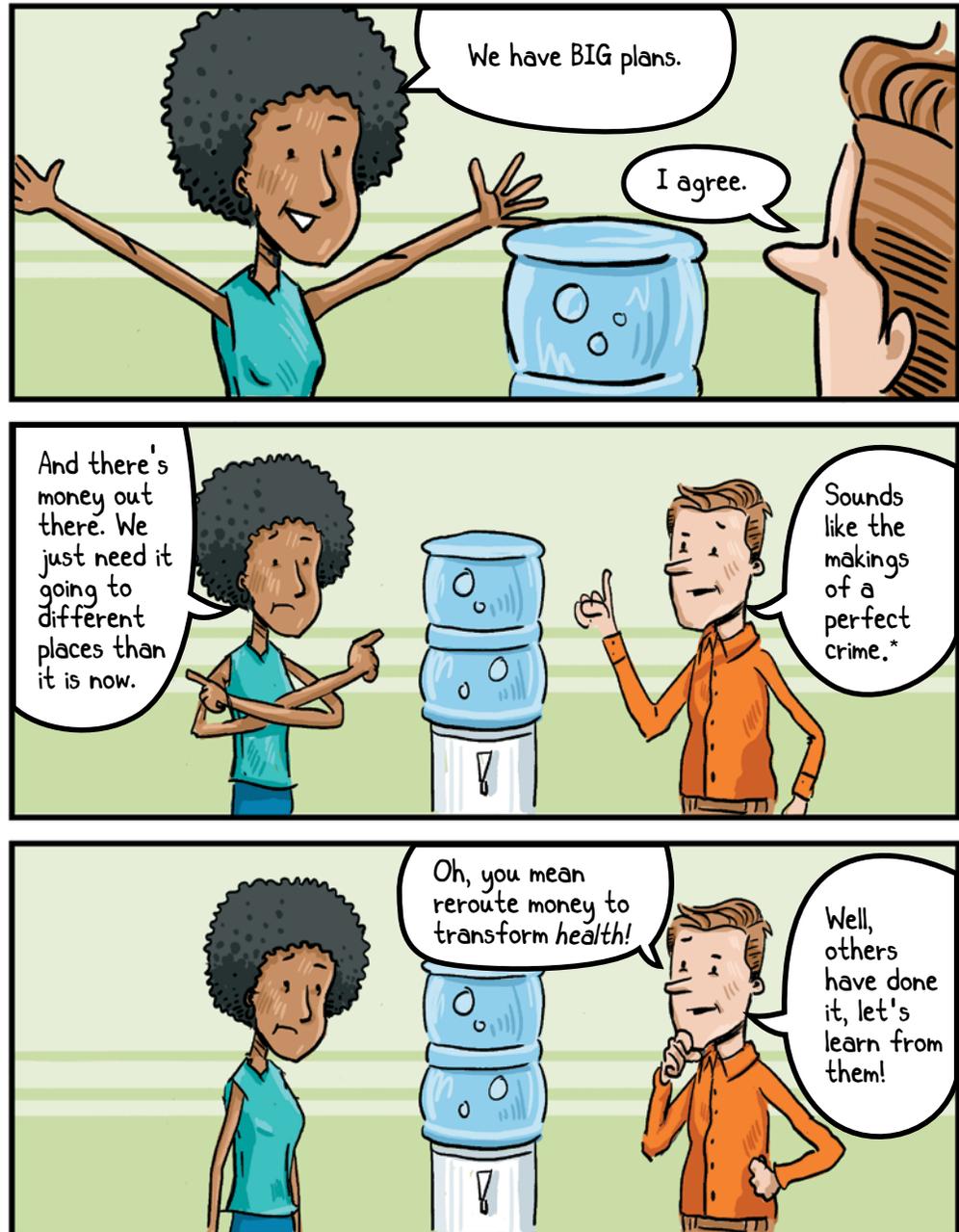


How Do You Move Money Across Sectors and Organizations?

MODULE 1



*Obviously, this is a joke. ReThink Health does not encourage or condone criminal activity.

