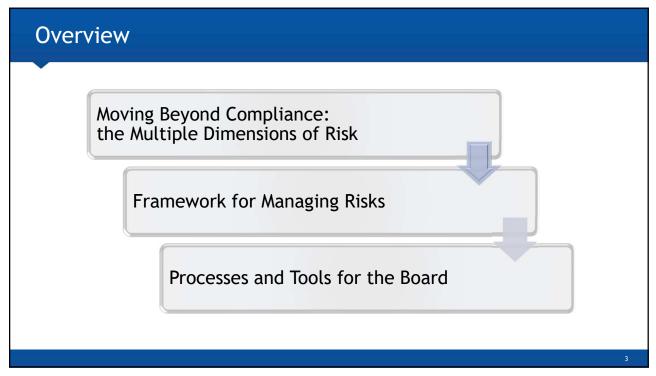
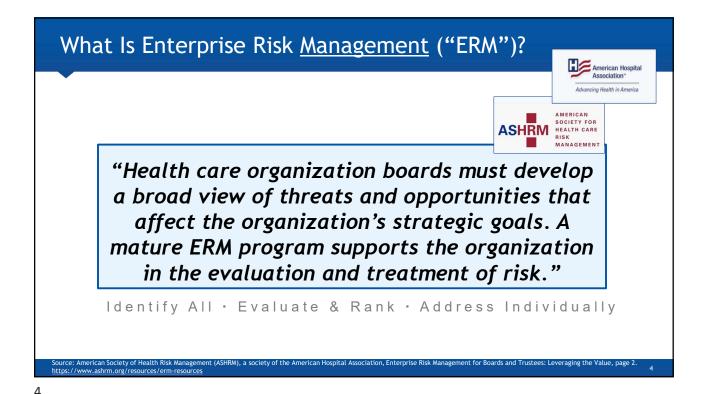


PAGE 1 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

Health Care Organizations Are:						
Highly Regulated • CMS • IRS • State Attorneys General • JCAHO • State Depts of Health • State CON laws* • Other state regulatory	and	Being Disrupted By New Players • AI - Artificial Intelligence • Amazon • Google • IBM Watson • Venture-capital-based startups				
What Could Possibly Go Wron	Plus g?	Ongoing Market ForcesConsumerismPandemicPayer consolidation				
* Certificate of Need (CON) laws still exist in 35 stat	es.	2				



PAGE 2 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020



What Is Enterprise Risk Management (ERM)?

- Trustees and directors are required to review the adequacy of the organization's risk management processes.
- Boards need to provide leadership in moving beyond traditional reactive, "siloed" risk prevention approaches.

Characteristics of Effective ERM

- Proactive
- Accepting of uncertainties and risks
- Multi-dimensional
- Holistic/coordinated
- Aligned with strategic direction
- "Top-down" and "bottom-up"

PAGE 3 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

S&P Incorporates ERM Factors in Ratings, Recognizes Its Impact on Financial Sustainability

S&P Global • "The ultimate importance of ERM on a firm's rating will depend on the risks of the firm, the susceptibility of the firm to those risks and the capacity of the firm to absorb losses."

- S&P evaluates companies within a general ERM framework with four major analytical components:
 - Risk management culture and governance
 - Risk identification and control
 - Emerging risks

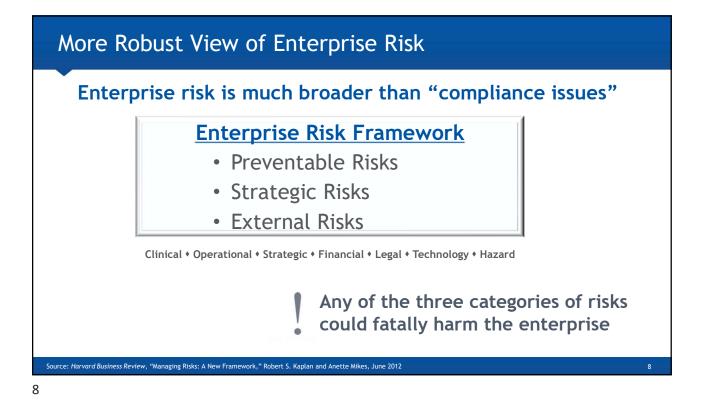
Source: https://www.metricstream.com/insights/erm_credits.htm

