Brad Wright

List of Publications by Year in descending order

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		686830	580395
60	782	13	25
papers	citations	h-index	g-index
63	63	63	857
all docs	docs citations	times ranked	citing authors

#	Article	IF	CITATIONS
1	Health Center Use and Hospitalâ€Based Care among Individuals Duallyâ€Enrolled in Medicare and Medicaid, 2012 ―2018. Health Services Research, 2022, , .	1.0	4
2	Will Community Health Centers Survive COVIDâ€19?. Journal of Rural Health, 2021, 37, 235-238.	1.6	13
3	Association Of Unemployment With Medicaid Enrollment By Social Vulnerability In North Carolina During COVID-19. Health Affairs, 2021, 40, 1491-1500.	2.5	9
4	Comparing health care use and costs among new Medicaid enrollees before and during the COVID-19 pandemic. BMC Health Services Research, 2021, 21, 1152.	0.9	9
5	Communicating a Complicated Medicaid Waiver Program to Enrollees in Iowa. Journal of Ambulatory Care Management, 2021, 44, 12-20.	0.5	O
6	Unintended Consequences of Observation Stay Use May Disproportionately Burden Medicare Beneficiaries in Disadvantaged Neighborhoods. Mayo Clinic Proceedings, 2020, 95, 2589-2591.	1.4	9
7	Implementation Matters: Lessons From Iowa Medicaid's Healthy Behaviors Program. Health Affairs, 2020, 39, 884-891.	2.5	2
8	Iowa's Medicaid Healthy Behaviors Program Associated With Reduced Hospital-Based Care But Higher Spending, 2012–17. Health Affairs, 2020, 39, 876-883.	2.5	2
9	Characteristics of agricultural and occupational injuries by workers' compensation and other payer sources. American Journal of Industrial Medicine, 2019, 62, 969-977.	1.0	8
10	Postdischarge Unplanned Care Events Among Commercially Insured Patients With an Observation Stay Versus Short Inpatient Admission. Annals of Emergency Medicine, 2019, 74, 334-344.	0.3	1
11	Longitudinal Analysis of Racial/Ethnic Trends in Quality Outcomes in Community Health Centers, 2009–2014. Journal of General Internal Medicine, 2018, 33, 906-913.	1.3	12
12	Completion of Requirements in Iowaâ∈™s Medicaid Expansion Premium Disincentive Program, 2014–2015. American Journal of Public Health, 2018, 108, 219-223.	1.5	6
13	Trends in Teenagers' Nonopiod Substance Exposures Reported to Poison Control Centers, 2010-2015. Journal of Pediatrics, 2018, 196, 258-263.	0.9	1
14	The Relationship Between Rural Health Clinic Use and Potentially Preventable Hospitalizations and Emergency Department Visits Among Medicare Beneficiaries. Journal of Rural Health, 2018, 34, 423-430.	1.6	6
15	Evidence of Racial and Geographic Disparities in the Use of Medicare Observation Stays and Subsequent Patient Outcomes Relative to Short-Stay Hospitalizations. Health Equity, 2018, 2, 45-54.	0.8	7
16	In reply:. Annals of Emergency Medicine, 2018, 72, 625-626.	0.3	0
17	Medicare's Variation in Outâ€ofâ€Pocket Costs for Prescriptions: The Irrational Examples of Inâ€Hospital Observation and Home Infusion. Journal of the American Geriatrics Society, 2018, 66, 2249-2253.	1.3	4
18	Effects of Medicare Medical Reviews on Ambiguous Short tay Hospital Admissions. Health Services Research, 2018, 53, 4747-4766.	1.0	3

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19	Excluding Observation Stays from Readmission Rates $\hat{a}\in$ " What Quality Measures Are Missing. New England Journal of Medicine, 2018, 378, 2062-2065.	13.9	36
20	Health Insurance Coverage and Access to Care for Community Health Center Patients: Evidence Following the Affordable Care Act. Journal of General Internal Medicine, 2018, 33, 1444-1446.	1.3	12
21	Informing Medicare's Two-Midnight Rule Policy With an Analysis of Hospital-Based Long Observation Stays. Annals of Emergency Medicine, 2018, 72, 166-170.	0.3	15
22	The cost of observation care for commercially insured patients visiting the emergency department. American Journal of Emergency Medicine, 2018, 36, 1591-1596.	0.7	11
23	Medicaid Expansion And Community Health Centers: Care Quality And Service Use Increased For Rural Patients. Health Affairs, 2018, 37, 900-907.	2.5	36
24	How the Availability of Observation Status Affects Emergency Physician Decisionmaking. Annals of Emergency Medicine, 2018, 72, 401-409.	0.3	9
25	At Federally Funded Health Centers, Medicaid Expansion Was Associated With Improved Quality Of Care. Health Affairs, 2017, 36, 40-48.	2.5	99
26	lowa's Medicaid Expansion Promoted Healthy Behaviors But Was Challenging To Implement And Attracted Few Participants. Health Affairs, 2017, 36, 799-807.	2.5	19
27	Use of Federally Qualified Health Centers and Potentially Preventable Hospital Utilization Among Older Medicare-Medicaid Enrollees. Journal of Ambulatory Care Management, 2017, 40, 139-149.	0.5	8
28	Use or Abuse? A Qualitative Study of Emergency Physicians' Views on Use of Observation Stays at Three Hospitals in the United States and England. Annals of Emergency Medicine, 2017, 69, 284-292.e2.	0.3	12
29	Younger Dual-Eligibles Who Use Federally Qualified Health Centers Have More Preventable Emergency Department Visits, but Some Have Fewer Hospitalizations. Journal of Primary Care and Community Health, 2017, 8, 3-8.	1.0	8
30	Chest Pain Patients at Veterans Hospitals Are Increasingly More Likely to Be Observed Than Admitted for Short Stays. Inquiry (United States), 2016, 53, 004695801666675.	0.5	2
31	Outcomes associated with observation versus short-stay admission among chest pain patients in the Veterans Health Administration. BMC Emergency Medicine, 2016, 16, 38.	0.7	3
32	Patient, hospital, and local health system characteristics associated with the use of observation stays in veterans health administration hospitals, 2005 to 2012. Medicine (United States), 2016, 95, e4802.	0.4	4
33	Iowa Wavering on Medicaid: From Expansion to Modernization. Journal of Health Politics, Policy and Law, 2016, 41, 287-300.	0.9	8
34	Consumers or Citizens? Whose Voice Will Healthwatch Represent and Will It Matter? Comment on "Challenges Facing Healthwatch, a New Consumer Champion in England". International Journal of Health Policy and Management, 2016, 5, 667-669.	0.5	2
35	Observation Rates At Veterans' Hospitals More Than Doubled During 2005–13, Similar To Medicare Trends. Health Affairs, 2015, 34, 1730-1737.	2.5	24
36	Voices of the Vulnerable: Community health centres and the promise and peril of consumer governance. Public Management Review, 2015, 17, 57-71.	3.4	5

