



Community Leaders for Value-Driven Health Care

I. What is a Community Leader for Value-Driven Health Care?

A Community Leader for Value-Driven Health Care is a multi-participant organization that is working to achieve the four cornerstones of Value-Driven Health Care: interoperable health information technology (health IT); transparency of price information; transparency of quality information; and the use of incentives to promote high-quality and cost-efficient health care. A Community Leader also should embody the following characteristics or have the capacity to develop these characteristics:


- Multi-stakeholder participation and collaboration among participants (health care providers, health plans, employers and consumers) within a community
- Support or participation by leading business, civic and health care organizations
- Ability to convene interested stakeholders within a community
- Non-profit status
- Plan for financial sustainability
- Organized governance structure with leadership committee
- Access to relevant expertise
- Capacity and willingness to share knowledge and best practices with other Community Leaders
- Capacity to evaluate efforts of the organization to make progress toward objectives
- Capacity to use or promote the use of interoperable health information technology
- Capacity to facilitate the collection and/or use of provider performance measurement, including the use of consensus-based, nationally recognized measures of quality and cost or price
- Capacity to use or promote the use of provider performance measurement to inform consumer health care decision-making
- Capacity to use or promote the use of provider performance measurement to reward and foster provider improvement
- Willingness to make provider performance measurement results available to providers and consumers
- Capacity to use or promote the use of incentives for consumer engagement and provider improvement

II. Why is the Secretary recognizing Community Leaders for Value-Driven Health Care?

As part of the Secretary's Value-Driven Health Care initiative, the Secretary will recognize multi-participant organizations that support the four cornerstones of Value-Driven Health Care. Regional public-private collaboration is essential to the success of this initiative. At its core, health care is local. It is provided in a diverse range of environments that differ in their history, resources, populations served, market characteristics, and medical cultures. Because of this diversity, the most effective steps to achieving lasting improvements in health care require a critical mass of support from community stakeholders – including health care providers, consumers, payers and purchasers – investing their time and resources toward shared, meaningful, actionable goals.

Numerous collaboratives are already under way across the country. The relationships formed in these collaboratives provide the foundation for employers, health insurance plans, providers, and consumers to work together to improve health care. The Secretary would





like to recognize these existing efforts and encourage the further development of these collaboratives, and promote the proliferation of more collaboratives across the country to create a value-driven health care network.

III. What are the benefits of being recognized as a Community Leader for Value-Driven Health Care?

Being recognized by the Secretary as a Community Leader for Value-Driven Health Care will support an organization's work toward achieving the four cornerstones. Specifically, this recognition can provide credibility and official approval that can be helpful to an organization in developing new relationships, adding new members, working with state and local government leaders, and driving more impact at the community level. Recognition as a Community Leader also signifies that, if it so chooses, the organization is working toward eligibility for further formal recognition. This additional formal recognition can lead to participation in a learning network of other collaboratives to learn and share best practices as well as the potential opportunity to obtain provider performance scores that are based on aggregated multi-payer data including Medicare data. Please note that eligibility for the learning network and access to Medicare-inclusive provider performance measurement results, while dependent upon first receiving Community Leader recognition, will be determined through separate processes set forth by [Agency for Healthcare Research and Quality](#) and the [Centers for Medicaid and Medicare Services](#).

IV. How does our organization request Secretarial recognition as a Community Leader?

The Department of Health and Human Services will soon be accepting requests for recognition from interested organizations. In the meantime, interested organizations should consider the extent to which they embody the characteristics set forth in Section I. When the request process is in place, notice will be provided on the Value-Driven Health Care Web site and through other means.

Additional questions on this process may be directed to:

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