

FACTFILE

A Truven Health Analytics®, part of the IBM Watson Health™ business, survey

Drivers and Barriers to Value-Based Care Adoption

Supported by governmental and payer programs that focus on value across the healthcare system, healthcare organizations are increasingly participating in value-based risk contracting. These organizations are evolving from fee-for-service physician-centric hospitals focused on their inpatient care, to organizations focused on clinical integration, population health, or even person-centric organizations with the consumer as central to the organization of care delivery. This shift has not been without its challenges, such as physician engagement and alignment and data-driven insights to manage risk and clinical outcomes.

Truven Health Analytics®, part of the IBM Watson Health™ business, examined healthcare leader survey results to better understand the challenges and steps these leaders are taking to respond to the shift towards value.

TOP THREE GREATEST CHALLENGES IN THE SHIFT TO VALUE-BASED CARE

Survey respondents were asked, “Which of the following are your top THREE greatest challenges in the shift to value-based care?” They indicated that managing at-risk patient populations, aligning physicians and network partners with organizational goals, and uncertainty around healthcare reform/Affordable Care Act (ACA) repeal are their biggest challenges.

RESPONSE	COUNT	PERCENT
Managing at-risk patient populations	198	64%
Aligning physicians and network partners with organizational goals	161	52%
Uncertainty around healthcare reform/ACA repeal	154	50%
Forecasting wins/losses under new payment models	118	38%
Measuring clinical outcomes	100	32%
Data submission requirements from CMS/regulatory requirements	71	23%
Establishing a consistent postacute care partner network	64	21%
Lack of patient accountability	7	2%
Frustration with payers	5	2%
Need a single-payer system	3	1%
Declining reimbursement vs. rise in costs	2	1%
Other	6	2%
None of the above	1	0%

Multi-response / Base = 326
 SOURCE: Truven Health Analytics®, part of the IBM Watson Health™ business.

HOW MUCH OF YOUR ORGANIZATION'S REVENUE IS TIED TO VALUE/ OUTCOMES/SHARED RISK?

Thirty-seven percent of respondents reported at least 11%–25% of their revenue is connected to value, outcomes, and shared risk. We anticipate that these numbers will increase with time as MACRA/MIPS encourages adoption of these models.

RESPONSE	COUNT	PERCENT
0%–10%	124	41%
11%–25%	112	37%
26%–50%	51	17%
51%–75%	11	4%
>75%	1	0%

Base = 299 / SOURCE: Truven Health Analytics®, part of the IBM Watson Health™ business.

Methodology

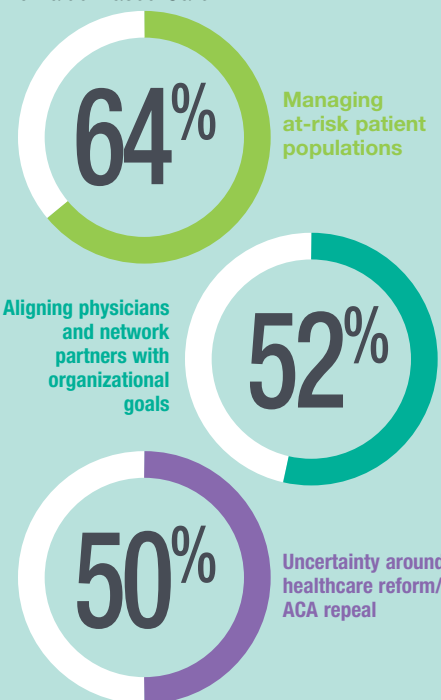
A total of 16,438 healthcare professionals across the United States were asked to participate in a survey by the independent research company Signet Research, Inc. By participating in the survey, professionals were given the chance to win one of two \$250 Visa gift cards. 326 responses were received. The findings of this survey may be accepted as accurate, at a 95% confidence level, within a sampling tolerance of approximately +/-5.4%.

Twelve percent of the respondents were senior management, 20% clinical management, and 19% percent were financial management. Ninety-one percent of respondents identified as being employed by a hospital.

Truven Health Analytics®, part of the IBM Watson Health™ business, and its consulting teams help healthcare organizations manage the top issues identified in this survey.

Data Highlight

Top Three Greatest Challenges in Shift to Value-Based Care



Upcoming Topic:

> Cardiac Hospital Performance

FACT FILE PARTNER:



WHICH OF THE FOLLOWING HAS YOUR ORGANIZATION DONE TO OPTIMIZE CARE DELIVERY PROCESSES?

Healthcare leaders reported the adoption of multiple approaches to optimize care, with the investment in new tools to better track clinical outcomes and renegotiating payer contracts as the most reported approaches.

RESPONSE	COUNT	PERCENT
Invested in new tools to better track clinical outcomes	197	64%
Renegotiated payer contracts	186	60%
Invested in tools to benchmark clinical performance	175	57%
Participated in an alternative payment model program, such as bundled payments	167	54%
Invested in tools to benchmark operational performance	157	51%
Implemented a population health management solution	147	48%
Established a standardized postacute care partner network	115	37%
None of the above	15	5%

Multi-response / Base = 237
SOURCE: Truven Health Analytics®, part of the IBM Watson Health™ business.

IN WHICH OF THE FOLLOWING PROGRAMS IS YOUR ORGANIZATION CURRENTLY PARTICIPATING, OR HAS CONCRETE PLANS TO PARTICIPATE IN?

A majority of respondents report that their organizations are currently planning or has concrete plans to participate in the CMS value-focused programs: Quality Payment Program (QPP)/Medicare Access and CHIP Reauthorization Act (MACRA), and/or the Merit-Based Incentive Payment System (MIPS). Many (49%) also report participating or have concrete plans to participate in a payer/commercial bundled payment program.

RESPONSE	COUNT	PERCENT
QPP/MACRA/MIPS	175	60%
Payer/commercial bundled payment program	143	49%
CJR Bundled Payments	106	36%
BPCI/BPCI Advanced	72	24%
ACO	6	2%
MSSP	4	1%
Other	13	4%
None of the above	32	11%

Multi-response / Base = 326
SOURCE: Truven Health Analytics®, part of the IBM Watson Health™ business.

WHICH OF THE FOLLOWING BARRIERS HAS YOUR ORGANIZATION ENCOUNTERED DURING THE SHIFT TO VALUE-BASED CARE?

Organizations have faced multiple challenges in the shift to value-based care. Respondents identified multiple challenges, including educating and aligning their physicians and creating accurate forecast models to measure the impact of these programs.

RESPONSE	COUNT	PERCENT
Educating physicians on new requirements	206	71%
Creating accurate forecast models to measure the impact of value-based care programs	181	62%
Alignment among physicians or postacute care network partners	172	59%
Capturing clinical outcomes data	168	58%
Systems integration and EHR interoperability issues	166	57%
Obtaining timely and accurate data sets to work with	157	54%
Internal capabilities/staffing resources	141	48%
Capturing operational and financial performance data	134	46%
None of the above	3	1%

Multi-response / Base = 291
SOURCE: Truven Health Analytics®, part of the IBM Watson Health™ business.

