Roger Feldman

List of Publications by Year in descending order

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		279487	315357
59	1,596	23	38
papers	citations	h-index	g-index
59	59	59	825
all docs	docs citations	times ranked	citing authors

#	Article	IF	CITATIONS
1	The effect of market structure on HMO premiums. Journal of Health Economics, 1995, 14, 81-105.	1.3	141
2	The Demand for Employment-Based Health Insurance Plans. Journal of Human Resources, 1989, 24, 115.	1.9	126
3	Evaluation of the Effect of a Consumer-Driven Health Plan on Medical Care Expenditures and Utilization. Health Services Research, 2004, 39, 1189-1210.	1.0	100
4	Competition Among Physicians, Revisited. Journal of Health Politics, Policy and Law, 1988, 13, 239-261.	0.9	87
5	The Effect of Benefits, Premiums, and Health Risk on Health Plan Choice in the Medicare Program. Health Services Research, 2004, 39, 847-864.	1.0	84
6	Scale and scope economies among health maintenance organizations. Journal of Health Economics, 1996, 15, 657-684.	1.3	74
7	Employee Choice of Consumer-Driven Health Insurance in a Multiplan, Multiproduct Setting. Health Services Research, 2004, 39, 1091-1112.	1.0	71
8	Where would you go for your next hospitalization?. Journal of Health Economics, 2011, 30, 832-841.	1.3	65
9	Effects of HMOs on the creation of competitive markets for hospital services. Journal of Health Economics, 1990, 9, 207-222.	1.3	53
10	The effect of quality information on consumer health plan switching: Evidence from the Buyers Health Care Action Group. Journal of Health Economics, 2006, 25, 762-781.	1.3	45
11	Consumer-Directed Health Plans: New Evidence on Spending and Utilization. Inquiry (United States), 2007, 44, 26-40.	0.5	44
12	Changes in Quality of Health Care Delivery after Vertical Integration. Health Services Research, 2015, 50, 1043-1068.	1.0	44
13	Risk segmentation: goal or problem?. Journal of Health Economics, 2000, 19, 499-512.	1.3	42
14	Association of Direct-Acting Antiviral Treatment With Mortality Among Medicare Beneficiaries With Hepatitis C. JAMA Network Open, 2020, 3, e2011055.	2.8	41
15	Early Experience With A New Model Of Employer Group Purchasing In Minnesota. Health Affairs, 1999, 18, 100-114.	2.5	34
16	Consumer Experiences in a Consumer-Driven Health Plan. Health Services Research, 2004, 39, 1123-1140.	1.0	34
17	Do Consumers Use Information to Choose a Health are Provider System?. Milbank Quarterly, 2000, 78, 47-77.	2.1	31
18	A Tale Of Four Cities: Medicare Reform And Competitive Pricing. Health Affairs, 2000, 19, 9-29.	2.5	31

#	Article	IF	CITATIONS
19	The Effect of Health Plan Characteristics on Medicare+Choice Enrollment. Health Services Research, 2003, 38, 113-135.	1.0	28
20	Effects of a Consumer Driven Health Plan on Pharmaceutical Spending and Utilization. Health Services Research, 2008, 43, 1542-1556.	1.0	28
21	Do HMOs have monopsony power?. , 2001, 1, 7-22.		26
22	The Impact of Hospital Acquisition of Physician Practices on Referral Patterns. Health Economics (United Kingdom), 2016, 25, 439-454.	0.8	25
23	Evolution In The Buyers Health Care Action Group Purchasing Initiative. Health Affairs, 2002, 21, 76-88.	2.5	24
24	Measuring consumer perceptions of quality differences among competing health benefit plans. Journal of Health Economics, 2002, 21, 1-17.	1.3	24
25	Risk selection and benefits in the Medicare+Choice program. Health Care Financing Review, 2003, 25, 23-36.	1.8	23
26	Health Economics: A Report on the Field. Journal of Health Politics, Policy and Law, 1990, 15, 627-646.	0.9	22
27	Health Savings Accounts: Early Estimates Of National Take-Up. Health Affairs, 2005, 24, 1582-1591.	2.5	20
28	Should Medicare adopt the Veterans health administration formulary?. Health Economics (United) Tj ETQq0 0	0 rgBT /Ove	rlock 10 Tf 50
29	The Effect of Tax-Exempt Out-of-Pocket Premiums on Health Plan Choice. National Tax Journal, 2001, 54, 741-756.	0.4	13
29 30		0.4	13
	741-756. Policy Watch: The Federal Employees Health Benefits Plan. Journal of Economic Perspectives, 2002, 16,		
30	Policy Watch: The Federal Employees Health Benefits Plan. Journal of Economic Perspectives, 2002, 16, 207-217. Payment policy and inefficient benefits in the Medicare+Choice program. International Journal of	2.7	12
30	Policy Watch: The Federal Employees Health Benefits Plan. Journal of Economic Perspectives, 2002, 16, 207-217. Payment policy and inefficient benefits in the Medicare+Choice program. International Journal of Health Care Finance and Economics, 2003, 3, 79-93. The Impact of Ownership Conversions on HMO Performance. International Journal of Health Care	2.7	12
30 31 32	Policy Watch: The Federal Employees Health Benefits Plan. Journal of Economic Perspectives, 2002, 16, 207-217. Payment policy and inefficient benefits in the Medicare+Choice program. International Journal of Health Care Finance and Economics, 2003, 3, 79-93. The Impact of Ownership Conversions on HMO Performance. International Journal of Health Care Finance and Economics, 2004, 4, 327-342. Racial/Ethnic and Socioeconomic Disparities in Use of Direct-Acting Antivirals Among Medicare Beneficiaries with Chronic Hepatitis C, 2014-2016. Journal of Managed Care & Care Service Services (2004).	2.7 1.2 1.2	12 12 12
30 31 32 33	Policy Watch: The Federal Employees Health Benefits Plan. Journal of Economic Perspectives, 2002, 16, 207-217. Payment policy and inefficient benefits in the Medicare+Choice program. International Journal of Health Care Finance and Economics, 2003, 3, 79-93. The Impact of Ownership Conversions on HMO Performance. International Journal of Health Care Finance and Economics, 2004, 4, 327-342. Racial/Ethnic and Socioeconomic Disparities in Use of Direct-Acting Antivirals Among Medicare Beneficiaries with Chronic Hepatitis C, 2014-2016. Journal of Managed Care & Direct-Acting Pharmacy, 2019, 25, 1236-1242. Association of the Extension for Community Healthcare Outcomes Project With Use of Direct-Acting	2.7 1.2 1.2	12 12 12

