

E. Administration and Resource Management

Because, in many instances, administrative and resource management requirements of health organizations are very similar or even identical to the needs of other organizations, applications of this group were historically the first to be implemented in the health sector.

There are, however, major differences in the way organizations manage their resources in different countries and in the public and private sector. In contrast to the technical applications (logistics of patient care, clinical data management, diagnostic and therapeutic support, and population and environment applications), in administrative and resource management area of applications, legal regulations and other constraints play a fundamental role in the definition of desired functionalities.

Applications of this group include the following modules:

- Finance Management
 - (a) *Billing / Accounts Receivable*
 - (b) *Accounts Payable*
 - (c) *General Accounting / Bookkeeping*
 - (d) *Cost Accounting*
 - (e) *General Ledger*
- Human Resources
 - (a) *Payroll*
 - (b) *Human Resource Management*
 - (c) *Staffing*
 - (d) *Benefits*
- Materials Management
 - (a) *Purchasing*
 - (b) *Inventory Control*
- Fixed Assets Management
- Medical Equipment Maintenance
- Physical Facilities Maintenance
- Laundry Services
- Transportation Services
- Budgeting and Executive Support

Billing / Accounts Receivable

- Patient Index (PI). Should have multiple search capabilities. The PI should be able to qualify searches by name, date of birth, sex, national individual identifiers (such as National Registration Number, Social Security Number, Health Plan Number, etc.) The index should support a variety of possible internal identifiers such as medical record number, case number, multiple account numbers, etc., for each patient and be able to maintain cross-reference to other existing identifiers in each of the facilities used by the patient in the same site or in other locations. (32)

- System should support a Master Patient Index (MPI), at multi-site, multi-institutional, regional, or national levels that links existing Patient Indices together. (33)
- Ability to look up patient “also-known-as” (AKA). The MPI should support multiple names so that patients who change their names can still be located with an MPI search. MPI name searches should search both the name and the AKA files during name searches. (34)
- Link family members. The system should contain a cross-reference facility for linkage of records belonging to different family members. (35)
- Name alert search. Patients with same last name and same first name and initial should be flagged to alert users of possible conflict. (36)
- Enrollment program. Registration systems should support enrollment and cancellation of enrollment in group or managed care programs. The system should support a posting program that should allow the member data to be downloaded from external insurance, group provider, or managed care organizations. (37)
- Automatically assign billing number. A unique billing or account number is assigned for each patient visit, admission, or care cycle. Alternately, the health care institution should be able, for certain patient or visit types, to link multiple visits to a single number for serial or monthly billing. (41)
- Field updates from transactions in the Patient Registration module pass to MPI. On subsequent interactions the operator should be able to change and update registration fields where updating is allowed. Updated registration file should pass updated data to the MPI. (43)
- Front-end insurance capture. Allows insurance verification function and levels of benefits. (47)
- Outpatient discharge. The health care institution should have the option of entering the discharge date on emergency services and outpatient accounts, or profiling the system to change them to discharge status after a certain number of hours or days. (50)
- Allow change in patient status from emergency room or outpatient to inpatient, so that when patients are admitted the original registration data should be rolled over to the inpatient visit. (58)
- Leave of absence processing. Allow leave of absence processing on inpatient accounts so that account may remain active without generating room charges for a period of time. (59)
- Event notices. System should create “event notices” that can be routed to one or more printers based on the following events: pre-admit, admit or registration, transfer, reservation booked, discharge scheduled, discharge, financial class update, bed status (housekeeping) changed, new medical record number assigned. (60)

