

SOFTWARE RECOMMENDATIONS FOR HC NETWORK  
BASED ON A STUDY OF COMPANY ACTIVITIES AND  
THEIR CURRENT SYSTEM PROBLEMS

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## EXECUTIVE

## SUMMARY

### EXECUTIVE SUMMARY

**HC NETWORK is a 501 (c ) (3) corporation** which includes as participating members four federal funded centers, one center, three community mental health centers, and nine supporting members who are hospitals. In 1994, three community health centers

and one homeless center joined together to form HC NETWORK, which had the multiple agendas of moving to integration of the Center infrastructure in administrative, fiscal, and clinical areas, reducing costs through shared purchasing, and promoting community health services in a very competitive public and private environment.

However, its integration of the information system infrastructure was not as successful nor as cost effective as had been envisioned. Although common software and hardware had been purchased as each Center and the Centers shared an MIS Director, the results were not satisfactory. It is this integration of companies and the unsuccessful integration of information that serve as the operating entity for the new integrated delivery system, that is, the Platinum for Windows System.

As new challenges with the current system, American FundWare, confronts them each day, the need for a new system of whatever form has taken on an urgency. A new system is urgently needed to help alleviate the fiscal challenges which are being experienced by the various centers. Some of the reasons for urgency in installing a new system includes:

- Continued integration of the marketplace with providers
- Immigration reform will move an additional 100,000 persons into uninsured status
- Welfare Reform Initiatives are expected to add another 50,000 uninsured individuals
- Florida continues to move rapidly in Medicaid managed care

Under the new Platinum system, the integrity, spirit, mission, and community accountability of the local Board and local CEO who are responsive to local needs and local politics, is maintained while the system has the necessary clinical, fiscal, and information leadership to keep the health centers viable into the twenty first century.

Though, as a matrix management system, it has its disadvantages. Some of the disadvantages include:

- willingness of the individual Center Board of Directors and CEO's to participate in a system which will inherently take away part of their autonomy.
- delineating clear lines of authority between Network and Centers
- possible initial cost increase for centralized hardware/software and system support
- disruption of operations during implementation phase

- possible loss of jobs

On the other hand, there are so many advantages. These include:

- provides for high level (high cost) CFO, CIO, and CMO, that is, the best team
- provides a common centralized accounting system
- provides a common centralized patient accounting system
- provides for handling turnover at key fiscal positions
- provides for fiscal credibility when dealing with outside entities
- presents savings opportunities through centralized functions of billing and purchasing, administrative agreements (audits, computer hardware and software maintenance agreements etc.) and others; and
- provides for orderly transition from neighborhood based centers to a regional model.

A large part of the excellence of The Platinum for Windows System is its systemic flexibility. The system displays the flexibility to meet future challenges and changes in reimbursement and delivery modes, and also the flexibility to expand the network into other arena with other partners. This may include provider driven managed care programs or partnerships with private independent practice associations of primary care providers or specialists.

The Platinum for Windows System is designed with the idea of excellence in fiscal/information systems, operational systems and clinical systems ultimately translating into patient care excellence.

## INTRODUCTION

### HISTORY OF THE BUSINESS

#### COMPANY ACTIVITIES

HC NETWORK is a private, not-for-profit 501 (c ) (3) corporation. In June 1994 the Network was founded by three Community Health Centers (CHC), Community Health of South Dade , Inc., Economic Opportunity Family Health Center (EOFHC), Inc., and Helen B. Bentley Family Health Center, Inc. Orlando's homeless primary health care center (Camillus Health Concern, Inc.) and two community mental health centers

(Northwest Dade Health Centers, Inc and New Horizons Community joined during the second year. Family Health Centers of South West Florida in Fort Myers and Orlando Behavioral Health Center joined in the third year.

HC NETWORK assists members to provide services to the medically underserved by linking their programs and services. The member Centers have improved the quality and quantity of their health care services while increasing efficiency and reducing costs.

HC NETWORK is funded by member fees, contracts for services it delivers and by local, state and federal grants/contracts.

### COMPANY PRODUCTS AND SERVICES

Community Health Centers are private, not-for-profit corporations which provide comprehensive preventive and primary care services within a designated geographic area regardless of a person's ability to pay. The distinguishing characteristic of these corporations from other entities which provide primary care is that they are governed by volunteer business and community leaders, 51 % of whom must be patients of the Center.

These Centers are supported, in part, through grant funds from the United States Public Health Service and are expected to generate the majority of their budgets from patient fees, Medicaid, Medicare, and other resources.

In Dade and Lee Counties, the Community Health Centers in HC NETWORK bring over \$36 million and serve over 170,000 otherwise medically underserved patients annually. This saves the Dade County taxpayer from spending as many local dollars to care for these populations.

Health care is of high quality, provided by Board Certified physicians and other appropriate providers. Timely preventive and primary care visits avoid expensive emergency room care and hospitalization, thus saving the county additional tax dollars. They provide comprehensive mental health services with certain geographic areas on a sliding fee scale.

