

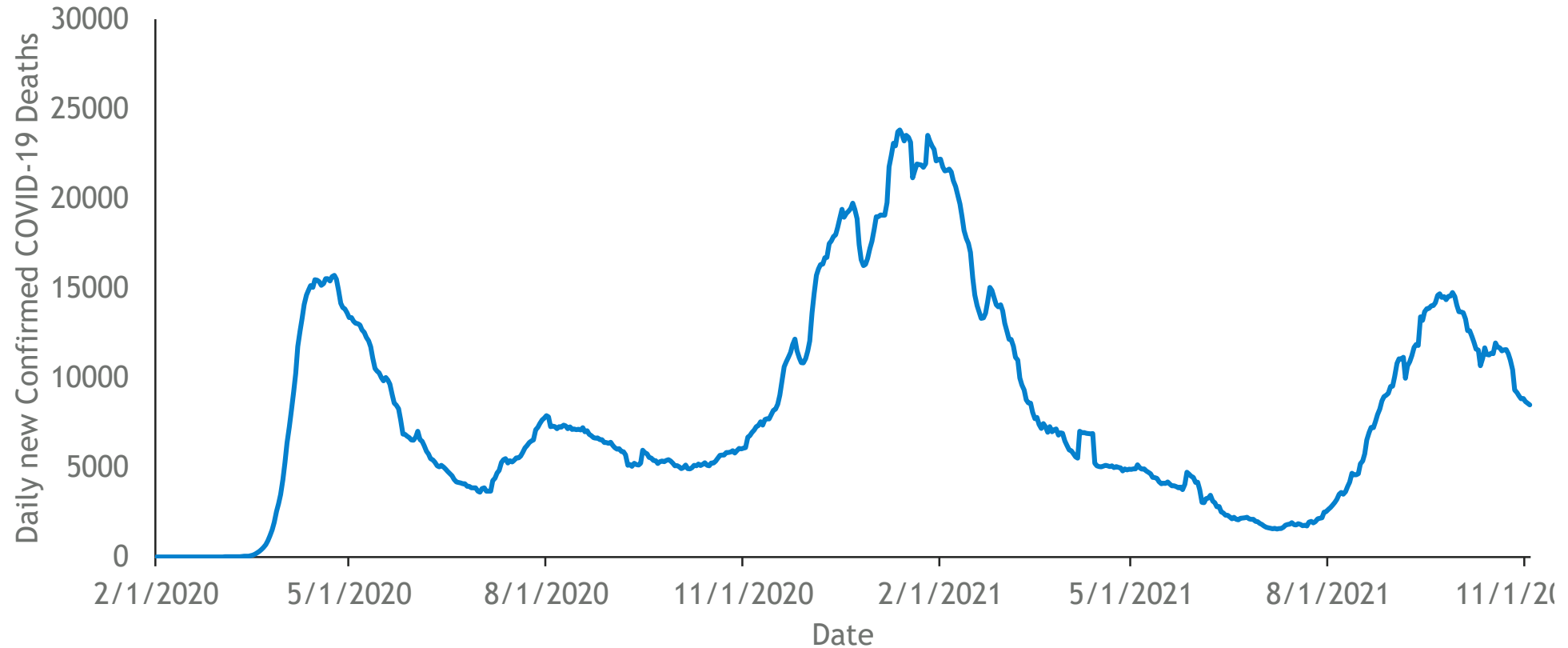
# The Pandemic and the Future of Health Care Reform

