

## MICHAEL ESMAN CHERNEW

### Office Address:

Department of HealthCare Policy  
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Place of Birth: Pittsburgh, PA

### Education:

1986 B.A. University of Pennsylvania, College of Arts & Sciences (Economics)

1986 B.S. University of Pennsylvania, Wharton School (Economics)

1993 Ph.D. Stanford University (Economics)

### Academic Appointments:

2013 – Present Leonard D. Schaeffer Professor of Health Care Policy  
Department of Health Care Policy, Harvard Medical School

2006 – 2013 Professor of Health Care Policy  
Department of Health Care Policy, Harvard Medical School

2004 – 2006 Professor, Department of Health Management and Policy, Department of Economics,  
University of Michigan

2002 – 2006 Co-Director, Robert Wood Johnson Scholars in Health Policy Research Program,  
University of Michigan

2000 – 2006 Associate Professor, Department of Internal Medicine, University of Michigan

1999 – 2004 Associate Professor, Department of Health Management and Policy, Department of  
Economics, University of Michigan

1996 – 2000 Assistant Professor, Department of Internal Medicine, University of Michigan

1993 – 1999 Assistant Professor, Department of Health Management and Policy, Department of  
Economics, University of Michigan

1991 – 1993 Lecturer, Department of Health Management and Policy, Department of Economics,  
University of Michigan

1991 Summer Intern, RAND Corporation

1990 – 1991 Research Assistant, Stanford University, Department of Economics

1986 – 1988 Management Consultant, Strategic Planning Associates, Washington, DC

### Committee Assignments:

2015 – Present Member, Commonwealth of Massachusetts Health Connector Board of Directors

2015 – Present Member, Health Care Payment Learning & Action Network (HCP LAN) Population-  
Based Payment (PBP) Work Group

2014 – Present Member, Quintiles Fellows Program, Leonard D. Schaeffer Center for Health Care  
Policy, University of Southern California

2013 – Present Member, Social Science Council, Harvard Medical School

2013 – Present Member, National Academy of Social Insurance

2013 – Present Member, Committee on National Statistics (CNSTAT), Institute of Medicine

2013 – 2014 Member, Special Commission to Review Public Payer Reimbursement Rates and Payment Systems for Health Care Services, Executive Office of Health and Human Services, Commonwealth of Massachusetts

2012 – 2015 Member, Standing Committee on Health Policy, Harvard University

2012 – 2014 Vice Chair, Medicare Payment Advisory Commission

2012 – 2014 Member, Core Metrics for Better Care, Lower Costs, and Better Health, Institute of Medicine

2011 – Present Chair, University Benefits Committee, Harvard University

2010 – 2014 Member, Standing Committee on Global Health and Health Policy, Harvard University

2010 – 2013 Member, Advisory Board of the Harvard Pediatric Health Services Research Fellowship Program, HMS; Children's Hospital Boston

2010 – 2012 Member, Technical Review Panel on the Medicare Trustees Report, Department of Health and Human Services

2010 – 2011 Member, Essential Health Benefits Committee, Institute of Medicine

2010 – Present Member, National Academy of Sciences, Institute of Medicine

2009 – Present Member, Panel of Health Advisors, Congressional Budget Office

2009 – 2011 Member, Harvard University Benefits Committee

2009 – 2011 Member, Standing Committee on Promotions, Reappointments, and Appointments, Harvard Medical School

2008 – 2012 Member, Medicare Payment Advisory Commission

2008 – 2011 Member, Board of Directors, Coalition for Health Services Research

2008 Member, Value Planning Committee, Evidence-Based Medicine Workshop, Institute of Medicine

2007 – 2008 Chair, Board of Directors, Coalition for Health Services Research

2006 – 2007 Vice Chair, Board of Directors, Coalition for Health Services Research

2005 – 2012 Member, Commission for a High Performing Health System, The Commonwealth Foundation

2005 – 2006 Treasurer, Board of Directors, Coalition for Health Services Research

2005 – 2006 Director, Center for Value Based Insurance Design, University of Michigan

2005 – 2006 Member, Disability in America Panel, Institute of Medicine

2005 – 2006 Member, Research Advisory Panel, National Committee for Quality Assurance

2004 – 2006 Chair, Residential Masters Committee, Department of Health Management and Policy, University of Michigan

2004 – 2006 Member, Scientific Advisory Panel, Disease Management Association of America

2004 – 2006 Member, Medical Device and Diagnostics Council-North America, International Society for Pharmacoeconomics & Outcomes

2004 Member, Technical Advisory Panel on Medicare Trustee Reports, Health Care Financing Administration, CMS

2003 – 2006 Member, Placement Committee, Coalition for Health Services Research

2002 Member, Expert Panel on Medical Technologies, Medicare Payment Advisory Commission

2001 – 2006 Member, Advocacy Committee, Coalition for Health Services Research

2000 Member, Technical Review Panel on the Medicare Trustees Reports, Health Care Financing Administration, CMS

1995 – 1998 Member, Breast and Cervical Cancer Control Program, State of Michigan Department of Public Health

1994 – 1995 Member, Advisory Committee on Prostate Cancer, State of Michigan Department of Public Health

**Editorial Boards:**

2014 – Present	Journal of Health Economics	Co-Editor
2006 – 2014	Health Services Research	Senior Associate Editor
2003 – Present	American Journal of Managed Care	Co-Editor
2003 – 2008	Health Affairs	Member
1999 – 2006	Health Services Research	Member

1999 – 2012 Medical Care Research and Review Member

### **Awards & Honors:**

2016 AcademyHealth Annual Research Meeting Best Abstract (Medicare)  
2014 Highly Cited Researchers (Top 1%) by Thompson Reuters  
2013 AcademyHealth Annual Research Meeting Article of the Year  
2012 HCUP Outstanding Article of the Year Award, Agency for Healthcare Research and Quality  
2009 Fifteenth Annual Health Care Research Award, National Institute for Health Care Management  
1999 Alice S. Hersh Young Investigator Award, Association of Health Services Research  
1998 John D. Thompson Award, Association of University Programs in Health Administration  
1997 Best Poster, International Society for Technology Assessment in Health Care  
1991 Olin Foundation Research Support  
1988-92 National Science Foundation Fellowship  
1986 Bernard Schanbaum Award, Best Undergraduate Sr. Honors Thesis in Economics  
1985 Phi Beta Kappa

### **Research Funding Information**

#### Past Funding (since 2000):

Duration: 07/15/00-06/30/05

Sponsor: Agency for Healthcare Research Quality

Title: Health Care Markets and Managed Care

Role: Principal Investigator

Duration: 03/01/01-12/31/06

Sponsor: The Robert Wood Johnson Foundation, Grant #040046

Title: Coverage Research Initiative

Role: Principal Investigator

Duration: 03/01/01- 08/31/02

Sponsor: The Robert Wood Johnson Foundation

Title: Rising Health Care Costs and the Decline in Insurance Coverage

Role: Principal Investigator

Duration: 08/01/02-07/31/03

Sponsor: The Robert Wood Johnson Foundation

Title: The Effect of Geographic Access to Jobs on Job Sorting and Access to Health Insurance

Role: Co-Investigator

Duration: 01/01/04-12/31/04

Sponsor: The Robert Wood Johnson Foundation

Title: Managed Care and Medicare Expenditures

Role: Principal Investigator

Duration: 09/01/04-08/31/05

Sponsor: Agency for Healthcare Research Quality

Title: The Role of Technology in Health Care Cost Growth

Role: Principal Investigator

Duration: 11/23/04-11/22/06

Sponsor: GlaxoSmithKline

Title: Evaluating Copay Changes at Marriott: Assessing the Impact on Diabetes, CHF and Asthma  
Role: Principal Investigator

Duration: 12/01/97-11/30/02  
Sponsor: NIH (5P60 DK20572-21)  
Title: Michigan Diabetes Research and Training Center  
Role: Principal Investigator

Duration: 02/01/99-07/31/01  
Sponsor: The Robert Wood Johnson Foundation, Grant number: 036331  
Title: Insurance Market Characteristics and the Number and Type of Medicare HMO Enrollees  
Role: Principal Investigator

Duration: 07/01/98-08/31/01  
Sponsor: Agency for Health Care Policy Research (1RO1HS09838-01)  
Title: Medical Innovation and Changes in Practice Patterns  
Role: Principal Investigator

Duration: 06/01/96-04/30/01  
Sponsor: NIH (1 RO1 CA62246)  
Title: Increasing Mammography: Older Minority and Rural Women  
Role: Co-Investigator

Duration: 01/01/99-02/18/01  
Sponsor: Agency for Health Care Policy Research (RO1H310050)  
Title: Employee Response to Health Plan Performance Ratings  
Role: Principal Investigator

Duration: 09/01/06-08/31/07  
Sponsor: Pharmaceutical Research and Manufacturers of America (PHRMA)  
Title: Feasibility of Value Based Management  
Role: Principal Investigator

Duration: 08/01/06-07/31/08  
Sponsor: Green Ribbon Health- Pfizer  
Title: Analysis of PDP Selection and Impact of PDP Benefit Design on Beneficiary Outcomes  
Role: Principal Investigator

Duration: 08/20/07-12/31/08  
Sponsor: Pfizer/ Lilly  
Title: Copays for High Value Services and Potential Conflicts with Quality Improvement Initiatives  
Role: Principal Investigator

Duration: 10/01/08-12/31/08  
Sponsor: Thomson Reuters  
Title: Regional Adherence Project  
Role: Principal Investigator

Duration: 03/01/08-07/31/09  
Sponsor: RWJF/HCFO  
Title: Variation in Health Care Cost Growth  
Role: Principal Investigator

Duration: 02/01/09-08/31/09

Sponsor: ARC/CMS  
Title: Understanding Spillover in Health Care Markets  
Role: Principal Investigator

Duration: 09/01/08-09/31/09  
Sponsor: Pharmaceutical Research and Manufacturers of America (PHRMA)  
Title: The Impact of Part D on Hospitalizations  
Role: Co-Investigator

Duration: 06/01/08- 05/31/10  
Sponsor: National Institute on Aging – R01 Supplement  
Title: Financial Incentives & Variations in the Care of Med. Beneficiaries  
Role: Co-Investigator

Duration: 11/01/09-07/31/10  
Sponsor: Astra Zeneca International  
Title: Evaluating Clinical and Economic Impact of VBID in Health Alliance Medical Plans  
Role: Principal Investigator

Duration: 12/01/09-5/31/11  
Sponsor: Pfizer Pharmaceutical Inc.  
Title: The Value of Patent Expiration  
Role: Principal Investigator

Duration: 07/01/09-07/31/11  
Sponsor: The Commonwealth Fund  
Title: Evaluating the Global Payment Model Developed by Blue Cross Blue Shield of Massachusetts  
Role: Principal Investigator

Duration: 04/01/10-03/31/12  
Sponsor: Universal American Corp  
Title: Impact of Medicare Advantage Plan on Clinical and Economic Outcomes  
Role: Principal Investigator

Duration: 08/01/10-07/31/12  
Sponsor: Pfizer Pharmaceutical Inc.  
Title: The Impact of the Alternative Quality Contract on Prescription Drug Use  
Role: Principal Investigator

Duration: 08/01/09-07/31/12  
Sponsor: National Institute on Aging – 1 R01AG034085  
Title: Medicare Part D Plan Generosity & Dual-Eligible Nursing Home Residents  
Role: Co-Investigator

Duration: 09/01/11-03/31/13  
Sponsor: Institute for Health Technology Studies (InHealth)  
Title: Impact of Bundled Payment on the Use of Medical Technologies  
Role: Principal Investigator

Duration: 01/01/11-08/31/13  
Sponsor: Institute of Medicine  
Title: Geographic Variation in Value for the Privately Insured Population  
Role: Principal Investigator

Duration: 08/01/10-08/31/13  
Sponsor: The Commonwealth Fund  
Title: Geographic Variations in Spending among the Privately Insured  
Role: Principal Investigator

Duration: 01/01/11-09/30/13  
Sponsor: Charles H. Hood Foundation  
Title: Evaluating the Impact of Global Payments on Pediatric Care  
Role: Principal Investigator

Duration: 09/01/13-03/01/14  
Sponsor: Gary and Mary West Health Policy Center, Inc.  
Title: Expanding Insurance Options for Chronic Disease Care: Quality, Cost and Policy Implications  
Role: Principal Investigator

