

Value-Based Care Market to Reach US\$ 7.3 Billion by 2027 Globally | CAGR: 20.3%

The Global Value-Based Care Market was valued at 2.03 billion in 2020 and is expected to grow at a CAGR of 20.3% by 2027.

NOIDA, INDIA, January 31, 2022 /EINPresswire.com/ -- A comprehensive overview of the [value-based care market](#) is recently added by UnivDatos Market Insights to its humongous database. The value-based care market report has been aggregated by collecting informative data of various dynamics such as market drivers, restraints, and opportunities. This innovative report makes use of several analyses to get a closer outlook on the value-based care market. The value-based care market report offers a detailed analysis of the latest industry developments and trending factors in the market that are influencing market growth. Furthermore, this statistical market research repository examines and estimates the value-based care market at the global and regional levels. The Global Value-Based Care Market was valued at 2.03 billion in 2020 and is expected to grow at a CAGR of 20.3% by 2027.

Market Overview

Value-Based Care is a type of payment model that rewards providers for delivering high-quality care at reduced prices. Value-Based Care serves at the front for piloting the future of healthcare across the world. It shows a significant bend in the cost curve as the payers are finding a positive impact of value-based care on scaling up the payment models for the care of patients. As per the Health Payer Intelligence survey 2018, nearly 80% of payers stated improvements in care quality from providers in obtaining value-based settlements. Besides, 64% of payers stated enhancements in provider relationships and 73% of payers stated that patient engagement with beneficiaries improved by using value-based care. In this way, healthcare operation is changing by the adoption of value-based care and upsurging its market.

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Value-Based Care payment models aim to reduce spending while improving healthcare quality and outcomes. In value-based care models, healthcare providers are paid based on healthcare outcomes delivered to the patients, rather than just for services provided. In 2020, According to a healthcare firm "Humana", 67% of individual Medicare Advantage members were cared for by primary care providers with value-based arrangements and gained better outcomes. Also, in October 2020, there were around 85% of "Cigna's" Medicare Advantage network physicians, who

were working in value-based payment arrangements.

COVID-19 Impact

COVID-19 threw an unpredicted wrinkle into value-based care contracts. The initial concerns of VBC providers were, COVID-19 might spoil the claims of contractors, mainly due to Medicare's efforts to work with providers taking downside risk. But COVID-19 only underlined providers to diversify by enhancing fee-for-service (FFS) income with VBC revenue streams. After that, the patient numbers and FFS payments dried up the provider performance data, show that savings per case in bundled payment programs remained high and capitated payments constant. According to Medical Economics, Before the pandemic less than 20% of Medicare spending was in VBC contracts, further CMS wants it to move 100% of Medicare providers into two-sided risk arrangements by 2025. Likewise, CMS wants half of its Medicaid and commercial contracts in VBC models by 2025 and most commercial payers were following their lead. Also, even if Medicare fails to reach 100% participation by 2025, the momentum shift is clear and the VBC is moving ahead.

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Global Value-Based Care Market report is studied thoroughly with several aspects that would help stakeholders in making their decisions more curated.

By Models, the market is primarily bifurcated into

- Accountable Care Organization (ACO)
- Patient-Centered Medical Home (PCMH)
- Pay for Performance (P4P)
- Bundled Payments

The Accountable Care Organization (ACO) segment generated the highest revenue in 2020. The market is expected to grow at a significant rate during the forecast period as they provide high-quality care to the patients and managed to reduce the cost of care.

By Deployment, the market is primarily segmented into

- Cloud-Based
- On-Premises

Amongst Deployment, the Cloud-Based segment dominated the market in 2020. Collaboration between doctors, departments, and even institutions is critical as healthcare organizations move toward value-based care models. Medical professionals can share data via a cloud computing server, enhancing collaboration and resulting in improved treatment.

By Platform, the market is primarily bifurcated into

- Standalone

- Integrated

The Integrated Platform segment accounted for the major revenue portion in 2020. The segment is anticipated to observe significant growth in the upcoming years. Integrated health care, often referred to as interprofessional health care, is an approach characterized by a high degree of collaboration and communication among health professionals. Integrated health care is unique in the sharing of information among team members related to patient care and the establishment of a comprehensive treatment plan to address the biological, psychological, and social needs of the patient, owing to these benefits integrated platform is high in demand.

By End-User, the market is primarily bifurcated into

- Providers
- Payers
- Patients

The Providers segment is anticipated to observe lucrative growth. Today, physicians increasingly recognize their role in improving the affordability of care. There is a large increase in the proportion of physicians who favors a prominent role in limiting the use of unnecessary treatments and tests: 76% in 2020 vs. 57% in 2014.

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Value-Based Care Market Geographical Segmentation Includes:

- North America (the United States, Canada, and Rest of North America)
- Europe (Germany, United Kingdom, Italy, France, Spain, and Rest of Europe)
- Asia-Pacific (China, Japan, India, Australia, and Rest of Asia-Pacific)
- Rest of the World

Based on the estimation, North America constitutes a major market for the Value-Based Care industry and generated maximum revenue in 2020. In 2020, as in 2018, almost all physicians (97%) relied on FFS and/or salary for their compensation and 36% also drew compensation from value-based payments.

The major players targeting the market includes

- Siemens Healthineers
- Nextstep Solutions
- Athena Health
- XGN Management, LLC
- McKesson Corporation
- Optum
- Oliver Wyman
- Baker Tilly

- Aetna
- Blue Cross Blue Shield Association

Competitive Landscape

The degree of competition among prominent global companies has been elaborated by analyzing several leading key players operating worldwide. The specialist team of research analysts sheds light on various traits such as global market competition, market share, most recent industry advancements, innovative product launches, partnerships, mergers, or acquisitions by leading companies in the Value-Based Care market. The major players have been analyzed by using research methodologies for getting insight views on global competition.

For more informative information, please visit us @ <https://univdatos.com/report/value-based-care-market/>

Key questions resolved through this analytical market research report include:

- What are the latest trends, new patterns, and technological advancements in the Value-Based Care Market?
- Which factors are influencing the Value-Based Care Market over the forecast period?
- What are the global challenges, threats, and risks in the Value-Based Care Market?
- Which factors are propelling and restraining the Value-Based Care Market?
- What are the demanding global regions of the Value-Based Care Market?
- What will be the global market size in the upcoming years?
- What are the crucial market acquisition strategies and policies applied by global companies?
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