

# Information for Authors and Electronic Submission Guidelines

## General Contents

The *Medicare & Medicaid Research Review* (MMRR) is a peer-reviewed, online journal published by the Centers for Medicare & Medicaid Services' Office of Research, Development, and Information. MMRR reports data and research that inform current and future directions of the Medicare, Medicaid, and Children's Health Insurance programs. The journal seeks to examine and evaluate health care coverage, quality and access to care for beneficiaries, and efficient payment for health care services. MMRR highlights the results of policy-relevant research and provides a forum for a broad range of diverse viewpoints to stimulate discussion. Our audience includes policymakers, researchers, administrators, and health care providers.

MMRR will consider for publication manuscripts that report original health care research, program evaluations, and analyses of major policy issues. As a definitive source for peer-reviewed research on these programs, MMRR will not exclude from consideration manuscripts where the study results are presented in an existing government-funded research deliverable.

## Disclosure

Manuscripts are considered with the understanding that they have not been published previously (except in the case where the research results are presented in a government-funded research deliverable) and are not under consideration by another publication. If more than one article is being prepared based on the same study, the author(s) must notify us of the substantive differences between the articles and the other publication(s). An article following presentation of preliminary findings at a scientific meeting may also be considered for publication; however, notification of the presentation must be included in the cover letter submitted with the manuscript. Authors must reduce manuscripts reporting research included in a government-funded research deliverable to focus upon a single research issue per submission, and notify us of the substantive differences between the manuscript and the other publication(s) in a cover letter.

## **Authorship**

Only those persons who participated substantially in the writing of the manuscript should be listed as authors. Other contributors should be mentioned in an acknowledgment. The author submitting the manuscript should state on the cover page that the content and wording of the acknowledgments have been approved by those mentioned. We regard this precaution as essential, because thanking colleagues for their help may be interpreted to mean that they approve of the article. If they do not, they may object to being mentioned. If the research has been supported by a grant or cooperative agreement, or performed under a contract, this information must be provided on the cover page. Please name all of your submitted electronic files with the lead author's last name, year followed by month of submission, and one or two key words regarding topic of submission separated by underscores; e.g., smith201008\_medicaid\_expansion.doc.

## **Manuscript Submission**

MMRR is converting to an electronic submission process in the future. Until that process is in place, all manuscripts should be submitted electronically to: [MMRR-Editors@cms.hhs.gov](mailto:MMRR-Editors@cms.hhs.gov)

All manuscripts submitted to MMRR are held in strict confidentiality throughout the review and production process. The editor, editorial board members, and external reviewers are not permitted to discuss, post, or otherwise share manuscript details with third parties or reveal information regarding author or reviewer correspondence.

## **Manuscript Preparation**

Please collate and submit the manuscript in this preferred order: (1) a cover page, (2) the abstract, (3) the body of the manuscript, (4) references and footnotes, (5) illustrative materials, and (6) appendix materials. Please include all text, references, footnotes, illustrative and appendix materials in as few electronic files as possible.

### *Cover Page*

The cover page must include the title of the manuscript (12 words or less); the names, formal titles, academic degrees, and affiliations of the authors; the complete addresses (including e-mail), telephone/FAX numbers of all authors; the designated contact author; the date of submission; acknowledgements and approvals; research funding information; and word count including footnotes. Please do not include author names or addresses elsewhere in the manuscript (except references as appropriate) to assist in blinding the manuscript for peer review.

### *Abstract*

Include the title of the manuscript. For manuscripts reporting original research or program evaluations, please include a 250-word structured abstract and up to 10 key words. For manuscripts reporting policy analyses, please include a 250-word abstract acquainting the prospective reader with the essence of the text by presenting very briefly the points made in the article and up to 10 key words. Abstracts must be intelligible when divorced from the article and devoid of any undefined abbreviations.

### *Text*

Please submit your manuscript text in Microsoft Word, 12-point Times New Roman font, double-spaced, with 1-inch margins and all pages numbered. Word count should be 5,000 or less including footnotes, and excluding references, tables, and figures.

### *References and Footnotes*

References should be limited to 30 or fewer. All references listed must be cited in the text and must appear, in alphabetical order, at the end of the text. Citations in text must include author's last name and date of publication. Journal references must include source, volume, issue number (if available and if paginated by issue), pages, and year of publication by following APA style, preferably using the guidelines in APA's Publication Manual, Sixth Edition. Provide digital object identifiers (DOIs) when possible. Do not abbreviate names of journals. Double-space each reference. Improperly formatted references may be returned to the author for revision, possibly delaying publication.

#### **Sample Journal Article Reference**

Gold, M. and Mittler, J. (2000, Winter). Second Generation Medicaid Managed Care: Can It Deliver? *Health Care Financing Review*, 22(2), 29-47.

