

Collaborative Approach to Public Good Investments: Progress to Date

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POLICY INSIGHT

Social Determinants As Public Goods: A New Approach To Financing Key Investments In Healthy Communities

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<https://capgi.urban.org>

5 SLIDES
ABOUT CAPGI

A few use cases for CAPGI

- (1) Free rider problem = investors would not recoup all (or most) of investment unless there is collaboration (eg. insurance plan churn)
- (2) Stakeholders could achieve economies of scale through collaboration

CAPGI provides a “fix” for these kinds of problems by creating a governance structure for multiple sectors and organizations to come together and assigning each stakeholder a price as part of the cost of SDOH investments

Key Roles in Model Implementation



Trusted Broker (TB): to be chosen by local stakeholders



Stakeholders: health delivery and payor organizations, CBOs, local governmental units, philanthropy as well

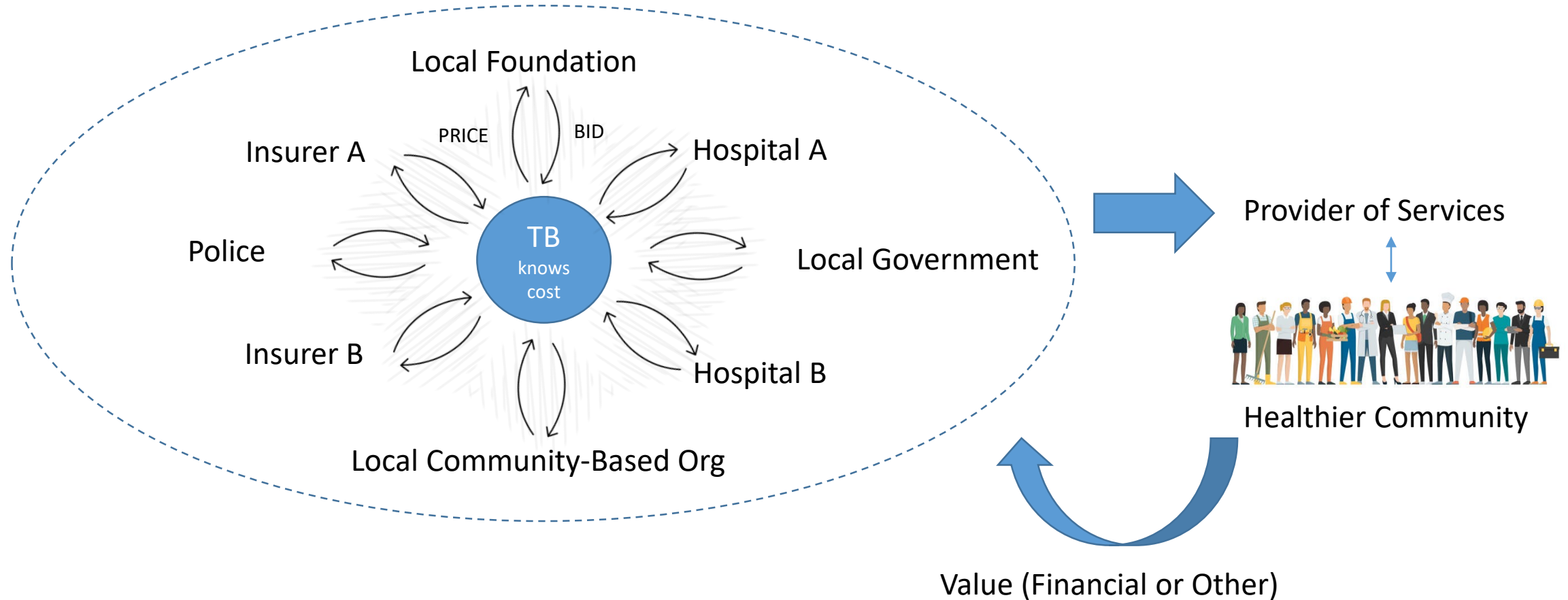


Vendors: Organizations that can deliver SDoH interventions and results



Technical Assistants (TAs): Coaches, Researchers, evaluators, numbers people

How CAPGI Works



*Stakeholder Names are Illustrative Only

Key Elements of the Model

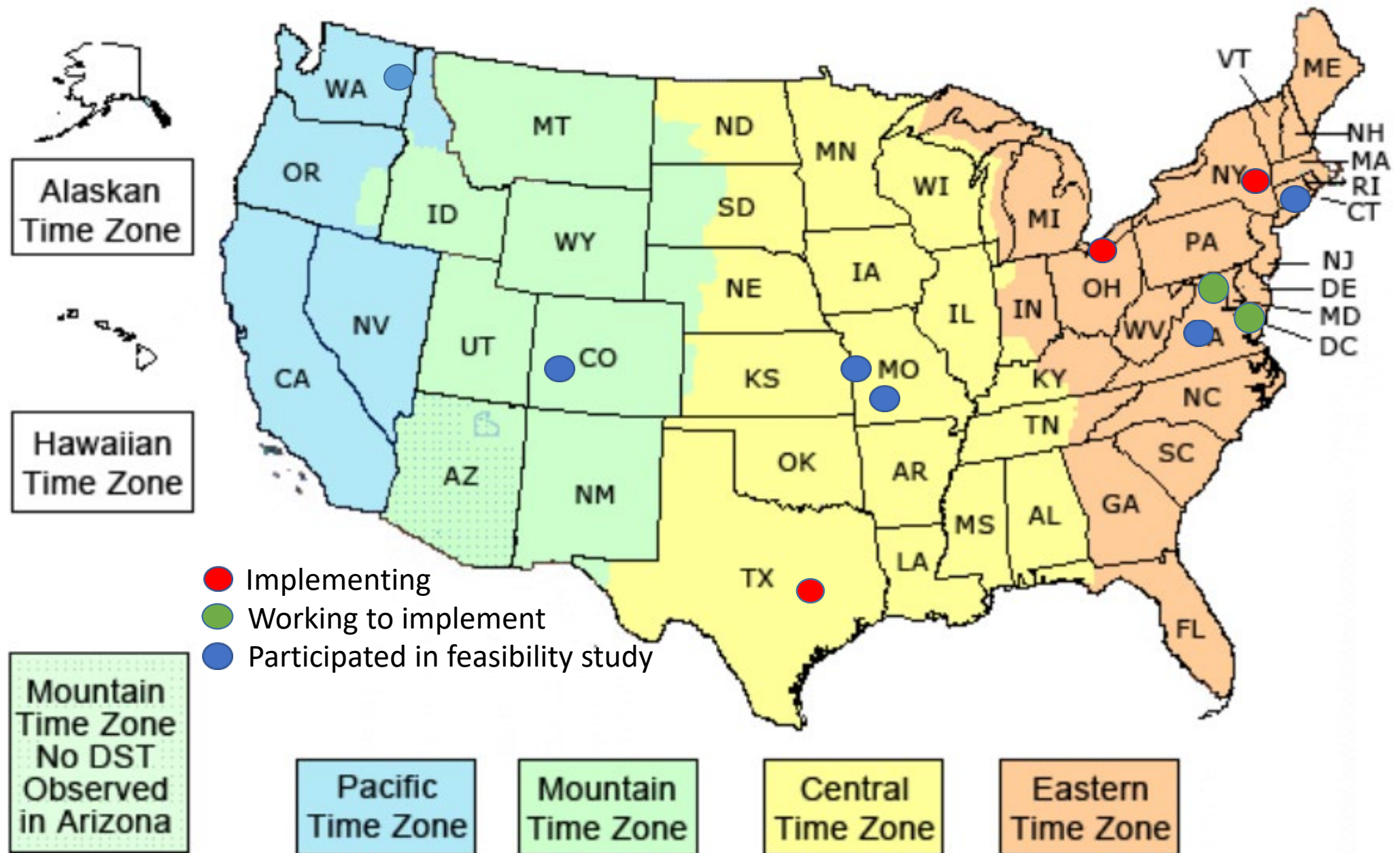
Where a local stakeholder coalition and trusted broker are present, CAPGI provides a way to fund “upstream” community investments

Key elements of CAPGI model:

- Stakeholders select the SDOH project to explore
- Only trusted broker knows:
 - Stakeholders willingness to pay (bid)
 - Cost of the project
- If sum of those bids $>$ cost, we help TB assign fair prices; surplus is shared
- Money flows from stakeholders → TB → service provider
- Bidding can be self-sustaining based on enlightened self-interest

Cleveland, OH CAPGI Implementation Process

Phase	Activities
1: Coalition Formation	<ul style="list-style-type: none">✓ Learn about CAPGI Model (October 2018)✓ Develop core team of interested investors✓ Establish buy in to investment model✓ Select project for investment (July 2020)
2: Launch & Deliver Services	<ul style="list-style-type: none">✓ Bid on services, set prices (September – December 2020)✓ Execute legal agreements✓ Enroll participants (April – October 2021)✓ Service Delivery (rolling, April 2021 – current)
3: Monitor & Evaluate	<ul style="list-style-type: none">• Evaluate financial return with control & intervention groups• Study feasibility of health impact evaluation• Re-bid for Year 2• Explore future investments (housing, food, etc)



A few comments on progress.

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