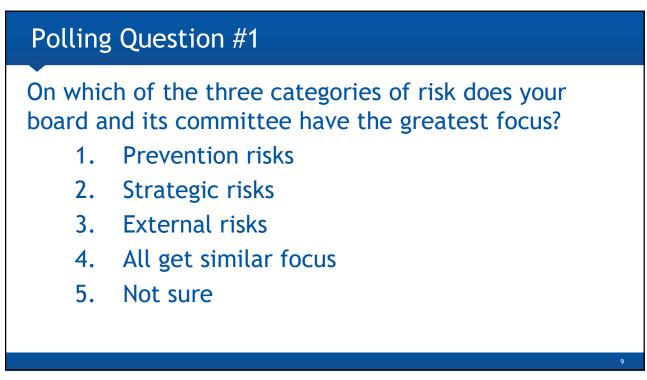
- Strategic risk management

6

Traditional Focus of Health System/Hospital **Risk Management** • "Protection from loss," such as: From TGI Biennial Survey - Malpractice/patient care - General liability 2019 data indicates that virtually all hospitals or systems maintain a board - Property loss committee that focuses on compliance¹ - Directors' and officers' risk % of Hospitals and **Board Committee Name** Systems with - Regulatory compliance Committee - Privacy and cyber security Audit & Compliance 53% Compliance 42% Responsibilities often siloed within committee and management structures Source: 1The Governance Institute, 2019 Biennial Survey of Hospitals and Healthcare Systems. Systems typically maintain these committees at the system level only

PAGE 4 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020





PAGE 5 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

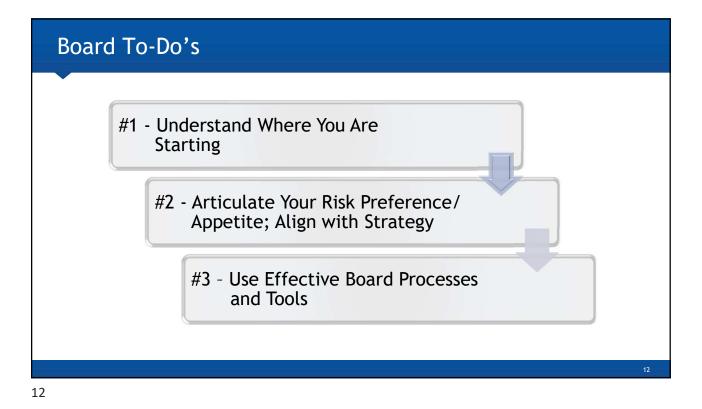
Under <u>Any</u> Domain, Risks Can Fall into Any of the Three Framework Categories: Simple Example - Finance

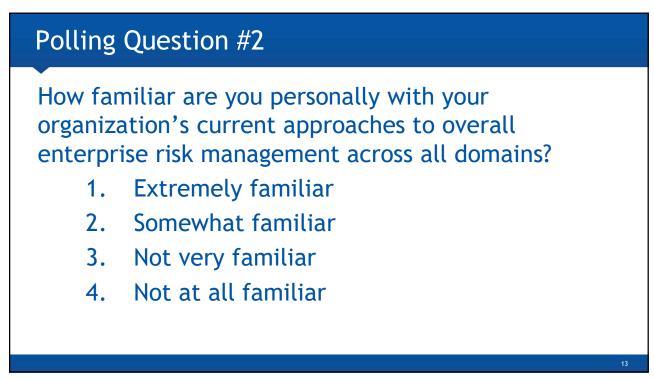
	Preventable	Strategic	External
Examples	 Fraud and abuse/ billing accuracy and compliance Accounts receivable/ collections 	 Alternative payment models (ACOs, bundled, etc.) Medicare Advantage Plan partnership/ ownership Philanthropy Access to capital/ credit rating 	 CMS payment cuts Medicaid restructures payment programs/ approaches Interest rate fluctuations ACO overturned: increase in uninsured patients
Approaches	 Rules-based compliance Transfer some risk or "avoid" risk altogether 	 Courageously identify risks Mitigate risks Monitor early indicators Contingency plans 	 Scenario planning "No regrets," "Hedge," "Big Bet" strategies

