
We Can Do Better | The Archimedes Movement

The Archimedes Movement: Framework for Designing A New Health System

The grassroots work of the Archimedes Movement produced agreement around a set of assumptions and criteria for a new health delivery system. In July 2008 we endorsed three key objectives – improved population health, reduced per capita cost, and a better experience as we move through the system and utilize services – also called the Triple Aim.

These elements evolved from our shared principles, which were refined through a robust process of public engagement:

- We cannot solve the health care crisis by simply giving everyone insurance coverage (in other words, this is not just an insurance problem).
- We are all in this together and we challenge the concept of “categorical eligibility.”
- All Americans should be eligible for and have timely access to effective treatment for at least the same set of essential health conditions (the “core benefit”)
- The core benefit should be portable and not tied to employment.
- We believe the first emphasis should be on the public resources already being spent on health care, which comprises more than half the total dollars in health care expenditures. We want to ensure that public resources are spent in a way that is equitable, efficient and effective in producing health, because public dollars belong to all of us and should provide benefit for all of us.
- Market competition should be based on cost, quality and outcomes, not the avoidance of risk.
- We must explicitly recognize the reality of fiscal limits and acknowledge that we cannot purchase everything for everyone.
- We acknowledge the inevitability of at least a two-tiered system; that people with more disposable income will be able to purchase more than people with fewer resources. The challenge is to ensure that the core benefit (the “floor”) is adequate to provide for the health of all Americans.
- We acknowledge that all medical interventions are not of equal value and effectiveness in producing health, and therefore we must establish a prioritization process to decide what will be financed with the public resources.
- Individuals should be more directly involved in their own health care treatment decisions.
- It is important to promote healthy behaviors through strategies that focus on both individual choices (responsibility) and environmental influences.
- Co-payments, rather than being used to shift costs, should be used to influence individual behavior by having lower or no co-payments for highly effective procedures backed by good scientific evidence and higher co-payments on lower priority interventions.

Principles For Health Reform

- 1. Equity.** All individuals must be eligible for and have timely access to effective treatment for at least the same set of essential health conditions.
- 2. Financing.** Financing of the health care system must be equitable, broadly based and affordable.
- 3. Population benefit.** The public must be engaged in identifying priorities to optimize the health of Americans.
- 4. Responsibility.** Responsibility for optimizing health must be shared by individuals, employers, health systems and communities.
- 5. Education.** Education is a powerful tool for health promotion. The health care system must promote and engage in education activities for individuals, health systems and communities.
- 6. Choice and Dignity.** Health care and health promotion systems must provide services in ways that support choice and dignity for individuals.
- 7. Effectiveness.** The relationship between specific health interventions and their desired health outcomes must be backed by unbiased, objective medical evidence when possible. When evidence based practice is not possible, health interventions and their desired outcomes must reflect successful clinical practice.
- 8. Efficiency.** The administration and delivery of health services must use the fewest resources necessary to produce the most effective health outcome.
- 9. Explicit decision-making.** Decision-making will be clearly defined and accessible to the public, including lines of accountability, opportunities for public engagement and how public input will be used in decision-making.
- 10. Transparency.** The evidence used to support decisions must be clear, understandable and observable to the public.
- 11. Economic sustainability.** Health service expenditures must be managed to ensure sustainability over the long term, using efficient planning, budgeting and coordination of resources and reserves, based on public values that respect the inherent worth of all Americans and recognizing the impact that public and private health expenditures have on each other.
- 12. Aligned financial incentives.** Financial incentives must be aligned to support and invest in activities that will achieve the intent and objectives of this effort.
- 13. Wellness.** Health and wellness promotion efforts must be emphasized and strengthened.
- 14. Community-based.** The delivery of care and distribution of resources must be organized to take place at the community level, unless outcomes or cost can be improved at regional or statewide levels.
- 15. Coordination.** Collaboration, coordination and integration of care and resources must be emphasized throughout the health system.