Chief Financial Officer Competencies and Professional Development Tool

GUIDELINES FOR USE

FEBRUARY 2022
BACKGROUND

The task of defining health center Chief Financial Officer (CFO) Competencies has been a work in progress since 2018. Health center leaders from across the country engaged in small working groups to identify a comprehensive set of CFO work role domains, tasks/skills and behaviors in order to create a taxonomy of competencies to serve as a foundation for defining the important aspects of CFO leadership and effectiveness. The American College of Healthcare Executives (ACHE) Competencies (2021) serve as a common foundation for all health center executives. The ACHE domains have been adapted to represent the environment and mission of health centers and specifically the role of the CFO. This tool is organic and subject to continuous quality improvement and revision as CFO practice evolves and feedback on the tool is gathered, analyzed and incorporated.

RECOMMENDED USES

This tool is appropriate for use by a wide variety of stakeholders, including health center Chief Executive Officers (CEO), CFOs and other Leaders; Board of Directors; Human Resources; Search Firms; Primary Care Associations; Training Organizations; and more. It is our hope that this tool will provide the structure and common language to help define, develop and sustain excellence in the financial leadership of health centers across the United States.

As a comprehensive tool, the adoption of the entire document as the standard of performance for the financial leadership of all health centers is not appropriate or advised. Competence is situationally bound; therefore, each health center presents a unique set of challenges and opportunities that the CFO is required to master to achieve a high level of performance.

The recommended uses for this tool are:

- **As a comprehensive taxonomy** of CFO competencies from which the health center leadership team may identify the specific domains, tasks/skills and behaviors needed for the financial leadership of the health center;

- **As a self-assessment tool** for existing and aspiring CFOs and financial leaders in assessing and identifying their overall levels of competency and point them towards areas needing development that will help them achieve their personal and professional career objectives;
■ **As a reference tool for CEOs** to engage financial leaders in structured conversations about their professional strengths and learning needs and support the development of a personalized professional development plan;

■ **As a comprehensive resource** from which health center relevant position descriptions and interview questions for CFO candidates may be derived;

■ **As a compendium of roles and responsibilities** to guide search firm criteria for CFO candidates;

■ **As a resource** for constructing health center relevant performance review criteria for existing CFOs; and

■ **As a tool for the development** of relevant training/learning experiences and resources for CFOs.

Conversely, this tool should **not** be used in the following ways:

■ In its entirety **to define the role and expectations** of the CFO in a health center - using the document in this way may create unreasonable expectations for performance that are not completely relevant to the needs of the individual health center;

■ As a tool/justification **to discharge a current financial leader** or disqualify a candidate; or

■ **As a yardstick from which to measure the overall financial performance of a health center.**

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**DISCLAIMERS**

Be aware that this tool is subject to continuous improvement and will change over time based on national and global events impacting health centers, implementation results and feedback received.
DEFINITIONS

Chief Financial Officer (CFO):
The CFO is a key member of the management team who leads the delivery of ethical, strategic, sustainable and mission-centered operations and business development for the health center and its stakeholders. The CFO:

■ Establishes organizational standards, policies and procedures and assures compliance for finance, accounting, regulatory and reimbursement operations;

■ Manages and protects the health center’s assets;

■ Provides timely and accurate reports/statements, decision-support, information and advice to the CEO and other management team members; and

■ Leads with personal integrity, respect for individuals, commitment to excellence and active engagement in the health center movement on local, state and national levels.

Domains:
The major functional roles or areas of competence for which the CFO is responsible/accountable.

Skills/Tasks:
The major responsibilities that comprise each of the Domains.

Behavioral Examples:
The observable actions that define one of five levels of competence for each task/skill.

Levels of Competence:
The levels of competence used in this tool are loosely based on the seminal work of Dreyfus & Dreyfus1. CFOs are encouraged to strive to attain, at minimum, “Level 3 – Competent” status for skills that are relevant and necessary for excellence in financial leadership of their health center.

