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textbooks for
entry-level
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GATEWAY

TO HEALTHCARE MANAGEMENT

**Essential Textbooks For
Healthcare Management Education**



HealthAdministrationPress

Foundation of the American College of Healthcare Executives

paid workers because of the tax shelter benefit, but they have not been as widely accepted by blue-collar workers because of the high deductible amount.

SELF-TEST QUESTIONS

1. Briefly explain the concept of health insurance.
2. What is adverse selection, and how do insurers deal with the problem?
3. What is moral hazard, and how do insurers handle it?

3.3 THIRD-PARTY PAYERS

As mentioned earlier, a large proportion of profit patients (the users of healthcare services) but **third-party payers**. Because a healthcare organization we first discuss the sources of most revenues, we examine the types of reimbursement methods. Health insurance originated in Europe, and health insurers fall into two broad categories:

CRITICAL CONCEPT
Third-Party Payers

Third-party payers are the insurers that reimburse healthcare organizations and hence are the major source of revenues for most providers. Third-party payers include private insurers, such as Blue Cross and Blue Shield, and public (government) insurers, such as Medicare and Medicaid. Third-party payers use several methods to pay providers, depending on the specific payer (for example, Blue Cross versus Medicare) and the type of service rendered (for example, inpatient versus outpatient).

from literature sources should not be blindly adopted as performance targets. For example, a 2006 study of patient falls in the medical-surgical unit of a large hospital revealed 5.75 falls per 1,000 patient days (Sherrod and Good 2006). Could this fall rate be used to set a performance expectation in another hospital with a similar unit? The manager of the similar unit would need answers to several questions to ensure a valid comparison:

- ◆ What is the study unit's definition of *patient fall*? Do we define *patient fall* the same way?
- ◆ How reliably did caregivers in the study unit report patient falls? If they did not report falls consistently, would the number of patient falls have been higher if the caregivers had reported more reliably?
- ◆ The researchers reported the number of patient falls per 1,000 patient days. Do we use the same reporting methodology? Do we count the number of patients who have fallen, or do we count the number of falls? (Each patient could fall more than once.)
- ◆ Are the patients in the study population similar or dissimilar to our patient population?
- ◆ Are there differences between our physical environment and that of the study unit?

DID YOU KNOW?

Informally, benchmarking can be defined as the practice of being humble enough to admit that someone else is better at something and wise enough to learn how to match, and even surpass, him at it. Benchmarking stems from a personal and organizational willingness to continuously improve. A vibrant sense of curiosity and a deep respect for learning are the keys to successful benchmarking and adoption of best practices.

Benchmarking
Learning about the practices in other companies for the purpose of using them in your own organization

The term *benchmarking* is typically used to describe performance comparison (e.g., "we are benchmarking against other hospitals"), but it involves more than simple comparison to other organizations. **Benchmarking** uses the level of performance achieved by an exemplary or world-class organization as the standard for comparison (Sower, Duffy, and Kohlers 2007). In other words, it functions more like a scoreboard that determines whether an organization is performing above or below standard. This standard may come from an exemplary healthcare organization or from an organization outside the healthcare industry recognized for its superior performance. For example, comparison data from a hotel, a car rental company, or an airline with an excellent check-in procedure could be used to set performance goals for the patient registration process in a hospital or a clinic. A growing number of opportunities are emerging for healthcare organizations to compare their performance with world-class companies in other industries. One example is the American Customer Satisfaction Index (ACSI 2006), co-sponsored by the American

Questions and exercises gauge comprehension

Quick-hit examples and facts reinforce concepts

Sidebars highlight important and interesting information

In-margin definitions clarify terms

Gateway textbooks feature:

- Sidebars, fact boxes, and real-world examples to bring concepts to life
- Chapter learning goals and summaries, in-margin definitions, exercises, and review questions for student study
- Prominent authors from the field of healthcare management education

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What Is the Gateway to Healthcare Management Textbook Series?

