



Group Medicare Insights: Member experience

A day in the life of a value-based care team

Here's a behind-the-scenes look at how physicians, office administrators, social workers, behavioral health specialists and pharmacists form the foundation for a value-based care (VBC) model.



Dr. Ella Smith, a primary care physician, treats Max, a 72-year-old retiree with type 2 diabetes. Because Dr. Smith is focused on quality care rather than patient volume, she is empowered to conduct a thorough initial assessment, including a review of Max's prescriptions, to identify any high-risk combinations of medications for people over 65. From there, Dr. Smith recommends a personalized care plan with an exercise regimen tailored to Max's physical capabilities and a diet plan to help stabilize his blood sugar levels.



85%
of VBC
patients

75%
of non-VBC
patients

saw their PCP at least
once in 2023¹



David, an office administrator, keeps Max's health journey on track by coordinating his care and driving overall healthcare effectiveness. Rather than schedule frequent in-person visits for routine checkups, David arranges telehealth alternatives for follow-up appointments. In addition to making care easily accessible and convenient, David helps Max enroll in a diabetes self-management education program, ensuring he's proactively engaged in his own treatment plan.



Chloe, a social worker, is brought on by David to address the social, economic and environmental factors that impact Max's health. Chloe knows that Max lives alone and on a retired union member's pension. She handles these social determinants of health by connecting Max with a counselor skilled in helping older adults navigate the aging process and helps Max join a local fitness center where memberships are covered by Group Medicare Advantage.

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Caleb, a behavioral health specialist, meets with Max to conduct a comprehensive assessment of his mental health. Because senior adults are at higher risk for behavioral health conditions, they decide to meet every four weeks to monitor Max's mental health and manage anxiety stemming from his diabetes diagnosis.



Olivia, a neighborhood pharmacist, conducts a thorough review of Max's medications, focusing on his diabetes management. She answers any questions Max has about possible side effects and schedules monthly check-ins to monitor his progress and make any necessary adjustments to his prescription drug protocol. More than a medicine dispenser, Olivia becomes an indispensable member of Max's care team and communicates regularly with its other members.



4%

Increase in medical adherence among diabetes patients who receive managed care from a pharmacist²



Almost **1 in 3**

say they feel depressed—a rate higher than that of the overall adult population²



\$10,329,284

Annual total healthcare cost savings for diabetes patients due to pharmacist consultations²

1. "Humana's 11th Value-Based Care Report," https://assets.humana.com/is/content/humana/2088482_CM-2024-VBC_Report_11x8.5pdf-1, last accessed May 22, 2025.

2. Renae Smith-Ray et al., "Pharmacists as Clinical Care Partners: How a Pharmacist-Led Intervention Is Associated with Improved Medication Adherence in Older Adults with Common Chronic Conditions," *Journal of Managed Care & Specialty Pharmacy* 30, no. 4, (March 2024): 345-351, accessed March 13, 2025, doi: 10.18553/jmcp.2024.30.4.345.

3. Stephanie Watson, "The Emotional Shock of Retirement," WebMD, last accessed May 22, 2025, <https://www.webmd.com/healthy-aging/features/emotional-shock-retirement>.

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