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October 2021

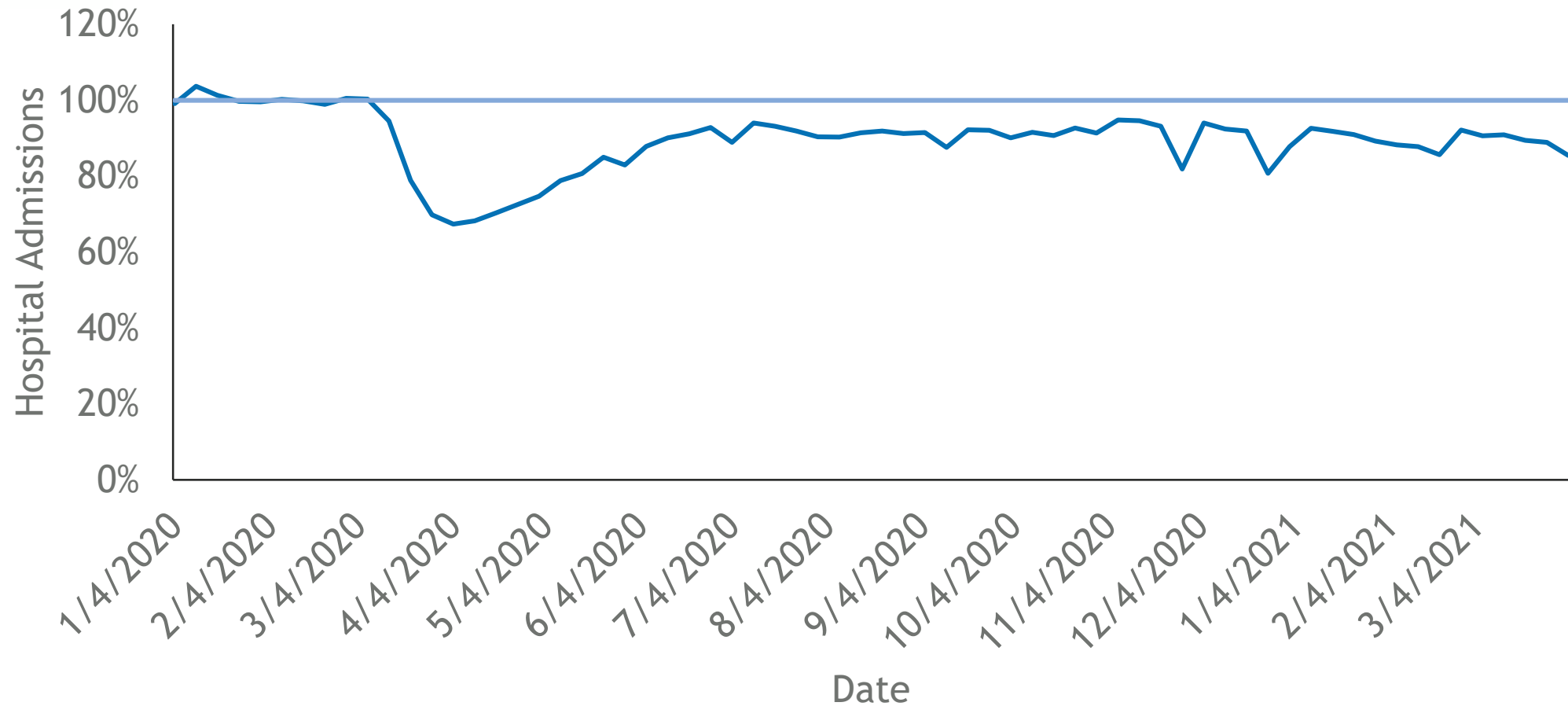
# Topics

- COVID-19 Short-Term Impact on Health Care and Health
- Potential CMS and Purchaser Actions Influencing Longer-Term Impact
- Key Steps to Accelerate Health Care Reform

