

Understanding Healthcare Financial Management Seventh Edition

The anthrax incidents following the 9/11 terrorist attacks put the spotlight on the nation's public health agencies, placing it under an unprecedented scrutiny that added new dimensions to the complex issues considered in this report. The Future of the Public's Health in the 21st Century reaffirms the vision of Healthy People 2010, and outlines a systems approach to assuring the nation's health in practice, research, and policy. This approach focuses on joining the unique resources and perspectives of diverse sectors and entities and challenges these groups to work in a concerted, strategic way to promote and protect the public's health. Focusing on diverse partnerships as the framework for public health, the book discusses: The need for a shift from an individual to a population-based approach in practice, research, policy, and community engagement. The status of the governmental public health infrastructure and what needs to be improved, including its interface with the health care delivery system. The roles nongovernment actors, such as academia, business, local communities and the media can play in creating a healthy nation. Providing an accessible analysis, this book will be important to public health policy-makers and practitioners, business and community leaders, health advocates, educators and journalists.

Entrepreneurship is now unanimously considered a major engine for socio-economic development, mainly because it creates jobs and innovation. Governments around the world pay special attention to removing entrepreneurial barriers in order to support development via different policies, especially entrepreneurial finance. Developing, emerging and transition economies (DETEs) significantly differ from industrialized countries because of their specific conditions: institutions, infrastructure facilities, and bureaucratic procedures within the administrative system. Thus, firms and their entrepreneurs in and from DETEs may behave differently, particularly in terms of their financial strategies. Therefore, contextualizing is critical to better understand the relationship between entrepreneurial finance, innovation, and development in DETEs. This book provides a systematic and profound understanding of how finance, entrepreneurship, innovation, and their interactions contribute to economic development in DETEs, which cover a large number of countries in Asia, Central and Eastern Europe, Latin America, and Africa. The book mainly includes empirical studies and is divided into four parts. Part A includes four chapters which adopt a multinational approach to examine different sources and types of finance for entrepreneurship and small business in different groups of countries classified as DETEs. Part B also includes four chapters and focuses on entrepreneurial finance in specific countries belonging to the DETEs. Part C goes beyond the business scope of entrepreneurial finance and includes three chapters concerned with the relationship between finance, women's entrepreneurship, and poverty. Part D includes three chapters focusing on the comparison within developing countries as well as between developing and developed countries. This essential and comprehensive resource will find an audience amongst academics, students, educators, and practitioners, as well as policymakers and regulators.

Instructor Resources: Test bank, PowerPoint slides, discussion points for the book's end-of-chapter discussion questions and additional questions and discussion points, teaching tips, chapter overviews, and a transition guide to the new edition. Healthcare affects the lives of most Americans and absorbs a large portion of the United States' resources. It also is continually debated, prompting ongoing legislative changes and market restructuring. One of the best ways to understand healthcare, in all its complexity, is from an economic perspective--that is, from the perspective of the financial self-interest of all involved parties. Health Policy Issues: An Economic Perspective takes just such an approach.

Renowned author Paul J. Feldstein describes the forces that press for change in healthcare and explains why the US health system has evolved to its current state. This book's 38 concise, issue-oriented chapters cover various aspects of the US health system, including the cost of medical care, health insurance, Medicare and Medicaid, physician and nursing shortages, medical school admittance, malpractice reform, prescription drugs, and more. Throughout, the book integrates information about the most significant health policy enacted in many years--the Affordable Care Act (ACA). Discussion questions, key points, and further readings round out every chapter. Thoroughly revised and updated with current data and research findings, this seventh edition includes new and expanded content on the Medicare Access and CHIP Reauthorization Act, physician malpractice reform, employee health benefits, generic drug shortages, political versus economic markets, and much more. The updated content includes three new chapters: "Should Profits in Healthcare Be Prohibited?" discusses the role of profits and the consequences of eliminating profit."Health Associations and the Political Marketplace" focuses on the types of legislation demanded by different health associations and explores the economic self-interest of each association's members and policy preferences."The Affordable Care Act: Did It Achieve Its Goals?" examines one of the most important objectives of the ACA--to reduce the number of uninsured Americans--and complements the ACA coverage throughout the book. For 25 years, Health Policy Issues: An Economic Perspective has been highly regarded in the field of health policy. By illuminating the intersection of economics and policy, this topical book helps readers gain a better understanding of the ever-changing and multifaceted healthcare delivery system.