### LEVELS OF COMPETENCE

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<tr>
<th>LEVEL</th>
<th>DESCRIPTION</th>
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<tr>
<td>5</td>
<td><strong>Expert</strong></td>
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</table>
|       | Performance at the Expert level of expertise demonstrates an enormous experiential background that enables assessment and response to situations by efficiently zeroing in on the most important aspects of and identifying the best courses of action. Able to focus on inventing innovative, creative and effective actions in many situations including those that are new or require problem-solving or analytic skill. Shares and creates new knowledge and demonstrates best practices in their field.  
**KEY DESCRIPTORS:** Innovative, intuitive, national/world perspective  
**FOCUS:** Trends, strategy, external partnerships and enhancing knowledge & insight of internal and external colleagues and constituents |
| 4     | **Proficient**  |
|       | Performance at the Proficient level of expertise demonstrates a significant amount of experience. Sees situations holistically and understands intuitively the interdependence, priority and importance of various aspects of the situation. Able to apply “maxims” or successful strategies to situations as they present themselves without having to “break it down.” Possesses a lot of tools in their “professional toolbox” and knows how to use them.  
**KEY DESCRIPTORS:** Proactive & efficient  
**FOCUS:** Facility-wide performance and finance as a profession |
| 3     | **Competent**  |
|       | Performance at the Competent level of expertise shows enough experience to be able to complete most tasks independently, see the larger context and attend to multiple aspects of situations, but may also become overwhelmed by them at times. Able to organize, prioritize and formulate plans with significant effort, and may lack the speed and flexibility of more advanced professionals for a particular skill. Able to establish productive routines. May require supervision/coaching for novel or complex tasks and situations.  
**KEY DESCRIPTORS:** Reliable & independent  
**FOCUS:** Department operations and applying and enhancing knowledge and skills |
## LEVELS OF COMPETENCE

<table>
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| **2** Advanced Beginner | Performance at the Advanced Beginner level of expertise demonstrates some experience in some situations and is at the initial stages of considering and understanding the various aspects or complexities of those situations. Requires significant supervision/coaching/support to prioritize and complete most tasks successfully and may demonstrate the ability to complete a few tasks with minimal oversight. May also have difficulty seeing the big picture or important aspects of a situation and instead focus on its less complicated and disconnected features.  

**KEY DESCRIPTORS:** Partially independent  
**FOCUS:** Understanding role & learning relevant information |
| **1** Novice               | Performance at the novice level of expertise may demonstrate “book” knowledge of many domains and skills but with relatively little experiential knowledge. May rely heavily on context-free rules and objective data, applying them universally with little discretion. Requires a significant amount of supervision and coaching to complete tasks to an acceptable level.  

**KEY DESCRIPTORS:** Book knowledge, reliance on rules, needs ongoing supervision/coaching/training  
**FOCUS:** General skill and knowledge development |
ACKNOWLEDGEMENTS

The National Association of Community Health Centers wishes to acknowledge the following for their contributions:

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- Dale Johnson | CFO, Community Medical Foundation (CMF)
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COMMUNICATION AND RELATIONSHIP MANAGEMENT
The ability to communicate clearly and concisely with internal and external customers, establish and maintain relationships and facilitate constructive interactions with individuals and groups. Identifying, developing and maintaining collaborative relationships and communications with key stakeholders; managing stakeholder expectations and needs; aligning the organization to key stakeholder requirements; stakeholder advocacy.

LEADERSHIP
The ability to inspire individual and organizational excellence, create a shared vision and successfully manage change to attain the organization’s strategic ends and successful performance. Managing resources and leading the health center effectively and ethically, understanding stakeholder needs and priorities, the health care environment, and the unique dynamics of the health center model. Leads and manages a diverse and inclusive work environment that maximizes the talents of each person to achieve the vision and mission of the health center. Also includes skills and tasks associated with organizational dynamics and governance and overall organizational leadership and effectiveness.

PROFESSIONALISM
The ability to align personal and organizational conduct with ethical and professional standards that include a responsibility to the patient and community, a service orientation, and a commitment to lifelong learning and improvement. Also applying knowledge, sensitivity and judgment to act effectively and with personal integrity in accordance with the fundamental principles of professional and personal ethical behavior; and effectively managing self and resources to achieve the health center mission and objectives.

BUSINESS SKILLS AND KNOWLEDGE
The ability to apply business principles, including systems thinking, to the healthcare environment. Relevant domains for the health center CFO include:

- Accounting & Finance Operations
  Assessing, evaluating and implementing management accounting and performance management systems for planning, measuring, controlling, monitoring, forecasting and reporting the financial performance of the health center. Assuring that all financial, accounting and administrative policies, functions, systems and processes are performed consistent with all Generally Accepted Accounting Principles (GAAP) as well as within the highest professional, ethical and legal standards.
Grants Management
Managing the financial tasks required for grant applications and management of grant funds while ensuring financial compliance with all applicable requirements.

Revenue Cycle & Reimbursement
Applying knowledge of traditional and alternative reimbursement models, key performance indicators, and policies and procedures to assure optimal decision-making and compliance with all applicable requirements, regulations and laws.

