

## EDITORIAL OVERVIEW

*The American Journal of Pharmacy Benefits* (AJPB) publishes peer-reviewed research that examines the impact of formulary management strategies on the utilization, cost, and quality of pharmacy services. The *Journal* presents case studies, research, and evidence-based tools to help decision makers develop clinical strategies to manage pharmacy benefits for large populations. Areas of particular interest include utilization management strategies (ie, prior authorization, step therapy, generic substitution, etc), outcomes research on Medicare Part D, formulary development and implementation strategies, research on adherence and compliance, cost sharing strategies (ie, copays, coinsurance, CDHPs, HDHPs, etc), cost utility analyses, economic burden of disease, and comparative effectiveness analysis of drug therapies.

## MISSION

To provide pharmacy and formulary decision makers with the information they need to improve the efficiency and health outcomes in managing pharmaceutical care.

## READERSHIP

The *Journal* circulates to approximately 20,000 individuals with important decision-making responsibilities affecting the inclusion and tier placement of drugs on formularies. As the official publication of The Pharmacy & Therapeutics Society, the *Journal* is distributed to the Society's 5000 members, as well as medical directors, pharmacy directors, corporate benefits managers, and other healthcare professionals across these 6 market segments: 1) HMO/PPO/IHOs; 2) hospitals; 3) long-term care; 4) PBMs; 5) VA/gov't; and 6) employers.

## MANUSCRIPT PREPARATION

Requirements for all submissions generally conform to the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals."<sup>1</sup>

Manuscripts submitted for publication in AJPB must not have been published previously (either in whole or in part) nor currently be submitted elsewhere in either identical or similar form. Authors must indicate in the cover letter whether any portion of the manuscript has been presented at meetings and are required to submit copies of related publications (either published, in preparation, or submitted), as well as any manuscripts cited as "in press" to the editors for review.

The editors are pleased to consider manuscripts on a wide range of topics related to the *Journal's* mission. Submissions generally fall into one of the following categories: (1) original research; (2) review articles; (3) commentaries; (4) brief reports; (5) editorials; or (6) letters to the editor.

**Original research** articles should be <3000 words (excluding abstract, references, tables, etc) and contain no more than 5 graphic elements. Supplemental data (extra tables, figures, or appendices) will be made available on the *Journal's* Web site ([www.ajplive.com](http://www.ajplive.com)) at the time of publication. **Review articles** should present a thorough synthesis of the literature and offer new insights and/or recommendations on how to improve the standard of care. **Commentaries** are brief (≤1500 words) opinion pieces—usually solicited from recognized thought leaders—that discuss pertinent and sometimes controversial issues in healthcare. **Brief reports** should provide descriptive data or case analysis of current trends in the healthcare system. These reports should be ≤2000 words and contain no more than 2 graphic elements. **Editorials** (≤1000 words) are solicited to accompany key articles and either extend or offer opposing perspectives on a specific subject. **Letters** are published as space allows and should be ≤500 words, contain no more than 1 table or figure, and cite no more than 6 references.

## MANUSCRIPT SUBMISSION

We strongly encourage online submissions through our Web-based tracking system. Our peer review process

is blinded, so all identifying information (ie, author names, affiliations, etc) must be removed from the text. To facilitate this blinding, we ask authors to provide two separate title pages—one that lists all identifying information (unblinded) and one blinded title page. Log onto <http://mc.manuscriptcentral.com/ajpblive> to access the *Journals* online system, and follow the step-by-step instructions to submit your manuscript to AJPB for consideration.

### AUTHORSHIP

Only persons who have made a direct contribution to the content of a paper should be listed as authors. The number of authors listed with the manuscript should not exceed 10; more than 10 requires written justification and approval from the Editors. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship credit should be based only on substantial contributions to (a) conception and design, or analysis and interpretation of data; and to (b) drafting the article or revising it critically for important intellectual content; and on (c) final approval of the version to be published. Conditions (a), (b), and (c) must all be met.<sup>1</sup> All authors are required to read and sign the *Journal's* Authorship Form affirming that they have met the criteria for authorship and have agreed to transfer copyright to *The American Journal of Pharmacy Benefits/Managed Care & Healthcare Communications, LLC*. Individuals who have contributed to a paper but who do not meet the criteria for authorship should be acknowledged.

### AUTHOR DISCLOSURE

It is our policy to have all authors disclose relationships with any commercial interest that may present a conflict of interest. Authors are required to report all financial and material support for their research, which includes (but is not limited to) grant support and funding sources and any provision of equipment or supplies, in the *Journal's* Author Disclosure Form.

The name of the organization funding or initiating a research project should be made explicit in the title page (eg, “This study was funded by the XYZ Corporation.”). Relevant financial relationships (whether direct to the authors or through a third party) for research and/or writing, including funding, grants, honoraria, etc must also be named on the title page.

