

# Meredith B Rosenthal

## List of Publications by Year in descending order

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181  
papers

9,514  
citations

47006

47  
h-index

42399

92  
g-index

184  
all docs

184  
docs citations

184  
times ranked

7813  
citing authors

#	ARTICLE	IF	CITATIONS
1	Early Experience With Pay-for-Performance. JAMA - Journal of the American Medical Association, 2005, 294, 1788-93.	7.4	537
2	A Decade of Direct-to-Consumer Advertising of Prescription Drugs. New England Journal of Medicine, 2007, 357, 673-681.	27.0	443
3	Promotion of Prescription Drugs to Consumers. New England Journal of Medicine, 2002, 346, 498-505.	27.0	384
4	Systematic review: Effects, design choices, and context of pay-for-performance in health care. BMC Health Services Research, 2010, 10, 247.	2.2	384
5	Paying For Quality: Providers' Incentives For Quality Improvement. Health Affairs, 2004, 23, 127-141.	5.2	336
6	Pay for Performance in Commercial HMOs. New England Journal of Medicine, 2006, 355, 1895-1902.	27.0	317
7	Nonpayment for Performance? Medicare's New Reimbursement Rule. New England Journal of Medicine, 2007, 357, 1573-1575.	27.0	287
8	Defining and Measuring Integrated Patient Care: Promoting the Next Frontier in Health Care Delivery. Medical Care Research and Review, 2011, 68, 112-127.	2.1	279
9	What Is the Empirical Basis for Paying for Quality in Health Care?. Medical Care Research and Review, 2006, 63, 135-157.	2.1	271
10	Association Between Participation in a Multipayer Medical Home Intervention and Changes in Quality, Utilization, and Costs of Care. JAMA - Journal of the American Medical Association, 2014, 311, 815.	7.4	270
11	Pay-for-Performance. JAMA - Journal of the American Medical Association, 2007, 297, 740.	7.4	251
12	Choosing Wisely " The Politics and Economics of Labeling Low-Value Services. New England Journal of Medicine, 2014, 370, 589-592.	27.0	227
13	Lever for addressing medical underuse and overuse: achieving high-value health care. Lancet, The, 2017, 390, 191-202.	13.7	207
14	Choosing Wisely: Prevalence and Correlates of Low-Value Health Care Services in the United States. Journal of General Internal Medicine, 2015, 30, 221-228.	2.6	206
15	The Geographic Distribution of Physicians Revisited. Health Services Research, 2005, 40, 1931-1952.	2.0	171
16	Using Behavioral Economics to Design Physician Incentives That Deliver High-Value Care. Annals of Internal Medicine, 2016, 164, 114.	3.9	165
17	Beyond Pay for Performance " Emerging Models of Provider-Payment Reform. New England Journal of Medicine, 2008, 359, 1197-1200.	27.0	157
18	A Systemic Approach to Containing Health Care Spending. New England Journal of Medicine, 2012, 367, 949-954.	27.0	155

