#### The Strategy Unit.





## Cooperation

Cooperation can often lead to outputs which are

"greater than the sum of the parts"

More savings/gains

How should we then share the gains?



Participation in a coalition is voluntary

If participants collaborate, then they'll have to share their accumulated gains.

A fair approach to sharing should provide no incentive for players to break away from the coalition and proceed independently

No participant should feel disappointed – else may leave the coalition.

## Three approaches

- Equal division egalitarian
- Proportional division eg by volume of patients
- Negotiation cooperation and compromise

#### May appear <u>unfair</u> to one or more players

Shapley came up with a way of dividing the accumulated gains in such a case, called the <u>Shapley</u> <u>value</u>.

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#### **The Shapley Value**

The Shapley value is a solution concept in cooperative game theory. It was named in honour of Lloyd Shapley, who introduced it in 1951 and won the Nobel Memorial Prize in Economic Sciences for it in 2012.

$$arphi_i(v) = rac{1}{n}\sum_{S\subseteq N\setminus\{i\}} inom{n-1}{|S|}^{-1}(v(S\cup\{i\})-v(S))$$

which can be interpreted as

$$\varphi_i(v) = \frac{1}{\text{number of players}} \sum_{\text{coalitions including } i} \frac{\text{marginal contribution of } i \text{ to coalition}}{\text{number of coalitions excluding } i \text{ of this size}}$$



The <u>Shapley value</u> is a solution concept used in <u>game theory</u>. The <u>Shapley</u> value is mainly applicable to the following situation: the contribution of each actor is not equal, but each participant cooperates with each other to obtain profit or return. The efficiency of the resource allocation and combination of the two distribution methods are more reasonable and fair, and it also reflects the process of mutual game among the league members.<sup>[4]</sup> However, the benefit distribution plan of the Shapley value method has not considered the risk sharing factors of organization members, which essentially implies the assumption of equal risk sharing.

## **Airport Problem**

In <u>mathematics</u> and especially <u>game theory</u>, the **airport problem** is a type of <u>fair</u> <u>division</u> problem in which it is decided how to distribute the cost of an <u>airport runway</u> among different players who need runways of different lengths. The problem was introduced by S. C. Littlechild and G. Owen in 1973.<sup>[1]</sup> The authors note that the resulting set of landing charges is the <u>Shapley value</u> for an appropriately defined game.

## **Sharing nicely**

Player 1 - £1 : Player 2 - £2

Player 1 + Player 2 =  $\pm 4$ 

How should they (fairly) share the £4 profit

The total  $\pounds$  (when each player is alone) =  $\pounds$ 3

The extra marginal gain from working together = +£1

Split the marginal gain +£1 equally –

Player 1 gets:  $\pounds 1 + \pounds 0.50p = \pounds 1.50$ Player 2 gets:  $\pounds 2 + \pounds 0.50p = \pounds 2.50$ 

## Sharing nicely

Three friends want to share a taxi home: A (£6) ---->B (£12) ----->C (£42)

The taxi firm agrees to a fare of £42 total based on longest journey to C

It is now up to the passengers to divide the fare between them

		A - > £6 :	B -> £12:	C -> £42	
Coalitions		Α	В	C	
ABC		6	6	(42-6-6)=30	
ACB		6	0	(42-6)=36	
BAC		0	12	(42-12)=30	
BCA		0	12	(42-12)=30	
CAB		0	0	42	
CBA		0	0	42	
	Fare	12/6	30/6	210/6	
		£2	£5	£35 Total sum = $\pounds$ 42	

#### CT SCANNER

**Parallel Simplification**: The three hospital networks will purchase and share use of a new Aquilion One Vision CT scanner. Hospital  $X_1$  has modest generalimaging requirements and wants a 16-slice scanner (\$400,000) to meet their needs. Hospital  $X_2$  has higher volume requirements and also wishes to offer vascular imaging services which need better quality images, so they require a 128-slice system (\$1,000,000). Finally, hospital  $X_3$  wishes to setup a cutting-edge imaging facility capable of high volume cardio studies; consequently, they require a 640slice scanner (\$2,500,000). Given the expected usage volume, all three hospitals could share a single 640-slice machine with this cost allocation.

<u>Resource Cost</u> 16-slice: \$ 400,000 128-slice: \$ 1,000,000 640-slice: \$ 2,500,000	Player Requirement S(1): 16-slice \$400,000 S(2): 128-slice \$1,000,000 S(3): 640-slice \$2,500,000	$\frac{\text{Cost to "go it alone"}}{X_1 = 400,000} \\ X_2 = 1,000,000 \\ X_3 = 2,500,000$
		\$ 3,900,000
	Shapley Sharing Solution	
$X_1 = \frac{1}{3} (400,000)$		= 133,333.33
$X_2 = \frac{1}{3}(400,000) + \frac{1}{2}(1,000)$	= 433,333.33	
$X_3 = \frac{1}{3}(400,000) + \frac{1}{2}(1,000)$	(2,5000,000 - 400,000) + (2,5000,000 - 1,00)	000,000) = 1,933,333.34
		\$ 2,500,000.00

Lightfoot, Jay M. (2019) "A Game-Theoretic Approach to Share the Costs of Cooperating Healthcare Networks," Journal of International Technology and Information Management: Vol. 27: Iss. 3, Article 2. DOI: https://doi.org/10.58729/1941-6679.1381

## Shapley value

- Fair share
- Assumes constant risk

Reflections



# Share your insights...



#### Any key insights...



#### So what... (any scope for application)



One wish...