Human Resource Management
Facilitating the development of knowledge, attitudes, skills and behaviors necessary for team members to function together with a high degree of engagement and satisfaction within the department and the health center and at the highest possible levels of effective performance; team growth, development & engagement.

Strategic Planning & Marketing
Strategically assessing and evaluating courses of action and identifying imaginative opportunities to improve performance and position, implementing innovative and cost-effective solutions leading to effective change management and business process improvement.

Information Management
Using secure technology to ensure that health information is confidential, available when and where it is needed and contributes to safer, higher quality, more coordinated, more efficient and less costly care for everyone; health information technology.

Risk Management
Designing and implementing policies and systematic internal audit and control processes to assess, manage and mitigate threats to the health center’s financial and business viability.

Quality Improvement
Designing and implementing policies and systematic processes to manage, measure, analyze and improve organizational performance resulting in greater efficiency, cost-effectiveness and satisfaction.

*See APPENDIX 2 for explanation of modifications made to the ACHE Health Care Executive 2021 Competencies Tool*
# HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

## A. COMMUNICATION AND RELATIONSHIP MANAGEMENT

The ability to communicate clearly and concisely with internal and external customers, establish and maintain relationships and facilitate constructive interactions with individuals and groups. Identifying, developing and maintaining collaborative relationships and communications with key stakeholders; managing stakeholder expectations and needs; aligning the organization to key stakeholder requirements; stakeholder advocacy.

<table>
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<th>BEHAVIORAL EXAMPLES</th>
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<tbody>
<tr>
<td>1. Cultivate and maintain strategic external relationships [including, but not limited to federal/Health Resources and Services Administration (HRSA), state and local regulatory agencies; Primary Care Associations (PCAs); National Professional Organizations; Chambers of Commerce; Vendors; Grantors/Funders/Bankers/Lenders; Auditors; Insurance (Liability, Health, etc.) and others as needed].</td>
<td><strong>5</strong></td>
<td>Establish self as a trusted expert on health center finances and actively seek opportunities to lead trainings with the local Primary Care Association (PCA), National Professional Organization, etc.</td>
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| | **4** | ● Participate in shaping training programs for the health center community at a local or national level, actively seek opportunities to knowledge share with peers  
● Introduce peers to vendors and vice versa to strengthen and promote ongoing professional relationships |
| | **3** | ● Participate in local or national conferences to develop a deeper understanding of all available industry partners and engage in establishing those relationships  
● Seek out people and resources that can help further the mission and financial resources of the health center; independently establish mutually beneficial professional relationships |
| | **2** | ● Understand how external relationships can be used to strategically further the mission of the health center  
● Actively seek out and engage in opportunities to participate in trainings or events that support relationship building external to the health center |
| | **1** | Learning about current relationships and understanding where local and national resources exist |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### COMMUNICATION AND RELATIONSHIP MANAGEMENT (continued)

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| 2. Help generate mutually beneficial partnerships and collaborations with internal team members and external stakeholders sharing common financial objectives. | **5** | ● Establish and nurture mutually beneficial relationships between internal team members and external stakeholders to further the mission of the health center and create financial wins where they may not exist  
● Maintain awareness of communication dynamics between internal and external stakeholders and facilitate solutions when needed |
| | **4** | ● Engage with internal team members to proactively identify relationships that will increase the financial health of the health center  
● Participate in internal team meetings and understand each unique financial barrier |
| | **3** | Selectively collaborate with external stakeholders to increase opportunity to engage them for future projects or business opportunities that will yield favorable financial results |
| | **2** | Understand where partnerships could exist, which stakeholders are needed to make progress towards the partnership; actively share information between the two |
| | **1** | ● Collaborate with internal partners, understand their business needs and objectives, and ask clarifying questions if something is unclear |
| 3. Continuously advocate for the health center and its community role with appropriate external entities. | **5** | ● Work with community leaders and organizations that are engaged/interested in health care to drive results and make meaningful progress toward health center initiatives  
● Collaborate with external entities to lead or establish community healthcare advocacy groups |
| | **4** | ● Establish relationships with key community leaders and organizations that are engaged/interested in healthcare  
● Participate in local initiatives related to healthcare and health outcomes, for example, patient access, continuity of care, etc. |
| | **3** | ● Participate in local healthcare advocacy  
● Attend meetings and conferences |
| | **2** | ● Selectively join local healthcare advocacy group  
● Aware of advocacy groups and trainings that are available |
| | **1** | ● Learning the role of the health center in the local community  
● Seek advice/guidance to improve understanding of advocacy |
### COMMUNICATION AND RELATIONSHIP MANAGEMENT (continued)

