

Meredith B Rosenthal

List of Publications by Year in descending order

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Version: 2024-02-01

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	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
2	Price Effects Of Vertical Integration And Joint Contracting Between Physicians And Hospitals In Massachusetts. <i>Health Affairs</i> , 2022, 41, 741-750.	5.2	8
3	National trends in post-launch cancer prescription drug prices and the impact of generic entry, 2014-2020.. <i>Journal of Clinical Oncology</i> , 2022, 40, 6598-6598.	1.6	0
4	Patient Engagement Activities and Patient Experience: Are Patients With a History of Depression the Canary in the Coal Mine?. <i>Medical Care Research and Review</i> , 2021, 78, 251-259.	2.1	0
5	Mammographic Surveillance in Older Women With Breast Cancer in Canada and the United States: Are We Choosing Wisely?. <i>Practical Radiation Oncology</i> , 2021, 11, e384-e394.	2.1	1
6	The Growing Problem of Out-of-Pocket Costs and Affordability in Employer-Sponsored Insurance. <i>JAMA - Journal of the American Medical Association</i> , 2021, 326, 305.	7.4	7
7	Patterns of Use of a Price Transparency Tool for Childbirth Among Pregnant Individuals With Commercial Insurance. <i>JAMA Network Open</i> , 2021, 4, e2121410.	5.9	5
8	The Triple Aim for Payment Reform in Joint Replacement Surgery. <i>JAMA - Journal of the American Medical Association</i> , 2021, 326, 477.	7.4	6
9	National Trends and Outcomes Associated With Presence and Type of Usual Clinician Among Older Adults With Multimorbidity. <i>JAMA Network Open</i> , 2021, 4, e2134798.	5.9	5
10	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
11	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
12	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
13	Physician Work Hours and the Gender Pay Gap – Evidence from Primary Care. <i>New England Journal of Medicine</i> , 2020, 383, 1349-1357.	27.0	90
14	Financial Integration’s Impact On Care Delivery And Payment Reforms: A Survey Of Hospitals And Physician Practices. <i>Health Affairs</i> , 2020, 39, 1302-1311.	5.2	26
15	Can Pay-for Performance Incentive Levels be Determined Using a Cost-Effectiveness Framework?. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2020, 13, e006492.	2.2	8
16	Physician and facility drivers of spending variation in locoregional prostate cancer. <i>Cancer</i> , 2020, 126, 1622-1631.	4.1	1
17	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
18	CAR T-Cell Therapy. <i>JAMA - Journal of the American Medical Association</i> , 2019, 322, 923.	7.4	10

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19	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
20	Cascades of Care After Incidental Findings in a US National Survey of Physicians. <i>JAMA Network Open</i> , 2019, 2, e1913325.	5.9	105
21	Marketwide Price Transparency Suggests Significant Opportunities For Value-Based Purchasing. <i>Health Affairs</i> , 2019, 38, 1514-1522.	5.2	6
22	Beyond Nudges â€” When Improving Health Calls for Greater Assertiveness. <i>New England Journal of Medicine</i> , 2019, 380, 309-311.	27.0	16
23	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
24	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
25	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
26	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
27	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
28	Medical Marketing, Trust, and the Patient-Physician Relationship. <i>JAMA - Journal of the American Medical Association</i> , 2019, 321, 40.	7.4	17
29	What drives variation in spending for breast cancer patients within geographic regions?. <i>Health Services Research</i> , 2019, 54, 97-105.	2.0	5
30	Moderating Effects of Patient Characteristics on the Impact of Financial Incentives. <i>Medical Care Research and Review</i> , 2019, 76, 56-72.	2.1	1
31	Feeling inadequate: Residentsâ€™ stress and learning at primary care clinics in the United States. <i>Medical Teacher</i> , 2018, 40, 920-927.	1.8	16
32	Diagnostic Evaluation of Patients Presenting to Primary Care with Rectal Bleeding. <i>Journal of General Internal Medicine</i> , 2018, 33, 415-422.	2.6	7
33	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
34	Team-based primary care: The medical assistant perspective. <i>Health Care Management Review</i> , 2018, 43, 115-125.	1.4	16
35	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
36	Cost-effectiveness of Financial Incentives for Patients and Physicians to Manage Low-Density Lipoprotein Cholesterol Levels. <i>JAMA Network Open</i> , 2018, 1, e182008.	5.9	7

