

Hawaii Health Systems Corporation Report to the Legislature Act 124 (2016)

The 2016 Legislature appropriated operating funds to Hawaii Health Systems Corporation (“HHSC”) in Act 124 that also included several provisos related to the anticipated transfer of the Maui region of HHSC to private operation. With an understanding that the Maui region has the largest operation of all the HHSC regions, and has been the largest contributor to HHSC corporate expenses, the Legislature wisely asked for an analysis of the impact of the departure of the Maui region on the corporate office through the following proviso (“the proviso”):

“SECTION 15.1. Provided that:

- (1) The board of directors of the Hawaii health systems corporation shall prepare a plan to reduce expenditures under Hawaii health systems corporation - corporate office (HTH210) for each fiscal year of the fiscal biennium 2017-2019 to reflect the departure on June 30, 2016 of the Maui regional system from the Hawaii health systems corporation so as not to negatively impact the remaining regions;
- (2) In addition to the proposed reduction of expenditures, the plan shall explain and justify any inability of the board of directors to reduce expenditures of the corporate office by the same amount as the assessment previously imposed on the Maui regional system for those expenditures; and
- (3) The board of directors shall submit the plan to the legislature and governor no later than November 1, 2016.”

The HHSC Corporate Board of Directors (“Corporate Board”) submits this report in response to the Legislature’s request.

Overview of the Organization of the HHSC System and Governance

Before specifically addressing the proviso, an overview of the organization and governance of the HHSC system will provide context. HHSC has an unusual governance system in healthcare affecting the functions and costs associated with the corporate office, and the decision making process for making changes to it.

The HHSC system currently encompasses 14 facilities in five regions: Maui, East Hawaii, West Hawaii, Kauai and Oahu, and two non-profit affiliates, Alii Community Care and Kahuku Medical Center. The total operating expense for the system was \$709.6 million in FY2016, with Maui Region’s operating expense at \$290.7 million, representing approximately 41% of the total.

The membership of the Corporate Board is representative of the five regions, wherein twelve directors reside in four regions (three directors from each) and four members reside in the Maui Region. The Governor appoints one representative from each region, and the others are appointed by the respective Regional Boards including their respective Regional CEOs. The

Governor also appoints one at large member and the Director of Health has an ex officio position. The role of the Corporate Board is related to system-wide advocacy, policy development and collaboration with the Regional Boards to achieve common goals. With the passage of Act 290 in 2007, HHSC governance became decentralized with each region having its own Board of Directors with autonomy and control of their respective facilities, operations and budgets. The Regional Boards are self-perpetuating. All general fund appropriations to HHSC are distributed to the regions through an allocation method they determine collectively. The regions also determine the corporate office budget with those costs generally allocated amongst the regions proportionate to the size of operating budgets. The corporate office's role is to perform limited functions as determined by the Regions. The process to determine those functions and the corporate office budget was set forth as follows:

“§323F-21 Fiscal provisions.

(d) Beginning with the first of the legislative biennium budget years following the establishment of a regional system board, and for each biennium period thereafter, the corporation shall call together all the regional systems through representatives selected by each regional system board, and the chairs of the facility management advisory committees, if any, to determine which services and functions should be provided by the corporation for the next biennium budget period, consistent with this chapter. As part of the biennium budgeting process, the corporation board and the representatives of each regional system, working through the corporation board regional representatives, shall agree upon an allocation methodology for funding the agreed upon and statutorily created corporate services and functions.”

HHSC holds an annual meeting with participation by the Corporate Board and all the Regional Boards. At the last meeting in the fall of 2015, after the passage of Act 103 enabling Maui's departure, no significant changes to corporate functions or personnel were suggested.

HHSC Corporate Office Organization and Functions

The corporate office of the HHSC system performs limited but critical centralized functions. The costs of the corporate office are extremely low in comparison to industry norms. In FY2016 the corporate overhead was \$16.5 million, representing 2.3% of total expenditures of the system. This is compared to industry norms of 8-15% that might be found in hospital systems such as Hawaii Pacific Health or Queens Health Systems. The reason for the low HHSC overhead is in part due to increased regional activities in our system as compared to other systems, but also due to a very small administration and a minimal staffing approach to accomplish the functions performed. Efforts are made to assure that the maximum funds possible are available to the regions to be spent on direct patient care.

The corporate office is organized into five departments; administration, legal, finance, human resources, and information technology. Each department fulfills a number of functions that are agreed upon by the HHSC regions and indispensable for the system. These functions are fully described in detail in the Corporate Office Functions spreadsheet attached as [Appendix A](#). The most recent corporate office organizational chart, attached as [Appendix B](#), also shows more detail as to how the employees of the corporate office are grouped and the types of positions. It should be noted that because HHSC has position control many of the vacant positions on the

organizational chart are unbudgeted and in the future will be abolished or re-described. In this report we will briefly summarize the functions and personnel of the departments.

The corporate administration consists of the CEO, a secretary, and the Chief Compliance Officer. The General Counsel for HHSC also assists administration as the Chief Operating Officer providing cost savings and allowing the Executive Director of Operations position to remain vacant. The administrative office supports all the activities of the Corporate Board and is responsible for system strategic planning, the operations of the corporate office, and system-wide compliance activities as well as being the point of contact for the Legislature and external stakeholders.

The corporate legal department has 5 positions with three attorneys. They negotiate and manage system-wide insurance programs including malpractice, and provide advice and counsel to the corporate office and regions in matters related to claims management, risk management, retention of outside counsel, and employment and labor issues. They are also responsible for facilitating the HHSC systems' statutorily required Policy Committee, review and advice on system-wide contracts, vendor management, and advice on ethics and regulatory compliance for corporate employees and Board members. In a highly regulated environment where errors can cost millions of dollars, they provide critical consultative resources on compliance and regulatory issues that can prevent losses. Their expertise can also help improve reimbursement while remaining in compliance with applicable federal and state rules and regulations impacting the health care services that HHSC facilities provide. The legal department has been crucial to the negotiations related to the numerous agreements and processes related to the Maui transfer.

The finance department has 17.5 positions organized into four divisions. The general accounting and financial management division is responsible for system-accounting guidance on recording and reporting of transactions, coordinates annual operating and capital budgeting processes and provides budget guidance and reporting requirements for the regions, handles the HHSC financial requests to the Legislature, manages HHSC municipal leasing arrangements, coordinates the annual financial statement audit, and represents HHSC on fiscal issues with external stakeholders such as Healthcare Association of Hawaii. The functions of the finance department are critical to the finances of the regions and are not duplicative. The value of the finance department brings to the regions can be seen in the list of accomplishments attached as Appendix C.

The purchasing/materials management division is staffed by 5 positions. They develop and update corporate-wide materials management and procurement policies and procedures and provide guidance to the regions on procurement, provide advice on SPO price lists and Professional Services lists, manage procurements (over 300 system-wide contracts) and administers the HHSC Group Purchasing Office contract for facilities participation with approximately \$90M in annual purchases.

The reimbursement and cost reporting division of the finance department has a total of 7 positions and performs functions critical for HHSC's finances. Chart coding and billing functions are generally performed at the regional level (one of the reasons the corporate overhead for HHSC is lower than that normally seen in multi-hospital systems which tend to centralize this function), however this division performs other functions related to reimbursement centrally. They lead contract negotiations with third party payers and advises the facilities on operational

impacts of contracting issues and conduct retrospective payment reviews of third party contracts to identify under/overpayments. The division then works with payors to resolve payment issues and develop HHSC settlement proposals. Another important function is to maintain a standardized Charge Description Master (“CDM”), which can drive maximum reimbursement when CDM codes are regularly updated after analysis of reimbursement patterns. They also assure the regions are compliant with 3rd party payer regulations and guidelines for appropriate billing and reimbursement. The division maintains a number of financial information applications and databases to enable users across the HHSC system to access and analyze financial data more effectively.

The revenue cycle division has only one employee but performs functions that generate substantial revenue for the regions. The functions include dissemination to all HHSC facilities of information and best practices relating to coding, billing, collections and reimbursement, development and implementation of standardized policies and procedures relating to revenue cycle operations, and maintenance of key performance indicators of HHSC revenue cycle operations in the regions. The division also assists with procurement and management of vendor contracts that perform revenue cycle operations on behalf of the regions while serving as a liaison between the regional business offices and insurance payers related to billing problem identification and resolution.

The human resources department is responsible for personnel issues system-wide. Each region of HHSC has human resources departments of varying sizes that are supported by 12 positions in the corporate office. As a separate jurisdiction, HHSC has position control and provides all human resources functions for its employees without assistance from DHRD. Classification, payroll, recruitment, investigations, training, workers compensation and maintenance of HHSC human resource information systems are the corporate office’s responsibility. The corporate office also handles labor relations and collective bargaining with all reductions in force and all grievances above Step 1 handled by the corporate office.

The largest department of the corporate office by far is the information technology (“IT”) department. Its employees and operating expenses represent a little over 60% of total costs.

The IT technical services division has 17 positions which maintain all infrastructures for information technology for the HHSC system. They maintain all data circuits and internet connections, configure and maintain disaster recovery and business continuity infrastructure, maintain servers, email, firewalls, cybersecurity, wide area network, wireless, antivirus, virtual desktops and conferencing services while also providing all support for these services. The division operates and maintains various enterprise databases and data storage activities while developing new plans for more efficient data management.

The IT helpdesk/operations division has 21 positions that provide enterprise wide Helpdesk support 24/7 to all the facilities. The helpdesk functions are essential to maintain safe patient care at all times as healthcare workers today are dependent on robust internet connections, secure logins, complex software and video connections among many technical supports that are required to deliver safe patient care in today’s healthcare environment.

The IT department’s project management, training and meaningful use units are small with 8 positions, but provide important functions for the system. The project management office

leads project governance, monitors project methodology and communicates project decisions as well as the rationale on why these decisions were made. They track basic information on the current status of all projects in the organization. Training is provided in process improvement practices, organizational design and performance enhancement basics. Projects managed are both electronic medical records (“EMR”) related and non-EMR related in nature. The meaningful use position is responsible for understanding the complex guidelines of a federal program that provides payments to hospitals related to the implementation and use of EMR and assisting regional facilities in workflows that will facilitate compliance. The meaningful use program provides substantial revenue to the regions. Since its inception, HHSC has received \$7,627,395 in payments through FY2015. We are estimated to receive \$4,857,307 for FY2016 if all targets are met.

The largest division is the business services and clinical support division with 37 positions. They are responsible for all aspects of the Soarian EMR system including the financial and clinical applications. They build, test, train and implement new applications and necessary changes to the system and reports. They support an array of financial business system applications including Soarian Financials (Patient Scheduling and Appointments, Patient Access and Revenue Management), Electronic Data Management (“EDM”), Health Information Management (“HIM”), System Interfaces, Patient Quality Measures and Legacy Applications that are critical to billing and collections. The clinical support team focuses on the patient care side of the EMR. They support the implementation of software upgrades and at the facilities providing education, training and support for the “go lives” when there are changes, such as when the system had to change from ICD-9 to ICD-10 last year. This division also provides the clinical support to the EMR in the various facilities 24 hours a day 365 days a year. The clinical support includes nurses and pharmacists who understand the needs of the care providers in the facilities as well as being experts on the EMR. The Soarian EMR system is used by the Maui, West Hawaii and Kauai regions only. East Hawaii implemented a different EMR system and the Oahu region is implementing a different EMR that is tailored to long-term care operations.

Analysis of Departure of Maui Region Impact on Corporate Office and Recommendations

The Maui Region historically has contributed more than any other region to corporate office expenses which are allocated proportionally among the regions by the size of their operating budgets. It is reasonable to ask if expenses can be reduced or efficiencies achieved after Maui’s departure.

The corporate office has done a thorough review of personnel, functions and costs to identify opportunities for savings after Maui’s departure. In August of this year, the corporate office employees were surveyed. Surveys were developed for all employees and an additional survey for team leaders. They were asked to review their job descriptions and consider how they matched their current activities, and how their jobs might change after Maui’s departure. Their suggestions were sought for opportunities for improvement and providing increased value to the remaining regions in the future. There was an excellent response rate of 80% overall and many useful suggestions.

The corporate office already operates under a minimal staffing approach to accomplish the functions performed. As such, many functions have only one person who performs them.

