about these online-30 assignments.

**Course Schedule – Assessments**

Week	Assessment	Date Opens	Date closes	Material Covered
1	Homework 1	Sept 5, 9am	Sept 10, 11:59pm	Module 1
2	Quiz 1	Sept 12, 9am	Sept 17, 11:59pm	Modules 1-2
3	Homework 2	Sept 19, 9am	Sept 24, 11:59pm	Module 3
4	Homework 3	Sept 26, 9am	Oct 1, 11:59pm	Module 4
5	Quiz 2	Oct 3, 9am	Oct 8, 11:59pm	Modules 3-5
6	None			
7	Midterm	Oct 16 – during class		Modules 1-6
8	Homework 4	Oct 24, 9am	Oct 29, 11:59pm	Module 8
9	Homework 5	Oct 31, 9am	Nov 5, 11:59pm	Module 9
10	Quiz 3	Nov 7, 9am	Nov 12, 11:59pm	Module 8-10
11	None			
12	Quiz 4	Nov 21, 9am	Nov 26, 11:59pm	Module 11-12
<b>Thanksgiving – No class Nov 27</b>				
13	None			
14	None			
15	Final Exam	Dec 18 – during class		All modules

**Link between Competencies, objectives, modules, and assessments**

Modules	Course Objectives	Competencies	Assessments
1,2,3	C, B, D	MPH-HSAP1, MPH-HSAP3, PhD-HSAP1, PhD-HSAP2	Homework 1, Quiz 1, Homework 2, Midterm
4, 8, 9	A, B, C, D	MPH-HSAP1, MPH-HSAP3, PhD-HSAP1, PhD-HSAP2	Homework 3 – 5, Quiz 3, Final exam

5, 6, 10	C	MPH-HSAP1, PhD-HSAP1, PhD-HSAP2	Quiz 2, Midterm, Quiz 3
11, 12, 13, 14	A, B, C, D, E	MPH-HSAP1, MPH-HSAP3, PhD-HSAP1, PhD-HSAP2, PhD-HSAP4	Quiz 4, Final exam

**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 Policy on Generative AI:** All assignments must be completed on your own without the assistance of generative AI tools (such as ChatGPT, Gemini or similar). Any work submitted that is found to have been generated or significantly influenced by AI will receive a zero and be considered a violation of academic integrity.

**Course Schedule:**

Module/ Date	Topic(s)	Assigned Readings & Online 30	Assessments due
Module 1 Sept 4	Introduction to health economics	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>Handley, N., &amp; Hollander, J. E. (2019). Opportunity cost: the hidden toll of seeking health care. <i>Health Affairs Forefront</i>.</li> </ul> <p><b>Recommended textbook chapter: 1</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>Read the syllabus</li> </ul>	Homework 1
Module 2 Sept 11	Production of Health / Grossman model	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>Arleen A. Leibowitz. "The Demand for Health After 30 Years." <i>Journal of Health Economics</i> 23 (2004): 663-671.</li> <li>*[PhD]: Folland, Goodman, and Stano, "Demand for Health", chapter 7</li> </ul> <p><b>Recommended textbook chapter: 2</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>Listen to "<a href="#">Pain, Fear and Waste: The Costs of Unnecessary Care</a>", Trade-offs podcast</li> <li><b>Discuss:</b> How does cascade of care relate to diminishing marginal returns of the health production function?</li> </ul>	Quiz 1
Module 3 Sept 18	Inequality	<p><b>Readings:</b></p>	Homework 2



