Talking About Health Care Payment Models That Prioritize Quality Over Quantity (AKA Value-Based Care)

As policymakers and health care experts explore more ways that health care payment models can prioritize quality over quantity, United States of Care has identified the following research-based recommended message frame.

The public doesn't understand or connect with the term "value-based care."

These recommendations take a new approach to describing what it is and its impact on patients.

What Resonated with People About Value-Based Care

How People Describe Their *Current Experience* Getting Care

While people are satisfied with their insurance and the quality of care they receive, they desire **targeted improvements** that don't compromise their **existing quality of care.** People associate a consistent set of **criticisms with a fee-for-service approach**, including:

1. A fragmented system with little coordination between providers
2. Patients spend too much time waiting versus time with their doctors
3. An overreliance on prescription drugs to solve health issues
4. Patients with money are prioritized over patients living on low incomes

What People *Want* Their Experience To Be

When talking about what they want their health care experience to be, participants emphasize **increased quality of care**, or **when their provider:**

* ★ Genuinely cares
* ★ Treats patients as humans rather than a series of symptoms
* ★ Listens attentively
* ★ Offers solutions that address their problems' root causes, rather than an over-reliance on medication.

> When forced to choose, people prefer a model that pays for results rather than quantity, positioning value-based care as the preference over fee-for-service by more than a 4:1 margin.

What Resonates with People about *Value Based Care*

When asked how a value-based care approach would change the health care experience, the **top benefits** that participants mentioned are:

1. Increased quality of care
2. Quality over quantity
3. Patients being treated as a whole person
4. Providers being encouraged to offer more personalized care
5. Providers being held accountable

People do not connect with the current name of "value-based care" and are skeptical about how it would work in practice. Consider terms like "patient-first care," "quality-focused care," or "patient-first quality care."

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Effective Messaging for Introducing a Different Approach

#1 State the Need

All people deserve to have access to quality health care regardless of their race, income, or where they live.

No two people's health needs are the same, and our current fee-for-service model isn't meeting those needs.

Shifting to an approach that puts patients first will increase quality, the amount of personalized care they receive, and improve their overall health.

#2 Describe How It Works

Rather than paying for care based on the number of visits, tests, and procedures, this approach allows people to spend more time with their providers so they can get to know their patients and develop more personalized approaches to addressing their full set of unique concerns in fewer visits.

#3 Describe the Benefits

The approach also encourages providers to coordinate with one another while taking a broader view of all the factors that may be impacting a person's health, rather than jumping too quickly to the next patient, or to prescribe drugs and order potentially unnecessary procedures that drive up costs.

#4 Inoculate Against Potential Concerns

This approach is a targeted and straightforward fix that puts quality over quantity - eliminating the greed in our health care system that results in patients being treated as a series of symptoms rather than as a whole person, while helping identify and manage health concerns that could become very expensive if ignored.

Terms to Watch

If You Hear This	Respond With This	Rationale
"Value-based care"	"Patient-first care" "Quality-focused care" "Patient-first quality care"	"Value-based care" is subjective and encourages misinterpretations and misunderstandings of what is trying to be achieved. It is thought to be cheap, inferior, and low-quality. Rather than using the term "value-based care" shift the conversation to how the approach improves quality and puts patients first.
"This approach will increase cost."	"This approach aims to reduce costs by helping identify and manage health concerns that could become very expensive if ignored."	People are skeptical that an approach that will increase quality will also decrease their cost. As real-world cost impacts are known, we recommend testing and adding those specific examples to messages.
"This approach seems like a big fix or an overhaul of the health care system."	"This approach is a targeted and straightforward fix."	We know from past research that the majority of people prefer targeted fixes that won't disrupt their existing care and providers. Solutions that feel like an overhaul (including comparisons to other countries' health systems) often have less overall support.
"Providers will spend much more time with each patient, making it harder for me to get an appointment."	"This more personalized approach helps address patients' full set of unique concerns in fewer visits."	There is a fear that the approach could make it harder for people to see their providers and get care because they are spending more time with each patient. It is helpful to emphasize that through this approach providers spend more time initially, avoiding repeat visits.

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