

Valuing America's Health

Aligning Financing to Reward Better Health and Well-Being

A Special Publication of the National Academy of Medicine



Despite spending more on health care than any other nation, American life expectancy is now declining. Many factors are involved, including the catastrophic experience of the COVID-19 pandemic compounded by the opioid crisis, the growing burden of chronic disease, deaths of despair, and festering inequities along racial and socioeconomic lines. Faced with the harrowing reality of the pandemic era, it is clear that investing time, finances, and collective efforts toward creating a healthier and more resilient system is urgently needed. **But how do we, as stakeholders and leaders of health and health care systems, galvanize a broader movement to prioritize health and restructure our approaches? How do we invest in the strategies that build and protect health more equitably?**

Bridging the gap between the inefficient, ineffective, and inequitable realities of the current U.S. health system and the strategies needed to achieve better health and well-being requires a bold, disruptive, yet realistic vision for a transformed health system, reinforced by financial strategies that will sustainably resource, incentivize, and deliver health system transformation. To this end, the National Academy of Medicine (NAM) convened 13 national experts with experience across care financing and payment, equity and community engagement, and private capital markets to steward the conduct of a broad conversation on the opportunities, levers, and disruptive forces that could uproot dominant fee-for-service interests and effect a shift toward whole person, whole population health.

To ensure the United States reaches the North Star—a whole person, whole population health system—the nation must sustain the disruption of current systems with the forcefulness and urgency of the contemporary social movements of the past several decades. The imperative should not be to avert or respond to our health crisis, but to instead establish the foundation and gains that are possible:

1. Repair systemic and structural failures to ensure U.S. health status matches or exceeds that of other OECD nations.
2. Hold every stakeholder, company, and entity accountable and responsible for overall health and health equity in the nation.
3. Contain health care expenditures, with a more equitable allocation to public health systems given their core mission of health promotion and disease prevention.
4. Shepherd clear economic and cultural incentives to encourage every sector that benefits from improved health to embrace health promoting actions and investments.
5. Adopt a collaborative financing and policy-making approach, from government regulations, new legislation, and the reconceptualization of economic success, to enable change that prioritizes whole person, whole population health.
6. Enhance opportunities for individuals and communities to use their knowledge, power, and autonomy to direct decisions about health services, processes, and infrastructure that are most meaningful to them.

The Special Publication highlights elements of existing health care delivery and health financing models that have been successful in delivering, resourcing, and incentivizing whole person care, demonstrating that progress is under way. Nevertheless, the absence of the right payment infrastructure—cohesive financial reforms and policy alignment—to sustain and scale these models inherently limits our current approach. Reversing the current trajectory of declining American health will require many actions by a diverse array of stakeholders to create the right incentives and the necessary conditions to prompt every sector to change how they do business. This publication outlines stakeholder-specific priority actions to provide a useful, but not comprehensive, assessment of starting points for aligned action, acknowledging that other societal actors outside the scope of the Steering Group’s expertise, such as education and law enforcement leaders, have a role to play as well.

Download the publication at
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