#### SKILLS/TASKS

**4. Guide finance team in learning about and taking an active role in community mobilization around health care financing and related issues.**

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| 5     | ● Demonstrate a deep understanding of community needs by actively participating in community partnerships, events and health initiatives, while encouraging finance team members to participate as well  
      ● Collaborate with external entities to mobilize support for health care issues; actively seek opportunities to further the movement and reach new levels of impact |
| 4     | ● Facilitate discussion with the finance team about local community health care concerns and financing; seek to answer questions and help to deepen their understanding of the issues  
      ● Lead, or establish a stakeholder group, to lead regular finance team meetings to discuss local health care issues and assess/make recommendations for how the health center could be involved |
| 3     | ● Participate in local health care initiatives and related issues  
      ● Speak to peers about local issues and seek to keep abreast of current matters to better understand potential opportunities and threats |
| 2     | ● Aware of local health care issues, initiatives, resources and learning opportunities  
      ● Selectively join community groups that focus on improving health care reimbursement and related issues |
| 1     | ● Receive guidance and coaching on accessing learning resources  
      ● Understand the role the health center plays in providing community health care |

**5. Advocate for the health center and the health center movement with lawmakers and other agency/association/cause leaders (local, state and national).**

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| 5     | ● Educate lawmakers on the health center movement; invite them in for a tour; seek to answer their questions, and deepen their understanding of the populations served by the health center  
      ● Proactively identify solutions for the health center movement and engage lawmakers, cause leaders, etc. to discuss next steps |
| 4     | ● Continually seek out and develop relationships with leaders who impact the health center movement  
      ● Advocate for the health center and able to articulate the top issues |
| 3     | ● Attend meetings and deepen understanding of the advocacy environment  
      ● Speak to peers about local issues and understand the opportunities and threats |
| 2     | ● Aware of advocacy groups and trainings that are available  
      ● Selectively join local healthcare advocacy group |
| 1     | ● Explore current relationships between the health center and local, state, national leaders  
      ● Receive guidance and coaching on accessing learning resources |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**COMMUNICATION AND RELATIONSHIP MANAGEMENT (continued)**

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| 6. Plan, develop and conduct effective and efficient communications; prepare and communicate business reports to support stakeholder understanding and decision making and conduct impactful meetings. | 5     | - Demonstrate a deep understanding of health center issues and prioritize needs  
- Communicate persuasively with stakeholders in ways that help them embrace the need for taking specific actions to improve availability, accessibility, affordability and quality of health care services  
- Develop and coach direct reports to demonstrate communication skills listed at the competent level  
- Model meeting management skills and discipline and expect same for meetings managed by direct reports  
- Establish environment and expectations where barriers to meeting deadlines are communicated promptly up the chain to the level that needs to know them and are resolved at the lowest possible level  
- Lead workgroups to identify the key issues, collaborate with various stakeholders to prioritize the messaging and drive results  
- Educate decision makers, seek to answer their questions and provide access to health center outcomes  
- Manage meetings in an efficient, effective and judicious manner  
- Demonstrate high level of professionalism and effectiveness in email communication: email chains steer an issue to a desired resolution and show tact, brevity, clarity, focus; recipients are judiciously and correctly apportioned between “To,” “Copy (Cc),” and “Blind copy (Bcc); assignments are clear with correct deliverables and expected due dates  
- Articulate the factors that influence the environment, the strengths and weaknesses, and key stakeholders who contribute to the daily movement  
- Establish relationships with peers and leaders who are leading the health center movement and related issues; partner with them to identify solutions  
- Compose documents that are sufficiently polished to be used as a model for new hires  
- Communicate in manner that fosters staff initiative and learning, and models a discourse that discourages off-topic, rambling, self-aggrandizing, and hidden-agendas  
- Demonstrate knowledge of the health center movement  
- Participate in advocacy groups and trainings that are available  
- Produce business communications that require minimal oversight and editing  
- Demonstrate on point and concise communication at meetings; meetings start and end on time  
- Conduct team leadership assignments with respect for participants  
- Receive guidance and coaching on accessing learning resources  
- Know when to seek out feedback prior to distributing communications, reports and presentations |
|  | 4     | - Lead workgroups to identify the key issues, collaborate with various stakeholders to prioritize the messaging and drive results  
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### B. LEADERSHIP

The ability to inspire individual and organizational excellence, create a shared vision and successfully manage change to attain the organization’s strategic ends and successful performance. Managing resources and leading the health center effectively and ethically, understanding stakeholder needs and priorities, the health care environment, and the unique dynamics of the health center model. Leads and manages a diverse and inclusive work environment that maximizes the talents of each person to achieve the vision and mission of the health center. Also includes skills and tasks associated with organizational dynamics and governance and overall organizational leadership and effectiveness.