This is typical in finance, human resources and IT with the wide array of databases HHSC depends on. An individual may be developing reports that are needed from a particular database by all regions. The work is in designing, developing and testing the report. The fact that the report would be used by four regions instead of five does not significantly reduce the work of that individual. If there is more than one person performing the same function it is often because the function is needed 24 hours a day, 365 days of the year and requires multiple individuals with the same knowledge to fill the schedule. In the IT application division that supports the EMR multiple clinical professionals including nurses and pharmacists must be on call to support issues with the EMR that may arise while patients are being cared for. While Maui Region was the largest user of the EMR system the same on-call schedule must continue for the remaining regions. Or, as in the area of contracting for example, the volume of contracts requires several employees. Maui's departure does not decrease the time spent by employees on system wide contracts. Also as the largest region, Maui hired its own employees or entered into contracts with consultants in some instances that caused them to rely less on the corporate office than other regions. All of these factors contribute to the conclusion the workload will decrease to some degree after Maui's departure, but the reduction is modest, and is not proportional to the monetary support Maui provided.

The regions and the Corporate Board have targeted the organization and functions of the corporate office for efficiency for several years prior to the passage of Act 103. This has resulted in a number of administrative positions being vacated and not filled including Director of Public Affairs, Chief Medical Officer, Executive Director of Operations and Director of Quality positions. The current CEO and management team has absorbed the functions performed by those positions. Each of the departments has similarly attempted to become more efficient through attrition and reassignment of responsibilities. Each vacancy is carefully evaluated and vacancies may be allowed to persist as management analyzes the options available. For example, this past year, after three individuals in the human resources department left, the department reassigned responsibilities and has left one position unfilled at a savings of approximately \$150,000.

While personnel costs are the largest portion of the corporate office expense (approximately 72%) the non-personnel costs have also been reviewed for reductions. In most departments non-personnel costs are modest and will not reduce significantly once Maui leaves. There are very few corporate contracts that do not automatically reduce if not used by the Maui region. But the reductions in contract spending will not be reflected in corporate expenses because each region has paid directly for its share of use of those contracts. The exception is the Soarian EMR contract, which unfortunately is also the largest non-personnel corporate expense. In that contract there is no provision to reduce the price when a region departs HHSC, thus the cost of Maui's participation will have to continue to be paid until the current contract ends in 2019. The West Hawaii and Kauai regions who also use Soarian will likely seek a more cost-effective solution after the end of this contract.

In the coming year the corporate office will utilize the results of our survey to pursue a course of re-alignment of responsibilities within the fiscal and IT departments that can drive increased revenue for the system. We will also pursue other opportunities suggested by the survey for additional value to the system once Maui leaves. But our current workforce is still needed. Already, the smaller regions are more likely to rely on the corporate office for expertise

and assistance. On several occasions the corporate office has provided staff to work part-time for the region temporarily to fill gaps in certain functions and to support and train new staff hired by the regions. In the coming year staff will be occupied with the additional responsibilities related to the Maui transfer including a substantial workload to not only prepare for the transfer but also to wind down operations afterward, storing records, collecting the outstanding revenue, and paying off accounts. After the transfer, corporate staff can provide greater service to the remaining regions. After the Maui Region's departure, the cost of the corporate office will be approximately 4% of HHSC's total expenditures which still represents a very low corporate overhead compared to other hospital systems.

The conclusion at the present time is that reduction in funding for the corporate office after Maui's departure is not indicated as it is unlikely to be a cost-effective approach overall. Corporate functions drive revenue for the remaining regions and decrease the risk of financial losses. The HHSC Corporate Board and the HHSC Regional Boards will hold their "all boards" meeting on November 30th, 2016, at which time the annual review of the corporate office and proposed budget for the coming year will be presented. At that time suggestions for changes to the corporate office will be discussed and recommended through the process described in statute.