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19	Can you get what you pay for? Pay-for-performance and the quality of healthcare providers. RAND Journal of Economics, 2010, 41, 64-91.	2.3	149
20	Effect of Financial Incentives to Physicians, Patients, or Both on Lipid Levels. JAMA - Journal of the American Medical Association, 2015, 314, 1926.	7.4	144
21	Effects of Pharmaceutical Promotion on Adherence to the Treatment Guidelines for Depression. Medical Care, 2004, 42, 1176-1185.	2.4	143
22	Prevalence of Off-Label Use and Spending in 2010 Among Patent-Protected Chemotherapies in a Population-Based Cohort of Medical Oncologists. Journal of Clinical Oncology, 2013, 31, 1134-1139.	1.6	113
23	Increased Price Transparency in Health Care – Challenges and Potential Effects. New England Journal of Medicine, 2011, 364, 891-894.	27.0	110
24	Effects of a Medical Home and Shared Savings Intervention on Quality and Utilization of Care. JAMA Internal Medicine, 2015, 175, 1362.	5.1	106
25	Cascades of Care After Incidental Findings in a US National Survey of Physicians. JAMA Network Open, 2019, 2, e1913325.	5.9	105
26	The PROMETHEUS Bundled Payment Experiment: Slow Start Shows Problems In Implementing New Payment Models. Health Affairs, 2011, 30, 2116-2124.	5.2	99
27	Effect of a Multipayer Patient-Centered Medical Home on Health Care Utilization and Quality. JAMA Internal Medicine, 2013, 173, 1907.	5.1	96
28	Value and the medical home: effects of transformed primary care. American Journal of Managed Care, 2010, 16, 607-14.	1.1	96
29	Physician Work Hours and the Gender Pay Gap – Evidence from Primary Care. New England Journal of Medicine, 2020, 383, 1349-1357.	27.0	90
30	Building a Bridge from Fragmentation to Accountability – The Prometheus Payment Model. New England Journal of Medicine, 2009, 361, 1033-1036.	27.0	87
31	Do Integrated Medical Groups Provide Higher-Quality Medical Care than Individual Practice Associations?. Annals of Internal Medicine, 2006, 145, 826.	3.9	86
32	Synthesis Of Research On Patient-Centered Medical Homes Brings Systematic Differences Into Relief. Health Affairs, 2017, 36, 500-508.	5.2	79
33	How Report Cards On Physicians, Physician Groups, And Hospitals Can Have Greater Impact On Consumer Choices. Health Affairs, 2012, 31, 602-611.	5.2	75
34	Assessing The Evidence For Value-Based Insurance Design. Health Affairs, 2010, 29, 1988-1994.	5.2	74
35	The ACA and High-Deductible Insurance – Strategies for Sharpening a Blunt Instrument. New England Journal of Medicine, 2013, 369, 1481-1484.	27.0	74
36	Delayed and Forgone Care for Families with Chronic Conditions in High-Deductible Health Plans. Journal of General Internal Medicine, 2012, 27, 1105-1111.	2.6	71

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37	Prevalence and Cost of Care Cascades After Low-Value Preoperative Electrocardiogram for Cataract Surgery in Fee-for-Service Medicare Beneficiaries. <i>JAMA Internal Medicine</i> , 2019, 179, 1211.	5.1	70
38	Climbing Up The Pay-For-Performance Learning Curve: Where Are The Early Adopters Now?. <i>Health Affairs</i> , 2007, 26, 1674-1682.	5.2	69
39	Wellness Programs and Lifestyle Discrimination – The Legal Limits. <i>New England Journal of Medicine</i> , 2008, 359, 192-199.	27.0	66
40	Health Care Use and Decision Making Among Lower-Income Families in High-Deductible Health Plans. <i>Archives of Internal Medicine</i> , 2010, 170, 1918.	3.8	64
41	Nearly Half Of Families In High-Deductible Health Plans Whose Members Have Chronic Conditions Face Substantial Financial Burden. <i>Health Affairs</i> , 2011, 30, 322-331.	5.2	64
42	Sunlight as Disinfectant – New Rules on Disclosure of Industry Payments to Physicians. <i>New England Journal of Medicine</i> , 2013, 368, 2052-2054.	27.0	63
43	Examining A Health Care Price Transparency Tool: Who Uses It, And How They Shop For Care. <i>Health Affairs</i> , 2016, 35, 662-670.	5.2	63
44	Demand Effects of Recent Changes in Prescription Drug Promotion. <i>Forum for Health Economics and Policy</i> , 2003, 6, .	0.8	61
45	A Difference-in-Difference Analysis of Changes in Quality, Utilization and Cost Following the Colorado Multi-Payer Patient-Centered Medical Home Pilot. <i>Journal of General Internal Medicine</i> , 2016, 31, 289-296.	2.6	59
46	For Selected Services, Blacks And Hispanics More Likely To Receive Low-Value Care Than Whites. <i>Health Affairs</i> , 2017, 36, 1065-1069.	5.2	55
47	Improving Timely Childhood Immunizations through Pay for Performance in Medicaid-Managed Care. <i>Health Services Research</i> , 2010, 45, 1934-1947.	2.0	54
48	Team dynamics, clinical work satisfaction, and patient care coordination between primary care providers. <i>Health Care Management Review</i> , 2017, 42, 28-41.	1.4	51
49	The Economic impacts of the tobacco settlement. <i>Journal of Policy Analysis and Management</i> , 2002, 21, 1.	1.4	50
50	Transforming Specialty Practice – The Patient-Centered Medical Neighborhood. <i>New England Journal of Medicine</i> , 2014, 370, 1376-1379.	27.0	49
51	Development and Validation of the Primary Care Team Dynamics Survey. <i>Health Services Research</i> , 2015, 50, 897-921.	2.0	47
52	Association of Team-Based Primary Care With Health Care Utilization and Costs Among Chronically Ill Patients. <i>JAMA Internal Medicine</i> , 2019, 179, 54.	5.1	47
53	Physician perceptions of Choosing Wisely and drivers of overuse. <i>American Journal of Managed Care</i> , 2016, 22, 337-43.	1.1	45
54	Risk factors associated with 30-day readmission and length of stay in patients with type 2 diabetes. <i>Journal of Diabetes and Its Complications</i> , 2017, 31, 122-127.	2.3	41