- Access to registration MPI (Master Patient Index) and pass updates. Be able to view MPI to lookup and identify patient by demographics or Medical Records number. (92)
- Real-time, interactive module. Should also be able to meet managed care requirements, contract management, interim billing, and late charge billing. Up-to-the-minute information, complete account details, and current account detailed history. (305)
- Integration with other financial functions. This module must be integrated with General Ledger, Accounts Payable, and Cost Accounting Systems. Must automatically transfer patient data to/from the admissions system and maintain guarantor, insurance, disease, and procedure categorization for payment purposes (e.g., DRGs), and archive account data. (306)
- Account search and retrieval. There should be quick account identification by patient name, number, unit number, or guarantor number. (307)
- View patient account information on-line/comments. Provides comprehensive view of account information available on-line. Includes visit and demographic, insurance verification, level of benefits, patient admission/discharge/transfer (ADT) information, current charges and payments, previous charges and payments. Also include summary of charges by department, billing and accounts receivable status information and diagnosis. The system should allow posting and review of account comments. (308)
- Determine source of payments by payer. System should be able to review payment transactions on-line and determine source of payment. Should be able to write summary and detail reports that will identify payment sources. System should allow for daily cash payments by payer. (309)
- Contract benefits. The system must provide the organization the ability to control group or managed care agreements and assist in the monitoring of contracts with third-party payers. (310)
- Benefit plans predetermined billing. Standard or common insurance benefit plans should be defined in a master file and loaded into accounts at time of verification. Plans may be modified at any time for individual accounts. (311)
- User-defined insurance verification screens. System should support healthcare institution defined verification screens, so that major payer groups can have customized screens to capture critical elements for each group. Screens should allow the healthcare institution to define required fields for payer and benefit information. (312)
- Central charge master. System should support a charge master file for each facility within the enterprise. (313)

- Charges and credit entry. System should have ability to manually post charges and credits for both room and ancillary charges. Claims data entry system should have ability to post claims data not otherwise captured in registration or abstracting functions. Examples include value codes, occurrence codes, and dates. (314)
- Auto room charge posting, auto charge. System should allow for posting room charges based on nightly census. Should support multiple accommodation types and rates. System should post corrected charges and credits when changes or cancellations are made to admit or discharge dates. (315)
- Ability for “series bill” or “specific visit bill”. For ambulatory processing the system should be able to support both “visit” and “series” billing. Series billing would include the ability to bill for stated time periods or for a particular type of treatment for the duration of a treatment plan. (316)
- Ability to post charges at the level of pre-admission. Allow posting to accounts prior to actual admission for pre-admission events. (317)
- Prorate benefits by multiple payers. System should have ability to identify and support insurance proration for basic and major medical insurance charging any number of possible payers. Should be able to support excluded charges, specific charge rates for contract payers, and contract amounts. (318)
- Log system/view on-line. System should allow on-line maintenance and inquiry to logs account data, and on-line request of standard reports. (319)
- Automated account follow-up. Automated systems should support follow-up by payer, patient name, account balance ranges, account age, and status (if there are pending payments in Accounts Receivable or bad debt history). System should include past account history and previous follow-up activity. (320)
- Sliding fee scales for private pay billing. System should support patient billing discounts based on family income and size. (321)
- Values and codes edited against tables. Common data elements should be table or profile driven with on-line editing during data entry. (322)
- Electronic claims submission. Provide ability to bill third-party payers. (323)
- Produce hard-copy bills. Produce bills for payers not accepting electronic claims. (324)
- Electronic remittance processing. System should retrieve remittance advice form from third-party payers, and support posting of payments, contracts, and adjustments to Accounts Receivable. (325)

