

Better is Possible: ACP's New Vision for the U.S. Health Care System

What is ACP's New Vision for the U.S. Health Care System?

Better Is Possible: The American College of Physicians Vision for the U.S. Health Care System offers a comprehensive, interconnected set of policies to guide the way to a better U.S. health care system for all. Four papers make up the New Vision:

- [A Call to Action from ACP](#)
- [Coverage and Cost of Care](#)
- [Reducing Barriers to Care and Addressing Social Determinants of Health](#)
- [Health Care Delivery and Payment System Reform](#)

Why does the U.S. need a better health care system?

ACP's [review](#) of the evidence, and the experiences of its internal medicine physician members, leads us to conclude that U.S. health care:

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| ➤ Costs too much | ➤ Undervalues primary care/public health | ➤ Fails to invest & support public health approaches to reduce preventable injuries, deaths, diseases, and suffering |
| ➤ Leaves too many behind without affordable coverage | ➤ Spends too much on administration at the expense of patient care | ➤ Fosters barriers to care for & discrimination against vulnerable individuals. |
| ➤ Creates incentives that are misaligned with patients' interests | | |

ACP [envisions](#) a health care system where:

- Everyone has coverage for and access to the care they need, at a cost they and the country can afford.
- Social factors that contribute to poor and inequitable health are ameliorated; barriers to care for vulnerable populations are overcome; and no person is discriminated against based on characteristics of personal identity.
- Payment and delivery systems put the interests of patients first, by supporting physicians and their care teams in delivering high-value and patient-centered care.
- Spending is redirected from unnecessary administrative costs to funding coverage and research, public health, and interventions to address social determinants of health.
- Clinicians and hospitals deliver high-value and evidence-based care within available resources, as determined through a process that prioritizes and allocates funding and resources.
- Primary care is supported with a greater investment of resources; payment levels between complex cognitive care and procedural care are equitable; and payment systems support the value that internal medicine specialists offer to patients.
- Incentives are aligned to achieve better patient outcomes, lower costs, and reduce inequities.
- Patients and physicians are freed of inefficient administrative and billing tasks, documentation requirements are simplified, payments and charges are transparent and predictable, and delivery systems are redesigned to make it easier for patients to navigate and receive care.
- Value-based payment programs incentivize collaboration among clinical care team-based members and use only appropriately attributed, evidence-based, and patient-centered measures.
- Health information technologies enhance the patient-physician relationship, facilitate communication across the care continuum, and support improvements in patient care.

What does ACP recommend to achieve a better health care system?

Ensure Coverage for All: ACP recommends transitioning to a system that achieves affordable coverage for all with lower administrative costs, either through a publicly-funded and administered program that covers everyone, sometimes called a single payer model, or through a public choice model giving everyone a choice of enrolling in either a public plan or private insurance that meets federal benefit standards.

- Both approaches have advantages and disadvantages but could ensure that everyone has coverage for the care they need, regardless of where they live, their employment, their health status, or income.
- Both could result in administrative savings and reduced burdens on physicians and patients.
- ACP does not endorse candidates for office, or the specific plans or bills offered by the candidates. ACP hopes to inform the debate by pointing the way to better health care.

Lower Costs and Make Care Affordable: ACP proposes that costs be controlled by:

- Eliminating deductible, co-pays for high value care and for patients with chronic illnesses
- Lowering excessive prices and increasing price transparency
- Increasing adoption of global budgets and all-payer rate setting
- Reducing administrative costs
- Promoting high-value care
- Incorporating comparative effectiveness into guidelines and coverage.
- Investing in primary care

Improve Health Care Delivery and Payment: ACP proposes that incentives be aligned with what's best for patients by:

- Increasing payments for primary and cognitive care services
- Redefining the role of performance measures to focus on value to patients
- Eliminating "check-the-box" reporting of measures
- Aligning payment incentives with better outcomes and lower costs
- Eliminating unnecessary or inefficient administrative requirements
- Redesigning health information technology to better meet the needs of clinicians, patients

Reduce Barriers to Care and Improve Public Health: ACP believes that all persons, without regard to personal characteristics, must have equitable access to high quality health care and not be discriminated against. Social and economic factors affecting outcomes must be understood and ameliorated. ACP calls for increased efforts to address injuries and deaths from firearms, environmental hazards and climate change, maternal mortality, substance use disorders, and the health risks associated with nicotine, tobacco use, and electronic nicotine delivery systems.

Visit www.acponline.org/new-vision for details about ACP's New Vision for the U.S. Health Care System

