



For the entire health care ecosystem

Win Physician Buy-In for Value-Based Care

Learn four principles to land your value-based care messaging with physicians

Published - March 2021 • 10-min read

Overview

Fresh off sharp declines in fee-for-service volumes last year, many clinical executives we work with are revisiting their value-based care strategy. Whether their organization is new to risk or an early adopter, we've been urging these executives to think practically about what these changes in the financing model mean for frontline clinicians.

Physicians often experience value-based care as one-off changes in their clinical practice: another measure to code, a new care team member to work with, a different tool in the EHR. Truthfully, this is the same way that physicians see other strategic priorities manifest in their day-to-day. They encounter the operational changes first, disconnected from the larger strategy and “why.”

To guard against change fatigue, executives have waited to fully bring in physicians until after transforming financial and clinical models. And it's easy for physician buy-in to become an afterthought when doing the heavy lifting to get your organization ready for risk.

But one of your most important steps as an executive (and also one of the hardest) is to communicate, overcommunicate, and communicate again until *every physician* can tell you *why* your organization is taking on risk—and their role in helping move that strategy forward.

Four principles to cement physician buy-in

Below, we've outlined four principles that every executive should incorporate into their physician buy-in strategy. While they may sound simple, they take time and energy to do well, and importantly, are iterative. Even the advanced organizations we work with regularly reground in these fundamentals. Leaders should expect to return to these principles again and again over the course of their organization's transition to risk.

1. Don't sell risk as a "shiny new object."

There are many passing fads in health care (remember kiosks?). Don't let physicians think that value-based care is one of them. Instead, give it permanence, and differentiate risk from other market forces that may come and go. In your messaging, frame value-based care as foundational to the practice of medicine—not a drastic departure from care delivery today.

As one [physician leader from ChenMed](#) put it: "Value-based payment models are based on well care for patients: better everyday health and fewer hospital visits." We don't think any physician would disagree with that statement or feel like it's that different from how they care for patients today. (And [as we've discussed previously](#), ChenMed's model is becoming an increasingly compelling one for physicians.)

2. Connect value-based care to existing priorities.

It's easy to feel like risk is another thing we're saying is a strategic priority. But value-based care is often interconnected with other organizational goals like telehealth, team-based care, access, patient experience, and more.

Look for synergies across these initiatives and set a patient-centric vision that explicitly connects them. Not only does this minimize whiplash among physicians, but it also reduces redundancy and streamlines the operational work involved. Now is an important moment to make risk a tenet of your organization's vision for patient care rather than a standalone initiative.

Four principles to cement physician buy-in (cont.)

3. Talk about their day-to-day—not yours.

For executives, taking on risk means changes to payment models, clinical investments, and market strategy. But those things don't motivate frontline clinicians. While it's important that physicians are literate in these topics, a 101-overview is enough.

Focus instead on what value-based care means for their day-to-day and show them why it will be better for their practice and patients. In most cases, physicians just want to know how risk will change the way they care for patients and get paid for it. Rather than the 30,000-foot view on risk, give them the 30-foot one.

4. Use risk to advance clinician engagement too.

We know from our engagement research that physicians want insight into organizational strategy and to help advance it themselves. Involving physicians early on in your value-based care journey can be a powerful opportunity to boost employee and leader engagement. Balance one-way clinician-specific updates with opportunities for physicians to get scrubbed in and inform your organization's approach.

While it can be tempting to wait until you've finished the ship to bring physicians along, asking them to help you build it with early and frequent feedback is one of the best ways to improve engagement. Show your work early, often, and yes—ugly.