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37	Federally Qualified Health Center Use Among Dual Eligibles: Rates Of Hospitalizations And Emergency Department Visits. Health Affairs, 2015, 34, 1147-1155.	2.5	38
38	Variation in Local Health Department Primary Care Services as a Function of Health Center Availability. Journal of Public Health Management and Practice, 2015, 21, E1-E9.	0.7	11
39	Implementation of the Affordable Care Act and Rural Health Clinic Capacity in Iowa. Journal of Primary Care and Community Health, 2015, 6, 61-65.	1.0	12
40	Do patients have a voice? The social stratification of health center governing boards. Health Expectations, 2015, 18, 430-437.	1.1	10
41	Organizational Scope of Practice: Assessing the Primary Care and Public Health Activities of Health Centers and Health Departments in Iowa. Population Health Management, 2015, 18, 137-145.	0.8	3
42	Mission, Margin, and the Role of Consumer Governance in Decision-Making at Community Health Centers. Journal of Health Care for the Poor and Underserved, 2014, 25, 930-947.	0.4	11
43	Hospital, Patient, and Local Health System Characteristics Associated with the Prevalence and Duration of Observation Care. Health Services Research, 2014, 49, 1088-1107.	1.0	15
44	The Origin and Disposition of Medicare Observation Stays. Medical Care, 2014, 52, 796-800.	1.1	13
45	Health Centers in States With Public Health Agency Support Do Not Have Better Chronic Disease Outcomes. Journal of Primary Care and Community Health, 2014, 5, 166-172.	1.0	0
46	Ruralâ€Urban Differences in Consumer Governance at Community Health Centers. Journal of Rural Health, 2013, 29, 125-131.	1.6	7
47	Consumer Governance May Harm Health Center Financial Performance. Journal of Primary Care and Community Health, 2013, 4, 202-208.	1.0	3
48	Who Governs Federally Qualified Health Centers?. Journal of Health Politics, Policy and Law, 2013, 38, 27-55.	0.9	29
49	Trends in Observation Care Among Medicare Feeâ€forâ€6ervice Beneficiaries at Critical Access Hospitals, 2007â€2009. Journal of Rural Health, 2013, 29, s1-6.	1.6	7
50	When Patients Govern: Federal Grant Funding and Uncompensated Care at Federally Qualified Health Centers. Journal of Health Care for the Poor and Underserved, 2013, 24, 954-967.	0.4	9
51	Sharp Rise In Medicare Enrollees Being Held In Hospitals For Observation Raises Concerns About Causes And Consequences. Health Affairs, 2012, 31, 1251-1259.	2.5	133
52	Consumer Governance and the Provision of Enabling Services That Facilitate Access to Care at Community Health Centers. Medical Care, 2012, 50, 668-675.	1.1	16
53	Characterizing and Fostering Charity Care in the Surgeon Workforce. Annals of Surgery, 2011, 254, 169-173.	2.1	1
54	The road to efficiency? Re-examining the impact of the primary care physician workforce on health care utilization rates. Social Science and Medicine, 2010, 70, 2006-2010.	1.8	27

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55	Time Is Money: Opportunity Cost and Physicians' Provision of Charity Care 1996–2005. Health Services Research, 2010, 45, 1670-1692.	1.0	2
56	Taking Care of the Uninsured: A Path to Reform. Journal of Health Care for the Poor and Underserved, 2010, 21, 406-409.	0.4	1
57	Care in the Country: A Historical Case Study of Long-Term Sustainability in 4 Rural Health Centers. American Journal of Public Health, 2009, 99, 1612-1618.	1.5	21
58	Incidental Findings: Lessons from My Patients in the Art of Medicine (review). Journal of Health Care for the Poor and Underserved, 2007, 18, 722-724.	0.4	0
59	Community-Based Health Organizations: Advocating for Improved Health (review). Journal of Health Care for the Poor and Underserved, 2006, 17, 240-241.	0.4	0
60	Social Justice and Community Health Centers: Commitment to One Gave Rise to the Other. Journal of Health Care for the Poor and Underserved, 2005, 16, 607-611.	0.4	4