Duration: 08/01/12-06/01/14  
Sponsor: The Robert Wood Johnson Foundation, Grant No. 70266  
Title: Policy Perspectives in Spending Growth  
Role: Principal Investigator

Duration: 01/01/13-08/31/14  
Sponsor: The Commonwealth Fund  
Title: Evaluating the Impact of a Tiered Hospital Network on Costs  
Role: Principal Investigator

Duration: 09/01/11-08/31/14  
Sponsor: The Commonwealth Fund  
Title: Evaluating the Clinical and Economic Impact of the Alternative Quality Contract  
Role: Principal Investigator

Duration: 10/01/13-09/30/14  
Sponsor: Pharmaceutical Research and Manufacturers of America (PhRMA)  
Title: Understanding the Opportunity for Better Use of Medicines to Treat Diabetes  
Role: Principal Investigator

Duration: 11/15/13-11/14/14  
Sponsor: Robert Wood Johnson Foundation, Grant No. 71402  
Title: Evaluation of Multi-Payer, Medical Episode-based Payment Reform in Arkansas  
Role: Principal Investigator

Duration: 02/15/13-11/30/14  
Sponsor: Laura and John Arnold Foundation  
Title: Health Care Markets and Regulation Lab: Seed Funding  
Role: Principal Investigator

Duration: 10/01/13-11/30/14  
Sponsor: Pfizer Pharmaceutical, Inc.  
Title: Medical Technology in recent Compression of Morbidity in the U.S. Elderly  
Role: Principal Investigator

Duration: 04/15/09-12/31/14  
Sponsor: National Institute on Aging – P01 AG032952  
Title: The Role of Private Plans in Medicare

Role: Project PI, Co-Investigator

Duration: 08/01/09-01/31/15

Sponsor: National Institute on Aging – 1 R01 AG034417

Title: Income Effects and Current Law Forecasts of Health Care Spending Growth

Role: Principal Investigator

Active Funding:

Duration: 01/01/13-12/31/17

Sponsor: CareFirst BlueCross BlueShield

Title: Evaluation of CareFirst Patient-Centered Medical Home

Role: Principal Investigator

Duration: 10/01/14-09/31/17

Sponsor: Laura and John Arnold Foundation

Title: Healthcare Markets and Regulation Lab

Role: Director

Duration: 09/24/12-06/30/17

Sponsor: NIH R01HD075121 (Newhouse/Hsu)

Title: Natural Experiment of Value-Based Incentives for Preventive Services

Role: Co-Investigator

Duration: 05/09/12-08/31/16

Sponsor: R01CA164023 (Newhouse/Hsu)

Title: Screening for Free: A Value-Based Insurance Design

Role: Co-Investigator

Duration: 06/01/13-04/30/16

Sponsor: NIH/NIDA R01 DA035214 (Huskamp/Barry)

Title: Substance Use Disorder Treatment under New Payment and Delivery Models

Role: Co-Investigator

Duration: 08/01/13-07/31/17

Sponsor: The Commonwealth Fund 20130499 (Huskamp/Barry)

Title: Impact of Accountable Care Organization Models with Risk Based Payments on Individuals with Mental Illness

Role: Co-Investigator

Duration: 09/26/13-08/31/18

Sponsor: NIH/NIMH U01 MH103018 (Normand, Sharon-Lise/ Huskamp, Haiden)

Title: Technology Diffusion under New Payment and Delivery Models

Role: Co-Investigator

Duration: 09/01/13-08/31/16

Sponsor: NIH/National Cancer Institute R21CA172892-01 (Keating)

Title: Linking State Registry and All Payer Claims Data to Study Cancer Care

Role: Co-Investigator

Duration: 12/15/13-06/30/16

Sponsor: Robert Wood Johnson Foundation, Grant No. 71408 (McWilliams/ Chernew)

Title: Effects of Physician Concentration, Physician-hospital Integration, and ACOs on Prices in Commercial Health Care Markets

Role: Co-Principal Investigator  
 Duration: 07/01/15-03/31/20  
 Sponsor: NIH/NIA P01AG032952 (Newhouse, Joseph)  
 Title: Medicare in a Restructured Delivery System  
 Role: Co-Investigator

Duration: 09/01/2015 - 08/31/2020  
 Sponsor: AHRQ U19HS024072 (Landrum/ NBER)  
 Title: Measuring the Clinical and Economic Outcomes Associated with Delivery Systems  
 Role: Co-Investigator

Duration: 11/01/15-10/31/22  
 Sponsor: CMS via Abt Associates (Hassol/Keating)  
 Title: Evaluation of the Oncology Care Model  
 Role: Co-Investigator

Duration: 09/21/2015 – 05/31/2016  
 Sponsor: Medicare Payment Advisory Commission (MedPAC) MED15P0082  
 Title: Conceptual considerations for Accountable Care Organization (ACO) development  
 Role: Principal Investigator

## Teaching

### Master's Degree

HMP 660 Micro Economics	2004/2005	University of Michigan
HMP 663 Health Economics	2005/2006	University of Michigan
HMP 542 Cost Utility Analysis	2005/2006	University of Michigan

### Doctoral Degree

HMP826 Applied Econometrics	2004/2005	University of Michigan
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### Undergraduate

Econ 438 Health Economics	2005/2006	University of Michigan
EDC-186 Intro to Health Care Policy	2008	Harvard University
HC 750 Health Care Policy	2008-2013	Harvard Medical School
US in the World 11: American HCP	2010	Harvard Medical School

## Dissertation committees

### Chair or Co-Chair

Patricia Butler	1996	MD, DrPh	Medicaid HMO Enrollees in the Emergency Room: Use of Non-Emergency Care
Dennis Scanlon	1998	PhD	Health Plan Report Cards and Managed Care Enrollment
William E. Welton	1999	MD, DrPh	The Impact of Differences in Market Structure on Community-Wide Medicare Expenditures
Maulik Joshi	2000	MD, DrPh	Assessing Hospital Quality of Care: Is There a Link Between Accreditation and Mortality?
Carlotta Gabard	2001	MD, PhD	Obstetrical Care under Capitation
Erin Fries Taylor	2003	PhD	Consumer Behavior and Health Insurance Among Two Populations: Elderly Medicare Beneficiaries and Low-Income Parents



Lindsay Sabik	2010	PhD	Markey Dynamics and Health Care for the Uninsured
Zirui Song	2012	MD, PhD	Financial Incentives in Health Care Reform: Evaluating Payment Reform in Accountable Care Organizations and Competitive Bidding in Medicare

### Member

Jeffrey Burkhardt	1995	PhD	Non-Acute Inpatient Specialization
Kevin Frick	1996	PhD	Essays on Health Insurance Markets: Asymmetric Information and Multiple Periods
Mary Kelly	2001	MD, DrPh	Factors Predicting Hospital Readmissions of Normal Newborns
Berhanu Alemayehu	2001	MD, DrPh	The Lifetime Distribution of Health Care Costs
Laura Shone	2004	MD, DrPh	Deterring Crowd-Out in State Children's Health Insurance Programs: How Would Waiting Periods Affect Children in New York?
Betsy Thompson	2004	MD, DrPh	Health Care Coverage and a Usual Source of Care: What are Their True Effects on the Receipt of Mammography?
Charlotte Hebler	2005	MD, DrPh	Smoking and Hospital Costs in the First Year of Life
Eiji Mangyo	2005	PhD	Three Essays on Economics of Health in Developing Countries
Karoline Mortensen	2006	PhD	Heterogeneity of the Uninsured: An Exploration of Personal Characteristics, Utilization, and Spells of the Intermittently Uninsured
Ezra Golberstein	2008	PhD	Essays on Long-Term Care and Aging
Thomas Walsh	2011	PhD	Explaining Hospital Costs and Utilization in the Nationwide Inpatient Sample
Samuel Kina	2011	PhD	Competition, Regulation, and Entry Timing in Marketing for Pharmaceutical line Extensions
Jeannie Biniek	2018	PhD	Provider Characteristics and Payment Model Incentives Affecting the Integration of New Technology

### Bibliography

#### Editorials/ Commentaries/ Proceedings without Peer Review

1. Scanlon DP, **Chernew ME**, Lave JR. Consumer Health Plan Choice: Current Knowledge and Future Directions. *Annual Review of Public Health*, 1997; 18:507-528.
2. **Chernew ME**, Escarce JJ. Consumer response to quality information. *Medical Care*, 1998; 36(7):943-944.
3. **Chernew ME**, Gowrisankaran G, Scanlon DP. Learning and the Value of Information, the Case of Health Plan Report Cards. NBER working paper # 8589. 2001.
4. Scanlon DP, **Chernew ME**, Doty H. Evaluating the impact of Value-Based Purchasing Initiatives: A guide for purchasers. Publication No. 02-0029. Washington, DC: Agency for Healthcare Research and Quality. 2002.
5. McMahon LF Jr., Hayward R, Saint S, **Chernew ME**, Fendrick AM. Univariate solutions in a multivariate world: Can we afford to practice as in the "good old days"? *American Journal of Managed Care*, 2005; 11(8):473-6.
6. Fendrick AM, **Chernew ME**. Value-Based Insurance Design: A 'clinically sensitive' approach to preserve quality of care and contain costs. *American Journal of Managed Care*, 2006; 12(1):18-20.

7. Fendrick AM, **Chernew ME**. Value-Based Insurance Design: A 'clinically sensitive, fiscally responsible' approach to mitigate the adverse clinical effects of high-deductible consumer-directed health plans. *Journal of General Internal Medicine*, 2007; 22(6):890-1.
8. **Chernew ME**. Comments on AC Enthoven's "The U.S. Experience with Managed Care and Managed Competition". Conference Series; Federal Reserve Bank of Boston, 2005, June: 119-125.
9. **Chernew ME**, Fendrick AM. The Business Case for Comparative Effectiveness Research. "Learning What Works Best. The Nation's Need for Evidence on Comparative Effectiveness in Health Care." Institute of Medicine. March, 2007. Appendix Seven: 1-13.
10. **Chernew ME**, Newhouse JP. What does the RAND Health Insurance Experiment tell us about the impact of patient cost sharing on health outcomes?" *American Journal of Managed Care*, 2008; 14(7): 412-414.
11. **Chernew ME**, Shah MR, Wegh A, Rosenberg SN, Juster IA, Rosen AB, Fendrick AM. Confronting hysteria: A reply to Fairman and Curtiss. *Journal of Managed Care Pharmacy*, 2008; 14(3): 324-325.
12. **Chernew ME**, Fendrick AM. Value and increased cost sharing in the American health care system." *Health Services Research*, 2008; 43(2):451-7.
13. **Chernew ME**, Fendrick AM. Clinically sensitive cost-sharing for prescription drugs. Thinking beyond the Silos." *Medical Care*, 2009; 47(5):505-507.
14. **Chernew ME**, Hirth R, Cutler D. Increased spending on health care: Long-term implications for the nation. *Health Affairs*, 2009; 28(5):1253-5.
15. Fendrick AM, **Chernew ME**. Value based insurance design: maintaining a focus on health in an era of cost containment. *American Journal of Managed Care*, 2009; 15(6):338-43.
16. **Chernew ME**, Sabik L, Chandra A, Newhouse JP. Ensuring the fiscal sustainability of health care reform," *New England Journal of Medicine*, 2010; 362(1):1-3.
17. **Chernew ME**, Baicker K, Hsu J. The specter of financial Armageddon—health care and federal debt in the United States. *New England Journal of Medicine* 2010; 326(13):1166-8.
18. **Chernew ME**. Reforming payment for health care services: A comment on Leigh et al. and Federman et al. *Archives of Internal Medicine*, 2010; 170(90):1742-4.
19. **Chernew ME**. The bundled payment systems: Can they be more successful this time? *Health Services Research*, 2010; 45(5 Pt. 1):1141-7.
20. Baicker K, **Chernew ME**. The economics of financing Medicare. *New England Journal of Medicine*, Perspective 2011; 365(4):e7.
21. Afendulis CC, **Chernew ME**. State-level Impacts of Medicare Part D. *American Journal of Managed Care*, 2011; 17 Suppl 12:S.
22. **Chernew ME**, Goldman DP, Axeen S. How much savings can we wring from Medicare? *New England Journal of Medicine*, Perspective. 2011; 365(14):e29
23. **Chernew ME**. Why physicians should like bundled payment. Editorial. *Health Services Research*, 2011; 46(6pt1):1693-7.
24. Alhassani A, Chandra A, **Chernew ME**. The sources of the SGR "hole". *New England Journal of Medicine*, Perspective. 2012 Jan 26; 366(4):289-91. Epub 2011 Dec 21.
25. Emanuel E, Tanden N, Altman S, Armstrong S, Berwick D, de Brantes F, Calsyn M, **Chernew ME**, Colmers J, Cutler A, Daschle T, Kocher B, Milstein A, Oshima E, Reinhardt U, Rosenthal M, Sharfstein J, Shortell S, Stern A, Orszag P, Spiro T. A systemic approach to containing health care spending. *The New England Journal of Medicine*, 2012; 367:949-954.

