

# Bryan E Dowd

## List of Publications by Year in descending order

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Version: 2024-02-01

67  
papers

2,194  
citations

430874

18  
h-index

233421

45  
g-index

67  
all docs

67  
docs citations

67  
times ranked

2669  
citing authors

#	ARTICLE	IF	CITATIONS
1	Instrumental Variables and Heterogeneous Treatment Effects. JAMA - Journal of the American Medical Association, 2022, 327, 1177.	7.4	3
2	Physician variation in the deâ€œadoption of ineffective statin and fibrate therapy. Health Services Research, 2021, 56, 919-931.	2.0	6
3	Tiered Cost-Sharing for Primary Care Gatekeeper Clinics. American Journal of Health Economics, 2021, 7, 306-332.	3.0	6
4	Return to work after deceased donor kidney transplant under the kidney allocation system. Clinical Transplantation, 2021, 35, e14444.	1.6	0
5	Feeâ€œforâ€œservice payment is not the (main) problem. Health Services Research, 2020, 55, 491-495.	2.0	7
6	Patient and provider-level factors associated with changes in utilization of treatments in response to evidence on ineffectiveness or harm. International Journal of Health Economics and Management, 2020, 20, 299-317.	1.1	4
7	Switching Costs in Medicare Advantage. Forum for Health Economics and Policy, 2020, 23, .	0.8	3
8	Comparing Measures of Physician Market Concentration Using Tax Identification Numbers Versus Independent Negotiating Units. Antitrust Bulletin, 2019, 64, 128-135.	0.6	1
9	Marginal Effectsâ€œQuantifying the Effect of Changes in Risk Factors in Logistic Regression Models. JAMA - Journal of the American Medical Association, 2019, 321, 1304.	7.4	241
10	Cost-Effectiveness Analysis in the Context of US Commercial Health Insurance. Pharmacoeconomics, 2019, 37, 743-744.	3.3	2
11	Health Care Service Use Among Elderly Seasonal Migrators. Population Health Management, 2018, 21, 415-421.	1.7	1
12	Decomposition of moral hazard. Journal of Health Economics, 2018, 57, 168-178.	2.7	10
13	Log Odds and the Interpretation of Logit Models. Health Services Research, 2018, 53, 859-878.	2.0	157
14	Odds Ratios vs Risk Ratiosâ€œReply. JAMA - Journal of the American Medical Association, 2018, 320, 2041.	7.4	0
15	Odds Ratiosâ€œCurrent Best Practice and Use. JAMA - Journal of the American Medical Association, 2018, 320, 84.	7.4	152
16	Narrow provider networks and willingness to pay for continuity of care and network breadth. Journal of Health Economics, 2018, 60, 90-97.	2.7	10
17	Wage Growth for the Health Care Workforce: Projecting the Affordable Care Act Impact. Health Services Research, 2017, 52, 741-762.	2.0	5
18	Effects of cognition, function, and behavioral and psychological symptoms on outâ€œofâ€œpocket medical and nursing home expenditures and time spent caregiving for persons with dementia. Alzheimer's and Dementia, 2017, 13, 801-809.	0.8	34

#	ARTICLE	IF	CITATIONS
19	The impact of provider consolidation on physician prices. <i>Health Economics (United Kingdom)</i> , 2017, 26, 1789-1806.	1.7	15
20	Impact of a workplace physical activity tracking program on biometric health outcomes. <i>Preventive Medicine</i> , 2017, 105, 135-141.	3.4	13
21	Societal and Family Lifetime Cost of Dementia: Implications for Policy. <i>Journal of the American Geriatrics Society</i> , 2017, 65, 2169-2175.	2.6	113
22	The Transition of Primary Care Group Practices to Next Generation Models: Satisfaction of Staff, Clinicians, and Patients. <i>Journal of the American Board of Family Medicine</i> , 2017, 30, 16-24.	1.5	7
23	The role of medical group practice administrators in the adoption and implementation of Medicare's physician quality reporting system. <i>Health Care Management Review</i> , 2016, 41, 145-154.	1.4	4
24	Response to "Inference Using Sample Means of Parametric Nonlinear Data Transformations". <i>Health Services Research</i> , 2016, 51, 1114-1116.	2.0	1
25	Understanding Treatment Effect Terminology in Pain and Symptom Management Research. <i>Journal of Pain and Symptom Management</i> , 2016, 52, 446-452.	1.2	5
26	Estimating True Resource Costs of Outpatient Care for Medicare Beneficiaries: Standardized Costs versus Medicare Payments and Charges. <i>Health Services Research</i> , 2016, 51, 205-219.	2.0	17
27	Validation of an algorithm to determine the primary care treatability of emergency department visits. <i>BMJ Open</i> , 2016, 6, e011739.	1.9	19
28	The Impact of Hospital Acquisition of Physician Practices on Referral Patterns. <i>Health Economics (United Kingdom)</i> , 2016, 25, 439-454.	1.7	25
29	PQRS Participation, Inappropriate Utilization of Health Care Services, and Medicare Expenditures. <i>Medical Care Research and Review</i> , 2016, 73, 106-123.	2.1	9
30	Medicaid Expansions and Crowd-Out: Evidence from HIFA Premium Assistance Programs. <i>Health Services Research</i> , 2016, 51, 117-128.	2.0	8
31	Lessons from state mandates of preventive cancer screenings. <i>European Journal of Health Economics</i> , 2016, 17, 203-215.	2.8	5
32	The Relationships of Physician Practice Characteristics to Quality of Care and Costs. <i>Health Services Research</i> , 2015, 50, 710-729.	2.0	22
33	Changes in Quality of Health Care Delivery after Vertical Integration. <i>Health Services Research</i> , 2015, 50, 1043-1068.	2.0	44
34	CAN DATA ENVELOPMENT ANALYSIS PROVIDE A SCALAR INDEX OF "VALUE"? <i>Health Economics (United Kingdom)</i> , 2014, 23, 100-109.	1.7	19
35	Computation of Standard Errors. <i>Health Services Research</i> , 2014, 49, 731-750.	2.0	69
36	Emergency Department Utilization as a Measure of Physician Performance. <i>American Journal of Medical Quality</i> , 2014, 29, 135-143.	0.5	42