Revised edition of: Cases in healthcare finance / Louis C. Gapenski, George H. Pink. Fifth edition. [2014]

"[This book is] the most authoritative assessment of the advantages and disadvantages of recent trends toward the commercialization of health care," says Robert Pear of The New York Times. This major study by the Institute of Medicine examines virtually all aspects of for-profit health care in the United States, including the quality and availability of health care, the cost of medical care, access to financial capital, implications for education and research, and the fiduciary role of the physician. In addition to the report, the book contains 15 papers by experts in the field of for-profit health care covering a broad range of topics--from trends in the growth of major investor-owned hospital companies to the ethical issues in for-profit health care. "The report makes a lasting contribution to the health policy literature."--Journal

of Health Politics, Policy and Law.

"The Law of Healthcare Administration teaches readers to think through these and other questions of law. Wide-ranging and skillfully written, author Stuart Showalter surveys the pressing issues uncovered during of two centuries of US policy, court decisions, and regulation. Unlike other textbooks on healthcare law, this book emphasizes a practical understanding of legal concepts of interest to students and educators in health administration, public health, nursing, allied health, and related programs. It does so in plain, accessible language, featuring real-life judicial decisions"--

The number one guide to corporate valuation is back and better than ever Thoroughly revised and expanded to reflect business conditions in today's volatile global economy, Valuation, Fifth Edition continues the tradition of its bestselling predecessors by providing up-to-date insights and practical advice on how to create, manage, and measure the value of an organization. Along with all new case studies that illustrate how valuation techniques and principles are applied in real-world situations, this comprehensive guide has been updated to reflect new developments in corporate finance, changes in accounting rules, and an enhanced global perspective. Valuation, Fifth Edition is filled with expert guidance that managers at all levels, investors, and students can use to enhance their understanding of this important discipline. Contains strategies for multi-business valuation and valuation for corporate restructuring, mergers, and acquisitions Addresses how you can interpret the results of a valuation in light of a company's competitive situation Also available: a book plus CD-ROM package (978-0-470-42469-8) as well as a stand-alone CD-ROM (978-0-470-42457-7) containing an interactive valuation DCF model Valuation, Fifth Edition stands alone in this field with its reputation of quality and consistency. If you want to hone your valuation skills today and improve them for years to come, look no further than this book.

For most Americans, staying "mentally sharp" as they age is a very high priority. Declines in memory and decision-making abilities may trigger fears of Alzheimer's disease or other neurodegenerative diseases. However, cognitive aging is a natural process that can have both positive and negative effects on cognitive function in older adults - effects that vary widely among individuals. At this point in time, when the older population is rapidly growing in the United States and across the globe, it is important to examine what is known about cognitive aging and to identify and promote actions that individuals, organizations, communities, and society can take to help older adults maintain and improve their cognitive health. Cognitive Aging assesses the public health dimensions of cognitive aging with an emphasis on definitions and terminology, epidemiology and surveillance, prevention and intervention, education of health professionals, and public awareness and education. This report makes specific recommendations for individuals to reduce the risks of cognitive decline with aging. Aging is inevitable, but there are actions that can be taken by individuals, families, communities, and society that may help to prevent or ameliorate the impact of aging on the brain, understand more about its impact, and help older adults live more fully and independent lives. Cognitive aging is not just an individual or a family or a health care system challenge. It is an issue that affects the fabric of society and requires actions by many and varied stakeholders. Cognitive Aging offers clear steps that individuals, families, communities, health care providers and systems, financial organizations, community groups, public health agencies, and others can take to promote cognitive health and to help older adults live fuller and more independent lives. Ultimately, this report calls for a societal commitment to cognitive aging as a public health issue that requires prompt action across many sectors.