26. **Chernew ME**, Frank RG, Parente S. Slowing Medicare spending growth: Reaching for common ground. *American Journal of Managed Care*, 2012; 18(8):465-8.
27. Song Z, Cutler DC, **Chernew ME**. Potential consequences of reforming Medicare into a competitive bidding system. *Journal of the American Medical Association*, 2012; 308(5):459-60. PMID: PMC3544169
28. **Chernew ME**, Newcomer LN, Swain SM. Treatment and cost implications of pertuzumab. *American Journal of Managed Care*, 2012; 18(4 Spec No.):SP151-3.
29. Song Z, **Chernew ME**. Spending and behavior change: the authors reply. *Health Affairs*, 2012 Nov; 31(11):2592.
30. **Chernew ME**, McKellar R, Aubry W, Beck R, Benner J, Berger JE, Fendrick AM, Forma F, Goldman D, Peters HA, Killon R, Lakdawalla D, Owens DK, Stahl J. Comparative effectiveness research and formulary placement: The case of diabetes. *American Journal of Managed Care*, 2013; 19(2):93-96.
31. Dusetzina SB, Dalton VK, **Chernew ME**, Pace L, Bowden G, Fendrick AM. Cost of contraceptive methods to privately insured women in the U.S. *Women's Health Issues*, 2013, 23(2):e69-71.
32. **Chernew ME**, Goldman D. Proposal 1: Transitioning to bundled payments in Medicare. The Hamilton Project, February 2013.
33. Golberstein E, **Chernew ME**. Medicare supplemental coverage: the authors reply. *Health Affairs*, 2013; 32(9):1687.
34. McWilliams JM, Landon BE, **Chernew ME**. Spending and quality of care for Medicare beneficiaries in Massachusetts – reply. *Journal of the American Medical Association*, 2013; 310(24):2675-6.
35. Fendrick AM, **Chernew ME**. Celebrating our 20<sup>th</sup> anniversary. *American Journal of Managed Care* 2015 Jan; 21(1):27-8.
36. **Chernew ME**, Fendrick AM. A new chapter in health care reform. *American Journal of Managed Care*, 2016 Nov; 22(11):711.
37. Baicker K, **Chernew ME**. Alternative Alternative Payment Models. *Journal of the American Medical Society Internal Medicine*; Published online January 3, 2017.
38. Fendrick AM, **Chernew ME**. Precision Benefit Design—Using “Smarter” Deductibles to Better Engage Consumers and Mitigate Cost-Related Nonadherence. *Journal of the American Medical Association Internal Medicine*. Published online January 9, 2017.

### Book Chapters

1. Leibowitz A, **Chernew ME**. “The Firm's Demand for Health Insurance,” In A Look at health benefits and the workforce. Washington D.C.: U.S. Dept. of Labor, Pension and Welfare Benefits Administration, 1992.
2. McLaughlin CG, **Chernew ME**. “Health Insurance, Economics and Risk Values,” In International Encyclopedia of Social and Behavioral Sciences, eds. Smelser NJ, Baltes PB. Elsevier Sciences, 2000.
3. Cawley J, **Chernew ME**, McLaughlin C. “HCFA Payments Necessary to Support HMO Participation in Medicare Managed Care,” In Frontiers in Health Policy Research, Volume 5, ed. A Garber. Cambridge, MA: National Bureau of Economic Research. 2002.
4. **Chernew ME**. “Covering America: A Commentary on Three Approaches,” In Covering America: Real Remedies for the Uninsured, Volume 3. Washington, DC: Economic and Social Research Institute. 2003.

5. Fendrick AM, **Chernew ME**. "Value in Health Care: Accounting for Cost, Quality, Safety, Outcomes and Innovation." A Learning Healthcare System Workshop Summary. National Academy of Sciences, 2010.
6. **Chernew ME**, May D. "Health Care Cost Growth," In The Oxford Handbook of Health Economics, eds. Smith PC, Glied SA. Oxford University Press. 2010.
7. **Chernew ME** and Newhouse JP. Chapter 1: "Health Care Spending Growth," In Handbook of Health Economics, eds. Pauly MV, McGuire TG, and Pedro PB. Pages 1-43. Elsevier.

### Peer Reviewed Publications

1. Hornberger J, **Chernew ME**, Petersen J, Garber A. A multivariate analysis of mortality and hospital admissions with high flux dialysis. *Journal of the American Society of Nephrology*, 1992; 3(6):1227-1237.
2. Hornberger J, Garber A, **Chernew ME**. Is high flux dialysis cost effective? *International Journal of Technology Assessment in Health Care*, 1993; 9(1): 85-96.
3. **Chernew ME**. The impact of non-IPA HMOs on the number of hospitals and capacity. *Inquiry*, 1995; 32(2):143-154.
4. **Chernew ME**. HMO use of diagnostic tests: A review of the evidence. *Medical Care Research and Review*, 1995; 52(2):196-222.
5. Fendrick AM, **Chernew ME**, Hirth RA, Bloom BS. Alternative management strategies for patients with suspected peptic ulcer disease. *Annals of Internal Medicine*, 1995; 123(4):260-268.
6. **Chernew ME**, Scanlon D, Hayward R. Managed care and the duplication of open heart surgery facilities in California. *Health Affairs*, 1996; 15(1):191-201.
7. Bloom BS, Fendrick AM, **Chernew ME**, Patel P. Clinical and economic effects of mupirocin on preventing staphylococcus aureus in hemodialysis patients: A decision analysis. *American Journal of Kidney Disease*, 1996; 27(5):687-694.
8. Fendrick AM, Hirth RA, **Chernew ME**. Differences between generalist and specialist physicians regarding *helicobacter pylori* and peptic ulcer disease. *American Journal of Gastroenterology*, 1996; 91(8):1544-1548.
9. Fendrick AM, **Chernew ME**, Hirth RA, Menton D. Understanding the behavioral response to medical innovation. *American Journal of Managed Care*, 1996; 2(7):793-799.
10. Hirth RA, Fendrick AM, **Chernew ME**. Specialist and generalist physicians' adoption of antibiotic therapy to eradicate *helicobacter pylori* infection. *Medical Care*, 1996; 34(12):1199-1204.
11. Olson AD, Fendrick AM, Deutsch D, **Chernew ME**, Hirth RA, Patel C, Bloom BS. Evaluation of initial noninvasive therapy in pediatric patients presenting with suspected peptic ulcer disease. *Gastrointestinal Endoscopy*, 1996; 44(5):554-561.
12. Porter AT, Zimmerman J, Ruffin M, **Chernew ME**, Callaghan C, Davis R, Lee F, Montie J, Swanson GM, Osterling JE. Recommendations of the first Michigan conference on prostate cancer. *Urology*, 1996; 48(4):519-533.
13. Fendrick AM, **Chernew ME**, Hirth RA, Bloom BS. Immediate endoscopy or initial serological testing for H. pylori for patients with suspected ulcer disease: A cost-effectiveness Analysis. *Yale Journal of Biology and Medicine*, 1996; 69(2):187-195.
14. **Chernew ME**, Fendrick AM, Hirth RA. Managed care and medical technology: Implications for health care cost Growth. *Health Affairs*, 1997; 16(2):196-206.
15. **Chernew ME**, Frick K, McLaughlin CG. Worker demand for health insurance in the non-group market: A note on the calculation of welfare loss. *Journal of Health Economics*, 1997; 16:375-380.

16. **Chernew ME**, Frick K, McLaughlin CG. The demand for health insurance by low income workers: Can reduced premiums achieve full coverage? *Health Services Research*, 1997; 32(4):453-470.
17. Fendrick AM, McCort J, **Chernew ME**, Hirth RA, Patel C, Bloom BS. Immediate helicobacter pylori eradication for patients with previously documented peptic ulcer disease: Clinical and economic effects. *American Journal of Gastroenterology*, 1997; 92(11):2017-24.
18. **Chernew ME**, Scanlon D, Hayward R. Insurance type and choice of hospital for coronary bypass graft surgery. *Health Services Research*, 1998; 33(3):447-466.
19. Scanlon DP, **Chernew ME**, Sheffler S, Fendrick AM. Health plan report cards: Exploring differences in plan ratings. *Journal on Quality Improvement*, 1998; 24(1):5-20.
20. **Chernew ME**, Scanlon DP. Health plan report cards and insurance choice. *Inquiry*, 1998; 35(1):9-22.
21. **Chernew ME**, Hirth RH, Sonnad SS, Ermann R, Fendrick AM. Managed care, medical technology, and health care cost growth: A review of the evidence. *Medical Care Research and Review*, 1998; 55(3):259-288.
22. Miller EA, Weissert WG, **Chernew ME**. Managed care for elderly people: A compendium of findings. *American Journal of Medical Quality*, 1998; 13(3):127-140.
23. Chung KC, Walter MR, Greenfield MVH, **Chernew ME**. Endoscopic versus open carpal tunnel release: A cost effectiveness analysis. *Journal of Plastic and Reconstructive Surgery*, 1998; 102(4):1089-1099.
24. Fendrick AM, **Chernew ME**, Hirth RA, Bloom BS, Bandekar RR, Scheiman JM. Clinical and economic effects of population-based H. pylori screening. *Archives of Internal Medicine*, 1999; 159:142-148.
25. Hirth RA, Bloom BS, **Chernew ME**, Fendrick AM. Willingness to pay for diagnostic certainty: A comparison among patients, physicians, and managed care executives. *Journal of General Internal Medicine*, 1999; 14:193-195.
26. Scanlon DP, **Chernew ME**. HEDIS measures and managed care enrollment. *Medical Care Research and Review*, 1999; 56(2):60-84.
27. Hirth RA, **Chernew ME**. The physician labor market in a managed care-dominated environment. *Economic Inquiry*, 1999; 37(2):282-294.
28. **Chernew ME**, Frick KD. The impact of managed care on the existence of equilibrium in health insurance markets. *Journal of Health Economics*, 1999; 18:573-592.
29. Hirth RA, Bloom BB, **Chernew ME**, Fendrick AM. Patient, physician, and payer perceptions and misperceptions of willingness to pay for diagnostic certainty. *International Journal of Technology Assessment in Health Care*, 2000; 16(1):35-49.
30. Scanlon DP, **Chernew ME**. Managed care and performance measurement: Implications for insurance markets. *North Atlantic Actuarial Journal*, 2000; 2(2):128-138.
31. **Chernew ME**, Encinosa WE, Hirth RA. Optimal health insurance: The case of observable, severe illness. *Journal of Health Economics*, 2000; 19:585-609.
32. Hirth RA, **Chernew ME**, Miller E, Fendrick AM, Weissert WG. Willingness to pay for quality-adjusted life year: In search of a standard. *Medical Decision Making*, 2000; 20(3):332-342.
33. **Chernew ME**, Cowen ME, Kirking DM, Smith DG, Valenstein P, Fendrick AM. Pharmaceutical cost growth under capitation: A case study. *Health Affairs*, 2000; 19(6):266-276.
34. Hirth RA, **Chernew ME**, Orzol SM. Ownership, competition, and adoption of new technologies and cost-saving practices in a fixed price environment. *Inquiry*, 2000; 37(3):282-294.
35. Langa KM, **Chernew ME**, Kabeto MU, Katz SJ. The explosion in paid home health care in the 1990's: Who received the additional services? *Medical Care*, 2001; 39(2):147-157.

