Value Incentives & Systems Action Collaborative

As one of four action collaboratives under the National Academy of Medicine's Leadership Consortium, the Value Incentives & Systems Action Collaborative (VISAC) seeks to identify the most e 1/4 cient distribution of resources that still incentivizes continuous improvement in population and patient-level health, and supports progress towards high-value payment models throughout the U.S. health system.

Health spending in the U.S. accounts for approximately 18 percent of the GDP and remains one of the leading causes of personal bankruptcy. Despite the high rate of spending on care, health outcomes in the U.S. lag behind other industrialized nations. To address this persistent gap between payment and value, the VISAC works with government leaders, industry executives, and clinicians—among other critical stakeholders—to identify payment methods that incentivize e *ective care at reasonable costs rather than relying on outdated payment models that promote the volume of care over the value to the patient. The VISAC aims to move the U.S. toward a health system that is a*ordable, e */cient, and accessible to everyone.

VISAC's priority is to support payment systems that incentivize value and population health.

The VISAC addresses issues of measurement, risk adjustment and other key factors associated with health costs. Projects stewarded by this collaborative aim to identify the highest impact strategies for reducing health care costs overall while improving total value for the patient.

The VISAC is co-chaired by LDQH + ROGHU of 830 & + HJDn@s\Mad3r@ of theand American Medical Association.

KEY FOCUS AREAS

- Transition away from payments that reward service volume and towards models that emphasize fee-for-value, improved patient experiences, and better population health.
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