Written by the President and CEO of the Institute for Healthcare Improvement (IHI) and a leading health care journalist, this groundbreaking book examines how leading organizations in the United States are pursuing the Triple Aim—improving the individual experience of care, improving the health of populations, and reducing the per capita cost of care. Even with major steps forward – including the Affordable Care Act and the creation of the Center for Medicare and Medicaid Innovation -- the national health care debate is too often poisoned by negativity. A quieter, more thoughtful, and vastly more constructive conversation continues among health care leaders and professionals throughout the country. Innovative solutions are being designed and implemented at the local level, and countless health care organizations are demonstrating breakthrough remedies to some of the toughest and most expensive challenges in health care. Pursuing the Triple Aim shares compelling stories that are emerging in locations ranging from Pittsburgh to Seattle, from Boston to Oakland, focused on topics including improving quality and lowering costs in primary care; setting challenging goals to control chronic disease with notable outcomes; leveraging employer buying power to improve quality, reduce waste, and drive down cost; paying for care under an innovative contract that compensates for quality rather than quantity; and much more. The authors describe these innovations in detail, and show the way toward a health care system for the nation that improves the experience and quality of care while at the same time controlling costs. As the Triple Aim moves from being largely an aspirational framework to something that communities all across the US can implement and learn from, its potential to become a touchstone for the work ahead has never been greater. Pursuing the Triple Aim lays out the vision, the interventions, and promising examples of success.

Instructor Resources Case questions and solutions, complete instructor versions of the spreadsheet models, PowerPoint slides, and a transition guide to the new edition. Student Spreadsheets (click here for access) With this casebook, students have the opportunity to apply finance principles and concepts to settings that simulate actual work environments. In that way, the book allows instructors to create a bridge between academic learning and applied practice. Each of the 32 finance cases presents a scenario and relevant background on a healthcare organization and poses a financial management issue that students must analyze in order to recommend appropriate courses of action. The majority of cases are accompanied by spreadsheet models to help students perform the required analyses. The casebook also contains seven qualitative mini-cases created to highlight the ethical dilemmas that occasionally arise in the practice of healthcare finance. Important changes to this edition: All cases have been updated, and many have been revised extensively, including new exhibits, timely topics, and new calculations Two new cases have been added to the book: One focuses on bond refunding and the other covers revenue cycle management A new mini-case focuses on the potential ethical conflicts involved with physician-owned distributors (PODs) The PowerPoint slides have been changed to allow instructors to first present a short introduction to the case and then, after students have completed their analyses, review each case by discussing three key learning points

In this book, a world-class editorial advisory board and an independent team of contributors draw on their experience in operations, leadership, and Lean managerial decision making to share helpful insights on the valuation of hospitals in today's

changing reimbursement and regulatory environments. Using language that is easy to understand, *Financial Management Strategies for Hospitals and Healthcare Organizations: Tools, Techniques, Checklists and Case Studies* integrates prose, managerial applications, and regulatory policies with real-world case studies, models, checklists, reports, charts, tables, and diagrams. It has a natural flow, starting with costs and revenues, progressing to clinic and technology, and finishing with institutional and professional benchmarking. The book is organized into three sections: *Costs and Revenues: Fundamental Principles Clinic and Technology: Contemporary Issues Institutional and Professional Benchmarking: Advanced Applications*. The text uses healthcare financial management case studies to illustrate Lean management and operation strategies that are essential for healthcare facility administrators, comptrollers, physician-executives, and consulting business advisors. Discussing the advancement of financial management and health economic principles in healthcare, the book includes coverage of the financial features of electronic medical records, financial and clinical features of hospital information systems, entity cost reduction models, the financial future of mental health programs, and hospital revenue enhancements.

Revision of: *Fundamentals of healthcare finance* / Louis C. Gapenski. c2013. 2nd ed.

One of the few books that addresses financial and managerial accounting within the three major areas of the public sector--government, health, and not-for-profit--the Second Edition provides the fundamentals of financial management for those pursuing careers within these fields. KEY TOPICS: " With a unique presentation that explains the rules specific to the public sector, this book outlines the framework for readers to access and apply financial information more effectively. Employing an engaging and user-friendly approach, this book clearly defines essential vocabulary, concepts, methods, and basic tools of financial management and financial analysis that are imperative to achieving success in the field. This book is intended for financial managers and general managers who are required to obtain, understand, and use accounting information to improve the financial results of their organizations, specifically within the areas of government or public policy and management, not-for-profit management, and health policy and management.

Financial markets for agriculture; Concepts and tools of financial management; Alternatives in resource control; Topics in financial management.

In this thoroughly revised and updated third edition of *Fundamentals of Health Care Financial Management*, consultant and educator Steven Berger offers a practical step-by-step approach to understanding the fundamental theories and relationships guiding financial decisions in health care organization. Set in a fictional mid-sized hospital, the book is written in diary form, taking the reader into the inner workings of the finance executive's office. This introduction to the most-used tools and techniques of health care financial management includes health care accounting and financial statements; managing cash, billings and collections; making major capital investments; determining cost and using cost information in decision-making; budgeting and performance measurement; and pricing. As in the previous editions, this book introduces key practical concepts in fundamental areas of financial management.