### MARKET AND INDUSTRY TRENDS

The following external market forces and trends are 'requiring' Health Centers to reduce costs in a variety of methods so that they can be competitive in the managed care

environment, but also can stretch scarce public dollars to cover the uninsured. The market trends pushing the changes include:

- Continued integration from both public and private providers. Consolidations of HMOs. Purchase of Not-for-Profit Hospitals.
- Immigration Reform will move additional 100,000 persons into the ranks of the uninsured in South Florida.
- Welfare Reform Initiates are expected to add another 50,000 uninsured individuals. Although the state has agreed to extend Medicaid coverage for up to two years, this population is being placed in jobs where only 2% have health insurance.
- Florida continues to move rapidly in Medicaid managed care

#### LONG-RUN PERSPECTIVES AND PLANS

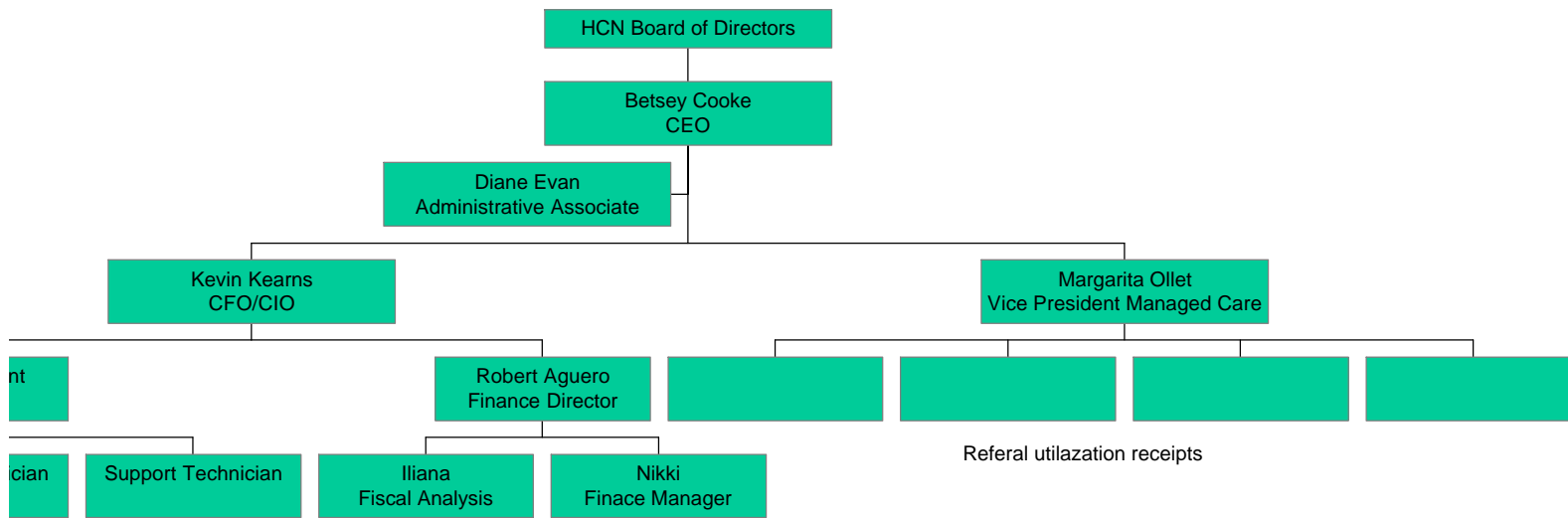
- Want tool to provide various company employees with the ability to have access to those other equipment and personnel in a cost effective manner. The network could provide this service by buying equipment, making the cost spread out by tool of measure (for example, the number of medical center sites, personnel users etc.).
- In the case of executives such as CFO and CIO, there will be only one of each overseeing all the centers (spreading the cost).
- Move toward services being provided for all support functions, for example, billing at central level to have economies of scale.
- To be able to compete, information is very crucial. In order to survive they must be able to build expeditiously and in return receive payments expeditiously.
- A change in the manner in which financials are reported. Financial reports should be presented in a standard form for all network companies to compare how each company is doing.
- Through the network working together and training together, they should be able to learn from each others problems, errors and mistakes so problems do not resurface.
- And, to put all procedures in a set form on paper.



# ORGANIZATION

## ORGANIZATIONAL CHART

# Network Organization Chart



*HC NETWORK - CFO*

- Oversee yearly audit, federal reviews and third party reports
- Assist with presentation of financial statements
- Oversee general fiscal operations including:
  - Cash Flow Management
  - Accounting Computer System
- Assume ultimate responsibilities for proper accounting systems including general ledger, accounts payable, payroll and purchase orders.

