# HTNYS' Hospital Board Member Orientation Program

What You Need to Know as a New Board Member

# Welcome from the HTNYS Board of Governors Chair

Robert Spolzino, Esq.

Trustee, Board of Overseers, Northwell Health

# Program Agenda

Overview of HANYS, HTNYS and resources

A scan of NY's hospital system

Healthcare governance

#### Leading practices

Fiduciary duties; financial oversight; stewardship of mission, vision, values

Governing leadership; management vs. governance

Board room conduct

Community focus and relationships

#### Quality and patient safety

Role of the board

Overview of key quality measures; public reporting

Medical staff credentialing

#### Roundtable discussion with HTNYS board members

# Overview HANYS, HTNYS and Resources

## **Nick Henley**

Vice President, External Affairs, HANYS

## Kristen Phillips

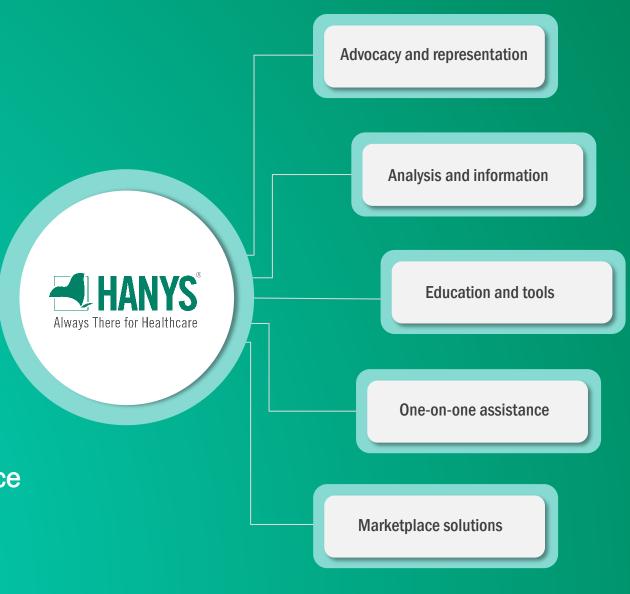
Director, Trustee Education and Community Health Policy, HANYS

## **HANYS**

Your statewide hospital and continuing care association

### Mission statement

To advance the health of individuals and communities by providing leadership, representation and service to healthcare providers and systems across the entire continuum of care

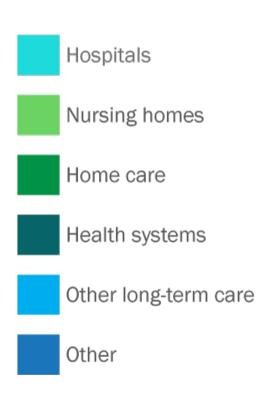


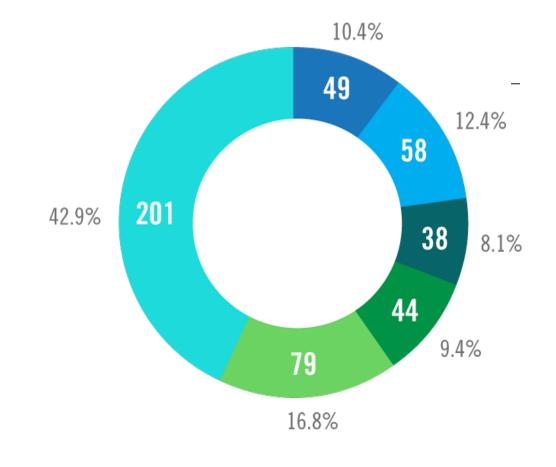
# **Our offices**



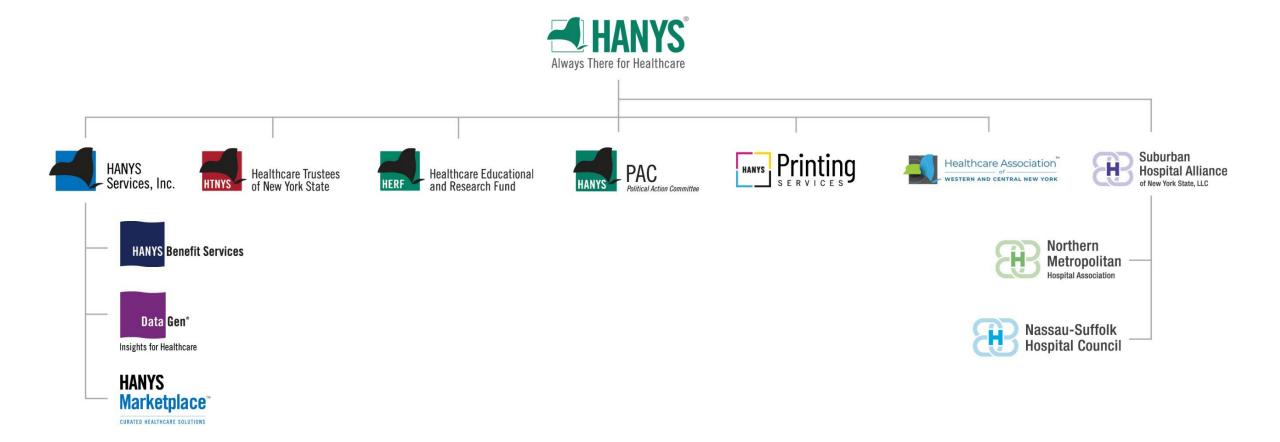


## **HANYS** members





# Organizational structure



# Leading healthcare advocacy

- Support fair and adequate payment to providers
- ► Advance affordability at all levels
- Sustain insurance coverage gains
- Protect patient access to care
- Advance health system transformation
- Enhance quality and patient safety
- Promote regulatory relief
- Strengthen the workforce









## Health finance

#### Statewide Report

New York's Hospitals and Health Systems Improve the Economy & Community

**Economic & Community Benefits** 

**Quality Healthcare** 

State & Federal Funding



\$176,000,000,000

Economic activity @



864,000

Jobs generated ?



\$27,100,000,000

Tax dollars generated ?



\$48,900,000,000

Payroll expenditures ?



\$12,300,000,000

Community benefits & investments @

Facility-specific impact analyses

Data analytics and visualization tools

Advocacy support

# Managed care and insurance



#### Member assistance

- Identify and stop damaging payer business practices
- One-on-one support
- Managed care member advisory group

### **Payer initiative**

Relationships with payers

### Impact public policy

- Secure new laws and regulations
- Multi-state coalition

# QARI Quality Advocacy, Research and Innovation





# Member-driven priorities

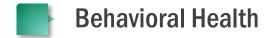




Post-acute Care

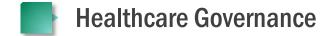


Rural Health





Emergency Preparedness



Workforce Development

Community Health

Legal and Compliance

Finance and Analytics

- Delivery System Reform
- Digital Health/Innovation

# **Educational programs**



200+

Educational programs and events across
New York state and online

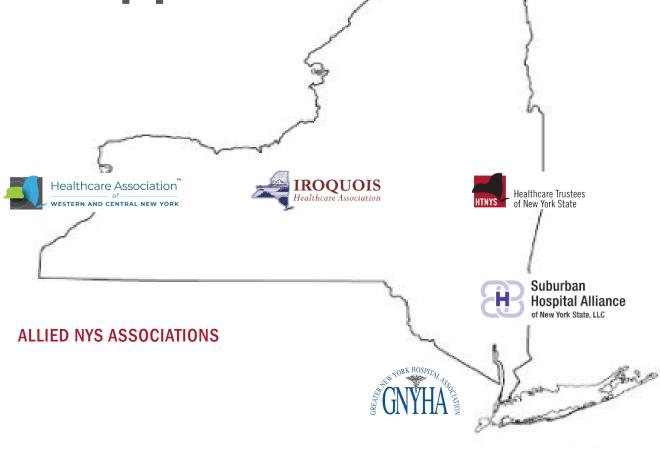


6,000+

Staff and trustees of HANYS member organizations participated in educational programs in 2020

Association partner support







# Healthcare Trustees of New York State

## **About HTNYS**



#### HTNYS is a division of HANYS and a member benefit.

#### Mission Statement

To assist voluntary healthcare trustees through education, communications and advocacy to promote the delivery of quality healthcare to all communities in a cost-effective manner.

HTNYS is governed by a board of up to 25 trustees who provide guidance on and assist with the execution of HTNYS' education and advocacy activities and programs.