10



PAGE 6 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

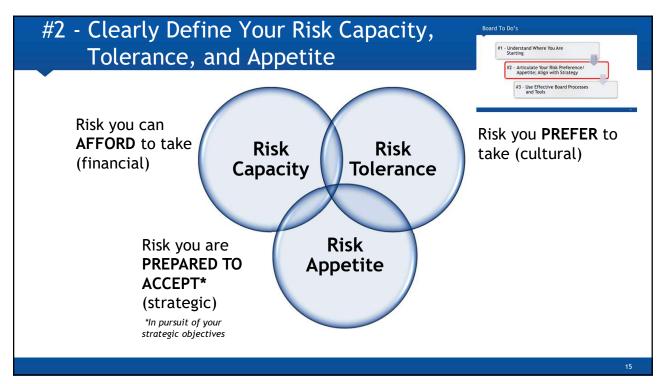




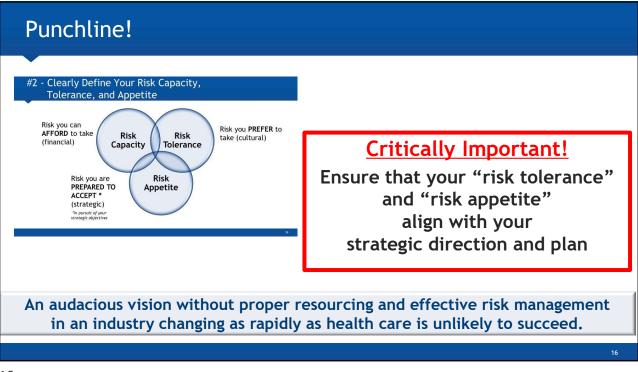
PAGE 7 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

#1 - Agree on Where You Are Starting: Board Refresher on ERM Approaches				
<u>Board To-Do's</u> Review:	Key Generative Discussion Questions			
 ✓ Current ERM approaches ✓ (If available) Statement or policy on organizational risk preference/"appetite" 	 What information about each major risk currently is shared with senior management? The compliance committee? The full board? 			
 ✓ Current - and as needed - proposed revisions to Compliance Committee Charter 	 How do we measure the success of our ERM program? How <i>should</i> we? How does our ERM dovetail into our 			
 ✓ Current risk exposure ✓ Current EMR and management and board reporting relationships 	strategic planning process? Our financial decision making/ resource allocation?			
	14			





PAGE 8 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020



#2 - Risk Capacity: Financial

What's the Difference between Jeff Bezos's Risk Capacity and Your Organization's?



Your starting balance sheet strengths or weaknesses translate <u>directly</u> into intrinsic financial risk and risk capacity

Financial Measure	Desired Starting Point
Bond Rating	A+ rating or better
Debt capitalization ratio	<35%
Cash/investments	>170% of LTD <i>and/or</i> >215 days of cash on hand
Average Age of Plan	<11 years

17

PAGE 9 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

#2 - Risk Tolerance: Preference

Key Question

"What is our tolerance for a critical or existential risk?"

- How much volatility and uncertainty are we comfortable with?
- How much of a financial cushion do we need in light of the myriad future uncertainties?
- What is our track record of effectively managing risks - and have we demonstrated the ability to take corrective action early?

Often framed in terms of continuum from "highly risk averse" to "risk seeking"

... what are implications of being stewards of a vital community resource?