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
ADMINISTRATION	2 FTE
Operation and management of corporation (HRS §323f-8)	
Hire, fire, supervise corporate office personnel.	
Maintain appropriate records and processes.	
Assist corp board in formulating strategic plans and presenting these to stakeholders.	
Work with RCEOs in developing best practices, benchmarks, policies, winning strategies to help further mission, vision, values of organization and RSBs.	
Work with key internal constituents to further mission, vision, values of organization.	
Represents HHSC and communicates with key external constituents, e.g., Legislature, State administration, community, legislative auditor, outside healthcare peers and groups.	
Develop corp budget and oversee budgeting process for corporate board; pull together RSB budgets.	
Prepare overall System budget from RSB budgets.	
Prepare budget justifications and testimony.	
Facilitates Ad-hoc Legislative Committee Meetings and presents testimony on behalf of the HHSC Corporate Board at legislative hearings.	
Act as liaison with external organizations on behalf of the corporation (e.g., HAH)- member of Government Relations Committee at HAH.	
Reports to the corporate board on the affairs and condition of the corporation.	
Fulfill statutory duties, such as, chief procurement officer.	
Decide appeals, such as, grievances and procurement protests.	
Provide support to the corporate board by setting up meetings, preparing draft agendas, providing information, taking minutes, and arranging travel, and general coordination and other support, as needed.	
Serve as President of Alii Community Care, Inc.	
Serve as President of Hawaii Health Systems Foundation and participate in the cross facility foundation coordination council.	
Responsible for communications from the Corporate Office.	
Conducts Corporate Office employee satisfaction surveys.	
Convenes annual Corporate Functions meeting.	
Oversees the development and implementation of system-wide initiatives (e.g., EMR/HIS project, time and attendance system, ICD-10 transition, and others).	
Supports regional initiatives (e.g., Leahi Center for Excellence for Long-Term Care, new medical center in Kona, HHSC Primary Care Residency Program, service mapping on Kauai, and others).	
Oversees capital improvement plan projects and identifies priorities and funding requirements.	
Provide liasion oversight of Roselani Place (HHSC Assisted Living subsidiary) Kahuku Medical Center, and other HHSC entities as needed.	
Serve as a Director on the Alii Community Care Board.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
PLANNING AND OPERATIONS	1.5 FTE
Organization and management of the corporate office facilities program.	
Assist PCEO to supervise and support the corporate office.	
Provide overall support and guidance to the corporate office departments as needed.	
Provide facilitation, administrative, and technical support to the corporate board's strategic planning committee.	
Provide facilitation, administrative, and technical support to the system wide task forces and all boards meetings (governance/PPP).	
PUBLIC AFFAIRS - HANDLED BY PCEO and EXEC. MANAGEMENT TEAM	1 FTE - vacant
Provide public affairs guidance and support to the corporate board, in addition to corporate and hospital management.	
Develop, plan, implement, evaluate, and direct both intra- and inter-organizational communications, which support mission and vision of HHSC, including but not limited to communications plans, news releases, bulletins, system website, brochures, and newsletter.	
Serve as a 24-hour on call liaison between HHSC and the news media, under the direction of appropriate corporate and/or hospital management to ensure that appropriate, concise, and timely information is developed and provided to the media at all times.	
Establish and maintain effective relationships with the media, community, other governmental agencies, legislators, trade organizations, lobbyists focusing on health-related activities impacting the system.	
Provide logistic/administrative support to the corporate board ad hoc public relations committee and regional /corporate foundations (quarterly meetings).	
Provides 24/7 public affairs support to the HHSC Kauai and Oahu Regions, as directed by the respective RCEOs and leadership teams.	
Provide administrative support to the HHSC Board Ad Hoc Public Relations Committee and HHSC Board Legislative Ad Hoc Committee, in addition to the Hawaii Health Systems Foundation and Fundraising Coordinating Council (Regional Foundations).	
COMPLIANCE	1 FTE (.2 for Kauai Region)
Establish, maintain, and update the HHSC Corporate Compliance Plan in partnership with all Regions to ensure cohesive, consistent, plan in compliance with OIG and CMS guidance.	
Liaison to the Audit & Compliance Committee ("ACC") and the HHSC Corporate Board of Directors on compliance issues with HHSC system-wide implications and provides recommendations to the ACC and Corporate Board on such compliance matters.	
Provide support and leadership to assist each region within HHSC in developing and implementing a regional compliance plan, including training, policy development and enforcement, training, auditing, responding to inquiries, conducting investigations and reporting to regional system boards and HHSC management and system-wide board as appropriate.	
Serve as Chairperson of the HHSC Corporate Compliance Committee that coordinates, develops, and processes system-wide plans, policies, and procedures.	
Coordinate the establishment and implementation of HHSC system-wide Corporate Compliance policies and procedures.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Responsible for identifying, measuring and reporting on the appropriate statistical measures concerning Corporate Compliance to the Board of Directors and management.	
Assist and facilitate external legal counsel compliance support for HHSC facilities.	
Ensure that HHSC Compliance Plan and Code of Conduct are up to date and effectively disseminated.	
Serve as Corporate-wide advisor and analyst on issues concerning HHSC Compliance, while each regional system continues to maintain primary responsibility for its regional corporate compliance program.	
Serve as Corporate representative to State and Federal activities, to third-party payors, and professional organizations on Corporate Compliance issues.	
Work with the HHSC Compliance Committee and internal auditor, as well as the regional systems to develop an on going auditing program designed to assist in the goal of ensuring that the corporation and its facilities remain compliant with all federal and state regulations.	
Oversee, coordinate, and provide guidance on system/regional internal audit plan development and implementation relating to compliance to keep regions up-to-date on Federal, CMS, OIG, and HRS regulatory changes.	
Develop and conduct or coordinate appropriate corporate compliance training and education programs for the HHSC board of directors and corporate staff; assist in development of such programs for use by RCOs and regional system compliance programs for regional system boards of directors, employees and medical staff.	
Oversee HHSC Corporate Compliance Hotline which ensures that HHSC has redundant systems for anonymous and appropriate resources for possible compliance complaints that works to both maintain confidentiality and also to quickly providing appropriate information regarding the content of the calls to RCOs for investigation and response as appropriate.	
Responsible for the investigation, corrective action and disciplinary action (if non-compliance substantiated) of all compliance issues at the corporate office and provides support for the same responsibilities held by RCOs at the regional system level.	
Serve as a resource and back-up for RCOs; facilitates inter-regional compliance meetings and ongoing training of RCOs.	
Develop and assists in the identification, implementation, and maintenance of privacy policies, plans, and procedures in coordination with RCOs and legal counsel.	
Provide support and leadership in privacy issues to assist each region to develop training programs, conduct investigations, respond to inquiries, and report to regional system boards and HHSC Board of Directors.	
Oversee periodic information privacy risk assessments for HHSC working in conjunction with the RCOs.	
Work with legal counsel and management, key departments, RCOs and committees to ensure the organization has and maintains appropriate privacy and confidentiality consent, authorization forms, and information notices and materials reflecting current organization and legal practices and requirements.	
Participate in the development, implementation, and ongoing compliance monitoring of all corporate office trading partner and business associate agreements, to ensure all privacy concerns, requirements, and responsibilities are addressed; provides leadership and assistance to RCOs in meeting their responsibility to provide such monitoring at the regional system level.	
Establish with management and operations a mechanism to track access to protected health information at the corporate office, within the purview of the organization and as required by law and to allow qualified individuals to review or receive a report on such activity and provides leadership and assistance to RCOs in meeting their responsibility to provide such systems at the regional system level.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Work cooperatively with the Health Information Management (HIM) Directors, RCOs and other applicable organization units in overseeing patient rights to inspect, amend, and restrict access to protected health information when appropriate.	
Provide leadership and assistance to RCO's in establishing and administering a process for receiving, documenting, tracking, investigating, and taking action on all complaints concerning the application of the organization's privacy policies and procedures at the regional system level in coordination and collaboration with legal counsel and others as appropriate.	
Provide leadership and assistance to RCO's to ensure compliance with privacy practices at the regional system level and consistent application of sanctions for failure to comply with privacy policies for all individuals in the organization's workforce, extended workforce, and for all business associates.	
Ensure HHSC compliance with the Hawaii State Ethics Rules by serving as advisor and analyst on matters that implicate the ethics rule at the corporate office and provides leadership and support to RCOs in providing such at the regional system level.	
Development of HHSC policies and procedures and training programs for Board members, management, and corporate office employees and on ethics and provides leadership and support to RCOs in developing such training programs at the regional system level.	
Coordinate HHSC's Institutional Research Board to ensure compliance with regulatory issues for research in HHSC facilities (such as HIPAA and human subjects protocols). Serve as HHSC's Language Access Coordinator working with the regional language access coordinators to develop a HHSC Plan for services to Limited English Proficient (LEP) patients.	
MEDICAL AFFAIRS - HANDLED BY PCEO and MANAGEMENT TEAM	2 FTE - vacant
Assists in the design, development, critique, testing, training, implementation and evaluation of new clinical information systems, and for the long range plan of HHSC clinical care systems.	
Works with physician champions to educate and advocate for clinicians within the system.	
Assists with the clinical information systems strategic planning and support.	
Works with management in developing strategies for ambulatory care.	
Assists with the risk management and quality programs, as a physician resource.	
Provides expertise in developing the electronic medical records system, champions clinicians and other medical staff in providing high quality, patient-centered, and cost effective care.	
Clinical Affairs: Represents and promotes medical staff participation in furthering the mission of the organization.	
Risk Management: Assists General Counsel in the development of risk management and risk management training programs. Attends enterprise-wide risk manager meetings.	
Quality: Organizes and supports the Regional CEOs and medical directors in formulating standards of care, policies and guidelines directed toward strategic direction for quality and consistency throughout the healthcare system. Supervises the corporate Director of Quality, attends QIPSC and Quality Council to provide guidance and clinical input.	
QUALITY IMPROVEMENT - HANDLED BY PCEO and MANAGEMENT TEAM	1 FTE - vacant
Coordinate the establishment and implementation of Quality Assurance policies and procedures.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Coordinates with quality professionals, Chief Nurse executives, regional leaders and others to monitor and report performance metrics and internal and external benchmarking to assist corporate and regional management to monitor and improve performance.	
Serves as staff member and coordinator of the Corporate Board's Quality Improvement and Patient Safety Committee and Quality Council.	
Provides guidance and technical assistance to the QC in the use of quality statistical methods and assists the facilities in evaluating problems and opportunities for improvement.	
Serves as a resource to the facility quality committees and teams.	
Develops system wide quality policies and procedures.	
FINANCE	
Financial Reporting & Management	4 FTE
Support and run meetings of HHSC Board Finance & Information Systems Committee.	
Prepare and provide testimony to the Legislature on any legislation related to HHSC finances.	
Coordinates and provides information for requests from Legislators and legislative staff.	
Support activities of Ali'i Community Care Board of Directors.	
Represents HHSC Financial Officers at IT Governance Committee meetings.	
Leads/coordinates monthly Regional CFO meetings.	
Develop and disseminate monthly system-level financial statement analysis.	
Performs closing of facility general ledger on a monthly basis on the general ledger system.	
Prepare facility financial statements and consolidated financial statements.	
Provide budget execution and projection reporting for operational and biennium budgets.	
Maintains general ledger chart of accounts. Approves and inputs new general ledger accounts into the chart of accounts.	
Updates HHSC Accounting Manual.	
Consolidated operating, capital, and cash budgeting.	
Coordinate and write Annual HHSC Financial Statement Audit Report covering all facilities.	
Prepare RFP and in coordination with regions, select one accounting firm to do audits.	
Represent HHSC in all discussions with State Comptroller.	
Act as liaison for the Legislative Audits.	
Obtain CIP input from regions.	
Legislative appropriation submissions.	
Manage municipal leasing program.	
Manage process for release of general obligation bonds for CIP and monitor project expenditure.	
Prepare prioritized CIP requests for B&F.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Prepares the following State of Hawaii forms: journal vouchers, A-19, Treasury Deposit Receipts, Revenue Estimates, Variance Reports, Budget Details, Summary Warrant Vouchers, Allotment Advices, and Telecom Requests.	
Vendor relations.	
Assist payroll staff with questions and resolution of problems.	
Responsible for maintaining Corporate Office general ledger, accounts payable, and payroll.	
Prepares Corporate Office budget and monthly reports of actual performance to budget to Corporate executives.	
Banking relations.	
Respond to Executive Branch requests for information.	
Cash management for HHSC sweep account.	
Contract Management & Procurement	5 FTE
Contract service for construction, professional services, supply, goods, consultant, and physicians through Corporate Contracting Office.	
Develops Corporate wide RFI's, RFQ's & RFP's and Professional Services List for system-wide initiatives.	
Assist and/or prepare contracts for the facilities when requested, regardless of dollar value.	
Assist and advise the facilities on SPO Price Lists and Cooperative Agreements.	
Renegotiate existing contracts when in the best interest of the facilities.	
Renegotiate and manage prime vendor contracts.	
Standardize procurement forms system-wide.	
Administer the HHSC Group Purchasing Office (GPO) contract for facilities participation.	
Administer contract to assist the facilities in procurement analysis and trends.	
Establish prime vendor contracts for HHSC facilities to use for Med/Surg and pharmaceutical supplies and distribution throughout all regions.	
Develop and update Corporate Wide Contracts and Material Management (Procurement) policies and procedures.	
Resolve facility vendor problems at Corporate level.	
Assist and advise the facility procurement personnel on day-to-day problems and procurement issues.	
Manage automated contract management system with database on all contracts. Develop efficient, system-level contracting system in compliance with procurement policies.	
Develops and manages ongoing tracking logs of procurement forms for Exemptions, Sole Sources, procurement Violations, Contract Renewals.	
Responds to legislative audit requests, State Procurement review requests as needed.	
Receive, review and administer State Procurement Office requests for price list procurement actions.	
Serves as the de facto project manager for select system wide procurement efforts.	
Prepares detailed Scopes of Service based upon Technical Representative input.	
Research, interpret and render opinion on state procurement statutes and rules in conjunction with Legal Dept.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Contract service for construction, professional services list, supply, consultant, and physicians through Corporate Contracting Office.	
Monitor contracts and re-evaluate prior to expiration.	
Ensure that all services are properly contracted based upon \$ threshold.	
Negotiate and manage system-wide equipment standardization (i.e., B. Braun for infusion pump, SCD pumps, GE Maint. Etc..) contracts.	
Lead/chair the HHSC Regional Contract Managers Team, procurement information, and reporting.	
Lead/chair the HHSC Regional Material Managers Team, procurement information, and reporting.	
Renegotiate contracts on a system basis versus individual facilities where savings can be achieved.	
Manage the entire system fleet vehicles, license plates, insurance, titles, annual inventory review through the Regional CEOs and authorizes the disposition of cars, trucks, Buses, Vans, Ambulances, and other vehicles.	
Coordinates responses relating to procurement and contracts for financial audits.	
Administer, review the HHSC Group Purchasing Office (GPO) contract LOP's, LOD's and LOC's forms for facilities and or as a system wide participation.	
Develops and manages Sharepoint site for Contract and Materials Mgt.	
Generate, modify and ensure compliance with HHSC policies and procedures as they may affect the regions.	
Cost Report & Reimbursement	4 FTE
Develop, prepare and file the annual Medicare, Medicaid and HMSA 65C+ cost reports for all HHSC facilities (except for East Hawaii) and home office in accordance with regulatory rules and requirements. Address issues unique to HHSC facilities such as hospital specific payments, LTC PPS, HHA, Swing-beds, RHC and CAH.	
Analyze facility-specific management statistical, general ledger, accounts payable, and other data sources to compile worksheets/schedules in support of cost reporting requirements.	
Develop program information to support the filing of cost reports including Medicaid/Quest Expanded Access logs, Medicaid eligible days for Medicare DSH reimbursement/340 B Outpatient Drugs, and Bad Debts (see next bullet).	
Claim Medicare Bad Debt reimbursement for Medicare/Medicaid crossover claims requiring extensive data mining and manipulation of Medicare Provider and Statistical Report (PS&R), Medicaid Takeback and ERA information, and data match ups to corrected internal AR records.	
Address cost report issues impacting multiple facilities including completing the HCFA 339 Questionnaire, Clinical Laboratory Joint Venture related party costs, identification of the non-allowance lobbying expenses on membership dues paid to AHA, HAH and AHCA.	
Respond to all government payor's cost report audit/desk review questions and data requests, ensuring financial impact to cost report settlements are minimized or accrued.	
Review all tentative settlements, interim rates and final settlements for accuracy and appropriate reimbursement levels.	
Prepare and submit requests for cost report reopening's and appeals.	
Analyze State and Federal regulations impacting billing & reimbursement and advise management of financial and operational impacts, as needed.	
Assist facilities in estimating the third-party reserve amounts and working with the financial auditors on the reserve methodology and calculations.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Lead negotiations with third party payors and advise facilities on operational impacts of contracting issues.	
Develop payor specific and cost information to analyze the financial performance of third party payor.	
Provide comparative financial analysis to management in renegotiating third-party payor contract rates using historical payment information, comparative payment levels of other third party payors, costs, charges.	
Maintain and update rate schedules for third party payors.	
Conduct retrospective payment reviews of third party contracts to identify under/overpayments. Work with payors to resolve payment issues and develop HHSC settlement proposals.	
Serve as an 'in-house' resource to address facility-specific issues including provider enrollment, reimbursement, billing and compliance.	
Compile and provide annual bond interest allocation by facilities by projects for capital improvement projects funded by State of Hawaii General Obligation Bonds (CIPs) for reporting on cost reports and financial statements.	
Build and maintain expected reimbursement calculations in Soarian Financial contract management module.	
Coordinate and/or provide information to HAH, legislators, and other organizations requesting system-wide financial and/or utilization information.	
Serve as the HHIC Liaison and DataBank Advisory Committee.	
Provide Med-Quest with HHSC system-wide Financial reports for Medicaid, Quest and Uninsured patients to maximize Federal Dollars to the State of Hawaii and to provide supplemental payments to HHSC and private hospitals for uncompensated care losses from Medicaid & Medicaid Managed Care plans.	
Provide accounting support to consistently record, reconcile and report uncompensated supplemental payments from Medicaid and Medicaid managed care plans system-wide.	
Financial Information System	1 FTE
Develop / Maintain / Provide Financial Info Application including Trial Balance, Accounts Payable, Charge Description Master & Management Statistics inquiry to enable users to access and analyze financial data more effectively.	
Develop / Maintain HR tracking application, Dept Financial, and various other applications for Oahu Region.	
Develop / Maintain Dept Financial application for East Hawaii Region.	
Develop / Maintain Accounts Receivable valuation application to support consistent and accurate financial reporting.	
Develop the extracts and automate the submission of the monthly databank information to HHIC.	
Develop the extracts and provide the financial information to Critical Access Hospitals in the survey format for ease of input for RPM survey.	
Develop/ Maintain paid hours and dollars by pay period by fiscal year by employee, job code and department.	
Establish/Develop/Maintain Profit & Loss Statement at payor, patient type and account level.	
Develop / Define new opportunities to increase efficiency and analyze information.	
Creating upload files from legacy system (G/L, A/P) for import into MS4.	
Developing / updating application for the transition into MS4.	
Creating extract files for Databank and RPM.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Creating extract files and reports on the DSS system.	
Maintaining G/L tables on Soarian Financial.	
Charge Description Master	1 FTE
Develop policies and procedures to maintain a standardized "Charge Description Master (CDM)"	
Review and ensure CDM codes are updated and compliant with 3rd party payor regulations and guidelines for appropriate billing and reimbursement.	
Review CDM prices annually and recommend increases based on cost and/or Hawaii industry standards & assist in implementation of price increases w/notification to contracted 3rd party payor.	
Coordinate the maintenance of CDM's with facilities.	
Provide access to quarterly Management Statistics summary by patient type by CDM number with revenue code and HCPCS code for financial management and reporting.	
Revenue Cycle	1 FTE
Research, interpret, disseminate, and assist in implementation / adherence to regulatory requirements for HHSC facilities related to revenue cycle functions i.e. registration / admissions, charge capture, coding, billing, collections, reimbursement, and compliance.	
Develop and implement standardized revenue cycle operational policies and procedures in coordination with management and staff of clinical and revenue cycle departments at each facility.	
Identify system wide and/or facility specific billing issues and work collaboratively with management, staff and 3rd party payers to develop solutions and resolve problems that cause delays in the adjudication of claims.	
Serve as liaison between the facility's business office staff and 3rd party insurance payers.	
Develop, maintain, and interpret revenue cycle key performance indicators, finance dashboards, and reporting of HHSC revenue cycle operations to Regional CEO's, Regional CFO's, and Management of revenue cycle departments at all facilities.	
Develop and provide "ad hoc" reporting on revenue cycle performance as requested by management and staff from the facilities, external vendors, internal/external auditors, and legislative staff.	
Negotiate contracts and coordinate implementation efforts between external revenue cycle vendors and HHSC management and staff of revenue cycle departments.	
Negotiate contracts and coordinate efforts between external collection agencies and facility staff in the recovery of bad debt.	
Negotiate with the State of Hawaii, Attorney General's collections unit to provide bad debt recovery services.	
Serve as an internal resource for researching specific revenue cycle questions and issues for management and staff at the facilities.	
Facilitate process improvements efforts related to revenue cycle as requested by the facilities.	
Discuss, interpret, and implement new billing requirements with facility's departmental management and staff.	
Provide training and education on new requirements.	
Interpret and coordinate the implementation of new billing requirements with IT software applications staff to ensure that software functionality is consistent with regulatory requirements.	
Provide guidance, training, and reporting as required to HHSC Corporate Compliance Committee, Regional Compliance Officers and HHSC Internal Audit staff.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

