

Health Economics Jeremiah Hurley

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Loss Coverage Guy Thomas 2017-05-11 Most academic and policy commentary represents adverse selection as a severe problem in insurance, which should always be deprecated, avoided or minimised. This book gives a contrary view. It details the exaggeration of adverse selection in insurers' rhetoric and insurance economics, and presents evidence that in many insurance markets, adverse selection is weaker than most commentators suggest. A novel arithmetical argument shows that from a public policy perspective, 'weak' adverse selection

can be a good thing. This is because a degree of adverse selection is needed to maximise 'loss coverage', the expected fraction of the population's losses which is compensated by insurance. This book will be valuable for those interested in public policy arguments about insurance and discrimination: academics (in economics, law and social policy), policymakers, actuaries, underwriters, disability activists, geneticists and other medical professionals.

Economic Evaluation Across the Four Faces of Prevention Laurie J. Goldsmith 2004

The Elgar Companion to Health Economics Andrew M. Jones 2012

ÔThe Elgar Companion to Health Economics is a comprehensive and accessible look at the field, as seen by its leading figures.Õ

Õ Æ Joseph Newhouse, Harvard Medical School, US Acclaim for the first edition: ÔThis Companion is a timely addition. . . It contains 50 chapters, from 90 contributors around the world, on the topical and policy-relevant aspects of health economics. . . there is a balanced coverage of theoretical and empirical materials, and conceptual and practical issues. . . I have found the Companion very useful.Õ

Õ Æ Sukhan Jackson, Economic Analysis and Policy ÔThis encyclopedic work provides interested readers with an authoritative and comprehensive overview of many, if not all, of the current research issues in health economics. Highly recommended. Upper-level undergraduates and above.Õ

Õ Æ R.M. Mullner, Choice This comprehensive collection brings together more than 50 contributions from some of the most influential researchers in health economics. It authoritatively covers theoretical and empirical issues in health economics, with a balanced range of material on equity and efficiency in health care systems, health technology

assessment and issues of concern for developing countries. This thoroughly revised second edition is expanded to include four new chapters, while all existing chapters have been extensively updated. The Elgar Companion to Health Economics, Second Edition intends to take an audience of advanced undergraduates, postgraduates and researchers to the current frontier of research by providing concise and readable introductions to key topics.

Information, Efficiency and Decentralization Within Health Care Systems Jeremiah E. Hurley 1992 Decentralization is an emerging theme within the health sector. It is suggested by many advocates that providing greater authority to local decision-making bodies can improve both the technical and allocative efficiency with which health care systems operate. In this paper we focus on the informational problems that must be overcome to allocate resources efficiently and analyze the potential for decentralized planning and management structures to do so. We conclude that while decentralized structures offer the potential for improved technical and allocative efficiency, there are a number of significant obstacles that must be overcome, particularly those relating to the design of decision-making structures that are capable of integrating expert knowledge and information on values and preferences.

Bending the Cost Curve in Health Care Gregory P. Marchildon 2014-11-28 Through Canadian and international perspectives, Bending the Cost Curve in Health Care explores the management of growing health costs in an extraordinarily complex arena. The book moves beyond previous debates, agreeing that while efficiencies and better value for money may yet be found, more fundamental reforms to the management and delivery of health services are essential prerequisites to bending the cost curve in the long run. While there is

considerable controversy over direction and details of change, there also remains the challenge of getting agreement on the values or principles that would guide the reshaping of the policies, the structures, and the regulatory environment of health care in Canada. Leading experts from around the world representing a range of disciplines and professional backgrounds come together to organize and define the problems faced by policy-makers. Case studies from the United States, the United Kingdom, Australia, the Nordic countries, and industrialized Asian countries such as Taiwan offer useful reform experiences for provincial governments in Canada. Finally, common Canadian cost factors, such as pharmaceuticals and technology, and paying the health workforce, are explored. This book is the first volume in The Johnson-Shoyama Series on Public Policy, published by the University of Toronto Press in association with the Johnson-Shoyama Graduate School of Public Policy, an interdisciplinary centre for research, teaching, and executive training with campuses at the Universities of Regina and Saskatchewan.

The Economics of Health and Health Care Sherman Folland 2016-05-23 For courses in Health Economics, U.S. Health Policy/Systems, or Public Health, taken by health services students or practitioners, the text makes economic concepts the backbone of its health care coverage. Folland, Goodman and Stano's book is the bestselling Health Care Economics text that teaches through core economic themes, rather than concepts unique to the health care economy. This edition contains revised and updated data tables, where applicable. The advent of the Patient Protection and Affordable Care Act (PPACA) in 2010 has also led to

changes in many chapters , most notably in the organization and focus of Chapter 16.

