

JUSTIN W. TIMBIE, PHD
Senior Health Policy Researcher

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Justin Timbie, Ph.D., is a senior health policy researcher whose research focuses on value-based payment, health care organizational models and their effects on providers and patients, and health policy issues involving the safety net. He has over ten years of experience conducting evaluations of complex programs including evaluations of patient-centered medical home programs and global budget payment models. He is currently leading an evaluation of Marketplace reinsurance programs in three states. Dr. Timbie's research on health care organization and delivery includes studies of the impact of vertical integration on socioeconomic disparities in care and its effects on rural health care markets. He has also studied clinical integration between community health centers and other health care organizations and the effects of health system-affiliation on racial and ethnic disparities in care and the quality of care for high-need Medicare beneficiaries. Dr. Timbie has provided technical assistance to states seeking to implement value-based payment, and he currently provides technical assistance on policy analysis to the HHS Office of the Assistant Secretary for Planning and Evaluation, which has included studies on the of the impact of the Affordable Care Act on safety net providers. Dr. Timbie has conducted research on quality of care in the Medicare Advantage (MA) program since 2011, which has included comparisons of performance between MA and Traditional Medicare and studies on geographic variation in quality and the effect of vertical integration on quality of care in MA. Dr. Timbie received his doctoral degree in health policy from Harvard University and completed a postdoctoral fellowship in the Veterans Affairs Health System in Ann Arbor, Michigan.

EDUCATION

2009	Postdoctoral	Health Services Research	Veterans Affairs Health System, Ann Arbor, MI
2007	Ph.D.	Health Policy	Harvard University, Boston, MA
2000	B.A.	Biology, Spanish	University of Pennsylvania, Philadelphia PA

PROFESSIONAL EXPERIENCE

Senior Health Policy Researcher	6/2016-present
Health Policy Researcher	6/2012-6/2016
Associate Health Policy Researcher	8/2009-6/2012
RAND Corporation	Arlington, VA
Teaching Fellow	9/2004-6/2006
Kennedy School of Government	Cambridge, MA
Research Assistant	6/2004-6/2005
Department of Health Care Policy, Harvard Medical School	Boston, MA
Research Assistant	6/2000-8/2002
Center for Clinical and Genetic Economics, Duke Clinical Research Institute	Durham, NC

RESEARCH AREAS

Medicaid policy, value-based payment, delivery system reform, patient-centered medical homes, disparities, vulnerable populations, rural health, quality measurement, provider consolidation, Medicare Advantage

RELEVANT SKILLS

Policy analysis, regression analysis, factor analysis, claims analysis, qualitative data collection, survey design, stakeholder interviews, environmental scans, case studies

RELEVANT EXPERIENCE

Integrated health systems, market concentration, and socioeconomic disparities in quality of care

Client: Agency for Healthcare Research and Quality, (9/2020 – 08/2024)

Role: Principal Investigator

Tasks: This study assesses trends in health system ownership of physician practices that serve patients with low socioeconomic status (SES) and the impact of health system ownership on SES disparities in access to care and quality of care in a national sample of physician practices. I designed the analysis, lead the analysis of Medicare claims, and oversee interviews with executives of medical groups that have achieved reductions in SES disparities.

Examining Strategies Used by Safety Net Providers to Achieve Enhanced Clinical Integration within Local Delivery Systems

Client: Agency for Healthcare Research and Quality, (09/2015 – 09/2020) [Funded through RAND's Center of Excellence on Health System Performance]

Role: Project Leader

Tasks: I lead one of four projects being conducted through RAND's AHRQ-funded Center of Excellence on Health System Performance. This project seeks to identify strategies used by community health centers (CHCs) to achieve greater clinical integration with specialty practices, hospitals, and social service organizations in their communities, to examine factors facilitating or limiting the implementation of these strategies; and to examine the association between these strategies and measures of performance. I led the design of the project, conducted "landscape" interviews with stakeholders, and fielded a survey to 400 health centers in 13 states.

Does Health System Affiliation Improve Rural Hospitals' Quality and Financial Performance?

