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## Introduction

This unit covers the three issues stated in its title. It begins by explaining the problems associated with America's health care system, primarily in the field of costs, results, and coverage. It explains the recently enacted Affordable Care Act and discusses its more controversial features.

The unit continues with an evaluation of America's public schools and an explanation of four strategies designed to regain the U.S.'s world leadership in education. The strategies are evaluating teachers by their students' scores on achievement tests, expanding preschool education, increasing the number of charter schools, and replicating the Harlem Children's Zone initiative.

The third part of this book covers the dilemma between the welcoming words on the Statue of Liberty's pedestal and the restrictions imposed on immigration. The narrative raises two issue-related questions of how the U.S. should deal with the recent influx of unauthorized immigrants. The first issue concerns whether amnesty should be granted for the foreign-born children of undocumented immigrants. The second issue concerns amnesty for law-abiding yet unauthorized adults.

The premise of this unit is that economics need not always live up to its reputation as "the dismal science." This discipline deals with real-world problems that are not always resolved by economic formulas, charting demand and supply curves, or adjusting discount rates. The problems covered in this unit are real to most Americans. They raise issues closely connected to their real life concerns—their health, their education, and the ethnic composition of their country. Yet, few sources provide the reliable information and the thought-provoking questions that stimulate informed discussions of these issues.

Each chapter in this unit includes numerous multiple-choice and occasional matching questions, as well as thought-provoking essay questions. Even the multiple-choice questions call for thinking skills and understanding rather than rote learning. In addition, the teacher's pages provide an overview of the entire chapter, a list of objectives, and numerous suggestions for teaching the chapter.

# CHAPTER 1 HEALTH CARE FACTS

## Overview

The chapter starts by explaining that this mini-unit covers three topics dealing with the controversial attempt by President Obama to provide affordable health care to all Americans. Students will be expected to compare health care in the U.S. to the costs, methods of insurance, and the life expectancies of other countries. The second chapter in this mini-unit provides facts essential to understanding the Patient Protection and Affordable Care Act of 2010. The third chapter presents arguments for and against this controversial law.

The first chapter of this mini unit provides a series of charts showing the increased costs of health insurance in six Western countries, a comparison of life expectancy among 214 countries, a projection of health insurance costs if present trends continue in the U.S., and a comparison of the health care provided in Canada with its single-payer system and the U.S. with its multiple methods. Students are asked to examine these statistics and to discuss whether they believe their country has the world's best system for providing health care. The chapter closes with two bloggers' comments on the Canadian and the American systems.

## **Objectives**

Students will:

- compare life-expectancy statistics and costs of health care in various countries
- compare health care delivery in the U.S. and Canada
- discuss whether the U.S. has the world's best system of health care.

## Strategies

After determining whether students did their homework, ask them who pays for their family's health insurance and whether they and their extended families are satisfied with their experiences. After a suitable amount of time, review students' answers to multiple-choice questions and answer questions about why any particular answer is correct. Proceed by asking students to

share their answers to the essay question, and end class by asking whether and why they believe changes need to be made in the U.S.'s method of providing health care services.

## Assignment

Assign Chapter 2, passing out the student reading and activities pages. Ask students to complete their assignment on their own paper if they run out of room on the handouts.

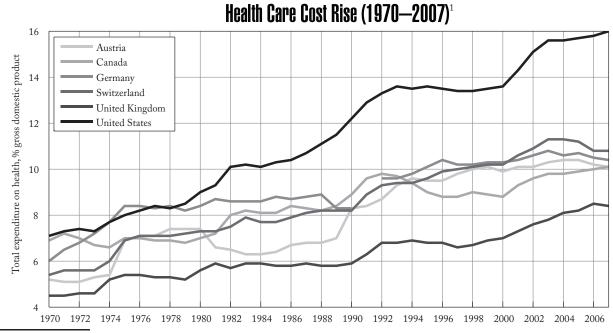
# CHAPTER 1 HEALTH CARE FACTS

## Introduction

Some Americans believe that their country has the best health care system in the world. They point with pride to the number of foreign dignitaries who come to the United States to have complicated life-saving operations. They believe that the United States has the world's best hospitals, the world's best doctors, the most modern and sophisticated medical technology, the shortest waiting periods for major operations, and the highest survival rate.

We are not denying that those with health insurance have access to world-class medical facilities and care. However, we need to point out that there are serious problems in the American medical system for those without insurance. This chapter provides some statistics that may change your thinking about the health care system in this country.

## Comparing Cost Increases in Health Care



<sup>1.</sup> Wikimedia Commons

According to the September 30, 2009, issue of *TIME* magazine, about 13 million Americans ages 19 to 29, or about one-third in this age bracket, do not have health insurance. About \$2.2 trillion are spent each year on health care—somewhere between \$700 billion and \$1.1 trillion of those expenditures are unnecessary. If current trends continue, the average health-insurance policy per family will cost \$30,083 per year by 2019. According to the Kaiser Foundation, the average cost for a family health care policy in 2009 was \$13,375. The \$30,083 price tag for 2019 represents an estimated increase of 225%.

Furthermore, about 16% of Americans—53 million people—did not have health insurance in the year 2011.