*HC NETWORK - CIO*

- Responsible for day to day operations of the MIS hardware and software
- Serve as central support for hardware and software issues
- Responsible for providing the necessary management information reports, center oversight of the data integrity, and keeping all system upgrades current and working

*HC NETWORK - ACCOUNTING MANAGER*

- HCN Bookkeeping
- Central source for software issues and maintain software system
- Review month end reports:
  - Cash Flow
  - Balance Sheet
  - Income Statements (consolidates and by department)
  - Payroll

*COMMUNITY HEALTH CENTER - FISCAL DIRECTOR*

- Day to Day bookkeeping operations
  - Maintain general ledger and work papers
  - Accounts Payable
  - Payroll processing
- Oversees purchasing and materials management
- Develop/maintain fiscal policy and procedures

ORGANIZATIONAL CLIMATE

HC NETWORK (HCN) is a centralized network approach that maintains the integrity and community interaction of the individual Community Health Center. The

model has a centralized network office which includes a CEO, CFO, CIO, Chief Medical Officer (CMO) and a leadership managed care officer. With the installation of the new system the Network climate would be of such:

1. Finance - CFO who has visionary, analytical, and managerial skill and is capable of providing high level financial expertise to the individual centers and the Network as a whole. Also, responsible for state of the art financial reports and analysis.

2. Information - Network employs a CIO who is responsible for efficient operation of the centralized system, while Centers employ MIS managers.

3. Centralization of finance, patient accounting, and other hardware and software - instead of common, but duplicative systems, at each Center.

4. Clinical system - where the focus is to direct the on site clinical activities under the Network wide clinical guidelines.

5. Governance - is through regular meetings to provide policy, program direction, and priorities to the Network.

## PURPOSE

## BUSINESS GOALS AND OBJECTIVES

### KEY SUCCESS FACTORS

- Persistence
- Maintain good line of communication between centers
- Continuously striving to improve on the performance of the system itself
- Providing good support by resolving problems in a timely manner.

### COMPETITIVE STRATEGY

- To be able to provide the lowest cost medical care while at the same time maintaining a high level of quality in the service provided.

### MANAGEMENT STRATEGIC PLANNING

- Develop a comprehensive integrated delivers system (IDS) whose mission would be to ensure access to quality affordable health care for patients.
- A joint purchase of services and systems to implements the development/operation of the IDS in the most cost effective way.
- Strategic Planning is to eventually centralize the administrative support functions at the network level while allowing the various centers to retain their autonomy.

## CURRENT FINANCIAL SYSTEM

### AMERICAN FUNDWARE

#### CHART OF ACCOUNTS

In the current , a PC software package (Quickbooks) is used on a bookkeeping level. The company did not have an accountant and mainly depended on CPA Audits to have year end financial. It was the Office Manager that did the bookkeeping. The account coding was mainly in the form of manual allocation.

Under American FundWare, the standard stage coding or account coding are:

- 10 - Initial Order
- 20 - Purchase Orders
- 30 - Invoice
- 50 - Marked for Payment
- 60 - Paid
- 70 - Reconciled

Other coding provided by American FundWare was in the basic form of the following:

- ◆ Allocation Name - One to five character alpha or numeric name for the cost allocation.
- ◆ Report Writer - Data item name, that is, the name you want to use for this data item. It can be from one to 10 alphanumeric characters.
- ◆ Allocation Management System - The letters A-Z and numbers zero to nine are allowed. No embedded spaces are allowed.

#### CURRENT ACCOUNTING MODULES

American FundWare is a complete reporting systems for organizations following fund accounting standards. Modules available from American FundWare are:

- ◆ General Ledger
- ◆ Project/Grant
- ◆ Extended Report Writer
- ◆ Allocation Management
- ◆ Payroll/Personnel
- ◆ Accounts Payable
- ◆ Obligation Tracking
- ◆ Purchase Orders
- ◆ Accounts Receivable
- ◆ Fixed Assets
- ◆ Budget Forecasting
- ◆ Budget Control
- ◆ Restricted Access

Description of some of the modules are as followed:

*General Ledger* - is the main FundWare financial reporting and management module. Used alone or in conjunction with other modules it gives a completely integrated fund accounting system. It lets you design and set up your own chart of accounts (using as many as 18 digits); allows you to maintain multiple set of books using ID types; offers four ledgers for storing and reporting; and allows journal entries.

*Project/Grant* - is a single-sided reporting system that allows you to track revenue and/or expenses for an individual project, or for a group of projects within an organization. Revenue and expenses can be tracked on a different year than the one used in the General Ledger. Project/Grant helps to manage grants, projects, contracts, special events, legacies, and investments. It is a system that allows the design of own account number structure.

Extended Report Writer - allows the creation of customized financial reports. This module operates like an extended database: data for the reports can come from financial information in the General Ledger or Project/Grant, data item attach to accounts, or transaction data item values post from another module, such as, Accounts Payable.

*Payroll/Personnel* - is a payroll and personnel management system. This module manages and reports the organizations payroll and has the following capabilities:

- ◆ Optionally posts financial data to the General Ledger or Project modules
- ◆ Allows for wage expenses to be distributed to multiple depts. &/or GLAs
- ◆ Allows for single or multiple payroll accrual accounts or cash accounts
- ◆ Provides for entry of manual and void checks. Produces checks.