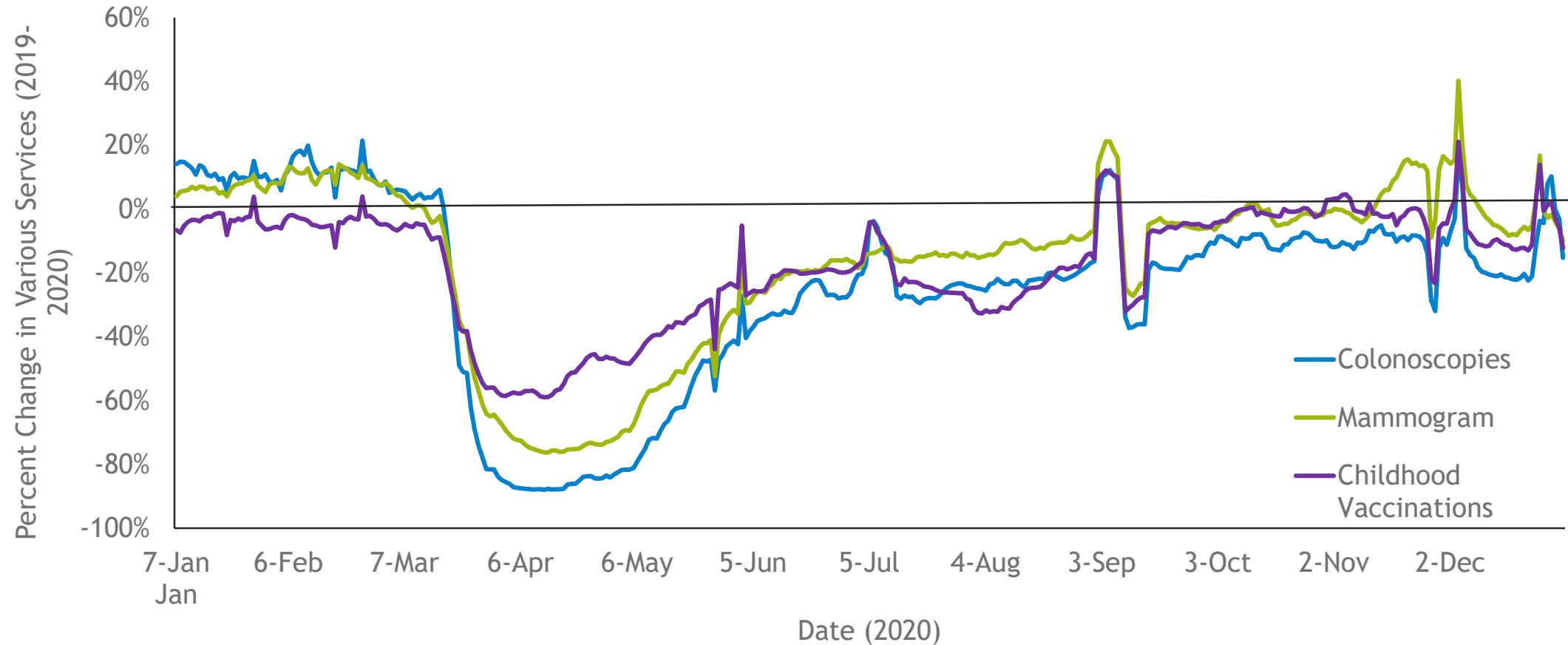
# The Last Major COVID-19 Wave?