Client: Agency for Healthcare Research and Quality, (09/2015 – 09/2020) [Funded through RAND's Center of Excellence on Health System Performance]

Role: Project Leader

Tasks: I designed and lead this analysis, which examines the effect of health system affiliation on measures of access, quality, utilization, and financial performance for rural hospitals. I developed the analysis plan and oversaw both the acquisition of data sources and the statistical analysis. I managed a team of 4 researchers.

A Comparison of Disparities in Quality of Care between Independent and Health System-Affiliated Physician Groups

Client: Agency for Healthcare Research and Quality, (09/2015 – 09/2020) [Funded through RAND’s Center of Excellence on Health System Performance]

Role: Project Leader

Tasks: I designed and lead this study, which examines whether disparities in the quality of care differ for Medicare beneficiaries who receive care from providers affiliated with health systems compared with independent practices. I developed the analysis plan and oversaw its implementation. I have primary responsibility for drafting the results for submission to a peer-reviewed journal and making presentations at meetings.

Medicaid Innovation Accelerator Program: Value-Based Payment and Financial Simulations (9/16-9/20)

Client: Center for Medicaid and CHIP Services, Centers for Medicare & Medicaid Services

Role: Principal Investigator (Prime: NORC at the University of Chicago)

Tasks: RAND is providing technical assistance to state Medicaid programs on the development of alternative payment models (APMs) and is supporting state Medicaid agencies in designing and implementing APMs, value-based purchasing strategies (provider and health plan level), and financial simulation activities by providing TA to state Medicaid agencies related to the Centers for Medicare & Medicaid Services (CMCS) Medicaid Innovation Accelerator Program’s four program priority areas: (1) reducing substance use disorders, (2) improving care for Medicaid beneficiaries with complex care needs and high cost, (3) promoting community integration and long-term services and supports, and (4) supporting physical and mental health integration.

Evaluation of California Global Payment Program (11/2017-08/2019)

Client: California Department of Health Care Services

Role: Co-Principal Investigator

Tasks: California’s Medi-Cal 2020 waiver authorized the Global Payment Program (GPP), which combined federal safety net funding streams and permitted federal DSH payments to be earned for services rendered in any setting as opposed to only inpatient settings. We conducted a mixed methods evaluation that included interviews with representatives of 12 county-based health systems and assessed changes in utilization of services over the course of the GPP to assess whether the GPP was meeting its goals.

Assessment of Appropriate Use of Real-World Evidence for Medical Devices (5/2018-07/2020)

Client: National Evaluation System for health Technology Coordinating Center

Role: Principal Investigator

Tasks: RAND is conducting an assessment of the use of real-world evidence (RWE) across the medical device ecosystem. As part of this work RAND will 1) quantify current levels of RWE use through analysis of administrative data and a survey of device manufacturers; 2) assess the appropriate use of RWE in the regulation of medical devices, and identifying any data quality and methodological quality concerns; and 3) conduct case studies of programs and systems to expand use of RWE, successful and unsuccessful uses of RWE in FDA applications, and payer decisionmaking regarding coverage of medical devices.

Evaluation of the Federally Qualified Health Center Advanced Primary Care Practice Demonstration (09/2011-11/2016)

Client: Centers for Medicare & Medicaid Services

Role: Co-Principal Investigator

Tasks: This project was an evaluation of a large CMS patient-centered medical home demonstration involving a nationwide sample of Federally Qualified Health Centers. I led all analyses of secondary data for the evaluation, including analyses of Medicare and Medicaid claims. I provided oversight and mentorship of a team of researchers and programmers. I led the writing of several papers summarizing the results of the evaluation, and I interacted regularly with CMS to provide updates on progress.

Evaluating the Impact of the ACA on Public Health Service Act Programs (10/2014-09/2015)

Client: Office of the Assistant Secretary for Planning and Evaluation, US Dept of Health and Human Services
Role: Principal Investigator

Tasks: This project used a case study approach to assess the impact of the Affordable Care Act on six Public Health Service programs, including HRSA-funded health centers, Ryan White HIV/AIDS Program, Title X Family Planning Program, and the Title V Maternal and Child Health Services Block Grant Program. I designed the evaluation and oversaw the collection of qualitative data from over 360 individuals in 8 states.

