



## Press Release

# Op-Ed: Challenges in Moving from Volume to Value

ANDREW EVANS | AUGUST 28, 2018

In today's Morning Consult, AAF President Douglas Holtz-Eakin and Ken Thorpe of Emory University discuss the barriers to moving the U.S. health care system toward value-based pricing. The U.S. system has long paid for health care services based simply on their volume, and while the industry is moving toward value-based payment models, several legal barriers remain that policymakers should address.

An excerpt:

Medicare is the 800-pound gorilla. As Medicare goes, so goes the rest of the system, and Medicare has yet to fully embrace this change [from volume to value], even though it has been a stated goal of the Centers for Medicare and Medicaid Services and the Department of Health and Human Services for over a decade. A new payment system — [MACRA](#) — is not enough because it relies on voluntary participation.

One of the [biggest obstacles](#) has been policies that push in the other direction — namely the [Stark and anti-kickback](#) laws. These laws support a world where fee-for-service was the norm and served the noble purpose of deterring and preventing fraud and theft. But the laws act to restrain new value-based care models and have not been modernized to reflect a volume-to-value system. We believe these laws must be modernized to support the volume-to-value transition, while preserving their original intent.

Read the op-ed [here](#).