# "VALUE-BASED HEALTHCARE" INITIATIVE IS LIKE A MARATHON, NOT A SPRINT: ACHIEVEMENTS AND CHALLENGES IN BRAZIL

Pereira da Veiga CR<sup>1</sup>, Saliba Y<sup>1</sup>, Abicalaffe CL<sup>2,3</sup>, Rocha F<sup>3</sup>, Damázio LF<sup>4</sup>, Da Veiga C<sup>4</sup>

#### **OBJECTIVES:**

Value-based healthcare (VBHC) has been discussed globally as a potential solution to high costs and uneven quality of care in healthcare systems. This study carried out a systematic literature review (SLR) on the advances and challenges of the theme in Brazil.

# **METHODS:**

Two keywords were used in the search: variations of the term "VBHC" and variations of the word "Brazil". The research was carried out on the title, abstract, and keywords in six databases in December 2022. The integrative SLR classified the works according to four elements: (i) the exploration of the VBHC concept, (ii) the VBHC sub-strategies, (iii) the implementation stage according to the Teisberg framework (Figure 1), and (iv) the challenges for VBHC in Brazil.



Figure 1: Strategic framework for value-based health care implementation to achieve better patient outcomes.4

### **RESULTS:**

Teisberg.

The search returned 228 papers (Table 1), but the research continued with 23 studies after removing duplicate documents. Only 40% of the works defined VBHC using Porter's concepts. Most works showed that the increase in health costs represents the main reason for the growing discussions about VBHC, with two substrategies prevailing: "move to bundle payments" (40%) and "measure outcomes and/or cost for every patient" (35%). The implementation stage of VBHC initiatives varies between institutions. Most are in an intermediate stage, involving measures of health outcomes and cost (26%), although the studies do not cite compliance with the previous stages proposed by

DATABASE	No.
Scopus	44
Lilacs	35
Science Direct	50
Web of Science	44
Pubmed	41
Google Scholar	14
TOTAL	228

Table 1: Databases and number of papers in the SLR

The main challenges for VBHC initiatives in Brazil are related to human (35%) and procedural (38%) barriers, involving the need to engage multistakeholders and overcoming the limits imposed by processes that prevent a change in the current payment model.

## **CONCLUSIONS:**

Brazil has shown constant advances in the VBHC theme as in a marathon. Despite the achievements in recent years, there are still many challenges for the Brazilian health system to reach the final stretch of this marathon and enjoy all the benefits provided by VBHC.

#### REFERENCES:

- (1) Moher, D. et al. Preferred reporting items for systematic reviews and meta-analyses: the PRISMA statement. Annals of Internal Medicine, 2009;151(4):264-269.
- (2) Paul, J., Lim, W. M., O'Cass, A. et al. Scientific procedures and rationales for systematic literature reviews (SPAR-4-SLR). Int J Consum Stud. 2021;45:01-016.
- (3) Porter, M. E. What is value in health care? N Engl J Med, 2010;363:2477-2481.
- (4) Teisberg, E.; Wallace, S.; O'Hara, S. Defining and Implementing Value-Based Health Care: A Strategic Framework. Acad Med. 2020;95(5):682-685.



Contact

C. P. Veiga E-mail: claudimar.veiga@fdc.org.br. Website:

Fone +55 31 35897200

<sup>1</sup>Department of Health Management, School of Nursing, Federal University of Minas Gerais - UFMG, 190 Alfredo Balena, Belo Horizonte (MG), 30130-100, Brazil; <sup>2</sup>2iM Inteligência Médica - https://2im.com.br;

<sup>3</sup> IBRAVS – Instituto Brasileiro de Valor em Saúde - shttps://ibravs.org;