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55	Structuring Payment to Medical Homes After the Affordable Care Act. <i>Journal of General Internal Medicine</i> , 2014, 29, 1410-1413.	2.6	40
56	Employers' Use of Value-Based Purchasing Strategies. <i>JAMA - Journal of the American Medical Association</i> , 2007, 298, 2281.	7.4	38
57	The ACO Rules "Striking the Balance between Participation and Transformative Potential. <i>New England Journal of Medicine</i> , 2011, 365, e6.	27.0	38
58	Payer Type and Low-Value Care: Comparing Choosing Wisely Services across Commercial and Medicare Populations. <i>Health Services Research</i> , 2018, 53, 730-746.	2.0	38
59	The Cost of Health Care "Highlights from a Discussion about Economics and Reform. <i>New England Journal of Medicine</i> , 2009, 361, 1421-1423.	27.0	38
60	A Report Card On The Freshman Class Of Consumer-Directed Health Plans. <i>Health Affairs</i> , 2005, 24, 1592-1600.	5.2	37
61	Medicare's Physician Value-Based Payment Modifier "Will the Tectonic Shift Create Waves?. <i>New England Journal of Medicine</i> , 2013, 369, 2076-2078.	27.0	37
62	Use of non-indicated cardiac testing in low-risk patients: Choosing Wisely. <i>BMJ Quality and Safety</i> , 2015, 24, 149-153.	3.7	36
63	Impact of Financial Incentives for Prenatal Care on Birth Outcomes and Spending. <i>Health Services Research</i> , 2009, 44, 1465-1479.	2.0	33
64	Impact of the Rochester Medical Home Initiative on Primary Care Practices, Quality, Utilization, and Costs. <i>Medical Care</i> , 2015, 53, 967-973.	2.4	33
65	Patients' Role in Accountable Care Organizations. <i>New England Journal of Medicine</i> , 2010, 363, 2583-2585.	27.0	31
66	Patients with Multiple Chronic Conditions Do Not Receive Lower Quality of Preventive Care. <i>Journal of General Internal Medicine</i> , 2008, 23, 1933-1939.	2.6	30
67	What Works in Market-Oriented Health Policy?. <i>New England Journal of Medicine</i> , 2009, 360, 2157-2160.	27.0	30
68	Will the Patient-Centered Medical Home Improve Efficiency and Reduce Costs of Care? A Measurement and Research Agenda. <i>Medical Care Research and Review</i> , 2010, 67, 476-484.	2.1	29
69	The Impact of Tiered Physician Networks on Patient Choices. <i>Health Services Research</i> , 2014, 49, 1348-1363.	2.0	29
70	The Role of States in Improving Price Transparency in Health Care. <i>JAMA Internal Medicine</i> , 2015, 175, 886.	5.1	28
71	Physician Payment after the SGR "The New Meritocracy. <i>New England Journal of Medicine</i> , 2015, 373, 1187-1189.	27.0	28
72	Pharmaceutical Policy Reform "Balancing Affordability with Incentives for Innovation. <i>New England Journal of Medicine</i> , 2016, 374, 703-706.	27.0	28

