

Valerie A Lewis

List of Publications by Year in descending order

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Version: 2024-02-01

67
papers

2,303
citations

236925

25
h-index

223800

46
g-index

67
all docs

67
docs citations

67
times ranked

1849
citing authors

#	ARTICLE	IF	CITATIONS
1	Prevalence of Screening for Food Insecurity, Housing Instability, Utility Needs, Transportation Needs, and Interpersonal Violence by US Physician Practices and Hospitals. JAMA Network Open, 2019, 2, e1911514.	5.9	225
2	Religion, networks, and neighborliness: The impact of religious social networks on civic engagement. Social Science Research, 2013, 42, 331-346.	2.0	206
3	Spending Differences Associated With the Medicare Physician Group Practice Demonstration. JAMA - Journal of the American Medical Association, 2012, 308, 1015.	7.4	141
4	First National Survey Of ACOs Finds That Physicians Are Playing Strong Leadership And Ownership Roles. Health Affairs, 2014, 33, 964-971.	5.2	124
5	Association Between Medicare Accountable Care Organization Implementation and Spending Among Clinically Vulnerable Beneficiaries. JAMA Internal Medicine, 2016, 176, 1167.	5.1	102
6	Who We'll Live With: Neighborhood Racial Composition Preferences of Whites, Blacks and Latinos. Social Forces, 2011, 89, 1385-1407.	1.3	101
7	Accountable Care Organizations in the United States: Market and Demographic Factors Associated with Formation. Health Services Research, 2013, 48, 1840-1858.	2.0	88
8	Few ACOs Pursue Innovative Models That Integrate Care For Mental Illness And Substance Abuse With Primary Care. Health Affairs, 2014, 33, 1808-1816.	5.2	82
9	The Promise And Peril Of Accountable Care For Vulnerable Populations: A Framework For Overcoming Obstacles. Health Affairs, 2012, 31, 1777-1785.	5.2	81
10	A Taxonomy of Accountable Care Organizations for Policy and Practice. Health Services Research, 2014, 49, n/a-n/a.	2.0	79
11	Hospitals Participating In ACOs Tend To Be Large And Urban, Allowing Access To Capital And Data. Health Affairs, 2016, 35, 431-439.	5.2	76
12	ACOs Serving High Proportions Of Racial And Ethnic Minorities Lag In Quality Performance. Health Affairs, 2017, 36, 57-66.	5.2	60
13	Upstream With A Small Paddle: How ACOs Are Working Against The Current To Meet Patients' Social Needs. Health Affairs, 2020, 39, 199-206.	5.2	44
14	An Early Assessment of Accountable Care Organizations' Efforts to Engage Patients and Their Families. Medical Care Research and Review, 2015, 72, 580-604.	2.1	42
15	Accountable Care Organizations: The National Landscape. Journal of Health Politics, Policy and Law, 2015, 40, 647-668.	1.9	38
16	Are Muslims a Distinctive Minority? An Empirical Analysis of Religiosity, Social Attitudes, and Islam. Journal for the Scientific Study of Religion, 2013, 52, 617-626.	1.5	37
17	Innovation in the Safety Net: Integrating Community Health Centers Through Accountable Care. Journal of General Internal Medicine, 2014, 29, 1484-1490.	2.6	37
18	Preventive Care Quality of Medicare Accountable Care Organizations. Medical Care, 2016, 54, 326-335.	2.4	37