### *Internet Reference*

If you cite references that appear on the Internet, you must include the following information in your reference list: author's name, document title, date of publication, complete and accurate URL, and date of access. Use the format in the following sample:

#### **Sample Internet Reference**

Smith, V. and Ellis, E. (2001, October). *Medicaid Budgets Under Stress: Survey Findings for State Fiscal Year 2000, 2001, and 2002*. Retrieved from <http://www.kff.org/content/2001/4020.pdf>

Anything attributed to another author is a reference, not a footnote. Footnotes should only be used to add important explanatory material that would be distracting in the main

flow of text. Footnotes may contain a reference. A reference by itself should not be placed in a footnote.

Footnotes must be cited in the text with a superscript number and must be numbered sequentially throughout the manuscript. Footnotes must be listed at the bottom of the page—not separately at the end of the text—and must not exceed 30 words in length.

### *Illustrative Materials*

Place all exhibits (10 maximum tables and figures in combination) at the end of the article. Each exhibit must be on a separate sheet, numbered consecutively, and specifically cited within the text. Place a note, “Exhibit n About Here,” on a separate line in the text near the first reference to the exhibit to assist editors in placement for a published article. Exhibits must be individually and succinctly titled; footnotes must be keyed with numbers rather than symbols; and tables must not have vertical lines or leaders. Spreadsheets (i.e., tables) and graphics (i.e., charts and figures) should be in Microsoft Excel compatible format. (Numerical plotting points for graphic files should also be in Microsoft Excel.) Each table or figure must have a source line indicating the derivation and year of the data.

Color in exhibits is permitted. Design your color exhibits with an eye towards black-and-white reproduction or printing. Color schemes in figures may not result in gray tones with sufficient differentiation to clearly distinguish elements. If a manuscript is accepted, authors will be required to provide an alternative rendering in grayscale for each exhibit containing color.

### *Appendices*

At the editors’ discretion, MMRR will publish and permanently maintain supplemental materials that are referenced, but not included in the manuscript. Appendix materials include text, tables, source files, derivations, photographs, figures, graphs, and video material as appropriate. All material will be reviewed by the editors prior to publication. Appendices must be individually and succinctly titled.

## **Review Process**

All manuscripts are acknowledged upon receipt and initially reviewed for completeness before the review process is initiated. Editors will determine their policy relevancy and/or their implications for the Medicare, Medicaid, and Children’s Health Insurance programs. Any incomplete submissions will be held by the editorial office and the authors instructed to complete their submissions. If the instructions are not followed, the

editorial office will withdraw the submission. Authors can obtain assistance with an incomplete submission by contacting the editorial office.

Manuscripts of interest are referred to at least two external subject-matter experts for double blind peer review. Authors may suggest specific, relevant peer reviewers who present no conflict of interest, apparent or real, by providing names and e-mail addresses. Authors also may request to exclude a specific reviewer. We offer no guarantee that these suggestions will be used.

Manuscripts under consideration for publication are subject to the peer reviewer's critiques and authors will be required to make revisions based on those comments or delineate in a written response why specific comments have not been addressed. Revised and resubmitted manuscripts may be required to undergo a second round of peer review. Revised and resubmitted manuscripts are not guaranteed acceptance.

Until a Web based submission process has been implemented, revised manuscripts should be submitted to: [MMRR-Editors@cms.hhs.gov](mailto:MMRR-Editors@cms.hhs.gov).

Notification of a rejected manuscript will be sent to the lead author.

### **Accepted Manuscripts**

Once a manuscript has been accepted for publication, we will send the lead author an edited galley for review. Authors may use the "Track Changes" function in Microsoft Word in order to place responses directly into the galley or, alternatively, may send changes in a separate Word file. Authors will see their articles one more time in page proof format before publication. During the substantive copyediting phase of production, all authors will be required to return to the copy editor the signed "Author Approval of Final Proof" form indicating that all authors have reviewed the final PDF prior to publication.

Accepted manuscripts are issued a Digital Object Identifier (DOI), have all references confirmed, and have links to PubMed and DOI (Cross-Ref, <http://www.crossref.org>) added if possible. Once the manuscript has been published, the lead author will receive an electronic file for reprint requests.

Authors are requested not to share their research findings with anyone, nor provide copies of such findings, while an article is being considered for publication and during the editorial/production phases, until the manuscript is either published or rejected.

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**Sample Reference**

Doe, J. and Smith, M. (2015, Spring). Health Reform's Impact on the Medicare and Medicaid Populations, 2011-2014. *Medicare & Medicaid Research Review*, 5(1), 23-38,