Examining Implementation of the ACA's Medicaid Primary Care Payment Increase (03/2016-03/2017)

Client: Office of the Assistant Secretary for Planning and Evaluation, US Dept of health and Human Services
Role: Principal Investigator

Tasks: I led the design of this case study, which included over 50 in-depth discussions with Medicaid officials, health plan executives, patient advocates, and representatives of medical specialty societies in 9 states to understand the implementation of the 2013-2014 Medicaid primary care payment increase. I conducted approximately half of the interviews and designed the qualitative data analysis plan.

Analytic Support for Medicare Advantage Star Ratings Program (09/2011-09/2022)

Client: Centers for Medicare & Medicaid Services

Role: Co-Investigator and Task Leader

Tasks: This ongoing study involves the development of methodological approaches to enhance the rigor and effectiveness of the Star Rating system within the Medicare Advantage program. As part of this project I lead a series of analyses comparing the performance of Medicare Advantage and fee-for-service Medicare on clinical quality and patient experience measures. I developed the statistical analysis plan and oversee the work of two programmers. I brief CMS regularly on the results of our analyses.

Evaluation of PCORnet, PCORI's National Clinical Research Network (12/2014-02/2015)

Client: Patient Centered Outcomes Research Institute

Role: Principal Investigator

Tasks: PCORI contracted with RAND to evaluate the implementation of its distributed research network that was designed to facilitate clinical comparative effectiveness research across multiple delivery systems. I led the design of the evaluation, which consisted of a process and outcomes evaluation. I conducted interviews with many of the 170 stakeholders recruited for the evaluation and I led the writing of the report which synthesized qualitative and quantitative data on the readiness of the network to engage in comparative effectiveness research by the end of the 18-month project period.

Evaluation of the Medicare Imaging Demonstration (09/2010-12/2014)

Client: Centers for Medicare & Medicaid Services

Role: Co-Investigator

Tasks: RAND evaluated the impact of a demonstration of a decision support system that provided feedback on the appropriateness of orders for advanced diagnostic imaging services. I led the design of the quantitative analyses of the decision support tool and conducted the analyses. I led the writing of the final report, which was mandated by Congress.

Imputing Race/Ethnicity Data in Federal Marketplace Enrollment Systems (01/2016-02/2017)

Client: Office of the Assistant Secretary for Planning and Evaluation, US Dept of health and Human Services

Role: Principal Investigator

Tasks: This project used Bayesian techniques to impute missing race/ethnicity data in Federal Marketplace enrollment databases using enrollees' surnames and addresses. I oversaw the statistical analyses that were conducted by a team of programmers who applied an existing algorithm to a dataset of 12 million enrollees. I led the writing of the final report.

Veterans Health Administration Clinical Services Modernization Initiative (10/2013-05/2014)

Client: Veterans Health Administration (subcontract to MITRE)

Role: Co-Investigator

Tasks: This project assessed best practices in care delivery that have been implemented by exemplary health care delivery systems across the US and assessed the feasibility of implementing these practices in the VA health care system. I conducted interviews with health system executives, clinician researchers, and information technology experts and led the writing of several sections of the final report.

Specialty Payment Model Opportunities Assessment and Design (08/2013-12/2014)

Client: Centers for Medicare & Medicaid Services

Role: Co-Investigator

Tasks: For this project I provided technical assistance to CMS as the agency developed episode-based payment models for complex and intensive medical specialty areas. I developed an analysis plan to test and compare alternative attribution approaches to associated patients with practices and I oversaw the work of a programmer to conduct the analysis.

Efficiency Measures Associated with the Use of Electronic Health Records (09/2010-04/2013)

Client: Office of the National Coordinator for Health IT

Role: Co-Investigator

Tasks: As part of this study I reviewed the strengths and weaknesses of commonly proposed efficiency measures and assessed their readiness for use in measuring the impact of health IT interventions on the efficient delivery of health care services. I developed the search terms for the systematic review, abstracted data from assessments and critiques of existing measures, and led the writing of the synthesis report.