36. Scheiman JM, Bandekar RR, **Chernew ME**, Fendrick AM. H pylori screening for individuals requiring chronic NSAID therapy: A decision analysis. *Alimentary Pharmacology and Therapeutics*, 2001; 15(1):63-71.
37. Weissert W, **Chernew ME**, Hirth R. Beyond managed long-term care: Paying for home care based upon risks of adverse outcomes. *Health Affairs*, 2001; 20(3):172-180.
38. Hayman JA, Langa KM, Kabeto MU, Katz SJ, DeMonner SM, **Chernew ME**, Slavin MB, Fendrick AM. Estimating the cost of informal caregiving for elderly patients with cancer. *Journal of Clinical Oncology*, 2001; 19(13):3219-3225.
39. **Chernew ME**, Weissert WG, Hirth RA. Heterogeneity of risk in a managed home health care population. *Medical Care*, 2001; 39(9):1002-1013.
40. **Chernew ME**. General equilibrium and marketability in the health care industry. *Journal of Health Politics, Policy and Law*. 2001; 26(5):885-897.
41. Langa KM, **Chernew ME**, Kabeto MU, Herzog AR, Ofstedal MB, Willis RJ, Wallace RB, Mucha LM, Straus WL, Fendrick AM. National estimates of the quantity and cost of informal caregiving for the elderly with dementia. *Journal of General Internal Medicine*, 2001; 16(11):770-778.
42. Moran JR, **Chernew ME**, Hirth RA. Preference diversity and the breadth of employee health insurance options. *Health Services Research*, 2001; 36(5):911-934.
43. **Chernew ME**, Smith DG, Kirking DM, Fendrick AM. Decomposing pharmaceutical cost growth in different types of health plans. *American Journal of Managed Care*, 2001; 7(7):667-673.
44. Scanlon DP, **Chernew ME**, Doty HE, Smith DG. Options for assessing PPO quality: Accreditation and profiling as accountability strategies. *Medical Care Research and Review*, 2001; 58(Supp 1):70-100.
45. Fendrick AM, Smith DG, **Chernew ME**, Shah SN. Benefit-based copay for prescription drugs: Patient contribution based on total benefits, not drug acquisition cost. *American Journal of Managed Care*, 2001; 7(9):861-867.
46. Ladabaum U, Chopra CL, Huang G, Scheiman JM, **Chernew ME**, Fendrick AM. Aspirin as an adjunct to screening for prevention of sporadic colorectal cancer: A cost-effectiveness analysis. *Annals of Internal Medicine*, 2001; 135(9):769-781.
47. Scanlon DP, **Chernew ME**, McLaughlin CG, Solon G. The impact of health plan report cards on managed care enrollment. *Journal of Health Economics*, 2002; (21)1:19-41.
48. Shureiqi I, Cantor SB, Lippman SM, Brenner DE, **Chernew ME**, Fendrick AM. Clinical and economic impact of multiple gated acquisition scan monitoring during anthracycline therapy. *British Journal of Cancer*, 2002; 86(2):226-232.
49. Fendrick AM, Bandekar RR, **Chernew ME**, Scheiman JM. Role of initial NSAID choice and patient risk factors in the prevention of NSAID gastropathy: A decision analysis. *Arthritis and Rheumatism*, 2002; 47:36-43.
50. **Chernew ME**, Gowrisankarin G, Fendrick AM. Payer type and the returns to bypass surgery: Evidence from hospital entry behavior. *Journal of Health Economics*, 2002; 21(3):451-474.
51. Blitz SG, Cram P, **Chernew ME**, Monto AS, Fendrick AM. Diagnostic testing or empirical neuraminidase inhibitor therapy for patients with influenza-like illness: What a difference a day makes? *American Journal of Managed Care*, 2002; 8(3):221-227.
52. Langa KM, Vijan S, Hayward RA, **Chernew ME**, Blaum CS, Kabeto MU, Weir DR, Katz SJ, Willis RJ, Fendrick AM. Informal caregiving for diabetes and diabetic complications among elderly Americans. *Journal of Gerontology: Social Sciences*, 2002; 57(3):S177-S186.
53. McLaughlin CG, **Chernew ME**, Taylor EF. Medigap premiums and Medicare HMO enrollment. *Health Services Research*, 2002, 37(6):1445-1468.

54. Weissert WG, **Chernew ME**, Hirth R. Titrating versus targeting home care services to frail elderly clients: An application of agency theory and cost-benefit analysis to home care policy. *Journal of Aging and Health*, 2003; 15(1):99-123.
55. Ubel PA, Hirth RA, **Chernew ME**, Fendrick AM. What is the price of life and why doesn't it increase at the rate of inflation? *Archives of Internal Medicine*, 2003; 163(14):1637-1641.
56. **Chernew ME**, Hirth RA, Cutler DM. Increased spending on health care: How much can the United States afford? *Health Affairs*, 2003; 22(4):15-25.
57. Hirth RA, **Chernew ME**, Turenne MN, Pauly MV, Orzol SM, Held PJ. Chronic illness, treatment choice and workforce participation. *International Journal of Health Care Finance and Economics*, 2003; 3(3):167-181.
58. Harrison RV, Janz NK, Wolfe RA, Tedeschi PJ, **Chernew ME**, Stross JK, Huang X, McMahon LF. Personalized letter increases mammography among long term noncompliant Medicare beneficiaries: A randomized trial. *Medical Care*, 2003; 41(3):375-85.
59. Weissert WG, Hirth RA, **Chernew ME**, Diwan S, Kim J. Case management: Effects of improved risk and value information. *Gerontologist*, 2003; 43(6):797-805.
60. Carpenter D, **Chernew ME**, Smith DG, Fendrick AM. Approval times for new drugs: Does the funding source for FDA staff matter? *Health Affairs*, 2003; Web-Exclusive Supplement (W3): 618-624.
61. **Chernew ME**, Wodchis W, Scanlon DP, McLaughlin CG. Overlap in HMO physician networks. *Health Affairs*, 2004; 23(2):91-101.
62. Langa KM, Fendrick AM, **Chernew ME**, Kabeto MU, Paisley KL, Hayman JA. Out-of-pocket health care expenditures among older Americans with cancer. *Value in Health*, 2004; 7(2):186-194.
63. Chernew ME, Gowrisankaran G, McLaughlin CG, Gibson TB. Quality and employers' choice of health plans. *Journal of Health Economics*, 2004; 23:471-492.
64. **Chernew ME**, Jacobson PD, Hofer TP, Aaronson KD, Fendrick AM. Barriers to constraining health care cost growth. *Health Affairs*, 2004; 23(6):122-128.
65. **Chernew ME**, Cutler DM, Keenan P. Increasing health insurance costs and the decline in insurance coverage. *Health Services Research*, 2005; 40(4):1021-1039.
66. Cawley JH, **Chernew ME**, McLaughlin CG. HMO participation in Medicare+Choice. *Journal of Economics and Management Strategy*, 2005; 14(3):543-574.
67. Scanlon DP, Swaminathan SS, **Chernew ME**, Bost J, Shevock J. Competition and health plan performance: evidence from health maintenance organization insurance markets. *Medical Care*. 2005; 43(4): 338 – 346.
68. **Chernew ME**, Goldman D, Pan F, Shang B. Disability and health care spending among Medicare beneficiaries. *Health Affairs*, 2005; 24 Suppl 2: W5R42-52.
69. **Chernew ME**, Cutler DM, Keenan PS. Charity care, risk pooling, and the decline in private health insurance. *AER Papers and Proceedings*. 2005; 209-214.
70. Gruis KL, **Chernew ME**, Brown DL. The cost-effectiveness of early noninvasive ventilation for ALS patients. *BMC Health Services Research*, 2005; 5:58. PMC1208883
71. Fendrick AM, **Chernew ME**. Value-based insurance design: aligning incentives to bridge the divide between quality improvement and cost containment. *American Journal of Managed Care*, 2006; 12 Spec:SP5-SP10.
72. Hirth RA, Baughman RA, **Chernew ME**, Shelton EC. Worker preferences, sorting and aggregate patterns of health insurance coverage. *International Journal of Health Care Finance Economics*, 2006; 6(4):259-77.

73. Scanlon DP, Swaminathan S, **Chernew ME**, Lee W. Market and plan characteristics related to HMO quality and improvement. *Medical Care Research and Review*, 2006; 63(6 Suppl):56S-89S.
74. Scanlon DP, Swaminathan S, **Chernew ME**, Lee W. Competition in health insurance markets: limitations of current measures for policy analysis. *Medical Care Research and Review*, 2006; 63(6 Suppl):37S-55S.
75. Keenan PS, Cutler DM, **Chernew ME**. The 'graying' of group health insurance. *Health Affairs*, 2006; 25(6):1497-506.
76. **Chernew ME**, Rosen AB, Fendrick AM. Rising out-of-pocket costs in disease management programs. *American Journal of Managed Care*, 2006; 12(3):150-4.
77. Taylor EF, **Chernew ME**, McLaughlin CG. Do determinants of Medicare supplemental coverage choice vary by income? *Journal of Health Social Policy*, 2006; 22(1):1-18.
78. Nallamothu BK, Rogers MA, **Chernew ME**, Krumholz HM, Eagle KA, Birkmeyer JD. Opening of specialty cardiac hospitals and use of coronary revascularization in Medicare beneficiaries. *Journal of the American Medical Association*, 2007; 297(9):962-8.
79. **Chernew ME**, Rosen AB, Fendrick MA. Value-based insurance design. *Health Affairs*, 2007; 26(2): w195-w203.
80. Patel MS, **Chernew ME**. The impact of the adoption of gag laws on trust in the patient physician relationship. *Journal of Health Policy Politics and Law*, 2007; 32(5):819-842
81. Hirth RA, Grazier K, **Chernew ME**, Okeke EN. Insurer competitive strategy and enrollment in newly offered Preferred Provider Organizations (PPO). *Inquiry*, 2007-2008; 44(4):400-11.
82. **Chernew ME**, Shah M, Wegh A, Rosenberg A, Juster IA, Rosen AB, Sokol MC, Yu-Isenberg K, Fendrick AM. Impact of decreasing copayments on medication adherence within disease management program. *Health Affairs*, 2008; 27(1):103-12.
83. Brown DL, Hoffman SN, Jacobs TL, Gruis KL, Johnson SL, **Chernew ME**. CT angiography is cost-effective for confirmation of internal carotid artery occlusions. *Journal of Neuroimaging*, 2008; 18(4):355-359.
84. Shone L, Lantz P, Dick AW, **Chernew ME**, Szilagyi P. Crowd-out in the State Children's Health Insurance Program (SCHIP): Incidence, enrollee characteristics and experiences, and potential impact on New York's SCHIP. *Health Services Research*, 2008; 43(1 Pt 2):419-34. PMC2323128
85. **Chernew ME**, Gowrisankaran G, Scanlon D. Learning and the value of information: Evidence from health plan report cards. *Journal of Econometrics*, 2008; 144(1):156-174.
86. Pan F, **Chernew ME**, Fendrick AM. Impact of fixed-dose combination drugs on adherence to prescription medications. *Journal of General Internal Medicine*, 2008; 23(5):611-4. PMC2324153
87. **Chernew ME**, Gibson TB. Cost sharing and HEDIS performance. *Medical Care Research and Review*, 2008; 65(6): 713-728. NIHMDID: 165995
88. **Chernew ME**, Gibson TB, Yu-Isenberg K, Sokol M, Rosen AB, Fendrick AM. Effects of increased patient cost sharing on socioeconomic disparities in health care. *Journal of General Internal Medicine*, 2008; 23(8):1131-6. PMC2517964
89. Scanlon DP, Swaminathan S, Lee W, **Chernew ME**. Does competition improve healthcare quality? *Health Services Research*, 2008; 43(6):1931-51.
90. Swaminathan, S., Chernew, ME, Scanlon DP. Persistence of HMO performance measures. *Health Services Research*, 2008; 43(6):2033-49.
91. Garrett, B., and **Chernew, M.E.** Health insurance and labor markets: Concepts, open questions, and data needs. *Inquiry*, 2008; 45(1):30-57.
92. Krumholz HM, Keenan PS, Brush JE, Bufalino VJ, **Chernew ME**, Epstein AJ, Heidenreich PA, Ho V, Masoudi FA, Matchar DB, Normand SL, Rumsfeld JS, Schuur JD, Smith SC, Spertus JA, Walsh