## Focus areas

Healthcare issues and trends

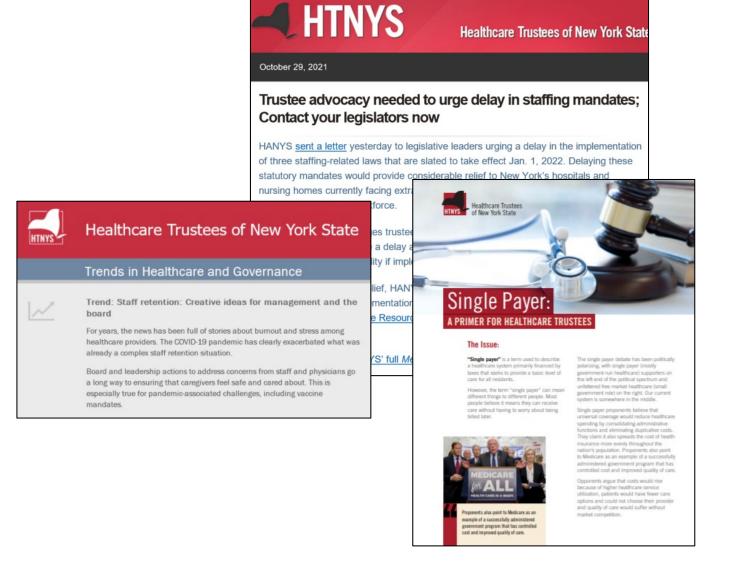
**Advocacy and policy** 

Healthcare governance



# Trustee Education Resources

- Annual conference
- Advocacy and policy email updates
- Monthly Trends email
- Issue primers
- Online resource libraries



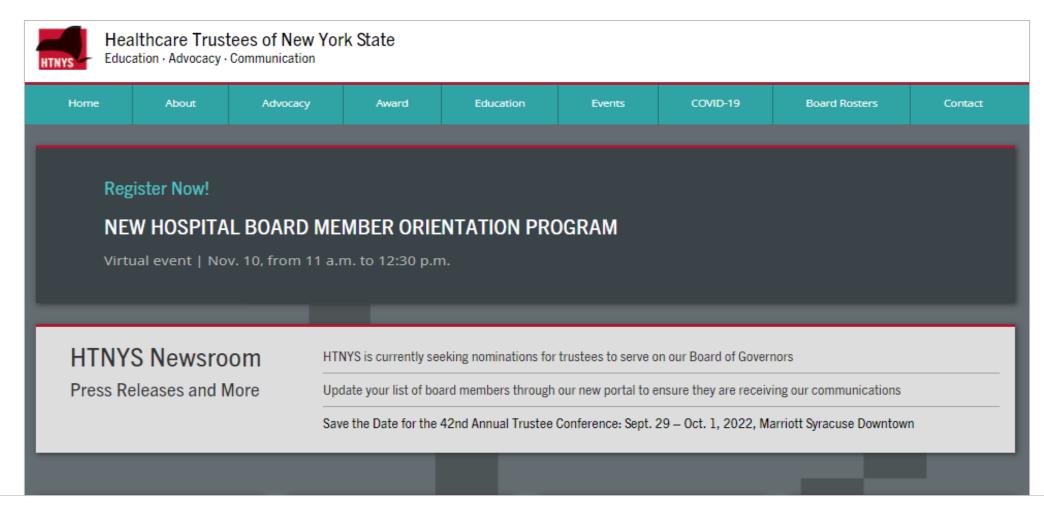
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## **Online Resource Libraries**

- Board Diversity, Inclusion and Cultural Competency
- Board Assessments
- Conflict of Interest
- Community Health/Population Health
- Fiduciary Responsibilities
- Quality
- Innovation and Disruption

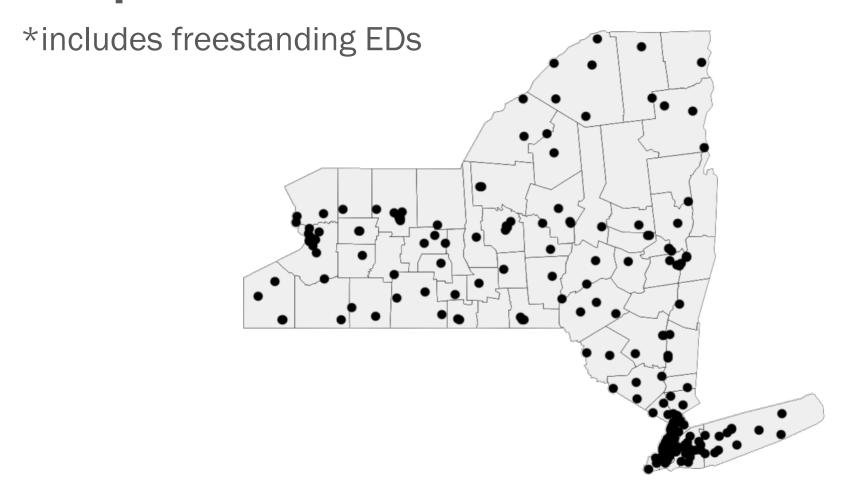
- Board Recruitment, Orientation and Succession Planning
- Board-CEO Relations
- Compliance
- Emergency Preparedness and Response
- Executive Compensation
- Medical Staff and Boards
- Setting Strategy

# htnys.org



# A scan of New York's hospital system

## **Hospitals in New York State**



## Hospital Oversight, Licensure and Accreditation

#### Fast facts

- New York state
  - Article 28 of the state Public Health Law
  - Title 10 of NY Codes, Rules and Regulations
  - Department of health-issued operating certificate
- Federal
  - Center for Medicare and Medicaid Services within U.S. Health & Human Services
  - Medicare Conditions of Participation
  - CMS Certification Number
- Accreditation
  - Hospitals accredited by approved accreditation body, like The Joint Commission or DNV Healthcare
  - Hospitals surveyed for compliance with state licensure requirements and federal COPs

## **Hospitals in NYS**

#### Fast facts

### **Total number of hospitals in NYS**

#### Federal Medicare CCN: 166

 Acute care, critical access and specialty hospitals; excludes psychiatric hospitals

State DOH: 214 - 222

HANYS: 211 hospital campuses

Does not include freestanding EDs

### **Hospital sponsorship**

Voluntary, non-profit: 142 by CCN (183 campuses)

Public: 24 by CCN (28 campuses)

State, county, public benefit corporation, SUNY

NYS Public Health Law prohibits publicly-traded corporations from owning and operating hospitals in NY

## **Hospitals in NYS**

Fast facts

There are various types of hospitals with different designations, reimbursement systems and operating standards.

- Federal rural hospital designations
  - Critical access hospitals (18 in NY)
  - Sole community hospitals (20)
  - Medicare-dependent hospitals (3)
- Specialty hospital designations
  - Cancer, children's, rehabilitation, psychiatric
- Academic medical centers affiliated with 17 medical colleges in NY
- 10 freestanding emergency departments

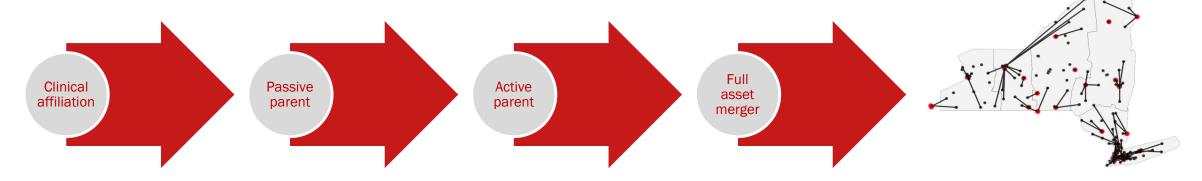
## **Hospital Affiliations**

### Fast facts

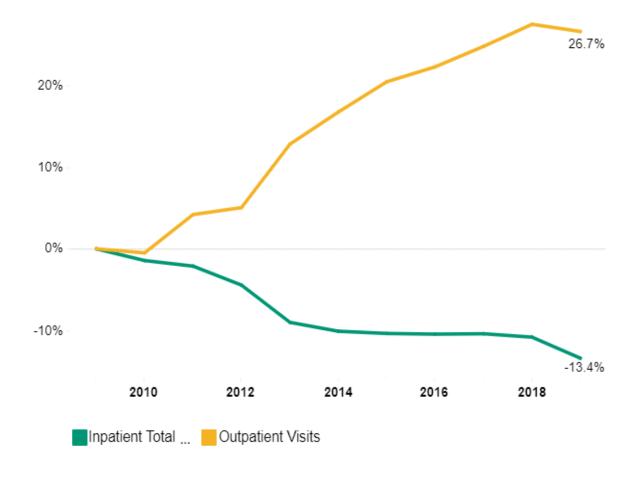
Hospitals operate independently or part of a system. The degree of integration varies based on the type of affiliation.