		<ul style="list-style-type: none"> <li>Urban Institute report on income, wealth and health: <a href="#">How Are Income and Wealth Linked to Health and Longevity?</a></li> <li>*[PhD]: James P. Smith. 1999. "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status." <i>Journal of Economic Perspectives</i> 13 (2): 145–66.</li> </ul> <p><b>Recommended textbook chapter: 18</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li><b>Read:</b> Bodenheimer, T. (1997). The Oregon health plan—lessons for the nation. <i>New England Journal of Medicine</i>, 337(9), 651-656.</li> <li><b>Discuss:</b> How did Oregon’s Medicaid program “ration” care? Was what they did fair?</li> </ul>	
Module 4 Sept 25	Demand for medical care	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>Park, S., &amp; Wadhwa, R. K. (2024). Use Of High-And Low-Value Health Care Among US Adults, By Income, 2010–19. <i>Health Affairs</i>, 43(7), 1021-1031.</li> <li>*[PhD]: Roberts, E. T., Glynn, A., Cornelio, N., Donohue, J. M., Gellad, W. F., McWilliams, J. M., &amp; Sabik, L. M. (2021). Medicaid Coverage ‘Cliff’ Increases Expenses And Decreases Care For Near-Poor Medicare Beneficiaries. <i>Health Affairs</i>, 40(4), 552-561.</li> </ul> <p><b>Recommended textbook chapter: 3</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li><b>Listen to:</b> Trade-offs podcast “The Good Stuff” <a href="https://tradeoffs.org/2019/12/11/season-1-ep-5/">https://tradeoffs.org/2019/12/11/season-1-ep-5/</a></li> <li><b>Discuss:</b> How were deductibles and co-pays affecting Dr. Fendrick’s patients? What solutions do Drs. Fendrick and Chernew propose to help people get care they need?</li> </ul>	Homework 3
Module 5 Oct 2	Evidence part 1: Randomized trials	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>Rokicki, S., Cohen, J., Salomon, J. A., &amp; Fink, G. (2017). Impact of a text-messaging program on adolescent reproductive health: a cluster–randomized trial in Ghana. <i>American journal of public health</i>, 107(2), 298-305.</li> <li>Brook, R. et al. (2006) The Health Insurance Experiment. A Classic RAND Study Speaks to the Current Health Care Reform Debate. <a href="https://www.rand.org/pubs/research_briefs/RB9174.html">https://www.rand.org/pubs/research_briefs/RB9174.html</a></li> <li>*[PhD]: Aviva Aron-Dine, Liran Einav, and Amy Finkelstein. “The Rand Health Insurance Experiment Three Decades Later.” <i>Journal of Economic Perspectives</i> 27 (1), Winter 2013: 197-222.</li> </ul> <p><b>Recommended textbook chapter: 5, pgs 57-67</b></p>	Quiz 2



		<p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Watch:</b> <a href="#">Nobel-winning economist Esther Duflo’s lecture on “Social experiments to fight poverty”</a></li> <li>• <b>Discuss:</b> How does Professor Duflo use randomized controlled trials to inform policies?</li> </ul>	
Module 6 Oct 9	Evidence part 2: Quasi-experimental studies	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Handley, M. A., Lyles, C. R., McCulloch, C., &amp; Cattamanchi, A. (2018). Selecting and improving quasi-experimental designs in effectiveness and implementation research. Annual review of public health, 39, 5-25.</li> <li>• Alpert, A., Evans, W. N., Lieber, E. M., &amp; Powell, D. (2022). Origins of the opioid crisis and its enduring impacts. The Quarterly Journal of Economics, 137(2), 1139-1179.</li> <li>• *[PhD]: Braghieri, Luca, Ro'ee Levy, and Alexey Makarin. 2022. "Social Media and Mental Health." American Economic Review, 112 (11): 3660–93.</li> </ul> <p><b>Recommended textbook chapter: 5, pgs 67-68</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen to:</b> You Make Me Feel Like a Natural Experiment. Freakonomics podcast. <a href="https://freakonomics.com/podcast/you-make-me-feel-like-a-natural-experiment/">https://freakonomics.com/podcast/you-make-me-feel-like-a-natural-experiment/</a></li> <li>• <b>Discuss:</b> How do natural experiments avoid the problem of selection bias? Give an example.</li> </ul>	None - Prepare for midterm
Module 7 Oct 16	Midterm	None	Midterm
Module 8 Oct 23	U.S. health care spending / Health care markets	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Cutler, D. (2020) The World’s Costliest Health Care...and what America might do about it. <a href="https://www.harvardmagazine.com/2020/04/feature-forum-costliest-health-care">https://www.harvardmagazine.com/2020/04/feature-forum-costliest-health-care</a></li> <li>• Friedson, A. (2018). Medical Scribes as an Input in Health-Care Production: Evidence from a Randomized Experiment. Am J of Health economics.</li> <li>• *[PhD] Mark V. Pauly "Should we be Worried about High Real Medical Spending Growth in the United States?" Health Affairs Web Exclusive 8 January 2003.</li> </ul> <p><b>Recommended textbook chapter: 6</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen to:</b> A Health Podyssey Podcast: <a href="#">Brent Fulton on Cross-Market Hospital Consolidation.</a></li> <li>• <b>Discuss:</b> How does consolidation of hospitals affect access and prices for patients?</li> </ul>	Homework 4