The Gateway to Healthcare Management textbook series is specifically created for students new to healthcare management. The series was developed in response to instructor feedback that it was difficult to find appropriate books for introductory healthcare management courses—books that didn't assume too much prior knowledge and were not filled with unfamiliar terms. Ideally suited to undergraduates yet relevant to students at any level who are new to the field of study, the Gateway series uses examples and anecdotes to bring concepts to life, learning aids to reinforce key concepts, and experiential exercises to boost students' comprehension.

Features of Gateway Series Textbooks

- Gateway textbooks provide the fundamental knowledge and skills that will prepare students to manage effectively at the departmental level and beyond
- Books are written by prominent authors in healthcare-management education
- Authors provide timeless fundamental principles along with examples of current trends and developments in healthcare management
- Methods and tools incorporated throughout give students the opportunity to practice real-world situations and develop strategies for successful healthcare management
- A variety of healthcare settings are addressed, including hospitals, clinics, medical group practices, long-term care, and more!

"Pete Olden's *Management of Healthcare Organizations: An Introduction* is extremely accessible and has a lot of excellent features. I especially like the "Try it, Apply it" which puts the concepts to work in real-life, real-time examples."

—DEBORAH PETERS, PROGRAM DIRECTOR,
HEALTH ADMINISTRATION, MONTANA STATE UNIVERSITY-BILLINGS

Finance



Fundamentals of Healthcare Finance, Second Edition

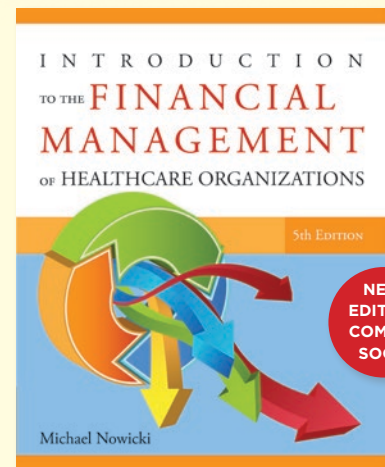
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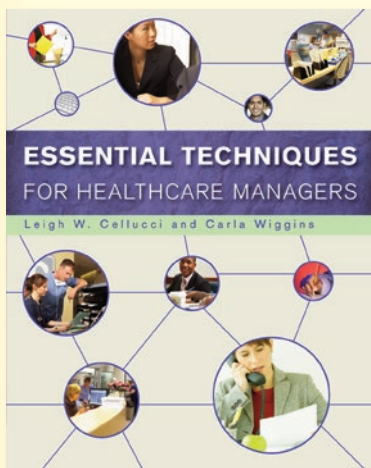
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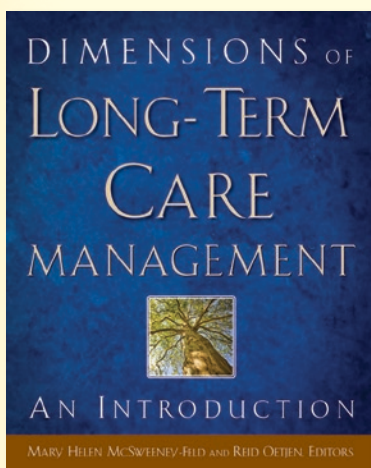
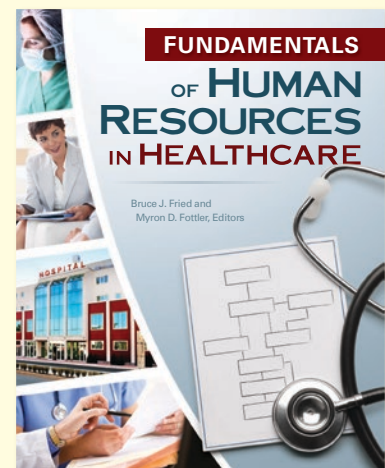
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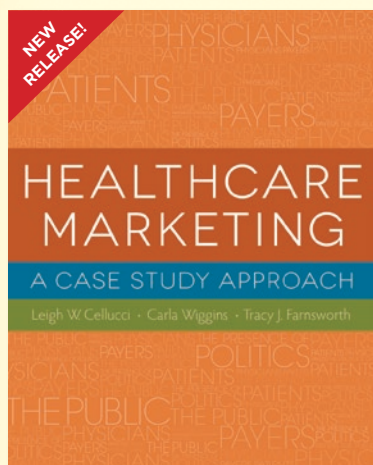
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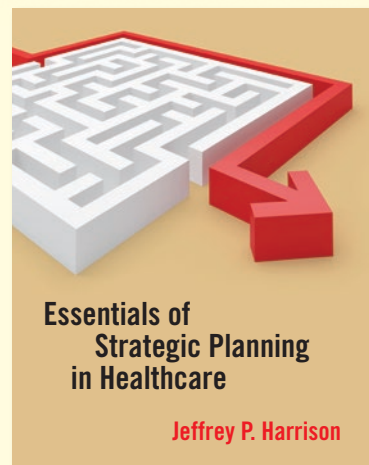
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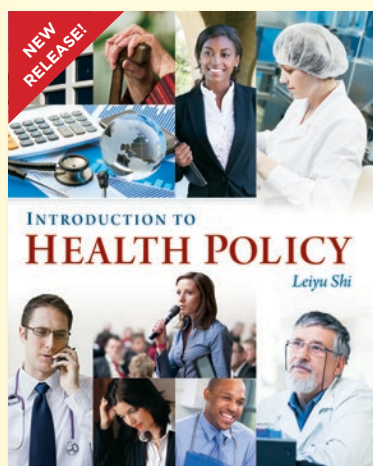
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Essentials of Strategic Planning in Healthcare

