

THE NUMEROF 2021 US HEALTHCARE DELIVERY OUTLOOK

Key Action Steps

- Demonstrate differentiated outcomes and value for growth.
- Develop/commercialize bundled and capitated products and services.
- Accelerate performance in new delivery/payment models.
- Redesign the business to ensure patient centricity.
- Rationalize/realign care delivery platforms.
- Manage variation in cost and quality across the continuum.
- Realign structure, roles and competencies with market needs.
- Build service line capability to drive clinical and financial performance.

Greater pressure on drug pricing will create openings for **new pricing approaches**, e.g. risk-based and indication-specific, and **outcomes research collaboration**.

Pricing pressures will continue to drive **risk-based contracting**, diversification into services, renewed focus on value, and M&As. Design for alternative settings will capitalize on **care migration**.

Greater reliance on **preferred partner networks** and **service level agreements** to manage cost and quality. Increase in consolidation and discharge to home health.

Continued growth in retail options and telehealth services. New, innovative community partnerships address SDOH factors. **New entrants disrupt** traditional delivery.

Potential for **spot physician shortages, imbalances**. Wider use of care paths, communication, financial incentives to **align physician interests**. More physicians opt for employment. Consolidation of physician practice groups, and growth of **concierge** models.

Reimbursement cuts, penalties, and alternative payment programs will **accelerate public and commercial adoption** of at-risk payment models. **Migration of in-patient to out-patient settings** will continue to pressure margins.

Shrinking fee-for-service reimbursement encourages risk-based models, e.g. outcomes, bundled, capitated. More **collaborations** on narrow networks and joint offerings.

More consumers with higher deductibles will seek **greater transparency, competitive prices, and convenient access** for services.

More **direct contracting** for in-market narrow networks and out-of-market bundled services. Pressure for **greater transparency** for employees. Interest in health benefits optimization.

