

**COURSE DATA****DATA SUBJECT**

**Code:** 43432  
**Name:** Health economics  
**Cycle:** Master's Degree  
**ECTS Credits:** 2  
**Academic year:** 2026-27

**STUDY (S)**

Degree	Center	Acad. year	Period
2203 - Master's Degree in Economic Policy and Public Economics	Facultat d'Economia	1	Second quarter

**SUBJECT-MATTER**

Degree	Subject-matter	Character
2203 - Master's Degree in Economic Policy and Public Economics	Economics of the public sector	ELECTIVES

**COORDINATION**

TORTOSA CHULIA M ANGELES

**SUMMARY**

In this part of the Master subject we will review the basic concepts on Health Economics that are related to the problems of provision, financing, regulation and production and management of these areas. Through the application of the techniques of economic evaluation we will analyze the main health results and the establishment of health priorities. With these entire conceptual and methodological bases we will facilitate the understanding of decision making in the health sector done by private and public institutions, and in the different types of health services

**PREVIOUS KNOWLEDGE****RELATIONSHIP TO OTHER SUBJECTS OF THE SAME DEGREE**

There are no specified enrollment restrictions with other subjects of the curriculum.

**OTHER REQUIREMENTS****COMPETENCES / LEARNING OUTCOMES**



## 2203 - Master's Degree in Economic Policy and Public Economics

Aplicar las técnicas de evaluación de efecto de tratamiento en las intervenciones públicas, así como el uso de datos.

Capacidad para preparar, redactar y exponer en público informes y proyectos sobre política económica y economía pública de manera clara y coherente, defenderlos con rigor y tolerancia y responder satisfactoriamente a críticas sobre los mismos.

Desarrollar la capacidad crítica, impulsar la inquietud y el interés investigador; buscar, ordenar, analizar y sintetizar la información económica, seleccionando aquella que resulta pertinente para la toma de decisiones en política económica.

Desarrollar la capacidad de trabajo en equipo, coordinación de tareas, liderazgo y compromiso con el grupo en el desarrollo de actividades de análisis de los problemas económicos y sus soluciones.

Distinguir los elementos que condicionan las relaciones entre el sector público y el sector privado en una economía, analizando la incidencia que el sector público mantiene sobre la actividad económica, así como sobre el comportamiento de los agentes.

Fomentar, en contextos académicos y profesionales del ámbito de la política económica, el avance tecnológico, social o cultural dentro de una sociedad basada en el conocimiento y en el respeto a: a) los derechos fundamentales y de igualdad de oportunidades entre hombres y mujeres, b) los principios de igualdad de oportunidades y accesibilidad universal de las personas con discapacidad y c) los valores propios de una cultura de paz y valores democrático.

Integrar las nuevas tecnologías de la información y de la comunicación en su labor profesional y/o investigadora relacionada con el análisis de la intervención del estado en la economía.

Students should apply acquired knowledge to solve problems in unfamiliar contexts within their field of study, including multidisciplinary scenarios.

Students should be able to integrate knowledge and address the complexity of making informed judgments based on incomplete or limited information, including reflections on the social and ethical responsibilities associated with the application of their knowledge and judgments.

Students should communicate conclusions and underlying knowledge clearly and unambiguously to both specialized and non-specialized audiences.

Students should demonstrate self-directed learning skills for continued academic growth.

Students should possess and understand foundational knowledge that enables original thinking and research in the field.

Tomar decisiones tanto individuales como colectivas en su labor profesional y/o investigadora relacionada con la resolución de problemas propios de la política económica y la economía pública.



## DESCRIPTION OF CONTENTS

### 1. HEALTH ECONOMICS AND ECONOMIC EVALUATION

Health and sanitary services, what are they?

Health determinants and their relationships

Who protects us in public health? Regulatory framework in public health in Spain

- Public Health and Health Care policies: main elements

-Divestment in public health and health care

- Measures to improve population health: 1st) improve health management; 2nd) Promotion-prevention-health education; 3rd) Other measures

- Economic evaluation in health and sanitary: main economic evaluation techniques. Advances and setbacks in the economic evaluation.

- Cost-value

### 2. HEALTH PROVISION

-Models of health care to be supplied

-Health care structure. The case of Spain

Primary care

Specialized care: hospitals, outpatient clinics, etc.

-Who should make provision? Market failures or inefficiencies in private and public health care.

-What to provide? Health information.