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RESOURCE DETAIL	PERSONNEL
Research and interpret guidelines for specific compliance concerns related to revenue cycle issues.	
Interpret and coordinate the implementation of new billing requirements with IT software applications staff to ensure that software functionality is consistent with regulatory requirements.	
Provide guidance, training, and reporting as required to HHSC Corporate Compliance Committee, Regional Compliance Officers and HHSC Internal Audit staff.	
Research and interpret guidelines for specific compliance concerns related to revenue cycle issues.	
INFORMATION TECHNOLOGY	1 FTE
The HHSC Corporate IT department consists of many divisions, each of which provides significant value to HHSC and the regions.	
Technical Services Division (TSD)	16 FTE
TSD is responsible for providing the enterprise infrastructure that allows the hospital system to utilize information and technology to support and enhance their business decisions and operations. Common TSD responsibilities include:	
Enterprise system support 24/7.	
Procure, configure and maintain all data communications circuits that interconnect the hospital system.	
Procure, configure and maintain primary and secondary internet connections.	
Maintain connectivity to Cerner.	
Configure and maintain the network infrastructure that interconnects the hospital system.	
Configure and maintain disaster recovery and business continuity infrastructure.	
Configure and maintain EMC storage infrastructure.	
Configure and maintain all enterprise wireless connectivity for all wireless devices.	
Configure and maintain circuit load balancers and enterprise firewalls.	
Configure and maintain approx. 160 virtual servers and approx. 1200 virtual desktops.	
Configure and maintain master images for all EMR virtual desktops.	
Configure and maintain enterprise-wide email.	
Configure and maintain Active Directory and Domain Services.	
Configure and maintain DNS, WINS, and group policies.	
Configure and maintain file shares and permissions.	
Configure and maintain SharePoint.	
Configure and maintain Airwatch (mobile email).	
Configure and maintain various enterprise databases.	
Configure and maintain patching, antivirus, and encryption services.	
Configure and maintain spam filtering.	
Configure and maintain web filtering.	
Configure and maintain Citrix support.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

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RESOURCE DETAIL	PERSONNEL
Configure and maintain website and branding.	
Configure and maintain the Scopia (VTC) video conferencing hardware.	
Provide corporate desktop support.	
Provide strategic planning, budgeting, and procurement for any enterprise technology.	
IT Operations	1 FTE
IT Operations consists of two teams -- Corporate Help Desk (Corp HD) and Corporate Data Center (CDC).	
Corp HD	20 FTE
Corp HD provides level 1 support to end users at all facilities currently using the Soarian EMR product. As level 1 support, Corp HD serves as the initial point of contact for end users and assists the regions in the following manner:	
Provide 24 x 5 support and use Cerner HD to provide 24 x 7 x 365 support. Corp HD and Cerner HD create an average of 2000 tickets per month in the Remedy help desk system.	
Resolve approximately 50 percent of problems/issues.	
Performs password reset.	
Gather relevant information and route tickets to escalate and engage level 2 support teams.	
Create/Update/Terminate user accounts for Soarian application, MS4, and McKesson.	
Track/Report/Manage Service Level Agreements (SLAs) from Corporate to regions and from Cerner to HHSC.	
CDC provides support to all regions on a 24-hour, 7 days a week operation. The CDC supports the regions in the following manner:	
Run batch jobs on McKesson which are required for billing, patient charges, revenue and payment postings.	
Perform file transmissions to insurers.	
Perform routing for legacy application and technical support issues submitted to ServicePro help desk system. CDC dispatches approximately 500 problem/requests per month.	
Monitor server alerts and escalate critical issues to level 2 teams.	
Monitor interface transactions.	
Includes Clinical Applications in EMR (Soarian Clinicals; Soarian Pharmacy, SIS; Syngo, Soarian Critical Care).	
Provide 24/7 support for all Clinical functions except Syngo. This is provided by regional staff but with a Corp IT Tech support. This includes being on standby every day for all applications and responding to P1 tickets promptly/SLA - response is 1 hour but usually within 30 minutes. Other P2 and P3 tickets are reviewed every Monday morning and assigned to members of the team.	
Be responsible for opening Cerner EVTS tickets as needed for issues resolution and working with Cerner support.	
The staff on standby is responsible for determining if unscheduled issues require a downtime and will contact all facilities and call a "Downtime." Monitor the issue resolution, giving updates to the facilities on progress. Once resolved they will test and then send out notification of system resolution.	
Monitor Safety Advisory Notices from Cerner. Notify facilities, if needed, of issue and workable solution until resolved.	
Test updates prior to implementing into the Production environment. Updates taken at least every three months.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Keep an ongoing list of enhancement requests (priority determined by the regions) and work with facilities and workgroups to build, test, and implement enhancements.	
Provide Monthly Newsletters for Clinical staff, Physicians, and ED staff and Physicians with details of enhancement changes, new items from updates, issues being worked on, for distribution to staff and Physicians on 2nd Tuesday of the month. Changes made on the 3rd Tuesday of the month.	
Build and maintain the TRAIN environment for regional use with new hire training.	
Provide input and review of training materials as needed for go lives and tip sheets for ongoing education.	
Train staff for Go-Lives in specialty areas (Pharmacy, Syngo, SIS, Critical Care).	
Meet with facilities prior to live events to discuss current processes and help map future workflows.	
Provide 1:1 training for Physicians, as needed. Particularly after Go-Lives and when identified as needed by the facilities.	
Participate in the Corporate CAG/PAG meetings.	
Assist facilities with process changes as requested.	
Provide members for the Corporate Reporting Council.	
Provide staff support for the Regional Meaningful Use team led by Christine Asato.	
Participate in Regional Clinical team meetings such as Pharmacy group; Kona CAG, Maui Provision of Care Committee, Kula Leadership team. Currently setting up team meetings for Kauai region for support post live.	
Participate in security of the system by managing roles and access to the system.	
Work with Clinical Labs of Hawaii to ensure SC and CLH are in sync for physician ordering and results.	
Participate in Integrated testing as needed for new live events, upgrades to the system (3.4 and 4.0 coming later this year), ICD 10 testing.	
Work with facilities and Financials to assist with keeping clinical charges correct.	
Provide end user elbow support and Command Center Captains 24/7 at Go-Live events.	
The Business Systems Department (BSD)/IT Clinical Department	37 FTE
BSD supports the enterprise solutions for HHSC. The BSD maintains and supports an array of financial business system applications including Soarian Financials (Patient Scheduling and Appointments, Patient Access and Revenue Management), Electronic Data Management (EDM), Health Information Management (HIM), System Interfaces, Patient Quality Measures and Legacy Applications.	
BSD main responsibilities include:	
Manage the organization's business system applications.	
Provide a source of guidance for systems issues for end-users.	
Maintain information security and availability.	
Provide a corporate perspective on information technology initiatives.	
Supply the guidance and infrastructure to deliver meaningful information.	
Ensure daily operations and support for patient scheduling, registration, and financial system users.	
Adhere to project plans; implementation of systems to support the HHSC mission.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Adhere to change management and problem management principles and providing proper documentation.	
Assist with the development and implementation of processes, procedures and workflows and with the identification of opportunities for improvements.	
The Business Systems Analyst is responsible for:	
Communicating between internal subject matter experts and IT resources to ensure system issues and enhancements are clearly described and solutions are appropriate.	
Analyzing, communicating, tracking, prioritizing, and escalating system issues.	
Reviewing and creating application related process documentation.	
Identifying and analyzing business challenges in order to improve systems and processes.	
Documenting clear, concise, specific business requirements and potential solutions for application functionality and reporting needs.	
Creating, coordinating, and completing test scenarios for enhancement features, bug fixes, and system upgrades.	
Assist in managing projects related to application changes.	
Assist in coordinating all efforts between the end-users and IT Helpdesk as it relates to the deployment of technology.	
Assist in managing and optimizing the Revenue Cycle System as the organization prepares for ICD 10.	
Providing basic revenue and billing analytics to support department and regional leadership.	
Includes Clinical Applications in EMR (Soarian Clinicals; Soarian Pharmacy, SIS; Syngo, Soarian Critical Care).	
Provides 24/7 support for all Clinical functions except Syngo. This is provided by Regional staff but with a Corp IT Tech support. This includes being on standby every day for all applications and responding to P1 tickets promptly/SLA - response is 1 hour but usually within 30 minutes. Other P2 and P3 tickets are reviewed every Monday morning and assigned to members of the team.	
Be responsible for opening Cerner EVTS tickets as needed for issues resolution and working with Cerner support.	
The staff on standby is responsible for determining if unscheduled issues require a downtime and will contact all facilities and call a "Downtime." Monitor the issue resolution, giving updates to the facilities on progress. Once resolved they will test and then send out notification of system resolution.	
Monitor Safety Advisory Notices from Cerner. Notify facilities, if needed, of issue and workable solution until resolved.	
Test updates prior to implementing into the Production environment. Updates taken at least every three months.	
Keep an ongoing list of enhancement requests (priority determined by the regions) and work with facilities and workgroups to build, test, and implement enhancements.	
Provide Monthly Newsletters for Clinical staff, Physicians, and ED staff and Physicians with details of enhancement changes, new items from updates, issues being worked on, for distribution to staff and Physicians on 2nd Tuesday of the month. Changes made on the 3rd Tuesday of the month.	
Build and maintain the TRAIN environment for regional use with new hire training.	
Provide input and review of training materials as needed for go lives and tip sheets for ongoing education.	
Train staff for Go-Lives in specialty areas (Pharmacy, Syngo, SIS, Critical Care).	
Meet with facilities prior to live events to discuss current processes and help map future workflows.	
Provide 1:1 training for Physicians, as needed. Particularly after Go-Lives and when identified as needed by the facilities.	

