

COURSE: Health	GRADE(S): 12 th Grade
UNIT: Healthcare	TIMEFRAME: 3 Lessons

<p>NATIONAL STANDARDS:</p> <p>STANDARD 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.</p> <p>STANDARD 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.</p> <p>STANDARD 3: Students will demonstrate the ability to access valid information and products and services to enhance health.</p> <p>STANDARD 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.</p> <p>STANDARD 5: Students will demonstrate the ability to use decision-making skills to enhance skills.</p> <p>STANDARD 6: Students will demonstrate the ability to use goal-setting skills to enhance health.</p> <p>STANDARD 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.</p>

<p>STATE STANDARDS:</p> <p>10.1. Concepts of Health</p> <p>10.1.12.A. Evaluate factors that impact growth and development during adulthood and late adulthood.</p> <p>10.1.12.B. Evaluate factors that impact the body systems and apply protective/preventive strategies.</p> <p>10.1.12.E. Identify and analyze factors that influence the prevention and control of health problems.</p> <p>10.2. Healthful Living</p> <p>10.2.12.A. Evaluate health care products and services that impact adult health practices.</p> <p>10.2.12.E. Analyze the interrelationship between environmental factors and community health.</p> <p><i>Reading Assessment Anchors:</i></p> <p>R11.A.2 Understand nonfiction appropriate to grade level</p> <p>R11.A.2.1 Identify and apply the meaning of vocabulary in nonfiction</p> <p>R11.A.2.3 Make inferences, draw conclusions, and make generalizations based on text</p> <p>R11.A.2.4 Identify and explain main ideas and relevant details</p>

<p>UNIT OBJECTIVES:</p> <p>Identify different types of health care plans.</p>	<p>CONTENT:</p> <p>I. Healthcare Plans:</p> <ul style="list-style-type: none"> - <u>Indemnity Plan</u> <ul style="list-style-type: none"> o Characteristics: <ul style="list-style-type: none"> ▪ Fee-for-service, you can use any medical provider and you usually have a deductible to pay each year before the insurer starts paying. - <u>Managed Care Plan</u> <ul style="list-style-type: none"> o Types: <ul style="list-style-type: none"> ▪ Preferred Provider Organization (PPO) <ul style="list-style-type: none"> ➤ Characteristics: <ul style="list-style-type: none"> ✧ Closest to an indemnity plan.
--	--

Explain how different healthcare terms apply to healthcare plans.

- ◇ Have arrangements with doctors, hospitals and other providers of care who have agreed to accept lower fees from the insurer for their services.
- ◇ Pay a co-payment
- *Health Maintenance Organization (HMO)*
 - Characteristics:
 - ◇ Oldest form of managed care plan
 - ◇ Offers range of health benefits, including preventative care, for a set monthly fee.
 - ◇ Only covers the cost of charges for doctors in that HMO.
 - ◇ If you go outside your HMO, you pay the bill.
- *Point-of-Service (POS) Plan*
 - Characteristics:
 - ◇ Indemnity-type option offered by HMO's
 - ◇ members can refer themselves outside of the plan and still get some coverage

- Private Health Insurance – individual

- o Premium- annual fee to insurance company.
- o Payment plans: paid at beginning of the coverage year or periodic payments though out the year.
- o Much more expensive than group.
- o Cost is spread among many members.
- o Companies usually use this.

- Group Insurance

- o Very important benefit if the employee's families are also covered.
- o May be obtained through professional or retirement organizations.

II. Related Healthcare Terms:

- Deductible: Portion of the year's medical expenses that the patient must pay before the insurance begins paying. Once the insured person's medical expenses exceed the deductible amount, the insurance company starts to pay for a specified percentage; often 80 percent of the medical bills.
- Co-payment: The remaining expense. The insured person is responsible for paying.
- Limits: Insurance policies or agreement, often have limits on the amount they will allow for a medical procedure.
 - o Procedure exceeds the amount allowed by the policy.

