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List of Publications by Year in descending order

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Version: 2024-02-01

87
papers

3,268
citations

186265

28
h-index

155660

55
g-index

88
all docs

88
docs citations

88
times ranked

3165
citing authors

#	ARTICLE	IF	CITATIONS
1	Choosing Wisely – The Politics and Economics of Labeling Low-Value Services. <i>New England Journal of Medicine</i> , 2014, 370, 589-592.	27.0	227
2	Prevalence of Screening for Food Insecurity, Housing Instability, Utility Needs, Transportation Needs, and Interpersonal Violence by US Physician Practices and Hospitals. <i>JAMA Network Open</i> , 2019, 2, e1911514.	5.9	225
3	Interventions Aimed at Reducing Use of Low-Value Health Services: A Systematic Review. <i>Medical Care Research and Review</i> , 2017, 74, 507-550.	2.1	221
4	Choosing Wisely: Prevalence and Correlates of Low-Value Health Care Services in the United States. <i>Journal of General Internal Medicine</i> , 2015, 30, 221-228.	2.6	206
5	Days Spent at Home – A Patient-Centered Goal and Outcome. <i>New England Journal of Medicine</i> , 2016, 375, 1610-12.	27.0	160
6	Spending Differences Associated With the Medicare Physician Group Practice Demonstration. <i>JAMA - Journal of the American Medical Association</i> , 2012, 308, 1015.	7.4	141
7	First National Survey Of ACOs Finds That Physicians Are Playing Strong Leadership And Ownership Roles. <i>Health Affairs</i> , 2014, 33, 964-971.	5.2	124
8	Prescription Opioid Use Among Disabled Medicare Beneficiaries. <i>Medical Care</i> , 2014, 52, 852-859.	2.4	122
9	Cascades of Care After Incidental Findings in a US National Survey of Physicians. <i>JAMA Network Open</i> , 2019, 2, e1913325.	5.9	105
10	Association Between Medicare Accountable Care Organization Implementation and Spending Among Clinically Vulnerable Beneficiaries. <i>JAMA Internal Medicine</i> , 2016, 176, 1167.	5.1	102
11	Swimming against the Current – What Might Work to Reduce Low-Value Care?. <i>New England Journal of Medicine</i> , 2014, 371, 1280-1283.	27.0	90
12	Accountable Care Organizations in the United States: Market and Demographic Factors Associated with Formation. <i>Health Services Research</i> , 2013, 48, 1840-1858.	2.0	88
13	Few ACOs Pursue Innovative Models That Integrate Care For Mental Illness And Substance Abuse With Primary Care. <i>Health Affairs</i> , 2014, 33, 1808-1816.	5.2	82
14	A Taxonomy of Accountable Care Organizations for Policy and Practice. <i>Health Services Research</i> , 2014, 49, n/a-n/a.	2.0	79
15	Hospitals Participating In ACOs Tend To Be Large And Urban, Allowing Access To Capital And Data. <i>Health Affairs</i> , 2016, 35, 431-439.	5.2	76
16	Prevalence and Cost of Care Cascades After Low-Value Preoperative Electrocardiogram for Cataract Surgery in Fee-for-Service Medicare Beneficiaries. <i>JAMA Internal Medicine</i> , 2019, 179, 1211.	5.1	70
17	For Selected Services, Blacks And Hispanics More Likely To Receive Low-Value Care Than Whites. <i>Health Affairs</i> , 2017, 36, 1065-1069.	5.2	55
18	Physician perceptions of Choosing Wisely and drivers of overuse. <i>American Journal of Managed Care</i> , 2016, 22, 337-43.	1.1	45