Life Expectancy by Country <sup>2</sup>						
Rank	Country	Life Expectancy	Rank	Country	Life Expectancy	
1	Monaco	89.78	49	United States	78.24	
5	Japan	82.7	55	Costa Rica	77.54	
10	Canada	81.29	70	Uruguay	76.55	
15	Switzerland	80.97	123	Egypt	72.40	
20	Cayman Islands	80.57	146	Iraq	70.25	
25	Norway	80.08	_	The world	66.12	
29	Greece	79.8	221	Nigeria	47.24	
35	Luxembourg	78.48	222	Afghanistan	44.65	
42	South Korea	78.81	224	Angola	38.48	

<sup>2.</sup> CIA

<b>Comparing Health Care System for U.S. and Canadian Doctors</b> <sup>3</sup>						
Category	Canada	U.S.				
Average spending on health care per person	\$4,522	\$8,508				
Type of medical ser- vices delivered	Single payer: National government subsidizes the premiums, which are paid by government of the provinces. Care is delivered by doctors and hospitals in private practice. All Canadians are covered by this system.	A variety of systems supported by federal and state governments: Medicaid for poor; Medicare for seniors; Veterans Administration for veterans and their families; military health system serves those eligible. 24% of Americans have inadequate insurance; 16% have no insurance; 25% of the uninsured qualify for government insurance but haven't applied.				
Emergency care	Paid for by national gov- ernment's subsidies.	Everyone coming for emergency care must be treated; those without insurance get billed after treatment.				
People served by medical system	Canadians are more likely to have a regular doctor than Americans and are more likely to have their health care needs met.	Americans are less likely to have a regular doctor than Canadians and are less likely to have their health care needs met.				
Average waiting time for surgery	4 weeks	3 weeks				
% of health care dol- lar spent on adminis- trative costs	16.7%	31.0%				
Amount doctors are paid	About half of what doctors in U.S. are paid	Twice as much as Canadian doctors are paid				
Number of doctors per person	2.1 per 1,000 people	2.4 per 1,000 people				
Life expectancy	81.67 years	79.56 years				

<sup>3.</sup> Sources: Kaiser Family Foundation; CIA World Factbook; World Book; Commonwealth Fund; Karen E. Lasser, "Access to Care, Health Status, and Health Disparities, in the United States and Canada: Results of a Cross-National Population-Based Survery," *American Journey of Public Health* 96 (July 2006):1–8; Steffie Woolhandler et al., "Costs of Health Care Administration in the United States and CAnada," *New England Journal of Medicine* 249 (2003): 768–75

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## **Two Anecdotal Accounts**

### Charlie Reed, June 10, 2009

I agree that the number of Canadian people coming here for medical care is most likely small. After all Canada is a modern country and I am sure the care is okay. Even when extreme care is needed, most people are probably sure they are getting good care. When, however, it is your child that is gravely ill, and a government-run medical facility is telling you that they are doing all they can, and it is just not enough. A small percentage of people (I know of only one) will pack up the entire family, sell the business, and move some where more can be done. For my friend, that place was Massachusetts, and 20 years later he tells me he knows me made the right move. Regarding the free Canadian health care, his comment was, "Well Charlie, you get what you pay for!" As you know, I am all for extending health care to all individuals, but there is something in the countries' system that is worth preserving, and we had better be darn careful as to how we go about doing this!<sup>4</sup>

#### John Murphy, Jan 10, 2010

Health care in Canada is excellent and far better than what the average American has (and I lived in the U.S. for seven years, so I can make a good comparison). There are far more Americans who can't afford the treatment they need and have to wait decades (if they survive) to be eligible for Medicare and to be able to get the treatment they need. ...[T]here are many times more Americans coming to Canada for treatment than there are going the other way. Not many Canadians would ever touch the U.S. health care system, and it is commonly believed in Canada that the U.S. has a third-world health care system for most Americans, since not all Americans have access to health care. Given the choice, and having actually used both Canadian and U.S. health care, there is no doubt in my mind that Canada has a far superior health care system than the U.S. insurance-run health system.<sup>5</sup>

<sup>4.</sup> http://www.change.org/profile/view/120089 (edited for clarity)

<sup>5.</sup> http://www.change.org/profile/view/612846 (edited for clarity)

#### Name: \_

Date: \_

## **Student Activities** Health Care Facts

### A. Multiple-Choice

- 1. The idea that the United States has the best health care system in the world:
  - a. is supported by the factual information contained in this chapter
  - b. is reflected in the figures on life expectancy
  - c. may be true, but it is definitely the most expensive
  - d. proves that government-supported health care does not work
- 2. In life expectancy and cost of health care, the United States:
  - a. ranks first in the world in both
  - b. is first in cost and 49th in life expectancy
  - c. is first in life expectancy and 49th in cost
  - d. is average in life expectancy and first in cost
- 3. Which of the following *is not* true?
  - a. According to *TIME* magazine, if present trends continue, health care for a family of four will cost over \$30,000 by 2019.
  - b. About 53 million Americans (16% of the U.S. population) do not have health insurance.
  - c. The United States has a single-payer health care system and Canada has a completely socialized, government-controlled health care system.
  - d. The cost of administering the U.S. health care system is about twice as high as the cost of administering Canada's.