Right now, there's a lot of money flowing through your region (trust us: a LOT). If you could capture just a sliver of that, you could make some serious progress. How do you do that? Well, let's start by exploring how others have done it.

How Do You Move Money Across Sectors and Organizations?

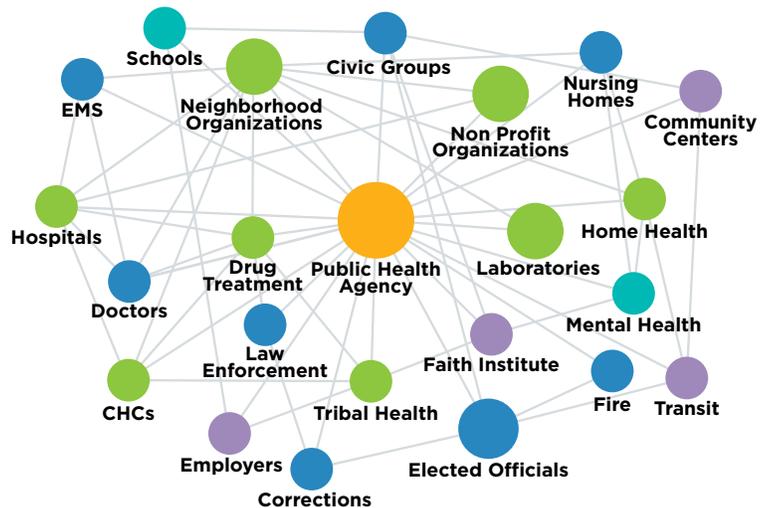
Financial Flows

As a multisector partnership or organization, if you want to transform the system of health in your region, you will need fundamentally different investment patterns—and that requires thinking differently about health and what creates it.

Anything or anyone that impacts the health of your region—for better or worse, in the short- or long-term—is part of your health ecosystem. This includes hospitals, patients, businesses, income assistance programs, and local law enforcement policies, as well as access to fresh food, homeless shelters, and drug treatment centers. Below is a visual representation of a regional health ecosystem¹. As you can see, the health ecosystem is a complex web of interrelated groups from multiple sectors—some that may not, at first, seem related to health. That’s why when we talk about health system transformation, we’re not just talking about health care, we’re really talking about all of the things that impact the broader concepts of health and well-being.

The “Influencing Financial Flows” worksheet on page 3 helps you explore the relationships among your health ecosystem’s components. People and organizations are connected in important ways (see [Module 2](#)), and so, too, are financial flows. You might think of it like a system of pipes, with money flowing between the different nodes. The idea is that, to transform your regional system of health, the pipe system needs to be redesigned—making some pipes larger, adding new pipes, etc. This will redirect the financial flows to maximize the impact on health and well-being. What if, for example, some of the money flowing into criminal justice or corrections flowed into mental health or drug treatment services instead? Or, instead of paying as much for services to deal with urgent problems like addiction, homelessness, or unemployment, what if some of those funds were shifted to upstream investments like education, housing, or transportation that prevent some of those urgent problems in the first place?

The pipes in our metaphor also represent various financing mechanisms, such as social impact bonds, taxes, and contracts. There’s an important distinction to be made here: a financing mechanism moves money, but a financing mechanism is not a source of



“ You might think of it like a system of pipes, with money flowing between the different nodes. The idea is that, to transform your regional system of health, the pipe system needs to be redesigned.

¹ Centers for Disease Control and Prevention. “Public Health System and the 10 Essential Public Health Services.” State, Tribal, Local & Territorial Public Health Professionals Gateway. September 20, 2017. <https://www.cdc.gov/stltpublichealth/publichealthservices/essentialhealthservices.html>.



money (see [Module 3](#)). A mechanism moves money from one place to another (the pipes), but it needs a source behind it (a reservoir, river, etc.). Installing a great pipe system in your home wouldn't do much good if it wasn't hooked up to a water source!