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37	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
38	The impact of the ASCO Choosing Wisely campaign for breast and prostate cancer on physician behavior.. <i>Journal of Clinical Oncology</i> , 2018, 36, 6592-6592.	1.6	0
39	Overuse and insurance plan type in a privately insured population. <i>American Journal of Managed Care</i> , 2018, 24, 140-146.	1.1	3
40	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
41	Measuring overuse with electronic health records data. <i>American Journal of Managed Care</i> , 2018, 24, 19-25.	1.1	12
42	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
43	Levers for addressing medical underuse and overuse: achieving high-value health care. <i>Lancet, The</i> , 2017, 390, 191-202.	13.7	207
44	The Effect of Price Information on the Ordering of Images and Procedures. <i>Pediatrics</i> , 2017, 139, e20161507.	2.1	7
45	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
46	Synthesis Of Research On Patient-Centered Medical Homes Brings Systematic Differences Into Relief. <i>Health Affairs</i> , 2017, 36, 500-508.	5.2	79
47	Measuring the Quality of VA Care: In Reply. <i>Psychiatric Services</i> , 2017, 68, 308-309.	2.0	0
48	A Randomized Trial of Displaying Paid Price Information on Imaging Study and Procedure Ordering Rates. <i>Journal of General Internal Medicine</i> , 2017, 32, 434-448.	2.6	23
49	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
50	Impact of Medicare's Nonpayment Program on Hospital-acquired Conditions. <i>Medical Care</i> , 2017, 55, 447-455.	2.4	9
51	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
52	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
53	Long-Term Impact of a Postdischarge Community Health Worker Intervention on Health Care Costs in a Safety-Net System. <i>Health Services Research</i> , 2017, 52, 2061-2078.	2.0	18
54	Patients' views of a behavioral intervention including financial incentives. <i>American Journal of Managed Care</i> , 2017, 23, 366-371.	1.1	2

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55	Coordination within medical neighborhoods. <i>Health Care Management Review</i> , 2016, 41, 101-112.	1.4	20
56	The (Missed) Potential of the Patient-centered Medical Home for Disparities. <i>Medical Care</i> , 2016, 54, 9-16.	2.4	17
57	Using Behavioral Economics to Design Physician Incentives That Deliver High-Value Care. <i>Annals of Internal Medicine</i> , 2016, 164, 114.	3.9	165
58	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
59	ACOs Holding Commercial Contracts Are Larger And More Efficient Than Noncommercial ACOs. <i>Health Affairs</i> , 2016, 35, 1849-1856.	5.2	25
60	Association Between Viewing Health Care Price Information and Choice of Health Care Facility. <i>JAMA Internal Medicine</i> , 2016, 176, 1868.	5.1	26
61	Health Reform and Coverage Changes Among Native Americans. <i>JAMA Internal Medicine</i> , 2016, 176, 858.	5.1	17
62	Impact of the Cincinnati Aligning Forces for Quality Multi-Payer Patient Centered Medical Home Pilot on Health Care Quality, Utilization, and Costs. <i>Medical Care Research and Review</i> , 2016, 73, 532-545.	2.1	18
63	Pay for Performance in Medicaid: Evidence from Three Natural Experiments. <i>Health Services Research</i> , 2016, 51, 1444-1466.	2.0	13
64	Pharmaceutical Policy Reform – Balancing Affordability with Incentives for Innovation. <i>New England Journal of Medicine</i> , 2016, 374, 703-706.	27.0	28
65	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
66	Team-Based Primary Care: The Medical Assistant Perspective. <i>Proceedings - Academy of Management</i> , 2016, 2016, 15265.	0.1	2
67	Physician perceptions of Choosing Wisely and drivers of overuse. <i>American Journal of Managed Care</i> , 2016, 22, 337-43.	1.1	45
68	New strategies for aligning physicians with health system incentives. <i>American Journal of Managed Care</i> , 2016, 22, 610-2.	1.1	4
69	Effects of a Medical Home and Shared Savings Intervention on Quality and Utilization of Care. <i>JAMA Internal Medicine</i> , 2015, 175, 1362.	5.1	106
70	Development and Validation of the Primary Care Team Dynamics Survey. <i>Health Services Research</i> , 2015, 50, 897-921.	2.0	47
71	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
72	The Role of States in Improving Price Transparency in Health Care. <i>JAMA Internal Medicine</i> , 2015, 175, 886.	5.1	28