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19	An Early Assessment of Accountable Care Organizationsâ€™ Efforts to Engage Patients and Their Families. <i>Medical Care Research and Review</i> , 2015, 72, 580-604.	2.1	42
20	Cancer spending and accountable care organizations: Evidence from the Physician Group Practice Demonstration. <i>Healthcare</i> , 2013, 1, 100-107.	1.3	40
21	Accountable Care Organizations: The National Landscape. <i>Journal of Health Politics, Policy and Law</i> , 2015, 40, 647-668.	1.9	38
22	Payer Type and Low-Value Care: Comparing Choosing Wisely Services across Commercial and Medicare Populations. <i>Health Services Research</i> , 2018, 53, 730-746.	2.0	38
23	Innovation in the Safety Net: Integrating Community Health Centers Through Accountable Care. <i>Journal of General Internal Medicine</i> , 2014, 29, 1484-1490.	2.6	37
24	Preventive Care Quality of Medicare Accountable Care Organizations. <i>Medical Care</i> , 2016, 54, 326-335.	2.4	37
25	Use of non-indicated cardiac testing in low-risk patients: Choosing Wisely. <i>BMJ Quality and Safety</i> , 2015, 24, 149-153.	3.7	36
26	Choosing Wisely Campaign: Valuable For Providers Who Knew About It, But Awareness Remained Constant, 2014â€“17. <i>Health Affairs</i> , 2017, 36, 2005-2011.	5.2	36
27	Accountability across the Continuum: The Participation of Postacute Care Providers in Accountable Care Organizations. <i>Health Services Research</i> , 2016, 51, 1595-1611.	2.0	34
28	Impact of Payment Reform on Chemotherapy at the End of Life. <i>Journal of Oncology Practice</i> , 2012, 8, e6s-e13s.	2.5	32
29	Early Effects of the San Francisco Paid Sick Leave Policy. <i>American Journal of Public Health</i> , 2014, 104, 2453-2460.	2.7	31
30	Association Between Care Management and Outcomes Among Patients With Complex Needs in Medicare Accountable Care Organizations. <i>JAMA Network Open</i> , 2019, 2, e196939.	5.9	30
31	Determinants of success in Shared Savings Programs: An analysis of ACO and market characteristics. <i>Healthcare</i> , 2017, 5, 53-61.	1.3	28
32	Low-Value Care at the Actionable Level of Individual Health Systems. <i>JAMA Internal Medicine</i> , 2021, 181, 1490.	5.1	28
33	The new frontier of strategic alliances in health care: New partnerships under accountable care organizations. <i>Social Science and Medicine</i> , 2017, 190, 1-10.	3.8	27
34	The Affordable Care Act and Cancer Care Delivery. <i>Cancer Journal (Sudbury, Mass)</i> , 2017, 23, 163-167.	2.0	26
35	Financial Integrationâ€™s Impact On Care Delivery And Payment Reforms: A Survey Of Hospitals And Physician Practices. <i>Health Affairs</i> , 2020, 39, 1302-1311.	5.2	26
36	ACOs Holding Commercial Contracts Are Larger And More Efficient Than Noncommercial ACOs. <i>Health Affairs</i> , 2016, 35, 1849-1856.	5.2	25