Health Sciences & Professions

Health Care Finance and the Mechanics of Insurance and Reimbursement stands apart from other texts on health care finance or health insurance, in that it combines financial principles unique to the health care setting with the methods and process for reimbursement (including coding, reimbursement strategies, compliance, financial reporting, case mix index, and external auditing). It explains the revenue cycle in detail, correlating it with regular management functions; and covers reimbursement from the initial point of care through claim submission and reconciliation. Thoroughly updated for its second edition, this text reflects changes to the Affordable Care Act, Managed Care Organizations, new coding initiatives, new components of the revenue cycle (from reimbursement to compliance), updates to regulations surrounding health care fraud and abuse, changes to the Recovery Audit Contractors (RAC) program, and more.

Revised edition of: *Understanding healthcare financial management*. Louis C. Gapenski, George H. Pink. 2015.

The essential concepts of both accounting and financial management are covered in this best-selling healthcare finance book. Through clear explanations, numerous examples, and realistic practice problems, it arms future managers with the grounding they need to make financially sound decisions for their healthcare organizations. This thoroughly updated edition provides more emphasis on the unique marketplace for healthcare services and additional examples from nonhospital settings, including medical practices, clinics, home health agencies, nursing homes, and managed care organizations.

Accounting Fundamentals for Health Care Management is ideal for an introductory course in financial accounting in both undergraduate and graduate programs. With a focus on basic accounting in health care management, this essential book contains the vocabulary of and an introduction to the tools and concepts employed by finance officers. Students will learn how to assess financial information, ask the appropriate questions, and understand the jargon-laden answers.

Includes case studies for assignments and classroom discussion Covers NP practice financial management

Comprehensive instructor's manual available including presentation slides, chapter guides, and grading rubrics This textbook is designed for students preparing as advanced practice clinicians, including APRNs, DNPs, DPTs, DOTs, and physician assistants. The book covers both health policy issues and practice financial management issues. It is organized into seven sections in two parts. The first part is focused on macro issues in healthcare finance, and the second part is focused on healthcare financing management in professional practice. This approach provides the context necessary for the clinician to understand how to manage reimbursement requirements and preferred provider contracting as health care financial policy drives these payment and contracting strategies. Each section features a case study to facilitate classroom discussion on key points. This book is suitable for healthcare finance courses in the curriculum for MSN and DNP programs and also for schools of social work, medicine, occupational, and physical therapy.

This new edition of *Financial Management of Health Care Organizations* offers an introduction to the most-used tools and techniques of health care financial management, including health care accounting and financial statements; managing cash, billings and collections; making major capital investments; determining cost and using cost information in decision-making; budgeting and performance measurement; and pricing. Now completely updated, this book provides students with the practical, up-

to-date tools they need to succeed in this dynamic field. Provides an introduction to the most-used tools and techniques of health care management. Additional questions and problems for the chapters. Updated perspectives throughout the text. Instructor's Manual available on CD-ROM including all exhibits in PowerPoint and Excel, answers to all problems in PowerPoint and Excel, and working spreadsheet models of exhibits and selected problems for classroom use. Accompanying website features links to related websites, glossary, and downloadable Instructor's Manual and sample chapters. www.blackwellpublishing.com/zelman