In your work, you are most likely going to have to move money via some sort of financial mechanism. And that mechanism will need a source behind it.

So how do you redesign the pipes to get the money where you want it to go? Anyone who has done it before will tell you there are no easy answers to this question. There are, however, conditions that enable the successful movement of money across sectors and organizations, and unpacking those conditions for your own region is a great first step. So, let's do that! Take a few minutes and think of an example from your region of a time when money was successfully moved from one place to another—or “reallocated”—within your health ecosystem.

Examples might include:

- A tax, like a sugar-sweetened beverages or public health tax
- A private-sector activity, such as [Kaiser Permanente's mission-driven alignment efforts](#)² (e.g., buying local, working with woman- or minority-owned firms, and selecting green energy)
- A legislative allocation that created a funding source or a health-related entity

Along with those typical examples, it's often overlooked that, in many cases, the money to fix a problem is already in the ecosystem, but is being directed in a less impactful way. As we mentioned earlier, funds currently being used for expensive treatments for urgent problems could be redirected upstream toward interventions that prevent those emergencies in the first place—often without requiring government policy changes. For example, one multisector partnership set up a program that sends professionals to visit low-income people living with diabetes to help them manage their health condition. This effort produced cost savings because it prevented numerous expensive emergency room visits for those patients. And, unlike the urgent treatment of symptoms, the intervention helped address the long-term problem, leading to even more potential savings down the road (not to mention better health outcomes for the patients).

Once you have an example of a successful financial reallocation in mind, step through the “Influencing Financial Flows” worksheet on page 3. If you don't know the answers, schedule coffee or a meeting with someone who does. (Bring a colleague or someone from your multisector partnership or organization along!) As you discuss the questions, keep in mind the difference between a mechanism and a source. The last question on the worksheet asks you to apply any insights you gleaned to an upcoming challenge or question you are facing. Answering this will help you take what you learn from the success story and apply it to your work.

“ There's an important distinction to be made here: a financing mechanism moves money, but a financing mechanism is not a source of money.

² <https://stakeholderhealth.org/tyler-norris/>



WORKSHEET

Influencing Financial Flows

MODULE 1



OBJECTIVE: Identify the conditions that support the ability to move money across sectors or organizations in your region so you can think more comprehensively about how to influence financial flows.

TIME: Approximately 45 minutes

MATERIALS: One copy of this worksheet (for leading the exercise)

PARTICIPANTS: A few members of your multisector partnership or organization, or other trusted colleagues.

To Begin

Think of an initiative—from your multisector partnership or otherwise—that successfully redirected money to support health transformation in your region. This could be a new tax, new funding for a public health intervention, membership fees to support the integrative activities your organization handles, etc. Agree on what initiative you'd like to discuss as a group.



As you work through these questions, it's likely you'll discover a tension between control and influence. While you probably don't control the flow of money through your region, you do have influence. Think about how you can best leverage that influence.

1. Who initially produced this funding? When this proposal was made was there any pushback and, if so, why? Were there any surprises in how it was received? If so, what was their nature?



2. What key steps did it take to gain traction and move the proposal forward? Were there extraordinary efforts and/or a certain amount of courage required? If so, what was its nature?

3. To what extent did getting support for the proposal require each of the following?

Conditions That Could Impact Willingness to Move Money	1 = none/not at all required 5 = extensively required
Willingness to take risks	
Problem solving	
Securing champions/political support	
Determination to persevere through challenges and setbacks	
Unity of key stakeholders	
Relationship building	
Financing expertise	
Focus on the long term over the short term	
Building a shared understanding of the problem	
Building confidence in population health and multisector partnerships as frameworks for change	
Other (please list)	



4. How long, approximately, did the initiative take to accomplish from idea to implementation? What factors influenced the length of time?

5. Under what conditions would you recommend it be done again?

6. What insights did this worksheet reveal that you could apply to one of your financing challenges?

Learn more at ReThinkHealth.org/FinancingWorkbook and contact us with questions and comments at ThinkWithUs@ReThinkHealth.org.

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