- Batch charges posting (automated.) System should support batch posting routines for ancillary charges generated in order entry systems. (326)
- Payments adjustments. System should support manual payments, adjustments, and contractals for insurance and self-pay. Should be able to transfer pro-rated balances in posting function. (327)
- Reclassify revenue by payer. System should support manual reclassification of revenue by insurance payer, financial class, patient type when accounts are rebilled or insurance information is transferred or prorated to another payer after initial billing. (328)
- Bill hold capability (parameter-driven.) System should be able to delay billing until all required fields are complete. Health care institution can define different bill hold requirements by patient type (inpatient, outpatient, emergency services) and insurance type. (329)
- Ability to produce demand bills (all forms.) System should be able to demand printing of a bill with current charges for non-discharged accounts or accounts on hold. (330)
- Ability to force bill patients. System should be able to allow users to manually force an account into billed status even though it may not have met all bill hold criteria. (331)
- Ability to cycle bills. System should allow for generation of cycle bills for inpatients based on payer, length of stay, and/or balance. (332)
- Rebill accounts. System should allow for re-bill of accounts following changes in payers, charges, length of stay, and benefits. (333)
- Accounts receivable bad debt write-off capability. System should have ability to manually transfer accounts from active receivable to a bad debt status. Bad debt accounts should remain on-line for review, reporting, posting payments, etc. Transfer should generate all of the accounting and revenue transactions associated with write-off and recovery of bad debt. (334)
- Bad debt to accounts receivable reinstatement. System should allow manual transfer from bad debt to receivable if account was written in error. This transaction should generate the appropriate accounting and revenue transactions. (335)
- Auto accounts receivable processing (parameter-driven.) System should be able to rebill, write-off small balances and bad debts, purge zero balances, and change accounts from insurance to self-pay without manual intervention if accounts meet auto-processing criteria. Those criteria would include account age, balance, financial class, number of payments received, patient type, etc. The system should allow healthcare institution to write and maintain rules to automate this process. (336)
- Purging capability (parameter-driven). System should have ability to purge accounts from active patient master and accounts receivable or bad debt files. Purge criteria should be

healthcare institution-defined, based on number of days since account reached zero balance. (337)

- Financial logs. System should include financial logs to allow summary review of charges, payment, diagnosis, diagnostic or procedure categorization for payment (DRGs), revenue and utilization data for cost reporting, and contract analysis. Logs data should be able to be automatically collected and posted to the logs data base from other systems modules. Should include both standard reports and report writer capability. (338)
- Ability to transfer balances to different payers. System should allow the transfer of prorated balances between payers for billing or accounts receivable purposes. (339)
- Support revenue and usage statistics. Maintain statistics for revenues and services by patient type, medical service, financial class or payer, healthcare institution, department, clinic, and location. (340)
- Process collection agency tapes. System should be able to create an extract of account information for submittal to collection agencies. The tape should be created automatically based on write-off activity to collection agencies. (341)
- Pass billed data to automated collection system. System should provide an on-line collection system with health care institution tickler files for account follow-up. Information from billing and payment activity should pass to the collection system to provide collectors with current account data. (342)
- Produce parameter-driven data mailers. System should support production of data mailers and collection letters with healthcare institution-defined cycles. (343)
- Automated collection assignments and statistics. Automated system should support distribution of accounts to collectors and maintain work statistics for each collector indicating the number of accounts assigned, worked, backlogged, etc. (344)
- Integrated registration/billing/collection letter. Automated collections system should be integrated to registration and billing systems so that data entered in one will be noted in the others. Comments or field updates performed in one system will update in each database. (345)
- Electronic denial reasons posted to billed account. System should allow for denial reasons to be posted to accounts with electronic remittance processing. Denial information should be available for on-line review. (346)
- Physician/healthcare institution charges on same bill. System should have ability to include physician and healthcare institution charges on the same bill where permitted/required by payer. (347)

- Archiving/restoring. System should have ability to purge billing and account data and restore it at some later time. (348)

