

Ariel Linden

List of Publications by Year in descending order

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83
papers

3,456
citations

159585

30
h-index

155660

55
g-index

84
all docs

84
docs citations

84
times ranked

4105
citing authors

#	ARTICLE	IF	CITATIONS
1	Association of Primary Care Engagement in Value-Based Reform Programs With Health Services Outcomes. <i>JAMA Health Forum</i> , 2022, 3, e220005.	2.2	3
2	A regression-with-residuals method for analyzing causal mediation: The rwrmed package. <i>The Stata Journal</i> , 2021, 21, 559-574.	2.2	1
3	Using randomization tests to assess treatment effects in multiple-group interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2019, 25, 5-10.	1.8	4
4	Now trending: Coping with non-parallel trends in difference-in-differences analysis. <i>Statistical Methods in Medical Research</i> , 2019, 28, 3697-3711.	1.5	85
5	Using permutation tests to enhance causal inference in interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 496-501.	1.8	6
6	Identifying causal mechanisms in health care interventions using classification tree analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 353-361.	1.8	9
7	Combining synthetic controls and interrupted time series analysis to improve causal inference in program evaluation. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 447-453.	1.8	28
8	A matching framework to improve causal inference in interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 408-415.	1.8	31
9	Estimating causal effects for survival (time-to-event) outcomes by combining classification tree analysis and propensity score weighting. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 380-387.	1.8	7
10	Using machine learning to evaluate treatment effects in multiple-group interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 740-744.	1.8	8
11	Using forecast modelling to evaluate treatment effects in single-group interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 695-700.	1.8	16
12	Using group-based trajectory modelling to enhance causal inference in interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2018, 24, 502-507.	1.8	10
13	A comparison of approaches for stratifying on the propensity score to reduce bias. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 690-696.	1.8	15
14	Improving causal inference with a doubly robust estimator that combines propensity score stratification and weighting. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 697-702.	1.8	35
15	Challenges to validity in single-group interrupted time series analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 413-418.	1.8	63
16	Using classification tree analysis to generate propensity score weights. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 703-712.	1.8	16
17	Modeling time-to-event (survival) data using classification tree analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 1299-1308.	1.8	47
18	Minimizing imbalances on patient characteristics between treatment groups in randomized trials using classification tree analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 1309-1315.	1.8	2

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19	Persistent threats to validity in single-group interrupted time series analysis with a cross over design. <i>Journal of Evaluation in Clinical Practice</i> , 2017, 23, 419-425.	1.8	11
20	A Comprehensive set of Postestimation Measures to Enrich Interrupted Time-series Analysis. <i>The Stata Journal</i> , 2017, 17, 73-88.	2.2	81
21	Using machine learning to model dose-response relationships. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 860-867.	1.8	23
22	Using machine learning to assess covariate balance in matching studies. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 848-854.	1.8	21
23	Using machine learning to identify structural breaks in single-group interrupted time series designs. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 855-859.	1.8	24
24	Combining machine learning and matching techniques to improve causal inference in program evaluation. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 868-874.	1.8	13
25	Combining machine learning and propensity score weighting to estimate causal effects in multivalued treatments. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 875-885.	1.8	22
26	Estimating causal effects for multivalued treatments: a comparison of approaches. <i>Statistics in Medicine</i> , 2016, 35, 534-552.	1.6	94
27	Using data mining techniques to characterize participation in observational studies. <i>Journal of Evaluation in Clinical Practice</i> , 2016, 22, 839-847.	1.8	32
28	Graphical displays for assessing covariate balance in matching studies. <i>Journal of Evaluation in Clinical Practice</i> , 2015, 21, 242-247.	1.8	15
29	Estimating Measurement Error of the Patient Activation Measure for Respondents with Partially Missing Data. <i>BioMed Research International</i> , 2015, 2015, 1-7.	1.9	6
30	Conducting Interrupted Time-series Analysis for Single- and Multiple-group Comparisons. <i>The Stata Journal</i> , 2015, 15, 480-500.	2.2	749
31	Combining propensity score-based stratification and weighting to improve causal inference in the evaluation of health care interventions. <i>Journal of Evaluation in Clinical Practice</i> , 2014, 20, 1065-1071.	1.8	56
32	A comprehensive hospital-based intervention to reduce readmissions for chronically ill patients: a randomized controlled trial. <i>American Journal of Managed Care</i> , 2014, 20, 783-92.	1.1	41
33	Estimating measurement error when annualizing health care costs. <i>Journal of Evaluation in Clinical Practice</i> , 2013, 19, 933-937.	1.8	3
34	Advancing current approaches to disease management evaluation: capitalizing on heterogeneity to understand what works and for whom. <i>BMC Medical Research Methodology</i> , 2013, 13, 40.	3.1	6
35	Assessing regression to the mean effects in health care initiatives. <i>BMC Medical Research Methodology</i> , 2013, 13, 119.	3.1	134
36	Using mediation analysis to identify causal mechanisms in disease management interventions. <i>Health Services and Outcomes Research Methodology</i> , 2013, 13, 86-108.	1.8	35

