

The Effect of Value Based Payment On Patient Outcomes: A Systematic Review

Gökçen Özler¹ * Gülbiye Yenimahalleli Yaşar²¹ Re. Asst., Ankara University Faculty of Health Sciences, Department of Health Management² Prof. Dr., Ankara University Faculty of Health Sciences, Department of Health Management

ARTICLE INFO	ABSTRACT
<p>Article Type: Research Article</p> <p>Keywords: Reimbursement, Health outcomes, Outcome-based payment models, Payment models in healthcare</p> <p>Corresponding Author(s) ¹ Gökçen Özler ² Gülbiye Yenimahalleli Yaşar</p> <p>Adress: ¹ Ankara University Faculty of Health Sciences, Department of Health Management ² Ankara University Faculty of Health Sciences, Department of Health Managment</p> <p>E-mail: ¹ gozler@ankara. edu.tr ² gulbiyey@gmail. com</p>	<p><i>Value-based payment aligns financial incentives with value, not volume. It is an outcome-based payment method using many different indicators such as recovery time, quality of life, patient satisfaction. Discussions continue about the impact of different reimbursement models on hospital performance and quality of care. This study aims to analyze the effect of value-based payment on patient outcomes through a systematic review. The study was conducted under the PRISMA protocol. Searches were carried out in Web of Science, Scopus, Pubmed and Science Direct electronic databases between March and April 2023. Combinations of keywords were used for searching. Based on inclusion and exclusion criteria, 16 studies were included in the review. The critical appraisal of the included studies was made with the "JBI Critical Appraisal Checklist" published by the Joanna Briggs Institute. 87.6% of the studies reviewed in the systematic review were conducted in the United States. It was found that value-based payment in health care is associated with improvements in health outcomes such as quality and cost outcomes in child health; infection rate-medicine compliance in intestinal inflammation; medicine compliance in bowel disease; 30-day mortality rates, readmission rates in acute myocardial infarction, heart failure, and pneumonia; emergency room visits and survival in lung cancer; disability index-readmission rates in back pain. Additionally, some studies found no effect such as acute myocardial infarction, heart failure, and pneumonia in mortality rates; participation in treatment in substance use; disability index in spine surgery, reduction in infection rates in catheter-related urinary tract infection-colon surgery, and discharge to the community in joint surgery. As a result of the systematic review, it is understood that although the value-based payment method has many arguments that seem advantageous, the evidence that it makes a difference in patient outcomes is not satisfactory and sufficient. More research on different health problems is needed to better understand value-based payment experiences, the components of success, and the relationship of these models to patient outcomes in various population groups and settings.</i></p>