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RESOURCE DETAIL	PERSONNEL
Participate in the Corporate CAG/PAG meetings.	
Assist facilities with process changes as requested.	
Provide members for the Corporate Reporting Council.	
Provide staff support for the Regional Meaningful Use team led by Christine Asato.	
Participate in Regional Clinical team meetings such as Pharmacy group; Kona CAG, Maui Provision of Care Committee, Kula Leadership team. Currently setting up team meetings for Kauai region for support post live.	
Participate in security of the system by managing roles and access to the system.	
Work with Clinical Labs of Hawaii to ensure SC and CLH are in sync for physician ordering and results.	
Participate in Integrated testing as needed for new live events, upgrades to the system (3.4 and 4.0 coming later this year), ICD 10 testing.	
Work with facilities and Financials to assist with keeping clinical charges correct.	
Provide end user elbow support and Command Center Captains 24/7 at Go-Live events.	
Corporate IT Project Management Office (PMO) / Training	4 FTE
The role of the PMO is to lead project governance, monitor project methodology and to communicate project decisions as well as provide rationale on why these decisions were made. These projects are both electronic medical records- (EMR) related and non-EMR related in nature. PMO responsibilities include:	
Creating a common set of project management processes and templates. This saves each project manager and HHSC valuable productivity time.	
Enhancing and supporting project management processes over time. As new or revised processes and templates are made available, the PMO deploys them consistently to all regions within Hawaii Health Systems Corporation (HHSC).	
Setting up and supporting a common repository (e.g., SharePoint) so that prior project management deliverables can be reused.	
Providing well-trained and competent project managers to run key projects.	
Facilitating project communication and organizational change management practices.	
Providing training coordination and planning to build core competencies and a common set of experiences among our End Users.	
Tracking basic information on the current status of all projects in the organization and provides project visibility to management in a common and consistent manner.	
Tracking of organization-wide metrics on the state of project management, project delivery and the value being provided to the business by project management in general, and the PMO specifically. These metrics include but are not limited to:	
Project performance: delivering on time.	
Project performance: delivering in budget.	
Project performance: delivering all agreed products or services.	
Project performance: performing post-project review ensuring that new projects are applying lessons learned.	
Customer satisfaction: product or service meeting customer expectations.	
Delivering project management coaching, consulting and mentoring services to corporate and the regions to help apply good practices on specific projects. These practices are shared as needed throughout HHSC.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

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RESOURCE DETAIL	PERSONNEL
Acting as the overall advocate for project management to the organization encouraging enterprise-wide rather than regionalized decision-making in silos.	
Educating and promoting management and team members on the value gained through the use of consistent project management processes.	
Leading the organization through transformation by providing expertise in process improvement practices formulated in organizational design and performance enhancement basics.	
Corporate IT Meaningful Use / Reporting Department	4 FTE
The Meaningful Use department is responsible for understanding the complex Meaningful Use guidelines and assisting regional facilities in workflows that will facilitate compliance.	
Responsible for Meaningful Use reporting and monitoring compliance during the reporting period. Notifying facilities if they fall below or are in danger of falling below measure compliance and helping them with workflow modifications.	
Preparing Meaningful Use reports for submission.	
Understanding and developing processes for electronic exchange of information required by Meaningful Use guidelines.	
The corporate reporting department is responsible for developing and maintaining clinical and financial reports required for facility operations.	
Leads the HHSC reporting council to facilitate standardization of reporting throughout the regions. The reporting council also prioritizes outstanding reporting requests.	
LEGAL	4 FTE
General Legal Assistance	
Provide full array of legal services to facilities, including interpretation of State and federal laws, regulations, and contract.	
Advise client facility or corporate staff on contract terms and other legal documents.	
Obtain, coordinate, and monitor internal and external legal support; secretarial support re invoice processing, distribution, tracking NTE, liaison to firms.	
Prepare, disseminate, and manage corporate policies and procedures manual.	
Perform consultation and review of medical staff credentials files on behalf of the Regional Board of Directors, as requested, and perform audits of credentialing files and legal advice to credentialing staff.	
Perform legal review of medical staff bylaws, rules and regulations, and other medical staff management matters and documents.	
Carry out duties as general counsel to Corporate Board, management, and facilities.	
Provide legal assistance to corporate officers and the Board of Directors.	
Develop and update Corporate Bylaws.	
Draft, amend, and maintain HHSC contract form templates.	
Draft and review system wide, multiregional, and corporate contracts.	
Draft communications to governmental and regulator bodies.	
Represent HHSC in legal proceedings and in negotiations.	

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RESOURCE DETAIL	PERSONNEL
Work with physicians on legal aspects of medical staff, quality of care, and other issues.	
Advise Corporate Compliance and facilities with respect to investigations, HIPAA and privacy issues, and other legal issues that arise.	
General Counsel: Acts as second signatory on checks.	
General Counsel: Provide assistance to PCEO as VP in operating the corporation (part of executive management team).	
Legislature	
Act as HHSC representative on HAH Government Relations Committee.	
Responsible for the legislative program (assists PCEO in all aspects, including discussions with legislators, administration, other stakeholders).	
Write and review legislation written by others.	
Assist in preparation, filing, and presentation of testimony and in discussions with legislators and the administration.	
Assist in providing information supporting legislative requests and reports.	
Hospital Professional and General Liability Litigation Claims	
Report all litigation and claims to the appropriate insurance carrier and coordinate assignment of legal counsel.	
Coordinate with State A/G and DAGS Risk Management.	
Coordinate handling of litigation and claims with facility risk manager and regional CEOs.	
Assist in all phases of the litigation or claim including review of documents - assist with strategy and decisions.	
Arrange periodic telephone conferences or meetings with risk manager and CEO, attorney, and carrier at various stages of matter.	
Provide status reports to the Board.	
Monitor assigned legal counsel and coordinate with insurance claims representative.	
Attend settlement conferences, arbitrations, and mediation.	
Attend Medical Claim Conciliation Panel hearings when requested by facility.	
Review legal bills.	
Coordinate and approve settlements with facility, attorney, and carrier.	
Directors and Officers and Employment Practices Liability Claims	
Assist in coordination and reporting of claims with insurance carrier.	
Provide legal assistance as requested for EEOC/HCRP claims.	
Monitor and assist facilities with employment claims litigation.	
Provide legal assistance to facilities and corporate HR on employment matters.	
Represent facilities and HHSC at arbitration hearings.	
Assist with assignment of legal counsel for worker's compensation matters.	
Risk Management	
Serve as resource for facility risk managers - conduct legal research, etc.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

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RESOURCE DETAIL	PERSONNEL
Plan and develop educational program in coordination with insurer.	
Provide educational materials and tools for facility risk managers.	
Coordinate the insurance company risk management services, including risk assessments of the facilities.	
Monitor the Hospital Professional and General Liability Program and the Directors and Officers Insurance policies.	
Coordinate with Insurance Agent and Underwriters on insurance matters as they arise.	
Assist facilities with purchase of additional insurance or coverage under existing policies.	
Liaison with the insurers and broker to obtain certificates of insurance for our physicians, equipment, property, and business, as needed for contracts, leases, etc.	
Coordinate with DAGS Risk Management on State's insurance program.	
Provide legal support to Regional System Boards as requested.	
Regional/HHSC Policy Committee	
Provide legal counsel and secretarial support to committee.	
Provide legal review of corporate policies submitted to committee.	
Facilitate policy review and approval by Corporate Board and its committees.	
Physician Financial Arrangements	
Draft or oversee the preparation of documents to establish financial arrangements with Physicians (incl. personal services arrangements, joint ventures, equipment and space rental and lease, real estate, recruitment, indirect compensation, employment, practice acquisition, loans, restrictive covenants and noncompetes, incentives and gain sharing).	
Assist the Board, the management, and the facilities in addressing and resolving hospital operational and implementation issues relating to physician financial arrangements.	
Address legal inquiries from and advise the Corporate Compliance program regarding State and Federal laws and regulations pertaining to reimbursements and physician financial arrangements.	
Address legal inquiries from and advise the corporate compliance and the internal compliance and audit programs in matters relating to physician financial arrangements.	
Perform in-service training for staff physicians, senior leaders, and executive management on Federal regulatory matters involving physicians.	
Prepare and assist in preparing policies relating to hospital transactions with physicians and address medical staff issues relating to physician financial arrangements.	
Address legal inquiries from and advises the corporate procurement program in matters relating to procurement of physician services.	
Advise the facilities, the corporate management, and the Board in all phases of all transactions involving physicians and physician entities.	
Further Functions	
Consult on and assist with major business ventures.	
Assist in development of Best Practices relating to risk management.	
Prepare risk management indicator/measurement reports for Quality Improvement and Patient Safety Committee (QIPSC).	

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RESOURCE DETAIL	PERSONNEL
Risk Management and legal services to affiliates.	
HUMAN RESOURCES	
Director of HR	2 FTE
As the designee of being the public employer for negotiations purposes, attends all negotiations involving bargaining units that are part of HHSC. Represents the interests of HHSC and the Regions. Note: Depending on the unit and circumstances, Corporate HR may send one to three representatives to scheduled meetings.	
As the designee as the public employer, attends all meetings called by the Conference of Personnel Directors (representing all jurisdictions). Issues affecting HHSC and the Regions include legislation, negotiations, and all other related human resources issues.	
Addresses regional HR issues (grievances, MAB, EEOC, HLRB & other communications).	
Works with and assists Regional Human Resource Directors on major projects, initiatives and coordinates/facilitates regular HRD meetings.	
Evaluates and advises on the impact of strategies, programs, and regulatory actions as it impacts the attraction, motivation, development and retention of the people resources of the corporation.	
Works with the respective labor unions on labor-related initiatives such as consultations, negotiations, and grievance/arbitration.	
Provides advice and support to the regions as needed.	
Develops & implements system-wide HR services and policies in compliance with applicable state, federal, and local laws.	
Provides legislative testimony and development of legislation that affects the Human Resource interest of HHSC.	
Develop programs to address workforce development & training needs; identify strategies to address staffing shortages; develop short & long range solutions to meet staffing needs; identify priorities for recruitment, staff development & employee retention.	
Develop strategies to improve employee performance, use of evaluation tool to address staffing needs, improve skills & competencies, support personal development.	
Draft affiliation agreements with universities, service providers, & agencies to establish student intern training & employee external training.	
Oversight and supervision of the Corporate HR Department.	
HR Manager - Administration	1 FTE - vacant
As the designee of being the public employer for negotiations purposes, attends all negotiations involving bargaining units that are part of HHSC. Represents the interests of HHSC and the Regions. Depending on the unit and circumstances, Corporate HR may send one to three representatives to scheduled meetings.	
As the designee as the public employer, attends all meetings called by the Conference of Personnel Directors (representing all jurisdictions). Issues affecting HHSC and the Regions include legislation, negotiations, and all other related human resources issues. VP/Dir of HR or Designee.	
As the public employer designee, negotiates memorandum of agreements (MOAs) and/or supplemental agreements (SAs) with unions.	
Works cooperatively with the State Department of Budget and Finances and the Office of Collective Bargaining (Department of Human Resources Development) in providing cost data and other requirements necessary for collective bargaining. Personnel Program Manager (Lawson/transactions).	

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RESOURCE DETAIL	PERSONNEL
Works cooperatively with the unions and other public employers on legislative bills affecting HHSC and the Regions.	
Provides support, advice and recommendations on employee/labor issues to the Regions.	
Provides support and maintenance of the Lawson/Infor HRIS	
Oversees the Transactions, Classifications, and Payroll functions.	
HR Officer - Labor Relations	1.0 FTE
Represents Corporate CEO at Step 2 grievances. Reviews, analyzes and submits recommendations for settlement. May Draft Settlement Agreements. May conduct follow up investigations. Researches past arbitration decisions and related information for Regional HR Directors and Attorneys as needed.	
Maintains various labor relations files and data bases on HR Shared Drive and Sharepoint for HR Regional use and reference.	
Researches arbitration decisions and related matters.	
Prepares Grievance and Arbitration Cost Reports.	
Conducts consultation with Unions.	
Lead Technical Representative in Fitness For Duty Evaluations and Sick Call Evaluations	
Participates in negotiations with Unions. May draft Supplemental Agreements. Provides advisory services and contract interpretation to reg. HR offices, as needed. May research and follow up issues.	
Evaluate tools to measure productivity; identify successful measures & strategies.	
Develop strategy & assist with reduction-in-force programs, including implementation guidelines, union consultation, employee assistance, & employee notification.	
Develop & implement alcohol & controlled substance program; draft implementation guidelines, jurisdiction & union consultation, & develop employee & supervisory training program.	
HR Officer - Training	1 FTE - vacant
Research public & private grants & programs for staff development & training, recruitment, & retention.	
Establish relationships with public & private universities to develop workforce training opportunities, identify workforce needs & curriculum development, including preceptor training, leadership development, & employee competencies.	
Serve as liaison with Hawaii Dept. of Education in creating career pathways in health care, including identifying core courses, developing curricula, & developing training opportunities.	
Develop and implement a training plan to address the various training needs of HHSC.	
Collaborate with Hawaii private sector hospitals to address staffing shortages, develop recruitment strategies, identify training needs & workforce strategies.	
Provide training to the regions and corporation in any area of training needs.	
Conduct internal investigations.	
Classification and Compensation	1.25 FTE
Develop & maintain HHSC Classification & Compensation Program for civil service & exempt, excluded positions.	
Lead the establishment of new civil service classes & compensation plans.	
Establish and update class specifications as needed.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Coordinate civil service classification projects-new classes or initiatives with other State, County or Public Employers as required.	
Research compensation information & strategies.	
Participate/complete compensation surveys to receive new survey results - Hawaii Employer Council surveys, physician surveys, executive compensation surveys, etc.	
Develop specialized compensation structure for healthcare classes.	
Develop, maintain & coordinate shortage category, hiring above the minimum & other programs to assist in the recruitment of difficult to recruit/shortage positions.	
Train & assist staff on HRIS/Lawson and provides other training as needed/requested.	
Perform system-wide tasks in the HRIS/Lawson for position & classification data & regularly audits data.	
Establish & maintain official position folders.	
Establish & maintain shortage tables.	
Provide reports to other agencies (DOH, B&F, etc.) and facilities as required/requested.	
Responsible for corporate re-organizations and updates of organizational charts, functional statements and job descriptions.	
Responsible for the repricing functions for HHSC	
Establish and update shortage tables.	
Transactions	1.25 FTE
Performs system-wide tasks in HRIS/Lawson & maintains oversight of the integrity of the data.	
Liaison between ERS< EUTF, Deferred Compensation & other State agencies on employee benefits; disseminates information & troubleshoots issues as needed.	
Performs periodic audit of information; advise on protection of personnel information.	
Develop instructions on implementing pay changes in accordance with the Collective Bargaining Contracts & Executive Orders.	
Assist Regions with pay adjustments and other needed adjustments relating to creditable service, retention points, step movements, etc.	
Trains & assists staff in HRIS/Lawson regarding transactions as needed/requested.	
Mass updates relating to employee pay and retirement codes for all regions into the Lawson system. Works with DAGS to feed Lawson data for the mass updates for the payroll data.	
Provides interpretation and guidance on contract language pertaining to pay, leaves of absences, seniority, retention points, movements as it relates to daily processes or settlement agreements.	
Coordinate benefit information and processes for EUTF, Def comp, ERS, Unions, etc.	
Audit and/or create reports as needed, for all regions.	
Provides leadership in all aspects of employee transactions.	
Provides semi-monthly reports to ERS, HGEA, UPW, & Deferred Comp Demographic Report.	
Provide Governor's quarterly Work Force report.	
Audit region's employee transactions for data integrity in Lawson.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

