Rapid technological change has affected many aspects of our society, but perhaps none more profoundly than the world of publishing. Scientific journals largely have moved to primary publication online. Clinicians and researchers first learn of, and then read articles on the Internet—and print them locally when required. Thus, as all publishers, whether commercial or non-profit, have attempted to address online communities, they have had to reconsider their business models and track new opportunities. The end of the current five-year Journal of the American Medical Informatics Association (JAMIA) publisher’s contract in 2009 afforded the American Medical Informatics Association (AMIA) the opportunity to reconsider seriously its plans for the future of the journal.

Thus, in May 2008, following an invited presentation by the Editor-in-Chief regarding the current status, perceived opportunities, and important decisions to be made for JAMIA, the AMIA Board of Directors began work on the renewal of the publishing contract for its flagship journal. The AMIA Board charged a task force comprising representatives from the Board of Directors, the AMIA Publications Committee, AMIA Staff, the JAMIA Editor, and a seasoned scholarly publishing consultant to assess future publishing options and to then issue a request for proposals. The task force convened frequently electronically during the first few months of its work, to examine the overarching principles of the process, to study the current publishing model, and to explore alternative approaches to publishing the association’s scholarly journal.

As their first order of business, the task force conducted a survey of all AMIA members to solicit comments on a variety of possible approaches. The survey asked members to indicate their personal preferences for five different publishing models, which included combinations of various options of print, online, and open-access versions of JAMIA. The survey results indicated that AMIA members’ most favored (70%) overall model was the combined availability of print and online JAMIA versions. The ‘open-access only’ model was rated least desirable, due to the high per-article publication costs that all authors would have to pay.

In the autumn of 2008, the task force developed a request for proposals (RFP), heavily influenced by an analysis of the data from the member survey. The RFP was released in December 2008 and sent to 11 publishers. Five bidders submitted proposals in early 2009. The task force selected three publisher proposals based on criteria covering vision, innovation, quality, cost, marketing, and support. It considered the ability of the publisher to provide extra-ordinary service to authors and to the Editorial Office, to deliver an exceptional product, and to assure diversification of publication revenues.

Three publishers were ultimately selected as finalists to make presentations to the task force in early May 2009 in Bethesda, MD. A series of sessions held on the same day, the three finalists presented overviews of their proposals and entertained clarifying questions from Publisher Selection Task Force members. Immediately after the candidate publishers’ presentations, the task force met to select which publisher it would recommend to the AMIA Board of Directors as the next publisher of JAMIA.

In order to make the best selection, the task force focused on 14 evaluation criteria (as developed by Morna Conway, AMIA’s consultant) and the weighting that each would carry. The task force members each assigned scores to each candidate publisher based on the evaluation criteria, and considering the written proposals, the oral presentations, and the responses to task force member questions, and intangible aspects. In the end, the task force voted unanimously to recommend the BMJ Group as the next JAMIA publisher. All task force members agreed that while there was higher risk for this strategy, due to the distance of London from the USA and various other factors, there was also the potential for a much higher reward for JAMIA both in recognition and impact (eg, close association with a highly regarded and widely circulated clinical journal), and in the potential for significantly enhanced financial returns to AMIA. The BMJ Group has been at the leading edge of innovation in electronic publishing and in promoting evidence-based medicine in the clinical arena.

After receiving the final report and recommendation from the task force, the AMIA Board of Directors voted to invite the BMJ Group to serve as the next publisher of JAMIA, beginning with the January 2010 issue. The BMJ Group is a wholly owned subsidiary of the British Medical Association. It is based in BMA House on Tavistock Square in London. They have over 510 staff worldwide with 20 staff in the USA, including six physicians. They publish the British Medical Journal (BMJ) plus 30 specialty journals, for which the BMJ Group has 10 editors-in-chief based in North America. The AMIA Board decided that the BMJ Group would be more likely to extend JAMIA’s (and AMIA’s) brand, prestige, and impact through its high-profile presence and innovative publishing practices, as well as its market strength in the healthcare arena. The Board believed that JAMIA would thrive intellectually, enhance its electronic publishing functionality, and increase its relevance under the BMJ Group.

The reviewers found several key points attractive in the BMJ Group’s proposal, including: guaranteed income to AMIA for 2009 and beyond (with the potential for significant increases), direct association with the BMJ brand, change of access policies to maximize revenues, development of new revenue streams, transition costs covered by BMJ Group, plans to introduce a range of dynamic interactive features, and the opportunity to interact and share best practices with other international journal editors. The BMJ Group proposed a major focus on the journal’s revenue growth, including enhanced direct

JAMIA looks to the future amidst profound changes in the world of publishing

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marketing, streamlined management of the renewals process, the introduction of Web 2.0 features to build usage, and the nurturing of more extensive media contacts. The BMJ Group’s proposal envisioned dynamic online JAMIA features. Potential examples included regular blogs, podcasts, and video features. Other online features might include topic collections, e-letters, and a JAMIA online community, as well as the bolstering of JAMIA's existing RSS feeds and data supplements.

