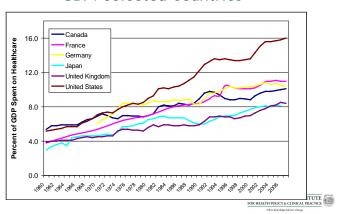
1: Introduction to health economics Folland *et al* Chapter 1

Chris Auld Economics 317

January 6, 2011

- Best answered by a breakdown of what (U.S.) health economists do.
 - ▶ 50% study the behavior of individuals
 - ► 34% study the behavior of firms
 - ▶ 50% study government policy
 - 48% study health insurance
 - ▶ 50% study outcomes research
 - ▶ 31% study other issues
- Similar in Canada and elsewhere, with less emphasis on firms.

- Health economists study issues fundamental to human welfare:
- how do we make decisions which affect our length and quality of life?
- what government policies could we use to change behavior which affects health?
- how could we better provide health care?
- what other government policies affect health?



Lecture 1: Introduction to health economics

What is health economics?

Health behavior

A Tale of Two Cities: Excess mortality in Nevada vs Utah,

1959–68		
male	female	
42%	35	
16	26	
44	42	
37	42	
54	69	
38	28	
26	17	
20	6	
	male 42% 16 44 37 54 38 26	

Source: Fuchs, 1974

Lecture 1: Introduction to health economics

What is health economics?

Health behavior.

conomic analysis.

Source: Cheng and Kenkel, 2010



- Why has the distribution of body weight changed over time?
- Why do people smoke even when everyone knows smoking harms health?
- Would raising alcohol taxes reduce accidents? STDs?
- What about raising the minimum drinking age?
- What is the government's role in these decisions?

What is health economics?

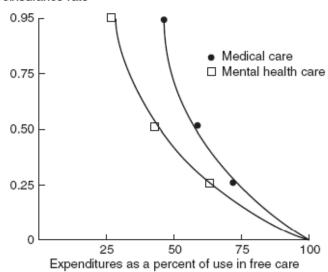
Health behavior.

- 1. Emphasize scarcity. Really: emphasize tradeoffs.
- 2. Usually assume rationality (jargon!) in models.
- 3. Think at the margin.
- 4. Use of models to understand complex systems.
- 5. Heavy use of statistical methods.

- What is the effect of price of care on quantity of care consumed?
- Price depends on insurance.
- Cannot just look at the correlation between insurance purchases and quantity.
- Experiment: randomize proportion of price paid by patient ("coinsurance rate")



Health behavior



What is health economics?

Health behavior

- Uncertainty.
- Prominence of insurance.
- ▶ Information.
- Non-profit firms, government price setting.
- Restrictions on competition and other regulations.

- ► Cheng, K. and D. Kenkel (2010) "U.S. cigarette demand: 1944–2004," B.E. Journal of Economic Analysis and Policy Vol 10, Issue 1.
- ► Fuchs, V. (1974) Who Shall Live? Health, Economics, and Social Choice. New York: Basic Books.