 Approximately 24 independent non-public hospitals (by CCN) Mergers and active parent relationships are approved by the state Public Health and Health Planning Council.

 Since 2011, PHHPC has approved approximately 20 mergers and 50 CONs to establish active parent relationships



## Statewide Inpatient and Outpatient Volume Trend



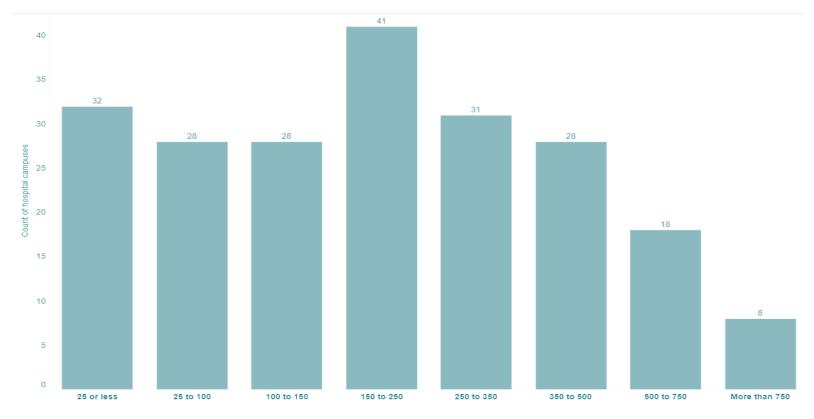
Source: NYS Hospital Institutional Cost Repor

## **Hospitals in NYS**

Hospitals can differ widely in terms of size, payer mix and population served. The following tables and graphs depict additional key statistics on NY's hospitals.

- Hospitals by bed size and revenue size
- Statewide average payer mix
- Government payer underpayment
- NY hospital national rankings in payment to cost ratios by payer
- Hospital inpatient volume by payer
- NYS hospital operating margin analyses; fiscal strength index
- Comparison of NY to the nation on operating margin and key financial indicators

# NY Hospitals by Bed Size

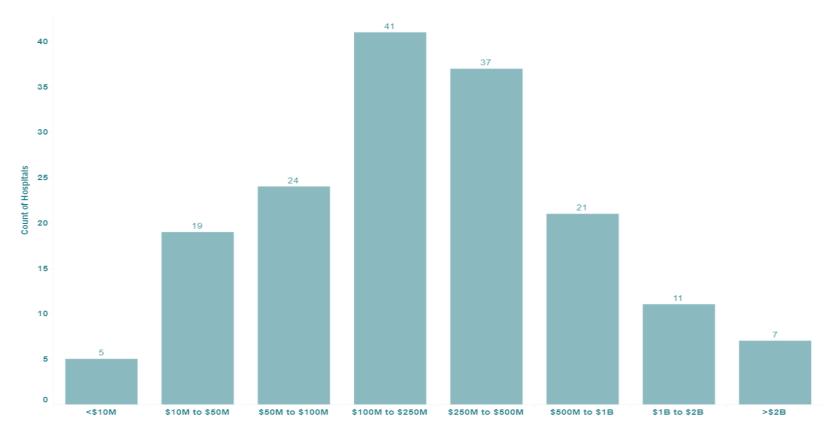


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Source: NYS DOH https://health.data.nv.gov/Health/Health-Facility-Certification-Information/2g9v-7kgm/data



# NY Hospitals by Revenue Size



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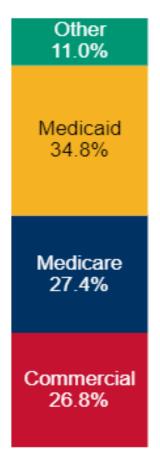
Source: NYS Hospital Institutional Cost Report

## Statewide Average Hospital Payer Mix (2019)

Inpatient



Outpatient



© 2021 Healthcare Association of New York State, Inc.

Source: NYS Hospital Institutional Cost Report

# Medicare and Medicaid payment rates do not keep pace with provider costs

- Over 70% of inpatient hospital discharges in NYS are paid for by Medicare or Medicaid
- Over 60% of hospital outpatient visits in NYS are paid for by Medicare or Medicaid
- In NYS, a high Medicare and Medicare patient mix and associated underpayments is a leading indicator of distressed hospital status



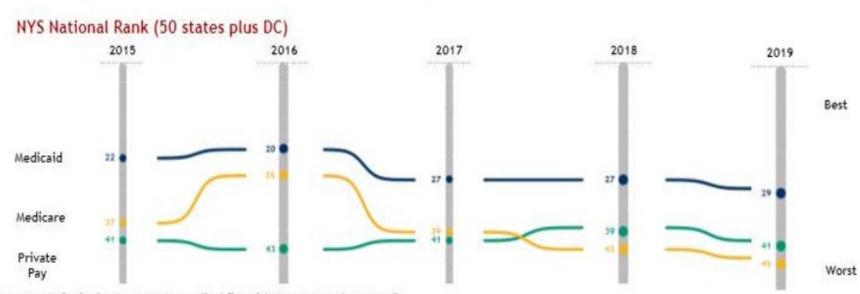
In NYS, Medicare pays 90 cents on the dollar



In NYS, Medicaid pays 67 cents on the dollar



# NYS National Rank — Payment to Cost

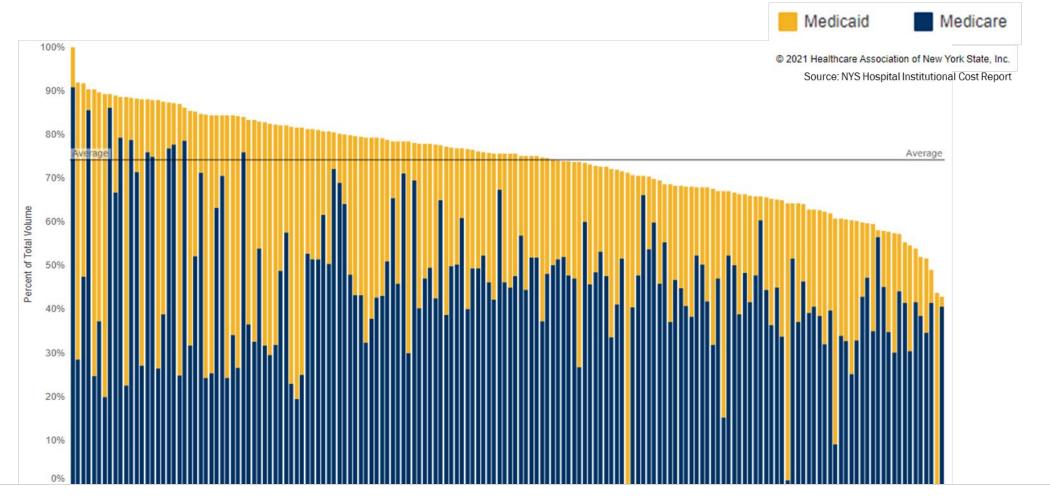


Sources: NYS institutional cost reports, audited financial statements and KPMO audit Source: Health Forum, AHA Annual Survey of Hospitals

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## **Hospital Inpatient Volume by Payer**