What Is Enough? Annette Rid 2016-10-28 What is a just way of spending public resources for health and health care? Several significant answers to this question are under debate. Public spending could aim to promote greater equality in health, for example, or maximize the health of the population, or provide the worst off with the best possible health. Another approach is to aim for each person to have "enough" so that her health or access to health care does not fall under a critical level. This latter approach is called sufficientarian. Sufficientarian approaches to distributive justice are intuitively appealing, but require further analysis and assessment. What exactly is sufficiency? Why do we need it? What does it imply for the just distribution of health or healthcare? This volume offers fresh perspectives on these critical questions. Philosophers, bioethicists, health policy-makers, and health economists investigate sufficiency and its application to health and health care in fifteen original contributions.

Developing Needs-based Funding Formulae Using Individual-level Linked Survey and Utilization Data [electronic Resource] : an Application to Home Care Services in Ontario, Canada Hurley, Jeremiah E 2004

Needs-based Funding for Home Care and Community Support Services in Ontario [electronic Resource] : a New Approach Based on Linked Survey and Administrative Data Hurley, Jeremiah E 2003

From Pleasure Machines to Moral Communities Geoffrey M. Hodgson 2013 Are humans at their core seekers of their own pleasure or cooperative members of society? Paradoxically,

they are both. Pleasure-seeking can take place only within the context of what works within a defined community, and central to any community are the evolved codes and principles guiding appropriate behavior, or morality. The complex interaction of morality and self-interest is at the heart of Geoffrey M. Hodgson's approach to evolutionary economics, which is designed to bring about a better understanding of human behavior. In *From Pleasure Machines to Moral Communities*, Hodgson casts a critical eye on neoclassical individualism, its foundations and flaws, and turns to recent insights from research on the evolutionary bases of human behavior. He focuses his attention on the evolution of morality, its meaning, why it came about, and how it influences human attitudes and behavior. This more nuanced understanding sets the stage for a fascinating investigation of its implications on a range of pressing issues drawn from diverse environments, including the business world and crucial policy realms like health care and ecology. This book provides a valuable complement to Hodgson's earlier work with Thorbjørn Knudsen on evolutionary economics in Darwin's *Conjecture*, extending the evolutionary outlook to include moral and policy-related issues.

[Financing Health Care](#) Mingshan Lu 2008-04-09 Discussing international issues of health care financing, this is the first volume in a completely new public health book series, edited by the Institute of Health Economics (IHE) in Edmonton, Canada. Starting with various funding methods, the reference also features sections on different health care payment and purchasing mechanisms, as well as equity issues. Of interest to medical and allied health professionals, and those working in health care industries, insurance, and economics.

Changing Patterns of Physician Services Utilization in Ontario, Canada and Their Relation to Physician, Practice and Market-area Characteristics

Jeremiah Hurley 1994

Relative Fees and the Utilization of Physicians' Services in Canada Jeremiah E. Hurley 1994

The Oxford Handbook of U.S. Healthcare Law I. Glenn Cohen 2016-12-16 The Oxford Handbook of U.S. Health Law covers the breadth and depth of health law, with contributions from the most eminent scholars in the field. The Handbook paints with broad thematic strokes the major features of American healthcare law and policy, its recent reforms including the Affordable Care Act, its relationship to medical ethics and constitutional principles, and how it compares to the experience of other countries. It explores the legal framework for the patient experience, from access through treatment, to recourse (if treatment fails), and examines emerging issues involving healthcare information, the changing nature of healthcare regulation, immigration, globalization, aging, and the social determinants of health. This Handbook provides valuable content, accessible to readers new to the subject, as well as to those who write, teach, practice, or make policy in health law.

Tackling Health Inequities Through Public Health Practice Richard Hofrichter 2010-03-10 Social justice has always been a core value driving public health. Today, much of the etiology of avoidable disease is rooted in inequitable social conditions brought on by disparities in wealth and power and reproduced through ongoing forms of oppression, exploitation, and marginalization. Tackling Health Inequities raises questions and provides a starting point for health practitioners ready to reorient public health practice to address the fundamental causes of health inequities. This reorientation involves restructuring the organization, culture and daily work of public health. Tackling Health Inequities is meant to

inspire readers to imagine or envision public health practice and their role in ways that question contemporary thinking and assumptions, as emerging trends, social conditions, and policies generate increasing inequities in health.