Accounts Payable

- Common accounts payable features/functions. Provides the ability to handle the common features and functions of Accounts Payable, including expense allocation, one-time vendors, payment plan management, price adjustments and variances, discounts, and suspended invoice processing. (349)
- Provider management. Provides the flexibility of handling a variety of vendor documents, including single payment invoices, recurring invoices, and credit memos. Ability to alter vendor arrangements to accommodate changes as to discount specifications, address changes, and payment from different bank accounts. (350)
- Purchase order interface. Provides the ability to access details of acquisition and payment information by purchase order number. (351)
- Materials management interface. Provides the ability to interface automatically to the materials management applications (pharmacy, inventory control, etc.), when necessary. (352)
- Automatic or manual payment. Permits the vouching process to handle either automatic or manual payment period/cycle and bank account. (353)
- Invoices. Provide the ability to produce invoices. (354)
- Vouchers/checks. Provide the ability to produce vouchers or requests for checks. (355)
- Payment cycles. Provide for payment cycles to be defined by the user. (356)
- One-time processing. Provides for the ability to process ad hoc payments for vendors not included in the vendor master file, on a one-time basis. (357)
- Check clearing. Provides for the ability to clear checks within the system. (358)
- Liability posting. Provides for the ability to automatically post liabilities. (359)
- Credit invoices. Provide for the ability to handle credit invoices. (360)
- Audit trail. Maintains a comprehensive audit trail and general ledger interface in accordance to legal requirements. (361)
- Tax reporting. Provide for automatic production of tax reports, as required by specific country and local governments. (362)

General Accounting / Bookkeeping

- Accounting functions. Compatible with the legal requirements of each case, including the following general functions: automatic transfer of transactions from all financial modules, transfer of transactions between different organizations in multi-organization environment. (363)
- User-defined accounting lines. User-defined systems of allocating expenses and revenues. (364)
- Transaction facilities. No limit to length of time detail and summary data are retained; must allow prior and future period transactions, master log report that displays all batch transactions, and immediate update of account balances upon posting. (365)
- On-line look-up. On-line account inquiries to allow authorized users to view up-to-the-minute account balances or activity on demand. These inquiries must provide an audit trail indicating the transaction sources. Entry lists available in order of entry or in account number sequence. (366)

Cost Accounting

- Cost determination. Determine the cost of a cost/service unit, which corresponds to procedure codes in billing utilizing allocation methodology of user choice. Must map procedure codes to individual and multiple service units and store past, present, and future average rates for resources such as labor and materials and prorated general costs. (367)
- Cost distribution. Generates detailed reports on comparisons of actual and standard costs, fixed and variable costs, budgets, variance analysis, service profitability, and departmental responsibility. (368)
- Cost reporting. Application should provide users with multiple profitability reports based on various selection criteria as well as standard cost and service usage by cost unit. These reports should allow for budget comparison and variance analysis by managers throughout the organization. (369)

General Ledger

- Chart of accounts. User-controlled chart of accounts with unlimited number of defined accounts should be available. Permit organizational hierarchy that allows reports to be defined for any level of management. (370)

Payroll

- Standard payroll features. Provide the ability to perform typical payroll calculations, such as gross-to-net salary on a table-driven basis. Payroll information, including base rate, effective date, step, current benefit plans, withholdings, and automatic start/stop dates. (371)
- Rollback function. Provides retroactive calculations and computes earnings, taxes, and deductions and must be capable of mass edit routines to employee withholdings and benefits and provide a payroll summary by department, payroll register, tax, and deduction registers. Facility for posting to general ledger. (372)
- Special payroll features/functions. Provide the ability to handle the common features and functions of payroll, including on-line, real-time data entry and editing, batch balancing, overtime calculations, salaries of employees working in multiple positions at multiple pay rates, and payroll history. The system should provide for real-time inquiry of employee earnings and compensation as well as year-to-date inquiry routines and compute multiple payrolls with different schedules, list employee pay information, and post payroll data in general ledger. (373)
- Special compensation. Provide the ability to handle compensation, including wage and salary analysis and job evaluation and the ability to handle situations that depart from regular compensation, including common items such as stock options, and deferred payment and bonuses. (374)
- Salaries funded by multiple sources. Provide the ability to track salaries funded by multiple sources. (375)
- Direct deposit. Provide the ability to forward employee salary checks directly to their banks, in addition to providing traditional paper checks. (376)
- Retroactive pay. Provides the ability to calculate pay on a retroactive basis. (377)
- Deduction arrears and recovery. Provide the ability to calculate and report deduction arrears and recovery. (378)
- Automated check reversal. Provides for reversing checks automatically, based on user-defined criteria. (379)
- Date sensitivity. Provides the ability to automatically produce payroll checks based on specific dates, or conditions, such as “the last working date before the last day of the month”, or “every Friday”. (380)
- Audit and transaction reports. Provide comprehensive audit and transaction reports that are available for review before producing checks. (381)

