2021 Risk-Based Healthcare Market Trends

A Guidehouse Center for Health Economics analysis of an executive survey conducted by the Healthcare Financial Management Association (HFMA)

What line of business is your organization planning to advance into upside/downside risk-based arrangements?

- Medicare
- Managed Medicaid
- Employer
- Local
- Other

0 10 20 30 40 50 60 70

Nearly half of health system leaders are unsure they will meet budget in 2021.

Good chance we will meet budget.

Moderate.

Good.

Excellent.

Very high probability we will meet budget.

No chance we will meet budget.

May or may not meet budget.

Little chance we will meet budget.

High probability we will meet budget.

What is your top external challenge with increasing levels of risk/capitation/joint venture arrangements?

- Difficulty in achieving scale
- Building capabilities
- Lack of collaborative relationships
- Difficulty in achieving transparency
- Sourcing capabilities

0 12% 33% 25% 16% 30%

Strategic partnerships with payers are the top external challenge for health systems.

What is your top internal challenge with increasing levels of risk/capitation/joint venture arrangements?

- Building capabilities
- Organizational commitment
- Operationalizing and implementing risk-based models
- Executive buy-in
- Professional capabilities

0 23% 35% 25% 16% 12%

What is your top challenge with introducing a new payer/provider arrangement?

- Building capabilities
- Organizational commitment
- Operationalizing and implementing risk-based models
- Executive buy-in
- Professional capabilities

0 23% 35% 25% 16% 12%

What is your top concern with introducing a new payer/provider arrangement?

- Building capabilities
- Organizational commitment
- Operationalizing and implementing risk-based models
- Executive buy-in
- Professional capabilities

0 23% 35% 25% 16% 12%

What is your top concern with building a disruptive payer/provider arrangement?

- Building capabilities
- Organizational commitment
- Operationalizing and implementing risk-based models
- Executive buy-in
- Professional capabilities

0 23% 35% 25% 16% 12%

What is your top concern with introducing a specialty-specific "payvider" model success (select all)?

- Building capabilities
- Organizational commitment
- Building infrastructure
- Executive buy-in
- Professional capabilities

0 23% 35% 25% 16% 12%

"Payvider" (e.g. Oak Street Health) and Vertically integrated health plans (e.g. UnitedHealth Group) are most disruptive.

Which single market disruptor is creating the greatest barrier to success?

- "Payvider" (e.g. Oak Street Health)
- Vertically integrated health plans (e.g. UnitedHealth Group)
- Specialty-specific "payviders"
- Other

0 51% 52% 16% 12%

Sourcing capabilities
Legal/trust
Price
Size
Inefficiency
Cost
Cost
Inefficiency
Size

Disruptors:
Amazon, Apple, Walmart

Year-over-year change in respondent organization's change in interest in Medicare Advantage.

0 40 50 60 70
0 10 20 30 40 50

Interest in Medicare Advantage has increased by 14% when compared to a June 2019 Guidehouse/HFMA analysis.