

# Delivering on the Promise of Accountable and Value-Based Care

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**A**s a physician, I've seen firsthand the challenges plaguing our health care system. The ways that the status quo often fails patients are all too familiar to any of us who have been on the front lines. From a lack of meaningful care coordination to a physician shortage fueled by burnout and misaligned incentives, too much about the way we deliver care falls short. To fix this, we must work together to create an efficient, quality-oriented system focused on improving patient outcomes and addressing health disparities.

Today, 30% of all health care spending is tied to waste,<sup>1</sup> and health inequities drive \$320 billion in annual health care spending for Medicare beneficiaries.<sup>2</sup> It's clear something must be done, and many have already embraced value-based care as the path forward. But how do we make our collective ambition a reality in a fragmented care system overwhelmed by ever-rising health care costs and mounting administrative burdens? In today's health care environment, where payment models, practices, and the business of health care seem to be fully cemented, how can we bring the promise of value-based care to life? And how can a singular physician make a difference?

## How We Move Value-Based Care Forward

It's no secret patients want more access to coordinated, convenient, personalized, and affordable care,<sup>3</sup> but physicians have limited time and resources. A fee-for-service (FFS) system prioritizes transactional care over high-value, coordinated care, which contributes to siloed care management and provider burnout, fueling physician shortages. The negative impacts of maintaining the status quo will only increase as baby boomers retire and enroll in Medicare and require more rigorous treatment and care management because of polychronic conditions.

One solution that we must consider is accountable care organizations (ACOs). ACOs aren't new, and they have been

touted as a solution to the problems experienced every day in doctors' offices across the country, but doubt about ACOs still exists. That may be because some see value-based care as too good to be true or feel we are too far into an FFS model and there is no easy way to transition. But I've seen firsthand how physicians can adapt and embrace the model—and when they do, practices change for the better, and most importantly, patients see improvements in their health, life, and relationships, both with their health care providers and in their own personal lives.

## How ACOs Can Accelerate Value-Based Care

For physicians, the promise of value-based care is the ability to spend more time focusing on the whole patient. ACOs can play an essential role in the transition to—and maintenance of—a value-based system of care and can positively impact health care costs while doing so. For instance, the most recent update from CMS is that Medicare Shared Savings Programs saved Medicare more than \$1.8 billion in a single year in 2022.<sup>4</sup>

Some organizations, particularly those participating in the Center for Medicare and Medicaid Innovation ACO Realizing Equity, Access, and Community Health (ACO REACH) model, have the potential to greatly improve health equity in local communities. The ACO REACH model can help providers better serve their patients by identifying opportunities for patient engagement, utilizing data to close care gaps, and improving their ability to support patients who may have previously fallen through the cracks of an FFS system.<sup>5</sup>

ACOs are accelerating value-based care in the following ways:

- ***They are providing a fix for FFS and allowing doctors to doctor.*** ACOs work with providers to enhance care coordination, help create greater access,

and create networks for doctors to address preventive, acute, and specialty care. They also help address many of the coordination issues faced by our current FFS system; things like patients not attending follow-up appointments after hospital discharge or skipping preventive care are common pitfalls in our current FFS model. ACOs strive to coordinate care with a strong support system fostering a strong patient-physician relationship with an emphasis on wellness vs caring for patients only when they are acutely ill.

- ***They focus on caring for the whole patient and addressing basic needs.*** ACOs are able to look beyond the walls of the clinic and reach local communities to address day-to-day barriers to care. For instance, ACOs can help patients access social services addressing needs such as transportation and food security. For many Americans, access to a doctor's office remains a challenge, but an ACO can connect them to locations that may be more convenient and familiar. I'm proud to say our team is leveraging the tools available within CVS Health to help address the issues we see in health care deserts, where it is not uncommon to see patients miss appointments due to lack of reliable transportation or delay care due to the lack of appointments available in practices that are spread too thin. We're looking for ways to augment and support an overstressed health care system by seamlessly integrating and working collaboratively with our ACO partners. For example, 85% of Americans live within 10 miles of a CVS Health location, enabling patients to use these locations, which often house HealthHUBs and MinuteClinics, to help with after-hours care, follow-ups, routine vaccines, and lab work.
- ***They are powering health care with data and analytics.*** ACOs provide powerful, actionable data and analytics to help inform care decisions. Our enterprise analytics capabilities employ both historic and current data to help us develop actionable insights and improve patient outcomes. For example, our robust data analytics help providers to make necessary adjustments to care plans and identify individualized, next-best actions for patients. Analytics-driven solutions like these help providers manage care based on the patient's individual needs, helping to drive value-based care models forward.

Value-based care and the work ACOs do in support of this model improve the patient experience, drive better outcomes, and reduce unnecessary health care costs. By leaning into accountable and value-based care, keeping the patient at the center of all we do, and working together in pursuit of better health for all, ACOs can close care gaps for some of the most vulnerable patients, enhance collaboration among care teams,

and create efficiencies in systems that just don't work in the day-to-day operations as they exist today. As a result, ACOs can become better caregivers for Medicare patients and better stewards of Medicare spending and services.

### **Keep Marching Forward—With the Right Support**

Because the shift from FFS to accountable and value-based care is incredibly complex, it has taken several decades to get to where we are now. As we build this new way of providing care, we will need stronger connections among individual practitioners, patients, and organizations partnering as ACOs. These partnerships will facilitate change and provide value on the ground in the communities where this level of partnership is most needed.

We all can agree that patients deserve better value and care, but doing the work will require redefining the standards we hold ourselves and our organizations to as we serve patients and communities. This shift requires significant investment in technology, analytics, care management, and population health programs so that we all can start marching toward the same goal of accessible, affordable, coordinated, and equitable patient care.

### **Doc, It Starts With You**

And, finally, the movement requires physicians who are willing to step out of their current ways of practicing and step into something that looks like the reason so many of us began practicing medicine to begin with: to impact patient lives in simple ways that can have a ripple effect on the whole person.

The latest news from CMS reports that ACOs consistently deliver significantly higher performance for quality measures related to diabetes and blood pressure control, breast cancer and colorectal cancer screening, tobacco screening and smoking cessation, and depression screening and follow-up.<sup>4</sup> I think we can all agree that ensuring these fundamental aspects of care are consistently provided is the foundation of our ability to do better for our patients, improve the health care system as a whole, and fulfill our own duties as physicians by providing the most valuable care possible.

Independent physicians throughout the country continue to embrace ACOs, in particular, CMS Shared Savings Program ACOs. In January 2023, these ACOs included more than 573,000 participating clinicians who provide care to almost 11 million individuals with Medicare. And the future of value-based health care for Medicare patients is clear: CMS has set a goal that 100% of individuals with traditional Medicare will be part of an accountable care relationship by 2030.

I would encourage you as a physician to stay up to date on the evolution of value-based care. Discuss ideas with

colleagues, review data and reports from CMS, continue to keep up with the literature in *The American Journal of Accountable Care* and *The American Journal of Managed Care*, and engage with professional groups such as the National Association of ACOs. These groups, publications, and activities can help you to best understand the groundswell of data, keep up with trends in value-based care, and learn how it's changing the way medicine is practiced today. And importantly, seek out strong partners to support you in your work toward value-based care—an essential step in the journey.

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