- MN. Standards for measures used for public reporting of efficiency in healthcare. *Journal of the American College of Cardiology*, 2008; 52(18):1518-26.
93. **Chernew ME**, DeCicca P, and Town R. Managed Care and medical expenditures of Medicare beneficiaries. *Journal of Health Economics*, 2008; 27(6):1451-61.
  94. Kolstad JT, **Chernew ME**. Quality and consumer decision making in the market for health insurance and health care services. *Medical Care Research and Review* Special Edition. 2009; 66(1):28S-52S.
  95. Spaulding A, Fendrick AM, Herman WH, Stevenson JG, Smith DG, **Chernew ME**, Parsons DM, Bruhnens K, Rosen AB. Controlled trial of Value-Based Insurance Design: The MHealthy Focus on Diabetes (FOD) trial. *Implementation Science* 2009; 4(1):19. PMC2673203
  96. Golberstein, E., Grabowski, D.C., Langa, K.M., **Chernew, M.E.** The effect of Medicare home health care payment on informal care. *Inquiry*, 2009; 46(1):58-71.
  97. Frick KD, **Chernew ME**. Beneficial moral hazard and the theory of second best. *Inquiry*, 2009; 46(2):229-40.
  98. **Chernew ME**, Sabik L, Chandra A, Newhouse JP. Would having more primary care doctors cut health spending growth? *Health Affairs*, 2009; 28(5):1327-35. PMC2758483
  99. **Chernew ME**, Gibson TB, Fendrick AM. Trends in patient cost sharing for clinical services used as quality indicators. *Journal of General Internal Medicine*, 2009; 25(3): 243-8. PMC2839339
  100. Fendrick AM, **Chernew ME**, Levi GW. Value-based insurance design: embracing value over cost alone. *American Journal of Managed Care*, 2009; 15(10 suppl):S277-83.
  101. Huskamp HA, Stevenson DG, **Chernew ME**, Newhouse JP. A new Medicare end-of-life benefit for nursing home residents. *Health Affairs*, 2010; 29(1):130-5.
  102. **Chernew ME**, Sabik LM, Chandra A, Gibson TB, Newhouse JP. Geographic correlation between large-firm commercial spending and Medicare spending. *American Journal of Managed Care*, 2010; 16(2):131-8.
  103. **Chernew ME**, Juster IA, Shah M, Wegh A, Rosenberg S, Rosen AB, Sokol MC, Yu-Isenberg K, Fendrick AM. Evidence that value-based insurance can be effective. *Health Affairs*, 2010; 29(3):530-6.
  104. Maeng DD, Scanlon DP, **Chernew ME**, Gronniger T, Wodchis WP, McLaughlin CG. The relationship between health plan performance measures and physician network overlap: Implications for measuring plan quality. *Health Services Research*, 2010; 45(4):1005-23. PMCID: PMC2910566
  105. Zhang Y, Lave JR, Donohue JM, Fischer MA, **Chernew ME**, Newhouse JP. The impact of Medicare Part D on medication adherence among older adults enrolled in Medicare-Advantage products. *Medical Care*, 2010; 48(5):409-17.
  106. Fendrick AM, Smith DG, **Chernew ME**. Applying Value-Based Insurance Design to low-value health services. *Health Affairs*, 2010; 29(11):2017-2021.
  107. Antos J, Bertko J, Chernew ME, Cutler D, de Brantes, Goldman D, Kocher B, McClellan M, McGlynn E, Pauly M, Shortell S. Bending the curve through health reform implementation. *American Journal of Managed Care*, 2010; 16(11):804-12.
  108. **Chernew ME**. Health care cost growth: Can we avoid fiscal Armageddon? *Inquiry*, 2010-2011; 47(4):285-95.
  109. **Chernew ME**, Mechanic RE, Landon BE, Safran DG. Private-payer innovation in Massachusetts: The 'Alternative Quality Contract'. *Health Affairs*, 2011; 30(1):51-61.
  110. Afendulis CC, He Y, Zaslavsky AM, **Chernew ME**. The impact of Medicare Part D on hospitalization rates. *Health Services Research*, 2011; 46(4):1022-38.

111. Song Z, Safran DG, Landon BE, He Y, Ellis RP, Mechanic RE, Day MP, **Chernew ME**. Health care spending and quality in Year 1 of the Alternative Quality Contract. *New England Journal of Medicine*, 2011; 365(10):909-918.
112. Aizcorbe A, Liebman E, Pack S, Cutler, **Chernew ME**, Rosen AB. Measuring health care costs of individuals with employer-sponsored health insurance in the U.S.: A comparison of survey and claims data. *Statistical Journal of the International Association for Official Statistics*, 2011; 28(1-2):43-51.
113. Mechanic RE, Santos P, Landon BE, **Chernew ME**. Medical group responses to Global Payment: Early lessons from the 'Alternative Quality Contract' in Massachusetts. *Health Affairs*, 2011; 30(9):1734-42.
114. Gibson TB, Landrum MB, Batata A, Fendrick AM, Wang S, **Chernew ME**. Regional variation in medication adherence. *Forum for Health Economics & Policy*, 2011; 14(2): Article 8.
115. Afendulis CC, Landrum MB, **Chernew ME**. The impact of the Affordable Care Act on Medicare Advantage Plan Availability and Enrollment. *Health Services Research*, 2012; 47(6):2339-52. PMID: PMC3419768
116. Gibson TG, Fendrick AM, Gatwood J, **Chernew ME**. Gaps in treatment, treatment resumption, and cost sharing. *American Journal of Pharmacy Benefits*, 2012; 4(6):e159-165.
117. Song A, Safran DG, Landon BE, Landrum MB, He Y, Mechanic RE, Day MP, **Chernew ME**. The 'Alternative Quality Contract,' Based on a Global Budget, Lowering Medical Spending and Improved Quality. *Health Affairs (Millwood)*, 2012; 31(8): 1885-94. PMID: PMC3544169
118. Frank M, Fendrick AM, He Y, Zbrozek A, Holtz N, Leung S, **Chernew ME**. The Effect of a Large Regional Health Plan's Value-Based Insurance Design Program on Statin Use. *Medical Care* 2012; 50(11):934-939.
119. Song Z, Landrum MB, **Chernew ME**. Competitive Bidding in Medicare: Who Benefits from Competition? *American Journal of Managed Care*, 2012; 18(9):546-552. PMID: PMC3519284
120. Grabowski DC, Lakdawalla D, Goldman D, Eber M, Liu L, Abdelgawad T, Kuznik A, **Chernew ME**, Philipson T. The large social value resulting from use of statins warrants steps to improve adherence and broaden treatment. *Health Affairs*, 2012; 31(10):2276-2285.
121. McKellar MR, Frank M, Huskamp H, **Chernew ME**. The value of patent expiration. *Forum for Health Economics & Policy*, 2012; 15(2): 1-13.
122. Song Z, Ayanian JZ, Wallace J, He Y, Gibson TB, **Chernew ME**. Unintended consequences of eliminating Medicare payments for consultations. *Archives of Internal Medicine*, 2013; 173(1):15-21. PMID: PMC3547540
123. McWilliams JM, Landon BE, Zaslavsky AM, **Chernew ME**. Post-acute care and ACOs – Who will be accountable? *Health Services Research*, 2013; 48(4):1526-38. PMID: PMC3703488
124. Gowrisankaran G, Norberg K, Kymes S, **Chernew ME**, Stwalley D, Kemper L, Peck W. A hospital system's wellness program linked to health plan enrollment cut hospitalizations but not overall costs. *Health Affairs*, 2013; 32(3):477-85.
125. Blumenthal KJ, Saulsgiver KA, Norton L, Troxel AB, Anarella JP, Gesten FC, **Chernew ME**, Volpp KG. Medicaid incentive programs to encourage health behaviors show mixed results to date, and should be studied and improved. *Health Affairs*, 2013; 32(3):497-507.
126. McWilliams JM, **Chernew ME**, Zaslavsky AM, Hamed P, Landon BE. Delivery system integration and health care spending and quality for Medicare Beneficiaries. *Journal of the American Medical Association Internal Medicine*, published online June 17, 2013: 1-9.
127. Helmchen LA, Encinosa WE, **Chernew ME**, Hirth RA. Integrating patient incentives with episode-based payment. *Forum for Health Economics & Policy*, 2013; 16(1):1-14.

128. Thomson S, Schang LK, **Chernew ME**. Value-based cost sharing in the United States and elsewhere can increase patients' use of high-value goods and services. *Health Affairs*, 2013; 32(4): 704-12.
129. Song Z, Fendrick AM, Safran DG, Landon BE, **Chernew ME**. Global Budgets and Technology-Intensive Medical Services. *Healthcare: The Journal of Delivery Science and Innovation*, 2013; 1(1-2):15-21.
130. **Chernew ME**, Hong J. Commentary on the spread of new payment models. *Healthcare: The Journal of Delivery Science and Innovation*, 2013; 1(1-2):12-14.
131. Golberstein E, He Y, Walsh K, **Chernew ME**. Supplemental coverage associated with more rapid spending growth for Medicare beneficiaries. *Health Affairs*, 2013; 32(5):873-881. PMID 23650320
132. Ryu A, Gibson TG, McKellar MR, **Chernew ME**. The slowdown in health care spending in 2009-11 reflected factors other than the weak economy and thus may persist. *Health Affairs*, 2013; 32(5):835-840.
133. **Chernew ME**. Additional reductions in Medicare spending growth will likely require shifting costs to beneficiaries. *Health Affairs*, 2013; 32(5):859-863.
134. Rosen AB, Aizcorbe A, Ryu A, Nestoriak N, Cutler DM, **Chernew ME**. Policy makers will need a way to update bundled payment that reflects highly skewed spending growth of various care episodes. *Health Affairs*, 2013; 32(5):944-951.
135. Bacher GE, **Chernew ME**, Kessler DP, Weiner SM. Regulatory neutrality is essential to establishing a level playing field for accountable care organizations. *Health Affairs*, 2013; 32(8):1426-32.
136. Sharp A, Song Z, Safran DG, **Chernew ME**, Fendrick AM. The effect of bundled payment on emergency department use: Alternative Quality Contract effects after year one. *Academic Emergency Medicine*, 2013; 20(9):961-4.
137. McWilliams JM, Landon BE, **Chernew ME**. Changes in health care spending and quality for Medicare beneficiaries associated with a commercial ACO contract. *Journal of the American Medical Association*, 2013; 310(8):829-36.
138. Huskamp HA, Stevenson DG, O'Malley AJ, Dusetzina SB, Mitchell SL, Zarowitz BJ, **Chernew ME**, Newhouse JP. Medicare Part D plan generosity and medication use among dual eligible nursing home residents. *Medical Care*, 2013; 51(10):894-900.
139. Baicker K, **Chernew ME**, Robbins JA. The spillover effects of Medicare managed care: Medicare Advantage and hospital utilization. *Journal of Health Economics*, 2013; 32(6):1289-300.
140. Song Z, Landrum MB, **Chernew ME**. Competitive bidding in Medicare Advantage: Effect of benchmark changes on plan bids. *Journal of Health Economics*, 2013; 32(6): 1301-12.
141. Chien AT, Song Z, Chernew ME, Landon BE, McNeil BJ, Safran DG, Schuster MA. Two-year impact of the Alternative Quality Contract on pediatric health care quality and spending. *Pediatrics*, 2014; 133(1):96-104.
142. McConnell JK, Chang AM, Cohen DJ, Wallace N, **Chernew ME**, Kautz G, McCarty D, McFarland B, Wright B, Smith J. Oregon's Medicaid transformation: An innovative approach to holding a health system accountable for spending growth. *Health Care: The Journal of Delivery Science and Innovation* 2014;2(3):163-167.
143. McWilliams JM, **Chernew ME**, Dalton JB, Landon BE. Outpatient care patterns and organizational accountability in Medicare. *Journal of the American Medical Association Internal Medicine* 2014; 174(6):938-945.
144. McKellar R, **Chernew ME**, Fendrick AM. The economics of resistant pathogens and antibiotic innovation. *American Journal of Managed Care*, 2014; 20(3): 193-7.