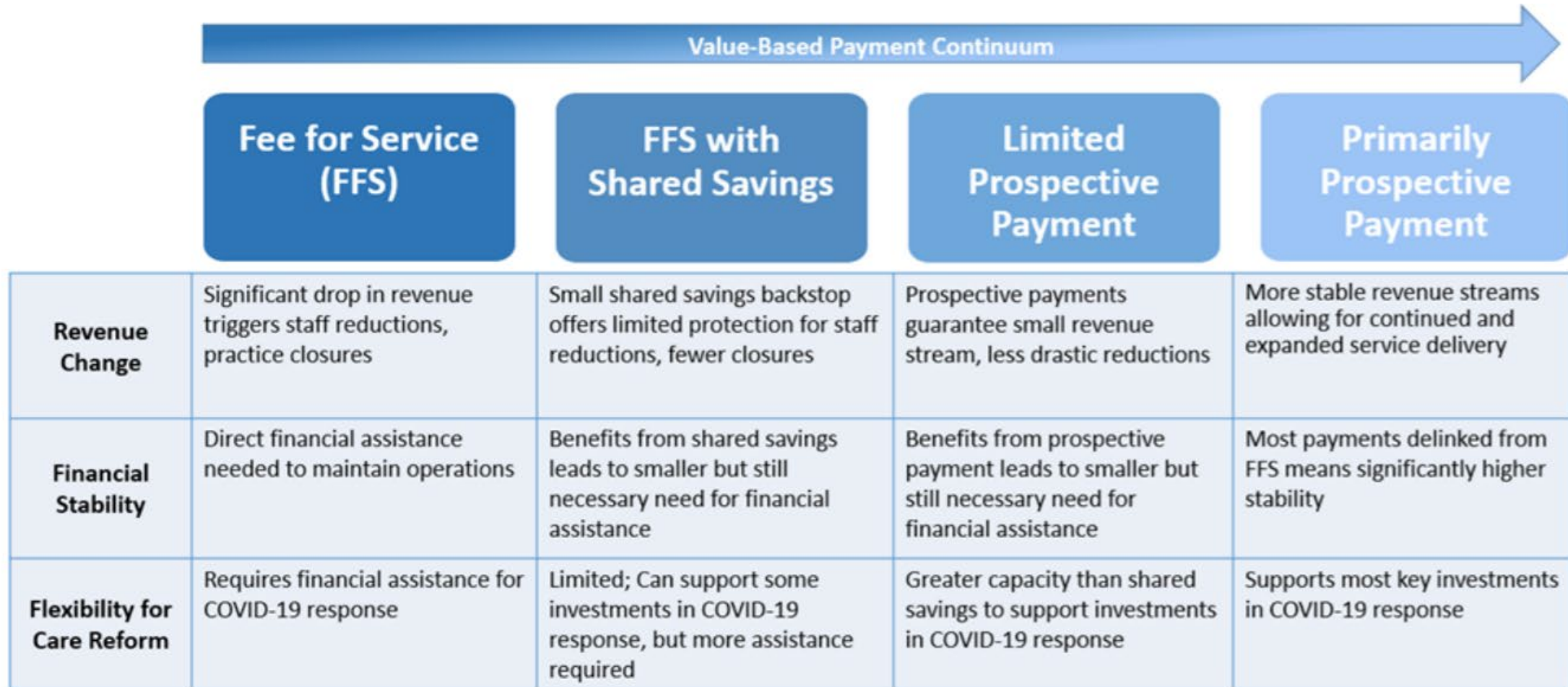
# Impact on (Fee-for-Service) Providers



# Impact on Preventative Services



# COVID-19 has impacted providers differently in value-based payment vs. fee-for-service



# Virtual care models can build on pandemic-related trends: Convenient, home-based, personalized, prevention-oriented care

Telehealth plus:

- Remote monitoring technologies
- Digital self-care tools and other apps to help manage care
- Robust longitudinal and integrated data and analytics
- Care teams relying more on allied health professionals and community health workers - less costly and more convenient alternatives to hospitals if needed services can't be provided at home

These care models exist now:

- Chronic disease management at home
- COVID-19 management (mainly) at home
- Kidney care at home
- "Independence at Home" models for frail elderly
- Hospital at home