Parallel Lines Do Intersect 2007

IS SMALL REALLY BEAUTIFUL 1995

Moral Hazard in Health Insurance Amy Finkelstein 2014-12-02 Addressing the challenge of covering health care expenses—while minimizing economic risks. Moral hazard—the tendency to change behavior when the cost of that behavior will be borne by others—is a particularly tricky question when considering health care. Kenneth J. Arrow’s seminal 1963 paper on this topic (included in this volume) was one of the first to explore the implication of moral hazard for health care, and Amy Finkelstein—recognized as one of the world’s foremost experts on the topic—here examines this issue in the context of contemporary American health care policy. Drawing on research from both the original RAND Health Insurance Experiment and her own research, including a 2008 Health Insurance Experiment in Oregon, Finkelstein presents compelling evidence that health insurance does indeed affect medical spending and encourages policy solutions that acknowledge and account for this. The volume also features commentaries and insights from other renowned economists, including an introduction by Joseph P. Newhouse that provides context for the discussion, a commentary from Jonathan Gruber that considers provider-side moral hazard, and reflections from Joseph E. Stiglitz and Kenneth J. Arrow. “Reads like a fireside chat among a

group of distinguished, articulate health economists.” —Choice Ethics, Economics, and Public Financing of Health Care Jeremiah E. Hurley 2001

The Government Taketh Away Leslie A. Pal 2003-04-01 Democratic government is about making choices. Sometimes those choices involve the distribution of benefits. At other times they involve the imposition of some type of loss—a program cut, increased taxes, or new regulatory standards. Citizens will resist such impositions if they can, or will try to punish governments at election time. The dynamics of loss imposition are therefore a universal—if unpleasant—element of democratic governance. The Government Taketh Away examines the repercussions of unpopular government decisions in Canada and the United States, the two great democratic nations of North America. Pal, Weaver, and their contributors compare the capacities of the U.S. presidential system and the Canadian Westminster system to impose different types of losses: symbolic losses (gun control and abortion), geographically concentrated losses (military base closings and nuclear waste disposal), geographically dispersed losses (cuts to pensions and to health care), and losses imposed on business (telecommunications deregulation and tobacco control). Theory holds that Westminster-style systems should, all things being equal, have a comparative advantage in loss imposition because they concentrate power and authority, though this can make it easier to pin blame on politicians too. The empirical findings of the cases in this book paint a more complex picture. Westminster systems do appear to have some robust abilities to impose losses, and US institutions provide more opportunities for loss-avoiders to resist government policy in some sectors. But in most sectors, outcomes in the two countries are strikingly similar. The

Government Taketh Away is essential for the scholar and students of public policy or comparative policy. It is also an important book for the average citizen who wants to know more about the complexities of living in a democratic society where the government can give-but how it can also, sometimes painfully, "taketh away."

Restructuring Canada's Health Systems: How Do We Get There From Here? Raisa B. Deber 1992-12-15 Is the Canadian health care system becoming a victim of its own success? It has done what it set out to do – provide universal access to all medically necessary health services without financial barriers to patients – but expanding technology, an aging population, and escalating costs strain its ability to continue. It is time to explore ways to reorient and restructure the health care system and the services it provides. At the Fourth Canadian Conference on Health Economics, contributors of international reputation addressed these concerns. Their papers, collected in this volume, consider a wide range of fundamental issues related to health care policies and structures. They discuss new developments in health care delivery, assess implications of such new policies as home care and health promotion, and propose concrete alternatives for restructuring the present system to sustain universal medicine.

Handbook of Health Economics Mark V. Pauly 2012-01 What new theories, evidence, and policies have shaped health economics in the 21st century? Editors Mark Pauly, Thomas McGuire, and Pedro Pita Barros assemble the expertise of leading authorities in this survey of substantive issues. In 16 chapters they cover recent developments in health economics, from medical spending growth to the demand for health care, the markets for pharmaceutical

products, the medical workforce, and equity in health and health care. Its global perspective, including an emphasis on low and middle-income countries, will result in the same high citations that made Volume 1 (2000) a foundational text. Presents coherent summaries of major subjects and methodologies, marking important advances and revisions. Serves as a frequently used non-journal reference. Introduces non-economists to the best research in health economics.

Handbook of Health Economics A.J. Culyer 2000-07-19 The Handbook of Health Economics provide an up-to-date survey of the burgeoning literature in health economics. As a relatively recent subdiscipline of economics, health economics has been remarkably successful. It has made or stimulated numerous contributions to various areas of the main discipline: the theory of human capital; the economics of insurance; principal-agent theory; asymmetric information; econometrics; the theory of incomplete markets; and the foundations of welfare economics, among others. Perhaps it has had an even greater effect outside the field of economics, introducing terms such as opportunity cost, elasticity, the margin, and the production function into medical parlance. Indeed, health economists are likely to be as heavily cited in the clinical as in the economics literature. Partly because of the large share of public resources that health care commands in almost every developed country, health policy is often a contentious and visible issue; elections have sometimes turned on issues of health policy. Showing the versatility of economic theory, health economics and health economists have usually been part of policy debates, despite the vast differences in medical care institutions across countries. The publication of the first Handbook of Health Economics

marks another step in the evolution of health economics.