#	ARTICLE	IF	CITATIONS
19	Clinical coordination in accountable care organizations: A qualitative study. <i>Health Care Management Review</i> , 2019, 44, 127-136.	1.4	37
20	Accountability across the Continuum: The Participation of Postacute Care Providers in Accountable Care Organizations. <i>Health Services Research</i> , 2016, 51, 1595-1611.	2.0	34
21	Attributing Patients To Accountable Care Organizations: Performance Year Approach Aligns Stakeholders'™ Interests. <i>Health Affairs</i> , 2013, 32, 587-595.	5.2	33
22	Religion and Altruistic U.S. Foreign Policy Goals: Evidence from a National Survey of Church Members. <i>Journal for the Scientific Study of Religion</i> , 2008, 47, 191-209.	1.5	30
23	Landscape of Health Systems in the United States. <i>Medical Care Research and Review</i> , 2020, 77, 357-366.	2.1	29
24	The Role of Value-Based Payment in Promoting Innovation to Address Social Risks: A Cross-Sectional Study of Social Risk Screening by US Physicians. <i>Milbank Quarterly</i> , 2020, 98, 1114-1133.	4.4	29
25	Determinants of success in Shared Savings Programs: An analysis of ACO and market characteristics. <i>Healthcare</i> , 2017, 5, 53-61.	1.3	28
26	The new frontier of strategic alliances in health care: New partnerships under accountable care organizations. <i>Social Science and Medicine</i> , 2017, 190, 1-10.	3.8	27
27	Financial Integration's™ Impact On Care Delivery And Payment Reforms: A Survey Of Hospitals And Physician Practices. <i>Health Affairs</i> , 2020, 39, 1302-1311.	5.2	26
28	ACOs Holding Commercial Contracts Are Larger And More Efficient Than Noncommercial ACOs. <i>Health Affairs</i> , 2016, 35, 1849-1856.	5.2	25
29	Contributions of relational coordination to care management in accountable care organizations. <i>Health Care Management Review</i> , 2016, 41, 88-100.	1.4	23
30	Implementation of a Pilot Accountable Care Organization Payment Model and the Use of Discretionary and Nondiscretionary Cardiovascular Care. <i>Circulation</i> , 2014, 130, 1954-1961.	1.6	21
31	Changes in Use of Postacute Care Associated With Accountable Care Organizations in Hip Fracture, Stroke, and Pneumonia Hospitalized Cohorts. <i>Medical Care</i> , 2019, 57, 444-452.	2.4	21
32	Care Transformation Strategies and Approaches of Accountable Care Organizations. <i>Medical Care Research and Review</i> , 2019, 76, 291-314.	2.1	21
33	Explaining Sluggish Savings under Accountable Care. <i>New England Journal of Medicine</i> , 2017, 377, 1809-1811.	27.0	19
34	Role of Pharmacy Services in Accountable Care Organizations. <i>Journal of Managed Care & Specialty Pharmacy</i> , 2015, 21, 338-344.	0.9	17
35	Assessing Differences between Early and Later Adopters of Accountable Care Organizations Using Taxonomic Analysis. <i>Health Services Research</i> , 2016, 51, 2318-2329.	2.0	17
36	Accountable Care Organizations and Post-Acute Care: A Focus on Preferred SNF Networks. <i>Medical Care Research and Review</i> , 2020, 77, 312-323.	2.1	17

