

Health Care Today
Chapter 2

Care and treatment of sick
Education, research, prevention of
disease or local health center.

Hospital Classifications

- The Type of Patient Service Offered –
General Hospitals most common
Specialized Hospitals- childrens, psychiatric,
rehabilitation, etc,
- The Ownership of the Hospital
Federal government- veterans, military, Native
Americans.
States, counties, cities, churches, fraternal
Proprietary for profit owned by group or corp.
Hospital today is part of a health care system
- By Accreditation meaning that a hospital has met an
official standard

Hospital Organization

- **Administrative Personnel**
 - Governing Board or Board of Trustees/Directors
 - Persons from business and professional community and
citizens from all socioeconomic groups
 - Establishes policies
 - Provides financing
 - Oversees personnel standards

CEO – direct charge of hospital, answers to board
Implements policies set by board

COO – Chief Operating Officer responsible for the
day to day operations, answers to CEO

CFO – Chief Financial Officer, fiscal aspects, reports to CEO

Vice Presidents - report to the hospital COO and supervise
each service (see pg 19 in book)

Hospital Organization (con't)

- **The Medical Staff** – doctors are appointed by board
Attending physician – able to admit patients to the hospital. May be MD or DO. Not hospital employees

- **Hospitalist** – employed by hospital. Acute care specialist who exclusively cares for hospitalized pts.

- **Intern (rarely used) Resident (more commonly)** – lg. Hospitals allow medical school graduates to gain hospital experience. House staff or House Officers (HO) are other names for Residents.

- **Specialists** – Physicians who practice in special fields.

Accreditation

- JCAHO accredited hospital means that the hospital has been surveyed, graded, and approved by the Joint Commission on the accreditation of Healthcare Organizations.
- Participation in JCAHO is voluntary
- Several other accrediting agencies conduct surveys, according to the services provided by the hospital.
- License to operate is granted by the Department of Health Services of the individual state.

Hospital Departments/Services

- Business Services- deal with financial aspects
- The Admitting Department-
- Purchasing- HUC orders supplies
- Diagnostic and Therapeutic Services includes cardiovascular, central service, diagnostic imaging, dietary, neurodiagnostics, endoscopy, gastroenterology, pathology, pharmacy, physical medicine, respiratory, radiology.
- Support Services- records, quality assurance, risk management, social service, home care, outpatient, pastoral, communications, transportation, patient advocate, public relations, volunteer services.
- Operational Services- environmental, mechanical, laundry, human resources, security.

Managed Care

- The provision of health care services efficiently to a designated group of members by managing patient access to and across a spectrum of health care settings.
- HMO's- Health Maintenance Organizations- has management responsibility for providing health care on a prepayment basis to voluntarily enrolled persons. To keep people healthy so that cost of health care is reduced.

Managed Care (con't)

- **Preferred Provider Organization (PPO)**
independent physicians who provide health care for 15-20% less than customary. Participating Dr. list, no referrals needed.
- Staff Model HMO, Group Model HMO, and Individual Practice Association Model (IPA) on pg 24 of book describes more fully types of HMO's.

Provider Reimbursements How Americans pay for health care

- Private/group-paid health- through employers, require a copayment and deductible. Premiums paid through payroll deductions or direct. Example Blue Cross/Blue Shield. Also called Third-Party Payers.
- Health Maintenance Organizations- form of insurance as well as being a method of delivering health care. Capitation is where the providers of care receive a set dollar amount regardless of the number and type of services enrollees need.
- Medicare- Government plan for persons over 65. Part A is hospital insurance, Part B is for outpatient.
- Medicaid- low income, federal and state funded.

Health Care Payment Sources (con't)

- **Indemnity Insurance** - a fee-for-service plan. Pt may choose health care provider and hospital. Annual deductible. Plan pays certain portion (80% usually) UCR covered.
- **Worker's Compensation** - Pays medical and lost wages when on-the-job accident or illness. Employer pays premium insurance

Case Management

- Coordination of patient's care with insurance provider.
- Patient advocacy- to appropriately utilize benefits and coverage of health insurance policy.

Employment in Health Care

- US Government statistics indicate that health care is the fastest growing industry.
- Hospitals, clinics, physician's offices, HMO's, surgi-centers, rehabilitation facilities, ECF's or SNF's, Mental Health Facilities, Home care agencies, and hospice settings all employ health care workers.
- Over 200 Health Careers identified
- Web sites to research are on pg 25 of book.

Summary

- HUC job descriptions differ among health care facilities.
- HUC need to be familiar with the hospital, its personnel, and services.
- Managed care is the principal form of health care delivery in the US today.
- Managed care's purpose is to provide quality care at the lowest cost possible.
