Transition Guide for

Health Care Finance: Basic Tools for Nonfinancial Managers, Fifth Edition

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4th Ed. Chapter	5th Ed. Chapter #	Fifth Edition Table of Contents	Comments
		PART I: HEALTH CARE FINANCE OVERVIEW	
1	1	Introduction to Health Care Finance	
2	2	Four Things the Health Care Manager Needs to Know About Financial Management Systems	
	3	The Digital Age: Changing the Landscape of Healthcare Finance	NEW CHAPTER: This new chapter is about understanding the impact of data analytics and big data, along with other important trends in the changing landscape of healthcare finance. It is important to recognize that digital advancements in health care are the drivers that enable innovation.
		PART II: RECORD FINANCIAL OPERATIONS	
3	4	Assets, Liabilities and Net Worth	
4	5	Revenues (Inflow)	
5	6	Expenses (Outflow)	
6	7	Cost Classifications	
		PART III: TOOLS TO ANALYZE & UNDERSTAND FINANCIAL OPERATIONS	
7	8	Cost Behavior and Break-Even Analysis	
8	9	Understanding Inventory and Depreciation Concepts	A new section about drug distribution systems in use in hospitals has been added to this chapter.
8-A	9-A	Appendix: A Further Discussion of	

		Accelerated & Units of Service	
		Depreciation Computations	
9	10	Staffing: Methods, Operations & Regulations	A new section has been added to the Staffing
			chapter describing legislation that
			requires reporting "verifiable and
			auditable" payroll information for
			the "Nursing Compare" website, along with information about
			existing Certificate of Need
			regulations
		PART IV: REPORT &	
		MEASURE FINANCIAL	
		RESULTS	
10	11	Reporting As a Tool	
11	12	Financial and Operating Ratios as	
10	10	Performance Measures	
12	13	The Time Value of Money	
12-A	13-A	Appendix: Present Value Table	
12-B	13-B	Appendix: Compound Interest Table	
12-C	13-C	Appendix: Present Value of an	
		Annuity	
		PART V: TOOLS TO REVIEW &	
		MANAGE COMPARATIVE	
10	1.4	DATA	
13	14	Trend Analysis, Common Sizing & Forecasted Data	
14	15	Using Comparative Data	
14	13	PART VI: CONSTRUCT &	
		EVALUATE BUDGETS	
15	16	Operating Budgets	
	16-A	Appendix: Creating A DRG	NEW APPENDIX - This new
		Budget for Respiratory Care: The	appendix sets out a step-by-step
		Resource Consumption Approach	DRG budget methodology.
	16-B	Appendix: Reviewing A	NEW APPENDIX - This new
		Comparative Operating Budget	appendix describes the review of a
		Report	section from an actual operating
1.0	1.7		budget report.
16	17	Capital Expenditure Budgets	
16-A	17-A	Appendix: A Further Discussion of	
		Capital Budgeting Methods	

		PART VII: TOOLS TO PLAN,	
		MONITOR & CONTROL	
		FINANCIAL STATUS	
17	18	Variance Analysis & Sensitivity	
1 /	10		
18	19	Analysis Estimates, Benchmarking & Other	
10	19	Measurement Tools	
	20		NIEW CHIADDED
	20	Understanding the Impact of Data	NEW CHAPTER
		Analytics and Big Data	
		PART VIII: FINANCIAL	
10	2.1	TERMS, COSTS & CHOICES	
19	21	Understanding Investment Terms	This chapter was originally only
		& Statistical Terms Used in	about investment terms; it now has
		Finance	a new section about understanding
			statistical terms.
20	22	Business Loans and Financing	
• • •		Costs	
20-A	22-A	Sample Amortization Schedule	
21	23	Choices: Owning versus Leasing	
		Equipment	
		PART IX: STRATEGIC	
		PLANNING: A POWERFUL	
		TOOL	
22	24	Strategic Planning and the	
		Healthcare Financial Manager	
22-A	24-A	Appendix: Sample SWOT	
		Worksheets & Question Guides	
23	25	Putting It All Together: Creating a	
		Business Plan	
	26	Understanding Strategic	NEW CHAPTER – This new
		Relationships: Health Delivery	chapter focuses upon describing the
		Systems, Finance and	strategic relationships between and
		Reimbursement	among health delivery systems,
			finance, and reimbursement. This
			chapter assists a manager in
			recognizing both differences and
			interrelationships and in applying
			this recognition to their own
			organization's structure.
		PART X: INFORMATION	
		TECHNOLOGY AS A	
		FINANCIAL & STRATEGIC	