Is Two-Tier Health Care the Future? Colleen M. Flood 2020-04-28 Canadians are deeply worried about wait times for health care. Entrepreneurial doctors and private clinics are bringing Charter challenges to existing laws restrictive of a two-tier system. They argue that Canada is an outlier among developed countries in limiting options to jump the queue. This book explores whether a two-tier model is a solution. In *Is Two-Tier Health Care the Future?*, leading researchers explore the public and private mix in Canada, Australia, Germany, France, and Ireland. They explain the history and complexity of interactions between public and private funding of health care and the many regulations and policies found in different countries used to both inhibit and sometimes to encourage two-tier care, such as tax breaks. This edited collection provides critical evidence on the different approaches to regulating two-tier care across different countries and what could work in Canada. This book is published in English.

Economic Evaluation Across the Four Faces of Prevention [electronic Resource] : a Canadian Perspective Brian G. Hutchison 2006

Is the Wolf Finally at the Door? : Provincial Reform to Manage Health-care Resources Hurley, Jeremiah E 1993

A Tale of Two Provinces: a Case Study of Physician Expenditure Caps as Financial Incentives Jeremiah Hurley 1996

Health Economics Jeremiah E. Hurley 2013

Health Economics Charles E. Phelps 2016-04-14 *Health Economics* combines current

economic theory, recent research, and health policy problems into a comprehensive overview of the field. This thorough update of a classic and widely used text follows author Charles E. Phelps' thirteen years of service as Provost of the University of Rochester. Accessible and intuitive, early chapters use recent empirical studies to develop essential methodological foundations. Later chapters build on these core concepts to focus on key policy areas, such as the structure and effects of Medicare reform, insurance plans, and new technologies in the health care community. This edition contains revised and updated data tables and contains information throughout the text on the latest changes that were made to the Patient Protection and Affordable Care Act (PPACA).

Treating Health Care Raisa B. Deber 2017-12-14 Focusing on Canada's health care system, Raisa B. Deber introduces the reader to the facts and concepts necessary to understand health care policy in Canada and to evaluate how we might want to reform our health care system.

IS THE WOLF FINALLY AT THE DOOR? 1993

Health, Health Care and Health Economics Morris L. Barer 1998-09-16 This book focuses on fundamental issues of equity or distribution in health care and health. It will be an indispensable sourcebook for all health economists as well as health care policy makers and managers.

Defying Definition: Medical Necessity and Health Policy Making 1996

Accidental Logics Carolyn J. Tuohy 1999 Looks at the USA, Britain and Canada to offer an international comparative study of public policy systems, as well as a recent history of the

evolution of each national health care system. The book explores what drives change and why certain changes occur in some nations and not in others.

POLICY CONSIDERATIONS IN IMPLEMENTING CAPITATION FOR INTEGRATED HEALTH SYSTEMS 1999*

Simulated Effects of Incomes-based Policies on the Distribution of Physicians Jeremiah E. Hurley 1988

The Oxford Handbook of Comparative Health Law David Orentlicher 2021 The Oxford Handbook of Comparative Health Law addresses some of the most critical issues facing scholars, legislators, and judges today. When matters of life and death literally hang in the balance, it is especially important for policymakers to get things right. Comparative analysis has become an essential component of the decision making process, and The Oxford Handbook of Comparative Health Law is the only resource available that provides such an analysis in health law.

Private Health Insurance Sarah Thomson 2020-09-30 Can private health insurance fill gaps in publicly financed coverage? Does it enhance access to health care or improve efficiency in health service delivery? Will it provide fiscal relief for governments struggling to raise public revenue for health? This book examines the successes, failures and challenges of private health insurance globally through country case studies written by leading national experts. Each case study considers the role of history and politics in shaping private health insurance and determining its impact on health system performance. Despite great diversity in the size and functioning of markets for private health insurance, the book identifies clear

patterns across countries, drawing out valuable lessons for policymakers while showing how history and politics have proved a persistent barrier to effective public policy. This title is also available as Open Access on Cambridge Core.

Medical Savings Accounts in Publicly Financed Health Care Systems [electronic Resource] : what Do We Know? Hurley, Jeremiah E 2001

Financing Health Care Mingshan Lu 2008-02-04 Discussing international issues of health care financing, this is the first volume in a completely new public health book series, edited by the Institute of Health Economics (IHE) in Edmonton, Canada. Starting with various funding methods, the reference also features sections on different health care payment and purchasing mechanisms, as well as equity issues. Of interest to medical and allied health professionals, and those working in health care industries, insurance, and economics.