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37	The Hidden Roles That Management Partners Play In Accountable Care Organizations. <i>Health Affairs</i> , 2018, 37, 292-298.	5.2	15
38	Organizational integration, practice capabilities, and outcomes in clinically complex medicare beneficiaries. <i>Health Services Research</i> , 2020, 55, 1085-1097.	2.0	15
39	Characteristics and Service Use of Medicare Beneficiaries Using Federally Qualified Health Centers. <i>Medical Care</i> , 2016, 54, 804-809.	2.4	14
40	Value-Based Payments and Inaccurate Risk Adjustmentâ€”Who Is Harmed?. <i>JAMA Internal Medicine</i> , 2018, 178, 1507.	5.1	14
41	ACO contracting with private and public payers: a baseline comparative analysis. <i>American Journal of Managed Care</i> , 2014, 20, 1008-14.	1.1	14
42	Cardiologist Participation in Accountable Care Organizations and Changes in Spending and Quality for Medicare Patients With Cardiovascular Disease. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2019, 12, e005438.	2.2	13
43	Redesigning care delivery with patient support personnel: Learning from accountable care organizations. <i>International Journal of Care Coordination</i> , 2016, 19, 73-83.	0.4	12
44	Trust, Money, and Power: Life Cycle Dynamics in Alliances Between Management Partners and Accountable Care Organizations. <i>Milbank Quarterly</i> , 2018, 96, 755-781.	4.4	12
45	Medicare Accountable Care Organizations Are Not Associated With Reductions in the Use of Low-Value Coronary Revascularization. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2018, 11, e004492.	2.2	12
46	Quality of Care Improves for Patients with Diabetes in Medicare Shared Savings Accountable Care Organizations: Organizational Characteristics Associated with Performance. <i>Population Health Management</i> , 2018, 21, 401-408.	1.7	11
47	FQHC Designation and Safety Net Patient Revenue Associated with Primary Care Practice Capabilities for Access and Quality. <i>Journal of General Internal Medicine</i> , 2021, 36, 2922-2928.	2.6	11
48	Physician practices in Accountable Care Organizations are more likely to collect and use physician performance information, yet base only a small proportion of compensation on performance data. <i>Health Services Research</i> , 2019, 54, 1214-1222.	2.0	10
49	Who is most susceptible to movie smoking effects? Exploring the impacts of race and socio-economic status. <i>Addiction</i> , 2012, 107, 2201-2209.	3.3	9
50	Avoiding Medicaid: Characteristics Of Primary Care Practices With No Medicaid Revenue. <i>Health Affairs</i> , 2021, 40, 98-104.	5.2	9
51	Organizational influences on healthcare system adoption and use of advanced health information technology capabilities. <i>American Journal of Managed Care</i> , 2019, 25, e21-e25.	1.1	9
52	Social Energy and Racial Segregation in the University Context*. <i>Social Science Quarterly</i> , 2012, 93, 270-290.	1.6	8
53	End-of-life Care Planning in Accountable Care Organizations: Associations with Organizational Characteristics and Capabilities. <i>Health Services Research</i> , 2018, 53, 1662-1681.	2.0	8
54	Piety in a Secular Society: Migration, Religiosity, and Islam in Britain. <i>International Migration</i> , 2013, 51, 57-66.	1.3	7

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55	The Effect of Medicare Accountable Care Organizations on Early and Late Payments for Cardiovascular Disease Episodes. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2018, 11, e004495.	2.2	7
56	Configuration and Delivery of Primary Care in Rural and Urban Settings. <i>Journal of General Internal Medicine</i> , 2022, 37, 3045-3053.	2.6	7
57	Developing and Validating a Measure to Estimate Poverty in Medicare Administrative Data. <i>Medical Care</i> , 2019, 57, 601-607.	2.4	6
58	Survey of Information Exchange and Advanced Use of Other Health Information Technology in Primary Care Settings. <i>Medical Care</i> , 2022, 60, 140-148.	2.4	6
59	Association between specialist compensation and Accountable Care Organization performance. <i>Health Services Research</i> , 2020, 55, 722-728.	2.0	4
60	Forgotten patients: ACO attribution omits those with low service use and the dying. <i>American Journal of Managed Care</i> , 2018, 24, e207-e215.	1.1	4
61	Adoption of Patient-Reported Outcomes by Health Systems and Physician Practices in the USA. <i>Journal of General Internal Medicine</i> , 2022, 37, 3885-3892.	2.6	4
62	The Association of Readmission Reduction Activities with Primary Care Practice Readmission Rates. <i>Journal of General Internal Medicine</i> , 2021, , 1.	2.6	3
63	Critical issues in alliances between management partners and accountable care organizations. <i>Health Care Management Review</i> , 2021, 46, 237-247.	1.4	3
64	Estimating heterogeneous effects of a policy intervention across organizations when organization affiliation is missing for the control group: application to the evaluation of accountable care organizations. <i>Health Services and Outcomes Research Methodology</i> , 2021, 21, 54-68.	1.8	1
65	Interpersonal relationships, dynamic reinforcement, and alliance performance. <i>Proceedings - Academy of Management</i> , 2021, 2021, 16084.	0.1	1
66	China's Urban Space: Development under Market Socialism. <i>Contemporary Sociology</i> , 2009, 38, 198-200.	0.0	0
67	Association Between Organizational Quality and Out-of-Network Primary Care Among Accountable Care Organizations That Care for High vs Low Proportions of Patients of Racial and Ethnic Minority Groups. <i>JAMA Health Forum</i> , 2022, 3, e220575.	2.2	0