145. McKellar MR, Naimer S, Landrum MB, Gibson TB, Chandra A, **Chernew ME**. Insurer market structure and variation in commercial health care spending. *Health Services Research*, 2014;49(3):878-92.
146. Falit B, Mantz C, **Chernew ME**. Design and implementation of bundled payment systems for cancer care and radiation therapy. *International Journal of Radiation Oncology, Biology, Physics*, 2014; 89(5):950-3.
147. Schwartz AL, Landon BE, Elshaug AG, **Chernew ME**, McWilliams JM. Measuring low-value care in Medicare. *Journal of the American Medical Association Internal Medicine* 2014; 174(7):1067-76.
148. Gatwood J, Gibson TG, **Chernew ME**, Farr AM, Vogtman E, Fendrick AM. Price elasticity and medication use: cost-sharing across multiple clinical conditions. *Journal of Managed Care & Specialty Pharmacy*, 2014; 20(11):1102-7.
149. Stevenson DG, O'Malley JA, Dusetzina SB, Mitchell SL, Zarowitz BJ, **Chernew ME**, Newhouse JP, Huskamp HA. Effect of Part D coverage restrictions for antidepressants, antipsychotics, and cholinesterase inhibitors on related nursing home resident outcomes. *Journal of the American Geriatrics Society*, 62(9):1666-74.
150. Stevenson DG, Dusetzina SB, O'Malley JA, Mitchell SL, Zarowitz BJ, **Chernew ME**, Newhouse JP, Huskamp HA. High-risk medication use by nursing home residents before and after hospitalization. *Medical Care*, 2014; 52(10):884-90.
151. Huskamp HA, Keating NL, Dalton JB, **Chernew ME**, Newhouse JP. Drug plan design incentives among Medicare prescription drug plans. *American Journal of Managed Care*, 2014; 20(7):562.
152. Song Z, Rose S, Safran DG, Landon BE, Day MP, **Chernew ME**. Changes in health care spending and quality 4 years into global payment. *New England Journal of Medicine*, 2014; 371(18):1704-14.
153. McWilliams JM, Landon BE, **Chernew BE**, Zaslavsky AM. Changes in patient experiences in Medicare Accountable Care Organizations. *New England Journal of Medicine*, 2014; 371(18):1715-24.
154. Romley JA, Axeen S, Lakdawalla DN, **Chernew ME**, Bhattacharya J, Goldman DP. The relationship between commercial health care prices and Medicare spending and utilization. *Health Services Research*, 2014; Nov. 27. [Epub ahead of print].
155. Qin P, **Chernew ME**. Compensating wage differentials and the impact of health insurance in the public sector on wages and hours. *Journal of Health Economics*, 2014; 38:77-87.
156. Afendulis CC, Fendrick AM, Song Z, Landon BE, Safran DG, Mechanic RE, **Chernew ME**. The impact of global budgets on pharmaceutical spending and utilization: Early experience from the Alternative Quality Contract. *Inquiry* 2014, published online December 11.
157. Gibson TB, Maclean RJ, **Chernew ME**, Fendrick AM, Baigel C. Value-based insurance design: benefits beyond cost and utilization. *American Journal of Managed Care*, 2015; 21(1):32-5.
158. Frank MB, Hsu J, Landrum MB, **Chernew ME**. The impact of a tiered network on hospital choice. *Health Services Research*, 2015 March 9.
159. Neprash H, Wallace J, **Chernew ME**, McWilliams JM. Measuring prices in health care markets using commercial claims data. *Health Services Research*, 2015 March 16.
160. Song Z, Wallace J, Neprash HT, McKellar MR, **Chernew ME**, McWilliams JM. Medicare fee cuts and cardiologist-hospital integration. *Journal of the American Medical Association Internal Medicine*, 2015 Jul; 175(7):1229-31.
161. McWilliams JM, Landon BE, **Chernew ME**, Schwartz S. Performance differences in Year 1 of Pioneer Accountable Care Organizations. *New England Journal of Medicine* 2015 May; 372(20):1927-36.
162. Resnick HE, **Chernew ME**. Provider behavior and treatment intensification in diabetes care. *American Journal of Managed Care*, 2015 Jun 1; 21(6):e399-404.

163. McWilliams JM, Landon BE, **Chernew ME**. Performance in year 1 of pioneer Accountable Care Organizations. *New England Journal of Medicine*, 2015 Aug 20;373(8):777.
164. Schwartz AL, **Chernew ME**, Landon BE, McWilliams JM. Changes in low-value services in Year 1 of the Medicare Pioneer Accountable Care Organization Program. *Journal of the American Medical Association Internal Medicine*, 2015 Nov; 175(11):1815-25.
165. Neprash HN, **Chernew ME**, Hicks AL, Gibson T, McWilliams JM. Association of financial integration between physicians and hospitals with commercial health care prices. *Journal of the American Medical Association Internal Medicine*, 2015 Dec 1; 175(12):1932-9.
166. Chien AT, Schiavoni KH, Sprecher E, Landon BE, McNeil BJ, **Chernew ME**, Schuster MA. How Accountable Care Organizations responded to pediatric incentives in the Alternative Quality Contract. *Academic Pediatrics*, 2016 Mar; 16(2):200-7.
167. Barry C, Stuart EA, Donohue JM, Greenfield SF, Kouri E, Duckworth K, Song Z, Mechanic RE, **Chernew ME**, Huskamp HA. The early impact of the 'Alternative Quality Contract' on mental health service use and spending in Massachusetts. *Health Affairs*, 2015; 34(12):2077-2085.
168. Hsu J, Price M, Spirt J, Vogeli C, Brand R, **Chernew ME**, Chaguturu SK, Mohta N, Weil E, Ferris E. Patient population loss at a large pioneer Accountable Care Organization and implications for refining the program. *Health Affairs*, 2016; 35(3):422-430.
169. McWilliams JM, Hatfield LA, Chernew ME, Landon BE, Schwartz AL. Early performance of Accountable Care Organizations in Medicare. *New England Journal of Medicine*; 2016 Jun 16;374(24):2357-66.
170. Desai S, Hatfield LA, Hicks AL, **Chernew ME**, Mehrotra A. Association between availability of price transparency tool and outpatient spending. *Journal of the American Medical Association*; 2016 May 3;315(17):1874-81.
171. McKellar MR, Landrum MB, Gibson TB, Landon BE, Fendrick AM, **Chernew ME**. Geographic variation in quality of care for commercially insured patients. *Health Services Research*; Published online May 3, 2016.
172. Huskamp HA, Greenfield SF, Stuart EA, Donohue JM, Duckworth K, Kouri EM, Song Z, **Chernew ME**, Barry CL. Effects of global payment and accountable care on tobacco cessation service use: An observational study. *Journal of General Internal Medicine* 2016 Oct 31(10):1134-40.
173. Afendulis CC, **Chernew ME**, Kessler DP. The effect of Medicare Advantage on hospital admissions and mortality. *American Journal of Health Economics*, forthcoming 2016.
174. Howard D, **Chernew ME**, Abdelgawad T, Smith GL, Sollano J, Grabowski DC. New anticancer drugs associated with large increases in costs and life expectancy. *Health Affairs*, 2016; 35(9):1581-7.
175. Stuart EA, Barry CL, Donohue JM, Greenfield SF, Duckworth K, Song Z, Mechanic R, Kouri EM, Ebnesajjad C, **Chernew ME**, Huskamp HA. Effects of accountable care and payment reform on substance use disorder treatment: Evidence from the initial three years of the Alternative Quality Contract. *Addiction*, 2017;112(1):124-133.
176. **Chernew ME**, Fendrick AM. Improving benefit design to promote effective, efficient, and affordable care. *Journal of the American Medical Association*, 2016; 316(16):1651-52.
177. Schwartz AL, Zaslavsky AM, Landon BE, **Chernew ME**, McWilliams JM. Low-value service use in provider organizations. *Health Services Research*; Published online November 10, 2016.
178. Hatfield LA, Favreault MM, McGuire TG, **Chernew ME**. Modeling health care spending growth of older adults. *Health Services Research*; Published online December 26, 2016.
179. Fung V, Liang CY, Donelan K, Peitzman CG, Dow WH, Zaslavsky AM, Fireman B, Derose SF, **Chernew ME**, Newhouse JP, Hsu J. Nearly one-third of enrollees in California's individual market missed opportunities to receive financial assistance. *Health Affairs*, 2017;36(1):21-31.

180. Song Z, Rose S, **Chernew ME**, Safran DG. Lower- versus higher-income populations in the Alternative Quality Contract: Improved quality and similar spending. *Health Affairs*, 2017;36(1):74-82.
181. Roberts ET, **Chernew ME**, McWilliams JM. Market share matters: Evidence of insurer and provider bargaining over prices. *Health Affairs*, 2017;36(1):141-148.
182. Afendulis C, Hatfield LA, Landon BE, Gruber J, Landrum MB, Mechanic RE, Zinner DE, **Chernew ME**. CareFirst Total Cost and Improvement Program: Largely Budget Neutral During First Three Years. *Health Affairs*, 2017; forthcoming.

**Presentations:**

1. The Impact of Managed Care on the Structure of the Market for Hospital Services. Association for Public Policy Analysis and Management Annual Meeting: Washington, DC, October 1991.
2. The Firms Demand for Health Insurance. Association for Public Policy Analysis and Management Annual Meeting: Washington, DC, October 1991.
3. Alternative Management Strategies for Patients with Dyspepsia in the Helicobacter Pylori Era. The Association of Managed Care Pharmacists Meeting: Anaheim, CA, October 1994.
4. Alternative Management Strategies for Patients with Dyspepsia in the Helicobacter Pylori Era. Robert Wood Johnson Foundation National Meeting: Fort Lauderdale, FL, November 1994.
5. Physician Workforce Policy in a Managed Care Dominated Environment: How Much Can We Rely on the Market. Allied Social Science Meeting: Washington, DC, January 1995.
6. Physician Incomes in a Managed Care-Dominated Environment. American Economic Association - Health Economics Research Organization Annual Meetings: Washington, DC, January 1995.
7. Mandated Employment-Based Health Insurance and Employee Welfare Loss. Allied Social Science Meeting: Washington DC, January 1995.
8. Management of Patients with Known Duodenal Ulcer Status but Unknown Helicobacter Pylori Status. Society of General Internal Medicine Annual Meeting: San Diego, CA, May 1995.
9. Comparison of Endoscopic Evaluation, Treatment Trial with Zantac, and Serological Screening for Helicobacter Infection in Pediatric Patients Presenting with Chronic Abdominal Pain. Annual Meetings of the American Gastroenterological Association: San Diego, CA, May 1995.
10. Management of Patients with Known Duodenal Ulcer Status but Unknown Helicobacter Pylori Status. Society of General Internal Medicine Annual Meetings: San Diego, CA, May 1995.
11. Comparison of Endoscopic Evaluation, Treatment Trial with Zantac, and Serological Screening for Helicobacter Infection in Pediatric Patients Presenting with Chronic Abdominal Pain. Annual Meetings of the American Gastroenterological Association: San Diego, CA, May 1995.
12. Specialist and Generalist Physicians' Adoption of Antibiotic Therapy to Eradicate *Helicobacter Pylori* Infection, International Society for Technology Assessment in Health Care Annual Meetings: Stockholm, Sweden, June 1995.

13. To Scope or Not to Scope? A Cost Analysis of Alternative Treatment Strategies in Patients with Dyspnea in the H. Pylori Era. International Society for Technology Assessment in Health Care Annual Meetings: Stockholm, Sweden, June 1995.
14. The Value of Prognostic Information: Knowing for the Sake of Knowing. International Society for Technology Assessment in Health Care Annual Meetings: Stockholm, Sweden, June 1995.
15. Outcomes Research in Managed Care for Elderly People: A Review and Agenda. Institute of Medicine Committee to Develop an Agenda for Health Outcomes Research for Elderly People: Washington, DC, June 1996.
16. Understanding the Behavioral Response to Medical Innovation. International Society for Technology Assessment in Health Care Annual Meeting: San Francisco, CA, June 1996.
17. Insurance Type and Choice of Hospital for Open Heart Surgery. American Public Health Association meetings: New York, NY, November 1996.
18. Medicare Reimbursement and the Utilization of EPO in 1989 and 1993. American Society of Nephrology Annual Meeting: New Orleans, LA, November 1996.
19. Dialysis Technologies and Practices in a Fixed Reimbursement Environment. American Society of Nephrology Annual Meeting: New Orleans, LA, November 1996.
20. Health Plan Report Cards and Insurance Choice in a Large Employer Group. Annual Health Economic Conference: Minneapolis, MN, June 1997.
21. Payer Type and the Returns to Bypass Surgery: Evidence from Hospital Entry Behavior. Harvard, MIT, Boston University Health Economics Seminar: Boston, MA, April 1998.
22. Optimal Health Insurance: The Case of Observable Severe Illness. Annual Health Economic Conference - Cornell University: New York, NY, June 1998.
23. Payer Type and the Returns to Bypass Surgery: Evidence from Hospital Entry Behavior. National Bureau of Economic Research - Summer Institute: Boston, MA, July 1998.
24. Payer Type and the Returns to Bypass Surgery: Evidence from Hospital Entry Behavior. Annual Health Economic Conference - University of California, Berkeley: Berkeley, CA, April 1999.
25. The Impact of Health Plan Report Cards on Managed Care Enrollment. Association of Health Services Research Meeting: Chicago, IL, June, 1999.
26. The Impact of Health Plan Report Cards on Managed Care Enrollment. University of Chicago, October 1999.
27. Health costs: Will they skyrocket again? American Public Health Association Meetings: New York, NY, November 1999.
28. The Impact of Health Plan Report Cards on Managed Care Enrollment. Agency for Healthcare Research and Quality: Washington, DC, March, 2000.
29. Rising Health Care Costs and the Decline in Insurance Coverage. Allied Social Science Association Meetings: January 2002.

