From the Editors: Announcing a New Feature in HSR and a Call for Papers

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1 Health Services Research (HSR) is pleased to announce a new feature called “The Theme Series”. The Journal will from to time issue a call for papers on a specific ‘theme’ considered to be of particular significance to the field and importance for current health care policy. Manuscripts submitted for the Theme Issue will undergo the usual HSR peer review process. Articles that meet HSR’s high standards for publication will be further evaluated for relevance and significance, and the best 8 to 10 articles will be gathered into an issue devoted entirely to the announced theme. Accepted manuscripts that are not selected for the theme issue will be automatically accepted for publication in a regular issue.

The first theme selected is “Improving Efficiency and Value in Health Care” in which we seek to publish research that will help improve the value and efficiency of the American Healthcare System. This theme issue is sponsored by the Agency for Healthcare Research and Quality (AHRQ), which will assist HSR in publicizing the call and disseminating the findings of the selected studies. (See the Call for Papers at www.hsr.org.)

This theme is particularly fitting to initiate this new feature because it presents a conundrum for researchers and policy makers alike. HSR aims to attract the best research

1 [This editorial is currently in the production process at Blackwell Publishing and is scheduled for print publication in HSR 42:(3, June), 2007.]
on this theme in time to contribute to the national debate and collective interest about health care that attends election years. We all recognize that high and rising healthcare costs—especially when accompanied by gaps in quality, safety, equity, and access—are unsustainable. Federal and state policy makers, along with private payers and systems leaders, are seeking new ways to reduce waste, increase efficiency of healthcare delivery, and allocate resources in order to improve value in health care. Consumers also seek guidance about how to maximize the value of their own health care dollar, particularly since some payer innovations have increased consumers’ financial exposure. We invite you to respond to our call with your research to add value and efficiency to our system.

The processes used for Theme Issues in the new Theme Series will differ from those *HSR* uses for its regular and Special Issues in several ways. Manuscripts submitted for regular issues, of course, are unsolicited. The Co-Editors-in-Chief [EIC] make an initial judgment of the suitability of each submitted manuscript for our audience and the quality of the work. Manuscripts surviving this cut are then assigned to one of the eight Senior Associate Editors [SAE] for additional review before deciding to send it out for external peer review (see Luft and Flood, 2003; Flood 2004; Luft 2004 for more details). The most appropriate SAE is chosen for each manuscript based on the topic of the research and the SAE’s experience and academic discipline.

Special Issues, on the other hand, are of two basic types (see Luft 2003 for details). Most special issues consist of a series of papers presented at a conference. A few special issues have resulted from a special call for papers. In both cases, however, the special issues are
proposed and sponsored by organizations or groups external to HSR that approach the
Journal with a particular topic in mind. A guest editor from the organization or group
proposing the topic, working with an assigned SAE, plays a role in reviewing and
selecting articles for publication based on their suitability for the special issue.

In contrast, for the Theme Series, the editors and publisher of HSR will select the themes
and subsequently seek sponsorship for publishing and disseminating the resulting issue.
HSR will then issue a targeted call for papers. Papers submitted to HSR in response to the
call will first undergo the process for regular manuscripts, i.e., the EICs will make the
initial cut based on fit and quality and then assign remaining manuscripts to the most
appropriate SAE for another internal review and decision to send for external peer
review. Subsequently, as with regular manuscripts, SAEs will make a recommendation to
the EIC on acceptance, revision, or rejection. All manuscripts accepted through this
process will be scheduled for electronic publication in OnlineEarly; these articles are
fully published and may be cited. It usually takes a few weeks from the date the accepted
manuscript and required forms are received by our Managing Editor until they are
published online.

It is during the ‘final’ step—scheduling for print publication—that the Theme Issue
manuscripts will be handled differently. At this point, one SAE (and Guest Editor, if any)
will be assigned to review all accepted manuscripts responding to our call, taking into
account both external reviewer and SAE assessments of manuscripts’ originality and
significance as well as their fit to the theme. The SAE and Guest Editor will select
specific papers to be published in the Theme Issue, and recommend them to the EICs who will make the final decisions on selection. Accepted manuscripts that are not selected for the Theme Issue will be published in regular issues.

Why would authors be interested in submitting their best work for publication in a Theme Issue? There are several important advantages from an author’s perspective:

• First, and most important, extra attention is likely to be focused on the manuscripts that are printed in the Theme Issue for several reasons. Theme Issues are more likely to draw attention to the topic and therefore to the manuscripts in the issue, which will also feature an editorial on the importance and timeliness of the theme and the contributions made by each manuscript. The Theme Issue is likely to get additional attention from the planned extra dissemination that will accompany publication of theme issues.

• Second, there is potential for speeding up the review cycle since we will be monitoring the process for these manuscripts more closely in order to keep them on track for the intended publication date.

• Third, once manuscripts are accepted, they will be published promptly in Online Early. Moreover, selection for the theme issue is likely to result in ‘jumping the queue’ for print publication in HSR since the Theme Issue is likely to come to print earlier than regular manuscripts accepted at the same point in time.

• Finally, we plan to introduce another new electronic feature related to the theme issue to allow readers to comment on the papers and themes.
What are the potential benefits for *HSR*? While we remain strongly committed to our principal mission to publish high quality, original and significant research in the field of health services research, we also want to help build the field and bolster its ability to make an impact in changing the health care system through building the underlying science and evidence base. High quality Theme Issues will offer a visible and effective mechanism for accomplishing these goals. With these aims in mind, we have also initiated:

- The From The Editors series, where the editors analyze *HSR* with the goal of making our intent and objectives and the process of publishing more transparent (see www.hsr.org).
- We have (with permission) provided an example of peer review at www.hsr.org using a real manuscript at *HSR* going through the documents as initially submitted to receiving reviews and letters from us to responding to reviewers until finally being accepted.
- We initiated a new policy in 2007 to make more transparent to readers of each manuscript the authors’ potential conflicts of interests, the sponsor’s roles in the conduct of research and publishing the work, and authorship and contributorship based on explicit definitions of these terms; these disclosures now be a published part of each article at *HSR* (Luft, Flood, Escarce, 2006);
- In collaboration with AcademyHealth, we publish the President’s address and selected Roundtable discussions featuring translations of research to policy and clinical settings from the Annual Research Meetings;
• In honor of John M. Eisenberg, we initiated an annual award for the best article published in HSR that addresses one of Dr. Eisenberg’s principal areas of research or leadership (Flood and Luft 2004) see current and past recipients at www.HSR.org; and

• We feature occasional manuscripts, which we call “Building the Field,” that are designed to improve the training and development of the field of health services research (see HSR 42(1) Part I for two examples).

We invite you to help us in this latest new feature by contributing your best work to the Theme Series as we all seek to add value to the field and to our health care system.

**References (also available in the From The Editors feature at www.HSR.org)**