RESOURCE DETAIL	PERSONNEL
Assist regions in transaction error corrections.	
Run ERS class code report and correct Lawson as necessary.	
Prepare DAGS pay increase files & perform Lawson mass upload of changes in salary and statutory dues for pay increases.	
Establish & update forms as needed/requested.	
Process FBI fingerprint cards.	
Payroll	1 FTE
Processes payroll for the Corporate office and provides guidance and training on payroll processing to the regional hospitals.	
Communicates changes from DAGS central office and other requirements as it relates to employee pay, retirement adjustments, deferred compensation adjustments, overpayments, etc.	
Develop and maintain policies and guidelines on pay administration and payroll processes.	
Provides interpretation and guidance on contract language pertaining to pay, leaves of absences, seniority, retention points, movements as it related to daily processes or settlement agreements.	
Coordinates requests for information and processes for ERS for regions.	
Provides leadership in all aspects of payroll.	
Train and assist staff in payroll processes as needed/requested.	
Semi monthly Payroll expenditure report from DAGS - distribute to regions.	
Responsible for payroll data access security (download of data from Department of Health).	
Assist regions with calculations for overpayments.	
Assist regions with workers' compensation calculations as requested.	
Assist with files for mass upload of pay increases.	
W2s - distribute to regions.	
Semi monthly paychecks - distribute to regions.	
Human Resource Information System (Lawson)	0.5 FTE
Develop technical procedures for system-wide tasks in HRIS/Lawson & maintain oversight of the integrity of the data.	
Develop new modules & modify existing modules & system processes	
Execute interfaces for HHSC to outside agencies (i.e., DHRD, UPW, HGEA, Island Savings, ERS, etc.).	
Develop training materials & provide training for users on the system (i.e., HR & Payroll staff).	
Maintain system data & interface mapping tables (i.e., new salary schedules & structures, respective steps, purging of obsolete data, etc.).	
Develop technical procedures on mass updates & backup of data for employees, positions & applicants in the system.	
Planning & evaluation of system for upgrades.	
Developing ad hoc reports for the system.	
Produce reports for legislature, costing for collective bargaining, audit programs, regional requests, grievances, etc.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

November 16, 2016

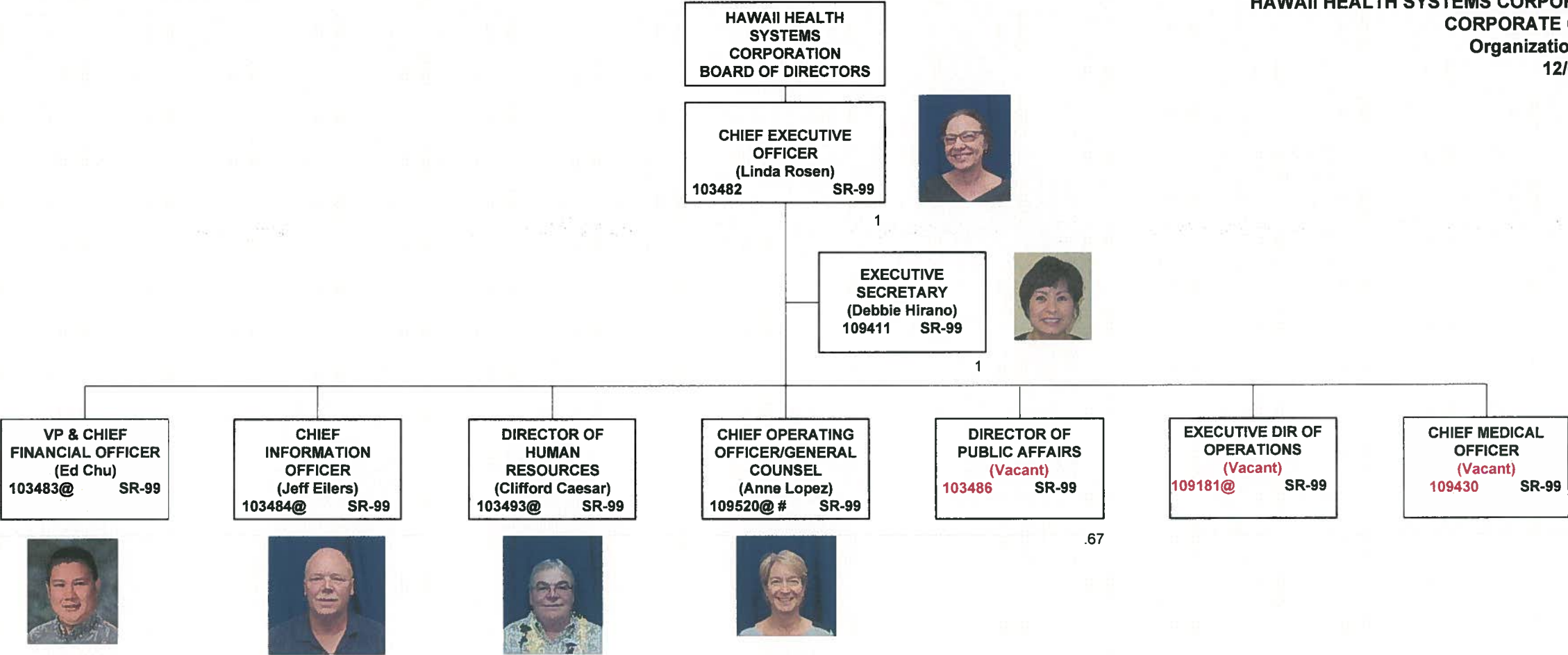
RESOURCE DETAIL	PERSONNEL
Mass updates relating to employee pay and retirement codes for all regions into the Lawson system. Works with DAGS to feed Lawson data for the mass updates for the payroll data.	
HR Officer, HR Specialist V - Employment	2 FTE
HCRC/EEOC Discrimination Complaints: Coordinate/review draft position statements & exhibits from Regional HR Directors/designee; obtain outside legal counsel for legal reviews/representation; notify Chubb Insurance of complaints and send copies of complaints, final response & decisions for their review and file.	
EEO-4 Biannual Report: Prepare the EEO-4 report/submit to EEOC biannually for HHSC.	
State/Federal Report: As necessary, prepare/submit reports for HHSC in compliance to any State/Federal reporting requirements.	
ADA Compliance: Respond to questions from regions; attend meetings with DCAB and provide training in coordination with DCAB or other state agencies.	
Physical Exam/Pre-employment Drug Testing: Administer the physical exam/drug testing program for regions; maintain and negotiate the contract for the regions with CLH.	
Select Priority List Program: Administer the Select Priority Program for regions; handle/update the Select Priority List procedures/update HR guidelines/procedures for regions	
Shared Leave Program: Administer the Shared Leave Program; review/approve shared leave requests from the regions; respond to questions from regions.	
Formal Complaints: Handle the formal complaints submitted by applicants and/or employees for the regions and culminate final decision relating to complaint.	
Merit Appeals Board: Coordinate with the regions legal representation and assist in preparing response for appeals hearing.	
Criminal Background Checks: Administer/handle the criminal background checks program; serve as point of contact for changes or updates on State CJIS system; scan the fingerprint cards for the regions, provide FBI/State results and respond to questions re: suitability issues.	
Job Fairs: Coordinate and represent the regions at job/career fairs with local universities, colleges, and high schools.	
Outreach Programs: Coordinate/schedule career fairs with high schools, colleges, universities and other state/private agencies; sends letters to graduate Nurses, CNAs, LPNs, etc. to promote HHSC for regions.	
Recruitment for RCEOs: Assist the Regional Boards to recruit/fill for vacant RCEO positions; draft/run ads; screen all resumes; prepare interview/selection materials; prepare notification letters, etc.	
EAP Program: Administer the EAP program; maintain/update program guidelines; maintain contract for EAP services with vendor (WorkLife Hawaii)	
Random Alcohol/Drug Testing: Shares responsibility over the HHSC Random Alcohol/Controlled Substance Testing; provide alternate lists; maintain contract for drug testing with vendor (CLH).	
Contracts: Develop, monitor and maintain several HHSC system-wide contracts or RFPs for the regions (i.e., Healthcare Recruitment Services; Clinical Labs of Hawaii (Drug/Alcohol Testing); WorkLife Hawaii (EAP); Temporary Clerical Services; OIG/GSA Checks	
Advertising: Coordinate display/consolidated ads for regions in local/national newspapers, journals and websites.	
Fair Market Value Salary Data: Prepare the salary data worksheets for regions and receive assistance by Classification Section for inputting/uploading to HR Sharepoint; provide salary survey information to regions as requested.	