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73	Transmission Of Financial Incentives To Physicians By Intermediary Organizations In California. Health Affairs, 2002, 21, 197-205.	5.2	27
74	Association Between Viewing Health Care Price Information and Choice of Health Care Facility. JAMA Internal Medicine, 2016, 176, 1868.	5.1	26
75	Financial Integration's Impact On Care Delivery And Payment Reforms: A Survey Of Hospitals And Physician Practices. Health Affairs, 2020, 39, 1302-1311.	5.2	26
76	Managed care and efficient rationing. Journal of Health Care Finance, 2002, 28, 1-10.	0.6	26
77	Impact of a pay for performance program to improve diabetes care in the safety net. Preventive Medicine, 2012, 55, S80-S85.	3.4	25
78	Overuse of Cardiovascular Services. Circulation, 2015, 132, 205-214.	1.6	25
79	ACOs Holding Commercial Contracts Are Larger And More Efficient Than Noncommercial ACOs. Health Affairs, 2016, 35, 1849-1856.	5.2	25
80	Practice Environments and Job Satisfaction in Patient-Centered Medical Homes. Annals of Family Medicine, 2014, 12, 331-337.	1.9	23
81	A Randomized Trial of Displaying Paid Price Information on Imaging Study and Procedure Ordering Rates. Journal of General Internal Medicine, 2017, 32, 434-448.	2.6	23
82	Awakening Consumer Stewardship of Health Benefits: Prevalence and Differentiation of New Health Plan Models. Health Services Research, 2004, 39, 1055-1070.	2.0	22
83	Coordination within medical neighborhoods. Health Care Management Review, 2016, 41, 101-112.	1.4	20
84	Managed Care And Market Power: Physician Organizations In Four Markets. Health Affairs, 2001, 20, 187-193.	5.2	19
85	Direct-to-Consumer Advertising and Shared Liability for Pharmaceutical Manufacturers. JAMA - Journal of the American Medical Association, 2003, 289, 477.	7.4	19
86	Is the Type of Medicare Insurance Associated With Colorectal Cancer Screening Prevalence and Selection of Screening Strategy?. Medical Care, 2008, 46, S84-S90.	2.4	19
87	Should Health Care Come With A Warranty?. Health Affairs, 2009, 28, w678-w687.	5.2	19
88	Individual Responsibility or a Policy Solution " Cap and Trade for the U.S. Diet?. New England Journal of Medicine, 2011, 365, 1561-1563.	27.0	19
89	Impact of the Cincinnati Aligning Forces for Quality Multi-Payer Patient Centered Medical Home Pilot on Health Care Quality, Utilization, and Costs. Medical Care Research and Review, 2016, 73, 532-545.	2.1	18
90	Long-Term Impact of a Postdischarge Community Health Worker Intervention on Health Care Costs in a Safety-Net System. Health Services Research, 2017, 52, 2061-2078.	2.0	18

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91	The (Missed) Potential of the Patient-centered Medical Home for Disparities. <i>Medical Care</i> , 2016, 54, 9-16.	2.4	17
92	Health Reform and Coverage Changes Among Native Americans. <i>JAMA Internal Medicine</i> , 2016, 176, 858.	5.1	17
93	Quality of Inpatient Psychiatric Care at VA, Other Government, Nonprofit, and For-Profit Hospitals: A Comparison. <i>Psychiatric Services</i> , 2017, 68, 225-230.	2.0	17
94	How Primary Care Physicians Integrate Price Information into Clinical Decision-Making. <i>Journal of General Internal Medicine</i> , 2017, 32, 81-87.	2.6	17
95	Medical Marketing, Trust, and the Patient-Physician Relationship. <i>JAMA - Journal of the American Medical Association</i> , 2019, 321, 40.	7.4	17
96	The Design And Application Of Shared Savings Programs: Lessons From Early Adopters. <i>Health Affairs</i> , 2012, 31, 1959-1968.	5.2	16
97	Feeling inadequate: Residents' stress and learning at primary care clinics in the United States. <i>Medical Teacher</i> , 2018, 40, 920-927.	1.8	16
98	Team-based primary care: The medical assistant perspective. <i>Health Care Management Review</i> , 2018, 43, 115-125.	1.4	16
99	Beyond Nudges – When Improving Health Calls for Greater Assertiveness. <i>New England Journal of Medicine</i> , 2019, 380, 309-311.	27.0	16
100	Assessment of Prevalence and Cost of Care Cascades After Routine Testing During the Medicare Annual Wellness Visit. <i>JAMA Network Open</i> , 2020, 3, e2029891.	5.9	16
101	Using Performance Data to Identify Preferred Hospitals. <i>Health Services Research</i> , 2007, 42, 2109-2119.	2.0	15
102	Beyond Competition: The Normative Implications of Consumer-Driven Health Plans. <i>Journal of Health Politics, Policy and Law</i> , 2006, 31, 671-685.	1.9	14
103	Health Risk Appraisals: How Much Do They Influence Employees' Health Behavior?. <i>Health Affairs</i> , 2009, 28, 1532-1540.	5.2	14
104	Do patients continue to see physicians who are removed from a PPO network?. <i>American Journal of Managed Care</i> , 2009, 15, 713-9.	1.1	14
105	Consumer experience with a tiered physician network: early evidence. <i>American Journal of Managed Care</i> , 2010, 16, 123-30.	1.1	14
106	Risk Sharing In Managed Behavioral Health Care. <i>Health Affairs</i> , 1999, 18, 204-213.	5.2	13
107	Hospital Executives' Perspectives on Pay-for-Performance and Racial/Ethnic Disparities in Care. <i>Medical Care Research and Review</i> , 2010, 67, 574-589.	2.1	13
108	Pay for Performance in Medicaid: Evidence from Three Natural Experiments. <i>Health Services Research</i> , 2016, 51, 1444-1466.	2.0	13