18

#2 - Risk Appetite: Strategic

Key Question

How Much Risk Are We Prepared to Accept in Pursuit of Our Strategy and the *Potential* to Create Future Value?

• Should be a <u>clear statement of intent</u>, which sets boundaries related to what constitutes acceptable risk for *your* organization

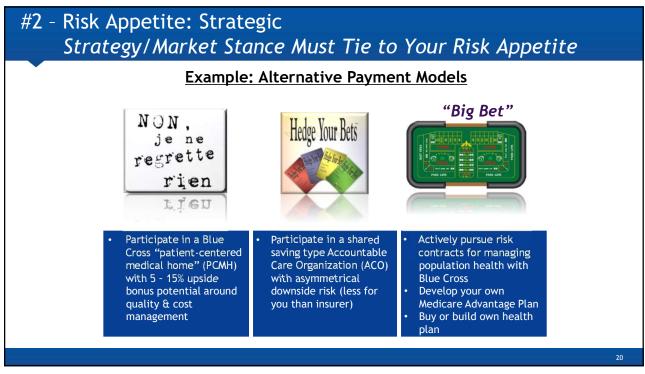
Example: Risk Appetite Statement

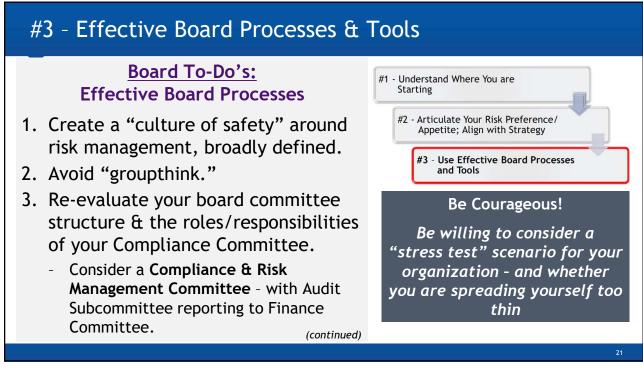
Our health system will achieve and maintain financial ratios consistent with at least Standard & Poor's "A+" rating by:

- Achieving annual operating margins of ≥3 percent, through a combination of cost reduction, effective risk identification/management, and focused growth;
- Pursing alternative payment models with limited downside risk;
- Maintaining our reputation for exception quality, service, and institutional integrity; and
- Using traditional, predictable financing vehicles.

PAGE 10

The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020





PAGE 11 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

#3 - Effective Board Processes & Tools

Checkpoint:

Does Your Organization Demonstrate "<u>Omission Bias</u>"?

"We would rather <u>not do</u> something and have something bad happen, than <u>do</u> something and have something bad happen"

Board To-Do's: Effective Board Processes

- 4. Recognize the risks of <u>not</u> taking strategic action
- Recognize risks and uncertainties without becoming paralyzed

22

#3 - Effective Board Processes & Tools **Risk Ranking Matrix** Use a Decision-Analysis Framework Risk Map Create a framework for assessing both the 5 adverse impact of an event and the likelihood of the risk's occurring. Critical 4 Impact x likelihood = risk to organization Some organizations include a third Impact Moderate 3 dimension in this equation: "velocity." Risk Rankings 2 .. if the product of Impact & Likelihood nsignificant Risk is ranked as... VERY HIGH Greater than 17.0 HIGH Greater than 10.0, but less than 17.0 Unlikely Potential Likely Greater than 5, but less than 10.0 Likelihood LOW Less than 5.0 1 2 3 4 5 Source: 1Matrix from ASHMR, Enterprise Risk Management: A Framework for Success, © 2014, American Hospital Association

PAGE 12 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020

Tool: "Risk Event Card"