<p>Justify your choice of a Healthcare professional.</p>	<ul style="list-style-type: none"> o Policy does not cover specific procedures: <ul style="list-style-type: none"> ▪ sex change ▪ circumcision (now considered cosmetic) - <u>Primary Care Doctor</u>: Will serve as your regular doctor, managing your care and working with you to make the most of the medical decisions about your care as a patient. - <u>Medicare and Medicaid</u>: For people who are elderly, severely disabled, and those with low incomes and are unable to afford private health insurance. These people are then covered by public, or government health insurance programs that are paid for by taxes. <ul style="list-style-type: none"> o <i>Medicare</i>: Elderly, and younger people who are disabled or who have chronic kidney disease. <ul style="list-style-type: none"> ▪ <i>Part A-free</i>: Covers all people 65 years old or older who are eligible for Social Security or railroad retirement benefits. It carries a deductible and provides 60 days of hospitalization, not including doctors' bills. ▪ <i>Part B</i>: Purchased for a small monthly fee helps to pay doctor bills, outpatient hospital services, and the cost of some medical services, and supplies. Anyone who is 65 years old or older can purchase Medicare Part B whether or not he or she is covered by Social Security. o <i>Medicaid</i>: State and Federal assistance program that pays for the health care of anyone with an income below an established level. <ul style="list-style-type: none"> ▪ <i>Benefits</i> vary state by state, because dependent on tax money. Anyone can get information about eligibility for Medicaid from the local welfare office or other social-service agency. - <u>The Health Insurance Portability and Accountability Act of 1996</u>: HIPAA is an act that protects health insurance coverage for workers and their families when they change or lose their jobs. The Department of Health and Human Services has also established national standards for electronic health care transactions and national identifiers for providers, health plans, and employers. It also addresses the security and privacy of health data. <p>III. Tips on Choosing a Doctor</p> <ul style="list-style-type: none"> o Ask plans and medical offices for information on their doctors' training and experience o Look up basic information about doctors in the Directory of Medical Specialists, available at your local library
--	--

	<ul style="list-style-type: none"> o Use "AMA Physician Select," which is the American Medical Association's free service on the Internet for information about physicians (http://www.ama-assn.org.aps.amahg.htm)
<p>ACTIVITIES:</p> <p>Select a doctor within a 20 mile radius of the school and research the type(s) of healthcare plans that they accept. (Accessing Information, Self-Management, Decision-Making/Goal-Setting, Analyzing Internal and External Influences)</p> <p>Research/presentation/comparison of costs different private insurance companies, HMO's, Medicare.</p> <p>✧ How much will it cost me if I use this Insurance company? (Accessing Information)</p> <p>Evaluate health-related websites. (Accessing Information, Analyzing Internal and External Influences)</p> <p>Jigsaw Activity to compare and contrast various healthcare plans. (Accessing Information, Interpersonal Communication)</p> <p><i>Teacher directed differentiated instructional projects and activities are ongoing and based on student need.</i></p> <p>RESOURCES:</p> <p><i>Books:</i> Health: Choosing Wellness, by Prentice Hal 1992 pp. 545-547</p> <p>Web Sites:</p> <p>www.urban.org/family/invaless.html www.notmenotnow.org/about.CFM www.avert.org/ www.ahrq.gov/CONSUMER.hlthpln1.htm www.cms.hhs.gov/hipaa/</p>	<p>ASSESSMENTS:</p> <p>True/False, Multiple Choice, Essay explaining various types of Healthcare and how they can be applied to the students' life.</p> <p>Create a comparison chart of healthcare plans.</p> <p>Create an infomercial about how to choose a health care professional</p> <p>REMEDIATION:</p> <p>Individualized assistance on areas having difficulty during class if possible, or at an agreed upon scheduled time after or before school.</p> <p>Allow student to copy worksheet from reliable classmate.</p> <p>Allow to work in groups, partners, of choice in beginning or end of class to get caught up with teacher approval.</p> <p>Copy of teacher notes.</p> <p>Peer helpers.</p> <p>Students will discuss health care coverage plans with their parents/guardians when visiting different medical professionals such as family physicians, dentists, optometrists, etc.</p> <p>ENRICHMENT:</p> <p>Extra credit given for summary/critique of current event articles related to topic.</p> <p>Credit given for additional reading and presenting /writing on non-required articles.</p> <p>Credit given for computer designed overheads on related topics developed for teacher use. Research / presentation of specialized related topic.</p> <p>Research the origin of HIPPA and report findings to the class.</p> <p>Create a bulletin board that outlines the various types of healthcare plans available.</p>