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37	Medicare's Physician Quality Reporting Beneficiary Attribution. Medicare & Medicaid Research Review, 2014, 4, E1-E14.	1.3	19
38	SETTING PAY FOR PERFORMANCE TARGETS: DO POOR PERFORMERS GIVE UP?. Health Economics (United Kingdom), 2010, 30, 107-120.	1.7	6
39	Linear Regression Metamodeling as a Tool to Summarize and Present Simulation Model Results. Medical Decision Making, 2013, 33, 880-890.	2.4	40
40	Value-based purchasing for physician services. Minnesota Medicine, 2013, 96, 43-5.	0.1	0
41	Interaction Terms in Nonlinear Models. Health Services Research, 2012, 47, 255-274.	2.0	543
42	Introducing the Methods Corner. Health Services Research, 2012, 47, 1-2.	2.0	4
43	Separated at Birth: Statisticians, Social Scientists, and Causality in Health Services Research. Health Services Research, 2011, 46, 397-420.	2.0	24
44	Health plan enrollment and mortality in the Medicare program. Health Economics (United Kingdom), 2011, 20, 645-659.	1.7	11
45	The Economic Impact of a Disability Prevention Program. Journal of Occupational and Environmental Medicine, 2010, 52, 15-21.	1.7	7
46	Is patient satisfaction influenced by the intensity of medical resource use by their physicians?. American Journal of Managed Care, 2009, 15, e16-21.	1.1	8
47	Fearing and then fixing health care in the United States. Minnesota Medicine, 2009, 92, 32-3.	0.1	0
48	Selection Bias and Utilization of the Dual Eligibles in Medicare and Medicaid HMOs. Health Services Research, 2008, 43, 1598-1618.	2.0	6
49	Medicare Advantage Plans At A Crossroads—Yet Again. Health Affairs, 2008, 27, w29-w40.	5.2	17
50	Setting physicians' prices in FFS medicare: an economic perspective. Health Care Financing Review, 2006, 28, 97-111.	1.8	5
51	Coordinated Agency Versus Autonomous Consumers In Health Services Markets. Health Affairs, 2005, 24, 1501-1511.	5.2	3
52	Fee-for-service Medicare in a competitive market environment. Health Care Financing Review, 2005, 27, 113-26.	1.8	3
53	Disruption of a Managed Competition Environment by Low-Ball Premium Bids. North American Actuarial Journal, 2004, 8, 45-55.	1.4	6
54	The Problem Of Multiple Margins. Health Affairs, 2004, 23, VAR-112-VAR-116.	5.2	3

#	ARTICLE	IF	CITATIONS
55	Having It All: National Benefit Equity And Local Payment Parity In Medicare. Health Affairs, 2002, 21, 208-214.	5.2	1
56	The Minnesota Health Partnership and Coordinated Health Care and Disability Prevention: the implementation of an integrated benefits and medical care model. Journal of Occupational Rehabilitation, 2002, 12, 43-54.	2.2	8
57	More On Medicare Competitive Pricing. Health Affairs, 2001, 20, 306-308.	5.2	4
58	The Effect of Tax-Exempt Out-of-Pocket Premiums on Health Plan Choice. National Tax Journal, 2001, 54, 741-756.	1.2	13
59	A Tale Of Four Cities: Medicare Reform And Competitive Pricing. Health Affairs, 2000, 19, 9-29.	5.2	31
60	Risk segmentation: goal or problem?. Journal of Health Economics, 2000, 19, 499-512.	2.7	42
61	The Impact of Intern Workload on Length of Hospital Stay for Elderly Patients. Gerontology and Geriatrics Education, 1994, 14, 33-41.	0.8	7
62	Residency reform and health care research. Journal of General Internal Medicine, 1993, 8, 165-167.	2.6	2
63	Screening Elders for Risk of Hospital Admission. Journal of the American Geriatrics Society, 1993, 41, 811-817.	2.6	277
64	Must adverse selection cause premium spirals?. Journal of Health Economics, 1991, 10, 349-357.	2.7	23
65	A Checklist To Assess the Need for Home Health Care: Instrument Development and Validation. Public Health Nursing, 1987, 4, 212-218.	1.5	9
66	Designing a Mixed Public and Private System for the Health Insurance Market. SSRN Electronic Journal, 0, , .	0.4	0
67	Medicare's Role in Determining Prices Throughout the Health Care System. SSRN Electronic Journal, 0, , .	0.4	2