30. Assessing the Impact of Managed Care on FFS Medicare Cost. Center for Medicare and Medicaid Services: Washington, DC, January, 2002.
31. The Quality Value Equation: Making the System Work. Agency for Healthcare Research and Quality, American Association of Health Plans: April 2002.
32. How Do Health Plan Report Cards Affect Managed Care Enrollment. University of California, Irvine. April 2002.
33. Rising Health Care Cost and the Decline in Health Insurance Coverage. NBER/Health Care Program Meeting: Cambridge, MA, November 2002.
34. Good Times and Falling Coverage: Explaining the Paradox. Economic Research Initiative on the Uninsured: Washington, DC, December 2002.
35. HMO Competition and Quality Improvement. American Economic Association/Allied Social Science Association Annual Meeting: Washington, DC, January 2003.
36. Explanation for the Decline in Health Insurance Coverage. 14<sup>th</sup> Annual Health Economics Conference – RAND: Santa Monica, CA, April 2003.
37. U.S. HMO Performance: Which Plans are improving? International Health Economics Association Meeting: San Francisco, CA, June 2003.
38. Medical Technology and Health Care Cost Growth: How Much Can We Afford? (Keynote Address) Blue Cross Blue Shield of Michigan - Center for Health Care Quality and Evaluative Studies: Ann Arbor, MI, October 2003.
39. Optimal Health Insurance: A Benefit-based Co-pay for Prescription Drugs. Health Care Cost Effectiveness Conference: Houston, TX, October 2003.
40. Overlap in Physician Network. Agency for Healthcare Research and Quality Centers of Excellence on Markets and Managed Care Meeting: Rockville, MD, December 2003.
41. Competition and Health Plan Performance: Evidence from Managed Care Insurance Markets. Allied Social Science Associations Annual Meeting: San Diego, CA, January 2004.
42. Predictors of HEDIS Performance and Improvement. Federal Trade Commission Conference on Healthcare Information and Competition: Washington, DC, April 2004.
43. Health Insurance Premiums and the Decline in Insurance Coverage. AcademyHealth Annual Research Meeting: San Diego, CA, June 2004.
44. Trends in Health Care Cost Growth and Benefit Design: An Economists Perspective. CCA/AAA Annual Meeting: Kohala Coast, HI, October 2004.
45. Increasing Health Insurance Costs and the Decline in Insurance Coverage. Duke University, Fuqua School of Business: Durham, NC, November 2004.
46. Increasing Health Insurance Premiums and the Decline in Insurance Coverage. Allied Social Science Associations Annual Meeting: Philadelphia, PA, January 2005.
47. Overlap in Physician Networks and Health Plan Performance. Harvard Medical School, Department of Health Care Policy Seminar: Boston, MA, February 2005.



48. Managed Care and Medicare Expenditures. RAND Corporation: Santa Monica, CA, April 2005.
49. Can we say no? The Challenge of Rationing Health Care. Brookings Institution: Washington, DC, February 2006.
50. Cost Sharing and the Quality of Care. Annual Health Economics Conference: Charleston, SC, March 2006.
51. Increased Cost Sharing, Value-Based Insurance Design, and Health Disparities. BIO: Chicago, IL, April 2006.
52. Value-Based Insurance Design: A “Clinically Sensitive” Approach to Preserve Quality and Contain Costs. State and Local Governments Benefits Association (SALGBA): Louisville, KY, May 2006.
53. Learning and the Value of Information: Evidence from Health Plan Report Cards. American Economic Association Annual Meeting: Chicago, IL, January 2007.
54. Money and the Under-consumption of Effective Health Care Services. American Economic Association Annual Meeting: Chicago, IL, January 2007.
55. Health Care Cost Growth. Medicare Trustees working group, CMS: Washington, DC, June 2007.
56. Health Care Cost Growth. National Conference of State Legislatures Annual Meeting: Boston, MA, August 2007.
57. P4P and Value Based Insurance Design. International Health Economics Association World Congress: 5<sup>th</sup> Annual Leadership Summit: Boston, MA, August 2007.
58. Comments on: Efficiency of Healthcare: RAND Efficiency Report. Agency for Health Care Research and Quality Annual Conference: Bethesda, MD, September 2007.
59. Evaluating/ Implementing VBID. Medicare Payment Advisory Commission Expert Panel on Value-Based Insurance Design: Washington, DC, October 2007.
60. Cost Sharing and Health System Performance. American Economics Association Annual Meeting: New Orleans, LA, January 2008.
61. Health Care Cost Containment and Value-Based Insurance Design. Brandeis University Heller School for Social Policy and Management: Boston, MA, January 2008.
62. Value-Based Insurance Design. Health Care Forecasting Conference: Irvine, CA, February 2008.
63. Value-Based Insurance Design. The Brookings Institution: Washington, DC, February 2008.
64. Improving Effectiveness with Better Evidence. GE Health Care Initiatives Summit: Orlando, FL, March 2008.
65. Value-Based Insurance Design. Texas A&M University, Private Enterprise Research Center Applied Microeconomics Seminar: College Station, TX, March 2008.
66. Value-Based Insurance Design. University of Chicago School of Social Services Administration, Michael Davis Seminar: Chicago, IL, April 2008.

67. Cost Sharing and Health Care Markets. Testimony before the Committee on Ways and Means, Subcommittee on Health - U.S. House of Representatives. Washington, DC, May 2008.
68. Benefits-Based Copayment: Issues and Impact on Treatment. Use of Biologics in Immunology: Access, Research and Treatment: Chicago, IL, May 2008.
69. Improving Medicare for the Long Haul: How Can We Improve Medicare's Performance for Its Current & Future Beneficiaries? AcademyHealth Annual Research Meeting. Washington, DC, June 2008.
70. Consumerism in Health Care. American Society of Health Economists 2<sup>nd</sup> Biennial Conference: Duke University; Durham, NC, June 2008.
71. A Multi-Stakeholder Evaluation of Value-Based Benefit Design Strategies. International Health Economics Association 6th Annual World Congress Leadership Summit on Healthcare Quality: Boston, MA, August 2008.
72. Physician Workforce Composition and Health Care Cost Growth. Dartmouth - NIA Research Group Meeting: Holderness, NH, September 2008.
73. Value-based Insurance Design – Let the payment fit the care. Anthem Health Care Leadership Series: Portland, ME, October 2008.
74. Reflections of a Health Economist: What Might the Future Bring? AAMC Group on Faculty Practice Annual Symposium: Boston, MA, October 2008.
75. Benefit Design in Health Insurance. Congressional Health Care Reform Education Project: Washington, DC, October 2008.
76. Geographic Variation in Cost Growth. Robert Wood Johnson Foundation Scholars in Health Policy Core Seminar: Cambridge, MA, October 2008.
77. Value in Health Care: Accounting for cost, quality, safety, outcomes and innovation. IOM Roundtable on Evidence-Based Medicine workshop: Washington, DC, November 2008.
78. Incorporating Cost into Comparative Effectiveness Research. Session Chair, National Health Policy Conference: Washington, DC, February 2009.
79. Value-Based Insurance Design-Initiatives Outside of Oncology. Assessing and Improving Value in Cancer Care: A National Cancer Policy Forum Workshop - Institute of Medicine; Washington, DC. February 2009.
80. Value-Based Insurance Design. Children's Hospital Boston - Health Services Research Seminar, Harvard Pediatric Health Services Research Fellowship Program: Boston, MA, February 2009.
81. Paying for Chronic Condition: Value Based Insurance Design in Medicare. Avalere Health Forum on Diabetes/ Broaden Your View: Washington, DC, March 2009.
82. Value-Based Insurance Design. University of Toronto Health Services Research Seminar: Toronto, Canada, March 2009.
83. Value-Based Insurance Design. Health Law Policy, Biotechnology & Bioethics Workshop; Kennedy School of Government: Cambridge, MA, March 2009.

84. Current Topics in Health Economics. University of Pittsburgh Department of Health Policy and Management: Pittsburgh, PA. March 2009.
85. Value-Based Insurance Design. Harvard Medical School Department of Radiology, Joint Program in Nuclear Medicine: Boston, MA. April 2009.
86. Physician Workforce Composition and Health Care Cost Growth. International Health Economics Association 7<sup>th</sup> World Congress on Health Economics: Beijing, China. July 2009.
87. Financing and Payment Models for the PCMH. Patient Centered Medical Home: Washington, DC. July 2009.
88. Value-based Insurance Design. (Colloquium Lecture) Pennsylvania State University Health Policy and Administration: University Park, PA, October 2009.
89. Effects of Managed Competition. Tilburg University - TILEC: Tilburg Law and Economics Center: The Netherlands, October 2009.
90. Understanding Geographic Variation. 2010 National Health Policy Conference: Washington, DC, February 2010.
91. Incentives aligned with value and learning. Institute of Medicine Workshop: Washington, DC, April 2010.
92. Executive Panel: Bending the Cost Curve, the Right Way. Yale School of Management Healthcare Conference: New Haven, CT, April 2010.
93. Massachusetts Medical Society Annual Health Leaders Program: Waltham, MA, April 2010.
94. Saving Money and Improving Quality: What is Possible? Health Economics: NIH Research Priorities for Health Care Reform: Bethesda, MD, May 2010.
95. Building a Stronger Evidence Base for Employee Wellness Programs. Agency for Healthcare Research and Quality: Washington, DC, May 2010.
96. Bending the Cost Curve: If I Ran the Health Care System. American Health Association & the Program Committee for the Quality of Care and Outcomes Research in Cardiovascular Care and Stroke 2010 Scientific Sessions: Washington, DC, May 2010.
97. Geographic Correlation between Large Firm, Commercial Spending and Medicare Spending. 3<sup>rd</sup> Biennial Conference of the American Society of Health Economists: Cornell University, June 2010.
98. The Politics of Scholarship in Health Services Research and Medicare Spending and Payment Reform: Implications for Beneficiaries and Providers. AcademyHealth Annual Research Meeting: Boston, MA, June 2010.
99. Bending the Curve Conference. The Brookings Institution: Washington, DC, July 2010.
100. Getting Value from health Care. Johnson & Johnson Medical Innovation Institute Health Plan Leaders Meeting: San Paulo, Brazil, August 2010.
101. Optimal Health Insurance. Genentech Value Forum/ Strategic Council: San Francisco, CA, August 2010.

102. Leadership for Productivity and Health Management: Issues, Innovations, and Solutions. Harvard School of Public Health, Center for Continuing Professional Education: Boston, MA, September 2010.
103. Health Reform and The Economy: Are They Good For Each Other? University of Southern California Schaeffer Center for Health Policy and Economics: USC, October 2010.
104. Bundled Payment and Cost Containment. Genentech USA, Value Based Healthcare Regional Symposium: November 2010.
105. Comparative Effectiveness Research (CER) Working Group Meeting. Sanofi-Aventis. December 2010.
106. Evaluation of the Alternative Quality Contract. University of Pennsylvania, Leonard Davis Institute 2010-2011 Research Seminar Series: Pennsylvania, PA, February 4, 2011.
107. Evaluating the Alternative Quality Contract. University of Southern California, Leonard D. Schaeffer Center for Health Policy and Economics: USC, February 10, 2011.
108. Evaluating the Alternative Quality Contract. Tufts Medical Center Health Policy Seminar: Boston, MA, April 4, 2011.
109. Value-based payment. Harvard School of Public Health Initiative on Comparative Effectiveness Research Retreat: Boston, MA, April 27, 2011.
110. Value-base insurance design. ManagedCare Communications Pharmaceutical Economics and Policy Council: Washington, DC, May 25, 2011.
111. Cost Measurement Expert Meeting, Robert Wood Johnson Foundation: Boston, MA, June 8, 2011.
112. Achieving Better Population Health, Better Patient Experience, and Reducing Cost: Learning from Variations in Health and Healthcare. AcademyHealth Annual Research Meeting: Seattle, WA, June 11-13, 2011.
113. The impact of the BCBS MA Alternative Quality Contract. Mathematica Policy Research Center on Health Care Effectiveness: Cambridge, MA, June 23, 2011.
114. Selection, Plan and Beneficiary Behavior in Medicare Advantage. International Health Economics Association Annual Meeting: Toronto, Canada, July 11-13, 2011.
115. The Specter of Financial Armageddon – Ever-Rising Health Care Costs – What are the Causes? What are the Solutions? Health Policy and Management 277s: Current Issue in Health Policy, Harvard School of Public Health. July 22, 2011.
116. Geographic Variations in Spending among the Privately Insured. Institute for Healthcare Improvement Seminar Series: Washington, DC, July 26, 2011.
117. Dollar and Sense: Value Based Insurance Design. 6<sup>th</sup> Singapore Public Health & Occupational Medicine Conference: Singapore, August 24-26, 2011.
118. How can the power of competition and integration be combined to drive greater efficiency and high quality care? (Keynote address) Nuffield Trust and Monitor roundtable: London, England, September 12, 2011.

