

# ARTICLE

## DATA AS INFRASTRUCTURE: TREATING HEALTHCARE INFORMATION AS A HIGH-YIELD CAPITAL ASSET

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In the legacy healthcare model, data is often treated as a neutral commodity—a mere "snapshot" of a single clinical encounter. This perspective views data storage as a liability and collection as an administrative cost. Furthermore, the traditional extraction model, where third-party brokers monetize de-identified information, provides no long-term financial appreciation for the providers or patients who generate the information. For healthcare executives, this represents a failure to capture the inherent value of longitudinal clinical evidence.

## **THE COMMODITY TRAP VS. THE INFRASTRUCTURE MODEL**

Treating data as a commodity ignores the fact that personal healthcare information is a "rights-laden emanation of the person" that should be protected as a human right. When data is siphoned away into fragmented, retrospective records, it loses the continuity required for high-value applications, such as justifying the reimbursement of high-cost gene therapies.

The transition to a "data as infrastructure" model requires a shift in how value is calculated. Unlike static commodities, the value of healthcare data grows non-linearly as it becomes longitudinal. A 12-month clinical case is significantly more valuable than a 6-month case because it allows for the tracking of treatment durability and long-term complications.

## **THE CIRCLE DATASET INTERVENTION: NON-LINEAR VALUE APPRECIATION**

A primary feature of Circle Datasets is the transformation of clinical information from a fragmented liability into a high-yield capital asset. This is achieved through a structural commitment to multi-year, longitudinal data capture.

The appreciation of information value within the platform is modeled by the following relationship:

$$Value = \frac{Quality \times Service}{Cost}$$

- **Quality:** Defined by the deterministic, protocol-driven nature of the data.
- **Service:** Refers to the duration or "service life" of the dataset, which inherently spans multiple years.
- **Cost:** Reduced through the elimination of retrospective data cleaning and mapping.

By utilizing the **Split-IP model**, Circle Datasets provide ongoing motivation for both patients and physicians to continue contributing to these longitudinal records. As the dataset accumulates more deterministic evidence of quality and outcomes over time, its information value increases. This allows healthcare organizations to move beyond transaction-based revenue and negotiate superior terms in value-based contracts based on a growing capital asset.

Download RegenMed white paper "[Bridging The 17 Years Evidence to Practice Gap](#)" to go deeper.

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