Advancing Clinical Decision Support (05/2010-03/2012)

Client: Office of the National Coordinator for Health IT

Role: Co-Investigator

Tasks: For this project I helped to develop a framework for soliciting meaningful use objectives for clinical decision support that was responsive to the needs of specialty physicians. I conducted literature reviews of existing decision support tools, analyzed ratings from expert panels, and led the writing of a paper that described our framework and presented specialists' highest rated priorities for decision support tools.

Advancing the Methodology in Physician Cost Profiling (11/2010-04/2012)

Client: Robert Wood Johnson Foundation

Role: Principal Investigator

Tasks: This project examined approaches for adjusting physicians' relative cost profiles for a patient's socioeconomic status and explored alternative ways of creating 'peer groups' for benchmarking performance. I led the design of the study and oversaw the work of two programmers.

Allocation of Scarce Resources during Mass Casualty Events (09/2010-02/2012)

Client: Agency for Healthcare Research and Quality

Role: Co-Investigator

Tasks: On behalf of the Office of the Assistant Secretary for Preparedness and Response (ASPR), RAND conducted a systematic review of the comparative effectiveness of strategies for allocating scarce resources during mass casualty events. I helped to design the search terms, reviewed and abstracted data from relevant articles, and led the writing of the final report.

Dissemination and Adoption of CER Findings that Challenge Current Practices (08/2010-11/2011)

Client: Office of the Assistant Secretary for Planning and Evaluation, US Dept of health and Human Services

Role: Co-Investigator

Tasks: As part of this project, I conducted case studies of landmark comparative effectiveness studies to determine the barriers and facilitators in disseminating the results and the subsequent adoption of the findings. I co-led the design of the study, conducted interviews with stakeholders associated with the 5 case study topics, and led the writing of the final report.

HONORS AND AWARDS

2011	Robert Brook Scholar (RAND)
2006	Student Paper Award, Health Policy Statistics Section, American Statistical Association
2004-2007	Managed Care Industry Research Center Fellowship, Harvard University

TEACHING EXPERIENCE

Quantitative Analysis and Empirical Methods, Teaching Fellow (Fall 2004). Kennedy School of Government, Harvard University, Cambridge, MA

Program Evaluation for Managers, Teaching Fellow (Spring 2005). Kennedy School of Government, Harvard University, Cambridge, MA

Advanced Quantitative Methods I, Teaching Fellow (Fall 2005). Kennedy School of Government, Harvard University, Cambridge, MA

Program Evaluation: Estimating Program Effectiveness with Empirical Analysis, Teaching Fellow (Spring 2006). Kennedy School of Government, Harvard University, Cambridge, MA

REVIEWER – GRANTS

State Health Information Exchange Challenge Grant Program, Office of the National Coordinator for Health IT (2011)

REVIEWER – PEER-REVIEWED JOURNALS

Health Affairs
Journal of General Internal Medicine
Circulation
Diabetes Care
Medical Care
Health Services Research
Statistics in Medicine
BMC Medical Research Methodology
Circulation: Cardiovascular Quality & Outcomes
Journal of Clinical Outcomes Management

RELEVANT PUBLICATIONS (SELECTED)

