

THE CPT® DOWNLOAD

Understanding the Intersection of Value-Based Care & the CPT® Code Set

Webinar takeaways, additional resources and more!



What Is Value-Based Care?

Value-based care can be defined multiple ways, however, one common thread you'll find in every definition is a patient-centered approach. The focus is on providing the safest, most timely, most efficient, most equitable and most effective treatment for a patient's condition. A number of value-based care models use what the Institute for Healthcare Improvement (IHI) identifies as the Triple Aim: population health, cost and experience of care.¹

The Quadruple Aim

Building on the Triple Aim, the American Medical Association (AMA) has developed the **Quadruple Aim**, which includes the same core elements from the IHI and adds a fourth component: physician wellbeing. This relates to physician professional satisfaction and wellbeing.

Why? Because our research over the last several years has shown that the administrative burden on physicians impacts the quality of care.



AMA's Framework for High-Value Health Care

High value health care has five distinct characteristics:

- **Clear Vision:** It's not enough to have a vision among physicians—there must be a shared vision with patients at the center.
- **Strong Leadership:** A leadership mentality shared between physicians, nurses and other qualified health care professionals (QHPs) is a key characteristic—it must also emphasize training and teamwork.
- **IT Infrastructure:** A robust system focused on interoperability, information sharing and streamlined patient communication is critical.
- **Broad Access to Care:** This is especially important for historically minoritized communities, as well as the sickest patients. Everyone should have access.
- **Payment Models:** New approaches to payment can drive quality care, and there are several possibilities.

¹Institute for Healthcare Improvement. The IHI Triple Aim. Accessed Oct. 25, 2023. www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx

The CPT® Code Set Is Another Driver

The Current Procedural Terminology (CPT®) code set is an important driver for value-based care because it is used for so much more than claims-based reporting and fee-for-service (FFS) payment. CPT supports the health care ecosystem in multiple ways, including:

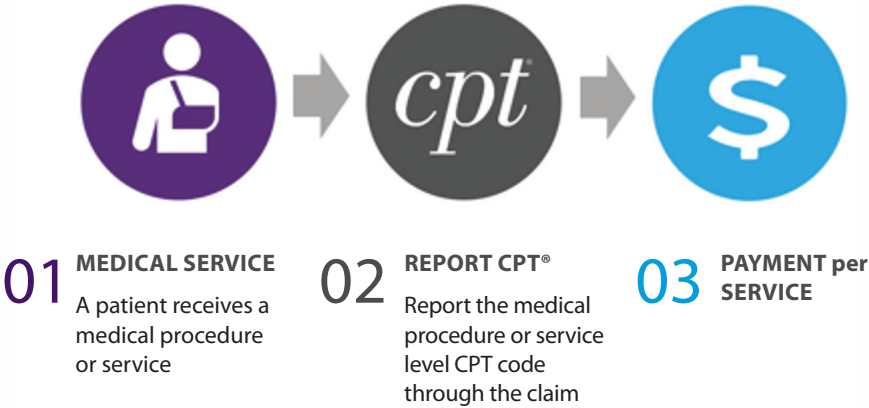
- Medical Code Set Terminology Standard
- Quality Measures
- Alternative Payment Models
- Research

How CPT Enables Value-Based Care

The role of CPT has evolved as payment models have progressed.

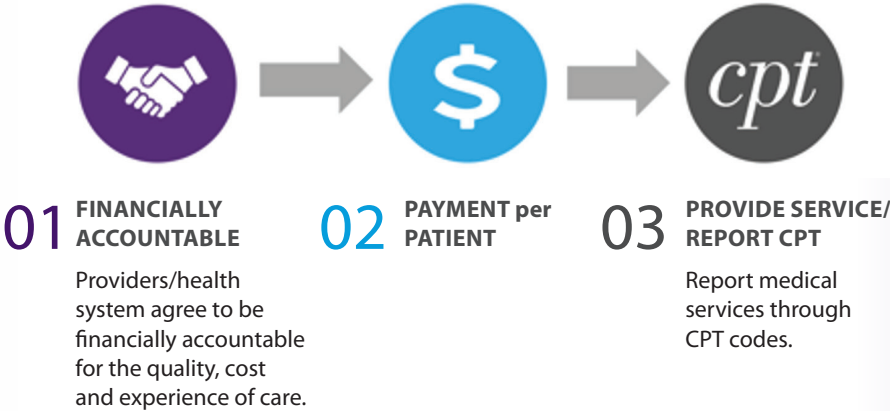
Fee-for-Service Model

Physician or QHP provides a service and uses CPT to report and describe that service for billing purposes. A payment is made based on a national fee schedule.



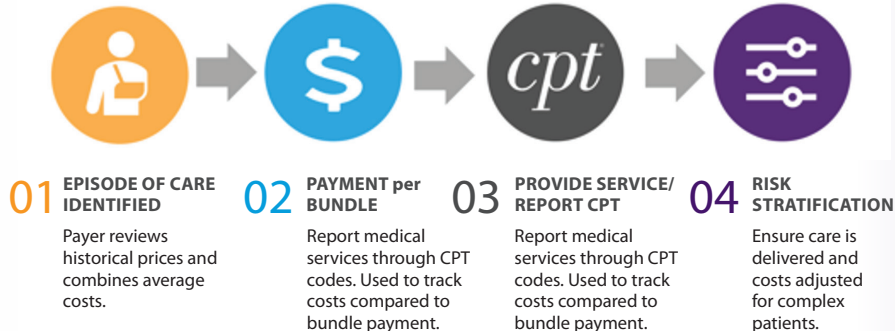
Capitation Model

Physician or QHP agrees to be financially accountable for the quality, cost, and patient patient experience of care. They report and describe services and are rewarded for lower costs.



Bundled Payment Model

Bundled payments are single payments that cover an entire episode of care. Payments are contingent on outcomes and allow providers to improve efficiency.




CPT Is the Key to Improvement

Not only is it critical to report services, but it is also important to compare those services to identify cost and quality improvements looking at past, present and even projected future services. The foundation for describing those services and facilitating that comparison is the consistent nomenclature that is CPT. CPT codes track billing and costs, both retrospectively and prospectively.

Using CPT as syntax to enable prospective growth, prospective success, and comparison between the future, present and past, we can also advance health equity.

How the CPT Editorial Panel Facilitates Value-Based Care

As new and novel technologies are incorporated into daily practice and patient care, the quality of care will continue to improve, which contributes to value-based care. In particular, digital medicine plays a key role in adding value through innovations such as remote monitoring of patient physiologic data. Other emerging technologies can be tracked and evaluated before they are performed more widely through the CPT Category III codes.



Take a deeper dive:
Watch the CPT Webinar,
“Value-based Care and the
CPT Code Set.”