FROM THE FOUNDING EDITOR

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Building On Success With New Fields To Conquer

BY JOHN K. IGLEHART

Given the breadth of Medicare and Medicaid in beneficiaries covered and resources consumed, it’s no wonder these vast public programs provide interesting grist for a health policy journal like Health Affairs. In this variety issue alone, about half of the papers are focused on findings and issues that relate to these two programs.

David Hutton and coauthors analyze two biologic drugs with similar efficacy that treat Medicare patients with macular degeneration and diabetic macular edema that can lead to blindness, but one is forty times more expensive. Robert Rosati and colleagues find that rebasing of Medicare’s home health payments could jeopardize access for clinically complex patients. James Dupree and coauthors report that fifty-nine Medicare-approved accountable care organizations, which mostly focus on primary care, pay little attention to surgical care and surgeons. Katherine Neuhausen and coauthors estimate that Medicaid payment cuts to safety-net hospitals as authorized by the Affordable Care Act could threaten those hospitals’ financial stability.

In other offerings, Yuting Zhang and colleagues find that a simple change to the Medicare Part D (prescription drug) benefit could have saved the program over $5 billion in 2009. Laurence Baker and coauthors conclude that patients’ preferences explained the largest variation in Medicare spending on end-of-life care and the smallest variation in spending on physician services.

Improved Manuscript Turnaround
When I assumed the interim editorship of Health Affairs on April 15, 2013, I placed a high priority on improving the journal’s review and publication turnaround times. As editors, we know that journals compete actively for authors’ contributions, and time to publication is a key factor that influences where authors submit their work. I am pleased to report that the journal’s highly capable staff, led in this respect by executive editor Don Metz, has made dramatic and continued progress in this critical area. For example, for papers that are selected for external review, the staff is completing the process and notifying authors of our decisions in just over fifty days from date of submission. This means we have trimmed three months from the external review process, on average. On the publication front, through the first six issues of 2014, a typical paper went from submission to publication in about five months, and we continue to make progress.

Extending Our Reach
Another priority at Health Affairs is extending the visibility and impact of health policy research and debate through social media, multimedia, and outreach to more than 3,000 reporters. The Hill Blog recently named Health Affairs Blog and contributing editor Timothy Jost as one of “10 to watch on ObamaCare rollout,” saying that Jost’s “blog posts for the journal Health Affairs are considered must-reads in Washington because of their clarity and up-to-the-minute analysis.”

This year we also launched a new monthly podcast series on implementing health care reform. Health Affairs Blog editor Chris Fleming hosts a lively conversation with policy leaders across the political spectrum in these “Health Affairs Conversations.” These podcasts, as well as videos from our events and podcasts of Narrative Matters authors reading their essays, are free to all on our website.

Welcoming Alan Weil
Publication of this June 2014 issue heralds the arrival of Alan Weil as the new editor-in-chief of Health Affairs. Over its thirty-three years, two of the journal’s editors (Susan Dentzer and myself) have come from the world of journalism, while one (James Robinson) hailed from academia. Alan brings a diverse background, with two Harvard degrees (law and public policy); an undergraduate degree in economics and political science from the University of California, Berkeley; and a wealth of experience in federal and state health policy.

The different backgrounds of editors speaks to what I envisioned Project HOPE’s journal—if successful—would become: a peer-reviewed publication that would take the best of research produced by health thinkers and doers and expose a much wider swath of readers to their ideas, well beyond simply the academic community. Given the breadth of both our authors and our readers, I believe that we have accomplished that goal, but there are certainly other fields to conquer.

I asked Alan to give readers an initial glimpse of his ideas for strengthening the journal at a particularly dynamic time in the health care universe, and this is how he responded:

“My goals coalesce around a single theme—broadening the reach of the journal with greater engagement with the worlds of law, finance, design, and beyond. My goals include diversifying the voices of authors along the dimensions of age, ethnicity, race, and social status; examining more closely the social determinants of health; and using the journal’s pages to learn how other countries are struggling with many of the same access, cost, and quality issues that challenge the United States.”

Alan’s entire statement appeared on Health Affairs Blog on March 31 (http://healthaffairs.org/blog/2014/03/31/embarking-on-a-new-journey-with-health-affairs/).