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73	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
74	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
75	Overuse of Cardiovascular Services. Circulation, 2015, 132, 205-214.	1.6	25
76	Use of non-indicated cardiac testing in low-risk patients: Choosing Wisely. BMJ Quality and Safety, 2015, 24, 149-153.	3.7	36
77	Physician Payment after the SGR "The New Meritocracy. New England Journal of Medicine, 2015, 373, 1187-1189.	27.0	28
78	"Team Dynamics, Clinical Work Satisfaction, and Care Coordination Between Primary Care Providers". Proceedings - Academy of Management, 2015, 2015, 13538.	0.1	0
79	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
80	Choosing Wisely "The Politics and Economics of Labeling Low-Value Services. New England Journal of Medicine, 2014, 370, 589-592.	27.0	227
81	Transforming Specialty Practice "The Patient-Centered Medical Neighborhood. New England Journal of Medicine, 2014, 370, 1376-1379.	27.0	49
82	Health Care Spending by High-Income Countries, 1980-2011. New England Journal of Medicine, 2014, 370, e7.	27.0	2
83	The Impact of Tiered Physician Networks on Patient Choices. Health Services Research, 2014, 49, 1348-1363.	2.0	29
84	Shared Savings, Shared Decisions, and Incentives for High-Value Medical Care. JAMA Internal Medicine, 2014, 174, 2014.	5.1	2
85	Did Extra Resources or the Medical Home Model Improve Care?Reply. JAMA Internal Medicine, 2014, 174, 1008.	5.1	0
86	Practice Environments and Job Satisfaction in Patient-Centered Medical Homes. Annals of Family Medicine, 2014, 12, 331-337.	1.9	23
87	Structuring Payment to Medical Homes After the Affordable Care Act. Journal of General Internal Medicine, 2014, 29, 1410-1413.	2.6	40
88	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
89	Innovation in Health Care Leadership. New England Journal of Medicine, 2014, 371, e26.	27.0	8
90	Structural capabilities in small and medium-sized patient-centered medical homes. American Journal of Managed Care, 2014, 20, e265-77.	1.1	5