Jeffrey P. Harrison

Policy



Introduction to Health Policy

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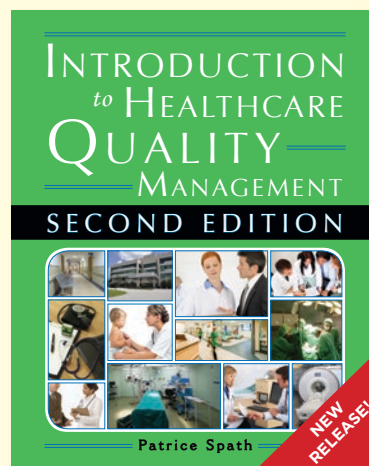
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Quality



INTRODUCTION to HEALTHCARE QUALITY MANAGEMENT SECOND EDITION

Patrice Spath

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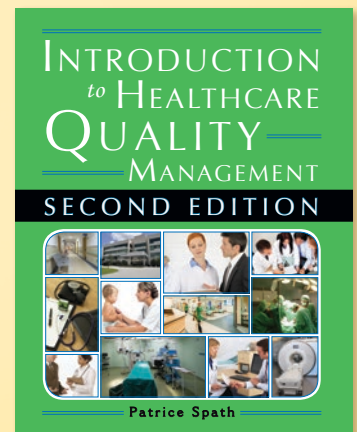
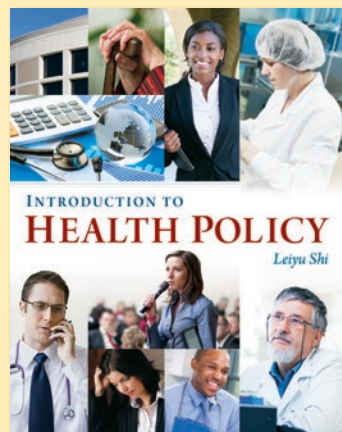
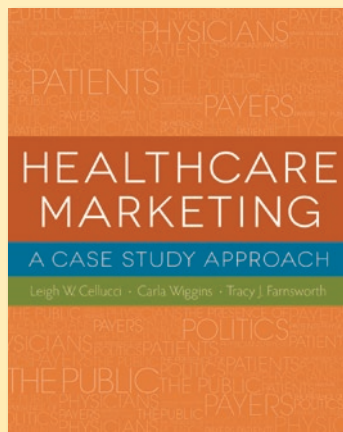
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