

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Royalties: Funds are coming in to you or your institution due to your patent

Damberg 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Cheryl	2. Surname (Last Name) Damberg		3. Date 30-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author	or's Name
 Manuscript Title The effects of pay-for-performance progrocesses of care: A systematic review Manuscript Identifying Number (if you kn M16-1881 		are use, and	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
If yes, please fill out the appropriate info Excess rows can be removed by pressing	ormation below. If you hav	e more than one ent	ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial other?	Comments
The U.S. Department of Veterans Affairs, Veterans Health Administration, Office of Research and Development, Quality Enhancement Research Initiative, Evidence- pased Synthesis Program (project 05-225)			
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descriclicking the "Add +" box. You should repare there any relevant conflicts of interest.	bed in the instructions. Us port relationships that wer	se one line for each ei	ntity; add as many lines as you need by
Section 4. Intellectual Proper			
Intellectual Proper	ty Patents & Copyric	ghts	
Do you have any patents, whether plans	ned, pending or issued, br	oadly relevant to the	work? ☐ Yes ✓ No

Damberg 2



Section 5.	Deletionshing not severed above			
	Relationships not covered above			
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
Dr. Damberg has	nothing to disclose.			

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

Freeman 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Michele	2. Surname (Last Name) Freeman		3. Date 23-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Aaron Mendelson	me
5. Manuscript Title The effects of pay for performance prog	grams on health, health ca	re use, and processes of car	e: a systematic review
6. Manuscript Identifying Number (if you kr M16-1881	now it)		
		_	
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Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as describled the "Add +" box. You should replace there any relevant conflicts of interest.	ibed in the instructions. Us port relationships that wer	se one line for each entity; a	dd as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyrig	ahte	
intellectual Propel	rty Patents & Copyrig	gnts	
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work?	Yes ✓ No

Freeman 2



Section 5. Relationships not severed above	
Relationships not covered above	
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?	
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Section 6. Disclosure Statement	
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Dr. Freeman has nothing to disclose.	

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Kansagara 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Devan	2. Surname (Last Name) Kansagara	3. Date 04-December-2016	
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title The effects of pay for performance pro-	grams on health, health care use, and processes of ca	re: a systematic review	
6. Manuscript Identifying Number (if you k M16-1881	now it)		
Section 2. The Work Under C	onsideration for Publication		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No			
Section 3. Relevant financial	activities outside the submitted work.		
of compensation) with entities as descr	in the table to indicate whether you have financial refibed in the instructions. Use one line for each entity; port relationships that were present during the 36 rest?	add as many lines as you need by	
Section 4. Intellectual Prope	rty Patents & Copyrights		
intellectual Prope	rty Patents & Copyrights		
Do you have any patents, whether plan	Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		

Kansagara 2



Section 5. Relationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Dr. Kansagara has nothing to disclose.

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Kondo 1



Section 1. Identifying Info	rmation	
1. Given Name (First Name) Karli	2. Surname (Last Name) Kondo	3. Date 02-December-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Devan Kansagara
5. Manuscript Title The effects of pay for performance pr	rograms on health, health ca	re, use, and processes of care: a systematic review
6. Manuscript Identifying Number (if you M16-1881	know it)	_
Section 2. The Work Under	Consideration for Public	cation
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Do you have any patents, whether pl		

Kondo 2



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Low 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Allison	2. Surname (Last Name) Low		3. Date 23-November-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Devan Kansagara	me
5. Manuscript Title The effects of pay for performance prog	grams on health, health ca	re use, and processes of car	e: a systematic review
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Low 2



Section 5. Relationsh	
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patent

Mendelson 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Aaron	2. Surname (Last Name) Mendelson	3. Date 28-November-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title The effects of pay for performance pro	grams on health, health care use, and processes of ca	re: a systematic review
6. Manuscript Identifying Number (if you k M16-1881	now it)	
Section 2. The Work Under C	onsideration for Publication	
	eive payment or services from a third party (government, cog g but not limited to grants, data monitoring board, study d est? Yes V No	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 lest?	add as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrights	
	nned, pending or issued, broadly relevant to the work	x?

Mendelson 2



Section 5. Relationships not severed above
Relationships not covered above
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Section 6. Disclosure Statement
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Motuapuaka 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Makalapua		2. Surname (Last Name) Motuapuaka		3. Date 05-December-2016	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nan Karli Kondo	ne	
5. Manuscript Title The effects of pay for performance programs on health, health car		re use, and processes of care	e: a systematic review		
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Public	cation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes Vo					
	ı				
Section 3.	Relevant financial	activities outside the	submitted work.		
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	ı				
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No	

Motuapuaka 2



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Relationships not covered above			
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O'Neil 1



Section 1. Identifying Inform	Identifying Information				
1. Given Name (First Name) Maya	2. Surname (Last Name) O'Neil	3. Date 23-November-2016			
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Aaron Mendelson			
5. Manuscript Title The effects of pay for performance programs on health, health care		e use, and processes of care: a systematic review			
6. Manuscript Identifying Number (if you k	now it)				
		-			
Section 2. The Work Under C	Consideration for Public	cation			
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
Section 3. Relevant financial	activities outside the s	submitted work			
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate who ribed in the instructions. Us sport relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.			
Section 4. Intellectual Prope	rty Patents & Copyric	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

O'Neil 2



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Royalties: Funds are coming in to you or your institution due to your patent

Relevo 1



Section 1.	Identifying Informa	ntion			
Given Name (First Name) Rose		2. Surname (Last Name) Relevo		3. Date 29-November-2016	
4. Are you the corresponding author?		Yes	√ No	Corresponding Author's Name	
5. Manuscript Title The effects of pay for performance prog		ams on heal	lth, health care	e use, and processes of ca	are: a systematic review.
6. Manuscript Identi M16-1881	ifying Number (if you kno	w it)			
Section 2.	The Work Under Co	nsideratio	n for Publica	ation	
any aspect of the sub statistical analysis, et	omitted work (including b	out not limite	d to grants, dat		ommercial, private foundation, etc.) for design, manuscript preparation,
Section 3.	Relevant financial a	ctivities o	utsido tho si	ibmitted work	
Place a check in the of compensation) v clicking the "Add +	e appropriate boxes in with entities as describ	the table to ed in the ins ort relations	indicate whe structions. Use hips that were	ther you have financial re one line for each entity;	elationships (regardless of amount add as many lines as you need by months prior to publication.
Section 4.	ntellectual Propert	v Patent	s & Copyria	hts	
				adly relevant to the worl	☐ Yes ✓ No</th

Relevo 2



Section 5. Relationships not severed above
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