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109	Why Do Physicians Pursue Cascades of Care After Incidental Findings? A National Survey. <i>Journal of General Internal Medicine</i> , 2020, 35, 1352-1354.	2.6	13
110	Doughnut-Hole Economics. <i>Health Affairs</i> , 2004, 23, 129-135.	5.2	12
111	A Cost-Effectiveness Framework for Profiling the Value of Hospital Care. <i>Medical Decision Making</i> , 2008, 28, 419-434.	2.4	12
112	Reform of Continuing Medical Education. <i>JAMA - Journal of the American Medical Association</i> , 2009, 302, 1807.	7.4	12
113	Use of well-child visits in high-deductible health plans. <i>American Journal of Managed Care</i> , 2010, 16, 833-40.	1.1	12
114	Longitudinal Content Analysis of the Characteristics and Expected Impact of Low-Value Services Identified in US Choosing Wisely Recommendations. <i>JAMA Internal Medicine</i> , 2022, 182, 127.	5.1	12
115	Quality monitoring and management in commercial health plans. <i>American Journal of Managed Care</i> , 2008, 14, 377-86.	1.1	12
116	Measuring overuse with electronic health records data. <i>American Journal of Managed Care</i> , 2018, 24, 19-25.	1.1	12
117	Hard Choices – Alternatives for Reining In Medicare and Medicaid Spending. <i>New England Journal of Medicine</i> , 2011, 364, 1887-1890.	27.0	10
118	CAR T-Cell Therapy. <i>JAMA - Journal of the American Medical Association</i> , 2019, 322, 923.	7.4	10
119	Physician practices in Accountable Care Organizations are more likely to collect and use physician performance information, yet base only a small proportion of compensation on performance data. <i>Health Services Research</i> , 2019, 54, 1214-1222.	2.0	10
120	Risk sharing and the supply of mental health services. <i>Journal of Health Economics</i> , 2000, 19, 1047-1065.	2.7	9
121	Impact of Medicare’s Nonpayment Program on Hospital-acquired Conditions. <i>Medical Care</i> , 2017, 55, 447-455.	2.4	9
122	Generic prescription drug price increases: which products will be affected by proposed anti-gouging legislation?. <i>Journal of Pharmaceutical Policy and Practice</i> , 2018, 11, 29.	2.4	9
123	Bridges to Excellence—recognizing high-quality care: analysis of physician quality and resource use. <i>American Journal of Managed Care</i> , 2008, 14, 670-7.	1.1	9
124	Hospital Value-Based Purchasing. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2012, 5, 148-149.	2.2	8
125	Waste Not, Want Not: Promoting Efficient Use of Health Care Resources. <i>Annals of Internal Medicine</i> , 2013, 158, 67.	3.9	8
126	Impact of the Affordable Care Act on human papillomavirus vaccination initiation among lesbian, bisexual, and heterosexual U.S. women. <i>Health Services Research</i> , 2020, 55, 18-25.	2.0	8