-Phases in provision: from wishes to spending.

The demand for health and health care. Induced demand

Use (in fact, optimal, appropriate ...) and variability use of health services

News in the provision: use of ICTs and Artificial Intelligence

-Equity in the provision of health and health services

### 3. HEALTH CARE FUNDING

- Analysis of health expenditure. Data sources. Expense decomposition and explanatory factors for its growth.

- Health spending and aging

- New financing challenges: chronic patients and COVID-19

- Financing systems for health services:

Health insurance and prices

What copays?

Transfers via budget and risk-adjusted capitation

I use taxes, which ones?

- The health financing system in Spain. Autonomous financing.

- Hospital financing How to reformulate capitation financing? Allocating healthcare resources efficiently:

Risk adjustment and disease management systems

-Future changes in financing: drugs and payments for results



## 4. HEALTH PRODUCTION AND HEALTH MANAGEMENT

Principales ineficiencias en la producción/gestión servicios sanitarios.

Qué es la producción/gestión

Tipos sistemas gestión/producción (centralizado/descentralizado/autónomo), directo e indirecto.

Las colaboraciones público-privadas.

Gestión directa e información sobre:

- Centers: Actividad financiera, analítica o de costes. Logística de los centros, y sistemas pago a proveedores
- Relaciones con otros centros: Integración y coordinación sistemas y servicios sanitarios
- Relaciones con usuarios: GDR y CMD.
- La calidad de los servicios sanitarios

## 5. REGULATION

- Public Health and health care regulation. Concept and instruments, and economic evaluation.

- Merit wants in the field of health care

- Main public health and health care regulations:

Drugs: Tobacco, alcohol and others

Obesity

emergency situations: Covid-19

Medications and therapies: types, quantities, prices, etc.

Technological: genetic use and robotics,

Other lifestyles: trasplants and donations, physical exercise, euthanasia, etc.

- Limitations: Men behavior boundaries;iiii

## WORKLOAD

### PRESENCIAL ACTIVITIES

Activity	Hours
Theory	10,00
Seminar	10,00
<b>Total hours</b>	<b>20,00</b>

### NON PRESENCIAL ACTIVITIES

Activity	Hours
Attendance at other activities	2,00
Individual or group project	6,00
Independent study and work	10,00
Preparation of lessons	8,00
Preparation for assessment activities	2,00
Resolution of case studies	2,00
<b>Total hours</b>	<b>30,00</b>

## TEACHING METHODOLOGY



MD1 - Lectures (participatory masterful lesson)

MD3 - Discussion Items (readings)

MD4 - Case Studies

MD8 - Seminars and conferences.

MD9 - Debate and discussion Case studies directed

MD10 - Case Studies

MD12 - search, reading scientific literature and analysis of case studies

MD.- Role playing

As an added instrument to promote creative skills, imagination, good atmosphere and health, background music will be incorporated during some classes.

Coordinated subject with another Master's subject: Research Sources and Techniques (UV educational innovation project: "What if we coordinate? Methodological and competency evaluation proposal for two Master's subjects"), so the methodology and techniques used in the final work that will have to be presented for the evaluation of the subject will be the ones learned in this subject of Sources and research techniques.

In this course there will be an invited lecturer called Mary Martínez Martínez that will teach you about public private management of long term care. She will use real cases analysis.

The learning model used during the course seeks to carry out the tasks during class time, except for the seminar and the presentation of the research work on the day of the exam.

The teaching model adopted in the PEEP master's is governed by full and compulsory attendance. The non-attendance scenario is only foreseen as an exception to possible cases of population confinement or other cases that make it impossible to attend class, as long as they are decreed by the competent authorities.

## EVALUATION

The final evaluation is based on a continuous evaluation of the student, taking into account attendance, attitude, participation and, fundamentally, the quality of the work developed in the classroom throughout the 12 sessions in which the subject will be developed. The final grade of the continuous evaluation is obtained as a weighted average between the grade of the activities of these activities. The final grade for



the subject is obtained as a weighted average between the grade of the continuous evaluation activities, where 70% corresponds to a research proposal prepared in groups and 30% to the tasks carried out individually.

In detail, 2 types of evaluation:

a) Continuous, through case studies, readings, discussion classes, role playing and attending seminars (30% grade)

In case of any conferences, seminars or other external activities complementary to the classes throughout the course, these will be included and they could be evaluable too.

b) Exam of the subject through the presentation of a research proposal prepared in groups (70% grade). Social Jury and professor. If the research proposal to be evaluated is not in a minimum conditions, the professor may exclude it from the social evaluation.