Journal Articles

- Timbie JW, Kranz AM, DeYoreo M, Eshete-Roesler B, Elliott MN, Escarce JJ, Totten ME, Damberg CL. Racial and ethnic disparities in care for health system-affiliated physician organizations and non-affiliated physician organizations. *Health Serv Res.* 2020 Dec;55 Suppl 3:1107-1117. doi: 10.1111/1475-6773.13581. Epub 2020 Oct 23. PMID: 33094846
- Kranz AM, DeYoreo M, Eshete-Roesler B, Damberg CL, Totten M, Escarce JJ, Timbie JW. Health system affiliation of physician organizations and quality of care for Medicare beneficiaries who have high needs. *Health Serv Res.* 2020 Dec;55 Suppl 3:1118-1128.
- Kranz AM, Mahmud A, Agniel D, Damberg C, **Timbie JW**. Provision of Social Services and Health Care Quality in US Community Health Centers, 2017. *Am J Public Health.* 2020 Feb 20:e1-e7. doi: 10.2105/AJPH.2019.305519. [Epub ahead of print] PMID: 32078348
- O'Hanlon CE, Kranz AM, DeYoreo M, Mahmud A, Damberg CL, **Timbie JW**. Access, Quality, And Financial Performance Of Rural Hospitals Following Health System Affiliation. *Health Affairs* 2019 Dec; 38(12):1-10.
- Timbie JW**, Kranz AM, Mahmud A, Setodji CM, Damberg CL. Federally Qualified Health Center Strategies for Integrating Care with Hospitals and Their Association with Measures of Communication. *Jt Comm J Qual Patient Saf.* 2019 Sep;45(9):620-628. doi: 10.1016/j.jcjq.2019.06.004. Epub 2019 Aug 15.
- Timbie JW**, Kranz AM, Mahmud A, Damberg CL. Specialty care access for Medicaid enrollees in expansion states. *Am J Manag Care.* 2019 Mar 1;25(3):e83-e87.
- Timbie JW, DeYoreo M, Liu JL, Quigley DD, Baseman L, Slaughter ME, Palimaru AI, and Kahn KL. Evaluation of California's Global Payment Program: Final Report. Santa Monica, CA: RAND Corporation, 2019. https://www.rand.org/pubs/research_reports/RR3080.html.

- Rose AJ, **Timbie JW**, Setodji C, Friedberg MW, Malsberger R, Kahn KL. Primary Care Visit Regularity and Patient Outcomes: an Observational Study. *J Gen Intern Med*. 2018 Oct 26. doi: 10.1007/s11606-018-4718-x. [Epub ahead of print]
- Kranz A, Damberg CD, Dalton S, **JW Timbie**. Using Health IT to Coordinate Care and Improve Quality in Safety Net Clinics. *Jt Comm J Qual Patient Saf*. 2018 Dec;44(12):731-740. doi: 10.1016/j.jcjq.2018.03.006. Epub 2018 Jun 18.
- Lavelle TA, Rose AJ, **Timbie JW**, Setodji CM, Wensky SG, Giuriceo KD, Friedberg MW, Malsberger R, Kahn KL. Utilization of health care services among Medicare beneficiaries who visit federally qualified health centers. *BMC Health Serv Res*. 2018 Jan 25;18(1):41. doi: 10.1186/s12913-018-2847-x.
- Mahmud A, **Timbie JW**, Malsberger R, Setodji CM, Kress A, Hiatt L, Mendel P, Kahn KL. Examining differential performance of 3 medical home recognition programs. *Am J Manag Care*. 2018 Jul;24(7):334-340.
- Mendel P, Chen EK, Green HD, Armstrong C, **Timbie JW**, Kress AM, Friedberg MW, Kahn KL. Pathways to Medical Home Recognition: A Qualitative Comparative Analysis of the PCMH Transformation Process. *Health Serv Res*. 2017 Dec 15. doi: 10.1111/1475-6773.12803. [Epub ahead of print]
- Timbie JW**, Bogart A, Damberg CL, Elliott MN, Haas A, Gaillot SJ, Goldstein EH, Paddock SM. Medicare Advantage and Fee-for-Service Performance on Clinical Quality and Patient Experience Measures: Comparisons from Three Large States. *Health Serv Res*. 2017 Dec;52(6):2038-2060. doi: 10.1111/1475-6773.12787.
- Friedberg MW, Reid RO, **Timbie JW**, Setodji C, Kofner A, Weidmer B, Kahn KL. Federally Qualified Health Center Clinicians And Staff Increasingly Dissatisfied With Workplace Conditions. *Health Aff (Millwood)*. 2017 Aug 1;36(8):1469-1475. doi: 10.1377/hlthaff.2017.0205.
- Timbie JW**, Setodji CM, Kress A, Lavelle TA, Friedberg MW, Mendel PJ, Chen EK, Weidmer BA, Buttorff C, Malsberger R, Kommareddi M, Rastegar R, Kofner A, Hiatt L, Mahmud A, Giuriceo KD, Kahn KL. Medical Home Implementation in Federally Qualified Health Centers. *N Engl J Med*. 2017 Jul 20;377(3):246-256. doi: 10.1056/NEJMsa1616041. Epub 2017 Jun 21.
- Timbie JW**, Hussey PS, Setodji CM, Kress A, Malsberger R, Lavelle TA, Friedberg MW, Wensky SG, Giuriceo KD, Kahn KL. Association Between Patient-Centered Medical Home Capabilities and Outcomes for Medicare Beneficiaries Seeking Care from Federally Qualified Health Centers. *J Gen Intern Med*. *J Gen Intern Med*. 2017 May 26. doi: 10.1007/s11606-017-4078-y. [Epub ahead of print]
- Hussey PS, **Timbie JW**, Burgette LF, Wenger NS, Nyweide DJ, Kahn KL. Appropriateness of advanced diagnostic imaging ordering before and after implementation of clinical decision support systems. *JAMA*. 2015 Jun 2;313(21):2181-2. doi: 10.1001/jama.2015.5089.
- Timbie JW**, Hussey PS, Adams JL, Ruder TW, Mehrotra A. Impact of socioeconomic adjustment on physicians' relative cost of care. *Med Care*. 2013 May;51(5):454-60.