HAWAII HEALTH SYSTEMS CORPORATION LISTING OF CORPORATE OFFICE FUNCTIONS

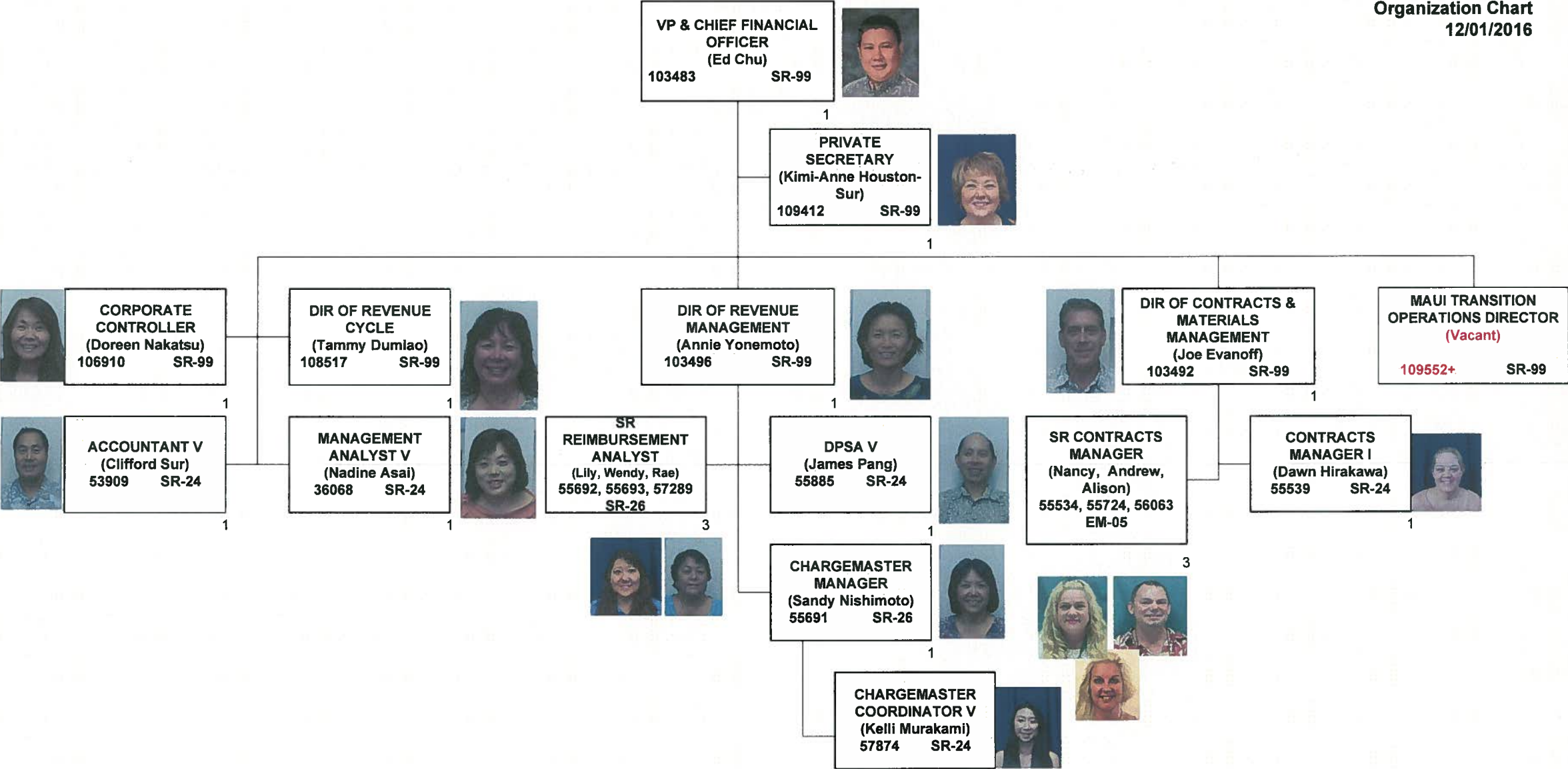
November 16, 2016

RESOURCE DETAIL	PERSONNEL
HR Guidelines & Policies: Develop, maintain and revise HR Guidelines for Chapter 2, Employment as requested for the regions or changes in State/Federal employment laws; develop/finalize forms for usage by regions; and develop system-wide HR policies relating to or changes to State/Federal employment laws.	
Outplacement Services Program: Assist the regions in outplacement of affected employees during RIF and update/maintain the Recall List for HHSC.	
Performance Appraisal System (PAS): Assist regions on PAS on related performance issues; provide PAS supervisory training as needed by regions.	
Employee Relations: Implement/coordinate HHSC EAP; continue research and development of new employee programs/benefits.	
Administrative Reviews for Corp Office: Conduct admin reviews and prepare responses to request submitted for non-selection, non-qualification or terminations by applicants or employees.	
New Hire Orientations for Corp Office: Conduct orientation for new hires; conduct training on Corp Compliance, HIPAA and Code of Conduct; complete in-processing of new hires.	
Recruitment for Corporate Office: Handle/coordinate all recruitment activities to fill vacant positions (i.e., posting, run ads, screen applications/resumes, etc.)	
Return to Work Priority Program: Conduct jurisdictional job search for regions/Corporate Office.	
Parking for Corp Office: Monitor parking permits for Corp Office employees at Leahi Hospital.	
Service/Retirement Awards for Corp Office: Monitor the list of employees eligible for service/retirement awards; prepare certificates and cash awards; submit service award certificates to Governor's Office for signature.	
Fair Market Value Salary Data: Prepare the salary data worksheets for regions and receive assistance by Classification Section for inputting/uploading to HR Sharepoint; provide salary survey information to regions as requested.	
HR OFFICER - Investigator/Workers Compensation	1 FTE - vacant
HR projects and assignments.	
Assisting the regions when requested (adjust claims, training, auditing their WC records, etc.).	
Representing the regions, as needed, at hearings and assisting in the preparation of documents.	
Internal Investigations: Upon request by the regions, conduct internal investigations of complaints filed by employees and prepare investigation report for review by RCEO/RHRD's.	
Oversees the system WC expenses and runs various reports for several committees, groups, and meetings.	

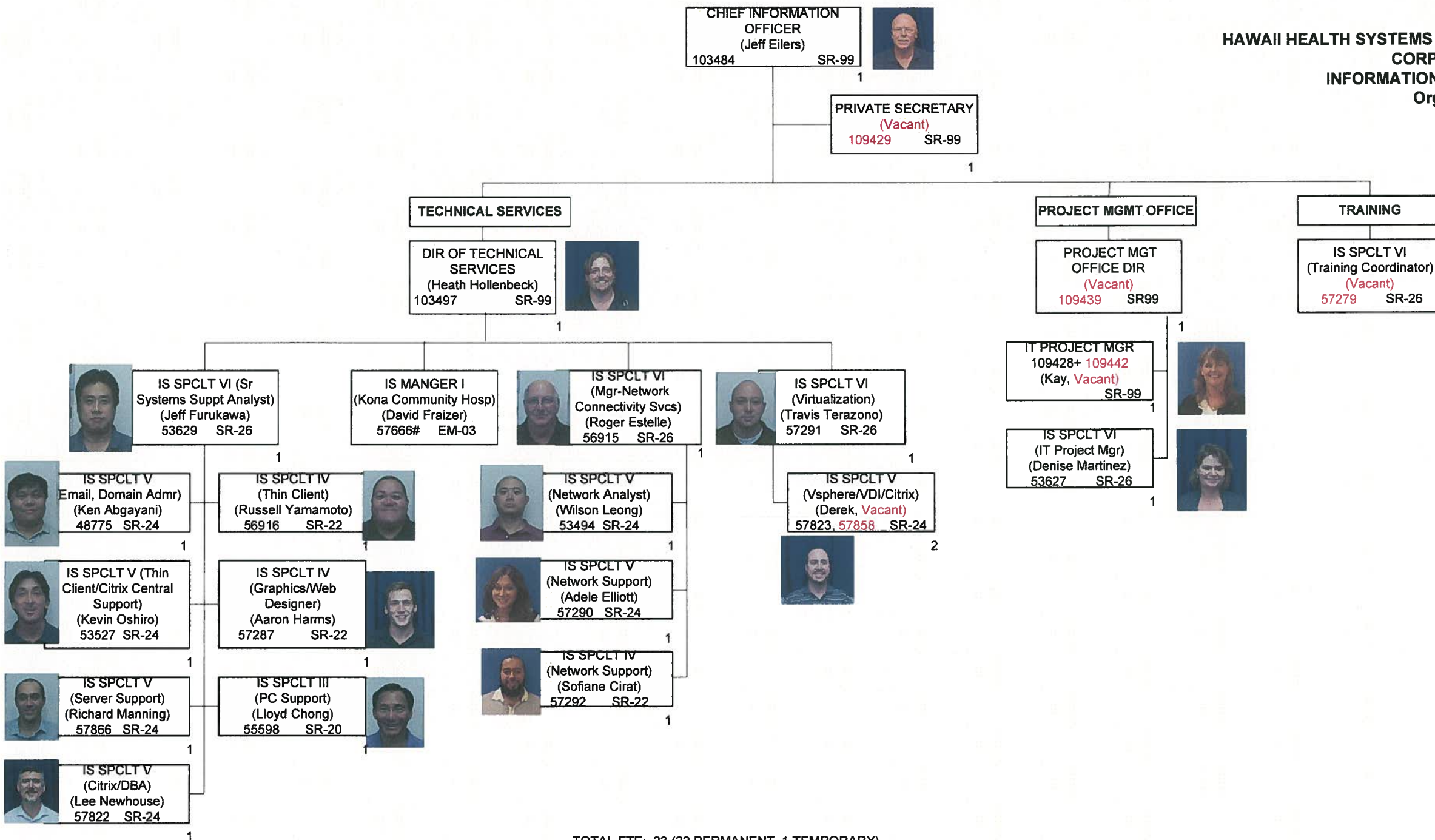
HAWAII HEALTH SYSTEMS CORPORATION
CORPORATE OFFICE
Organization Chart
12/01/2016



