It’s not the classroom you remember: new course content and teaching methods in healthcare financial management.

Red River (OK and Lone Star Chapters) HFMA Meeting
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Higher education is changing:

Here’s why:

a) Prospective employers

b) Education has become expensive

c) Accreditation agencies
Some background

Most courses in higher education have been taught using a traditional format

a) The instructor stands in the front of the room at a podium and reads from prepared lecture notes.

b) The students took notes (often hand written) and class discussion might not be extensive.

c) The grade in the course was generally comprised of scores on a mid-term exam and a final exam. There may have been a term paper due at the end of the semester.
Some background

• Over time this historical and traditional format evolved, and depending on when you were in college or grad school, there may have been some variations on this basic theme.
Something New

The new format - Class time is used to do things that can only be done when all of the students are together with the instructor.
At the same time ...

Technology begins to drive changes in format and delivery of courses in higher graduate studies, and even at the undergraduate and high school levels.

A generation of students growing up with laptops and cell phones want asynchronous access.

Students want to enroll in courses that are online with no classroom attendance.
At the same time ...

- Faculty benefit from the freedom of placing recorded lectures on electronic educational platforms that could hold video replays of lectures, class notes, slide shows and other reading assignments.
Changing course content

Modifications of course content soon followed.

The move to competency-based education.

Competencies include professional skills such as team work, effective communication and listening.
Competencies

Let’s look at some examples of the required competencies at the graduate level.
List of competencies
University of Oklahoma HSC

• **MHA Program Competencies**

A. Synthesis and evaluation of the healthcare system related to:
   – healthcare organizations,
   – access to care,
   – financing healthcare,
   – human resources,
   – financial management,
   – strategic planning and thinking,
   – quality improvement, and
   – legal and regulatory matters.
Competencies

• More than just remembering the definition.

• More than just understanding the concept.

• It is about applying, analyzing and evaluating.
List of Competencies

B. Communication skills including:
Characterizing and utilizing appropriate forms and standards of communication methods applicable in professional healthcare settings; Establishing best practices of communication skills; and Effectively identifying and responding to the audience and its wants, needs, interests, and beliefs.
List of Competencies

C. Critical thinking, analytical skills, and problem-solving abilities including:
- Using quantitative, statistical and financial analyses to solve problems;
- Using strategic planning and strategic thinking;
- Applying quality improvement techniques to analyze and change organizational outcomes.
D. Leadership, Professionalism, and Ethics including:

Engaging and interacting with people, organizations, and key stakeholders when developing goals and executing plans;

Mobilizing teams, using negotiating skills, and being aware of individual and organizational pressures and needs.
Other examples of competencies

1. Healthcare Financial Management Association - HFMA
2. Association of University Programs in Health Administration - AUPHA
3. Commission on Accreditation of Healthcare Management Education - CAHME
Examples of competencies published by HFMA

• a) Think strategically. Problem solving and strategic thinking are skills that should be incorporated in leadership development training and education for finance students.
Examples of competencies published by HFMA

• To be well-prepared for a leadership role (such as that of the CFO) students should be given the opportunity to practice problem solving and strategic thinking through simulations or even exposure to actual scenarios facing CFOs.
HFMA competencies

• b) **Communication.** The importance of the development of communication skills cannot be overemphasized. Communication includes having effective presentation skills.

• HFMA Publication Date: August 1, 2015
Preparing Students for Healthcare Finance Leadership Roles

The results of the study described in this article offer valuable insights into the skills, knowledge, and competencies that colleges and training programs should consider in developing curricula for leaders in the healthcare finance and business arena. Such programs also should give special emphasis to four maxims that should be fully embraced by aspiring leaders.

Be ethical. Ethics are among the most important aspects of good leadership, especially in the finance realm. Study participants unanimously agreed that ethics are an essential component of CFO development. In addition to being ethical, the expert panel identified having high integrity as one of the most important attributes for CFO development. With the role of finance leadership comes the expectation of sound judgment, good reputation, and respectable character. Programs that seek to develop finance leaders and future CFOs need to incorporate the tenets of ethics and integrity as foundational components.