Timbie JW, Fox DS, Van Busum K, Schneider EC. Five reasons that many comparative effectiveness studies fail to change patient care and clinical practice. *Health Aff (Millwood)*. 2012 Oct;31(10):2168-75.

Timbie JW, Damberg CL, Schneider EC, Bell DS. A conceptual framework and protocol for defining clinical decision support objectives applicable to medical specialties. *BMC Med Inform Decis Mak*. 2012 Sep 3;12(1):93.

Timbie JW, Hayward RA, Vijan S. Variation in the net benefit of aggressive cardiovascular risk factor control across the US population of patients with diabetes mellitus. *Arch Intern Med*. 2010 Jun 28;170(12):1037-44.

Timbie JW, Hayward RA, Vijan S. Diminishing efficacy of combination therapy, response-heterogeneity, and treatment intolerance, limit the attainability of tight risk factor control in patients with diabetes. *Health Serv Res*. 2010 Mar;45(2): 437-456.

Timbie JW, Shahian DM, Newhouse JP, Rosenthal MB, Normand SL. Composite measures for hospital quality using quality-adjusted life years. *Stat Med*. 2009 Apr 15;28(8):1238-54.

Timbie JW, Newhouse JP, Rosenthal MB, Normand SL. A cost-effectiveness framework for profiling the value of hospital care. *Med Decis Making*. 2008 May-Jun;28(3):419-34.

Timbie JW, Normand SL. A comparison of methods for combining quality and efficiency performance measures: Profiling the value of hospital care following acute myocardial infarction. *Stat Med*. 2008 Apr 30;27(9):1351-70.

Levin-Scherz J, DeVita N, **Timbie JW**. Impact of pay-for-performance contracts and network registry on diabetes and asthma HEDIS measures in an integrated delivery network. *Med Care Res Rev*. 2006 Feb;63(1 Suppl):14S-28S.

Peer-Reviewed RAND Reports

Patient-Centered Medical Home Implementation in Indian Health Service Direct Service Facilities (2018). **Justin W. Timbie**, Ammarah Mahmud, Christine Buttorff, Erika Meza, Santa Monica, CA: RAND Corporation, RR-2348-ASPEC.

Examining the Implementation of the Medicaid Primary Care Payment Increase (2017). **Justin W. Timbie**, Christine Buttorff, Virginia I. Kotzias, Spencer R. Case, Ammarah Mahmud, Santa Monica, CA: RAND Corporation, RR-1802-ASPEC.

Evaluation of CMS's Federally Qualified Health Center (FQHC) Advanced Primary Care Practice (APCP) Demonstration: Final Report (2017). Katherine L. Kahn, **Justin W. Timbie**, Mark W. Friedberg, Peter Mendel, Liisa Hiatt, Emily K. Chen, Amii M. Kress, Christine Buttorff, Tara A. Lavelle, Beverly A. Weidmer, Harold D. Green, Mallika Kommareddi, Rosalie Malsberger, Aaron Kofner, Afshin Rastegar, Claude Messan Setodji, Santa Monica, CA: RAND Corporation, RR-886/2-CMS.

