



2026 | Case Study

Advancing Value-Based Kidney Care Through Risk-Aligned Partnerships

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As a leader in value-based care, with over a decade of experience, Blue Cross and Blue Shield of North Carolina (Blue Cross NC) continues to evolve its successful Advanced Kidney Care (AKC) program and grow its value-based care portfolio.

Building on its value-based care success – the launch of bundled payment arrangements in 2011 and its flagship total cost of care program (TCOC), Blue Premier, a full-risk primary care initiative designed to transform health care delivery in 2019 – Blue Cross NC launched its AKC program in 2021 to improve outcomes for patients with chronic kidney disease.

Blue Cross NC further expanded its value-based care portfolio, in 2025, by launching specialty risk arrangements in oncology, orthopedics, and gastroenterology, further advancing its commitment to high-quality, cost-effective care. Specialty program expansion was possible through the success of Blue Cross NC’s initial specialty risk program – Advanced Kidney Care (AKC).



More than
1 in 7

Americans may have Chronic Kidney Disease*

*Data from the CDC

Blue Cross NC's Advanced Kidney Care Program

Patients with advanced chronic kidney disease (CKD) and end-stage renal disease (ESRD) represent one of the highest-cost and highest-risk populations for health plans, with [annual medical expenditures](#) commonly ranging from \$80,000 to more than \$100,000 per patient. Patients with CKD stages 3B, 4, 5, and ESRD often experience fragmented care, rapid disease progression, medication complexity, and an acutely increased likelihood of avoidable hospitalizations and unplanned (“crash”) dialysis starts.

With the aim of slowing disease progression, improving quality of life, and reducing total cost of care, Blue Cross NC launched its AKC program in 2021. Through earlier intervention before kidney failure, coordination of care across providers, and addressing both clinical and non-medical drivers of health, the AKC program is delivering better health outcomes at lower cost.

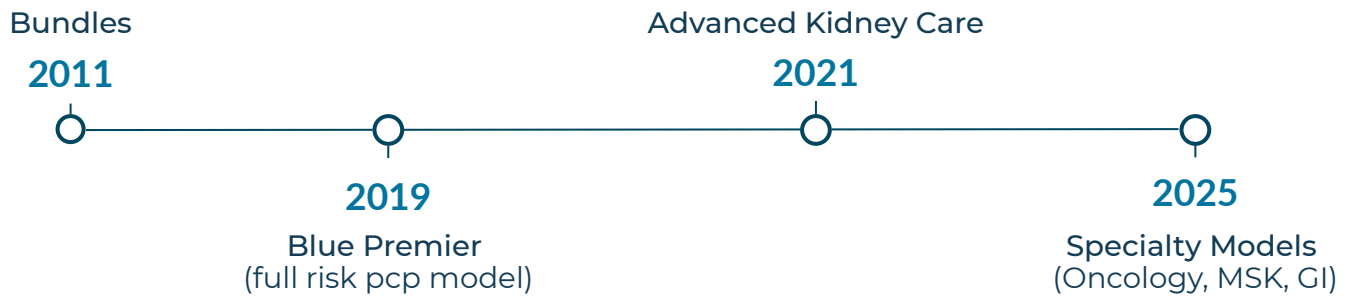
Blue Cross NC's AKC service providers function as an extension of the patient's nephrologist and broader care team – reinforcing treatment plans, supporting medication adherence, facilitating timely referrals, and closing care gaps between visits.

The Blue Cross Value team rigorously vets and selects AKC service providers who deliver kidney-focused care and comprehensive, holistic patient support. Individuals with advanced kidney disease often have multiple comorbidities requiring management and deserve a solution that meets all their needs.

Each service provider's multidisciplinary care team includes nephrologists, dietitians, cardiologists, case managers, pharmacists, nurse practitioners, and social workers. These teams collaborate with the patients' existing nephrology practices to ensure continuity of care and prevent fragmentation. To ensure care is meaningful and outcomes focused, all service provider engagements are structured as full risk-based financial arrangements.