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127	Can Pay-for Performance Incentive Levels be Determined Using a Cost-Effectiveness Framework?. Circulation: Cardiovascular Quality and Outcomes, 2020, 13, e006492.	2.2	8
128	Innovation in Health Care Leadership. New England Journal of Medicine, 2014, 371, e26.	27.0	8
129	Price Effects Of Vertical Integration And Joint Contracting Between Physicians And Hospitals In Massachusetts. Health Affairs, 2022, 41, 741-750.	5.2	8
130	How Good a Deal Was the Tobacco Settlement?: Assessing Payments to Massachusetts. Journal of Risk and Uncertainty, 2000, 21, 235-261.	1.5	7
131	The Effect of Price Information on the Ordering of Images and Procedures. Pediatrics, 2017, 139, e20161507.	2.1	7
132	Diagnostic Evaluation of Patients Presenting to Primary Care with Rectal Bleeding. Journal of General Internal Medicine, 2018, 33, 415-422.	2.6	7
133	Cost-effectiveness of Financial Incentives for Patients and Physicians to Manage Low-Density Lipoprotein Cholesterol Levels. JAMA Network Open, 2018, 1, e182008.	5.9	7
134	The Growing Problem of Out-of-Pocket Costs and Affordability in Employer-Sponsored Insurance. JAMA - Journal of the American Medical Association, 2021, 326, 305.	7.4	7
135	Marketwide Price Transparency Suggests Significant Opportunities For Value-Based Purchasing. Health Affairs, 2019, 38, 1514-1522.	5.2	6
136	The Triple Aim for Payment Reform in Joint Replacement Surgery. JAMA - Journal of the American Medical Association, 2021, 326, 477.	7.4	6
137	A Typology of Organizational and Contractual Arrangements for Purchasing and Delivery of Behavioral Health Care. Administration and Policy in Mental Health and Mental Health Services Research, 2006, 33, 461-469.	2.1	5
138	Engagement of Health Plans and Employers in Addressing Racial and Ethnic Disparities in Health Care. Medical Care Research and Review, 2009, 66, 219-231.	2.1	5
139	What drives variation in spending for breast cancer patients within geographic regions?. Health Services Research, 2019, 54, 97-105.	2.0	5
140	Patterns of Use of a Price Transparency Tool for Childbirth Among Pregnant Individuals With Commercial Insurance. JAMA Network Open, 2021, 4, e2121410.	5.9	5
141	National Trends and Outcomes Associated With Presence and Type of Usual Clinician Among Older Adults With Multimorbidity. JAMA Network Open, 2021, 4, e2134798.	5.9	5
142	Structural capabilities in small and medium-sized patient-centered medical homes. American Journal of Managed Care, 2014, 20, e265-77.	1.1	5
143	Economic Grand Rounds: Psychiatric Provider Practice Management Companies: Adding Value to Behavioral Health Care?. Psychiatric Services, 1999, 50, 1011-1013.	2.0	4
144	Pay for performance and beyond. Expert Review of Pharmacoeconomics and Outcomes Research, 2007, 7, 351-355.	1.4	4

