

# Health Economics Jeremiah Hurley

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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.

POLICY CONSIDERATIONS IN IMPLEMENTING CAPITATION FOR INTEGRATED HEALTH SYSTEMS  
1999\*

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

FINANCIAL INCENTIVES AND MEDICAL PRACTICE 1990

Changing Patterns of Physician Services Utilization in Ontario, Canada and Their Relation to Physician, Practice and Market-area Characteristics Jeremiah Hurley 1994

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.

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

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.

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

E 1993

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

Accidental Logics Carolyn Hughes Tuohy 1999-05-20 Health care reform has become one of the most prevalent topics in recent policy discourse within and across nations. In the 1990s, common features of the health care arena elevated the importance of bargaining relationships among large, sophisticated entities as the dominant mode of decision-making, fundamentally challenging the traditional dominance of the medical profession, which had been grounded in individualized "agency" relationships between providers and patients. These developments have played out in varying ways around the globe. Carolyn Hughes Tuohy looks at the experiences of the United States, Britain, and Canada, offering an international comparative study of public policy systems, as well as a recent history of the evolution of each national health care system. What drives change in health care systems? Why do certain changes occur in some nations and not in others? Tuohy argues that the answer lies in understanding the "accidents" of history that have shaped national systems at critical moments and in the distinctive "logics" of these systems. Her study carefully delineates both the common logic of the health care arena, deriving

from micro-economic characteristics and technological change, and the particular logics of national systems, put in place by specific episodes of policy change. She goes on to explore how in the wake of these episodes, the mixed market in the United States, hierarchical corporatism in Britain, and the single-payer system in Canada determined the subsequent direction and pace of change in all three countries. Finally, Tuohy provides suggestions to guide the strategic judgments that decision-makers must make within the health care system of each country. *Accidental Logics* uniquely departs from the descriptive literature currently available by presenting an extensive review of the evidence regarding the evolution of the health care arenas in the United States, Britain, and Canada, integrated within an explanatory framework. It is essential up-to-date reading for political scientists working in comparative politics and public policy, health policy analysts, government agency officials, and students in political science, health policy, and administration programs.

*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.

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

*The Impact of Alternative Incentives on Response and Retention in a Mixed-mode Survey* Aleksandra Gajic 2010

*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.

*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.

Ethics, Economics, and Public Financing of Health Care Jeremiah E. Hurley 2001

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

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.

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."

Needs-based Funding for Home Care and Community Support Services in Ontario Jeremiah Hurley 2000

Geographic Equity in Hospital Utilization Jeremiah Hurley 2000

Parallel Lines Do Intersect 2007

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).

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.

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

IS SMALL REALLY BEAUTIFUL 1995

Defying Definition: Medical Necessity and Health Policy Making 1996

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

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.

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

IS THE WOLF FINALLY AT THE DOOR? 1993

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.

Health Economics Jeremiah E. Hurley 2010-03-24 Hurley, Health Economics, First Edition, is unique in its focus and will provide the market with the only available Canadian book of its kind to date. The text is written with no economics prerequisites, reviewing each of the appropriate economic models as it is required. The text places strong emphasis on policy issues relating to public and private health care. The purpose of this text is to make sense of the health sector, to be able to critically analyze, from an

economic perspective, commonly debated health issues in modern societies. Its strong policy orientation emphasizes the application of economic concepts and methods to analyze policy problems in the health sector. Because health economics is an applied field, one must have some understanding of how the health system works. Consequently, although it draws examples from countries around the world, it emphasizes the design and institutional features of the Canadian health system. In this respect, it fills an important gap in the resources available to Canadian students and professors. Author Jeremiah E. Hurley, is very well known, both in Canada and internationally. In 1999 he led a team that produced a special program for the World Bank Institute, Washington D.C. Thousands of individuals from around the world have followed this evidence-based and case-oriented program either at Washington offices or at regional partnerships around the globe. Jeremiah Hurley is also a contributor to the prestigious Handbook of Health Economics edited by Culyer and Newhouse.

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.

The Elgar Companion to Health Economics Andrew M. Jones 2012 The Elgar Companion to Health Economics is a comprehensive and accessible look at the field, as seen by its leading figures. Edited by Joseph Newhouse, Harvard Medical School, US Acclaim for the first edition: This 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 Ð Sukhan Jackson, *Economic Analysis and Policy* Ô This 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 Ð 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.

The Relationship Between Health Care Need and Standardized Mortality Ratios in Ontario [electronic Resource] Hurley, Jeremiah E 2002

Public Health, Ethics, and Equity Sudhir Anand 2004-12-09 In the last fifty years, average overall health status has increased more or less in parallel with a much celebrated decline in mortality, attributed mostly to poverty reduction, sanitation, nutrition, housing, immunization, and improved medical care. It is becoming increasingly clear, however, that these achievements were not equally distributed. In most countries, while some social groups have benefited significantly, the situation of others has stagnated or may even have worsened. If health is a prerequisite to a person functioning as an agent, inequalities in health constitute inequalities in people's capability to function — a denial of equality of opportunity. So why should a concern with health equity be singled out from the pursuit of social justice more generally?

Can existing theories of justice provide an adequate account of health equity? And what ethical problems arise in evaluating health inequalities? These are some of the important questions that this book addresses in building an interdisciplinary understanding of health equity. With contributions from distinguished philosophers, anthropologists, economists, and public-health specialists, it centres on five major themes: what is health equity?; health equity and social justice; responsibilities for health; ethical issues in health evaluation; and anthropological perspectives.

Is Small Really Beautiful? : Thoughts on the 1995 Federal Budget Hurley, Jeremiah E 1995