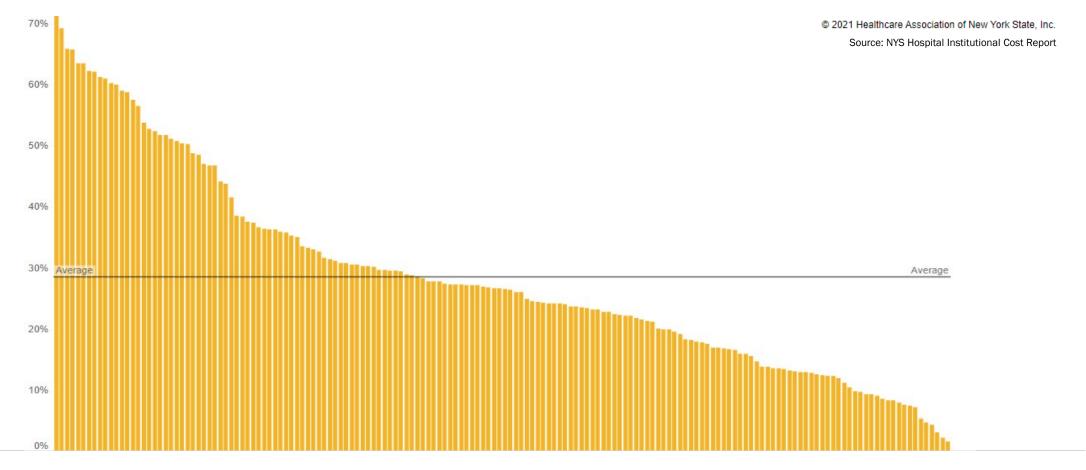
Medicaid and Medicare



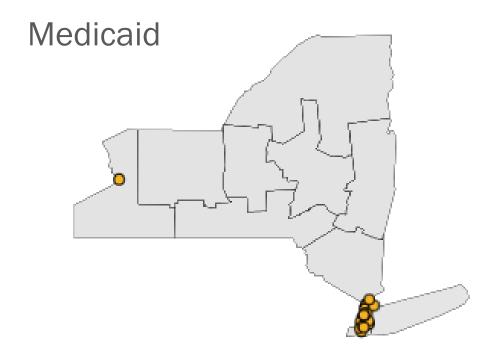


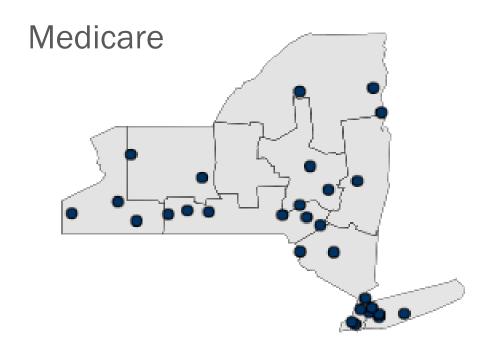
# Hospital Inpatient Volume by Payer

Medicaid only

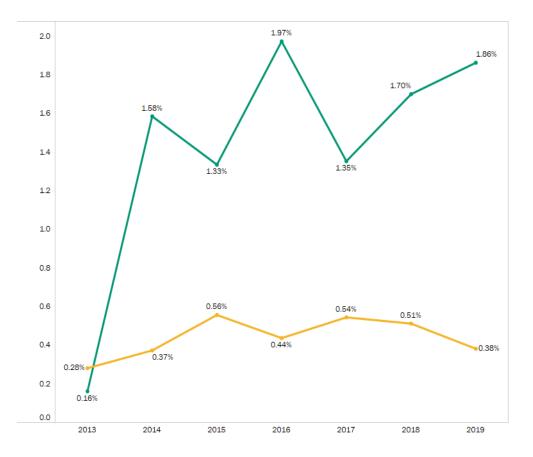


### Inpatient Volume By Payer — Top 25





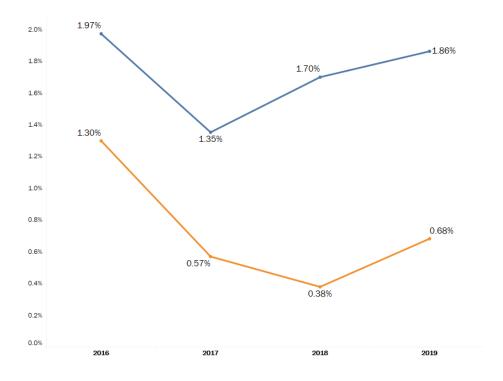
## NYS Average Hospital Operating Margin



Average

Median

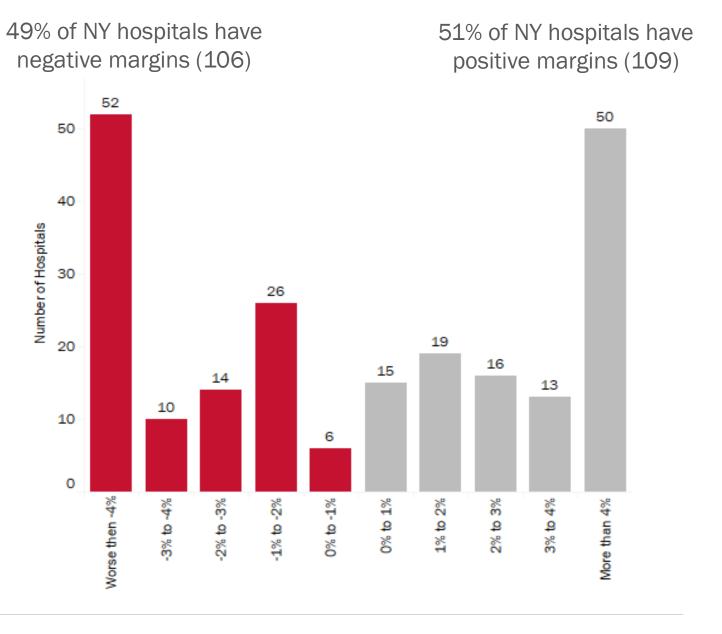
# The Effect of Supportive Funding Reflects Funding for Distressed Hospitals and VAP



Average With Supportive Funding

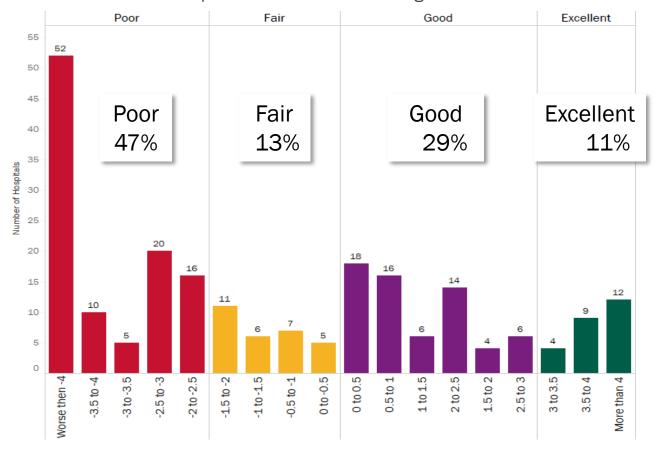
**Average Without Supportive Funding** 

2019
NYS Hospital
Operating Margins



### Fiscal Strength Index



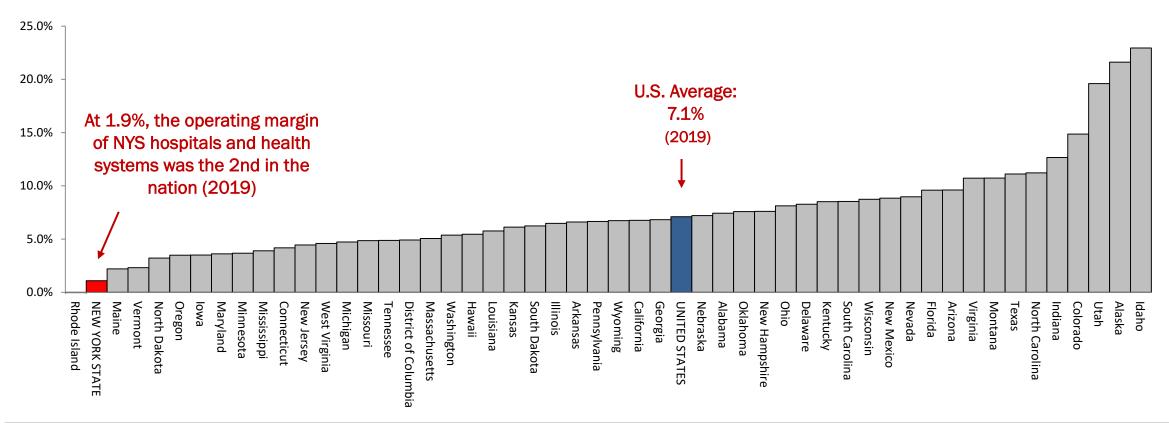


#### **Fiscal Strength Index combines:**

- Operating margin
- Days cash on hand
- Debt financing percent
- Average age of plant

60% of NY hospitals are in fair or poor financial condition

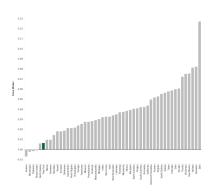
# NYS Consistently Reports the Lowest Operating Margin in the Country



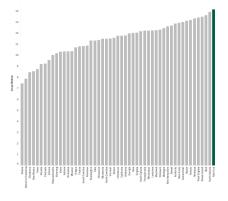


# Snapshot of NYS hospital basic financial performance indicators (median)

Operating margin (higher is better)

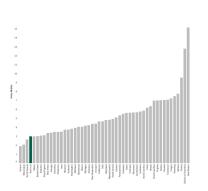


Age of plant (Lower is better)



