

Unit 6: Economics of Health Care
Z-Chapter 16
ONLINE CONTENT (1 H)

Unit Objectives:

- Define economics and health care economics. (5,7)*
- Use a basic knowledge of health care economics to analyze trends in the health care delivery system. Explain and apply the five rights of delegation in nursing practice. (5,7)*

*Course Objectives

Review Chapter 16 and the You tube video “Why Medical Bills in the US are so expensive” on this website <https://www.youtube.com/watch?v=3NvnOUcG-ZI> and place your answers to the following questions in the Z-CH # 16 drop box by 0800 on 3/12/2026.

1. What methods do individuals commonly use to obtain funds for healthcare expenses that are not covered by insurance? How do you feel about the use of social media-based fundraising for medical costs, and what types of expenses typically fall outside insurance coverage?

There are a few methods individuals commonly use to obtain funds for healthcare expenses. Some may use credit cards, payment plans through the hospital the charge is through, medical loans, or reach out to nonprofit organizations that have assistance programs. I personally think social-media fundraising is an amazing thing. It allows communities to come together to care for one another when someone may be struggling to cover costs. It also has to ability to reach a larger population, even people outside of the community can now help and be made aware of the situation. Expenses that may often fall outside of insurance coverage are things such as certain medications, some dental services, some mental health services, home health equipment, travel/lodging for care, non-FDA approved treatments, and long-term rehabilitation.

2. Which stakeholders or organizations are involved in seeking payment for the healthcare services they deliver?

Providers/Physicians are involved because they will bill for the services they provide. Some government programs (Medicare, Medicaid) will reimburse hospitals, same as insurance companies. Hospitals are responsible for billing and keeping track of their staff salaries. Patients themselves are responsible for copayments and uncovered services.

3. What performance metrics are used to evaluate hospitals, and do you believe these measures are appropriate? Provide a rationale for your answer.

Some performance metrics used to evaluate hospitals are infection rates, medication error rates, patient satisfaction surveys, readmission rates, and length of stay. I personally think these measures are appropriate because they help track key factors that reflect the care the patient is getting. These numbers and metrics can help guide hospitals in the direction they are heading, and how to go from there.

4. Describe the concept of “unbundling” within the context of healthcare billing.

Unbundling within the context of healthcare billing refers to when individual components of a procedure or treatment is billed to the client, when it should be combined and billed as one charge.

5. If you had the opportunity to design a healthcare system from the ground up, what changes or innovations would you implement?

If I had the opportunity to design a healthcare system from the ground up, I would try my absolute best to make access to basic healthcare services available to everyone so individuals can receive basic care without worrying about financial burden. I would have safe staffing ratios, mental-health resources available for all staff and patients, and make sure that I am hiring a well-rounded team, as that directly impacts patients’ and other staff members. I would also invest in more health education in our community to get health knowledge and disease prevention out there to prevent rehospitalization and promote wellness.

In order to receive full credit (1 H class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignments not completed in its entirety by the assigned due date and time will result in missed class time.