119. Bending the Cost Curve: What's ahead? Illinois Hospital Association's Leadership Summit: Lombard, IL, September 22, 2011.
120. American Competitiveness and the Health Care System. Is Competitiveness Worth Defending? American Enterprise Institute for Public Policy Research: Washington, DC, September 29, 2011.
121. Geographic variation in spending for the privately insured. Bureau of Economic Analysis Seminar Series: Washington, DC, November 4, 2011.
122. Value-Based Benefit Design to Drive Behavior and Quality. The Commonwealth Fund 14th International Symposium on Health Care Policy: Washington, DC, November 8-10, 2011.
123. Benefit Plan Generosity and Productivity. American Economic Association/ Allied Social Science Association Meetings: Chicago, IL, January 6-8, 2012.
124. Effect of the Alternative Quality Contract on Health Care Spending and Quality. American Economic Association/ Allied Social Science Association Meetings: Chicago, IL, January 6-8, 2012.
125. Medicare Finance Reform. AARP National Policy Council Annual Policy Development Meeting: Washington, DC, January 17-18, 2012.
126. Guns vs. Butter? The Long-Term Sustainability of Continued Growth in Health Care Spending. America's Health Insurance Plans. Phoenix, AZ, February 2-3, 2012.
127. Evaluating the Alternative Quality Contract. Research Update. Medical Industry Leadership Institute at the Carlson School of Management, University of Minnesota. Minneapolis, MN, March 19, 2012.
128. Keynote address: Overview of Cost Drivers. Alliance for Health Reform, Health Care Costs in the US: The Role of Prices and Volume. Washington, DC, April 18, 2012.
129. Thinking Forward: Doorways to Health System Change. America's Health Insurance Plans Institute 2012. Salt Lake City, UT, June 22, 2012.
130. Low cost interventions that have outsized population health improvements. National Institutes of Health, Advancing Prevention: Knowledge Gaps and New Partnerships. Washington, DC, June 29, 2012.
131. Making a Difference? The Promise of New Payment Models. America's Health Insurance Plans Summit on Payment Reform and Delivery transformation. Washington, DC, September 12, 2012.
132. Keynote address: Sustainable health care spending. Dutch-Flemish Association for Health Economics, Tilburg University, Netherlands. October 11, 2012.
133. Keynote address: New England College of Occupational and Environmental Medicine, Mass Association of Occupations Health Nurses 212 Annual Conference, 'The Science and Practice of Occupational and Environmental Medicine: From Injury and Illness to Health and Wellness.' Newton, MA, November 29, 2012.
134. Controlling Healthcare Spending Growth. George Washington University, 2013 Aetna Foundation Distinguished Lecture in Health Policy. Washington, DC. January 9, 2013.
135. Keynote address: The Promise of New Payment Models. Mass Hospital Association 46<sup>th</sup> Annual Leadership Forum. Framingham, MA. January 25, 2013.

136. Keynote address. AstraZenecaa Bristol-Myers-Squibb National Alliance Meeting. Nashville, TN. April 17, 2013.
137. Keynote address. Boston Scientific Annual Health Economics & Reimbursement Department Meeting. Boston, MA. April 23, 2013.
138. Spillover Effects of the Alternative Quality Contract on Spending and Quality for Medicare Beneficiaries. International Health Economics Association 9<sup>th</sup> World Congress. Sydney, Australia. July 7-10, 2013.
139. Keynote address: Next Generation Healthcare Value: Navigating the Bridge of Change. AIM Specialty Health 2013 Executive Healthcare Forum. Chicago, IL. July 17-19, 2013.
140. Keynote address: Exchanges: 2014 is here, where will you be? American Society for Gastrointestinal Endoscopy. GO GI Outlook 2013 – The Practice Management Conference. Chicago, IL. August 9-11, 2013.
141. Compensating Wage Differentials and the Impact of Health Insurance in the Public Sector on Wages and Salary. National Bureau of Economic Research Conference on State and Local Health Plans for Active and Retired Public Employees. Moran, Wyoming. August 15-17, 2013.
142. Keynote address: Anthem National Accounts Customer Advisory Group Meeting. Chicago, IL. August 27-29, 2013.
143. Keynote panel discussion: Payment Transformation, Separating Myth from Reality. NEHI Verisk Health's 5<sup>th</sup> Annual Conference. Orlando, FL. September 19, 2013.
144. Plenary Session: The Impact of Healthcare Reform. 17<sup>th</sup> Annual Scientific Meeting of the Health Failure Society of America. Orlando, FL. September 22-25, 2013.
145. Keynote address: The Structure of Value. Healthcare Financial Management Association 7<sup>th</sup> Annual Thought Leadership Retreat. Washington, DC. October 2-3, 2013.
146. Medicare Advantage Payment Rates and Plan Generosity. Institution for Social and Policy Studies, Yale University. New Haven, CT. November 20, 2013.
147. ACA Implementation: Trends in Payment Reform and Implications for the Safety Net. California Association of Public Hospital Systems Annual Conference, Napa Valley, CA. December 4-5, 2013.
148. China Development Research Foundation Symposium on Chinese Health Reform. Beijing, China. February 24-27, 2014.
149. Medicare Advantage Payment Rates and Plan Generosity. Kauvar Visiting Professor Lunch and Lecture. Colorado School of Public Health, University of Colorado Denver. March 27, 2014.
150. Medicare Advantage Payment Rates and Plan Generosity. Peter T. Paul College of Business and Economics Seminar, University of New Hampshire. Durham, NH. April 11, 2014.
151. Health Care Spending Growth. Partners Graduate Medical Education, Health Policy Certificate Course. Brigham & Women's Hospital, Boston, MA. April 17, 2014.
152. Health Reform: Insuring the Uninsured – and Paying the Bills. Cutting Costs. Health Coverage Fellowship, Wellesley, MA. April 29, 2014.

153. Session: Payment Innovations. Chinese Development and Research Foundation visit to Department of Health Care Policy, Harvard Medical School. Lessons from the American Health Care System. Boston, MA. May 5-7, 2014.
154. Session: Innovation in Cost Containment and Delivery System Change. 21<sup>st</sup> Annual Princeton Conference: The Changing Health Care Landscape. Council on Health Care Economics and Policy, Brandeis University. Princeton, NJ. May 15, 2014.
155. Session: Assessing Health Care Value. Partners Healthcare Quality, Safety and Value Strategic Planning Retreat. Partners Healthcare. Boston, MA. May 22, 2014.
156. Keynote: Home Care, Hospice and Post-Acute Care. New England Home Care Conference & Trade Show. Boston, MA. May 30, 2014.
157. Session: Who will Control the Practice of Orthopedics in the Future? Emerging Leaders Forum. American Orthopedic Association. Montreal, Canada. June 18, 2014.
158. Keynote: Future of Medicare Reimbursement. Texas Hospital Association Leadership Fellows Program. Austin, TX. July 11, 2014.
159. Bidding in Medicare Advantage. The University of Austin Texas Department of Economics Seminar Series. Austin, TX. November 5, 2014.
160. Health Care Spending and the Transformation of the American Health Care System. Summit Partners 2014 Healthcare CEO Forum. Dallas, TX. November 12, 2014.
161. Institute for Healthcare Improvement Fellowship Seminar. Cambridge, MA. December 1, 2014.
162. Session: Competitive Bidding in Medicare. American Economic Association Annual Meeting. Boston, MA. January 3, 2015.
163. Session: Geographic Variation in Quality of Care for Commercially Insured Patients. American Economic Association Annual Meeting. Boston, MA. January 4, 2015.
164. Future Healthcare Reforms. Healthcare in American Preclinical Elective Speaker Series. Brown University. Providence, RI. January 13, 2015.
165. Payment Reform: Medicare, Medicaid and ACOs. National Health Policy Conference. Washington, DC. February 9-10, 2015.
166. Advantages of Medicare Advantage. America's Health Insurance Plans Congressional Briefing on Medicare Advantage. Washington, DC. February 12, 2015.
167. Addressing Medicare's Fiscal Crisis. Stanford University Health Care Policy Department Seminar Series. Stanford, CA. February 19, 2015.
168. Accountable Care Organizations. Stanford University Health Care Policy Department Research in Progress Seminar. Stanford, CA. February 19, 2015.
169. Bundled Payment. Federal Trade Commission and Department of Justice Antitrust Division Public Workshop "Examining Health Care Competition". Washington, DC. February 25, 2015.
170. Value-Based Insurance Design. University of British Columbia Centre for Health Services and Policy Research, 2015 Health Policy Conference. Vancouver, BC. March 3, 2015.

171. Alternative Quality Contract: Aligning Incentives to Improve Quality and Manage Cost. American College of Cardiology 64th Annual Meeting. San Diego, CA. March 15, 2015.
172. The Promises and Pitfalls of Payment Reform. Massachusetts Medical Society, Berkshire District. March 18, 2015.
173. The Role of Quality Measurement in Supporting Payment Reform and Value Based Insurance Design. National Quality Forum. Washington, DC. March 23, 2015.
174. Accountable Care Organizations. Government Accountability Office Healthcare Speaker Seminar Series. Washington, DC. April 8, 2015.
175. Understanding Health Spending Trends. Tufts Institute for Clinical Research and Health Policy Studies, Center for the Evaluation of Value and Risk in Health. Annual Meeting. Boston, MA. April 15, 2015.
176. Beyond the Affordable Care Act: Medicare's Fate. Harvard T. H. Chan School of Public Health. Beyond the Affordable Care Act Program. April 27, 2015.
177. Size Matters: New Approaches to National Provider Brands. Health Evolution Summit 2015. Dana Point, CA. April 30, 2015.
178. Accountable Care Organizations. 22<sup>nd</sup> Annual Princeton Conference: The Health Industry Forum. Princeton, NJ. May 13, 2015.
179. The \$2 Trillion Question: Will the Slowdown in Health Care Cost Growth Continue? AcademyHealth Annual Research Meeting. Minneapolis, MN. June 14, 2015.
180. Current State of ACO Analysis. Sixth National Accountable Care Organization (ACO) Summit. Washington, DC. June 17, 2015.
181. Systemic Cost Reduction Opportunities. Healthcare Financial Management Association Annual National Institute. Orlando, FL. June 25, 2015.
182. Reducing Low Value Care. 2015 International Health Economics Association World Congress. Milan, Italy. July 13, 2015.
183. The Impact of a Tiered Network on Hospital Choice. 2015 International Health Economics Association World Congress. Milan, Italy. July 13, 2015.
184. The Nation's Health Care Cost Crisis: Where Are We Now? ProHealth Physicians Seminar Series. Farmington, CT. July 22, 2015.
185. Incorporating Clinical Nuance into Medicare Advantage. University of Michigan Center for Value Based Insurance Design, VBID Summit 2015. Ann Arbor, Michigan. October 7, 2015.
186. Benchmarking Models: New Information from the Experts. National Association of ACOs 2015 Fall Conference. Washington, DC. October 8, 2015.
187. System Transformation: Engaging Providers and Patients in Shared Risk and Savings. America's Health Insurance Plans Payment Reform Summit 2015. Chicago, IL. October 14, 2015.



188. Accountable Care Organizations. Solomon Center for Health Policy and Law, Yale Law School. The New Health Care Industry: Integration, Consolidation, Competition in the Wake of the Affordable Care Act – Inaugural Conference. Nov 12, 2015.