

MICHAEL ESMAN CHERNEW

Office Address:

Department of HealthCare Policy
Harvard Medical School
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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:

2020 – Present Chair, Medicare Payment Advisory Commission (MedPAC)

2019 – 2020 Member, Committee on Advocacy and Public Policy (CAPP)

2019 – Present Member, Committee on Rising Midlife Mortality Rates and Socioeconomic Disparities
(NAS)

2017 – Present Vice Chair, Commonwealth of Massachusetts Health Connector Board of Directors

2015 – 2017 Member, Commonwealth of Massachusetts Health Connector Board of Directors

2015 – 2016 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 – 2019 Member, Committee on National Statistics (CNSTAT), National Academies of Sciences, Engineering, and 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 – Present 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 – 2019 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 Academies of Sciences, Engineering, and 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 – 2020	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

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

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: 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: 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

Duration: 03/16/16-06/30/16
Sponsor: The Commonwealth Fund (Grant No. 20160654)
Title: Mapping Variation in Spending Among the Commercially Insured
Role: Principal Investigator

Duration: 02/22/16-06/30/17
Sponsor: The Laura and John Arnold Foundation via Duke University
Title: An Evaluation Hub to Support Evidence Based Health System Transformation
Role: Principal Investigator

Duration: 04/15/17-07/31/17
Sponsor: The Commonwealth Fund (Grant No. 20160697a)
Title: Mapping Variation in Spending and Quality Among Commercially Insured
Role: Principal Investigator

Duration: 08/01/13-10/31/17
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: 12/01/16-11/31/17
Sponsor: Pharmaceutical Research and Manufacturers of America (PhRMA)
Title: Consortium on Provider Behavior and Disease Management
Role: Principal Investigator

Duration: 01/01/13-03/31/18
Sponsor: CareFirst BlueCross BlueShield
Title: Evaluation of CareFirst Patient-Centered Medical Home
Role: Principal Investigator

Duration: 08/04/17-08/03/18
Sponsor: Merck Sharp & Dohme Corporation
Title: Consortium on Provider Behavior and Disease Management
Role: Principal Investigator

Duration: 03/01/17-06/30/18
Sponsor: The Commonwealth Fund
Title: Impact of Maryland's Hospital Global Budgets on Utilization, Quality and Spending
Role: Co-Investigator

Duration: 09/24/12-06/30/18
Sponsor: NIH R01HD075121 (Newhouse/Hsu)
Title: Natural Experiment of Value-Based Incentives for Preventive Services
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: 10/15/17-05/01/19
Sponsor: MITRE/CMS
Title: Model Portfolio Plan (ACO Regulations)
Role: Principal Investigator

Duration: 06/01/18-05/31/19
Sponsor: The Commonwealth Fund (Grant No. 20181376a)
Title: Expanding Research on the Geographic Variation in Healthcare Spending and Quality
Role: Principal Investigator

Duration: 08/01/16-10/31/19
Sponsor: The Commonwealth Fund (Grant No. 20160683)
Title: Delivery Systems Serving Low-Income Populations (LIDS)
Role: Principal Investigator

Duration: 07/20/2018-07/19/2019
Sponsor: Altarum/RWJK (No award number)

Title: Advancing Population Based Payment
Role: Principal Investigator

Duration: 07/01/2015-03/31/2020
Sponsor: NIH/NIA P01AG032952 (Landon/McWilliams)
Title: Medicare in a Restructured Delivery System
Role: Co-Investigator

Duration: 01/01/2019-4/30/2020
Sponsor: Peterson Center on HealthCare 19070
Title: Using Market Forces to Control Health Care Prices
Role: Principal Investigator

Duration: 10/01/2014-12/31/2020
Sponsor: Laura and John Arnold Foundation
Title: Healthcare Markets and Regulation Lab
Role: Director/ Principal Investigator

Duration: 1/1/2020-12/31/2020
Sponsor: BCBSA
Title: Assessing the Health Impact of the 2008 Financial Crisis on Millennials
Role: Principal Investigator

Active Funding:

Duration: 10/01/2020-9/30/2023
Sponsor: Arnold Ventures
Title: Healthcare Markets and Regulation Lab
Role: Director/ Principal Investigator

Duration: 09/01/2015-08/31/2021
Sponsor: AHRQ U19HS024072 (Cutler)
Title: Measuring the Clinical and Economic Outcomes Associated with Delivery Systems
Role: Co-Investigator

Duration: 07/01/2019-06/30/2023
Sponsor: NIA R01AG062544(Grabowski)
Title: Post-Acute Care Referral and Outcomes for Patients with Alzheimer's Disease and Related Dementias
Role: Co-Investigator