Follow through. The expert panel also unanimously agreed that the ability to execute was essential to CFO development. It is critical that finance leaders understand and act on the concept of execution. Having the ability to perform the duties of the finance leader is irrelevant if the job cannot be done in an accurate, timely, and efficient way. Those preparing for finance leadership should be trained on the importance of execution and on strategies to follow through on strategic planning. The credibility of the CFO is affected by his or her ability to execute, so it behooves finance professionals to hone this skill early in their professional development.

Think strategically. Problem solving and strategic thinking are skills that should be incorporated in leadership development training and education for finance and business students. To be well-prepared for a leadership role such as that of the CFO, students should be given the opportunity to practice problem solving and strategic thinking through simulations or even exposure to actual scenarios facing CFOs.

Communicate. The development of skill in communication usually is incorporated in leadership training programs, but its importance cannot be overemphasized. Students should be taught what it takes to be an effective communicator, including effective presentation skills. Students also should be taught the importance of being able to communicate finance information to nonfinance colleagues in an understandable and practical manner. This approach will include avoiding the use of finance jargons and translating finance information into industry-relevant measures.
c) Collaboration - ... decisions are formed within a team, making collaboration important and essential to resolving problems and executing strategic plans to attain goals.

HFMA Publication date: August 1, 2014
Web Special: Core Competencies for a Changing Healthcare Environment

KAREN WAGNER

ALTHOUGH GOOD LEADERSHIP IS GROUNDED IN A FUNDAMENTAL SET OF SKILLS, THE EVOLUTION OF THE HEALTHCARE INDUSTRY HAS PROMPTED THE NEED FOR NEW COMPETENCIES THAT CAN HELP AN ORGANIZATION DELIVER VALUE-BASED CARE.

Leading, driving, and managing a healthcare organization today requires competencies that can address profound changes and numerous challenges. New technologies, payment models, competitors, business models, and care delivery systems—and even influxes of new patients—are changing the way healthcare organizations operate, requiring a revamping of established skills and fresh skills that perhaps were not essential five or 10 years ago.

As new competencies come into play, healthcare organizations face the question of how to obtain these attributes. Internal development—such as mentoring programs—can be very effective, but organizations may also want to consider outside industries as sources of expertise that can meet increasing demands in areas such as data management and customer service.

This special feature explores the competencies required of healthcare executives, directors, and managers to address current and future needs as the industry makes the transition from volume to value.
Teaching Methods

• How to include competencies in course content and classroom teaching methods:
  – Team based learning
  – Inter professional education
Team based learning

By working in a team setting, students are

➢ developing a team based solution to a problem
➢ preparing a written analysis of the team’s solution
➢ developing interactive skills to help solve problems
Inter professional teams

• a) Students are grouped into teams.
  – Students from other colleges at the health sciences center enroll in our classes.
  – This allows us to place students on an inter professional team where medical students, pharmacy students, nursing students, healthcare administration students, etc. are grouped together and experience working together.
Experiential Learning

• After graduation they will be working on interprofessional healthcare teams to solve problems.
Team based learning

• b) Each week each team will work together in class to prepare a team response to a question or case study. The same question is given to each team.

• c) A representative from each team will then record the team’s conclusions on a large yellow flip chart and present this to the class.

• d) By the end of the class session, there are several large yellow flip charts in the front of the room displaying each team’s comments and showing what topics and issues were discussed during the class.
Teams

• Examples of team based weekly assignments:
Team Assignment Example 1

• 1. Has the Affordable Care Act addressed the issues of access, cost and quality? Explain your answer and provide examples.
• 2. Prepare a state budget allocating a hypothetical $100,000,000 deficit to the following categories:
  – Department of Education,
  – State Regents for Higher Education,
  – Medicaid (Oklahoma Healthcare Authority),
  – Department of Corrections,
  – Department of Mental Health,
  – Career & Technical Education,
  – Public Safety,
  – and Department of Transportation.
Team Assignment  
Example 2 – part 2  

• The student teams are then asked to consider how to increase funding by $50,000,000 for the Medicaid program in order to expand the program or make changes to the program.  

