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Getting Published

by Cori E. Uccello

At a recent joint meeting of the SOA's Health Benefit Systems Practice Advancement Committee (HBSPAC) and the Academy's Health Practice Council (HPC), a discussion ensued regarding actuaries publishing articles in peer-reviewed journals. Because I have published papers in peer-reviewed journals and have also served as a peer reviewer for several journals, I was asked to share my thoughts on the subject.

A primary reason for publishing in peer-reviewed journals is that it gives an article and its author(s) an extra aura of credibility and respect. In addition, journals can provide a permanent record and, as such, can have a longer shelf life than articles disseminated through other means.

That said, many researchers, if not most, publish in peer-reviewed journals because it is part of the job—career advancement often hinges on a researcher's publication record. In addition, when awarding contracts and grants, government agencies and private foundations often use a researcher's publication record as one means of evaluating a proposal. This makes the long and arduous process of turning a research report into a journal article worth undertaking. Only a fraction of articles submitted to journals ultimately get accepted, and that can be after a year or more of revisions and resubmissions. Even after an article is accepted, it can be a year or more for the article to appear in print, as many journals have very long backlogs.

The publishing process

For most actuaries other than those working in academia or in other research organizations, publishing articles is probably not high on their priority list. Nevertheless, it is important and desirable for some actuaries to publish, so it's probably a good idea to understand the process. The first step toward getting a paper published is to find the most appropriate journal to submit it to. Journals vary considerably with respect to their subject matter, the level of analytical rigor or theory required, whether the audience is multi-disciplinary or primarily of a particular discipline, the degree of public policy focus, and whether the journal includes mostly quantitative empirical papers or qualitative papers. Also, note that some journals publish a variety of papers.

A good way to determine the most appropriate journal for a given paper is to look at an entire jour-

nal volume to see the types of papers it publishes. This approach is typically better than looking at only one or two papers, because those papers might not be representative. In addition, most journals provide information regarding their editorial policy and submission guidelines in the journals themselves and/or on the journal's Web site.

I've compiled a fairly comprehensive list of journals that might be appropriate for publishing the work of health actuaries (I'm sure there are others). These include:

- *Health Affairs*
- *Inquiry*
- *Milbank Quarterly*
- *Health Care Financing Review*
- *Health Services Research*
- *Journal of Risk and Insurance*
- *Journal of Human Resources*
- *Gerontologist*
- *Journals of Gerontology*
- *Demography*
- *Journal of Health Politics, Policy and Law*
- *Journal of Health Economics*
- *Medical Care*
- *Health Policy*
- *Journal of the American Statistical Association*
- *Journal of Policy Analysis and Management*
- *Health Policy and Planning*
- *American Journal of Public Health*
- *Journal of Health and Social Policy*
- *Industrial and Labor Relations Review*
- *Industrial Relations*
- *North American Actuarial Journal*

The keys to success

I've heard some express concern that journals are only interested in publishing work from those holding doctorate degrees. I don't think that is the case. There are several keys to a successful journal submission. The article should be on target for the particular journal, address a relevant issue or question, use appropriately rigorous methods and have conclusions that follow from the results and be well written. (Note that reviewers are not notified of a paper's author(s), so they do not know whether they have doctorate degrees or not. That said, some researchers have very good reputations and/or connections to a particular journal's editor, which can ease the path toward publication.)

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Understanding how the article will be judged can be useful. Typical questions that a peer reviewer must address when evaluating a journal submission include:

- Is the manuscript substantively accurate?
- Does it contribute not just original information but also original and relevant ideas to the body of literature?
- Is the manuscript well organized and the presentation clear?
- Is the study design appropriate and the statistical analysis suitably rigorous?
- Is it timely?

Often, a manuscript will be returned with a recommendation to revise and resubmit according to the reviewers' suggestions and, at times, the required revisions can be quite extensive. It is important to be sure to address each reviewer's specific comments. When resubmitting the manuscript, it is helpful to enumerate each of the comments and actions taken to address the comment/suggestion. Note that the authors do not necessarily have to incorporate every one of the reviewers' suggestions; some suggestions are off target and others may require additional work that is beyond the scope of the paper. However, reasons should be given when not incorporating specific comments.

Other dissemination strategies

Publishing in journals is not the only way to get a paper in the public domain. Indeed, because it takes so long to get a paper published, other dissemination efforts can actually be more effective. In my experience, the papers that have received the most attention, both from researchers and the press, have been disseminated not as journal articles but through other means. Other research dissemination strategies actuaries may find worth exploring include:

- **Peer-reviewed papers**
Several foundations publish papers produced from research that they fund (e.g., Kaiser Family Foundation (KFF), AARP, the Commonwealth Fund). Prior to publication, the foundations typically send the draft reports out for peer review and the authors make any necessary revisions. (This would be somewhat similar to the SOA's Project Oversight Group (POG) system.) Research organizations often have a formal discussion paper series, and these papers are typically peer reviewed.

