

VALUE-BASED CARE IMPROVES THE LIVES OF MILLIONS

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ALLIANCE FOR
VALUE-BASED+
PATIENT CARE



Value-Based Care Improves the Lives of Millions

Value-based care models [generate billions of dollars in savings to Medicare](#) and [improve quality](#). They have a profound, positive impact on the daily lives of patients and their families. More than 14 million people nationwide benefit from more holistic, better coordinated health services thanks to Medicare's continued investment to transition the United States to a system that prioritizes good clinical outcomes and high-quality, personalized patient care.

Value-Based Care Improves the Patient Experience

A focus on outcomes enables physicians and other clinicians to provide and be reimbursed for services proven to improve health. Many of these extra patient services are not covered by Medicare, including care coordination, patient outreach, and social supports like housing and transportation assistance. Value-based models improve patient care and expand access to services by:

Enabling more personalized, coordinated care. When asked about their healthcare preferences, consumers [overwhelmingly say that they want more personalized care](#), in which physicians and other clinicians listen attentively and work to identify the root causes of their health problems. Value-based care enables physicians and other clinicians to spend more time with patients, allowing them to build deeper relationships and provide support tailored to individuals' needs and circumstances. Value-based care helps the various physicians and other clinicians a patient may see work collaboratively, so they can better coordinate treatment. For example, **William** receives personalized behavioral healthcare because value-based care supports close coordination between his primary care and psychiatric care providers.



William Tennessee

William faced mental health challenges due to multiple chronic conditions and needed clarity about his antidepressant. A nurse referred William to a behavioral health social worker, who helped him find a convenient pharmacy, identified coping strategies, and connected him with a long-term psychiatric provider. This coordination between physical and behavioral health services was made possible by Medicare's incentive for value-based care and gave William the tools he needed to lead a healthier life.



Wanda North Carolina

Wanda lived with a serious lung condition for years. When it became clear that her disease was terminal, Wanda's team at Coastal Carolina Quality Care created a personalized palliative care plan, including in-home physician visits and medications to manage her pain. These critical services are not typically covered and were only made possible by Medicare's incentive for value-based care. Wanda died quietly in her home one month later. Her care team was with her, helping her face the end of life on her terms in the place she was most comfortable.

Focusing on prevention and disease management. Value-based care emphasizes preventive treatment like screenings and immunizations, so patients stay well. This leads to tangible patient benefits. Accountable care organizations (ACOs)—one of the most common value-based care models—outperform non-value-based models on [81% of quality measures](#), including preventive care measures. This focus on early detection and treatment ultimately helps patients avoid more costly care settings. For patients who require more ongoing care, value-based models enable physicians and other clinicians to provide intensive care management services, as well as end-of-life support. For example, **Wanda** was able to stay in her home longer and, as her condition progressed, access palliative services.

Offering enhanced services comparable to Medicare Advantage's supplemental benefits. Value-based care supports equity by increasing parity between traditional Medicare and Medicare Advantage (MA). Physicians and other clinicians participating in value-based models can offer services resembling supplemental benefits typically only available in MA, like transportation services, ensuring all older adults have the support they need to thrive.

These additional services are integral to improving health, as research shows up to [80% of patient outcomes are influenced by social, behavioral, and environmental factors](#). The U.S. healthcare system has historically not accounted for these factors. Value-based care enables physicians and other clinicians to be reimbursed for wrap-around social services, not covered by traditional Medicare, that give patients the support they need to live healthier lives. The [vast majority of ACOs](#) provide patients with services like housing, food, and transportation assistance. For example, **Pattie** accesses transportation services that help her attend her regular dialysis appointments.

Addressing social determinants is also a key step toward reducing historic disparities in health outcomes, and value-based care can help realize this goal. For example, the [Pathways Community HUB \(HUB\) Model](#) in Ohio and Michigan connects individuals experiencing social challenges to community care coordinators to provide additional services and support. HUB resulted in reductions in low birthweight and pre-term birth for Black birthing people.

Congress's Role in Supporting Better Healthcare

Congress has a [long, bipartisan history of supporting value-based care](#)—and, by doing so, supporting patients in receiving higher-quality, holistic, personalized health services. Significantly, Congress passed the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), which included a 5% incentive for participants in advanced value-based care models.

This incentive has been integral in helping physicians and other clinicians transition to value-based models and improve patient care. Nearly 230,000 physicians and other clinicians received the incentive in 2022. [Nearly 60%](#) of ACOs that received the incentive used it to reinvest in patient care initiatives. Others used it to invest in additional staffing, data infrastructure, and other resources to help their practices better serve patients. One primary care practice in Pennsylvania used the incentive to [create a 24/7 phone line](#), which successfully helped keep its sickest patients out of the hospital.

What's Next?

Policymakers can further support patients by extending MACRA's incentive for value-based care and passing the Value in Health Care Act ([H.R. 5013](#), [S. 3503](#)). In doing so, Congress can ensure that millions of patients nationwide do not lose access to high-quality, personalized healthcare—and millions more gain access to this kind of care, as more physicians and other clinicians transition to value-based models.

Congress: Support patients. Extend the incentive for value-based care.

About the Alliance for Value-Based Patient Care

The Alliance for Value-Based Patient Care is a national coalition dedicated to advancing policies that promote value and quality in U.S. healthcare. Member organizations include the American Medical Association, America's Physician Groups, American Medical Group Association, Health Care Transformation Task Force, National Association of ACOs, and Premier, Inc. Learn more at <https://valuebasedcare.org>.



Pattie Ohio

Pattie—an 80-year-old with chronic kidney disease and other health challenges—was discharged from the hospital to no food in her cupboards, no reliable source of transportation to her dialysis appointments, and limited finances to sustain herself. With the help of Medicare's incentive for value-based care, her healthcare providers connected her with social and community health workers, who helped her find a dialysis center close to home and identified community resources to improve her situation.