In 1996, the Institute of Medicine (IOM) released its report *Telemedicine: A Guide to Assessing Telecommunications for Health Care*. In that report, the IOM Committee on Evaluating Clinical Applications of Telemedicine found telemedicine is similar in most respects to other technologies for which better evidence of effectiveness is also being demanded. Telemedicine, however, has some special characteristics-shared with information technologies generally-that warrant particular notice from evaluators and decision makers. Since that time, attention to telehealth has continued to grow in both the public and private sectors. Peer-reviewed journals and professional societies are devoted to telehealth, the federal government provides grant funding to promote the use of telehealth, and the private technology industry continues to develop new applications for telehealth. However, barriers remain to the use of telehealth modalities, including issues related to reimbursement, licensure, workforce, and costs. Also, some areas of telehealth have developed a stronger evidence base than others. The Health Resources and Service Administration (HRSA) sponsored the IOM in holding a workshop in Washington, DC, on August 8-9 2012, to examine how the use of telehealth technology can fit into the U.S. health care system. HRSA asked the IOM to focus on the potential for telehealth to serve geographically isolated individuals and extend the reach of scarce resources while also emphasizing the quality and value in the delivery of health care services. This workshop summary discusses the evolution of telehealth since 1996, including the increasing role of the private sector, policies that have promoted or delayed the use of telehealth, and consumer acceptance of telehealth. *The Role of Telehealth in an Evolving Health Care Environment: Workshop Summary* discusses the current evidence base for telehealth, including available data and gaps in data; discuss how technological developments, including mobile telehealth, electronic intensive care units, remote monitoring, social networking, and wearable devices, in conjunction with the push for electronic health records, is changing the delivery of health care in rural and urban environments. This report also summarizes actions that the U.S. Department of Health and Human Services (HHS) can undertake to further the use of telehealth to improve health care outcomes while controlling costs in the current health care environment.

"This best-selling textbook covers the essential concepts of accounting and financial management in healthcare"--

Health Care Finance: Basic Tools for Nonfinancial Managers is the most practical financial management text for those who need basic financial management knowledge and a better understanding of healthcare finance in particular. Using actual examples from hospitals, long-term care facilities, and home health agencies, this user-friendly text includes practical information for the nonfinancial manager charged with budgeting. The Fourth Edition offers:

- An expanded chapter on Electronic Records Adoption: Financial Management Tools & Decisions
- New chapter: ICD-10 Adoption and Healthcare Computer Systems
- New chapter: Other Technology Adoption and Management Decisions
- New chapter: Strategic Planning and the Healthcare Financial Manager
- New case study: "Strategic Planning in Long-Term Care" that connects with the chapter on strategic planning
- New appendix: "Appendix C: Employment Opportunities in Healthcare Finance"

In an era of skyrocketing drug costs, changing reimbursement, pharmacist and technician shortages, and a seemingly permanent "do-more-for-less" era of hospital and health-system management, every management decision that a pharmacy manager makes has financial implications. Success as a manager means understanding - and then mastering - the basics of finance and accounting as practiced in institutional health care. *Financial Management for Health-System Pharmacists* provides pharmacy managers with a set of fundamental financial management tools as they relate not only to pharmacy department management, but to the management of the hospital and health care system. Chapters include information on:

- * Financial accounting principles
- * Hospital financial management
- * Budgeting principles
- * Forecasting pharmaceutical expenditures
- * Cost management basics
- * Controlling operating results

Racial and ethnic disparities in health care are known to reflect access to care and other issues that arise from differing socioeconomic conditions. There is, however, increasing evidence that even after such differences are accounted for, race and ethnicity remain significant predictors of the quality of health care received. In *Unequal Treatment*, a panel of experts documents this evidence and explores how persons of color experience the health care environment. The book examines how disparities in treatment may arise in health care systems and looks at aspects of the clinical encounter that may contribute to such disparities. Patients' and providers' attitudes, expectations, and behavior are analyzed. How to intervene? *Unequal Treatment* offers recommendations for improvements in medical care financing, allocation of care, availability of language translation, community-based care, and other arenas. The committee highlights the potential of cross-cultural education to improve provider-patient communication and offers a detailed look at how to integrate cross-cultural learning within the health professions. The book concludes with recommendations for data collection and research initiatives. *Unequal Treatment* will be vitally important to health care policymakers, administrators, providers, educators, and students as well as advocates for people of color.

Faced with strict government regulations and increasing service demands by consumers, healthcare providers find themselves accountable on both ends. Written to reflect the realities of the 21st century, *Principles of Health Care Management* considers the many outside forces influencing health care institutions, and in doing so provides a progressive and modern reference on how to effectively manage a health organization. Using relevant case studies to illustrate key points, this text explains the critical changes and challenges that administrators must deal with as they go about practicing their profession and what students must learn as they begin their study of this vital field.

Financial Management for Nurse Managers: Merging the Heart with the Dollar, Third Edition is an essential resource that addresses the financial management issues faced by nurse managers. Ideal for students, professionals, chief nursing officers, and those in nurse administrator roles, it examines the financial impact of administrative and management decisions across hospitals and healthcare organizations. The Third Edition covers a broad range of topics and includes a variety of real-world examples. Important Notice: The digital edition of this book is missing some of the images or content found in the physical edition.