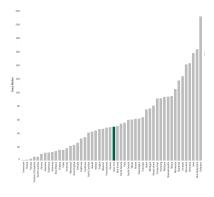
Debt service coverage

(higher is better)



Days cash on hand

(Higher is better)



# The Role of Government in Hospital Payment and Policy

#### **State advocacy**



Advance proactive fiscal and legislative agenda
Evaluate pending state legislation
Issue memoranda of support/opposition
Engage in one-on-one advocacy
Current advocacy priorities include:

- addressing healthcare workforce challenges
- securing continued COVID-19 support
- ensuring financial stability of hospitals and nursing homes

# The Role of Government in Hospital Payment and Policy

#### **Federal advocacy**



Advocate for COVID-19 relief funding

**Eliminate Medicaid DSH cuts** 

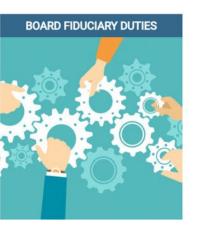
**Protect and expand GME funding** 

**Protect 340B Drug Pricing Program** 

Fight site-neutral reductions

Preserve small and rural hospital payments

## Essentials for governance excellence













# **Essentials for Governance Excellence**

**New Board Member Orientation** 



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#### What we'll cover

















- Fiduciary duties
- Financial basics for trustees
- Stewardship of mission, vision and values
- Governing leadership
- Management vs. governance
- Boardroom conduct
- Community-focused boards

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#### **Resources for New Board Members**





**URL**: htnysorientation.net

**Username:** htnys

Password: Orientation 2021

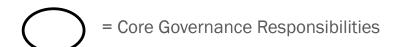
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# A Board's Legal Duties and Core Responsibilities

#### Positioned to lead





= Fiduciary Duties

**Ensure Protect** clinical financial quality, health **Duty of Care** service and safety Advocate for **Ensure** those served **Mission** competent and the management organization **Duty of Obedience Duty of Loyalty** Set Perpetuate strategic effective direction governance

Source: Pamela Knecht, Accord Limited. Board Leadership in Times of Disruption and Crisis, September 29, 2020

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## **Board Fiduciary Duties**



- Duty of Care: Use the same level of judgment you would use in your own personal business activities
- **Duty of Loyalty**: Bars board members from using their board position to serve themselves or their businesses
- Duty of Obedience: Board members are faithful to the mission and follow all laws, rules and regulations

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## Carrying Out the Board's Fiduciary Duties

#### The Duty of Care is fulfilled by...

- Consistent attendance at board and committee meetings
- Attentive and thorough preparation for board meetings
- Exercising independent judgment
- Periodic examination of the performance of the CEO
- Meaningful review of the organization's finances and policies



#### The Duty of Loyalty is fulfilled by...

- Full disclosure of conflicts of interest
- Compliance with the organization's conflict of interest policy
- Avoidance of the use of corporate opportunities for personal gain or benefit
- Maintaining confidentiality when required



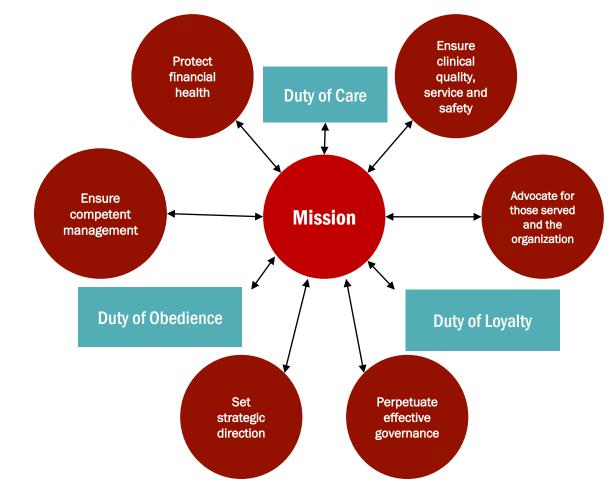
#### The Duty of Obedience is fulfilled by...

- Strict adherence to the bylaws of the board and the mission of the organization
- Compliance with all regulatory and reporting requirements
- Understanding of all documents governing the board and its operation (bylaws, articles of incorporation, board and committee job descriptions, charters, etc.)
- Ensuring that decisions further the organization's mission and comply with the scope of its governing documents

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#### **Board Core Responsibilities**

- Protect financial health
- Ensure clinical quality
- Ensure competent management
- Oversee strategic direction
- Advocate for those served (community) and for the organization
- Perpetuate effective governance

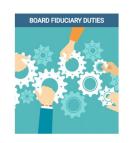


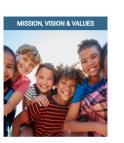
Source: Pamela Knecht, Accord Limited.
Board Leadership in Times of Disruption and Crisis, September 29, 2020

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#### **Financial Basics For Trustees**







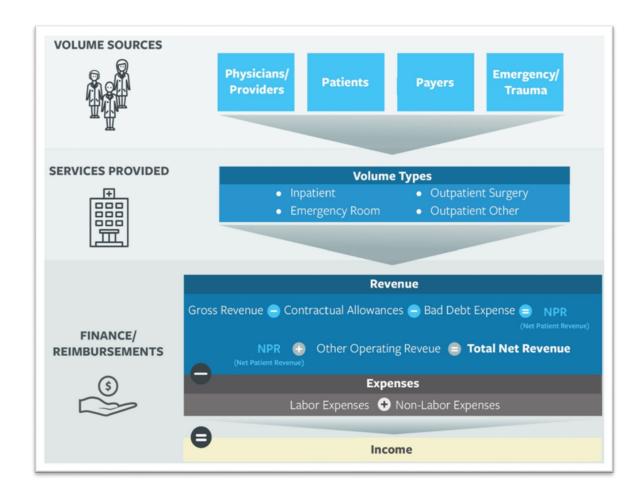
- The board is responsible for ensuring the financial success of the organization. To fulfill this responsibility, trustees must have a solid grasp of the indicators of financial health and be knowledgeable about key financial interrelationships
- Applying firm and consistent ethical practices to financial decision-making responsibilities is a necessary hallmark of an excellent healthcare board
- The board has the responsibility to protect the limited resources of the organization to ensure optimum services and benefit to the community

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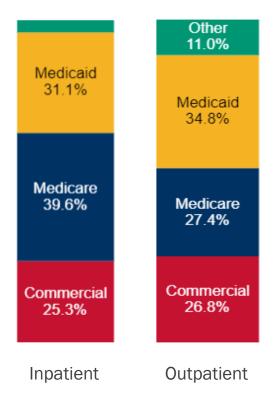
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#### **Complexity of Healthcare Financials**

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Statewide Aver. Hospital Payer Mix (2019)

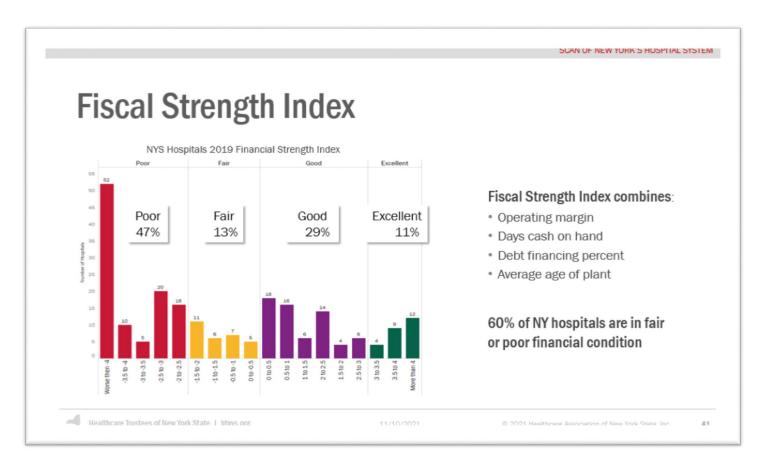


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## Financial Statements and Operating Ratios



- The Balance Sheet
- The Statement of Operations/Income Statement
- The Statement of Cash Flows
- Statements of Accounts
   Receivable and Revenue
- Total Margin
- Return on Equity
- Long-term Debt to Capitalization

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## The Board's Financial Oversight Role



Does the board have a sufficient financial understanding

need for a change in the organization's course?