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<tbody>
<tr>
<td>1. Model appropriate behaviors and expect others to adhere to all health</td>
<td>5</td>
<td>- Advocate for policy development, improvement and compliance that ensures personal accountability throughout the health center</td>
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<tr>
<td>center policies, procedures, regulations and laws (moral leadership).</td>
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<td>- Advocate for and lead behavior change at the executive level by setting the appropriate example</td>
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<tr>
<td>2. Demonstrate awareness of the health center policies, procedures,</td>
<td>4</td>
<td>- Set expectation for peers and subordinates to adhere to health center policies, procedures, regulations and laws</td>
</tr>
<tr>
<td>regulations and laws</td>
<td></td>
<td>- Able to articulate and model the application of health center policies, procedures, regulations and laws in many situations</td>
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<tr>
<td>3. Adhere to health center policies, procedures, regulations and laws</td>
<td>3</td>
<td>- Adhere to health center policies, procedures, regulations and laws</td>
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<tr>
<td>4. Articulate how the policies impact the health center</td>
<td>2</td>
<td>- Demonstrate awareness of the health center policies, procedures, regulations and laws</td>
</tr>
<tr>
<td>5. Can articulate some of the ways the policies impact the health center</td>
<td>1</td>
<td>- Can articulate some of the ways the policies impact the health center and personal behavior</td>
</tr>
<tr>
<td>6. Learning about the health center policies, procedures, regulations and</td>
<td></td>
<td>- Learning about the health center policies, procedures, regulations and laws</td>
</tr>
<tr>
<td>laws</td>
<td>6</td>
<td>- Articulate how the policies impact personal behavior</td>
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<td>SKILLS/TASKS</td>
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| 2. Identify health center opportunities continuously through active participation in industry networks. | 5     | - Establish and nurture mutually beneficial relationships with influential leaders and organizations engaged/interested in health care  
- Pursue opportunities for creating beneficial collaborations with existing/emerging/competitive health care entities  
- Take calculated risks in seeking and developing new opportunities with various entities |
|                                                                            | 4     | - Participate actively in local and national organization work groups  
- Identify and participate in and may create opportunities for professional networking and sharing information (for example, book club) |
|                                                                            | 3     | - Attend meetings and conferences  
- May participate in work groups of membership organizations |
|                                                                            | 2     | - Aware of industry groups and member organizations  
- Selectively join member organizations |
|                                                                            | 1     | - Explore industry groups and member organizations; may become a member |
| 3. Advocate for the health center mission, values and culture.              | 5     | - Behave consistently in a manner motivated and guided by the health center mission, values and culture  
- Engage external partners from community, government, business, education and other service entities to create funding/service solutions to achieve the health center’s mission and support its values and culture |
|                                                                            | 4     | - Consider the health center mission, values and culture in decision-making continually  
- Engage internal partners to improve financial health to support the health center mission |
|                                                                            | 3     | - Describe the health center mission and purpose comprehensively  
- Describe the purpose of the Chief Financial Officer (CFO) Role/Finance Department in promoting the health center mission and purpose |
|                                                                            | 2     | - Describe the fundamentals of the health center movement  
- Articulate the health center mission and values |
|                                                                            | 1     | - Learning about the health center movement, why it exists, and the people served |
### SKILLS/TASKS

4. Advocate for genuine diversity and appropriate inclusion within the Board of Directors, staff, health center-related community groups and vendors.

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| 5     | ● Articulate a deep understanding of the need for diversity and inclusion that includes how the disparities emerged and practical, ethical ways the health center is obligated to address them  
      ● Advocate for and take proactive steps to increase diversity in candidates for and composition of the health center staff, board, vendors and community partners  
      ● Facilitate development of health center policies that support diversity and inclusion and the dissemination of information and training to support implementation |
| 4     | ● Articulate an understanding of why addressing diversity and inclusion concerns is important to the health center mission  
      ● Lead implementation of policies related to diversity and inclusion  
      ● Advocate for methods to continually improve policies and implementation related to diversity and inclusion |
| 3     | ● Aware of disparities in diversity and inclusion and how the health center addresses them  
      ● Consistently implement and support health center policies on diversity and inclusion |
| 2     | ● Understand diversity is a concern for health center  
      ● Demonstrate some understanding of why the disparities related to diversity exist, why they are important to address or what to do about them |
| 1     | ● Aware of the diversity of staff and patients |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### LEADERSHIP (continued)

