

Advance the Payer-Provider-Aligned Model to Promote Health

Policy Prescriptions for Improving the Health of Communities and the Nation

Health plans and providers aligning around a common set of incentives improves clinical and financial outcomes. Core to this payer-provider collaborative model is the mission to provide high-quality, coordinated health coverage and care at the right time in the right place.

Support for a robust primary care system and enhanced telehealth options for care delivery are vital to improving the health of individuals and communities. Alignment and collaboration across health plans and providers, specifically those in value-based arrangements, improves the success of these efforts, optimizes care delivery and reduces costs.

These policy prescriptions offer near and long-term solutions to expanding telehealth and reinvigorating primary care while advancing a proven model of coverage and care that promotes better health. For additional context, please see [Health Care 2030: ACHP's Roadmap to Reform](#).

Strengthening Primary Care

Invest in Alternative Primary Care Payment Models

Studies have demonstrated that health systems offering comprehensive primary care have superior patient outcomes, fewer health inequities and lower overall costs.

- ▶ Health plan investment in primary care arrangements focused on comprehensive, coordinated, team-based approaches with measurable results will deliver superior patient outcomes and higher-quality care at lower costs.
- ▶ Extend home-based care beyond the chronically ill to individuals struggling with behavioral health or in need of palliative care, treating patients more affordably and keeping them independent in their communities.
- ▶ The Center for Medicare and Medicaid Innovation has launched over 40 groundbreaking payment models that seek to pair financial risk-sharing arrangements with outcomes-based quality measurements. Expanding the successful models outside of the Medicare program would share these innovations and benefit individuals and communities across the country.

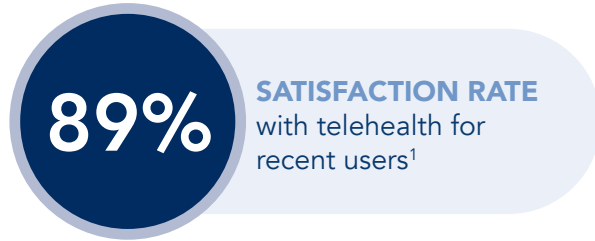
Manage Community Populations Through Value-Based Arrangements

- ▶ Prioritize appropriate care and incorporate performance data, utilization patterns, costs and patient type, and encourage providers to spend more time with patients, resulting in better prevention and management of chronic conditions at lower overall costs.
- ▶ Create networks of primary care providers and refer patients to community-based service providers to address social needs that reduce the burden on the health care system, improving health outcomes and reducing costs.
- ▶ Place responsibility and risk for a population within a defined target region on the primary care provider and allow locally tailored, population-based health improvement strategies with high potential for improved outcomes and lower costs for entire communities.
- ▶ Incentivize team-based care, employing an all-hands approach utilizing clinicians and non-medical staff to allow more time to be spent with each patient.

Supporting Telehealth Expansion

Increase Access to Telehealth Coverage

Recent polling suggests consumer satisfaction and demand for access to telehealth will drive demand for virtual care beyond the public health emergency.



- ▶ Allow patients to access telehealth wherever they are, improving opportunities for early primary care interventions to prevent and manage costly chronic conditions, reducing acute care needs and costs.
- ▶ Expand the types of virtual care services, providers and modalities to improve patient options for receiving care – particularly retaining audio-only options, which are an essential to bridging the digital divide.

Expand Types of Health Professionals Delivering Telehealth

Allowing non-physicians to deliver telehealth adds value, creates operational efficiency, reduces burden and allows more patients to receive care at a lower cost.

- ▶ Deem non-physicians, alternative practice providers and primary care teams eligible to deliver and be reimbursed for telehealth.
- ▶ Permit practitioners to practice at the top of a license in telehealth as well as in-person care delivery, improving care coordination, access and efficiency, especially in rural communities.

Create Universal Access to Virtual Care

Successful telehealth requires a comprehensive approach to universal access to virtual care across all federal health programs, especially for populations with greater social needs and without access to reliable broadband internet.

During COVID-19, patients of all races and ethnicities have accessed telehealth at similar rates. However, rural disparities still have the potential to limit the reach and value of virtual care.

- ▶ Create sustainable broadband internet access for all individuals and communities.
- ▶ Cover telecommunication devices as a medical necessity, especially given the correlation between poverty and telemedicine unreadiness.
- ▶ Require accessibility accommodations, such as closed captioning for those with hearing impairment, as a mandatory feature of all telecommunication platforms.

Find more information and additional policy prescriptions at [Achp.org](https://www.achp.org).

¹ Shifting Consumer Health Care Behavior." The Alliance of Community Health Plans. May 21, 2020. <http://bit.ly/Consumer-Behavior-FN>.