		TOOL	
	27	Understanding Value-Based Health Care and Its Financial & Digital Outcomes	NEW CHAPTER – Value-based performance, the subject of this new chapter, is particularly important because it is the key to both improving patient care and reforming payment systems. Healthcare organizations should define what value means and make sure that definition is shared across
24		Information Technology and EHR: Adoption, Requirements, Initiatives & Management Decisions	the entire entity. Omitted from 5 th edition (now replaced with new value-based chapter)
24-A		Appendix: The E Prescribing (eRx) Incentive Program	Omitted from 5 th edition
	28	New Payment Methods & Measures: MIPS & APMs for Eligible Professionals	NEW CHAPTER – This new chapter highlights significant legislation and regulations that change payment methods and performance measures for physicians and other eligible professionals. The new payment method for physicians hinges upon proper reporting of new performance measures. The new system is a true reform, as it replaces a physician payment system that has been in effect for decades.
	28A	Meaningful Use: Modified and Streamlined, With A New Name	NEW APPENDIX – This new appendix describes the evolution of meaningful use before and after its transition into the new physician performance measures that are described in Chapter 28.
25		Electronic Health Records Framework: Incentives, Standards, Measures and Meaningful Use	Omitted from 5 th edition (because incentives are ending).
	29	Standardizing Measures & Payment In Post-Acute Care: New Requirements	NEW CHAPTER— This new chapter is about important legislation and regulations that

			standardize measures and require studies about payment reform for post-acute care. This means performance measures for skilled nursing facilities, home health agencies, inpatient rehabilitation facilities, and long-term care
			hospitals are being standardized. Models for a patient-centered payment system that cuts across all four care settings are also being created.
26	30	ICD-10 Implementation Continues: Finance & Strategic Challenges for the Manager	This updated chapter focuses upon challenges for the manager within ICD-10 implementation. An allnew section introduces useful Key Performance Indicators that are used to assess an organization's ICD-10 implementation progress.
26-A	30-A	Appendix: ICD-10 Conversion Costs for a Midwestern Hospital	
		PART XI: CASE STUDIES	
	31	Case Study: The Doctor's Dilemma	NEW CASE STUDY – This new case study is about a physician deciding whether or not to sell his practice to a health delivery system.
27	32	Case Study: Strategic Financial Planning in Long-Term Care	
28	33	Case Study: Metropolis Health System	
28-A	33-A	Case Study Appendix: Metropolis Health System's Financial Statements & Excerpts from Notes	
28-B	33-B	Case Study Appendix: Comparative Analysis Using Financial Ratios and Benchmarking Helps Turn Around a Hospital in the Metropolis Health System	
29	33-C	Case Study Appendix: Proposal to Add a Retail Pharmacy to a	

		Hospital in the Metropolis Health	
		System	
		PART XII: MINI-CASE	
		STUDIES	
30	34	Mini-Case Study 1: The Economic	
		Significance of Resource	
		Misallocation: Client Flow through	
		the Women, Infants, and Children	
		Public Health Program	
31	35	Mini-Case Study 2: Technology in	
		Health Care: Automating	
		Admissions Processes	
A	A	APPENDIX A: Checklists	New Checklist A-6
В		APPENDIX B: Web-Based and	Omit in 5 th edition
		Software Learning Tools	
		Glossary	New terms added
		Examples and Exercises, Solutions	New examples & exercises added
		and Supplemental Materials	