*Accounts Payable* - keeps track of expenditures from purchasing to check reconciliation. With Accounts payable they can define stages for their invoices that exactly match their purchasing cycle. It can use up to 18 different references to track information specific to their organization; pay invoices from multiple bank accounts with individual cash accounts in separate funds, or pay from a single bank account with automatic fund balancing. Accounts Payable can optionally post to a Financial Reporting System.

*Obligation Tracking* - is a payables management system used in companies that do not perform on-site check writing. The request for check payment is sent to a central accounting office and a report of checks paid is sent back. They can use up to 18 different references to track their purchase orders, invoices, paid bills etc.

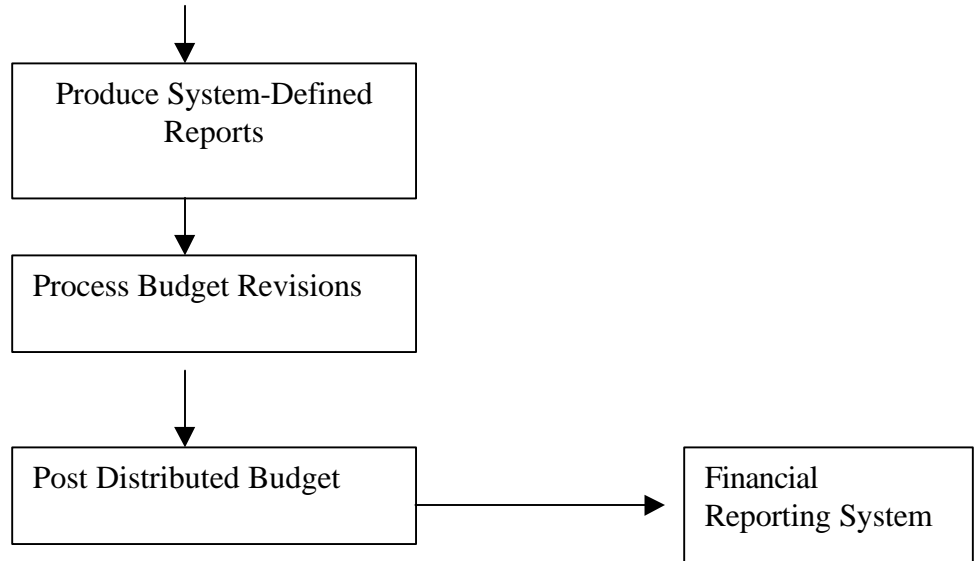
*Purchase Orders* - help manage purchase orders from the time the decision is made to purchase something until an invoice is received. Purchase orders can post to the FundWare General Ledger or Project/Grant. The module can involve purchase orders of two types:

- ◆ Commitments, also called initial orders - 10
- ◆ Encumbrances, also called purchase orders - 20

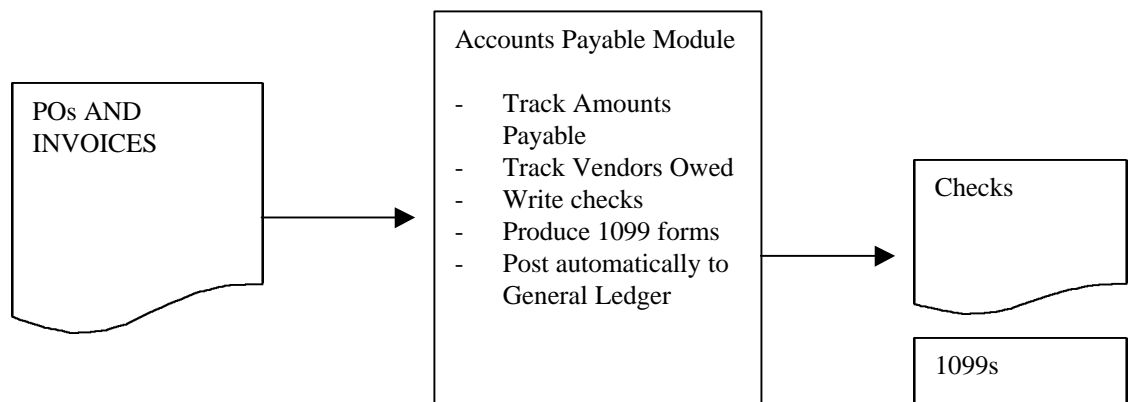
*Accounts Receivable* - helps manage and report the organization's receivables. It can post to the General Ledger or Project/Grant module, or operate as a stand-alone system. It can use single or multiple receivable accounts, cash accounts and deposit payables accounts. Cash management reports and a variety of statement formats are included in this module.