TOTAL FTE: 3.67
@NOT INCLUDED ON THIS ORG CHART
#COO ALSO SERVES AS GENERAL COUNSEL

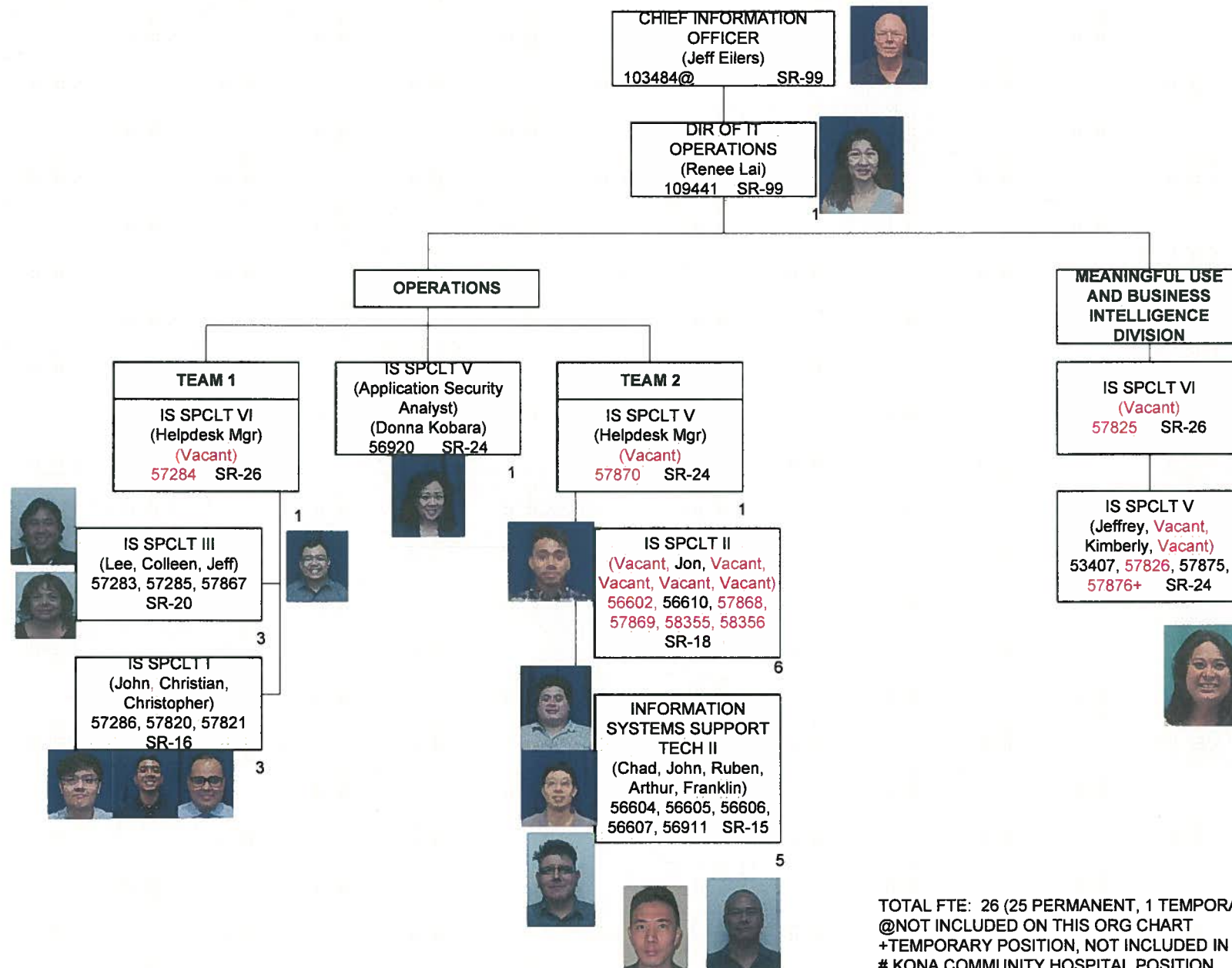


TOTAL FTE: 18
@NOT INCLUDED ON THIS ORG CHART
+ TEMPORARY POSITION, NOT INCLUDED IN POSITION COUNT



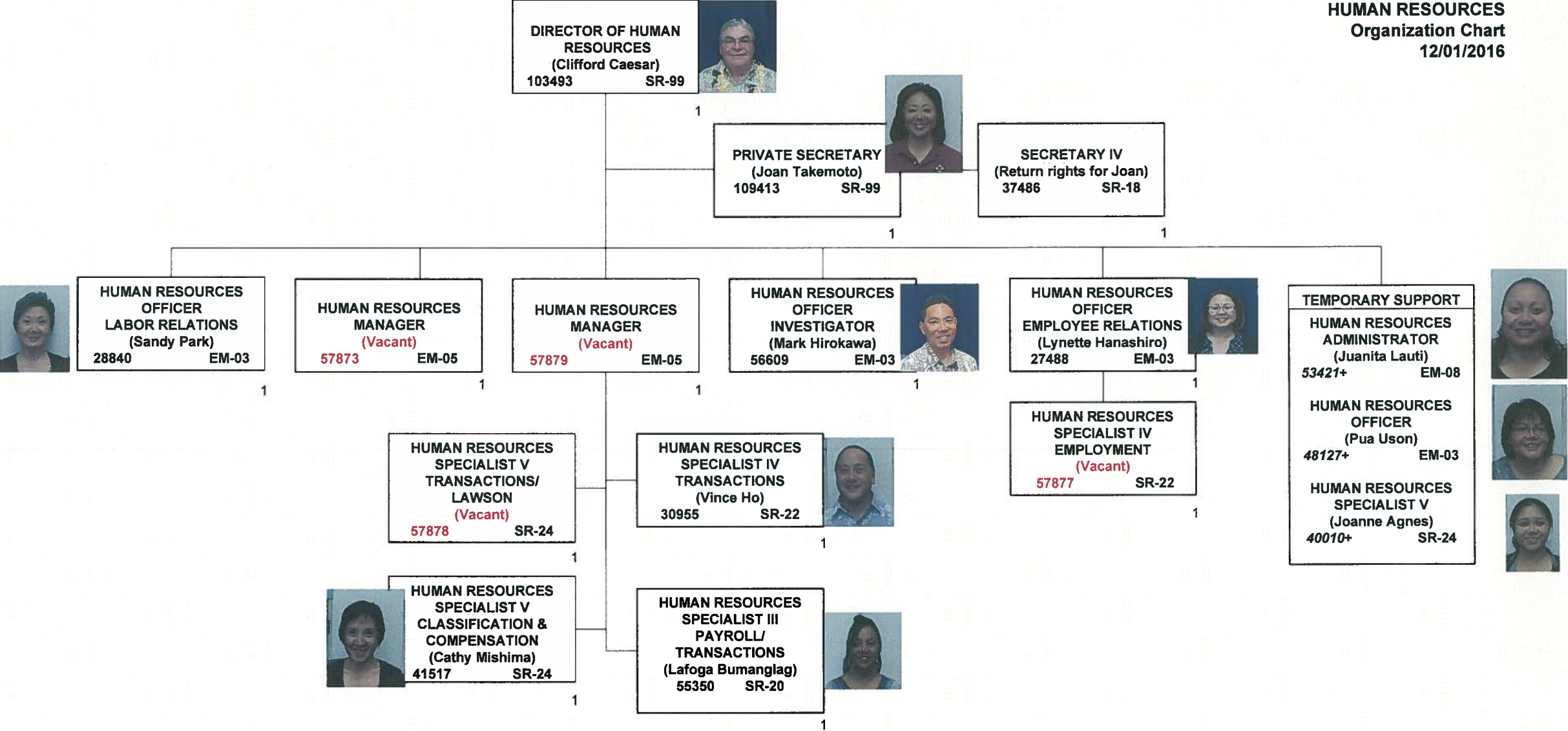
TOTAL FTE: 23 (22 PERMANENT, 1 TEMPORARY)
@NOT INCLUDED ON THIS ORG CHART
+TEMPORARY POSITION, NOT INCLUDED IN POSITION COUNT
KONA COMMUNITY HOSPITAL POSITION





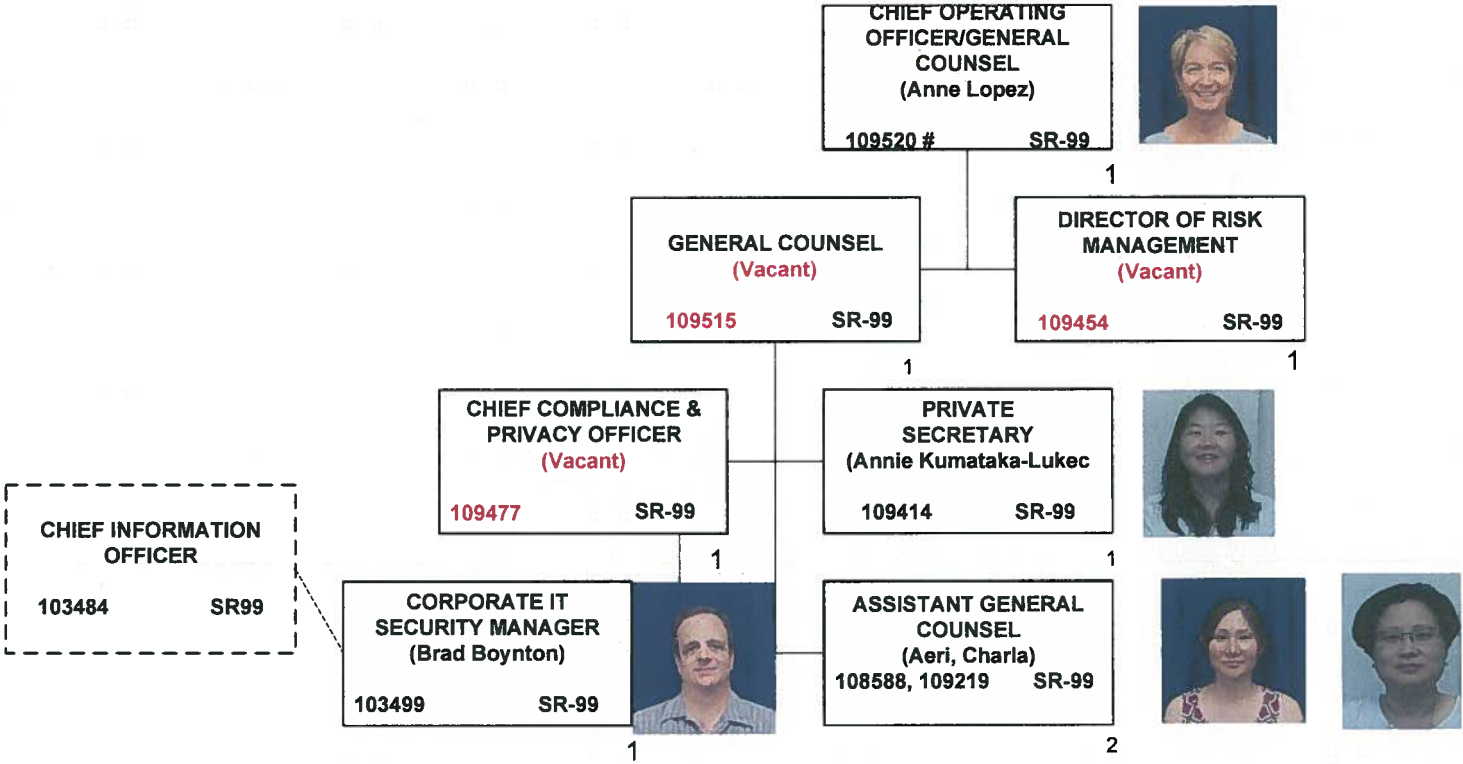
TOTAL FTE: 26 (25 PERMANENT, 1 TEMPORARY)
@NOT INCLUDED ON THIS ORG CHART
+TEMPORARY POSITION, NOT INCLUDED IN POSITION COUNT
KONA COMMUNITY HOSPITAL POSITION

HAWAII HEALTH SYSTEMS CORPORATION
CORPORATE OFFICE
HUMAN RESOURCES
Organization Chart
12/01/2016

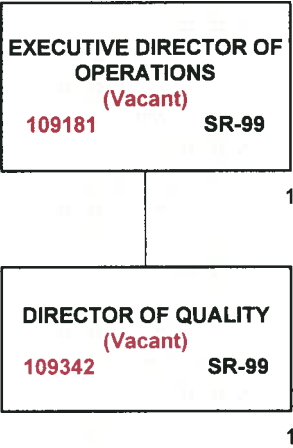


TOTAL FTE: 13
+TEMPORARY SUPPORT

HAWAII HEALTH SYSTEMS CORPORATION
CORPORATE OFFICE
LEGAL/RISK MANAGEMENT
Organization Chart
12/01/2016



TOTAL FTE: 8
@NOT INCLUDED ON THIS ORG CHART
#COO ALSO SERVES AS GENERAL COUNSEL



TOTAL FTE: 2
@NOT INCLUDED ON THIS ORG CHART

CORPORATE OFFICE FINANCE ACCOMPLISHMENTS

APPENDIX C

The Corporate Office Finance Department contains four divisions: General Accounting and Financial Management, Reimbursement, Revenue Cycle, and Procurement/Materials Management. Despite a very small staff, the Corporate Office Finance Department has provided significant revenue enhancements and cost savings to the HHSC regions throughout its history, with just a few of its significant accomplishments listed below:

- When the sustainability fee programs were initiated by MedQUEST and the Healthcare Association of Hawaii in fiscal year 2013, Corporate Office Financial Management was able to negotiate a separate uncompensated care funding pool for the HHSC facilities, which increased revenues to HHSC's facilities by \$16 million in that year. That source of funding continues to this day, and in fiscal year 2016, has generated another \$8 million in revenues in addition to the fiscal year 2013 funding level.
- The Corporate Office Reimbursement Department has been able to recover significant revenues for the facilities through developing internal processes as part of their function of preparing the annual Medicare cost reports for each facility. Their ability to document dual-eligible bad debts on the annual Medicare cost reports has allowed the HHSC facilities to recoup approximately \$5.6 million in revenues from fiscal years 2008 through 2016. The department has also worked to analyze and maximize the calculation of the disproportionate share hospital percentage for HHSC's three acute facilities, bringing in \$53.2 million from fiscal years 2000 through 2015 in additional Medicare reimbursements to those hospitals. By doing this work internally, they estimate to have saved HHSC over \$8 million in consulting costs over that same period.
- The Corporate Office Reimbursement Department has also worked with the HHSC facilities to implement the Medicare 340B Pharmacy Discount program, which has resulted in cost savings to the HHSC facilities of approximately \$4 million annually.
- The Corporate Office Revenue Management Department has worked with the HHSC facilities to improve cash collection processes and actually serves as the revenue cycle director for several of the HHSC regions. In fact, in the industry-standard measure of collection efficiency, net days in accounts receivable, HHSC as a whole has gone from 129.3 net days in accounts receivable at June 30, 2003 down to 49.4 net days in accounts receivable at June 30, 2016. The industry average for net days in accounts receivable is between 50 and 55 days, which means that HHSC is performing better than the industry average. As soon as our Corporate Revenue Cycle Department started managing the revenue cycle department at Maui Memorial Medical Center, the hospital saw an increase in average cash collections per month from \$18.3 million per month in fiscal year 2015 to \$20.4 million per month in fiscal year 2016, an 11% improvement.

- One of the duties of the Corporate Procurement/Materials Management department is to manage HHSC's group purchasing organization (GPO) arrangement, and the department has worked with the HHSC regions to standardize on certain supply products in order to maximize rebates and sharebacks to the regions. From January 1, 2007 through October 31, 2014, HHSC was able to achieve almost **\$5.6 million** in contract savings, sharebacks, and rebates from its GPO arrangement. As of October 2016, HHSC has been able to realize almost \$930,000 in new contract savings in just calendar year 2016.