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</table>
| 5. Model and promote sensitivity to diverse cultures, behaviors and illness perspectives of patients, families and health center staff. | 5 | ● Engage in open and honest discussions with Executive team and health center leaders about diversity, language barriers and cultural differences in ways that promote understanding and engender trust  
● Fosters an environment of inclusion, where diverse thoughts and perspectives are freely shared, respected and integrated  
● Engage in creative development and promotion of financial support and collaborations with external partners to address population health needs associated with culture/race/ethnicity |
| | 4 | ● Set expectation for and educate staff members to behave in ways that demonstrate an awareness of and sensitivity to diverse cultures, behaviors and illness perspectives  
● Utilizes an understanding of individual differences to communicate with, influence, and manage individuals (e.g., resolving conflict, building teams) throughout the organization  
● Uses personal influence to help others increase their awareness and acceptance of individual differences  
● Develops policies and procedures that encourage awareness and acceptance of diversity  
● Ensure that finance department policies/procedures give consideration to diversity concerns  
● Articulate an understanding of the financial resources needed to adequately address the health needs of a culturally and racially diverse population |
| | 3 | ● Model sensitivity concerning diverse cultures, behaviors and illness perspectives  
● Understand why sensitivity to diverse behaviors and illness perspectives is central to the health center mission  
● Builds collaborative and mutually beneficial working relationships with people regardless of their individual differences |
| | 2 | ● Understand that differences exist in behaviors and illness perspectives that are related to diversity  
● Modifies communication and behavior based on an understanding of individual differences |
| | 1 | ● Learning about diversity-related differences in behaviors and illness perspectives  
● Treats all individuals with respect regardless of individual differences (e.g., race, gender, age, ethnicity, physical capabilities/challenges, sexual orientation, gender preference or religion) |
## SKILLS/TASKS

### 6. Lead the development and alignment of the financial components of the health center’s strategic plan.

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| 5     | - Collaborate with multiple departments and functions in the development of the financial components of the strategic plan  
       | - Envision and lead the development of training, communications and procedures to enhance the alignment of the financial components of the health center’s strategic plan  
       | - Understand the finance role exists to support the service mission of the health center  |
| 4     | - Establish rules, procedures and processes for the health center to follow that support the finances of the HC strategic plan  
       | - Enhance/improve efficiency of financial processes related to the strategic plan  |
| 3     | - Oversee the implementation of existing rules, procedures and processes related to the strategic planning process  
       | - Articulate how the finance department plan impacts/supports the health center strategic plan  |
| 2     | - Articulate what a strategic plan is and how finance supports the plan  
       | - Support the development of elements of the finance department plan  |
| 1     | - Learning what a strategic plan is and how finance supports the plan  
       | - Contribute to the strategic plan in discrete ways  |

### 7. Maintain strong, positive and mutually supportive relationships with the health center’s Board of Directors, leadership and staff.

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| 5     | - Communicate with all stakeholders with a clear understanding of who they are and what they want and need to know to improve the overall financial performance of the health center  
       | - Establish self as a trusted financial leader using innovative approaches to deepen the leadership and Board's understanding of health center finances and their roles in supporting its financial health  
       | - Proactively engage health center leadership and Board members appropriately in identifying solutions to support financial goals and outcomes of the health center  |
| 4     | - Lead the development and presentation of financial reports and information for the health center leadership and the Board  
<pre><code>   | - Manage health center leadership and Board expectations for financial performance  |
</code></pre>
<p>| 3     | - Contribute to the development of financial reports and presentations tailored to the information and learning needs of the health center leadership and Board  |
| 2     | - Understand the key functions of the health center departments and the Board and to identify what they want and need to know about health center finances  |
| 1     | - Learning the general and fiduciary functions of the Board and roles and accountabilities of the various health center departments  |</p>
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| 8. Identify learning needs and advocate for training and technical support to properly implement financial policies and procedures; continuously educate executives/management and empower them to inform, train and support all staff members. | 5 | ● Work with health center executives to identify and understand the key metrics/indicators that drive financial success for the health center and their roles in training and supporting their respective teams  
● Communicate throughout the health center the relationship of everyone’s role in properly implementing financial policies and procedures  
● Advocate for new and effective training and resources to assist health center leaders in properly implementing financial policies and procedures |
| | 4 | ● Assess, educate and coach finance team members to improve their understanding and implementation of health center metrics/indicators and the factors influencing their movement  
● Contribute to the ongoing improvement of available training and resources |
| | 3 | ● Articulate the factors that influence the movement of key metrics/indicators and the financial impacts and the implications of their role in those processes  
● Understand and implement the health center finance policies and procedures  
● Routinely access health center training and support resources to effectively and efficiently implement financial policies and procedures |
| | 2 | ● Aware of many of the training and resources available  
● Seek advice/guidance for accessing health center training and support to improve understanding and implementation of specific financial policies and procedures |
| | 1 | ● Aware of health center finance policies and procedures and where to find them  
● Receive guidance and coaching on accessing learning resources |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

