reveleer

Infographic

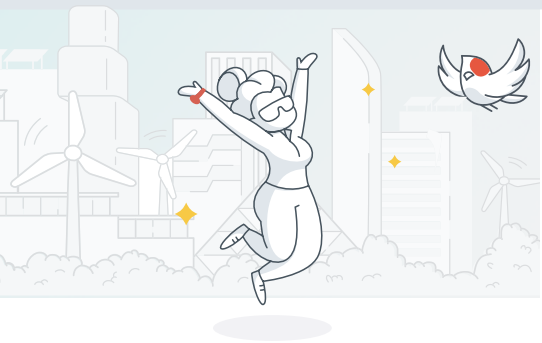
Provider Solutions

VBC Unmasked: Separating Fact from Fiction for Quality and Risk Leaders

Persistent myths often stand in the way of practical progress in value-based care. Some misconceptions even paint providers as resistant to VBC, when really, they want processes and insights that respect their time, their judgment, and their patient relationships. Dispelling outdated assumptions helps focus on what matters: relevant information, less administrative burden, and better patient outcomes.

1 Myth: "Providers resist technology in VBC."

Fact: In reality, most clinicians want tools that solve real problems, **don't disrupt patient care**, and genuinely reduce complexity. Resistance happens when platforms create more steps or uncertainty instead of fitting clinical realities.

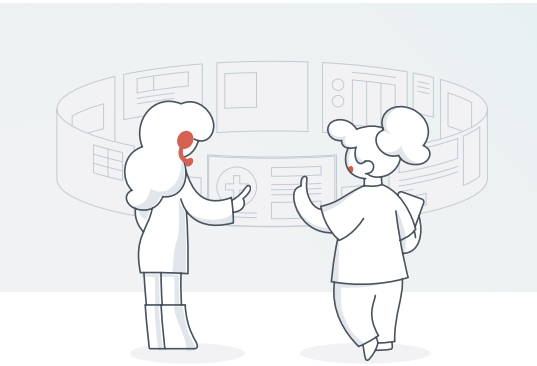


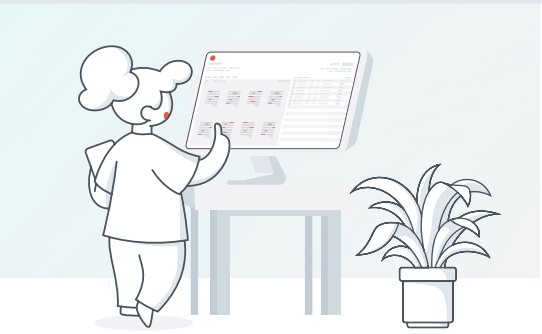
2 Myth: "All risk suspects are equally valuable."

Fact: Too often, clinicians see 'suspect' lists packed with irrelevant codes. What actually **earns trust** is surfacing only evidence-backed, encounter-relevant conditions; anything else adds noise, not value.

3 Myth: "Chart review always has to be a time sink."

Fact: Providers know the pain of reviewing piles of records for one or two missing pieces. Streamlined, **context-first workflows** make it possible to focus only on meaningful gaps and avoid hours of wasted admin time.



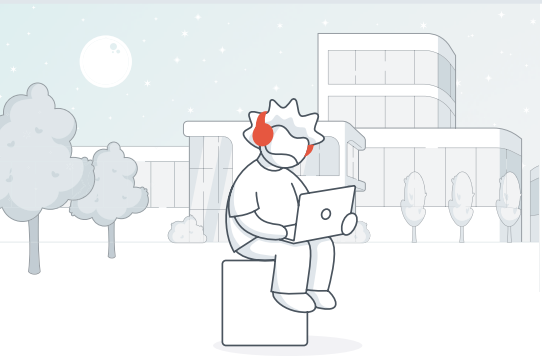


4 Myth: "Manually chasing care gaps is inevitable."

Fact: The real problem is fragmented systems and manual workarounds, not an unwillingness to improve quality. Providers need technology that **removes busywork**, not just another task list.

5 Myth: "Data from my EHR is enough."

Fact: Providers see every day how gaps in outside records, referrals, or patient history derail population health management. **Interoperability** in reality means consolidating all relevant data, not settling for what's in just one system.



6 Myth: "Value-based care means more documentation."

Fact: Many feel the pressure to document just for compliance. The best VBC workflows actually support providers by **connecting documentation compliance to patient care**, rather than turning every visit into an audit exercise.

7 Myth: "Technology closes gaps by itself."

Fact: Even the smartest platform can't close care gaps without active provider engagement, reliable data, and **workflows designed around real practice patterns**; not the other way around.

Move beyond the myths

Leave old stories behind. Facts change outcomes. Want to see practical results?
Book a Reveleer demo today and reimagine value-based care with less friction and more impact.

Get a Demo