



جامعة المستقبل
AL MUSTAQBAL UNIVERSITY

كلية العلوم قسم الانظمة الطبية الذكية

Lecture: (2)

Healthcare Systems Administration

Subject: Healthcare Systems Administration: Roles and Responsibilities

Level: Fourth

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Roles and Responsibilities

Healthcare systems administration is a complex field that requires advanced leadership, management, and healthcare knowledge. A healthcare administrator must not only be proficient in leadership, business, and communication, but also possess a strong background in healthcare fields such as medicine, nursing, or pharmacy. Healthcare management encompasses various roles and responsibilities, from managing individual units or departments to overseeing an entire hospital.

Managing Personnel: Healthcare administrators are responsible for overseeing diverse teams, including medical professionals, technicians, and administrative staff. This involves tasks such as staffing, payroll, performance evaluations, and conflict resolution. Effective management is essential for maintaining quality patient care and organizational efficiency. Research shows that good leadership skills among healthcare managers lead to higher job satisfaction and reduced burnout rates among staff (Lyu et al., 2020).

Monitoring Quality of Care: Managers are responsible for ensuring that healthcare services meet regulatory standards and quality measures. They must oversee compliance with governmental regulations and the accreditation requirements set by bodies like The Joint Commission. Monitoring patient care quality and maintaining environmental safety are crucial responsibilities. Poor performance in these areas can endanger patients and lead to legal consequences (Wang et al., 2022).

Organizational Planning and Strategy: Healthcare managers play a significant role in strategic planning, goal-setting, and the implementation of improvement initiatives. They are responsible for aligning departmental activities with organizational goals and ensuring that their staff is well-informed and engaged in



these initiatives. Long-term strategic planning has been shown to contribute to the sustainability of healthcare organizations (Reed et al., 2018).

Challenges in Healthcare Administration

Healthcare administrators face numerous challenges, including balancing competing priorities and managing a high-stress environment.

Balancing Competing Priorities: Healthcare managers must often balance the demands of hospital executives, government regulations, and the needs of frontline staff. For instance, administrators might be focused on improving patient satisfaction scores, while frontline staff may be more concerned with staffing shortages and morale issues. This balance can be difficult to achieve, and managers must continuously adjust to meet the needs of both parties.

High-Stress Environment: Healthcare facilities operate 24/7, creating a high-pressure environment where decisions must be made quickly and often with limited information. The stakes are high in healthcare, as poor performance can result in patient harm or even death. This constant pressure can lead to significant stress for administrators, who must be prepared to manage complex and life-altering situations (Kumar & Saha, 2021).

The U.S. Healthcare System: Structure, Cost, Quality, and Access

The U.S. healthcare system is one of the largest and most complex in the world. With over \$2.5 trillion spent annually on healthcare, the system is marked by high costs, which can be attributed to factors such as extensive medical training, expensive pharmaceuticals, and advanced diagnostic technologies.

Challenges in U.S. Healthcare System: High Costs: The high costs of healthcare are due to several factors, including the expense of medical training, research, drug development, and the rising demand for healthcare from an aging population.



New Developments in U.S. Healthcare: The Affordable Care Act (ACA) brought significant changes to the U.S. healthcare system. It has made insurance more accessible and affordable, preventing insurers from canceling policies for minor mistakes, keeping young adults on their parents' insurance plans until the age of 26, and ending lifetime limits on coverage for most benefits. Furthermore, ACA created health insurance exchanges to help individuals choose the best health plan based on their financial capabilities and healthcare needs.

Types of Health Insurance Plans

Health insurance in the U.S. comes in various forms. The most common plans include:

Health Maintenance Organizations (HMO): HMO plans require individuals to choose a primary care physician (PCP) who coordinates all healthcare services, including referrals to specialists. These plans are typically more affordable but offer fewer choices in terms of healthcare providers. Example: Kaiser Permanente offers an HMO plan that provides coordinated care across different specialties and integrates patient management effectively.

Preferred Provider Organizations (PPO): PPO plans provide greater flexibility, allowing members to visit any healthcare provider without requiring a referral. However, visiting out-of-network providers comes with higher out-of-pocket costs. Example: Blue Cross Blue Shield offers PPO plans that allow patients to visit any healthcare provider within a broad network of hospitals and physicians.

Point of Service (POS): POS plans combine features of HMO and PPO. Patients choose a PCP but have the option to seek care outside the network at a higher cost, without needing a referral. Example: Aetna's POS plan offers a hybrid of HMO



and PPO, where patients can seek care outside the network while maintaining lower costs with a PCP referral.

Health Savings Accounts (HSA): An HSA is a tax-advantaged account that allows individuals to save money for healthcare expenses. This account is linked with high-deductible health plans (HDHPs), and the funds can be used to cover medical expenses on a pre-tax basis. Example: Many employers offer HSA-compatible HDHPs, allowing employees to save for future medical expenses while benefiting from tax savings.

Medicare and Medicaid: Medicare is a federally funded program for individuals aged 65 and older or those with specific disabilities. Medicaid is a state and federally funded program that provides coverage for low-income individuals of all ages.

Divisions of the Healthcare System

The healthcare system is not limited to hospitals and physician offices. It includes several sectors that contribute to overall patient care:

The Pharmaceutical Industry: The pharmaceutical industry is responsible for researching, developing, and manufacturing medications and vaccines to treat diseases. This sector is vital for the discovery of new therapies and treatments. Example: Pfizer and Johnson & Johnson are key players in the pharmaceutical industry, producing life-saving medications for chronic conditions such as cancer and cardiovascular diseases.

Long-Term Care: Long-term care includes a wide range of services that support individuals who need assistance with daily activities due to chronic illness, disability, or aging. These services are provided in facilities like nursing homes and assisted living centers. Example: Assisted living facilities, such as those



operated by Brookdale Senior Living, offer long-term care for seniors who need assistance with personal care but do not require full-time medical attention.

Mental Healthcare: Mental healthcare involves the treatment and management of mental health disorders such as depression, anxiety, and schizophrenia. Mental health services are often underfunded and underutilized. Example: Behavioral health hospitals, such as those run by the National Institutes of Health (NIH), provide inpatient care for individuals with severe mental health conditions.

Integrative Medicine: Integrative medicine combines conventional medical treatments with alternative therapies that are scientifically proven to be safe and effective. Example: The Cleveland Clinic offers integrative medicine services, combining traditional treatments with alternative therapies like acupuncture and massage to promote overall health.

Safety Net Services: Safety net services provide healthcare for low-income, uninsured individuals. These programs rely heavily on government funding to provide care to vulnerable populations. Example: The Children's Health Insurance Program (CHIP) offers health coverage to children in low-income families who do not qualify for Medicaid.