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145	Composite measures for hospital quality using quality-adjusted life years. <i>Statistics in Medicine</i> , 2009, 28, 1238-1254.	1.6	4
146	Impact of Medicare's Nonpayment Program on Venous Thromboembolism Following Hip and Knee Replacements. <i>Health Services Research</i> , 2018, 53, 4381-4402.	2.0	4
147	The Association Between Primary Care Physician Compensation and Patterns of Care Delivery, 2012-2015. <i>Inquiry (United States)</i> , 2019, 56, 004695801985496.	0.9	4
148	Team-Based Primary Care Practice Transformation Initiative and Changes in Patient Experience and Recommended Cancer Screening Rates. <i>Inquiry (United States)</i> , 2020, 57, 004695802095291.	0.9	4
149	ACOs with risk-bearing experience are likely taking steps to reduce low-value medical services. <i>American Journal of Managed Care</i> , 2018, 24, e216-e221.	1.1	4
150	P4P: rumors of its demise may be exaggerated. <i>American Journal of Managed Care</i> , 2007, 13, 238-9.	1.1	4
151	New strategies for aligning physicians with health system incentives. <i>American Journal of Managed Care</i> , 2016, 22, 610-2.	1.1	4
152	Direct-to-Consumer Advertising of Prescription Drugs: A Policy Dilemma. , 2005, , 169-183.		3
153	Clinical Practice Guidelines for Older Patients With Comorbid Diseases. <i>JAMA - Journal of the American Medical Association</i> , 2006, 295, 33.	7.4	3
154	Can You Get What You Pay For? Pay-for-Performance and the Quality of Healthcare Providers. <i>SSRN Electronic Journal</i> , 0, , .	0.4	3
155	Health Care and the Recession. <i>New England Journal of Medicine</i> , 2009, 360, e5.	27.0	3
156	Overuse and insurance plan type in a privately insured population. <i>American Journal of Managed Care</i> , 2018, 24, 140-146.	1.1	3
157	Health plan resource use: bringing us closer to value-based decisions. <i>American Journal of Managed Care</i> , 2011, 17, 68-74.	1.1	3
158	Comment: The economics of direct-to-consumer advertising of prescription-only drugs: prescribed to improve consumer welfare?. <i>Journal of Health Services Research and Policy</i> , 2004, 9, 39-42.	1.7	2
159	Health Care Spending by High-Income Countries, 1980-2011. <i>New England Journal of Medicine</i> , 2014, 370, e7.	27.0	2
160	Shared Savings, Shared Decisions, and Incentives for High-Value Medical Care. <i>JAMA Internal Medicine</i> , 2014, 174, 2014.	5.1	2
161	Comparing Diagnostic Evaluations for Rectal Bleeding and Breast Lumps in Primary Care: a Retrospective Cohort Study. <i>Journal of General Internal Medicine</i> , 2019, 34, 1146-1153.	2.6	2
162	Use and cost of disease-modifying therapies by Sonya Slifka Study participants: has anything really changed since 2000 and 2009?. <i>Multiple Sclerosis Journal - Experimental, Translational and Clinical</i> , 2019, 5, 205521731882088.	1.0	2

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163	Team-Based Primary Care: The Medical Assistant Perspective. Proceedings - Academy of Management, 2016, 2016, 15265.	0.1	2
164	Patients' views of a behavioral intervention including financial incentives. American Journal of Managed Care, 2017, 23, 366-371.	1.1	2
165	Managing specialty care in an era of heightened accountability: emphasizing quality and accelerating savings. American Journal of Managed Care, 2015, 21, 284-92.	1.1	2
166	Moderating Effects of Patient Characteristics on the Impact of Financial Incentives. Medical Care Research and Review, 2019, 76, 56-72.	2.1	1
167	Physician and facility drivers of spending variation in locoregional prostate cancer. Cancer, 2020, 126, 1622-1631.	4.1	1
168	Mammographic Surveillance in Older Women With Breast Cancer in Canada and the United States: Are We Choosing Wisely?. Practical Radiation Oncology, 2021, 11, e384-e394.	2.1	1
169	Health Promotion and the State. New England Journal of Medicine, 2013, 368, e34.	27.0	1
170	Quality Incentives: The Authors Respond. Health Affairs, 2004, 23, 285-285.	5.2	0
171	How Will Paying for Performance Affect Patient Care?. AMA Journal of Ethics, 2006, 8, 162-165.	0.7	0
172	Cost Sharing: Authors Respond. Health Affairs, 2006, 25, 883-884.	5.2	0
173	Avoiding Disincentives to Treat in Designing Pay-for-Performance Measures. AMA Journal of Ethics, 2007, 9, 483-486.	0.7	0
174	Pharmaceutical promotion, prior authorisation and the use of erectile dysfunction medications in the US Medicaid population. Journal of Management and Marketing in Healthcare, 2009, 2, 384-400.	0.3	0
175	High-Deductible Health Plans: The Authors Reply. Health Affairs, 2011, 30, 800-800.	5.2	0
176	Did Extra Resources or the Medical Home Model Improve Care?â€”Reply. JAMA Internal Medicine, 2014, 174, 1008.	5.1	0
177	Measuring the Quality of VA Care: In Reply. Psychiatric Services, 2017, 68, 308-309.	2.0	0
178	Patient Engagement Activities and Patient Experience: Are Patients With a History of Depression the Canary in the Coal Mine?. Medical Care Research and Review, 2021, 78, 251-259.	2.1	0
179	"Team Dynamics, Clinical Work Satisfaction, and Care Coordination Between Primary Care Providers". Proceedings - Academy of Management, 2015, 2015, 13538.	0.1	0
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