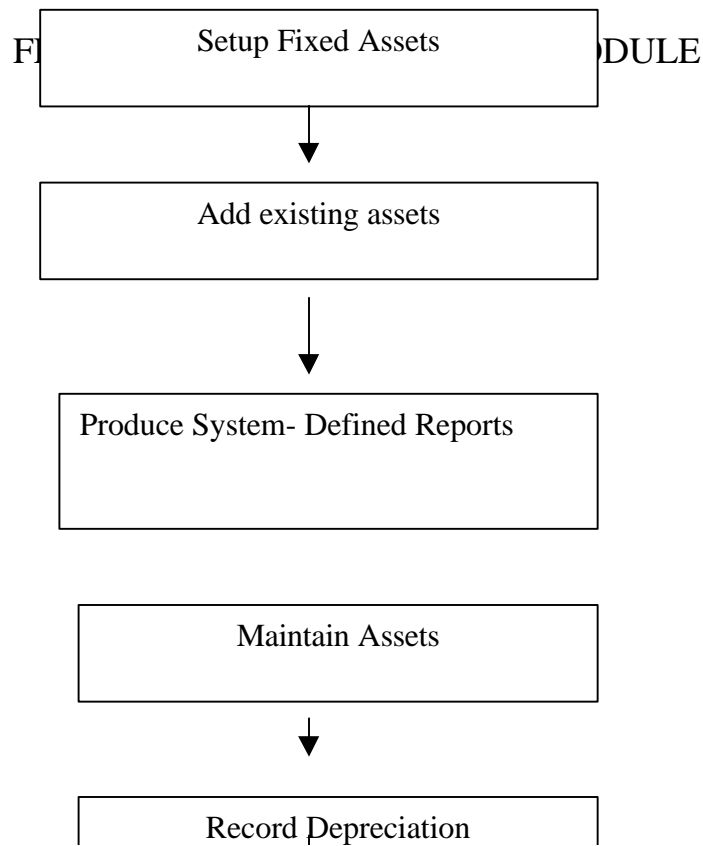
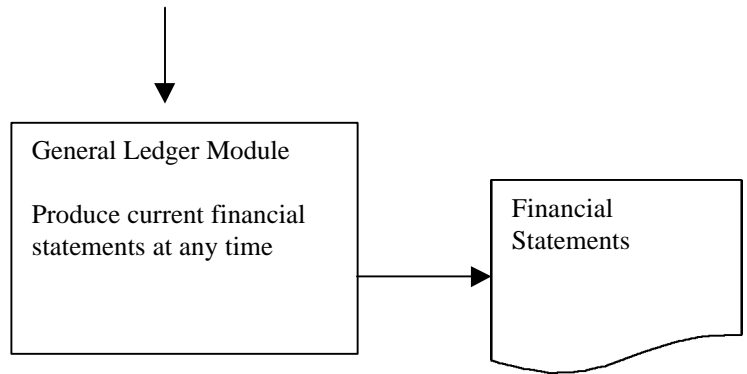
## FLOW CHARTS - BUDGET FORECASTING MODULE





### FLOW CHART - ACCOUNTS PAYABLE MODULE







Purge Assets

### TRANSACTION PROCESSING PROCEDURES

*General Ledger* - supports an account number of up to 12 characters and allows 12 separator characters, for a total formatted length of 24 character. GL comes with eight basic account types. However, the account type allows you to define a number of account sub-types. In order to classify the transactions that post to General Ledger, the system



supports the creation of journals that allow you to assign the journal keys to the sub-

Dispose Assets

systems or to any transaction entered or automatically generated from within GL.

It calculates net income using an Income Summary account method: every posting to an expenses or revenue account also posts to an Income Summary account maintains the net sum of all expenses and revenues. Current earnings for each Income Summary account can be calculated and reported at any time during the fiscal year.

General Ledger provides both a Budget and a Statistical (non-financial) transaction type, allowing you to enter budget/statistical amounts directly through the Journal Batch Entry menu item. GL maintains record tags - user id, date, and time - for each processing function within the General Ledger. Each time a record is added or changed, the record tag is updated.

Purchase Journal - provides a complete audit trail showing voucher, invoice, and payment details for all transactions (including debit memos, voided checks, discounts, and deposits) for both current and historical periods.

### SPREADSHEETS IN REPORTS

Spreadsheets are widely used in the company and are done in Lotus and Microsoft Excel. The choice of either spreadsheet application is entirely dependent on the MIS department and their needs and time frame. But, majority of the end of month and annual spreadsheet reports are done in Microsoft Excel program.

## CURRENT FINANCIAL SYSTEM - PROBLEMS

### MANAGEMENT REQUIREMENTS

In consideration of the competitive health environment, the network executives require certain results from their system. This includes the ability to produce or assist in, within an appropriate market, to allow easy access to the system at various locations. This would include:

- ◆ Common medical record
  - ◆ Common medical management system
  - ◆ Common sliding fee scale and charges in specific market area
  - ◆ Common access point for patient complaints, problems, or system explanations
  - ◆ Common billing and collection system
  - ◆ Common quality improvement system, patient registration and identification
1. Reduce the cost of operations on a per unit of service and per patient basis through eliminating duplicative fiscal, information, administration, and clinical systems.
  2. Improve the quality of fiscal, information, administration, and clinical services through the ability to afford qualified leadership staff and technology.