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91	Prevalence of Off-Label Use and Spending in 2010 Among Patent-Protected Chemotherapies in a Population-Based Cohort of Medical Oncologists. <i>Journal of Clinical Oncology</i> , 2013, 31, 1134-1139.	1.6	113
92	Sunlight as Disinfectant â€” New Rules on Disclosure of Industry Payments to Physicians. <i>New England Journal of Medicine</i> , 2013, 368, 2052-2054.	27.0	63
93	The ACA and High-Deductible Insurance â€” Strategies for Sharpening a Blunt Instrument. <i>New England Journal of Medicine</i> , 2013, 369, 1481-1484.	27.0	74
94	Medicare's Physician Value-Based Payment Modifier â€” Will the Tectonic Shift Create Waves?. <i>New England Journal of Medicine</i> , 2013, 369, 2076-2078.	27.0	37
95	Effect of a Multipayer Patient-Centered Medical Home on Health Care Utilization and Quality. <i>JAMA Internal Medicine</i> , 2013, 173, 1907.	5.1	96
96	Waste Not, Want Not: Promoting Efficient Use of Health Care Resources. <i>Annals of Internal Medicine</i> , 2013, 158, 67.	3.9	8
97	Health Promotion and the State. <i>New England Journal of Medicine</i> , 2013, 368, e34.	27.0	1
98	Hospital Value-Based Purchasing. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2012, 5, 148-149.	2.2	8
99	A Systemic Approach to Containing Health Care Spending. <i>New England Journal of Medicine</i> , 2012, 367, 949-954.	27.0	155
100	Impact of a pay for performance program to improve diabetes care in the safety net. <i>Preventive Medicine</i> , 2012, 55, S80-S85.	3.4	25
101	The Design And Application Of Shared Savings Programs: Lessons From Early Adopters. <i>Health Affairs</i> , 2012, 31, 1959-1968.	5.2	16
102	Delayed and Forgone Care for Families with Chronic Conditions in High-Deductible Health Plans. <i>Journal of General Internal Medicine</i> , 2012, 27, 1105-1111.	2.6	71
103	How Report Cards On Physicians, Physician Groups, And Hospitals Can Have Greater Impact On Consumer Choices. <i>Health Affairs</i> , 2012, 31, 602-611.	5.2	75
104	Increased Price Transparency in Health Care â€” Challenges and Potential Effects. <i>New England Journal of Medicine</i> , 2011, 364, 891-894.	27.0	110
105	Hard Choices â€” Alternatives for Reining In Medicare and Medicaid Spending. <i>New England Journal of Medicine</i> , 2011, 364, 1887-1890.	27.0	10
106	Individual Responsibility or a Policy Solution â€” Cap and Trade for the U.S. Diet?. <i>New England Journal of Medicine</i> , 2011, 365, 1561-1563.	27.0	19
107	The ACO Rules â€” Striking the Balance between Participation and Transformative Potential. <i>New England Journal of Medicine</i> , 2011, 365, e6.	27.0	38
108	The PROMETHEUS Bundled Payment Experiment: Slow Start Shows Problems In Implementing New Payment Models. <i>Health Affairs</i> , 2011, 30, 2116-2124.	5.2	99

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109	High-Deductible Health Plans: The Authors Reply. Health Affairs, 2011, 30, 800-800.	5.2	0
110	Nearly Half Of Families In High-Deductible Health Plans Whose Members Have Chronic Conditions Face Substantial Financial Burden. Health Affairs, 2011, 30, 322-331.	5.2	64
111	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
112	Health plan resource use: bringing us closer to value-based decisions. American Journal of Managed Care, 2011, 17, 68-74.	1.1	3
113	Health Care Use and Decision Making Among Lower-Income Families in High-Deductible Health Plans. Archives of Internal Medicine, 2010, 170, 1918.	3.8	64
114	Systematic review: Effects, design choices, and context of pay-for-performance in health care. BMC Health Services Research, 2010, 10, 247.	2.2	384
115	Improving Timely Childhood Immunizations through Pay for Performance in Medicaidâ€Managed Care. Health Services Research, 2010, 45, 1934-1947.	2.0	54
116	Hospital Executivesâ€™ Perspectives on Pay-for-Performance and Racial/Ethnic Disparities in Care. Medical Care Research and Review, 2010, 67, 574-589.	2.1	13
117	Will the Patient-Centered Medical Home Improve Efficiency and Reduce Costs of Care? A Measurement and Research Agenda. Medical Care Research and Review, 2010, 67, 476-484.	2.1	29
118	Patients' Role in Accountable Care Organizations. New England Journal of Medicine, 2010, 363, 2583-2585.	27.0	31
119	Assessing The Evidence For Value-Based Insurance Design. Health Affairs, 2010, 29, 1988-1994.	5.2	74
120	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
121	Use of well-child visits in high-deductible health plans. American Journal of Managed Care, 2010, 16, 833-40.	1.1	12
122	Consumer experience with a tiered physician network: early evidence. American Journal of Managed Care, 2010, 16, 123-30.	1.1	14
123	Value and the medical home: effects of transformed primary care. American Journal of Managed Care, 2010, 16, 607-14.	1.1	96
124	Should Health Care Come With A Warranty?. Health Affairs, 2009, 28, w678-w687.	5.2	19
125	Building a Bridge from Fragmentation to Accountability â€” The Prometheus Payment Model. New England Journal of Medicine, 2009, 361, 1033-1036.	27.0	87
126	Health Risk Appraisals: How Much Do They Influence Employeesâ€™ Health Behavior?. Health Affairs, 2009, 28, 1532-1540.	5.2	14