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37	Using balance statistics to determine the optimal number of controls in matching studies. <i>Journal of Evaluation in Clinical Practice</i> , 2013, 19, 968-975.	1.8	120
38	Combining the regression discontinuity design and propensity score-based weighting to improve causal inference in program evaluation. <i>Journal of Evaluation in Clinical Practice</i> , 2012, 18, 317-325.	1.8	37
39	Designing a Prospective Study When Randomization is Not Feasible. <i>Evaluation and the Health Professions</i> , 2011, 34, 164-180.	1.9	6
40	Applying a propensity score-based weighting model to interrupted time series data: improving causal inference in programme evaluation. <i>Journal of Evaluation in Clinical Practice</i> , 2011, 17, 1231-1238.	1.8	157
41	Identifying spin in health management evaluations. <i>Journal of Evaluation in Clinical Practice</i> , 2011, 17, 1223-1230.	1.8	14
42	Using propensity score-based weighting in the evaluation of health management programme effectiveness. <i>Journal of Evaluation in Clinical Practice</i> , 2010, 16, 175-179.	1.8	56
43	Motivational interviewing-based health coaching as a chronic care intervention. <i>Journal of Evaluation in Clinical Practice</i> , 2010, 16, 166-174.	1.8	148
44	Evaluating health management programmes over time: application of propensity score-based weighting to longitudinal data. <i>Journal of Evaluation in Clinical Practice</i> , 2010, 16, 180-185.	1.8	40
45	Help patients with chronic kidney disease stave off dialysis. <i>Journal of Family Practice</i> , 2010, 59, 212-9.	0.2	2
46	Use of an algorithm applied to urine drug screening to assess adherence to an OxyContin® regimen. <i>Journal of Opioid Management</i> , 2009, 5, 359-364.	0.5	15
47	The Use and Evaluations of IT in Chronic Disease Management. , 2009, , 1-18.		0
48	Improving participant selection in disease management programmes: insights gained from propensity score stratification. <i>Journal of Evaluation in Clinical Practice</i> , 2008, 14, 914-918.	1.8	10
49	Disease Management in Chronic Kidney Disease. <i>Advances in Chronic Kidney Disease</i> , 2008, 15, 19-28.	1.4	37
50	Sample Size in Disease Management Program Evaluation: The Challenge of Demonstrating a Statistically Significant Reduction in Admissions. <i>Disease Management: DM</i> , 2008, 11, 95-101.	1.0	2
51	Medicare disease management in policy context. <i>Health Care Financing Review</i> , 2008, 29, 1-11.	1.8	19
52	A Conceptual Framework for Targeting Prediabetes with Lifestyle, Clinical, And Behavioral Management Interventions. <i>Disease Management: DM</i> , 2007, 10, 6-15.	1.0	20
53	Evaluation of a Medicaid Asthma Disease Management Program. <i>Disease Management: DM</i> , 2007, 10, 266-272.	1.0	8
54	Health Coaching as an Intervention in Health Management Programs. <i>Disease Management and Health Outcomes</i> , 2007, 15, 299-307.	0.4	51