- Labor distribution. Distribute payroll amounts among the appropriate labor departments as established by the user. (382)
- Government reporting. Provides reporting for applicable federal, state, and local governments, as well as deductions for applicable taxes. (383)
- Budget management. Provides the ability to monitor expense versus budget data, and make on-line changes where appropriate. (384)
- Integration with human resources and benefits systems. Provides interface to institution's human resources and benefits systems, where applicable. (385)

Human Resources Management

- Position and staffing. Provide the ability to control details of staffing, including positions, employee skills, and resource allocation. The on-line database should provide instant access to employee detailed personal record and history. Minimum data in the employee file should include: applicant tracking through recruiting, interviewing, and selection process, demographics, qualifications, training history, dependents, payroll status, hire date, next evaluation date, attendance template, position number, department, and job code. (386)
- Training and development. Provide the ability to track and manage training of employees, including course crediting, where applicable. (387)
- Performance tracking. Provides the ability to record, track, and manage employee performance, on a regular basis. Include the ability to have multiple inputs to evaluation, by the employee, by the employee's peers, and by management. (388)
- Career planning. Provides the ability to record and track career plans by employee, allowing input from both the employee and management. Includes ability to modify and update career plans dynamically. (389)
- Labor relations. Provide the ability to track and manage common elements of labor relations, including the status of collective bargaining agreements and union contract details. (390)
- Job applicant tracking. Provides the ability to enter and track the status of applicants through the recruiting, interviewing, and selection process. (391)

Staffing

- On-line scheduling. Department managers should be able to create templates to allow diverse groups with varying needs to set their own scheduling criteria. It will also process special requests on-line, e.g., days off, vacation, planned sick days, or jury duty. Specialized

skills of individual staff should be viewable on-line and provide ad hoc scheduling reports of staff whose certification will expire shortly. (392)

- Schedule-makers should be able to experiment with draft schedules before creating a final schedule. Productive/nonproductive time data will provide the ability to track productivity based on real hours of work. (393)
- Expected attendance. Forecast of attendance data will be stored on a template for the employee and may be edited as necessary for the pay period. There will be on-line entry of summary time card data and the ability to accommodate daily time card entry. (394)
- Staffing planning. Provide recommended staff schedules to work a shift which also identifies problems of over- or under-staffing. Patient load, degree of patient dependency, and case type also will be factored in scheduling of nursing staff. Information modeling provides the ability to model future human resource scenarios and make analyses. (395)
- Cost impact modeling. Budget capabilities will be inherent in this system to help managers evaluate the cost effectiveness of their proposed schedules with funds available in their budget. The budget dollars will be prorated by specific time frames to match past experience of high census and degree of patient dependency status and severity of illness. (396)
- Timecards. Generation of timecards for employees for the use of payroll/personnel system. These will support any combination of job codes and shifts. (397)

Benefits

- Labor relations. Provide the ability to track and manage common elements of labor relations, including the status of collective bargaining agreements and union contract details. (390)
- General functions. Provide the ability to manage and track benefits, including medical and dental benefits, retirement, sick leave, and vacations. (398)
- Complex tax support. Provides the ability to handle complex taxes, including federal, state, and local taxes. (399)
- Periodic/nonperiodic payments. Provide the ability to handle both periodic and nonperiodic benefit payments. (400)
- Sources/deductions. Provide the ability to handle an unlimited number of sources and deductions per account. (401)
- Disbursements. Provide the ability to handle third-party disbursement processing. (402)
- Payment/deductions history. Provide the ability to have on-line benefits payment/deductions history. (403)

