

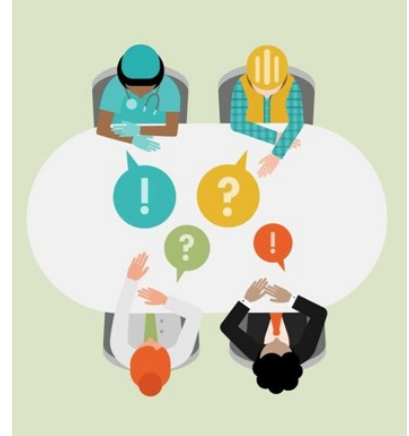
Frequently Asked Questions About the ReThink Health Dynamics Model

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What is the ReThink Health Dynamics Model?

The ReThink Health Dynamics Model is an empirically based, computer simulation that provides a realistic representation of a regional health system. The model is a tool that can help regional leaders determine what interventions could do the most to save lives, save money, improve quality, increase social equity, and boost productivity.

By demonstrating how the health system responds to changes, the model allows leaders to explore initiatives and investments, often in unexamined combinations, and simulate their short- and long-term outcomes.



Why use the model?

Regional leaders know that transforming health is essential, but they often need help deciding what to do. Efforts often fail because leaders do not focus on the highest-leverage opportunities, spread resources across too many interventions, address problems in isolation, and/or do not sustain efforts with long-term funding. The model provides leaders with evidence-based scenarios to help guide decision-making.

How does the model work?

The model focuses on the following three questions:

1. **What to do?** The model includes approximately 20 initiatives, ranging from enhancing care quality, capacity, and cost, to enabling healthier behaviors and expanding economic opportunity.
2. **How to pay?** The model offers financing options, including creating an innovation fund, changing provider economic incentives, and reinvesting savings, and allows users to develop financing plans.
3. **How proud would you be?** The model calculates how each combination of initiatives and funding is likely to unfold over 25 years across more than 200 metrics of population health, costs, care, equity, workforce productivity, spending, savings, and return-on-investment. Users can then compare scenarios and adjust their strategy to an approach that meets their goals.



What scenarios have offered the most promise?

The preferred scenarios for any given partnership are dependent on the region's goals and circumstances. Through its research on thousands of scenarios, ReThink Health has found the following combination to be promising:

- **Implement higher-value care:** eliminating unnecessary services and enhancing quality and capacity
- **Reinvest savings and expand global payment**
- **Enable healthier behaviors**
- **Create socio-economic opportunities**

Based on [an analysis published in 2016](#), these initiatives could reduce costs by 14 percent and chronic illness by 20 percent, and increase workforce productivity by approximately 9 percent beyond where they would otherwise be by 2040.

Who created the model?

ReThink Health collaborated with an award-winning team of MIT-trained system modelers to develop the model. Members of this team include: Jack Homer and Gary Hirsch (lead modelers), Rebecca Niles (senior facilitator), Kris Wile (user interface designer), and Bobby Milstein (team lead).

Where does the data come from?

The model is based on data from more than a dozen national sources and information from studies on health services, health economics, and population health. For more information on the empirical and technical underpinnings of the model, please review the model [Reference Guide](#).

How reliable are the simulated results?

The model is designed to compare the likely outcomes of different investment scenarios. While model outputs are not predictions, they do represent a plausible future consistent with current trends, anticipated population changes, and demonstrated impact of initiatives. The model's data and structure are updated periodically to reflect new research and input from users. For more detail on the technical aspects of the model, please review the model [Reference Guide](#).

How can I learn more about the model?

You can find more information, along with links to dozens of blogs, articles, videos, and other resources, at:

[ReThinkHealth.org/Modeling](https://rethinkhealth.org/Modeling)

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