Value-Based Care Program Launches & Strategic Partnerships

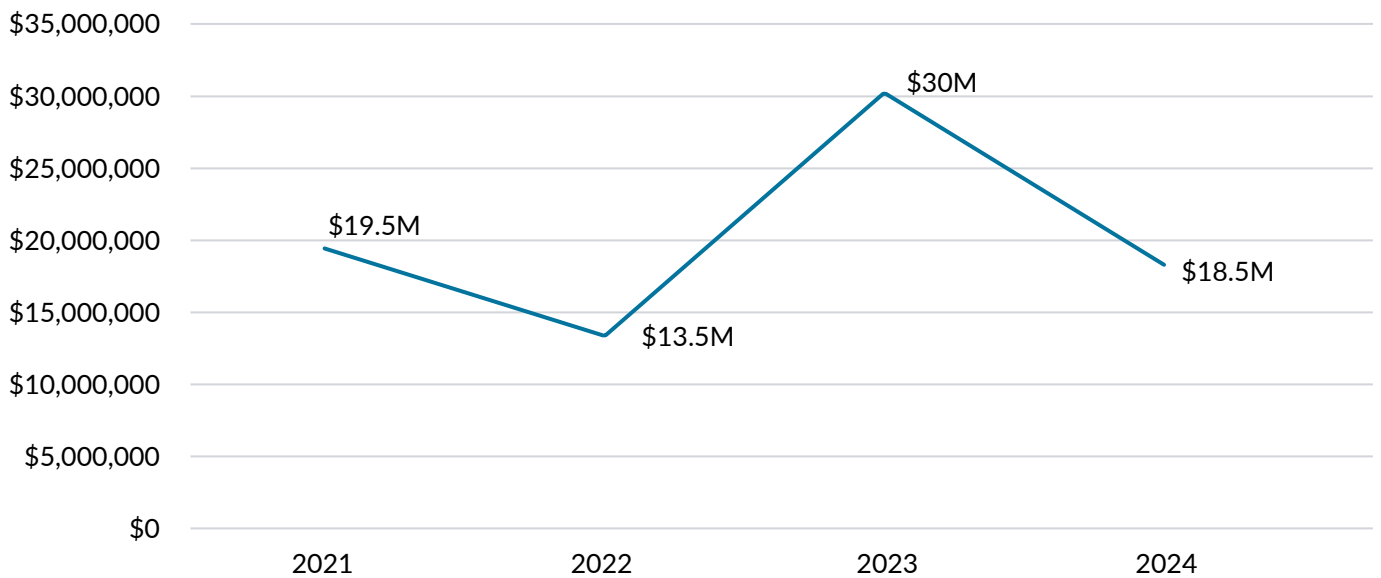


	Program	Financial Arrangement	Quality Program / Focus
2019	Blue Premier Primary Care (20+ ACOs)	TCOC Shared Risk	HEDIS + Custom Measures, Utilization; Risk Coding / Recapture Rates
2021	Advanced Kidney Care	TCOC Shared Risk	HEDIS and Utilization; Risk Coding / Recapture Rates
2024	Musculoskeletal (MSK) Virtual	Episodic Shared Risk	MSK-focused care
2025	Oncology	Episodic Shared Risk	Custom Quality Measures and Utilization; Virtual cancer navigation
2025	Gastrointestinal (GI)	Episodic Shared Risk	Custom Quality Measures and Utilization; Chronic GI disease coordination
2025	MSK APM	Episodic Shared Risk	Custom Quality Measures and Utilization; Orthopedic care optimization measures

AKC 2.0 Program Evolution

Focused on CKD stages 4-5, in each of the past three years, the AKC program has successfully achieved medical expense savings – through reduced admissions and avoiding crashes into dialysis – and improved clinical outcomes for patients with CKD stages 4-5 and ESRD.