630-613-7580

to review and analyze financial statements, trends and

projections and identify warning signs and the potential

- Establish and approve financial goals, including goals related to growth, debt capacity, return on equity and other areas that define financial success
- Approve annual operating and capital budgets
- Receive and approve various budget reports throughout the year, primarily through a finance committee
- Oversee investment policies and goals

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resources of the organization to ensure optimum services and benefit to the community. The board must ensure

the cost-effective utilization of resources and the

financial plans. The board should regularly review

One Mid America Plaza Floor 3

establishment of both long-range and short-range

## Asking the Right Questions



#### **Key Financial Questions for Boards to Consider**

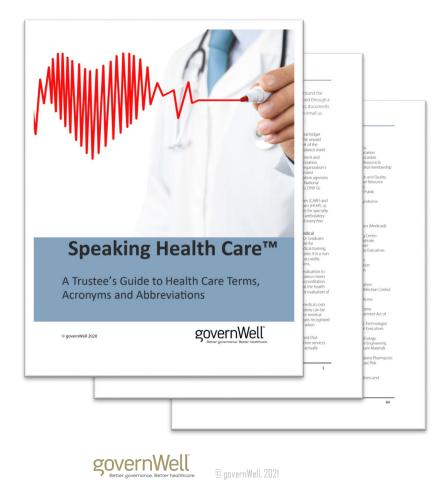
When reviewing the organization's finances, the board should know answers to such questions as:

- What is your organization's payer mix? How is it changing?
- What are your organization's major investments, and are they financially sound?
- What are the major drivers behind changes in the organization's key financial metrics over the past three years?
- What are the organization's financial projections for the future, and what assumptions were used?
- How has/will COVID-19 impact the organizations financial viability?
- Does the board have a sufficient financial understanding to review and analyze financial statements, trends and projections and identify warning signs and the potential need for a change in the organization's course?

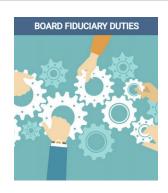
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#### **Understanding Healthcare Terms**







# Stewardship of Mission, Vision and Values

Mission, vision and values are the guiding statements that drive organizational success





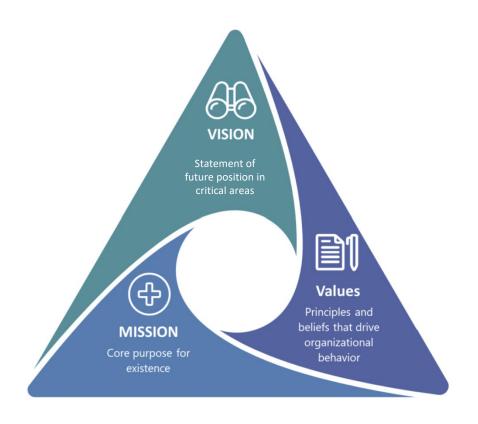
### The Board: "Keepers of the MVV"

- Successful governing boards know that the mission, vision and value statements, when properly developed and used, are the primary driver for every governance discussion and decision
- The board ensures that the entire healthcare family, from top to bottom, sees their role and value in achieving the organization's mission and vision
- The board, more than any other group of leaders, is responsible as the "keepers" of these critical guideposts

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## The Strategic Triangle



#### Vision

- Statement of future position in critical areas
- Imagines future possibilities
- Guides strategic choices

#### Mission

- Core purpose for existence
- Unique description that clearly defines the hospital's unique service differentiation

#### Values

- Principles and beliefs that drive organizational behavior
- Guide conduct and define accountability



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#### Governance as Leadership

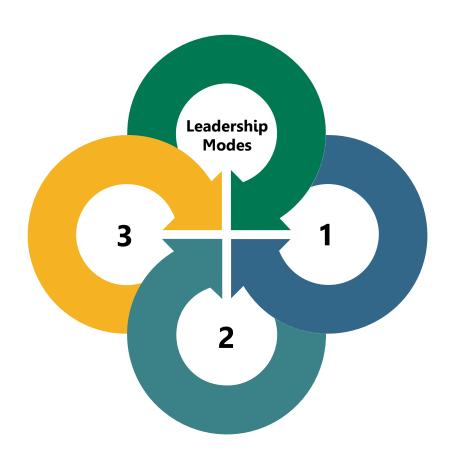
Traits of High-performing Boards







## What High-performing Boards Do Differently



**#1:** Generative

**#2: Strategic** 

**#3: Fiduciary** 

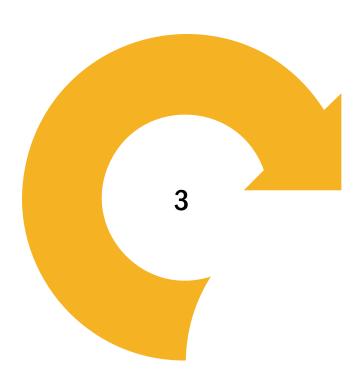
Balance

Source: Governance as Leadership: Reframing the Work of Nonprofit Boards. Richard Chiat, Willian Ryan and Barbara Taylor



## **Oversight**

#### Fiduciary Leadership



- Board's purpose: Stewardship of assets
- Board's role is a sentinel
- Attention to financial discipline
- Mission fidelity
- Ensuring that resources are used effectively and in service of the mission
- Ensuring compliance/oversight
- Board organized according to administrative functions
- Problems are to be spotted

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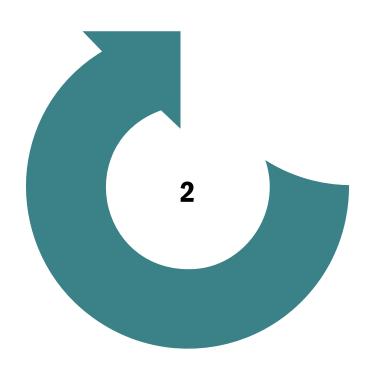




Source: Governance as Leadership: Reframing the Work of Nonprofit Boards. Richard Chiat, William Ryan and Barbara Taylor and governWell™ BoardBrief

### Foresight

#### Strategic Leadership



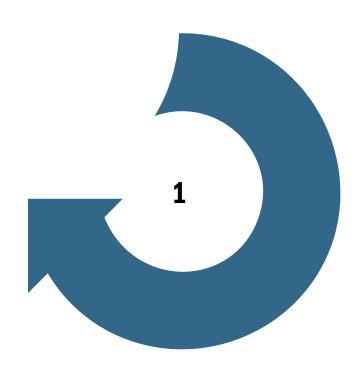
- Board's purpose: Strategic partnership with management
- Board helps shape strategy
- Board works with staff to establish priorities
- Board interested in external forces and competition
- Board organized according to strategic priorities
- Problems are to be solved

Source: Governance as Leadership: Reframing the Work of Nonprofit Boards. Richard Chiat, William Ryan and Barbara Taylor and governWell™ BoardBrief.



## Insight

#### Generative Leadership



- Board's purpose: Leadership for organization
- Board's role is as sense-maker
- Board discerns problems from multiple points of view
- Board sees themselves as inventive leaders
- Board values learning
- Board not prone to "diving into the weeds"
- Board assesses its performance
- Problems are to be framed

Source: Governance as Leadership: Reframing the Work of Nonprofit Boards. Richard Chiat, William Ryan and Barbara Taylor and governWell™ BoardBrief.



### Governance vs. Management

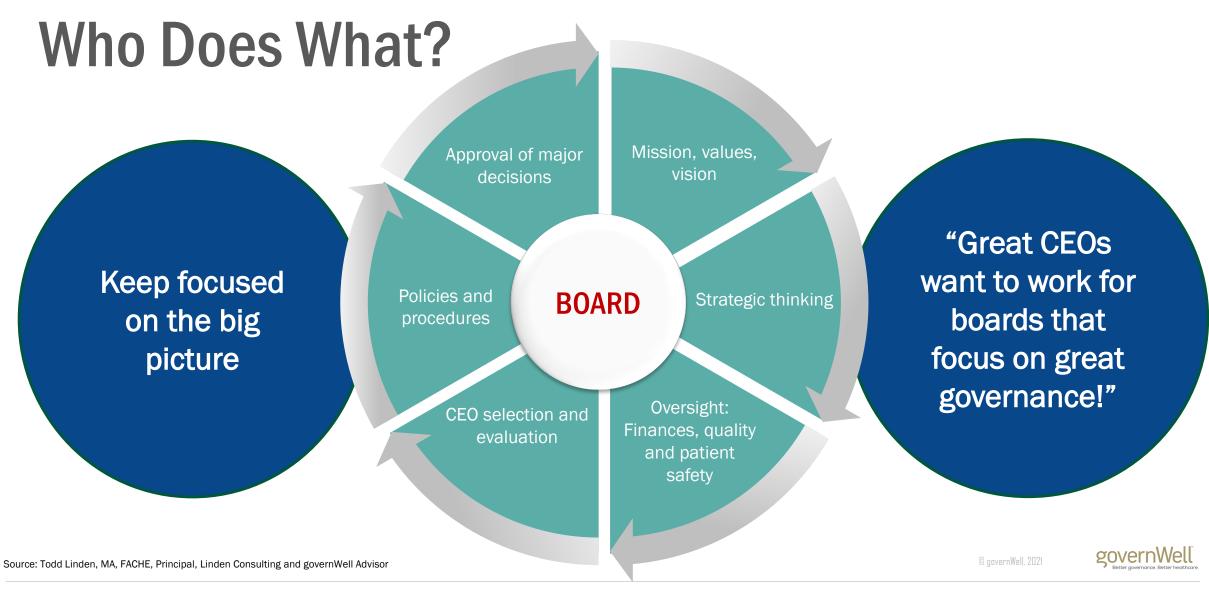
- The board and management each play a unique and critical role in the organization's ability to fulfill its mission and vision
- Understanding the differences between governance and management roles is crucial to organizational success
- When working together in their correct roles, the partnership between the board and management can help organizations excel in meeting the community's needs in the best and most effective ways possible