## REFERENCES

- CULYER; J.P. NEWHOUSE; M.V PAULY; T.G. MCGUIRE; &P. PITA BARROS. Health economics. Amsterdam; New York: Elsevier, 2000-2012. Vol 1 y 2.
- DRUMMOND, M F. ET AL., Métodos para la evaluación económica de los programas de asistencia sanitaria, Díaz de Santos, Madrid, 2001
- ABELLÁN, J.M. (ed.) El sistema sanitario público en España y sus comunidades autónomas. Sostenibilidad y reformas. Fundación BBVA. Bilbao.2013.
- HIDALGO VEGA, A. y otros, Economía de la salud, Madrid, Pirámide, 2011.
- REPULLO, J Y IÑESTA, A. (Eds.) Sistemas y servicios sanitarios. Ed. Díaz de Santos, Madrid, 2007. Capítulos 2,3 y 4. Libro electrónico en Biblioteca Universitat Valencia: <http://site.ebrary.com/lib/universvaln/docDetail.action?docID=10179644&p00=repullo>
- ORTUN, V. Gestión Clínica y Sanitaria. De la práctica diaria a la academia, ida y vuelta. Barcelona: Masson; 2003.
- REPULLO J. R. Identificación y modulación del comportamiento sistemáticamente irracional en medicina y salud pública. Revista Española de Salud Pública, 2009, 83: 43-57.
- MARMOT, M. informe sobre determinantes sociales y desigualdades en materia de salud. OMS. Ginebra.2013.



- Publicaciones CRES: <http://www.upf.edu/cres/publicacions/masson.html> Catalogo EVES: <http://www.eves.san.gva.es/web/guest/presentacion4>
- PENCHEON, D. GUEST, C. MELZER, D. Oxford Handbooks: Oxford Handbook of Public Health Practice (2nd Edition). Libro electrónico en Biblioteca Universitat Valencia: <http://site.ebrary.com/lib/universvaln/detail.action?docID=10581574>
- PUIG-JUNOY, J. ¿Quién teme al copago? Barcelona: Los libros de lince. 2008.
- LÓPEZ CASASNOVAS, G. El bienestar desigual, Ediciones Península, Barcelona, 2015.
- LOBO, F. La economía, la innovación y el futuro del Sistema Nacional de Salud español. Madrid, FUNCAS, 2017.
- REPULLO, J.R. Políticas tutelares asimétricas: conciliando preferencias individuales y sociales en salud pública. Gaceta Sanitaria. 2009;23(4):342347.
- LÓPEZ I CASASNOVAS, G. y BEATRIZ GONZÁLEZ LÓPEZ-VALCARCEL. El sistema sanitario en España, entre lo que no acaba de morir y lo que no termina de nacer. Papeles de Economía Española 147 febrero 2016. <http://www.funcas.es/Publicaciones/Detalle.aspx?IdArt=2226>
- NARANJO-GIL, DAVID. Cómo los equipos de dirección usan los sistemas de información y control en la gestión hospitalaria. Gaceta Sanitaria. 2016; 30(4):287292.
- PADILLA BERNALDEZ, J. ¿A quién vamos a dejar morir? Sanidad pública, crisis y la importancia de lo político. Capitán Swing, Madrid, 2020.
- MAS, R; BARONA, C NINYOLES, G et al, Salud en todas las políticas de la Comunitat Valenciana: pasos hacia la evaluación de impacto en salud. Gaceta Sanitaria, 2019; 33(6): 593-597.
- RODRIGUEZ, M. El sector público y el sector privado de la sanidad ¿estabilidad o cambio? Gaceta Sanitaria, 2019; 33(6).
- RUSSELL, C. Does more medicine make us sicker? Ivan Illich revisited. Gaceta Sanitaria; 2019; 33(6): 579-583.
- OLIVA MORENO, J; GONZÁLEZ LÓPEZ-VALCARCEL, B; TRAPERO BELTRÁN, M; HIDALGO VEGA, A; Y DEL LLANO SEÑARÍS, J.E. Economía de la Salud. Madrid: Pirámide, 2018.



- PADILLA, J; CARMONA, C. Malestamos. Capitan Swing, Madrid. 2022.