<p>Module 9 Oct 30</p>	<p>Health care labor force / Hospitals</p>	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Adams, E.K. et al. (2018) <a href="#">How Do Occupational Licensing Rules Affect the Health Care Sector?</a> EconoFact Report.</li> <li>• Kamarulzaman, A., Ramnarayan, K., &amp; Mocumbi, A. O. (2022). Plugging the medical brain drain. <i>The Lancet</i>, 400(10362), 1492-1494.</li> </ul> <p><b>Recommended textbook chapter: 7,8, &amp; 9</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen to:</b> The Daily podcast “<a href="#">How Nonprofit Hospitals Put Profits Over Patients</a>”</li> <li>• <b>Discuss:</b> What did the journalists find were common practices at nonprofit hospitals?</li> </ul>	<p>Homework 5</p>
<p>Module 10 Nov 6</p>	<p>Economics of Aging</p>	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Jones, C. H., &amp; Dolsten, M. (2024). Healthcare on the brink: navigating the challenges of an aging society in the United States. <i>npj Aging</i>, 10(1), 22.</li> </ul> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Watch:</b> PBS News Hour "<a href="#">Global Lessons on Long-Term Care</a>"</li> <li>• <b>Discuss:</b> What are some of the ways that Finland and Taiwan have innovated in providing access to long-term care?</li> </ul>	<p>Quiz 3</p>
<p>Module 11 Nov 20</p>	<p>Health insurance</p>	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Sommers, B. D., Gawande, A. A., &amp; Baicker, K. (2017). Health insurance coverage and health—what the recent evidence tells us. <i>New England Journal of Medicine</i>, 377(6), 586-593.</li> <li>• Baicker, K., &amp; Chandra, A. (2008). Myths And Misconceptions About US Health Insurance: Health care reform is hindered by confusion about how health insurance works. <i>Health Affairs</i>, 27(Suppl1), w533-w543.</li> <li>• *[PhD]: John A Nyman. 2004. “Is Moral Hazard Inefficient? The Policy Implications of a New Theory.” <i>Health Affairs</i> September/October, 23(5): 194-199.</li> </ul> <p><b>Recommended textbook chapter: 10 &amp; 11</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen to:</b> This American Life clip “Insurance? Ruh Roh!” from episode 392 – Someone Else’s Money. <a href="https://www.thisamericanlife.org/392/someone-elses-money/act-three-4">https://www.thisamericanlife.org/392/someone-elses-money/act-three-4</a></li> </ul>	<p>Quiz 4</p>