Purchasing

- Vendor information. Provide for on-line retrieval of detailed vendor information. (404)
- Vendor revalidation/invalidation. Provides the ability to invalidate or revalidate vendor for future purchases. (405)
- Vendor accounts payable. Links to Provide vendor accounts payable data and the ability to update it on-line. (406)
- Stock/nonstock requisition. Provides ability to handle on-line requisition of items, whether normal stock items or not. (407)
- Standard purchase order. Provides ability to support all standard purchase order processing types, e.g., standard, blanket, and consignment, as well as flexibility to support other, user-defined purchase order types. Provide ability to modify existing purchase orders. It will generate “standing” and blanket purchase orders at user-defined intervals. (408)
- Order status tracking. It will provide the status of any purchase order, accommodate multi-facility environments, and generate automatic purchase orders for items at or below their minimum reorder points and nonstock items ordered via department purchase requisitions. (409)
- Contract/open market items. Provide the ability to monitor on-line contract or acquisition of open market items. (410)
- Back-order processing. Allow for handling of back-ordered items. (411)
- Blanket/standing order receipts. Provide the ability to handle blanket or standing order receipts. (412)
- Shipment tolerances. Permit the user to define shipment acceptable tolerances. (413)
- Management and statistical reporting. Vendor performance, cost change, and buyer activity reports. (414)

Inventory Control

- Item database. Provide the ability to capture and maintain all purchased items code and description. Ability to search the database for items easily, by any combination of search arguments. (415)

- Item classification. Allows for classification of database items by product type or by group, and for on-line maintenance of the database. (416)
- Nonstock Items. Allow for capture of nonstock items. (417)
- Receiving functions. Produce receiving documents to record receipts of items with purchase order, and also handle blind receiving and receiving by exception. It should automatically match invoiced amounts to received values. There will be automatic update of quantity on-hand (stock control function) upon posting receipts of inventoried items. On-line inquiry of any purchase order and receipt information as well as providing on-line invoice reconciliation of purchase orders and accounts payable invoices. (418)
- Stock control. Permits recording of descriptive data, commercial brand name, manufacturer, supplier, purchase date, acquisition cost, warranties, and exclusions. Provides real-time updating of on-hand quantities. There will be inventory control features to supply a record of inventory activity such as issues, returns, adjustments, transfers, and purchase order history and provide both report and inquiry capabilities to help users monitor current stock levels. Will be able to support unlimited number of inventories. (419)
- Just in time inventory. Provides ability to support JIT or stockless inventory management techniques. (420)
- Order book. Be able to set up an order book of user-defined item requisition forms. (421)
- Requisitioning. Provides simultaneous order and issue functionality. (422)
- Remote location. Provides the ability to requisition inventory items from a remote location of the health care institution. (423)
- Automatic requisitioning. Supports automatic requisitioning for the purchase of items that fall below user-defined thresholds. (424)
- Delivery tickets. Provide the ability to produce customized delivery ticket, along with stocking instructions. (425)
- Consignment items. Provide the ability to manage items taken from vendors on consignment. (426)
- Inventory report. Provides the ability to produce a complete report of all inventory items, department usage report, stock status reports by type of item, most frequently used, and physical inventory worksheet and comparison reports. (427)
- Multiple units of issue. Support multiple issue of item from any inventory location. (428)