Gross Savings



Data from Blue Cross NC's internal analysis. HCTTF did not independently validate the results.

However, there remained a meaningful opportunity to enhance patient outcomes through consistent, outcomes-driven clinical performance measures and further reduce costs. To address this, Blue Cross NC introduced AKC 2.0 – a more holistic, patient centric, outcomes-driven kidney care model.

AKC 2.0, launched in January 2025, deepens the focus on patient engagement, provider alignment, access to care, and measurable clinical outcomes across stages CKD 3b-5 and ESRD. In addition to a focus on avoidable utilization and adhering to financial benchmarks, AKC 2.0 service providers must achieve, and are accountable for, engagement and enrollment rate targets. These performance guarantees ensure service providers are motivated to improve outcomes and coordinate care with each patient's nephrologist.

Program Components

AKC operates under a structured, outcomes-driven framework designed to ensure accountability, transparency, and continuous improvement. The program includes the following components:

Quality Measures: AKC 2.0 is focused on kidney-specific measures that go beyond standard industry benchmarks. Measures are developed through rigorous research and collaboration with subject matter experts to drive measurable improvements in care delivery and advance our overarching goal of slowing kidney disease progression.

Quality measures

- Percent of Attributed Patients Seen by a Nephrologist
- Central Venous Catheters (CVC) Use \geq 90 Days
- Hemoglobin A1c Control (\leq 9%)
- Blood Pressure Control 130/80
- Optimal ESRD Starts
- Advanced Care Planning
- 30-Day Unplanned Readmissions
- Inpatient Admissions Per Thousand

Service Provider Performance Guarantees: Evaluation of performance is tied to overall patient engagement and enrollment rates. This ensures accountability for both outreach effectiveness and sustained participation by patients. To support service providers' performance and track program results, Blue Cross NC provides a comprehensive reporting package.

Blue Cross NC regularly reviews program components to ensure alignment with best practices and a continued focus on excellence in patient outcomes.

Replication & Scalability of the AKC Model

The success of the AKC program has created a scalable blueprint for expanding value-based specialty care across the organization. The following core features of AKC position it as a model that can be replicated efficiently and strategically:

1. **Standardized, Outcomes-Driven Framework:** AKC's structure – anchored in total cost of care accountability, evidence-based quality measures, and disciplined performance monitoring – is adaptable to other high cost, high variation conditions. This repeatable framework supports consistent quality improvement and measurable financial impact across specialties.
2. **Strong Provider Alignment & Integrated Partnerships:** AKC's success demonstrates that tightly aligned specialty partnerships can complement existing provider relationships, reinforce treatment plans, and enhance longitudinal care.
3. **Patient-Centric Engagement Strategy:** The program's high-touch engagement model – proactive outreach, ongoing education, and support for adherence – is transferable to other chronic condition programs where sustained engagement prevents avoidable acute events.
4. **Scalable Accountability Mechanisms:** The performance guarantee structure used in AKC ensures partners are accountable not only for financial outcomes but also for patient engagement and clinical improvement. This framework can be tailored and deployed across specialties.
5. **Established Operational Infrastructure:** Blue Cross NC's mature value-based care infrastructure – including governance, analytics, reporting, and clinical oversight – creates operational efficiency and shortens implementation cycles for new programs. The 2025 expansion into oncology, orthopedics, and gastroenterology is unmistakable evidence of the model's scalability.

Looking Ahead

As Blue Cross NC continues to expand its value-based care portfolio, the experience gained through AKC 2.0 strengthens the organization's ability to design and scale high impact specialty care programs. AKC exemplifies how deeply integrated partnerships, disciplined measurement, and patient centered care can drive meaningful improvements in outcomes and affordability for high-risk populations.

The lessons from AKC not only inform the next generation of kidney care but also serve as the foundation for future innovations that will advance Blue Cross NC's commitment to delivering better, more affordable health care for all patients.