For authors and reviewers, the most prominent JAMIA enhancement will likely be the addition of Bench>Press, an online manuscript submission system developed by HighWire Press at Stanford University, in conjunction with BMJ Group. Compared with past JAMIA practices, Bench>Press offers a more accessible, available, and reliable method to submit manuscripts. Previously, authors were asked to submit their manuscript files via an FTP server, and to then correspond with the JAMIA Editorial Office by email. While this process provided a secure and relatively fast way to transmit files, a majority of JAMIA authors found the FTP process somewhat difficult. With Bench>Press, however, only an internet connection is needed and the submission instructions are very straightforward and easy to understand. The Bench>Press system, most importantly, will provide an online mechanism for authors to track the progress of submitted manuscripts through the JAMIA peer review process—something Editorial Office email did not support well.

Another change authors will appreciate is the elimination of the PDF file requirement for submission. Bench>Press, as part of the submission process, will create a PDF version of the manuscript from the submitted text file. Authors will be responsible for checking the resulting PDF to make sure the conversion was successful. Authors will also be responsible for providing print-worthy figures before the manuscript enters the review process as opposed to after the manuscript has been accepted. Now, instead of including figures at the end of the manuscript file, each figure must be submitted as a separate file. The figure files will be uploaded along with the main manuscript file and checked for printability as part of the PDF conversion. If a figure is deemed not fit for print, the paper’s corresponding author will receive notification along with a request to submit a figure file with better resolution. The submission will not enter the review process until authors have uploaded an image with better resolution.

As part of the transition to the new publisher, and after much deliberation regarding the tradeoffs involved, AMIA is adjusting its policy regarding deposition of published articles from JAMIA into PubMed Central. As in the past, AMIA will retain exclusive rights to publish those submissions that can be copyrighted, but we will adopt a policy already pioneered by the BMJ Group whereby authors retain copyright on their articles (if copyrightable), and assign exclusive rights to publish and distribute the article to BMJ Group and to AMIA. This will allow authors, for example, to make copies of their work for non-commercial purposes (eg, for distribution to students in courses) without asking permission. The BMJ Group will provide assistance to assure that the final versions of all articles will be available in PubMed Central. The new publication process will continue to be compliant with all NIH (and certain other government or funding agencies) requirements for open access 12 months after publication. Per the new publisher contract, those articles not covered under the NIH policy (or its equivalent) will not appear in PubMed Central until 36 months after initial JAMIA publication. To ensure a smooth and appropriate transition for authors, all accepted JAMIA articles that were initially submitted before January 1, 2010—that is, prior to the announcement of this change in policy—will be deposited in PubMed Central after 12 months (consistent with the prior policy). Of course, all articles will be available to AMIA members and to institutional and individual subscribers immediately via the JAMIA web site. The BMJ Group and AMIA will also provide an ‘unlocked’ option, whereby authors may pay a fee prior to publication to have their paper freely available, both in PubMed Central and on the JAMIA site, immediately upon first publication under a Creative Commons license. Details of the PubMed Central arrangements, as well as the ‘unlocked’ fee for 2010, and other ‘instructions to authors’, will be regularly updated on the new JAMIA website. This will include further details on authors’ new rights with regard to the sharing of their accepted manuscripts on personal or institutional websites. Although these changes in policy will delay the release of certain JAMIA materials for free access, we will be working to attract more readers to JAMIA’s own website, where we will be introducing new features and opportunities not available either in the print journal or on PubMed Central. We will be working closely with BMJ Group to monitor both the impact on revenues and the numbers of downloads, as well as JAMIA’s impact factor.

We are excited to share with readers some of the detailed plans for JAMIA’s transition to a new and dynamic publisher, BMJ Group. The authors and the AMIA Board all believe that this is an important step forward to a better future for the journal. We will share more details with readers in the months ahead. We trust that AMIA’s members, and all JAMIA readers and authors, will be pleased to see the evolution to a more timely and dynamic publication model that suitably leverages the new technologies, while continuing to provide the kind of quality articles and rigorous science that you have all come to expect of JAMIA. Comments to the AMIA leadership and to the JAMIA Editor are welcome as we move forward into the new world that lies ahead.

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