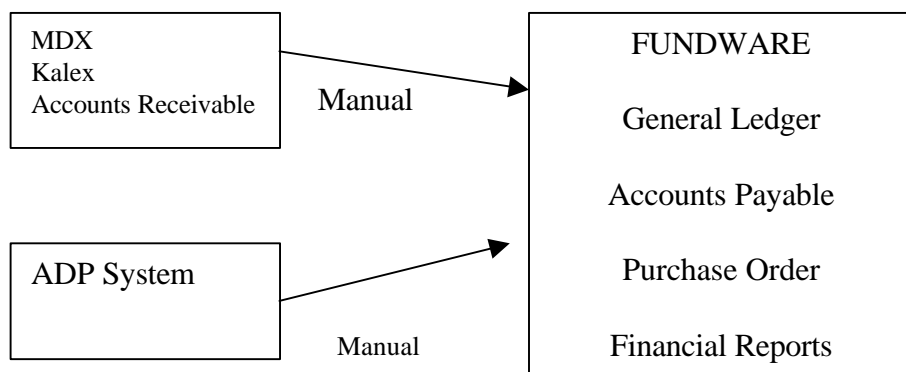
- 3. Improve negotiating position with payers, providers, and suppliers through increased size and market position
- 5. Maintain the Network model of a community based and user controlled governance structure which is focused on specific neighborhoods or populations, and is effective to that target area.

The Network requires the new system to link the community based system through arrangements which will be cost effective, responsive, and provide the highest level of quality care possible using appropriate leverage gained by system integration and market position.

CURRENT ACCOUNTING INFORMATION SYSTEMS

FundWare is American FundWare's line of integrated accounting and financial management software modules for nonprofit organizations and government agencies. With FundWare, an accounting system can be created that match requirements, design own chart of accounts, make journal entries, and maintain budgets. All entries are made on-line, and account detail and balances *should* be available at all times.

Below is a flow chart of the system operations:



FundWare handles the transactions demanded of a fund accounting system including interfund transactions, fund balancing, and financial reporting. With FundWare, you should be able to do tasks such as auditing and special reporting. It is set to provide a

variety of standard reports in every module to meet the reporting requirements of management, boards, funding sources and auditors.

It is composed of a number of interrelated software application modules. Each module is represented by a menu item on the FundWare Applicationsd menu. The following is a sample menu:

American Fundware Applications Menu:

1. General Ledger Financial Reporting...
2. Project/Grantt Financial Re[porting...
3. Cost Allocation...
4. Extended Report Writer...
5. Payroll/Personnel...
6. System Utilities...
7. Change Division or Business Date
8. Sign Off System

Menus are organized the same for every module. From the module's main menu, the tasks are organized in the following categories:

- ◆ Inquiry
- ◆ Maintenance
- ◆ Transaction Entry
- ◆ Processing
- ◆ Reports
- ◆ Setup

The menus are multi-layered. For example, on the Reports menu there are no tasks, only sub-menus leading to tasks. This tend to simplify the menu by grouping common tasks together so they can be found easier. (An item on a menu which is followed by three period indicates that the item is a sub-menu with more tasks.

When a task is selected from a menu, a prompt is displayed that tells what to do or asks for information. To complete a task, respond by entering information or by selecting appropriate options. Some tasks use one screen, while other tasks use multiple screens. (If not sure what to enter, F1 display a list of valid entries).

The goal of any software system is to produce the results needed, in many cases, these are reports. For accounting software, it is a Balance Sheet, a Revenue and Expense Report, a list of employees, a check register or a list of customers past due. The FundWare reporting concepts involve:

- ◆ Selecting, Sorting, and Page Breaks - Most reports use some sort of "selector" to restrict the employees, records, or transactions included on a report. (A selector is a screen that allows you to limit a report based on the value of a given criterion). A selector allows you to restrict the contents of a report to only the information needed. Sort is the order in which information is printed on a report. And, on many reports, the operator can decide on what criteria a new page is printed.
- ◆ Printing Reports - There are two methods of printing reports, either directly to an attached printer, or filing the report as a print file and printing it at a later time. (Direct printing should only be selected for short reports because the computer cannot continue to do other tasks until the report is finished).
- ◆ Changing Reports - The information printed on a report is current at the time the report is produced. If, after reviewing the report, other tasks are executed which change the data reported, a new report must be generated to see the changes. The print file on the computer is not changed by the new activity.

FundWare software tries to address the key accounting requirements for clients such as social services organizations and government agencies.

## JUSTIFICATION

### JUSTIFICATION - PROBLEMS

Community Health of South Dade and Economic Opportunity Family Health Center have held several meeting to discuss the inadequacy of the FundWare System in meeting there needs. From the various meetings and correspondence with the Company about the recurring problems, the Network began to consider the alternative of installing a new more efficient, operational and user-friendly system.

