

Covid-19: Respond Rapidly to Withstand Business Uncertainty

From crisis management to stemming financial losses to evolving operations, every component of the healthcare organization needs attention to withstand the unprecedented challenges of COVID-19. Huron stands ready to help leaders respond quickly and effectively in the days ahead.

Below are recommendations for rapid responses in three key areas of the healthcare organization: **crisis response, cash flow and operations evolution.**

Lead Through Crisis

A well-run command center sets organizations up to withstand continual change. Develop or update COVID-19 triage, supply and capacity plans on at least a daily basis. Revisit expectations and decision-making authority as the crisis evolves. Reassess your internal communication plan frequently to keep staff apprised, including how and when to expect communication.

With the ultimate trajectory of the coronavirus unknown, managing the challenges ahead will require organizations to continually plan for the unexpected. Develop short- and long-term projection models to understand risks and breaking points, and continually evaluate the effectiveness of your escalation protocol for critical updates regarding staffing, beds, supplies, etc.

Manage Cash Flow

Survival of organizations during COVID-19 will be dependent on their ability to maintain cash and liquidity. Organizations can act immediately to centralize authority and reduce purchases. Capital expenditures, construction projections and other major projects without immediate return on investment should be deferred. Defer payments to vendors and evaluate strategies to limit the risk of lenders accessing cash and investment balances.

To maintain liquidity and access to capital, draw on available lines of credit and seek additional lines with existing, new or alternative lenders even at a higher cost of debt. Pursue deferred debt repayment terms and measures to limit or defer covenants.

Continually update cash flow projection scenarios to assess the situation and guide needed actions. Organizations should be carefully tracking COVID-19 expenses, including extra labor costs, equipment, and revenue losses from the deferral of non-urgent procedures and care. Do not wait until liquidity is exhausted to request assistance from county, state and federal sources, including loans, reimbursements and cash grants.

Evolve Operations

Revenue Cycle

Stay focused on fundamentals regarding staffing and expectations for productivity, and consider deploying staff to front-end business services if resources become scarce.

Train new or interim staff to help analyze denials and focus on correcting denial issues immediately. Closely track COVID-19 accounts for future analysis, and take immediate [action to streamline reimbursement with payors](#).

Emergency Department (ED) and Perioperative

Now more than ever in the ED, triage, staffing, and equipment and supplies must be responsive to volume. Dedicate resources to analyze and manage personal protective equipment (PPE) utilization and distribution, including establishing crisis capacity measures. Shift staff from ambulatory surgery centers to support inpatient surgery, while determining what clinical personnel can be moved from nonclinical work to bedside work. Ensure staff are working at the top of their licenses, and leverage administrative and nonclinical staff in support roles.

Clinical Operations

Continue to focus on the fundamentals such as interdisciplinary rounds and effective care team communication to alleviate capacity constraints and improve discharge planning. To ease clinical staffing burdens, consider deploying non-bedside clinical staff to the bedside and leverage administrative staff in support roles when appropriate.

Closely monitor patient volumes and capacity for staffing, beds and ventilators. Attempting to care for patients beyond existing and sustainable capacities threatens patient safety and exacerbates financial issues. Flag COVID-19 patient volumes for future analysis and tracking to normalize the impact of COVID-19.

Supply Chain

Focus supply chain operations on four key areas: physical inventory, supply conservation, product substitutions and standardization, and policy adaptations. If possible, perform a full physical inventory of all locations, including ambulatory clinics, and centralize supply distribution decisions. In consultation with clinical leaders, monitor daily inventory levels of critical supplies such as PPE and ventilators, and deploy supply chain strategies focused on nontraditional sourcing and supply optimization.

Pharmacy

As in all areas of operations, initiate disaster scenario planning, including staffing requirements, high-priority pharmacy requirements, potential drug shortages and drug alternatives. Identify virtual staffing options to expand remote order entry/verification processes, and be prepared to define the pharmacist's role in COVID-19 clinical testing and immunizations as they become available. To stay on top of medication procurement issues, expand or initiate a drug shortage taskforce to provide full visibility to emerging changes in drug supply and suggest alternative therapies.

For more information, [contact us](#) or visit our [COVID-19 resources page](#).



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