

Life And Health Insurance Exam Study Guide

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What Is Health Insurance (Good) For? The Theory of Social Health Insurance
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Canadian Life and Health Insurance Facts
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The Guide to Buying Health Insurance, and Health Care
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Hospital Costs and Health Insurance
A Shopper's Guide to Life and Health Insurance for Senior Citizens
The United Auto Workers and the Campaign for National Health Insurance
Measurement and Explanation of Inequality in Health and Health Care in Low-income Settings
Health care and health delivery in a complex society: the issues beyond the hospital
Digital Health Care in Taiwan
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this book uses a revised version of kingdon s multiple streams framework to examine health financing reforms in china hong kong taiwan and the republic of korea
as well as long term care insurance Itci reforms in japan and singapore it shows that the explanatory power of the multiple streams framework can be strengthened through enriching the concepts of policy entrepreneurs ideas and windows of opportunity in the original framework as well as bringing the theoretical lens of historical institutionalism into the framework

this informative volume synthesizes the literatures on health economics risk management and health services into a concise guide to the financial and social basics of health insurance with an eye to its wide scale upgrade its scope takes in concepts of health capital strengths and limitations of insurance models the effectiveness of coverage and services and the roles of healthcare providers and government agencies in the equation coverage surveys the current state of group and public policies most notably the effects of the affordable care act on insurers and consumers and the current interest in universal coverage and single payer plans throughout the author provides systemic reasons to explain why today s health insurance fails so many consumers concluding with reality based recommendations for making insurance more valuable to both today s market and consumer well being included among the topics defining health insurance and healthcare finance consuming and investing in health the scope of health insurance and its constraints matching health insurance supply and demand the role of government in health insurance ongoing challenges and the future of health insurance bringing a needed degree of objectivity to often highly subjective material what is health insurance good for is a call to reform to be read by health insurance researchers including risk management insurance and health services research professionals practitioners and policymakers

the theory of social health insurance develops the theory of social health insurance also known as public health insurance while a good deal is known about the demand and supply of private insurance the theoretical basis of social health insurance is much more fragile the theory of social health insurance examines questions including why does social health insurance exist and even dominate private health insurance in most developed countries what are the objectives and constraints of social health insurance managers what is the likely outcome or performance of social health insurance the theory of social health insurance reviews the conventional theory of demand for insurance and health insurance the supply of health insurance in general and social health insurance in particular the properties of the optimal health insurance contract and whether there are factors limiting the growth of social health insurance

this volume presents findings of a world bank review of the existing and potential role of private voluntary health insurance in low and middle income countries and is the third volume in a series of reviews of health care financing also this volume is about managing risk not the risk of national or man made disasters but the risk of illness the developing world is plagued by many of the historical scourges of poverty infectious disease disability and premature death as countries pass through demographic and epidemiological transition they face a new wave of health challenges from chronic diseases and accidents in this respect illness has both a predictable and an unpredictable dimension contributors to this volume emphasize that the public sector has an important role to play in the health sector but they demonstrate that the private sector also plays a role in a context in which private spending and delivery of health services often composes 80 percent of total health expenditure managing risks in the private sector begins at the household level private voluntary health insurance is merely an extension of such nongovernmental ways to deal with the risk of illness and its impoverishing effects in low and middle income countries the authors examine frameworks for analyzing health financing and health insurance they conclude that most studies are hampered by lack of data on the impact of private voluntary health insurance on broad social goals such as financial protection they find no overall consensus on the impact of voluntary health insurance on public health activities or on the quality innovation and efficiency of personal health services

financial markets actors institutions and technologies are increasingly determining which kinds of services and welfare are available how these are narrated and what comes to represent the common sense in the policy world and in everyday life this element problematises the rationale and operation of one such financial technology private health insurance and the industry it inhabits it offers a cross disciplinary overview of the various drivers of these markets in middle income countries and their appeal for development institutions and for governments using a range of illustrative case examples and drawing on critical scholarship it considers how new markets are pursued and how states are entangled with market development it reflects on how the private health insurance sector in turn is shaping and segmenting health systems and also our ideas about rights fairness and responsibility

this book discusses how the current health insurance market structure affects the two policy goals of expanding health insurance coverage and containing health care costs concerns about concentration in health insurance markets are linked to wider concerns about the cost quality and availability of health care the market structure of the health insurance and hospital industries may have contributed to rising health care costs and deteriorating access to affordable health insurance and health care many features of the health insurance market and the ways it links to other parts of the health care system can hinder competition lead to concentrated markets and produce inefficient outcomes