## The "Fine Line Challenge"

- Board members must understand that they are expected to be leaders and overseers, not managers and implementers
- Board members should be concerned with the "what" not the "how"
- Micromanagement is a term generally applied to boards that pay too much attention to details and not enough attention to the "big picture" strategic issues
- When board and management step out of bounds of their respective responsibilities, the result can be disastrous





## Who Does What?



This is the one time it's okay to weigh-in on management issues...when asked.



Source: Todd Linden, MA, FACHE, Principal, Linden Consulting and governWell Advisor

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# Board vs. Management Key Functions Table

Responsibility	Board Role	Management Role
Development and Review of Mission, Values and Vision	<ul> <li>Approves and helps formulate</li> <li>Participates in annual strategic planning that reviews and updates the statements, when necessary</li> </ul>	<ul> <li>Provides input and background materials for board review and discussion prior to formulating and/ or updating the statements</li> </ul>
Implementation of Mission, Values and Vision	Makes decisions that support the mission, values and vision	<ul> <li>Establishes and carries out</li> <li>Sets the tone and expectations for the culture of the organization</li> </ul>
Long-term Strategic Plan	Exhibits leadership in strategic thinking and planning sessions, reviewing relevant materials and engaging in robust debate and dialogue about critical issues impacting the organization	Enables well-informed, data-driven board discussions, debate and decision-making by providing relevant data, information and background materials and input     Develops strategic
	<ul> <li>Determines strategic directions, including strategic initiatives that address identified community health needs identified</li> </ul>	recommendations, measurable objectives, action plans and budgets to support and implement strategic goals and direction
	<ul> <li>Approves the long-term strategic plan</li> </ul>	
Short-term Plans	Ensures progress towards goals through regular monitoring and oversight	Develops and implements plans

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## **Boardroom Conduct**

#### Legally, board members must take particular care to:

- Become thoroughly informed before making a business decision (Duty of Care)
- Put the needs of the organization first when taking responsibility for its operations (Duty of Loyalty)
- Abide by laws, regulations and standards of the organization's operations (Duty of Obedience)

Each duty may be applied in a court of law to determine whether a board member has acted improperly.



# **Duty of Obedience Behaviors**

The IRS recommends several board actions to promote good governance practices related to the board's duty of obedience:

- ✓ Disclosure of potential personal conflicts of interests
- ✓ Develop both a code of ethics and whistleblower policies
- ✓ Adopt and monitor specific fundraising policies
- Carefully outline and determine compensation practices
- ✓ Develop and strictly adhere to document retention policies



## **Avoiding Conflicts of Interest**



- Understand your board's current conflict of interest policy and actively revisit the policy.
- Continuously evaluate your own potential conflicts and seek guidance from your board chair, hospital or health system CEO or general counsel to ensure transparency and compliance.
- Discuss and understand what you are personally liable for both during and after your service on a board.
- Encourage your board to engage in regular conversation regarding conflicts of interest policies.

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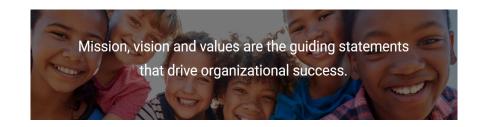


Source: HTNYS, Conflicts of Interest: A Primer for Healthcare Trustees, 2019

# **Heightened Scrutiny and Pressure**



# **Community-focused Boards**



- Define clearly the "community" (or communities) served
- Ensure a mission that describes the organization's commitment and is used to evaluate key decisions facing the hospital/health system
- Conduct an assessment of the community's health status
- Develop indicators of community health status
- Build and sustain board responsibility for community involvement and health improvement



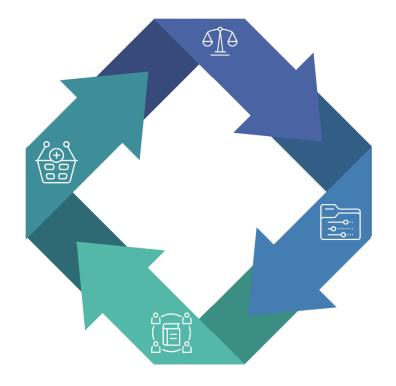
## The Board's Role | Four leadership actions

#### **Establish Strategic Intent**

Mission, values and strategic priorities should reflect a strong commitment to health equity and addressing disparities. Use existing strategic initiatives as "touchstones" for moving forward.

#### **Lead through Collaboration**

Collaboration is essential to effectively addressing health equity. Move beyond the "four walls of the hospital" for greater impact. Engage trustees as ambassadors for building relationships with public health and community-based organizations.



#### Reflect, Understand and Learn

Look both internally and externally to better understand inequities. Establish a culture of equity in which all staff and providers are motivated to address disparities. Learn from best practices and other organizations pursuing health equity.

## Ensure Meaningful, Measurable Goals

Unless specifically measured, disparities in healthcare may go unnoticed. Equity should be a key part of quality improvement efforts and community outreach programs.

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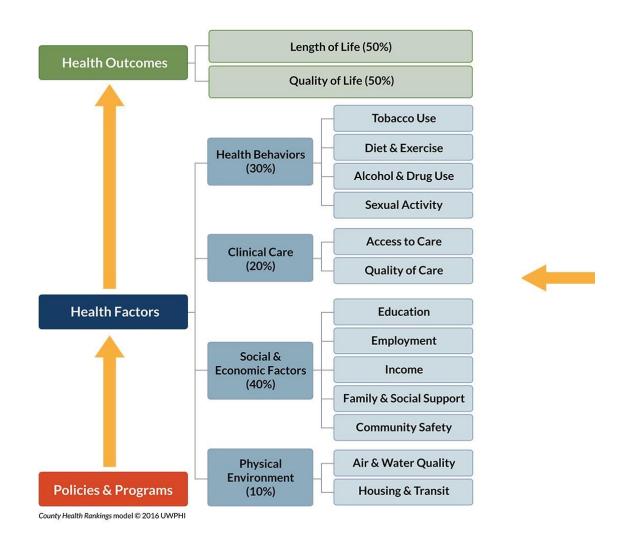
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# Understanding SDOH and Community Needs

What influences how healthy residents are and how long they will live?



Source: www.countyhealthrankings.org

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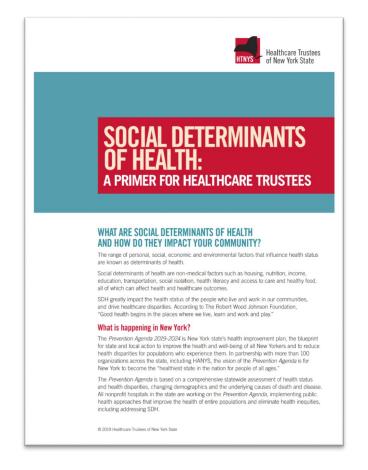


## **Understanding Social Determinants**



"It is important for trustees to understand how the social determinants of health impact the health of their communities. Building partnerships today to address social determinants of health can create the potential to work together in new ways over time to not only improve the health of our communities but to also address health inequity issues in our society."

