Insurers are rapidly shifting to new payment models focused on cost reduction. In 2010, 46 percent of respondents’ beneficiaries were involved in pay-for-performance and risk-sharing programs. That figure was 62 percent in 2013 and expected to rise to 75 percent by 2016.

These new payment models can put pressure on providers to cut costs, even at the expense of quality.

New pay-for-performance and risk-sharing payment methods may incentivize physicians to abandon their role as advocates of patient access to new technologies.

The bar for new medical technology adoption is being raised.

Respondents’ expectations for technology assessment process:

- In the next three years there will be a higher evidence requirement for approval of new technology
- We have become more selective in the past three years in terms of approving new technologies

44%  44%  56%

“Evolving Provider Payment Models and Patient Access to Innovative Medical Technology” has been accepted for publication in the Journal of Medical Economics.

New pay-for-performance and risk-sharing payment methods may incentivize physicians to abandon their role as advocates of patient access to new technologies.

The bar for new medical technology adoption is being raised.

Respondents’ expectations for technology assessment process:

- It will become more difficult for clinically appropriate but costly technologies to be approved
- In the next three years there will be a higher evidence requirement for approval of new technology
- We have become more selective in the past three years in terms of approving new technologies

44%  44%  56%

“This study highlights that patient access to innovative medical devices and diagnostics is facing a double hit because of these new payment models and tightening coverage evidence requirements. It shows the need for policies protecting patient access to innovation.”

- Stephen J. Ubl
  President and CEO of AdvaMed

This analysis shows need for policies protecting patient access to innovation.