Evaluation of CMS's Federally Qualified Health Center Advanced Primary Care Practice Demonstration: Final Second Annual Report (2015). Katherine L. Kahn, **Justin W. Timbie**, Mark William Friedberg, Tara A. Lavelle, Peter Mendel, J.Scott Ashwood, Liisa Hiatt, Ian Brantley, Beverly A. Weidmer, Afshin Rastegar, Aaron Kofner, Rosalie Malsberger, Mallika Kommareddi, Denise D. Quigley, Claude Messan Setodji, Santa Monica, CA: RAND Corporation, RR-886/1.

Evaluation of CMS' FQHC APCP Demonstration: Final First Annual Report (2015). Katherine L. Kahn, **Justin W. Timbie**, Mark William Friedberg, Peter S. Hussey, Tara A. Lavelle, Peter Mendel, Liisa Hiatt, Beverly A. Weidmer, Aaron Kofner, Afshin Rastegar, J.Scott Ashwood, Ian Brantley, Denise D. Quigley, Claude Messan Setodji, Santa Monica, CA: RAND Corporation, RR-886.

National Patient-Centered Clinical Research Network (PCORnet) phase I : final evaluation report (2015). **Justin W. Timbie**, Robert S. Rudin, Vivian L. Towe, Emily K. Chen, Lauren E. Hunter, Spencer Reynolds Case, Virginia I. Kotzias, Zachary Predmore, Shaela Moen, M. Susan Ridgely. Santa Monica, CA: RAND Corporation, RR-1191-PCORI.

Medicare Imaging Demonstration Final Evaluation: Report to Congress (2014). **Justin W. Timbie**, Peter S. Hussey, Lane F. Burgette, Neil S. Wenger, Afshin Rastegar, Ian Brantley, Dmitry Khodyakov, Kristin Leuschner, Beverly A. Weidmer, Katherine L. Kahn, Santa Monica, CA: RAND Corporation, RR-706.

Specialty Payment Model Opportunities and Assessment: Gastroenterology and Cardiology Model Design Report (2015). Andrew Mulcahy, Chris Chan, Samuel Hirshman, Peter J. Huckfeldt, Aaron Kofner, Jodi Liu, Susan L. Lovejoy, Ioana Popescu, **Justin W. Timbie**, Peter S. Hussey, Santa Monica, CA: RAND Corporation, RR-831.

Specialty Payment Model Opportunities and Assessment: Oncology Model Design Report (2015). Peter J. Huckfeldt, Chris Chan, Samuel Hirshman, Aaron Kofner, Jodi Liu, Andrew Mulcahy, Ioana Popescu, Clare Stevens, **Justin W. Timbie**, Peter S. Hussey, Santa Monica, CA: RAND Corporation, RR-763.

Specialty Payment Model Opportunities and Assessment: Oncology Simulation Report (2015). Chapin White, Chris Chan, Peter J. Huckfeldt, Aaron Kofner, Andrew Mulcahy, Julia Pollak, Ioana Popescu, Justin W. Timbie, Peter S. Hussey, Santa Monica, CA: RAND Corporation, RR-799.

Gresenz CR, Blanchard JC, **Timbie JW**, Acosta J, Pollack CE, Ruder T, Saloner B, Benjamin-Johnson R, Weinick RM, Adamson DM, Hair B. 2010. "Behavioral Health in the District of Columbia: Assessing Need and Evaluating the Public System of Care." Santa Monica, CA: RAND Corporation, TR-914-DCMH.

INVITED PRESENTATIONS

"A cost-effectiveness framework for profiling hospital efficiency." Panel on Measuring Efficiency of Health Care. AcademyHealth Annual Research Meeting, Orlando, FL, June 3-5, 2007.

