

Successful Business Planning for HIV Services

Presenter: Michael Gifford, MBA

#	Questions	Answers
1.	Are there any business challenges that are unique to ASOs compared to other institutions in our health care system?	One is that community-based nonprofits frequently don't look at business planning. We come out of the segment of the industry that hasn't been engaged in business planning and may not have a comfort level even at the board level to do it. Another issue I mentioned was that we need to tailor marketing strategies to a niche population, since we are marketing to a small portion of the population accessing this health care. We are also likely to face the issue of patients switching from uninsured, to Medicaid, to maybe a marketplace plan, back to Medicaid, and so on.
2.	You've walked through the key elements of a business plan. What about implementation?	Having the expertise to operate a health care organization is vitally important. This expertise comes in a lot of different ways: you need the expertise of different doctors, nurses, administrators, revenue managers, IT, etc. You might have to grow or augment your staff. At ARCW we learned this the difficult way. We thought that we could just grow our internal staff's knowledge, but we found it was not possible and we needed to invest in specialized staff in those areas. You have to acknowledge that when you're moving into a new business plan, especially something like health care, you are going to be unable to rely on even the high performers, the go-to people within your organization, because they aren't going to have that expertise.
3.	Can you speak about the importance of letting the business line drive the structure vs. having a preconceived notion of what the structure should be?	People should think about the patient experience driving the corporate model. How can we create a system that supports the best experience possible? It's hard to go into a business process without having some predetermined ideas. Business planning is a placeholder where we need to have those conversations and bring in a lot of different perspectives. What is the ultimate service that you want to provide and how are you going to provide it?
4.	Many ASO leaders don't have an MBA, what type of advice would you have for non-MBA ASO leaders?	UCLA & Johnson & Johnson put on a two-week training in Los Angeles called the Health Care Executive Program . That is a good resource, a boot camp approach to an MBA. Many of us have business leaders on our boards of directors who can bring their expertise into the conversation. We have to acknowledge when we as an organization do not have

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		this expertise and realize when we need to reach outside for help. The health care industry is terribly complex. As ASOs begin to intersect with it more and more, we need to understand that and get the help we can from outside.