		<ul style="list-style-type: none"> <li>• <b>Discuss:</b> What are the positives and negatives of pet health insurance from an economics perspective?</li> </ul>	
Nov 27	THANKSGIVING NO CLASS		
Module 12/13 Dec 4	U.S. health care system & health reform	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Reindhardt, U. (2019) Who Actually Pays for Health Care? (pp. 62-68) Priced Out.</li> <li>• Phillips, K. A., Marshall, D. A., Adler, L., Figueroa, J., Haeder, S. F., Hamad, R., ... &amp; Nikpay, S. (2023). Ten health policy challenges for the next 10 years. <i>Health Affairs Scholar</i>, 1(1), qxad010.</li> <li>• *[PhD]: Howell, S., Yin, P. T., &amp; Robinson, J. C. (2021). Quantifying The Economic Burden Of Drug Utilization Management On Payers, Manufacturers, Physicians, And Patients. <i>Health Affairs</i>, 40(8), 1206-1214.</li> </ul> <p><b>Recommended textbook chapter: 13, 14, 15, &amp; 16</b></p> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen</b> to: Tradeoffs podcast “The 12 Million People Lost in a Maze of Medicare and Medicaid”  <a href="https://tradeoffs.org/2023/09/21/dual-eligible-medicare-medicaid/">https://tradeoffs.org/2023/09/21/dual-eligible-medicare-medicaid/</a></li> <li>• <b>Discuss:</b> How does America’s fragmented system affect people’s health care access?</li> </ul>	None
Module 14 Dec 11	Cost-benefit analysis	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>• Rudmik, L., &amp; Drummond, M. (2013). Health economic evaluation: important principles and methodology. <i>The Laryngoscope</i>, 123(6), 1341-1347.</li> <li>• Kangovi, S., Mitra, N., Grande, D., Long, J. A., &amp; Asch, D. A. (2020). Evidence-Based Community Health Worker Program Addresses Unmet Social Needs And Generates Positive Return On Investment. <i>Health Affairs</i>, 39(2), 207-213.</li> <li>• *[PhD]: Basu, S., Venkataramani, A. S., &amp; Schillinger, D. (2024). The Risk Of Perpetuating Health Disparities Through Cost-Effectiveness Analyses: Article examines the risk of perpetuating health disparities through cost-effectiveness assessments. <i>Health Affairs</i>, 43(8), 1165-1171.</li> </ul> <p><b>Online 30:</b></p> <ul style="list-style-type: none"> <li>• <b>Listen</b> to: Planet Money <a href="#">Episode 388: Putting A Price Tag On Your Descendants</a></li> <li>• <b>Discuss:</b> How does the discount rate affect public policy decisions?</li> </ul>	None - Prepare for final
Module 15 Dec 18	Final exam	None	Final exam

**Lateness.** Assignments turned in after the official collection period are considered late. Unless the instructor and student come to an arrangement at least one week before class, there is an 50% penalty for written work turned in late. Assignments are posted to Canvas by the due date. If you need to turn in something after the date due, please discuss it with the instructor to avoid point penalty.

### **Standard Rutgers School of Public Health policies:**

**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@oit.rutgers.edu](mailto:help@oit.rutgers.edu)). Canvas is accessible at [canvas.rutgers.edu](https://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](https://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 their 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 their 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.

**Use of Generative AI:** Each instructor at the School of Public Health determines how generative AI (e.g., ChatGPT) may or may not be used in their course. Please check with your instructor regarding the specific policy for their course. However, the use of generative AI in academic coursework is integrally related to academic integrity and is governed by the School's Honor Code. It is a violation of the Honor Code policy for students to represent work they did not do as their own, and work generated by an AI system, such as ChatGPT, falls under that policy.

**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](https://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.

**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 for Student Experiences and Alumni Affairs](#) or any of the appropriate referral resources listed on the [SPH Student Connect](#) Canvas page.

**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 for Student Experiences and Alumni 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 for Student Experiences and Alumni 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 Appendices A and B to [Policy 60.1.33](#)) 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 Appendices A and B to University [Policy 60.1.33](#). For more information about your options at Rutgers, please visit [Rutgers Violence Prevention and Victim Assistance](#).

**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. Below are select specific policies; however, students are responsible for keeping informed about academic and non-academic policies and procedures beyond those noted on this syllabus.

**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 ([Computing Requirements](#)).

**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 for Student Experiences and Alumni 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](http://sph.rutgers.edu/academics/academic-calendar.html).