PRESENTATIONS (SELECTED)

“A Comparison of Disparities in Quality of Care Between Independent and Health System Affiliated Physician Organizations.” AcademyHealth Annual Research Meeting, Washington, DC, June 3, 2019

“Specialty care access remains challenging for Medicaid enrollees in expansion states: Findings from a Survey of Health Center Medical Directors.” AcademyHealth Annual Research Meeting, Seattle, WA, June 24, 2018

“Examining primary care/specialty care integration in US health centers and its association with improved care coordination outcomes.” AcademyHealth Annual Research Meeting, Seattle, WA, June 24, 2018

“Examining health centers’ integration with social service organizations and its association with quality of care.” AcademyHealth Annual Research Meeting, Seattle, WA, June 24, 2018

“Implementation of Patient-Centered Medical Homes in Small and Rural Practices: The Experience of Indian Health Service Clinics.” AcademyHealth Annual Research Meeting, Seattle, WA, June 25, 2018

“Medicare Advantage Contract Characteristics Associated with High Performance.” AcademyHealth Annual Research Meeting, Seattle, WA, June 25, 2018

“Patient-Centered Medical Home Implementation in Federally Qualified Health Centers: Results of the CMS FQHC Advanced Primary Care Practice Demonstration.” AcademyHealth Annual Research Meeting, New Orleans, LA, June 26, 2017

“Explaining the Limited Impact of the Affordable Care Act’s Medicaid Primary Care Payment Increase: A 9-State Case Study.” AcademyHealth Annual Research Meeting, New Orleans, LA, June 26, 2017

“Differences between Medicare Advantage and Fee-for-Service Medicare on Clinical Quality and Patient Experience Measures.” AcademyHealth Annual Research Meeting, New Orleans, LA, June 26, 2017

“Assessing Changes in Patient Volume and Loyalty in Federally Qualified Health Centers Undergoing Patient-Centered Medical Home Transformation.” AcademyHealth Annual Research Meeting, Boston, MA, June 27, 2016

“Challenges and Opportunities for Strengthening Clinical Decision Support Programs: Evidence from the Medicare Imaging Demonstration.” AcademyHealth Annual Research Meeting, Minneapolis, MN, June 15, 2015

“Association Between Patient-Centered Medical Home Features and Cost, Utilization, and Quality of Care among Medicare Beneficiaries Seeking Care from Federally Qualified Health Centers.” AcademyHealth Annual Research Meeting, Baltimore, MD, June 2014

“Dissemination and Adoption of CER Findings when Findings Challenge Current Practices.” International Society for Pharmacoeconomics and Outcomes Research 17th Annual International Meeting, Washington, DC, June 2014

DC, June 4, 2012; AcademyHealth Annual Research Meeting, Orlando, FL, June 24, 2012

“A Protocol for Eliciting Clinical Decision Support Objectives for Medical Specialties: Development and Pilot Demonstration.” AcademyHealth Annual Research Meeting, Orlando, FL, June 25, 2012

“Enhancing the Validity of Physician Cost Benchmarking: A Novel Application of Propensity Scores to Derive Customized Physician Peer Groups.” AcademyHealth Annual Research Meeting, Orlando, FL, June 26, 2012

“Comparative Effectiveness Research Results that Challenge Clinical Practice: Factors Associated with Adoption.” AcademyHealth Annual Research Meeting, Seattle, WA, June 12-14, 2011.

“Impact of Socioeconomic Adjustment on Physician Cost Profiles.” Society for General Internal Medicine Annual Meeting, Phoenix, AZ, May 5-7, 2011, and AcademyHealth Annual Research Meeting, Seattle, WA, June 12-14, 2011.

“Do intermediate outcome measures of quality provide incentives for inefficient care?” AcademyHealth Annual Research Meeting, Chicago, IL, June 28-30, 2009.

“Implications of treatment-response heterogeneity for the use of intermediate outcome measures of quality.” VA HSR&D National meeting, Baltimore, MD, February 11-13, 2009.

“Composite measures for hospital quality using quality-adjusted life years.” AcademyHealth Annual Research Meeting, Washington, DC, June 8-10, 2008.

“Measuring differences in the quality of CABG surgery using quality-adjusted life years.” International Conference on Health Policy Statistics, Philadelphia, PA, January 17-18, 2008.

“Profiling hospital value: Methods for combining quality and efficiency performance measures.” Joint Statistical Meetings, American Statistical Association, Seattle, WA, August 3-10, 2006.

“Hierarchical Bayesian cost-effectiveness models for creating provider profiles.” International Conference on Health Policy Research, Boston, MA, October 28-30, 2005.