The Basics of Public Budgeting and Financial Management brings budgetary theory and practice together, filling the void between the two that has existed in the field of budgeting and public finance. This book bridges the gap by providing the reader with applications and exercises that reinforce budgetary theory. Students are given the opportunity to learn various concepts and skills necessary to succeed in the field and the exercises provided in each chapter require application of what is learned. Specifically, students will be exposed to basic budget and

finance concepts, public revenue, financial management, risk assessment, cost benefit analysis, and so on. This handbook also provides great tools that allow the user to visually display budgets and other analysis. Students will gain the solid foundation needed to begin work in a budget office. Features of this second edition include enhanced data and optional in-class assignments. For ancillary materials, please contact the author at menifieldc@missouri.edu.

Financial Management in the Sport Industry provides readers with an understanding of sport finance and the importance of sound financial management in the sport industry. It begins by covering finance basics and the tools and techniques of financial quantification, using current industry examples to apply the principles of financial management to sport. It then goes beyond the basics to show how financial management works specifically in sport - how decisions are made to ensure wealth maximization. Discussions include debt and equity financing, capital budgeting, facility financing, economic impact, risk and return, time value of money, and more. The final section focuses on sport finance in three sectors of the industry - public sector sports, collegiate athletics, and professional sport-providing in-depth analysis of financial management in each sector. Sidebars, case studies, concept checks, and practice problems throughout provide practical applications of the material and enable thorough study and practice. The business of sport has changed dynamically since the publication of the first edition, and this second edition reflects the impact of these changes on financial management in the sport industry. New to this edition are changes to reflect the global nature of sport (with, for example, discussions of income tax rates in the Premiere League), expanded material on the use of spreadsheets for financial calculations, a primer on accounting principles to help students interpret financial statements, a valuation case study assignment that takes students step by step through a valuation, a new stadium feasibility analysis using the efforts of the Oakland Raiders to obtain a new stadium, a new economic impact example focusing on the NBA All Star game, and much more.

"This book offers a fundamental overview of how financial management works in healthcare organizations. Designed for healthcare management students, clinical students, and managers new to healthcare, the book reinforces basic concepts through mini-case studies, practice problems, and self-quizzes. A comprehensive case at the end of the book draws on information presented throughout the chapters to help readers apply their newfound financial skills to real-world healthcare scenarios"--

Regional health care databases are being established around the country with the goal of providing timely and useful information to policymakers, physicians, and patients. But their emergence is raising important and sometimes controversial questions about the collection, quality, and appropriate use of health care data. Based on experience with databases now in operation and in development, Health Data in the Information Age provides a clear set of guidelines and principles for exploiting the potential benefits of aggregated health data--without jeopardizing confidentiality. A panel of experts identifies characteristics of emerging health database organizations (HDOs). The committee explores how HDOs can maintain the quality of their data, what policies and practices they should adopt, how they can prepare for linkages with computer-based patient records, and how diverse groups from researchers to health care administrators might use aggregated data. Health Data in the Information Age offers frank analysis and guidelines that will be invaluable to anyone interested in the operation of health care databases.

Understanding Healthcare Financial ManagementGapenski's Understanding Healthcare Financial Management

Learn how financial management fits into the healthcare organization. Financial Management for Nurse Managers and Executives, 5th Edition covers the latest accounting and financial management practices distinctly from the nurse manager's point of view. Topics include how financial management fits into the health care organization, financial accounting, cost analysis, planning and control management of the organization's financial resources, various management tools, and the future of financial management with respect to healthcare reform and international accounting standards. This new edition includes updated information on the Affordable Care Act, Accountable Care Organizations, Value Based Payment, and Team and Population Based Care. Nursing-focused content thoroughly describes healthcare finance and accounting from the nurse manager's point of view. Numerous worksheets and tables including healthcare spreadsheets, budgets, and calculations provide you with specific examples of how to apply financial management principles to nursing practice. NEW! Information about the Affordable Care Act details how changes and developments affects coverage for millions of Americans. NEW! Value-Based Payment reimbursement information details what nurse executives need to know in order to use this new system NEW! Coverage of Accountable Care Organizations provides current information on one of the emerging forms of managed care and how it works within the financial system of healthcare. NEW! Team-and Population-Based care information covers how to work with healthcare professionals outside of nursing.

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