

Where Does Each of Your Value-Based Contracts Stand Right Now?

Ten questions. Three positions. Five minutes.

Every value-based contract is in one of three positions. It will pay. It will not. Or nobody will know until the numbers settle. Two of those three need action now, and the first move is seeing which contracts sit where. Answer the ten questions below for the value-based contracts you are accountable for. Most of them have a yes, a no, or a “we would have to check.” That third answer is the one to watch. If someone on your team owns the contracts day to day, forward this and compare answers.

How to answer. Answer for your portfolio as it stands today. If the honest answer differs by contract, answer for the contract with the most money on the table.

		Yes	No	We would have to check
1	Across your value-based contracts, can you see today how each one is performing against its quality and risk incentive targets?	☐	☐	☐
2	When a contract drifts off pace, do you find out while there is still time to change the result in the same measurement year?	☐	☐	☐
3	Do your contracted providers act on the same gap list and the same score you see?	☐	☐	☐
4	At last year's reconciliation, did both sides accept the number the first time on every contract?	☐	☐	☐
5	Is the claims, enrollment, clinical, lab, and pharmacy data for your value-based population in one place, under one set of measure definitions?	☐	☐	☐
6	Are undocumented risk conditions surfaced before they lower next year's revenue?	☐	☐	☐
7	How many systems does a contracted group use to see where it stands with you?Answer Yes if it is one.	☐	☐	☐
8	Do the physicians in your network get a prioritized worklist with the whole patient in front of them, including care delivered outside their practice?	☐	☐	☐
9	Can you see avoidable cost and rising-risk members by provider group, next to the quality and risk gaps that decide whether the contract pays?	☐	☐	☐
10	Could you tell your CFO, this week, which contracts will pay and which will not?	☐	☐	☐

Count Your Answers

Three answers, three positions. The count decides where your portfolio sits today.

On Track
Eight or more Yes
You see your contracts in time to act. Any No is worth a second look before the measurement window closes.

Off Track
Three or more No
At least one contract is drifting and the people who could fix it do not have the number in front of them. That incentive is already at risk.

In the Dark
Three or more We would have to check
The costliest position: A contract that cannot be seen cannot be managed. Reconciliation will deliver the answer, too late to change it.

If you answered “we would have to check” more than twice, the next section is for you.



They See Every Contract All Year

Quality and risk performance runs against each contract's incentive targets all year, and you see which contracts are drifting while the result can still change. You find out in April, with months to act, instead of at reconciliation.



They Work From One Number

Your providers act on the same gap list and the same score you see, produced by an engine NCQA has certified for 26 consecutive years and validated for digital quality measures. One number, watched by both sides all year, means fewer disputes when the contract settles.



They Put the Gaps Where the Care Happens

Physicians and practice staff get a prioritized worklist with the whole patient in front of them, including care delivered outside the practice, and every closure flows back into the record you watch. Nothing is ripped out; it sits alongside the EHR your network already runs.

The Engine Behind the Number

This check comes from Inovalon®, whose quality and risk analytics run behind more than 70% of Medicare Advantage enrollees in 4+ star plans.¹ Inovalon's Converged Quality™ measure engine holds NCQA HEDIS® Measure Certification for the 26th consecutive year and NCQA validation for digital quality measures,² and it was named 2026 Best in KLAS for Quality Measurement and Reporting.³ Geisinger Health Plan replaced an in-house provider portal and was live on Converged Provider Enablement within six months. “Our providers are now more engaged and more involved.”⁴

1. "Inovalon Powers 70% of Medicare Advantage Enrollees in 4+ Star Plans, Continuing to Outperform National Averages in 2026 CMS Star Ratings," Inovalon, BusinessWire, October 30, 2025, businesswire.com/news/home/20251030059564/en/ 2. "Inovalon's Converged Quality Achieves 26th Consecutive NCQA HEDIS Certification and Earns NCQA Validation for Its Digital Quality Measures Engine," Inovalon, July 23, 2026, inovalon.com/news/ 3. "2026 Best in KLAS Winners: Full List (Software & Services)," HIT Consultant, February 4, 2026, hitconsultant.net 4. "How Geisinger Health Plan Enhanced Provider Trust and Engagement to Achieve Value-Based Care Excellence," Inovalon, July 25, 2025, inovalon.com/blog/ Anthony Graboski, Provider Engagement Liaison.

Pick One Contract

Pick the contract you scored “we would have to check.” In one working session, we will map it with you: where it stands against its targets today, which providers are drifting, and what the number looks like when both sides see it. You bring the contract. We bring the view.

Map One Contract With Us