Fixed Assets Management

- Fixed assets database. Permits recording of descriptive data, commercial brand name, manufacturer, supplier, purchase date, acquisition cost, warranties, exclusions, maintenance data. Should be able to use international coding schemes. Provides the ability to update the location and condition of the item. Provides a complete audit trail of transactions affecting each fixed asset item, including disposal (removal from active inventory.) Ability to assign equipment to specific locations. Linkage to Medical Equipment Maintenance or Physical Facility Maintenance Module when they exist. (280)
- Depreciation categories. Provide the ability to assign a depreciation category to the item within the fixed asset schedule. Permit entering data regarding final disposition. (281)
- Asset depreciation. Permits automatic depreciation for all capital purchases and forecast future depreciation. (282)
- Depreciation status. Allows the user access to pertinent statistical data regarding these capital items, as well as appropriate reports to identify the status of purchases within the fixed asset schedule. (283)
- Predated items. Allow for entry of items that predate the introduction of the asset management system to be entered into the system. (284)
- Materials management interface. Provides the ability to interface automatically to the materials management applications (pharmacy, inventory control, etc.), when necessary. (352)

Medical Equipment Maintenance

- Equipment inventory. The equipment inventory should identify the commercial name (brand), manufacturer, size, model number, serial number, acquisition date, price, expected life cycle, warranties, maintenance contracts (including dates), physical location of the equipment in the institution, and any other information needed for maintaining or repairing equipment. (285)
- Order/service database. Provides entry of service requests, scheduled maintenance actions, and scheduling of staff for all preventative maintenance actions and work orders. (287)
- Order execution. Compiles and archives maintenance history, including date work performed, person performing, time to perform procedure, equipment/facility serviced, and any condition evaluation required by the maintenance action along with parts and consumables used in performance of the maintenance or repair action. Provide reports on service realized, labor costs, operating costs (costs of energy, procurement costs, life expectancy, salvage value, and training costs). (288)

- Fixed asset linkage. This should be linked to the Fixed Assets Management Module if it exists. When feasible should be integrated with asset management to provide budget information; life cycle cost analysis, replacement and repair evaluation, energy alternatives, and system effectiveness. (289)
- Parts inventory link. There should be data links to repair parts inventory to determine safe stocking levels as well as providing accurate part number, description, and supplier. (290)
- Manufacturer/supplier information. Data about name, address, telephone, fax, e-mail, and technical support contact of manufacturer, importer, supplier, technical support services. This should be linked to the equipment inventory database. (291)

Physical Facilities Maintenance

- General facility/equipment inventory. The equipment inventory should identify the commercial name (brand), manufacturer, size, model number, serial number, acquisition date, price, expected life cycle, warranties, maintenance contracts (including dates), physical location of the equipment in the institution, and any other information needed for maintaining or repairing equipment. (286)
- Order/service database. Provides entry of service requests, scheduled maintenance actions, and scheduling of staff for all preventative maintenance actions and work orders. (287)
- Order execution. Compiles and archives maintenance history, including date work performed, person performing, time to perform procedure, equipment/facility serviced, and any condition evaluation required by the maintenance action along with parts and consumables used in performance of the maintenance or repair action. Provide reports on service realized, labor costs, operating costs (costs of energy, procurement costs, life expectancy, salvage value, and training costs). (288)
- Fixed asset linkage. This should be linked to the Fixed Assets Management Module if it exists. When feasible should be integrated with asset management to provide budget information; life cycle cost analysis, replacement and repair evaluation, energy alternatives, and system effectiveness. (289)
- Parts inventory link. There should be data links to repair parts inventory to determine safe stocking levels as well as providing accurate part number, description, and supplier. (290)
- Manufacturer/supplier information. Data about name, address, telephone, fax, e-mail, and technical support contact of manufacturer, importer, supplier, technical support services. This should be linked to the equipment inventory database. (291)

Laundry Services

- Linen warehouse locations. Provide the ability to accommodate both linen warehouse locations and circulating linen locations. (292)
- Linen accounting. Provides the ability to account for linen issues/returns by cost center and expense code. The linen analysis system should provide accurate linen usage by linen type and linen items or by ward unit. Ability to track and monitor uniform usage as well as providing accurate billing and credits directly to ward and end users. (293)
- Pick lists. Provide the ability to handle issues or returns of linen based on pick list, or on-line, on demand. (294)
- Linen weights. Provide the ability to record and monitor linen weights to verify laundering expense. (295)
- Laundry orders/receipts. Provide the ability to record laundry orders and receipts by weight. (296)

