Michigan

COORDINATED CARE FOR PATIENTS WITH CHRONIC CONDITIONS MADE POSSIBLE BY VALUE-BASED CARE

Alternative Payment Models Help Medicare Patients Manage Multiple Conditions and Live Healthier

Value-based care models pay hospitals and providers, in part, on the quality of services delivered and outcomes achieved. These models enable healthcare organizations like Trinity Health Alliance of Michigan to help patients simplify their healthcare and manage multiple conditions.

For healthcare providers nationwide, this kind of patient assistance is only possible because of Medicare's alternative payment model (APM) program.

Ron's story:

Ron was struggling to manage multiple acute and chronic conditions, including diabetes, breathing issues, and ulcers. Feeling hopeless, he decided to visit a care manager.

His nurse care manager Leslie, along with Channing, a certified family physician, developed a care plan to simplify Ron's disease management and meet Ron's health goals. The care team first addressed Ron's breathing needs, which inadvertently helped improve his other health conditions.

Ron also learned how to better manage his diet to keep his diabetes under control. The care team simplified how to track the foods he eats, which helped lower Ron's blood sugar to near-perfect levels. Ron no longer needs to carry around oxygen and is moving around without a walker.

Without this level of coordinated care, Ron says he does not know where he would be today.

Because value-based care focuses on outcomes, healthcare organization like Trinity Health can use incentive payments to support care managers in building relationships with patients and helping them manage their conditions. Without Congress' continued support for value-based models, patients like Ron may not get the support or care they need.