Through various correspondence papers and reports, it can be seen that several problems occur and in fact stand out. The following are the major issues that were raised throughout the correspondence period of complaints and problem-solving:

1. The FundWare system does not presently handle shipping method and shipping charges. This causes problems with the Purchase Order total.

2. Obligation number should show longer on the screen to aid the operator, requiring less key strokes and reducing the time involved in having to change screens in order to obtain the information.
3. The purchase order design needs to be customized to fit Community Health of South Dade's needs existing purchase order and to include other data fields which may be needed -- that is, department, freight, site.
4. The system need to include a bar scanner linked to the system.
5. Purchasing, expendable inventory, and fixed assets modules need to communicate. Stock items purchased in case allotment cannot be changed to reflect each allotment in the inventory module.
6. The Center should be able to have a way to key in 3 quotes and, when a purchase order is needed, be able to select the lowest bid and automatically generate a purchase order.
7. The system should provide all computations on the purchase order rather than requiring manual computation.
8. System need to be able to accept emergency assignment of purchase order numbers.
9. System should have product recall function for purchase orders, that is, key in product number and product description automatically appears.
10. System requires keying in vendor terms and shipping. These should be automatically transmitted from the vendor maintenance file.
11. While doing the purchase order, the system should allow us to note whether it is expendable or fixed asset rather than requiring them to go to another screen.
12. System should have multi-warehouses and multi-storerooms.

For the most part, the FundWare System is not user-friendly, and is complex and not easily understood by clerks etc. Also, to work in the system you almost need an accounting system background. It is considered an acceptable system for a firm with accounting degree people, but not for a health center with only a CFO and all the people below him being clerks. The new system must be user friendly.

In relation to the corporation itself, there were many problems. This was partially due to the fact that the company got bought and subsequently there were many changes,

especially in terms of their poor support services and installation. Also, many items were promised that the system could do, but it was unable to fulfill. For example, the system did not have an inventory module, calling for the tracking of inventory through a manual process. In totality, there appear to be some real difficulties with the system that may be difficult (if not impossible) to fix to the Network's satisfaction.

## JUSTIFICATION - SOLUTIONS

Through the collaborative use of books, computer software companies, knowledge acquired from experts in the field, brochures from various software companies, visits on web sites, and evaluation reports, it became more apparent that the best software to replace the existing American FundWare should be the Platinum for Windows. It is due to the fact that not only in the system more cost effective to install (especially since some of the other centers already have the system up a run for a long time), but it is also a more flexible system that better meets the needs of the ever evolving Health Care Industry.

Platinum Software Corporation (NASDAQ: PSQL) is a leading provider of client/server enterprise resource planning business applications, including customer service and support, sales force automation, and financial accounting. Platinum Software leverages the technology of Microsoft BackOffice and Windows NT and SQL Server to provide mid-sized companies and divisions of large corporations with optimum flexibility and functionality in enterprise client/server software solutions. Platinum's open

architecture and developer tools permit seamless integration with applications from other software vendors.

For businesses whose corporate computing environment consists of PC-based local area networks (LANs), Platinum for windows provides robust functionality in a familiar Microsoft Windows graphical environment. It utilizes an advanced three-tier architecture where tasks such as posting routines, reports, listings and utilities run on application servers instead of client workstations to increase user productivity and improve performance.

With the implementation of this new Platinum for Windows System the Network can reasonably expect, at minimum:

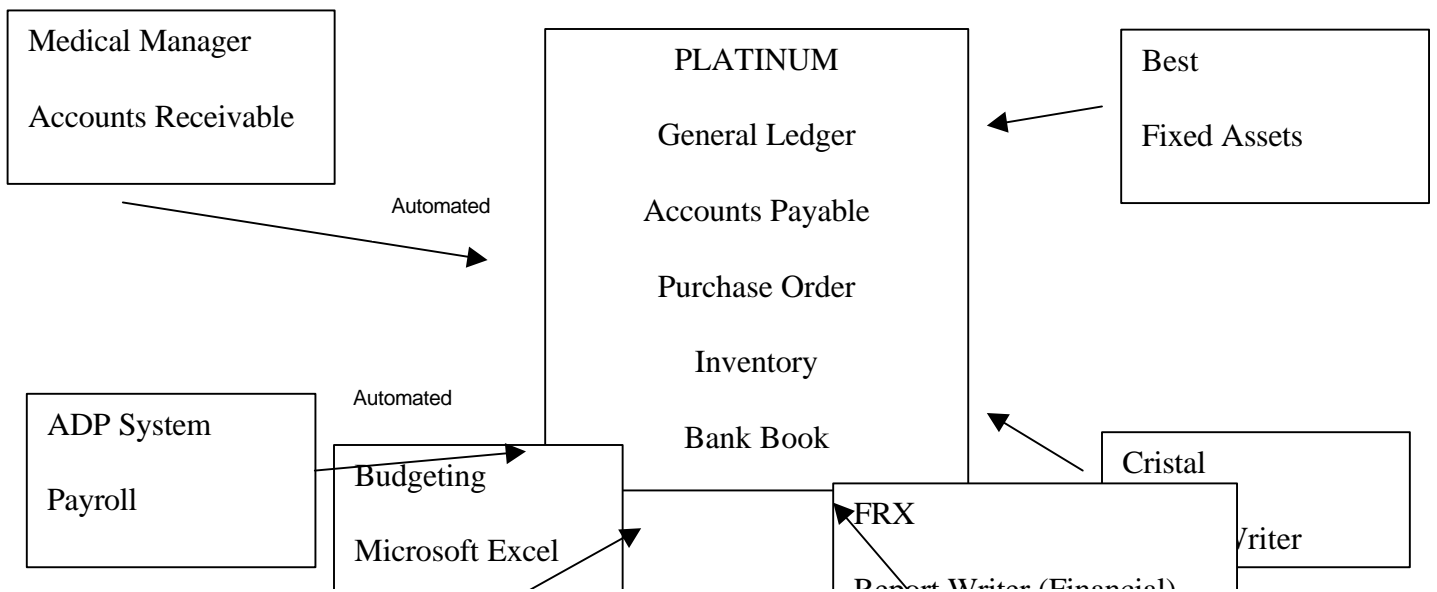
- Professional bills/statements
- Development of common satisfaction surveys and ability to compare results (Internally and externally)
- Track and improve wait times
- Quality improvement
- Collective knowledge of system
- System wide experts at network level
- Improved training methods, managed care capabilities