Duration: 1/1/20-6/30/22
Sponsor: HCSC
Title: Care Continuity in the Face of Changing Provider Availability in Low Income Area
Role: Principal Investigator

Duration: 07/01/2020-0/31/2025
Sponsor: NIH/ NIA P01AG032952 (Landon/McWilliams)
Title: Improving Medicare in an Era of Change

Role: Co-Investigator

Duration: 6/1/2020-5/31/2022

Sponsor: Ballad Health

Title: Competition, Acquisition and Mergers in Rural Hospital Markets

Role: Principal Investigator

Duration: 08/01/2020-05/31/2022

Sponsor: Commonwealth Fund

Title: Providing Evidence and Advice to States Related to Controlling Health Care Spending Growth

Role: Principal Investigator

Duration: 09/01/2020-08/31/2021

Sponsor: Signify Health, LLC

Title: BPCI and Convener Partnerships: Addressing Gaps in the Literature

Role: Principal Investigator

Duration: 09/01/2020-08/31/2021

Sponsor: Commonwealth Fund

Title: Geographic Variation in Healthcare Spending & Quality Among the Commercially Insured

Role: Principal Investigator

Duration: 12/01/2020-11/30/2025

Sponsor: NIH/NCI R01CA255035 (Keating/Landrum)

Title: The Impact of a Changing Health Care Delivery System on the Quality of Oncology Care

Role: Co-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
USW 11 Global Health & Health Policy	2019	Harvard University

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	Market 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
Matt Frank	2014	PhD	Innovative Health Insurance Designs: Empirical and Normative Assessments
Aaron Schwartz	2015	MD, PhD	Low-Value Medical Care: The Role of Provider Organizations
Hannah Neprash	2017	PHD	Three Essays in Physician Behavior
Ellen Montz	2018	PhD	Effects of Competition in the Affordable Care Act's Marketplaces
Michael Anne Kyle	2021	PhD	

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 Hebel	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
Caitlin Carroll	2019	PhD	Essays on Healthcare Provider Markets

Adrianna McIntyre 2021 PhD

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. McMahan 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.
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227. Nguyen CA, Gilstrap LG, **Chernew ME**, McWilliams JM, Landon BE, Landrum MB. Using Consistently Low Performance to Identify Low-Quality Physician Groups. *JAMA Netw Open*. 2021 Jul 1;4(7):e2117954
228. **Chernew ME**, He H, Mintz H, Beaulieu N. Public Payment Rates For Hospitals And The Potential For Consolidation-Induced Cost Shifting. *Health Aff (Millwood)*. 2021 Aug;40(8):1277-1285.
229. Whaley C, Sood N, **Chernew ME**, Metcalfe L, Mehrotra A. Paying patients to use lower-priced providers. *Health Serv Res*. 2021 Aug 9.
230. Pany M, **Chernew ME**, Dafny L. Regulating Hospital Prices Based On Market Concentration Is Likely To Leave High-Price Hospitals Unaffected. *Health Aff (Millwood)*. 2021 Sep;40(9): 1386-1394.
231. **Chernew ME**, Heath J, McWilliams JM. The Merits of Administrative Benchmarks for Population-Based Payment Programs. *Am J Manag Care*. 2021 Nov 23
232. Neprash H, **Chernew ME**. Physician Practice Interruptions in the Treatment of Medicare Patients During the COVID-19 Pandemic. *JAMA*. 2021 Oct 5;326(13):1325-1358.
233. **Chernew ME**, Carichner J, Impreso J, McWilliams JM, McGuire TG, Alam S, Landon BE, Landrum MB, Coding driven changes in measured risk in Accountable Care Organizations. *Health Affairs*, 2021 Dec.
234. Whaley C, Sood N, **Chernew M**, Metcalfe L, Mehrotra A. Paying patients to use lower-priced providers. *Health Serv Res*. 2022 Feb;57(1):37-46
235. Shahzad M, Song Z, **Chernew ME**, Fendrick AM. Changes in use of low-value services during the COVID-19 pandemic. *Am J Manag Care*. 2022 Nov;28(11):600-604. doi: 10.37765/ajmc.2022.89031. PMID: 36374618.
236. Tang M, **Chernew M**, Mehrotra A. How Emerging Telehealth Models Challenge Policymaking. *Milbank Q*. 2022 Sep 28

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. 14th 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: 5th 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 2nd 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 7th 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. 3rd 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. 6th 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 46th 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 9th 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 5th Annual Conference. Orlando, FL. September 19, 2013.
144. Plenary Session: The Impact of Healthcare Reform. 17th 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 7th 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. 21st 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. 22nd 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.