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55	Consensus Development and Application of ICD-9-CM Codes for Defining Chronic Illnesses and their Complications. <i>Disease Management and Health Outcomes</i> , 2007, 15, 315-322.	0.4	9
56	Estimating the Effect of Regression to the Mean in Health Management Programs. <i>Disease Management and Health Outcomes</i> , 2007, 15, 7-12.	0.4	38
57	Use of the Pre-Post Method to Measure Cost Savings in Disease Management. <i>Disease Management and Health Outcomes</i> , 2007, 15, 13-18.	0.4	6
58	Determining if disease management saves money: an introduction to meta-analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2007, 13, 400-407.	1.8	10
59	The caseâ€™mix of chronic illness hospitalization rates in a managed care population: implications for health management programmes. <i>Journal of Evaluation in Clinical Practice</i> , 2007, 13, 947-951.	1.8	4
60	In Search of Financial Savings from Disease Management. <i>Disease Management and Health Outcomes</i> , 2006, 14, 197-202.	0.4	6
61	Disease Management Interventions II: What Else Is in the Black Box?. <i>Disease Management: DM</i> , 2006, 9, 73-85.	1.0	29
62	Effect of motivational interviewing-based health coaching on employees' physical and mental health status.. <i>Journal of Occupational Health Psychology</i> , 2006, 11, 358-365.	3.3	94
63	Evaluating disease management programme effectiveness: an introduction to the regression discontinuity design. <i>Journal of Evaluation in Clinical Practice</i> , 2006, 12, 124-131.	1.8	48
64	Measuring diagnostic and predictive accuracy in disease management: an introduction to receiver operating characteristic (ROC) analysis. <i>Journal of Evaluation in Clinical Practice</i> , 2006, 12, 132-139.	1.8	348
65	Strengthening the case for disease management effectiveness: un-hiding the hidden bias. <i>Journal of Evaluation in Clinical Practice</i> , 2006, 12, 140-147.	1.8	31
66	Evaluating disease management programme effectiveness: an introduction to instrumental variables. <i>Journal of Evaluation in Clinical Practice</i> , 2006, 12, 148-154.	1.8	31
67	Evaluating Program Effectiveness Using the Regression Point Displacement Design. <i>Evaluation and the Health Professions</i> , 2006, 29, 407-423.	1.9	17
68	Evaluating the Effectiveness of Home Health as a Disease Management Strategy. <i>Home Health Care Management and Practice</i> , 2006, 18, 216-222.	1.0	1
69	POTENTIAL BIAS IN "CONTROLS" USED IN A HEART FAILURE DISEASE-MANAGEMENT PROGRAM. <i>Journal of the American Geriatrics Society</i> , 2005, 53, 1268-1269.	2.6	0
70	Letter Regarding Article by Galbreath et al, "Long-Term Healthcare and Cost Outcomes of Disease Management in a Large, Randomized, Community-Based Population With Heart Failure". <i>Circulation</i> , 2005, 112, e11; author reply e11.	1.6	11
71	Using Visual Displays as a Tool to Demonstrate Disease Management Program Effectiveness. <i>Disease Management: DM</i> , 2005, 8, 301-310.	1.0	1
72	Disease Management's Economic Impact: Unproven?. <i>Health Affairs</i> , 2005, 24, 566-567.	5.2	4

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73	Evaluating Disease Management Program Effectiveness. Disease Management and Health Outcomes, 2005, 13, 159-167.	0.4	33
74	Using Propensity Scores to Construct Comparable Control Groups for Disease Management Program Evaluation. Disease Management and Health Outcomes, 2005, 13, 107-115.	0.4	46
75	Care Management for Heart Failure. Annals of Internal Medicine, 2005, 142, 386.	3.9	2
76	Disease Management Interventions: What's in the Black Box?. Disease Management: DM, 2004, 7, 275-291.	1.0	28
77	Evaluating Disease Management Program Effectiveness: An Introduction to Survival Analysis. Disease Management: DM, 2004, 7, 180-190.	1.0	33
78	Measuring Diabetes Management. Health Affairs, 2004, 23, 277-278.	5.2	2
79	Using an Empirical Method for Establishing Clinical Outcome Targets in Disease Management Programs. Disease Management: DM, 2004, 7, 93-101.	1.0	10
80	Generalizing disease management program results: how to get from here to there. Managed Care Interface, 2004, 17, 38-45.	0.2	2
81	The Complete "How to" Guide for Selecting a Disease Management Vendor. Disease Management: DM, 2003, 6, 21-26.	1.0	3
82	Evaluating Disease Management Program Effectiveness: An Introduction to Time-Series Analysis. Disease Management: DM, 2003, 6, 243-255.	1.0	55
83	An Assessment of the Total Population Approach for Evaluating Disease Management Program Effectiveness. Disease Management: DM, 2003, 6, 93-102.	1.0	47