Victor Ayala
Board Member, One Brooklyn Health
Board Member, HTNYS



Source: Healthcare Trustees of New York State 2019

# **Understanding Health Equity**



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#### Federal ACA community benefit requirement for tax-exempt hospitals:

- Conduct a Community Health Needs Assessment every three years
- Goal: Ensure tax-exempt hospitals and healthcare systems are meeting the needs of their communities and are providing greater transparency and accountability

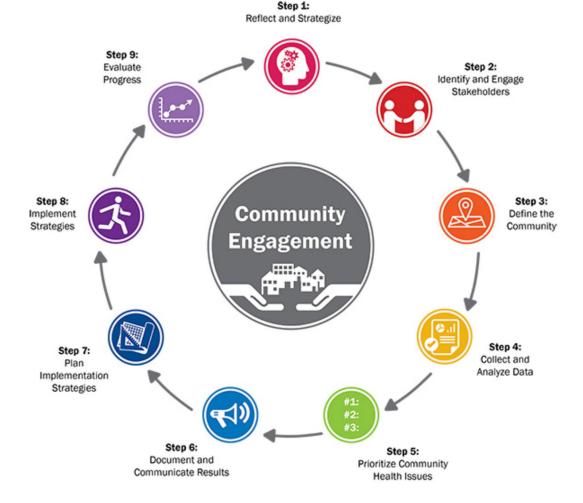
#### **NYS** requirement:

- Create and implement a Community Service Plan:
  - Includes mission statement, health issues facing the community and the hospital's plan (i.e., programs or services) for meeting those needs.
  - Submit annual CSP updates and a "Comprehensive CSP" (includes CHNA) every three years to NYSDOH (next is due Dec. 2022)
  - Many governing boards review and approve CSPs
  - Must post CSPs and CHNAs online for the public

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## **Community Health Needs Assessment**









Source: Association for Community Health Improvement

# NYS Prevention Agenda 2019 - 2024



- New York state's health improvement plan with the vision of making New York the healthiest state for people of all ages.
- Hospitals, healthcare systems and local health departments partner with their communities to improve health and well-being while addressing social determinants of health and health equity.
- Hospitals develop and implement collaborative strategies to achieve goals in at least two
  of the Prevention Agenda's five Priority Areas as part of their CSPs:
  - Prevent Chronic Diseases
  - Promote a Healthy and Safe Environment
  - Promote Healthy Women, Infants and Children
  - Promote Well-Being and Prevent Mental and Substance Use Disorders
  - Prevent Communicable Diseases

(2025 – 2031 Prevention Agenda to be released in 2024)

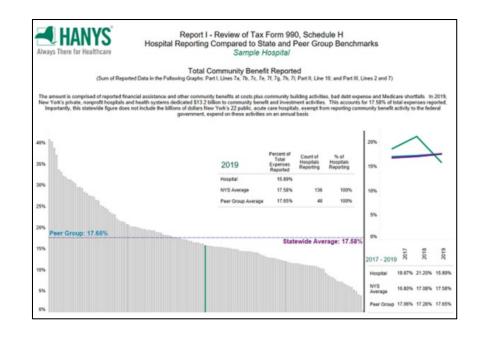
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# **Community Benefit**

- Community benefit: The *quantifiable* benefits hospitals and other not-for-profit organizations offer in return for their tax-exempt status
- Schedule H: Part of the IRS Tax Form 990, it defines community benefit as activities or programs that respond to community need and seek to achieve one or more of the following:
  - improve access to health services
  - enhance public health
  - advance knowledge
  - provide relief of government burden to improve health



 Full and accurate reporting of this investment activity is crucial as public scrutiny of tax-exempt entities continues and is expected to grow

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## Resources for New Board Members





**URL**: htnysorientation.net

**Username:** htnys

Password: Orientation 2021

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# **Quality and Patient Safety**

## Kathy Rauch, RN

Vice President, Quality Advocacy, Research and Innovation and Post-acute and Continuing Care

## Christina Miller-Foster, MPA

Senior Director, Quality Advocacy, Research and Innovation, HANYS

# Agenda

Topic	Speaker
Board's Role in Quality and Patient Safety	Kathy
Key Performance Metrics	Kathy
Medical Staff Oversight	Kathy
Public Reporting of Quality Measures	Christina

## **Board's Role in Quality and Patient Safety**

### Strategic Imperative

- Review annual quality plan
- Review key performance metrics

#### Liability and Risk

- Adverse events
- Infrastructure barriers
- Medical staff oversight

#### Respond to Public

- Media
- Community
- Report Cards

Source: HTNYS Boardroom Basics



# **Annual Quality Plan**

- Framework of guiding principles and priorities
- Supports organization-wide approach to plan, design, measure, assess and improve performance

## **Key Performance Metrics**

#### **Process**

- Patient experience
- Timeliness
- Effectiveness

#### Outcome

- Readmissions
- Mortality
- Hospital-acquired infections
- Patient safety

## **Medical Staff Oversight**

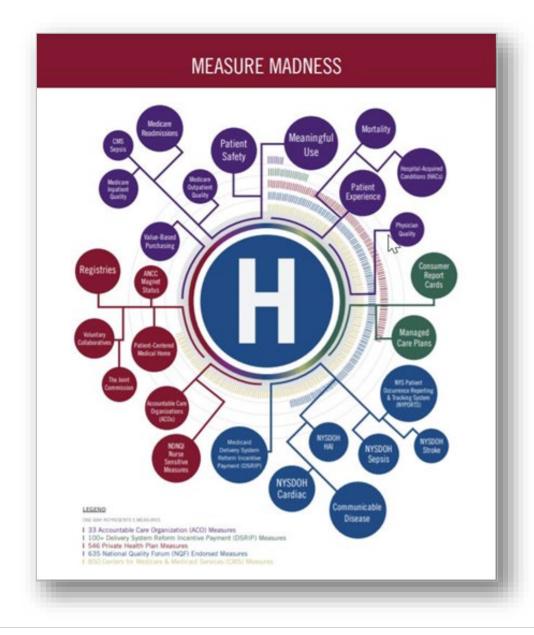
- Assure that only qualified physicians are appointed and retained
- Practice within the scope of capabilities and expertise
- Adherence to policies and procedures

# **Context for Public Reporting**

- Measures, methodologies and results are complex and variable
- Insufficient progress to streamline, align and focus on measures that matter

- Significant new challenges
  - Shift to eCQMs
  - Social media ratings
  - Measurement across the continuum
  - Population health

## **Measure Madness**



https://www.hanys.org/quality/clinical\_operational\_oversight/measures\_that\_matter/



11/10/2021

## HANYS' Report on Report Cards

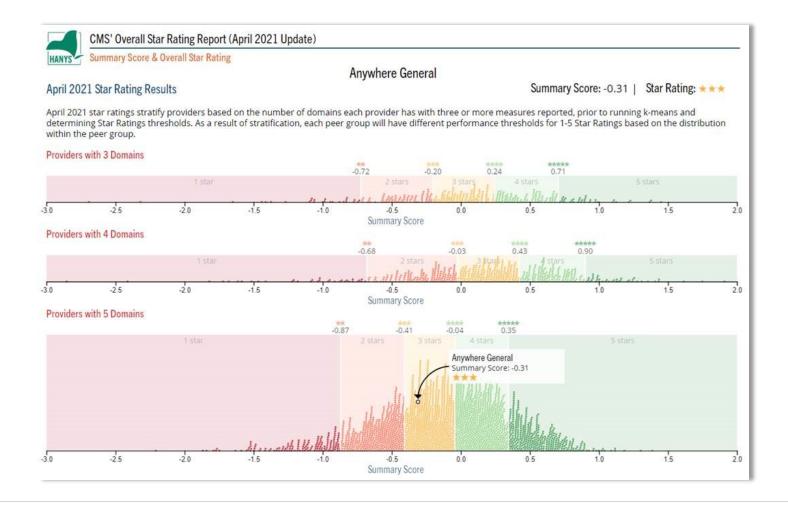




https://www.hanys.org/communications/publications/report\_cards/



# Individual Hospital Star Rating Reports



## Key Messages

## Engagement

- Stay abreast on industry news
- Proactively participate ask questions
- Motivate others

#### Create trust

Thorough and respectful discussion and problem solving

https://www.hanys.org/fetch/?file=/communications/publications/report\_cards/report\_on\_report\_cards\_message\_points.pdf

# Thank you

Kathy Rauch
Vice President
krauch@hanys.org

Christina Miller-Foster
Senior Director
cfoster@hanys.org

The Statewide Voice for New York's Hospitals and Health Systems

## Roundtable and Q & A

Robert Spolzino, Esq.

Chair, HTNYS Board of Governors Trustee, Board of Overseers, Northwell Health

**Sharon Norton Remmer** 

Chair, HTNYS Governance Committee
Trustee, Long Island Community Hospital

Barbara Lorsbach, MBA, FACHE

President, governWell<sup>TM</sup>

## Thank You

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