

# Fourteenth National Value-Based Payment and Pay For Performance Summit

Optimizing Value-based Care Opportunities through Strategic Bundles

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# U.S. Healthcare at a Crossroads \*

A summary critique of U.S. Healthcare:

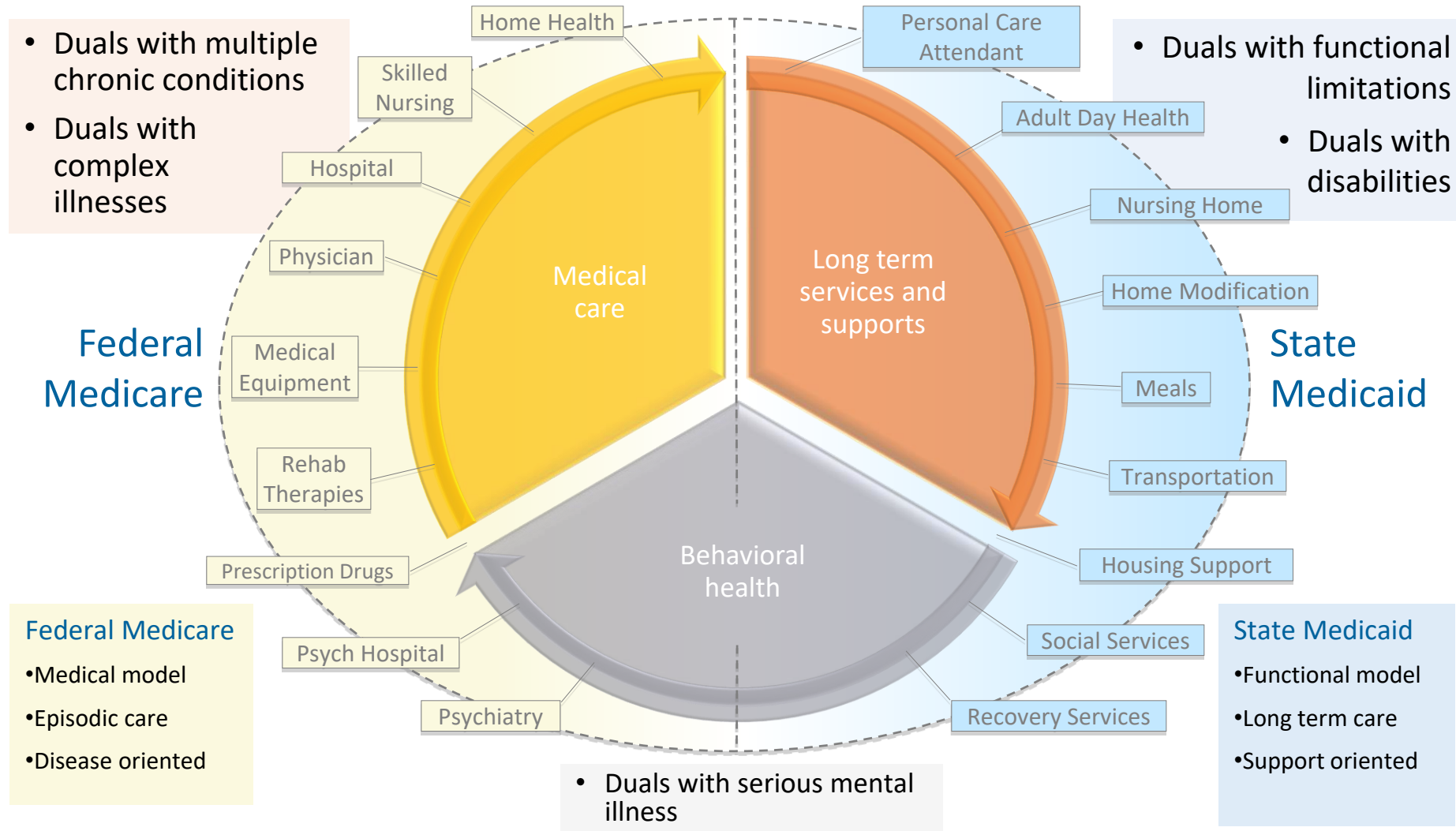
“A system characterized by runaway inflation that threatens to price medical care outside the reach of most Americans, stories of families bankrupted by costly medical bills, and a system where for all the costs, the health of Americans does not seem to be as good as most other industrialized countries. The consensus view of American healthcare revolves around a system that is overly-specialized, over-bedded, needing fewer hospitals and more primary care”.

**Source: Newsweek January 1970**

# Value-Based Care Check List

- Market Analysis: Do you have willing payers? Self-insured employers?
- Data Analytics: Source and quality of data...who is getting what information from whom? What is your internal analytics capability?
- Network of Providers: Do you truly have a network? Is there an “orchestra”?
- Structure: Is there system agreement on structure and incentive alignment? Pick your acronym: CIN? ACO? MSSP? BPCI?
- Patient Care Management: Do you have the structure, the staffing, and the discipline to manage patient care in a value-based model?
- Are you trying to manage population health with your EHR alone, and not using applications built for population health to help accomplish your goals?

# Do You Have The Capabilities To Manage This Care?



## ...and this is where we are?

- 72% of hospital executives still felt that labor cost and supply chain were keys to bending the cost curve
- 61% of hospital systems cited no improvement in service rationalization
- 70% of executives cited the need to prepare for the transition to value-based care as their top transformation priority....DOWN from 77% in 2017
- 70% of executives do not have a great degree of confidence in their own cost-accounting systems