

Wynand Pmm Van De Ven

List of Publications by Year in descending order

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Version: 2024-02-01

38
papers

2,522
citations

430874

18
h-index

345221

36
g-index

38
all docs

38
docs citations

38
times ranked

1433
citing authors

#	ARTICLE	IF	CITATIONS
1	The demand for deductibles in private health insurance. <i>Journal of Econometrics</i> , 1981, 17, 229-252.	6.5	987
2	Chapter 14 Risk adjustment in competitive health plan markets. <i>Handbook of Health Economics</i> , 2000, 1, 755-845.	0.2	212
3	Universal Mandatory Health Insurance In The Netherlands: A Model For The United States?. <i>Health Affairs</i> , 2008, 27, 771-781.	5.2	190
4	Going Dutch – Managed-Competition Health Insurance in the Netherlands. <i>New England Journal of Medicine</i> , 2007, 357, 2421-2423.	27.0	148
5	Risk adjustment and risk selection on the sickness fund insurance market in five European countries. <i>Health Policy</i> , 2003, 65, 75-98.	3.0	113
6	Preconditions for efficiency and affordability in competitive healthcare markets: Are they fulfilled in Belgium, Germany, Israel, the Netherlands and Switzerland?. <i>Health Policy</i> , 2013, 109, 226-245.	3.0	113
7	Risk adjustment and risk selection in Europe: 6 years later. <i>Health Policy</i> , 2007, 83, 162-179.	3.0	98
8	Access to coverage for high-risks in a competitive individual health insurance market: via premium rate restrictions or risk-adjusted premium subsidies?. <i>Journal of Health Economics</i> , 2000, 19, 311-339.	2.7	65
9	Risk sharing as a supplement to imperfect capitation: a tradeoff between selection and efficiency. <i>Journal of Health Economics</i> , 2001, 20, 147-168.	2.7	60
10	Health as an unobservable. <i>Journal of Health Economics</i> , 1982, 1, 157-183.	2.7	55
11	Health-Adjusted Premium Subsidies In The Netherlands. <i>Health Affairs</i> , 2004, 23, 45-55.	5.2	55
12	Towards a capitation formula for competing health insurers. An empirical analysis. <i>Social Science and Medicine</i> , 1992, 34, 1035-1048.	3.8	49
13	Risk equalization in The Netherlands: an empirical evaluation. <i>Expert Review of Pharmacoeconomics and Outcomes Research</i> , 2013, 13, 829-839.	1.4	45
14	Should catastrophic risks be included in a regulated competitive health insurance market?. <i>Social Science and Medicine</i> , 1994, 39, 1459-1472.	3.8	43
15	Consumer information surplus and adverse selection in competitive health insurance markets: An empirical study. <i>Journal of Health Economics</i> , 1995, 14, 149-169.	2.7	38
16	Risk-Adjusted Capitation: Recent Experiences in the Netherlands. <i>Health Affairs</i> , 1994, 13, 120-136.	5.2	37
17	Risk adjusted premium subsidies and risk sharing: key elements of the competitive sickness fund market in the Netherlands. <i>Health Policy</i> , 2003, 65, 49-62.	3.0	27
18	Mandatory pooling as a supplement to risk-adjusted capitation payments in a competitive health insurance market. <i>Social Science and Medicine</i> , 1998, 47, 223-232.	3.8	24

#	ARTICLE	IF	CITATIONS
19	Risk equalisation in voluntary health insurance markets: A three country comparison. Health Policy, 2010, 98, 39-49.	3.0	19
20	Risk selection in a regulated health insurance market: a review of the concept, possibilities and effects. Expert Review of Pharmacoeconomics and Outcomes Research, 2013, 13, 743-752.	1.4	16
21	Health Plan Payment in the Netherlands. , 2018, , 397-429.		16
22	Ignoring small predictable profits and losses: a new approach for measuring incentives for cream skimming. Health Care Management Science, 2000, 3, 131-140.	2.6	15
23	Switching benefits and costs in competitive health insurance markets: A conceptual framework and empirical evidence from the Netherlands. Health Policy, 2015, 119, 664-671.	3.0	13
24	Risk adjustment in Europe. Health Policy, 2003, 65, 1-3.	3.0	12
25	A limited-sample benchmark approach to assess and improve the performance of risk equalization models. Journal of Health Economics, 2010, 29, 426-437.	2.7	11
26	Switching rates in health insurance markets decrease with age: empirical evidence and policy implications from the Netherlands. Health Economics, Policy and Law, 2016, 11, 141-159.	1.8	9
27	Risk Sharing Between Competing Health Plans And Sponsors. Health Affairs, 2001, 20, 253-262.	5.2	8
28	Risk-adjusted capitation payments for catastrophic risks based on multi-year prior costs. Health Policy, 1997, 39, 123-135.	3.0	6
29	Voluntary Additional Health Insurance in the European Union: Free Market or Regulation?. European Journal of Health Law, 2017, 24, 591-613.	0.2	6
30	Risk-adjusted capitation payment systems for health insurance plans in a competitive market. Expert Review of Pharmacoeconomics and Outcomes Research, 2003, 3, 541-549.	1.4	5
31	Risicoverevening tussen zorgverzekeraars: Kwantificering modelverbeteringen 1993-2011. TSG: Tijdschrift Voor Gezondheidswetenschappen, 2012, 90, 312-326.	0.1	5
32	Risk equalisation in voluntary health insurance markets. Health Policy, 2010, 98, 1-2.	3.0	4
33	Improved estimates of Belgian private health expenditure can give important lessons to other OECD countries. Health Policy, 2015, 119, 341-355.	3.0	4
34	Supplementary insurance as a switching cost for basic health insurance: Empirical results from the Netherlands. Health Policy, 2017, 121, 1085-1092.	3.0	4
35	Should new health technology be available only for patients able and willing to pay?. Journal of Market Access & Health Policy, 2017, 5, 1315294.	1.5	4
36	Consumer choice among Mutual Healthcare Purchasers: A feasible option for China?. Social Science and Medicine, 2013, 96, 277-284.	3.8	3

#	ARTICLE	IF	CITATIONS
37	Welke zorgverzekeraar? Overstapbaten en overstapkosten ontrafeld. TSG: Tijdschrift Voor Gezondheidswetenschappen, 2014, 92, 193-202.	0.1	3
38	Improving access to essential health care services: the case of Israel. Israel Journal of Health Policy Research, 2016, 5, 3.	2.6	0