The Health Care Industry uses computer-based information systems for traditional data-processing operations such as patient billing, accounting, inventory control, calculation of health care statistics, and maintenance of patient histories. In addition, the industry uses such systems for more challenging tasks, and here is where the need to stay competitive comes into play. Platinum Window is reliable, easy to use, flexible, easily customized, offers powerful report writing tools, technical support, advanced feature set and multinational capabilities. The Network needs all these things, presently not provided by FundWare, in order to compete or even remain operational.

## RECOMMENDATIONS AND SUGGESTIONS

### PRELIMINARY A.I.S FOR NEW SYSTEM

#### FLOWCHART FOR NEW SYSTEM



## PROCEDURES FOR NEW SYSTEM

The main applications are:

### SYSTEM MANAGER:

- Wizards make your job easier
- Group security that you define
- Schedule and distribute reporting processing
- Browse easily for improved information access

### GENERAL LEDGER (Standard Edition)

- Comprehensive set of features
- Easy to use
- Extensive financial reporting
- Powerful enough for large companies with complex needs
- Flexible enough to meet needs now and in the future
- Audit Trail, Budgeting etc

### ACCOUNTS PAYABLE

- Improve vendor relations
- Control disbursements
- Improve cash flow management
- Analyze purchases with customized reporting
- Minimize expenditures

### ACCOUNTS RECEIVABLE

- Do more than monitor receivables
- Manage cash flow
- Service customers more effectively
- Track performance of sales personnel
- Perform comprehensive sales analysis through customized reporting

### PURCHASE ORDER

- Increase control of purchasing process
- Access inventory and accounts payable records on-line
- Fast access to information through flexible reporting

### SALES ORDER

- Streamline sales order purchasing
- Update inventory and Accounts receivable

### INVENTORY

- Access detailed inventory records easily
- Customize item keys

- Manage availability and pricing information

#### BANK BOOK

- Determine current cash position in minutes
- Reconcile books with bank statement
- Transfer funds between cash accounts

## CONCLUSION

An integrated delivery system for the provision of health care implies a structure by which a patient can move through primary, secondary, ancillary and tertiary levels of care in an organized, efficient, and accessible manner, receiving the type, intensity, and level of care appropriate to their condition without encountering barriers caused by differing provider organization or administration without duplicative administrative or medical requirements. This is what the Platinum for Windows software will achieve.

The recommendation of Platinum System will help the Network achieve its strategic planning and position through:

- The system plus its installation will allow them to compare information among their member corporations. They can compare how centers are doing which is important because as a network they will be able to consistently represent all members. This will allow them to gain and show market power and strength gained from being together, that is, bigger and stronger.
- The flexibility of the system in terms of its detail allow analysis of cost in a variety of ways, for example department sites, so they can look at management interventions and have the level of detail needed.
- The new system being more user friendly, simpler, and quicker will result in a more efficient use of staff time, thereby reducing administrative costs.
- Finally, using the same system will enable the network person to be a support person that gives consistent response. This in itself is more cost effective because the Center will not charge additionally for this service.

With the additional uninsured expected in South Florida from Immigration and Welfare Reform, having clear and timely patient information upon which to make their decisions is critical to their survival and success.

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<http://www.fundware.com>

<http://www.platsoft.com>

### People

- Ms. Betsey Cooke - HC NETWORK - President & CEO
- Mr. Kevin Kearns - HC NETWORK - Chief Financial Officer
- Mr. Robert Aguerro - HC NETWORK - Finance Director
- Mr. X at COMPUSA