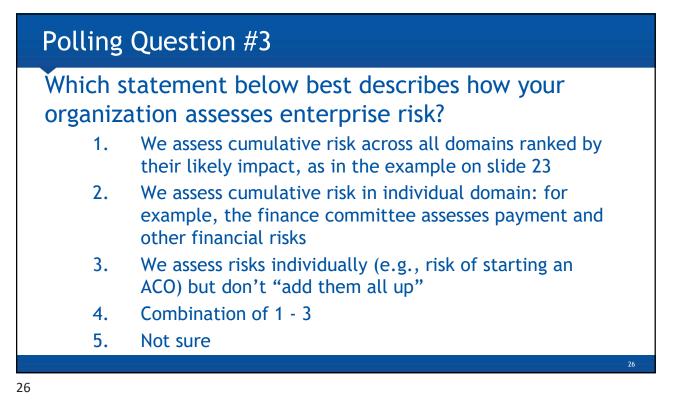
Risk Category: Strategic Risk Domain: Financial

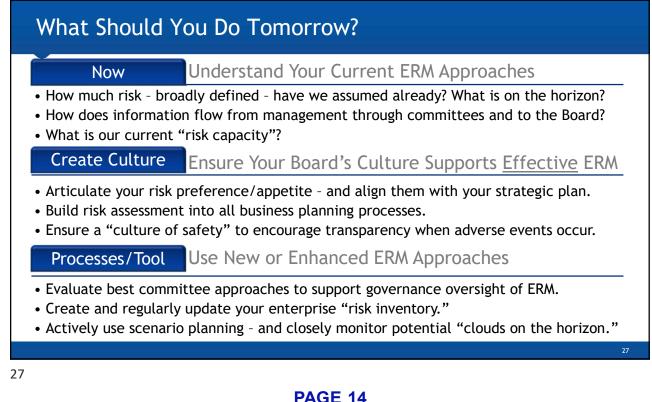
Strategic Objective	Risk Event	Potential Adverse Events/Impacts	Likelihood/ Impact	Mitigation	Accountable Manager
Alternative Payment Models	Medicare Advantage Plan Launch	Financial losses on plan (negative ROI) Losses at hospital(s) due to reductions in utilization Political challenges with physicians Adverse response from major commercial payer Medicare changes "rules of the game"	EX Relation Attracts	Partner w/ group experienced in mgmt of MA Plans Invest in "best in class" data analytics Hire experienced executive team Reduce hospital costs/right-size for reduced utilization Closely monitor CMS policies	Penny Wise, Chief Financial Officer

24

Tool: Enterprise Risk Inventory How much overall risk can your organization effectively manage? RANK RISK EVENT PRIMARY RISK CATEGORY/ DOMAIN IMPACT LIKELIHOOD **RISK RATING** Medicare Advantage Plan Launch Strategic/Financial 1 4.5 4.5 20.3 (Very High) Public Payment Changes/Reductions External/Financial 2 4.1 4.8 19.7 (Very High) 3 IT Infrastructure/Data Analytics Strategic/Technology 3.9 4.4 17.2 (Very High) 4 \$150M North Tower Replacement Strategic/Strategic 4.1 4.0 16.4 (High) 5 Cybersecurity/Data Confidentiality Preventable/Technology 4.4 3.5 15.4 (High) Serious Safety Event Preventable/Clinical 6 3.5 3.6 12.6 (High) 17 **Nursing Strike** Strategic/Operational 3.9 2.3 9.0 (Medium) 18 **Disaster Preparedness** Preventable/Hazard 2.5 9.0 (Medium) 3.6 19 **Regulatory Compliance** Preventable/Legal 2.5 2.9 7.3 (Medium) Source: 1Risk Inventory from ASHMR, Enterprise Risk Management, A Framework for Success, © 2014, American Hospital Association. Modified by M. Jennings Consulting 25

PAGE 13 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020





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Well Said!



Source: Robert S. Kaplan and Anette Mikes, Managing Risks A New Framework, Harvard Business Review, June 2012

"A firm's ability to weather storms depends on how seriously leaders take risk management when the sun is shining and no clouds are on the horizon"

28

28



PAGE 15 The Governance Institute Leadership Conference – Virtual Event November 12–13, 2020