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37	Implementation of a Pilot Accountable Care Organization Payment Model and the Use of Discretionary and Nondiscretionary Cardiovascular Care. <i>Circulation</i> , 2014, 130, 1954-1961.	1.6	21
38	Changes in Use of Postacute Care Associated With Accountable Care Organizations in Hip Fracture, Stroke, and Pneumonia Hospitalized Cohorts. <i>Medical Care</i> , 2019, 57, 444-452.	2.4	21
39	Avoiding Low-Value Care. <i>New England Journal of Medicine</i> , 2014, 370, e21.	27.0	20
40	Explaining Sluggish Savings under Accountable Care. <i>New England Journal of Medicine</i> , 2017, 377, 1809-1811.	27.0	19
41	Role of Pharmacy Services in Accountable Care Organizations. <i>Journal of Managed Care & Specialty Pharmacy</i> , 2015, 21, 338-344.	0.9	17
42	Assessing Differences between Early and Later Adopters of Accountable Care Organizations Using Taxonomic Analysis. <i>Health Services Research</i> , 2016, 51, 2318-2329.	2.0	17
43	Accountable Care Organizations and Post-Acute Care: A Focus on Preferred SNF Networks. <i>Medical Care Research and Review</i> , 2020, 77, 312-323.	2.1	17
44	Moving Forward With Accountable Care Organizations. <i>JAMA Internal Medicine</i> , 2017, 177, 527.	5.1	16
45	Assessment of Prevalence and Cost of Care Cascades After Routine Testing During the Medicare Annual Wellness Visit. <i>JAMA Network Open</i> , 2020, 3, e2029891.	5.9	16
46	Organizational integration, practice capabilities, and outcomes in clinically complex medicare beneficiaries. <i>Health Services Research</i> , 2020, 55, 1085-1097.	2.0	15
47	Surprise Billing—A Flashpoint for Major Policy Issues in Health Care. <i>JAMA - Journal of the American Medical Association</i> , 2021, 325, 715.	7.4	15
48	ACO contracting with private and public payers: a baseline comparative analysis. <i>American Journal of Managed Care</i> , 2014, 20, 1008-14.	1.1	14
49	Medicare Accountable Care Organizations of Diverse Structures Achieve Comparable Quality and Cost Performance. <i>Health Services Research</i> , 2018, 53, 2303-2323.	2.0	13
50	Why Do Physicians Pursue Cascades of Care After Incidental Findings? A National Survey. <i>Journal of General Internal Medicine</i> , 2020, 35, 1352-1354.	2.6	13
51	Accountable Care Organizations—™ Increase In Nonphysician Practitioners May Signal Shift For Health Care Workforce. <i>Health Affairs</i> , 2020, 39, 1080-1086.	5.2	13
52	Accountable care organizations are increasingly led by physician groups rather than hospital systems. <i>American Journal of Managed Care</i> , 2020, 26, 225-228.	1.1	13
53	Medicare Accountable Care Organizations Are Not Associated With Reductions in the Use of Low-Value Coronary Revascularization. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2018, 11, e004492.	2.2	12
54	Measuring overuse with electronic health records data. <i>American Journal of Managed Care</i> , 2018, 24, 19-25.	1.1	12

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55	Quality of Care Improves for Patients with Diabetes in Medicare Shared Savings Accountable Care Organizations: Organizational Characteristics Associated with Performance. <i>Population Health Management</i> , 2018, 21, 401-408.	1.7	11
56	Association of Organizational Factors and Physician Practices'™ Participation in Alternative Payment Models. <i>JAMA Network Open</i> , 2020, 3, e202019.	5.9	11
57	Physician practices in Accountable Care Organizations are more likely to collect and use physician performance information, yet base only a small proportion of compensation on performance data. <i>Health Services Research</i> , 2019, 54, 1214-1222.	2.0	10
58	Beyond PCMHs and Accountable Care Organizations: Payment Reform That Encourages Customized Care. <i>Journal of General Internal Medicine</i> , 2014, 29, 1325-1327.	2.6	8
59	Screening Mammography Use Among Older Women Before and After the 2009 U.S. Preventive Services Task Force Recommendations. <i>Journal of Women's Health</i> , 2016, 25, 1030-1037.	3.3	8
60	End-of-Life Care Planning in Accountable Care Organizations: Associations with Organizational Characteristics and Capabilities. <i>Health Services Research</i> , 2018, 53, 1662-1681.	2.0	8
61	Utilization by Long-Term Nursing Home Residents Under Accountable Care Organizations. <i>Journal of the American Medical Directors Association</i> , 2021, 22, 406-412.	2.5	8
62	San Francisco's 'Pay Or Play'™ Employer Mandate Expanded Private Coverage By Local Firms And A Public Care Program. <i>Health Affairs</i> , 2013, 32, 69-77.	5.2	7
63	Falling Down on the Job: Evaluation and Treatment of Fall Risk Among Older Adults With Upper Extremity Fragility Fractures. <i>Physical Therapy</i> , 2017, 97, 280-289.	2.4	7
64	The Effect of Medicare Accountable Care Organizations on Early and Late Payments for Cardiovascular Disease Episodes. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2018, 11, e004495.	2.2	7
65	ACO Contracts With Downside Financial Risk Growing, But Still In The Minority. <i>Health Affairs</i> , 2019, 38, 1201-1206.	5.2	7
66	Translating Evidence into Practice: ACOs'™ Use of Care Plans for Patients with Complex Health Needs. <i>Journal of General Internal Medicine</i> , 2021, 36, 147-153.	2.6	7
67	Configuration and Delivery of Primary Care in Rural and Urban Settings. <i>Journal of General Internal Medicine</i> , 2022, 37, 3045-3053.	2.6	7
68	Specialty-Based Global Payment. <i>JAMA - Journal of the American Medical Association</i> , 2016, 315, 2271.	7.4	6
69	Inclusion of Nursing Homes and Long-term Residents in Medicare ACOs. <i>Medical Care</i> , 2019, 57, 990-995.	2.4	6
70	Potential Adverse Financial Implications of the Merit-based Incentive Payment System for Independent and Safety Net Practices. <i>JAMA - Journal of the American Medical Association</i> , 2020, 324, 948.	7.4	6
71	Impact of payment reform on chemotherapy at the end of life. <i>American Journal of Managed Care</i> , 2012, 18, e200-8.	1.1	6
72	Rural Cancer Care: The Role of Space and Place in Care Delivery. <i>Annals of Surgical Oncology</i> , 2020, 27, 1724-1725.	1.5	5