LEADERSHIP (continued)

SKILLS/TASKS

9. Maintain and utilize knowledge of the unique dynamics of the health center model, current trends and information in health care regulations and reimbursement and their impacts on the effectiveness of the finance function and the Chief Financial Officer (CFO) role in decision-making and information sharing.

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| 5     | ● Demonstrate a deep understanding of the unique qualities and dynamics of health center financial models and their impacts on its structure and functions  
       | ● Facilitate the development of innovative partnerships to offer health center patients the services they need through external entities with funding/reimbursement models that support the delivery of those services.  
       | ● Participate in shaping trends and creating knowledge in health care by serving on statewide, national or international committees and tasks forces  
       | ● Interpret and predict the impacts of current trends and information on the health center’s finances  
       | ● Proactively identify and develop solutions to address adverse impact and take advantage of opportunities with emerging and current trends |
| 4     | ● Continually seek out current information and trends  
       | ● Apply new knowledge to current practices, policies and decision-making in the finance department and facility-wide  
       | ● Participate in health center and local work groups  
       | ● Engage with health center leaders to proactively identify and implement processes to increase efficiency and effectiveness in the utilization of available funding and reimbursement |
| 3     | ● Independently maintain awareness of current trends and information; attend conferences  
       | ● Share new information with team members  
       | ● Demonstrate an understanding of how to solve problems related to funding, reimbursement and payment denials |
| 2     | ● Actively seek out and engage in health center learning opportunities concerning current trends and information  
       | ● Demonstrate a general understanding of funding mechanisms, fee schedules, payment denials and reasons why |
| 1     | ● Participate in health center-directed learning opportunities concerning trends and information  
       | ● Learning funding mechanisms, fee schedules, payment denials and reasons why |
C. PROFESSIONALISM

The ability to align personal and organizational conduct with ethical and professional standards that include a responsibility to the patient and community, a service orientation, and a commitment to lifelong learning and improvement. Also applying knowledge, sensitivity and judgment to act effectively and with personal integrity in accordance with the fundamental principles of professional and personal ethical behavior; and effectively managing self and resources to achieve the health center mission and objectives.

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| 1. Demonstrate commitment to the highest standards of ethical responsibility, credibility and trustworthiness. | 5 | ● Set a consistent and strong example for upholding fair and honest ethical and moral standards  
● Have developed a sense of discernment for when the standards should be challenged and/or modified  
● Willing to actively listen to contrary/diverse views and perspectives  
● Advocate for ideas based on facts and experience |
| | 4 | ● Ensure consequences from non-compliance of ethical standards are administered fairly  
● Consistently interpret standards |
| | 3 | ● Ensure compliance with all employee handbook and company compliance standards and procedures  
● Report accurately on all financial issues to the appropriate stakeholders  
● Speak and advocate for higher ethical standards |
| | 2 | ● Exercise trustworthiness in even the most unfavorable circumstances  
● Share operational concerns with the appropriate stakeholders at the first opportunity  
● Resolve conflicting perspectives by addressing the issue rather than taking a defensive or aggressive posture |
| | 1 | ● Possess a high level of moral integrity  
● Acquire institutional knowledge of ethical expectations |
## HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