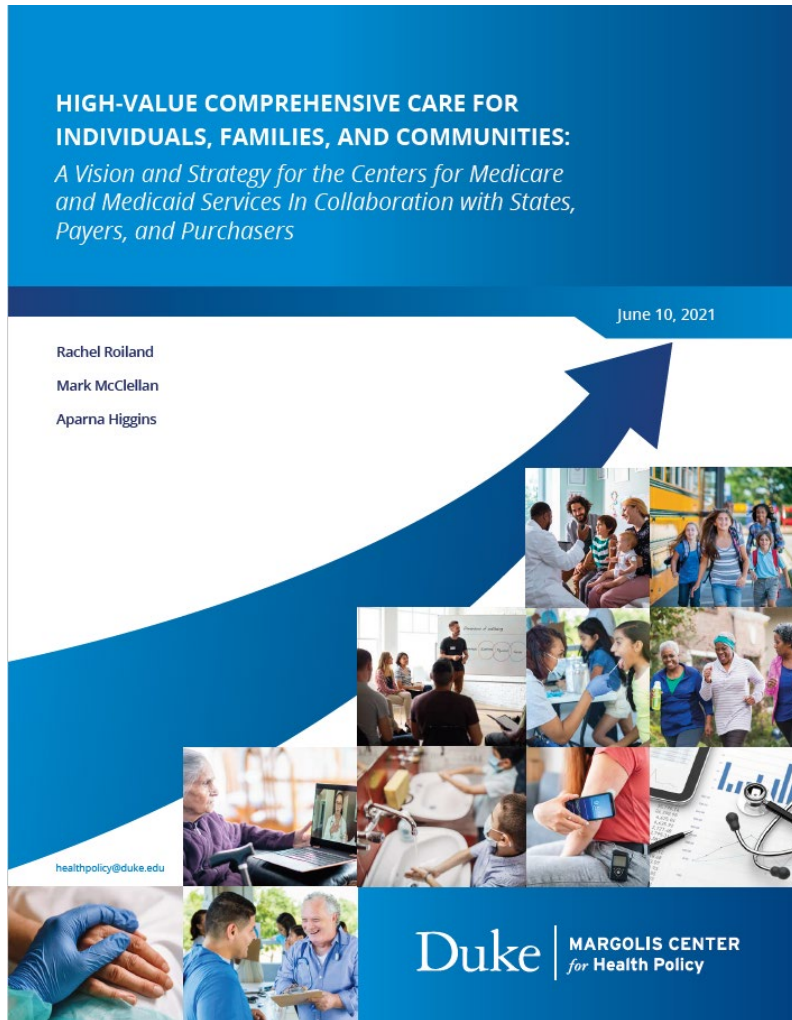
# Further action to advance payment and care reform can build on pandemic-era care innovations for higher-value

**HIGH-VALUE COMPREHENSIVE CARE FOR INDIVIDUALS, FAMILIES, AND COMMUNITIES:**  
*A Vision and Strategy for the Centers for Medicare and Medicaid Services In Collaboration with States, Payers, and Purchasers*