- **Fact sheets/bottom lines**

These are one- to two-page highly condensed pieces used to either summarize a paper's findings or highlight a few key facts or points.

- **Issue briefs**

Issue briefs are typically written for a more general audience (including policymakers and the media), and can either summarize longer research reports or can be end-products themselves. Issue briefs that simply summarize longer reports for a more general audience typically do not go through a formal peer review process, although they would go through internal review and editing. Issue briefs that present original work would be more likely to go through a more formal peer review process, although probably less so than full research reports. Many foundations and research organizations publish issue briefs (e.g., the Commonwealth Fund, Boston College Center for Retirement Research, the Urban Institute, the Heritage Foundation).

- **Working papers**

Working papers are a quick way to put out reports. They are typically not peer reviewed, but researchers will often try to get their working papers published in peer-reviewed journals or in other venues.

- **Conference volumes**

When conferences are held around a particular topic, edited volumes of the papers presented can be created. The papers could be peer reviewed or, if discussants are included in the conference, short write-ups of their comments could be included.

- **Publicly available data**

Another way that the actuarial profession can increase its exposure and standing among the research and policy community is to make the data it collects available for outside use. Economists and policy researchers would probably be very interested in obtaining access to some of the data that the SOA and private firms collect. I realize that often data is considered proprietary, but perhaps there are opportunities for collaboration between actuaries/firms with data and other researchers.

One final note

I've noticed that although actuarial consulting firms often produce papers and research reports, they are not always available to the public and,



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when they are, they can sometimes be quite expensive to obtain. Making reports more accessible to the public will increase exposure. Of course, this needs to be balanced against a firm's need to recoup costs. In addition, I've noticed that some actuarial reports leave many details out, especially regarding the methods and assumptions used in the analysis. Not only is it important to disclose what assumptions were used, it is also important to include information on why those assumptions are appropriate. This type of information can help

increase a paper's credibility and, therefore, increase its chances of being taken seriously and cited by others.

In the end, I think we should encourage wider dissemination of actuarial work and research with the goal of gaining increased recognition from other disciplines, the public, the media and actuaries themselves. It is important, however, to develop a dissemination strategy that is most appropriate for the particular case in question. 📧

Prescription Drug Issues Explored

"A Multi-Disciplinary Exploration of Prescription Drug Issues" symposium will be presented by the SOA's Health Practice Area on the afternoon of May 21 at the SOA's Spring Meeting in Anaheim, Calif. The half-day session is intended to take a fresh look at the actuarial, economic and demographic issues related to the supply and demand for prescription drug benefits and to encourage a deeper exploration of this topic from a multidisciplinary perspective. The symposium is based on papers received in response to a pharmacy benefits call for papers. Presented papers will address issues such as prescription drug utilization and expenditure patterns, and product design strategy, in either a broad or narrow concentration.

Papers being presented during this session include:

- "Determinants of Growth in Prescription Drug Utilization and Expenditures"
Paper Presenter: Marjorie Rosenberg, Ph.D., FSA
- "Managing Pharmacy Trends"
Paper Presenter: Bela Gorman, ASA, MAAA
- "Impact of Three-Tier Pharmacy Benefit Design on Drug Expenditures and Utilization"
Paper Presenter: Pamela B. Landsman, PMPH, DrPH
- "Value for Money from the Top Twenty?: A Critical Examination of Therapeutic Impact and Value of Top-Selling Drug Products against Their Competitors"
Paper Presenter: Alan Cassels, MPA
- "The Formulary Decision Process: What are they Doing in There and Can We Help?"
Paper Presenters: Jill Van Den Bos, MA; Jon Shreve, FSA; John Watkins, R.Ph., MPH
- "Prescription Drug Utilization in a Pediatric Population"
Paper Presenter: Louise Anderson, FSA, MS

- "State of Utah CHIP Pharmacy Analysis"
Paper Presenter: Dennis Kunimura

This half-day afternoon session will be preceded by two morning sessions sponsored by the Health Section also related to prescription drug issues. During the **Prescription Drug Update** session (Session 96 PD), panelists with close ties to the prescription drug benefit programs will provide updates on topics, including: anticipating the future pace of drug cost and utilization, developments in benefit design; managing the costs of drugs embedded in hospital/physician procedures; and the future evolution of pharmaceutical benefit managers.

Panelists at the Medicare Prescription Drugs session (Session 106 PD, moderated by Janet M. Carstens) will review the history of why Medicare has lacked prescription drug coverage and why some of the previous proposals to include prescription drug coverage in Medicare have failed. Also discussed are the drug benefit designs permitted under the Medicare reform legislation, the projected costs of these and alternate plan designs, and the potential impact of Medicare prescription drug coverage on related coverage, including retiree medical and Medicare Supplement.

Expand your professional contacts, show your insights and challenge your thinking on these hot topics by attending. For more information, visit the SOA Web site at http://www.soa.org/conted/bro018_04.html. 📧