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37	Employers' Changing Economic Incentives to Offer Health Insurance under the Affordable Care Act. American Journal of Health Economics, 2016, 2, 273-299.	1.4	10
38	The effect of mergers on firms' costs: evidence from the HMO industry. Quarterly Review of Economics and Finance, 2004, 44, 574-600.	1.5	9
39	Nash bargaining model of HMO premiums. Applied Economics, 2004, 36, 1329-1336.	1.2	8
40	Microsimulation of Private Health Insurance and Medicaid Take-Up Following the U.S. Supreme Court Decision Upholding the Affordable Care Act. Health Services Research, 2013, 48, 826-849.	1.0	8
41	Measuring resource use in Medicare Advantage using Encounter data. Health Services Research, 2022, 57, 172-181.	1.0	8
42	Implementation of resource use measures in Medicare Advantage. Health Services Research, 2022, 57, 957-962.	1.0	8
43	Nothing for something? Estimating cost and value for beneficiaries from recent medicare spending increases on HMO payments and drug benefits. International Journal of Health Care Finance and Economics, 2009, 9, 59-81.	1.2	7
44	Why Do Employers Self-insure? New Explanations for the Choice of Self-insurance vs. Purchased Health Insurance. Geneva Papers on Risk and Insurance: Issues and Practice, 2012, 37, 696-711.	1.1	7
45	Disruption of a Managed Competition Environment by Low-Ball Premium Bids. North American Actuarial Journal, 2004, 8, 45-55.	0.8	6
46	Consumer-Directed Health Plans and the Chronically Ill. Disease Management and Health Outcomes, 2007, 15, 239-248.	0.3	6
47	Selection Bias and Utilization of the Dual Eligibles in Medicare and Medicaid HMOs. Health Services Research, 2008, 43, 1598-1618.	1.0	6
48	Association of Direct-Acting Antiviral Therapy for Hepatitis C With After-Treatment Costs Among Medicare Beneficiaries. JAMA Network Open, 2020, 3, e208081.	2.8	6
49	Wage Growth for the Health Care Workforce: Projecting the Affordable Care Act Impact. Health Services Research, 2017, 52, 741-762.	1.0	5
50	Disparities in the quality of care for chronic hepatitis C among Medicare beneficiaries. PLoS ONE, 2022, 17, e0263913.	1.1	4
51	Growing Reinsurance Payments Weaken Competitive Bidding in Medicare Part D. Health Services Research, 2018, 53, 4371-4380.	1.0	3
52	Use of Direct-Acting Antiviral Agents and Survival Among Medicare Beneficiaries with Dementia and Chronic Hepatitis C. Journal of Alzheimer's Disease, 2021, 79, 71-83.	1.2	3
53	The Check is in the Mail: Determinants of Claims Payable Timing among Health Maintenance Organizations. Inquiry (United States), 2004, 41, 70-82.	0.5	2
54	Consumer Knowledge of the Impact of a Change in Prescription Drug Benefit Design. Disease Management and Health Outcomes, 2005, 13, 413-420.	0.3	2

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55	Commentary: What Is the Right Price in Discrete Choice Models of Health Plan Choice?. Health Services Research, 2007, 42, 2224-2229.	1.0	2
56	3Do HSA Choices Interact with Retirement Savings Decisions?. Tax Policy and the Economy, 2008, 22, 81-108.	0.3	1
57	Evolution and early evidence of the impact of consumer-driven health plans: from e-commerce venture to health savings accounts. Expert Review of Pharmacoeconomics and Outcomes Research, 2008, 8, 343-348.	0.7	1
58	Testing the Hirshleifer–Riley Model: The Values of Information Sources for a Future Hospital Stay. Journal of Consumer Policy, 2012, 35, 355-371.	0.6	1
59	Comparing Measures of Physician Market Concentration Using Tax Identification Numbers Versus Independent Negotiating Units. Antitrust Bulletin, 2019, 64, 128-135.	0.4	1