Transportation Services

- Ability to manage the transport services information including number of kilometers driven, consumption of gas and oil, and other inputs. (297)
- Ability to generate transportation notification through order management. (298)
- Ability to generate an efficiency report on why patient was not brought to the institution. (299)

Budgeting and Executive Support

- Depreciation status. Allows the user access to pertinent statistical data regarding these capital items, as well as appropriate reports to identify the status of purchases within the fixed asset schedule. (283)
- General budgeting functions. Control entry of budget and statistical account data, including: supporting multiple files for current or future periods and department level access for budget development and analysis. It should provide for payroll budget information by department, job code, and earning type (for hours and dollars.) It must generate budget variance reports and comparison reports providing payroll information on hours and dollar amounts. (300)
- Budget transactions. Allow users to initialize budget data for accounts from current or previous budgets, actual data, and annualizations of current year's actual data. Allow users to update budget data for accounts by entering amounts for each period, or yearly amount, or by applying a percentage increase or decrease. (301)

- Payroll and fixed assets linkage. Automatic entry of budget files created in payroll and in fixed asset accounting modules. (302)
- Support revenue and usage statistics. Maintain statistics for revenues and services by patient type, medical service, financial class or payer, healthcare institution, department, clinic, and location. (340)
- Audit trail. Maintains a comprehensive audit trail and general ledger interface in accordance to legal requirements. (361)
- Tax reporting. Provide for automatic production of tax reports, as required by specific country and local governments. (362)
- On-line look-up. On-line account inquiries to allow authorized users to view up-to-the-minute account balances or activity on demand. These inquiries must provide an audit trail indicating the transaction sources. Entry lists available in order of entry or in account number sequence. (366)
- Cost determination. Determine the cost of a cost/service unit, which corresponds to procedure codes in billing utilizing allocation methodology of user choice. Must map procedure codes to individual and multiple service units and store past, present, and future average rates for resources such as labor and materials and prorated general costs. (367)
- Cost distribution. Generates detailed reports on comparisons of actual and standard costs, fixed and variable costs, budgets, variance analysis, service profitability, and departmental responsibility. (368)
- Cost reporting. Application should provide users with multiple profitability reports based on various selection criteria as well as standard cost and service usage by cost unit. These reports should allow for budget comparison and variance analysis by managers throughout the organization. (369)
- Chart of accounts. User-controlled chart of accounts with unlimited number of defined accounts should be available. Permit organizational hierarchy that allows reports to be defined for any level of management. (370)
- Budget management. Provides the ability to monitor expense versus budget data, and make on-line changes where appropriate. (384)
- Position and staffing. Provide the ability to control details of staffing, including positions, employee skills, and resource allocation. The on-line database should provide instant access to employee detailed personal record and history. Minimum data in the employee file should include: applicant tracking through recruiting, interviewing, and selection process, demographics, qualifications, training history, dependents, payroll status, hire date, next evaluation date, attendance template, position number, department, and job code. (386)

- Labor relations. Provide the ability to track and manage common elements of labor relations, including the status of collective bargaining agreements and union contract details. (390)
- Cost impact modeling. Budget capabilities will be inherent in this system to help managers evaluate the cost effectiveness of their proposed schedules with funds available in their budget. The budget dollars will be prorated by specific time frames to match past experience of high census and degree of patient dependency status and severity of illness. (396)
- Management and statistical reporting. Vendor performance, cost change, and buyer activity reports. (414)
- Inventory report. Provides the ability to produce a complete report of all inventory items, department usage report, stock status reports by type of item, most frequently used, and physical inventory worksheet and comparison reports. (427)