• This can be accomplished by additional reductions in funding for the other categories in the state’s budget.
<table>
<thead>
<tr>
<th>Departments</th>
<th>Without Medicaid Expansion</th>
<th>With Medicaid Expansion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare Authority</td>
<td>-$10 mil.</td>
<td>+ $50 mil.</td>
</tr>
<tr>
<td>Dept. of Corrections</td>
<td>-$15 mil.</td>
<td>-$25 mil.</td>
</tr>
<tr>
<td>Dept. of Mental Health</td>
<td>-$10 mil.</td>
<td>-$20 mil.</td>
</tr>
<tr>
<td>Career + Tech. Education</td>
<td>-$10 mil.</td>
<td>-$20 mil.</td>
</tr>
<tr>
<td>Public Safety</td>
<td>-$5 mil.</td>
<td>-$10 mil.</td>
</tr>
<tr>
<td>Dept. of Transportation</td>
<td>-$10 mil.</td>
<td>-$15 mil.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$100 mil.</strong></td>
<td><strong>$150 mil.</strong></td>
</tr>
</tbody>
</table>
No right answers

• This assignment is going to show the students that there might not be a right answer.
• Can the students select the best answer and explain why it was chosen?
• The students experience dealing with limited resources and healthcare policy issues at the state level.
3. A case study is presented involving the acquisition by a regional hospital and health system of a multi-specialty physician practice. The acquiring health system wants to install new IT hardware and software in the acquired practice. Each team is asked to prepare a list of suggested steps related to the installation and implementation of an electronic health record in the acquired multi-specialty physician practice.
GROUP 5

1) Consider finances and do research on EHRs.
2) Understand why EHR is needed. Consider what features are needed/not needed.
3) Consider compatibility of EHR w/ partnering practices.
4) Investigate level of training for transition.
5) Figure out methods to back up data and how to protect data.
6) Visit other facilities w/EHR.
7) Consult w/ EHR support as needed.
4. Patient satisfaction – student groups discuss and analyze

   a) when to collect this information
   b) which format to use
   c) what questions will obtain information that will lead to improvements in future performance
Individual assignments

There would also be individual writing assignments based on realistic case studies; here are some examples -
1. A fact pattern will be presented describing a discussion at a hospital board meeting involving various issues related to the cost of patient care. The students will be given information about the goals of the leadership of the medical staff, the community members of the board of trustees and the members of the administrative leadership team. The assignment asks the students to identify and explain why there might be tensions between these groups and to propose how to resolve the differences in a reasonable solution for all.
The old method

- Tell students about the corporate organizational structure and how it works.
Individual Assignment Case Study No.1

• A likely real life scenario of a hospital board that gives students a chance to study and discuss different perspectives from various constituencies.

• Students prepare a 360 degree review.
2. Students are asked to list, describe and explain the various financing methods used in the healthcare delivery system. Then they are asked to describe some of the unintended consequences of the various financing methods.
The old method

- Identify and describe each financing method.
The new method

- We now reach for higher levels of complexity and specificity.
Individual Assignment
Case Study No. 2

• Students learn how each financing method works.
• The knowledge will be used to develop negotiating strategy about payer mix from a hospital’s perspective.
• This includes critical thinking and an analytical assessment of each financing method.
Next, the semester policy paper

Recently the written policy papers included the following topics from the Affordable Care Act:

• Exchange Subsidies,
• Medicaid Medical Homes,
• Medicaid and Medicare Quality Measures
Grading is based on a rubric

The basis for grading the policy analysis papers is described in detail in the following rubric which is published in the course syllabus;
An example from the rubric

<table>
<thead>
<tr>
<th>Outline</th>
<th>A Level Work</th>
<th>B Level Work</th>
<th>C Level Work</th>
<th>D/F Level Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>IV. Evaluation</td>
<td>Describe at least one alternative for improvement in the current policy, provide supporting evidence for the improvement, (1) who would benefit, (2) any cost benefit, (3) increase in equity or fairness, or (4) ease of administration. Alternative is described in detail and addresses all four issues.</td>
<td>Described one alternative for improvement with supporting evidence for who would benefit, or cost benefit, or increase in equity or fairness, or ease of administration (2 out of 4 areas) with detail, or all four areas with lack of detail.</td>
<td>Described an alternative, but did not address two areas, lacked supporting evidence, lacked detail. 18 Points</td>
<td>Evaluation absent. 15 Points</td>
</tr>
<tr>
<td></td>
<td><strong>25 Points</strong></td>
<td><strong>20 Points</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Competencies are in the rubric

• Note that the competencies, which would be listed as some of the learning objectives for the course, are also included in the rubric.
Details about the assignment

• The policy papers are presented in a small group of four or five students.
• The presentation is followed by a question and answer session.
Peer review

• Each student evaluates all other students in the group and prepares a written peer evaluation of the other students’ presentations.