June 10, 2021

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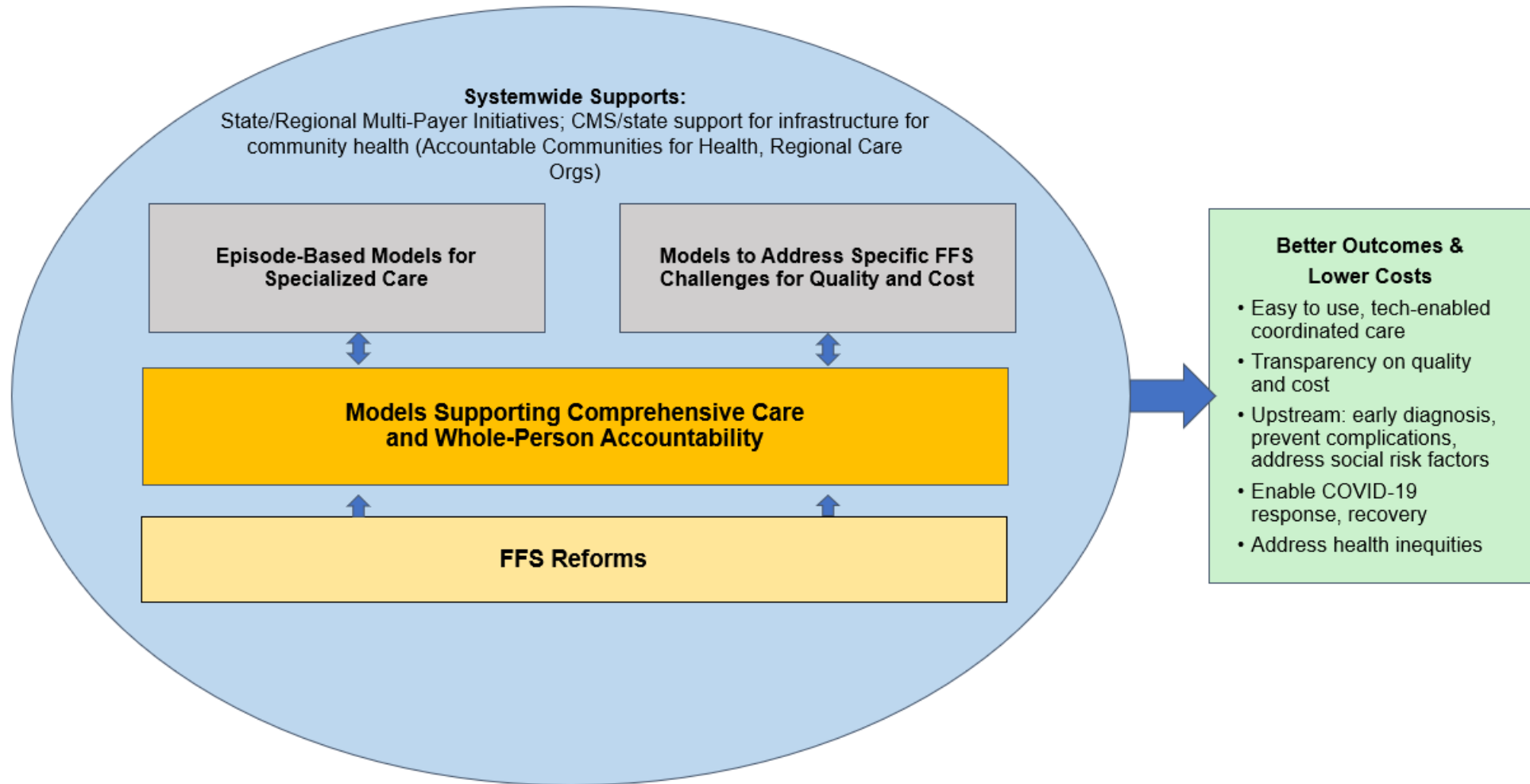
- The pandemic revealed the fragility of fee-for-service, but also the resilience of value-based payment models and their ability to support innovative approaches to care delivery, even during a crisis.
- A strategy to advancing value-based care is needed to sustain and build on care innovations employed during the pandemic and address health care's major challenges
  - **Vision: High Value Comprehensive Care**
    - Care that can deliver affordable, timely, and effective services that address the physical, mental, social, and other needs of an individual, family, or community.
  - **Strategy: CMS Leadership & Aligned Actions by All Stakeholders**
    - Aligned, simplified, and expanded CMS reforms with the explicit goal of advancing care reforms that improve population health and reduce disparities
    - Aligned actions by States, Private Payers, and Purchasers can support the delivery of and demand for access to high-value comprehensive care



# CMS Strategic Commitment to Payment Reform To Drive Person-Centered Care Models



# A Framework for Comprehensive Care Reform



# Alternative Pathways Toward Comprehensive Care Payment

- Populations in traditional primary care payment
  - Bundled payments for specialists, health systems
  - Fee-for-service modification (e.g. FFS adjustment based on performance against benchmark)



- Populations attributed to integrated/consolidated organization in risk-based payment models (e.g. advanced hospital-based ACOs)
- Populations attributed to physician practice in advanced primary care risk models (e.g., Primary Care First, primary care-led ACOs)

- LAN is transitioning from Version 2 → Version 3
- Focus on specific actions to support advanced, accountable primary care that achieves improvements in outcomes, spending, and equity
  - Focus on population care and outcome goals, with synergistic payment reforms to support
  - Process and supports to engage states, employers and communities
  - Not focused on full alignment with CMMI/CMS models
  - Aiming for specific regional care reforms linked to measurable system-wide impact at state and market level

# Thank You!

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