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127	Reform of Continuing Medical Education. JAMA - Journal of the American Medical Association, 2009, 302, 1807.	7.4	12
128	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
129	What Works in Market-Oriented Health Policy?. New England Journal of Medicine, 2009, 360, 2157-2160.	27.0	30
130	Composite measures for hospital quality using quality-adjusted life years. Statistics in Medicine, 2009, 28, 1238-1254.	1.6	4
131	Impact of Financial Incentives for Prenatal Care on Birth Outcomes and Spending. Health Services Research, 2009, 44, 1465-1479.	2.0	33
132	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
133	Health Care and the Recession. New England Journal of Medicine, 2009, 360, e5.	27.0	3
134	The Cost of Health Care – Highlights from a Discussion about Economics and Reform. New England Journal of Medicine, 2009, 361, 1421-1423.	27.0	38
135	Do patients continue to see physicians who are removed from a PPO network?. American Journal of Managed Care, 2009, 15, 713-9.	1.1	14
136	Patients with Multiple Chronic Conditions Do Not Receive Lower Quality of Preventive Care. Journal of General Internal Medicine, 2008, 23, 1933-1939.	2.6	30
137	A Cost-Effectiveness Framework for Profiling the Value of Hospital Care. Medical Decision Making, 2008, 28, 419-434.	2.4	12
138	Beyond Pay for Performance – Emerging Models of Provider-Payment Reform. New England Journal of Medicine, 2008, 359, 1197-1200.	27.0	157
139	Wellness Programs and Lifestyle Discrimination – The Legal Limits. New England Journal of Medicine, 2008, 359, 192-199.	27.0	66
140	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
141	Quality monitoring and management in commercial health plans. American Journal of Managed Care, 2008, 14, 377-86.	1.1	12
142	Bridges to Excellence—recognizing high-quality care: analysis of physician quality and resource use. American Journal of Managed Care, 2008, 14, 670-7.	1.1	9
143	Nonpayment for Performance? Medicare's New Reimbursement Rule. New England Journal of Medicine, 2007, 357, 1573-1575.	27.0	287
144	Pay-for-Performance. JAMA - Journal of the American Medical Association, 2007, 297, 740.	7.4	251