### MANUSCRIPT COMPONENTS

All manuscripts should include the following components:

**Titles.** Titles should be concise (fewer than 10 words) and stimulate reader interest. The title page should include the following information:

- the complete manuscript title and subtitle, if any
- the full names of each author, followed by their highest academic degree
- the name, address, telephone, fax, and e-mail information of the corresponding author
- the institutional affiliations for each author at the time the work was completed
- indication of the source of funding (including grant numbers, grant agencies, corporations, or sponsors)
- the number of pages, references, figures, and tables
- a word count (excluding references, tables, and figures)

**Abstract.** An abstract is required for all manuscript submissions. The abstract should not exceed 250 words and should consist of 5 paragraphs entitled: Objective, Study Design, Methods, Results, and Conclusions.

**Text.** All text should be double-spaced, including the acknowledgments, references, tables, and legends (see “Manuscript Preparation” section for length restrictions). Cite references, tables, and figures in sequential order in the body of the paper. Any abbreviation or acronym must be spelled out in full when it first appears in the text, followed by its abbreviation in parentheses. State the generic name (not the trade name) for all pharmaceutical products.

**References.** Begin the reference section on a new page and double-space both within and between reference citations. Number references sequentially in the order cited in the text—do not alphabetize. Provide the names of all authors when there are 6 or fewer; if there are more than 6 authors, list only the first 3 followed by “et al.” All references must be verified by the authors and should conform to the *AMA Manual of Style*.<sup>2</sup> Note the format and punctuation in the following sample references:

## ■ INSTRUCTIONS FOR AUTHORS

1. Chernew ME, Shah MR, Wegh A, et al. Impact of decreasing copayments on medication adherence within a disease management environment. *Health Aff (Millwood)*. 2008;27(1):103-112.
2. Wynia MK, Schwab AP. The value equation: the decision-making process should be sensitive to value. In: *Ensuring Fairness in Health Care Coverage: An Employer's Guide to Making Good Decisions on Tough Issues*. New York, NY: AMACOM; 2007:131-149.
3. Congressional Budget Office. The budget and economic outlook: fiscal years 2008-2017. <http://www.cbo.gov/ftpdocs/77xx/doc7731/01-24-BudgetOutlook.pdf>. Accessed November 2, 2007.

**Graphic Elements.** Judicious use of graphic elements is strongly encouraged, as space in the *Journal* is limited. The *Journal* will print only essential tables and figures—no more than 4 graphic elements. All supplemental data (eg, appendices and lengthy tables) will be posted on the *Journal's* Web site ([www.ajplive.com](http://www.ajplive.com)) at the time of publication.

**Tables.** Place each table on a new page. Number tables sequentially in the order they are cited in the text. Include a title for each table. Special characters, abbreviations, and symbols must be explained in a footnote to the table.

**Figures.** Number all figures in the order they are mentioned in the text. Avoid the use of shading in bar graphs or pie charts—use color or crosshatch patterns instead. Any previously published figures must be accompanied by written permission from the publisher and/or copyright holder.

### EDITORIAL PROCESS

#### ACKNOWLEDGMENT OF RECEIPT

We acknowledge receipt of all manuscripts via e-mail and assign each a unique, confidential manuscript number. The Editorial Office will not release any information about the status of a manuscript to anyone who does not provide the manuscript number.

#### PEER REVIEW

Although reviewer selection is ultimately the decision of the editors, authors may provide the names and e-mail information of preferred and nonpreferred peer reviewers. Manuscripts deemed appropriate for the *Journal* will be sent to external peer reviewers. Typically, a manuscript will be sent to a minimum of 2 reviewers who will be asked to provide feedback on the scientific merit of the paper.

### CRITERIA FOR EDITORIAL DECISIONS

We judge manuscripts on the interest and importance of the topic, the intellectual and scientific strength, and relevance to *AJPB* readers. We also consider the strength of the paper compared with other papers under review and the number of accepted and previously published papers on a specific topic.


### ACCEPTANCE OR REJECTION

The Editorial Office is committed to providing prompt processing times and to communicating timely decisions to authors. While the Editorial Office makes every effort to notify authors and keep them informed of any delays, most authors can expect a first decision on their manuscript in approximately 2 months.

### ON ACCEPTANCE

Page proofs (PDFs) are e-mailed to the corresponding author before publication. Authors can expect to receive proofs approximately 2 to 3 weeks before the scheduled issue date. All proofs must be returned to the Editorial Office within 48 hours.

### CITED REFERENCES

1. International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publication. [Updated October 2007]. <http://www.icmje.org/icmje.pdf>. Accessed March 6, 2008.
2. Iverson C, ed. *Ethical and legal considerations*. In: *American Medical Association Manual of Style*. 10th ed. New York, NY: Oxford University Press;2007: 125-300. 

#### EDITORIAL OFFICES ARE LOCATED AT:

*The American Journal of Pharmacy Benefits*  
666 Plainsboro Rd, Ste 300  
Plainsboro, NJ 08536

Telephone: 609-716-7777  
Facsimile: 609-257-0702  
E-mail: [info@ajplive.com](mailto:info@ajplive.com)