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the health insurance industry has changed gone are the days when you paid your premium and your plan picked up the tab for all your health care nowadays the average deductible is over 2 000 which means that you will have to pay for most if not all of your health care in any given year even worse are the dirty marketing tricks used to sell health insurance you can spend thousands of dollars a year on a policy that you ll most likely never use or you can spend even more to get a lower deductible that only gives you the illusion of better coverage in this book physician and licensed health insurance agent dr kevin wacasey shows you how to save money on health insurance and health care first he cuts through the complexity of buying health insurance by proving that upgraded plans with supposedly better coverage often end up costing more than you could ever save next dr wacasey takes the reader along as he shops for a health insurance plan then using a simple formula to compare ten different scenarios pulled straight from healthcare gov dr wacasey demonstrates that in all ten cases the bronze plan will end up saving the consumer the most money both in sickness and in health finally dr wacasey reveals how much health care goods and services really cost and offers tips on how patients can save money on everything from ambulances to operations individuals business owners and anyone else who has to pay for health insurance or for health care will find dr wacasey s book invaluable as he shows how to save lots of money yet receive better care than ever before in the first consumer driven health care system the u s has ever known

this book explores three aspects of the health insurance market for small firms the economic underpinnings of purchasing difficulties and policy implications the politics of change and health plan choice behaviour

china's current social medical insurance system has nominally covered more than 95 per cent of 1.4 billion population in china and is moving towards the ambitious goal of universal health insurance coverage. challenges posed by a rapidly ageing population, an inherently discriminatory design of the health insurance system, the disorder of drug distribution system and an immature legal system constrain the chinese government from realizing its goal of universal health insurance coverage. in the long run, this book uses a refined version of historical institutionalism to critically examine china's pathway to universal health insurance coverage since the mid 1980s. it pays crucial attention to the processes of transforming china's healthcare financing system into the basic social medical insurance system alongside rapid socio-economic changes. financing healthcare in china will interest researchers and government and think tank officials interested in the state of healthcare reforms in china. healthcare specialists outside of east asia may also be interested in its general study of healthcare in developing countries. scholars and students interested in the healthcare field will also find this useful.

the cost of hospital care has grown so rapidly in the past thirty years that it is threatening to bend our economy completely out of shape. a hospital bed that cost 16 per day in 1950 cost 214 per day by 1978, an increase of more than 1200 per cent. what is the cause of this fantastic inflation which has been far higher than for any other major good or service? in this pathbreaking book, martin feldstein sets forth a novel explanation, provides empirical support for it, and suggests some remedies for the problem. feldstein demonstrates a complex relationship between the growing sophistication of hospital care, physician and patient demand, third party insurance payments, and the tax treatment of insurance premiums. this, he argues, is the key to the problem. in that government policies stimulate the purchase of excessive insurance by a tax deduction and exclusion that cost the treasury about 10 billion a year to mitigate the increasingly severe burden of hospital costs, feldstein recommends that this preferential tax treatment be ended. in its place, he proposes a new national health insurance plan that would give incentives to physicians and their patients to economize on costs and at the same time provide adequate coverage for major illnesses.

this paper describes approaches to the measurement and explanation of income-related inequality and inequity in health care financing, health care utilization, and health, and considers the applicability and the feasibility of these methods in low-income countries. results from a comparative study of 14 asian countries are used to illustrate the main issues. the structure of health finance in low-income countries, in particular the heavy reliance on out-of-pocket payments, means that the equity issues in finance are quite different from those of concern in high-income countries. primary concern is not with the distribution of contributions to pre-payment mechanisms but with the deterrent effect of payments on utilization and the distribution of uninsured payment risks. measurement of inequity in utilization of health care in low-income countries is constrained by the lack of reliable measures of health that can be used to standardize abstract

this open access book introduces the national health insurance (nhi) system of taiwan with a particular emphasis on its application of digital technology to improve healthcare access and quality. the authors explicate how taiwan integrates its strong information and communications technology (ict) industry with 5g to construct an information system that facilitates medical information exchange, collects data for planning and research, refines medical claims review procedures, and even assists in fighting covid-19. taiwan's nhi, launched in 1995, is a single payer system funded primarily through payroll-based premiums. it covers all citizens and foreign residents.

with the same comprehensive benefits without the long waiting times seen in other single payer systems though premium rate adjustment and various reforms were carried out in 2010 the nhi finds itself at a crossroads over its financial stability with the advancement of technologies and an aging population it faces challenges of expanding coverage to newly developed treatments and diagnosis methods and applying the latest innovations to deliver telemedicine and more patient centered services the nhi like the national health systems of other countries also needs to address the privacy concerns of the personal health data it collects and the issues regarding opening this data for research or commercial use in this book the 12 chapters cover the history characteristics current status innovations and future reform plans of the nhi in the digital era topics explored include income strategy payment structure pursuing health equity infrastructure of the medical information system innovative applications of the medical information applications of big data and artificial intelligence digital health care in taiwan is essential reading for academic researchers and students in healthcare administration health policy health systems research and health services delivery as well as policymakers and public officials in relevant government departments it also would appeal to academics practitioners and other professionals in public health health sciences social welfare and health and biotechnology law

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