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145	Climbing Up The Pay-For-Performance Learning Curve: Where Are The Early Adopters Now?. Health Affairs, 2007, 26, 1674-1682.	5.2	69
146	Employers' Use of Value-Based Purchasing Strategies. JAMA - Journal of the American Medical Association, 2007, 298, 2281.	7.4	38
147	Pay for performance and beyond. Expert Review of Pharmacoeconomics and Outcomes Research, 2007, 7, 351-355.	1.4	4
148	A Decade of Direct-to-Consumer Advertising of Prescription Drugs. New England Journal of Medicine, 2007, 357, 673-681.	27.0	443
149	Avoiding Disincentives to Treat in Designing Pay-for-Performance Measures. AMA Journal of Ethics, 2007, 9, 483-486.	0.7	0
150	Using Performance Data to Identify Preferred Hospitals. Health Services Research, 2007, 42, 2109-2119.	2.0	15
151	P4P: rumors of its demise may be exaggerated. American Journal of Managed Care, 2007, 13, 238-9.	1.1	4
152	How Will Paying for Performance Affect Patient Care?. AMA Journal of Ethics, 2006, 8, 162-165.	0.7	0
153	Do Integrated Medical Groups Provide Higher-Quality Medical Care than Individual Practice Associations?. Annals of Internal Medicine, 2006, 145, 826.	3.9	86
154	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
155	Cost Sharing: Authors Respond. Health Affairs, 2006, 25, 883-884.	5.2	0
156	Pay for Performance in Commercial HMOs. New England Journal of Medicine, 2006, 355, 1895-1902.	27.0	317
157	Clinical Practice Guidelines for Older Patients With Comorbid Diseases. JAMA - Journal of the American Medical Association, 2006, 295, 33.	7.4	3
158	Beyond Competition: The Normative Implications of Consumer-Driven Health Plans. Journal of Health Politics, Policy and Law, 2006, 31, 671-685.	1.9	14
159	What Is the Empirical Basis for Paying for Quality in Health Care?. Medical Care Research and Review, 2006, 63, 135-157.	2.1	271
160	The Geographic Distribution of Physicians Revisited. Health Services Research, 2005, 40, 1931-1952.	2.0	171
161	Direct-to-Consumer Advertising of Prescription Drugs: A Policy Dilemma. , 2005, , 169-183.		3
162	Early Experience With Pay-for-Performance. JAMA - Journal of the American Medical Association, 2005, 294, 1788-93.	7.4	537

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163	A Report Card On The Freshman Class Of Consumer-Directed Health Plans. Health Affairs, 2005, 24, 1592-1600.	5.2	37
164	Doughnut-Hole Economics. Health Affairs, 2004, 23, 129-135.	5.2	12
165	Comment: The economics of direct-to-consumer advertising of prescription-only drugs: prescribed to improve consumer welfare?. Journal of Health Services Research and Policy, 2004, 9, 39-42.	1.7	2
166	Quality Incentives: The Authors Respond. Health Affairs, 2004, 23, 285-285.	5.2	0
167	Awakening Consumer Stewardship of Health Benefits: Prevalence and Differentiation of New Health Plan Models. Health Services Research, 2004, 39, 1055-1070.	2.0	22
168	Paying For Quality: Providers' Incentives For Quality Improvement. Health Affairs, 2004, 23, 127-141.	5.2	336
169	Effects of Pharmaceutical Promotion on Adherence to the Treatment Guidelines for Depression. Medical Care, 2004, 42, 1176-1185.	2.4	143
170	Demand Effects of Recent Changes in Prescription Drug Promotion. Forum for Health Economics and Policy, 2003, 6, .	0.8	61
171	Direct-to-Consumer Advertising and Shared Liability for Pharmaceutical Manufacturers. JAMA - Journal of the American Medical Association, 2003, 289, 477.	7.4	19
172	Promotion of Prescription Drugs to Consumers. New England Journal of Medicine, 2002, 346, 498-505.	27.0	384
173	Transmission Of Financial Incentives To Physicians By Intermediary Organizations In California. Health Affairs, 2002, 21, 197-205.	5.2	27
174	The Economic impacts of the tobacco settlement. Journal of Policy Analysis and Management, 2002, 21, 1.	1.4	50
175	Managed care and efficient rationing. Journal of Health Care Finance, 2002, 28, 1-10.	0.6	26
176	Managed Care And Market Power: Physician Organizations In Four Markets. Health Affairs, 2001, 20, 187-193.	5.2	19
177	How Good a Deal Was the Tobacco Settlement?: Assessing Payments to Massachusetts. Journal of Risk and Uncertainty, 2000, 21, 235-261.	1.5	7
178	Risk sharing and the supply of mental health services. Journal of Health Economics, 2000, 19, 1047-1065.	2.7	9
179	Economic Grand Rounds: Psychiatric Provider Practice Management Companies: Adding Value to Behavioral Health Care?. Psychiatric Services, 1999, 50, 1011-1013.	2.0	4
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