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73	Estimates of ACO savings in the presence of provider and beneficiary selection. <i>Healthcare</i> , 2021, 9, 100460.	1.3	5
74	The Laborâ€Market Impact of San Francisco's Employerâ€Benefit Mandate. <i>Industrial Relations</i> , 2017, 56, 122-160.	1.6	4
75	Association between specialist compensation and Accountable Care Organization performance. <i>Health Services Research</i> , 2020, 55, 722-728.	2.0	4
76	Forgotten patients: ACO attribution omits those with low service use and the dying. <i>American Journal of Managed Care</i> , 2018, 24, e207-e215.	1.1	4
77	ACOs with risk-bearing experience are likely taking steps to reduce low-value medical services. <i>American Journal of Managed Care</i> , 2018, 24, e216-e221.	1.1	4
78	How Do Employers React to a Pay-or-Play Mandate? Early Evidence from San Francisco. <i>Forum for Health Economics and Policy</i> , 2013, 14, .	0.8	3
79	The Association of Readmission Reduction Activities with Primary Care Practice Readmission Rates. <i>Journal of General Internal Medicine</i> , 2021, , 1.	2.6	3
80	Overuse and insurance plan type in a privately insured population. <i>American Journal of Managed Care</i> , 2018, 24, 140-146.	1.1	3
81	Tracking spending among commercially insured beneficiaries using a distributed data model. <i>American Journal of Managed Care</i> , 2014, 20, 650-7.	1.1	2
82	How Do Employers React to a Pay-or-Play Mandate? Early Evidence from San Francisco. <i>Forum for Health Economics and Policy</i> , 2013, 14, .	0.8	1
83	Surprise Billing in Health Careâ€”Reply. <i>JAMA - Journal of the American Medical Association</i> , 2021, 326, 571.	7.4	1
84	NEJM Perspective Roundtable. <i>Obstetrical and Gynecological Survey</i> , 2014, 69, 461-463.	0.4	0
85	Colla et al. Respond. <i>American Journal of Public Health</i> , 2015, 105, e1-e2.	2.7	0
86	Risk-based contracting for high-need Medicaid beneficiaries: The Arkansas PASSE program. <i>Health Policy OPEN</i> , 2021, 2, 100023.	1.5	0
87	The New Frontier of Strategic Alliances: Partnership Under Accountable Care Organizations.. <i>Proceedings - Academy of Management</i> , 2017, 2017, 13981.	0.1	0