• These peer-reviewed evaluations are used by the instructor to assess the listening and comprehension skills of the preparer of the evaluation, not the presenter of the policy paper.
Simulations

a) The presentation format is intended to simulate a likely speaking experience that the student will encounter after graduation.

b) The peer review assignment is intended to highlight the importance of listening, comprehension and paying attention.
Facts about grading

• It’s all about feedback and continuous improvement.
• The course is not based mostly on a final exam and then a final grade.
• We are constantly evaluating the students.
Measuring student attainment of competencies

We use

• traditional examinations,
• writing assignments,
• speaking assignments,
• notes from summer internship preceptors,
• comments from alumni/course mentors
• assessment from senior hospital executives observing our students in the capstone course.
Measuring student attainment of competencies

We also survey graduates at two or three year intervals regarding their professional progress and career path.
The classroom

• Let’s shift gears and talk about the classroom and the teaching and learning environment.
No lecture or slide show

Since there is no lecture, the instructor will present a case study or fact pattern and ask the teams to begin to develop an analysis of the case and a solution to be presented to the class.
Alumni as mentors

Some courses ask alumni to serve as mentors and work with student teams to solve real problems encountered by the alum at work.
Guest interview

• Our courses invite people in leadership positions in the healthcare industry to visit the class but not as a guest speaker.
  – The instructor conducts an interview
  – Students are required to submit questions
  – Students are required to participate in the interview and discussion
Guest (speaker) interview

- The instructor asks the guest about current topics of interest, recent projects and assignments being worked on by the guest.
  - This is not a typical guest speaker but rather an interactive discussion between the students and the healthcare executive.
Various delivery settings

- We don’t limit our discussions, team assignments or homework to hospital settings. For example, we also discuss
  - Home health
  - Skilled nursing
  - Long term care
Using Role play

• When a student representative from each team presents the team’s analysis or solution, the instructor may engage in role play and be the CEO of the hospital, or some other role, and ask questions.
Changing the facts

• As part of the role play, the instructor may change the original set of facts given to the students in the case study.
  – The intent is to provide reality to the assignments.
  – Isn’t that what happens?
Real questions from real cases

Or the instructor might present a current real example as a case study and ask the students for recommendations and proposed solutions.
Consider rural healthcare.

• An example that was recently presented to the students.

• A report on local television about rural hospitals in Oklahoma.
Reviewing the video

• What are the financial issues?

• Do we have enough information?

• What are the management issues?

• Why are some rural hospitals successful?
Reading assignments and textbooks

• The text book is assigned; and reading is assumed each week.
Reading assignments and textbooks

Prior to the first class meeting all of the weekly reading assignments are posted for the entire semester.
Reading assignments and textbooks

• The syllabus, about 25 pages in length, includes:
  – Weekly textbook reading assignments
  – Weekly additional reading assignments
  – The rubric for the policy analysis paper
  – The competencies
  – The grading scale and method
  – Weekly team assignments
Reading assignments and textbooks

• Every time we offer the course, I have had to update the weekly reading assignments multiple times due to important developments.
Keeping Current

As an example, there were some developments in March 2017 regarding the litigation titled House of Representative v. Secretary Price regarding whether the ACA had a valid congressional appropriation authorizing the ACA to pay cost-sharing reduction subsidies.
Keeping Current

Then in April and May 2017 we had several developments as the House passed the American Health Care Act (AHCA).
Keeping Current

• In July the Senate debated its version of replacing the Affordable Care Act. The issues in this policy debate are being included in the curriculum during the fall semester 2017.
Summary

• In conclusion, you have seen how higher education is working to prepare future healthcare leaders.
Summary

Course content - using a competency-based curriculum.
Summary

• Teaching methods – using team based learning, case studies, problem solving, assignments involving critical thinking, workplace simulation and role play.
Summary

We are preparing students to be future healthcare leaders capable and competent to address the management challenges facing the healthcare industry related to operational and financial issues.
Thank You