

Value-based Care changes the fundamentals.

Many Medicare members live with chronic conditions, and the fee-for-service model doesn't respond to their needs or help them navigate a complex health care system. Value-based models promotes patients receiving more proactive and coordinated care earlier, especially in high-risk areas like diabetes, cancer and heart failure.

“Today’s health care system fails people with multiple chronic conditions. Patients and their families suffer as a result.”

– Dana Lustbader, MD,
ProHEALTH Care

Medicare Value-based Care delivers:



ACOs had

5%

more members getting breast cancer and colorectal screenings

Top ACOs had

8%

fewer acute inpatient admissions

ACOs are better on

67%

of the top quality measures than non-ACOs

3%

more members made regular physician visits

13%

lower rates of ER usage than non-ACOs

3.1M

Medicare Advantage patients in a VBC model

UnitedHealthcare's commitment to Value-based Care.

The goal:

\$75B Annual spend through VBC programs by 2020; to-date, we've reached **\$64 billion**.

The people we serve:

15M Or one in three UnitedHealthcare members currently access care from providers in VBC relationships.

The providers we partner with:

800+ Value-based Care arrangements with care providers are in use today.

 **1,100** Hospitals

 **110,000** Physicians

Visit uhc.com/valuebasedcare to download the complete VBC report.