Project Director

Eliza Dailey

CampbelE@advisory.com

LEGAL CAVEAT

Advisory Board has made efforts to verify the accuracy of the information it provides to members. This report relies on data obtained from many sources, however, and Advisory Board cannot guarantee the accuracy of the information provided or any analysis based thereon. In addition, Advisory Board is not in the business of giving legal, medical, accounting, or other professional advice, and its reports should not be construed as professional advice. In particular, members should not rely on any legal commentary in this report as a basis for action, or assume that any tactics described herein would be permitted by applicable law or appropriate for a given member's situation. Members are advised to consult with appropriate professionals concerning legal, medical, tax, or accounting issues, before implementing any of these tactics. Neither Advisory Board nor its officers, directors, trustees, employees, and agents shall be liable for any claims, liabilities, or expenses relating to (a) any errors or omissions in this report, whether caused by Advisory Board or any of its employees or agents, or sources or other third parties, (b) any recommendation or graded ranking by Advisory Board, or (c) failure of member and its employees and agents to abide by the terms set forth herein.

Advisory Board and the "A" logo are registered trademarks of The Advisory Board Company in the United States and other countries. Members are not permitted to use these trademarks, or any other trademark, product name, service name, trade name, and logo of Advisory Board without prior written consent of Advisory Board. All other trademarks, product names, service names, trade names, and logos used within these pages are the property of their respective holders. Use of other company trademarks, product names, service names, trade names, and logos or images of the same does not necessarily constitute (a) an endorsement by such company of Advisory Board and its products and services, or (b) an endorsement of the company or its products or services by Advisory Board. Advisory Board is not affiliated with any such company.

IMPORTANT: Please read the following.

Advisory Board has prepared this report for the exclusive use of its members. Each member acknowledges and agrees that this report and the information contained herein (collectively, the "Report") are confidential and proprietary to Advisory Board. By accepting delivery of this Report, each member agrees to abide by the terms as stated herein, including the following:

1. Advisory Board owns all right, title, and interest in and to this Report. Except as stated herein, no right, license, permission, or interest of any kind in this Report is intended to be given, transferred to, or acquired by a member. Each member is authorized to use this Report only to the extent expressly authorized herein.
2. Each member shall not sell, license, republish, or post online or otherwise this Report, in part or in whole. Each member shall not disseminate or permit the use of, and shall take reasonable precautions to prevent such dissemination or use of, this Report by (a) any of its employees and agents (except as stated below), or (b) any third party.
3. Each member may make this Report available solely to those of its employees and agents who (a) are registered for the workshop or membership program of which this Report is a part, (b) require access to this Report in order to learn from the information described herein, and (c) agree not to disclose this Report to other employees or agents or any third party. Each member shall use, and shall ensure that its employees and agents use, this Report for its internal use only. Each member may make a limited number of copies, solely as adequate for use by its employees and agents in accordance with the terms herein.
4. Each member shall not remove from this Report any confidential markings, copyright notices, and/or other similar indicia herein.
5. Each member is responsible for any breach of its obligations as stated herein by any of its employees or agents.
6. If a member is unwilling to abide by any of the foregoing obligations, then such member shall promptly return this Report and all copies thereof to Advisory Board.

Physician executives play a critical role in leading efforts to decrease costs, increase capacity, and improve quality. And they do this all while facing a host of stall points and bandwidth challenges that can stand between strategy and measurable impact.

HOW WE HELP

We partner with physicians across the continuum

We provide tactical guidance and implementation support to our physician executive members. Through our unique research model backed by 40+ years in the health care industry, we develop strategies and case examples to help physician executives advance their organization's cost and quality priorities, as well as drive engagement and align the physician enterprise. We work with physician executives in two main ways:



Prioritize tactics to tackle system-wide priorities



Mobilize physicians to drive lasting impact

 **To learn more** visit advisory.com/memberships or contact programinquiries@advisory.com.

The Advisory Board advantage

Our team of 200+ experts harnesses a time-tested research process and the collective wisdom of our 4,500+ member network to develop provocative insights, actionable strategies, and practical tools to support execution. We support hospital and health system leaders, as well as executives of medical groups, post-acute care organizations, life sciences firms, digital health companies, health plans, and health care professional services firms.



655 New York Avenue NW, Washington DC 20001
202-266-5600 | [advisory.com](https://www.advisory.com)