### PROFESSIONALISM (continued)

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<tr>
<td>2. Proactively and continually assess personal strengths/challenges and manage learning and guidance needs (for example, participate in structured self-assessments and education; seek feedback and guidance and lifelong learning, etc.)</td>
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| | 5 | ● Practice informed reflection and action based upon the major changes that will occur in the next 10, 20 or more years (“Future Think”)  
● Engage with and nurture relationships with peers/partners/colleagues who candidly provide transparent and forthcoming feedback and advice to help with self-assessment and development  
● Identify the behavioral modifications and strategies necessary for self-improvement |
| | 4 | ● Subscribe to and read industry publications, including those in other health delivery models  
● Complete self-assessments of my plans and progress towards my personal and professional goals on a regular basis |
| | 3 | ● Develop and adhere to self-directed professional development plan  
● Take advantage of relevant learning opportunities offered by various associations  
● Willing to explore options outside of my comfort zone  
● Seek out the advice and counsel of my peers and leadership team |
| | 2 | ● Take part in personal development opportunities presented by outside entities  
● Develop plans (including time frames) to achieve personal development goals  
● Ensure that my personal goals are included in annual performance review & planning |
| | 1 | ● Have completed a self-assessment to establish my baseline performance levels/current status  
● Engage my Chief Executive Officer (CEO) and peers in constructive dialogue about my personal and professional goals |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### PROFESSIONALISM

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</table>
| 3. Maintain knowledge of current trends and information in health care, the health center movement and Financial Planning and Management. | **5** | - Prepare and make presentations on financial and operational topics to national and state healthcare stakeholders  
- Provide financial subject matter technical assistance at state and national levels  
- Publish articles on current trends |
| | **4** | - Conduct in-service education on financial management to non-financial department directors  
- Ensure that financial reports and information shared with the Board support fully informed decision-making |
| | **3** | - Attend state, regional, Primary Care Association (PCA) and national conferences  
- Engage with a network of peers/partners to discuss current issues, trends and solutions  
- Review news and political action websites and other information outlets to stay abreast of outside influences on healthcare  
- Known to manage from a position of knowledge and experience  
- Seek out opinions/information and listen to staff members at all levels of the health center |
| | **2** | - Maintain thorough understanding of the current fiscal status of the health center  
- Use available data to make comparative analyses with state and national entities that are similar to the health center  
- Participate in educational activities |
| | **1** | - Maintain awareness of resources available at National Association of Community Health Centers (NACHC)  
- Familiar with the role of the Primary Care Association (PCA), resources available to support financial management of health centers and take part in PCA activities  
- Subscribe to and read healthcare periodicals, for example, Modern Healthcare, Healthcare Financial Management, etc. |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

PROFESSIONALISM (continued)

SKILLS/TASKS

4. Seek out engagement in local, state, national and international opportunities for professional development and health center movement advocacy.

   LEVEL | BEHAVIORAL EXAMPLES

   5    | ● Active with local and state governance
   | ● Advocate role of health center as a community partner and provider of healthcare
   | ● Write and present position/white papers advocating for health center services and mission

   4    | ● Actively participate in local community groups, including community relations councils, neighborhood/community-based associations, local school boards, cultural organizations
   | ● Take opportunities to develop community partnerships to support delivery of health outreach projects
   | ● Encourage team members to engage in local, state, national and international professional development opportunities

   3    | ● Develop local partnerships to assist in advocacy endeavors
   | ● Known to be a reliable source of information and advice

   2    | ● Contribute to initiatives that help patients become the best advocates for their own healthcare
   | ● Monitor state political activities

   1    | ● Understand health center mission and vision and how they integrate with and support the community
   | ● Attend city hall and other community meetings from time to time

5. Communicate and listen effectively.

   LEVEL | BEHAVIORAL EXAMPLES

   5    | ● Listen more than I speak
   | ● Exercise a persuasive voice
   | ● Perceived as an informed and reliable source of information
   | ● Effectively build coalitions and consensus

   4    | ● Know when and how to lead, follow or support staff
   | ● Ensure clarity of health center and department vision and mission through daily communications and actions

   3    | ● Describe stakeholders’ positions and the rationale for those positions
   | ● Focus on seeking clarification about the situation/concern at hand rather than personal issues
   | ● Ask clarifying questions without challenging or threatening
   | ● Seek out feedback and listen to team members at all levels of the department

   2    | ● Navigate comfortably within diverse cultural and racial environments
   | ● Communicate effectively orally and through writing

   1    | ● Learning the healthcare terminology, especially for Federally Qualified Health Center (FQHC) and Section 330 grants
   | ● Demonstrate a working understanding of clinical terminology
   | ● Ask clarifying questions when in doubt
6. Lead and/or participate in collaborative group projects with good outcomes.

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<th><strong>BEHAVIORAL EXAMPLES</strong></th>
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| **5**     | ● Develop forward-thinking strategies for the health center  
           ● Forecast needs for programmatic enhancements for future growth based on the mission statement  
           ● Engage ALL appropriate stakeholders, internal and external |
| **4**     | ● Contribute knowledge of current industry trends  
           ● Perceived as an informed, fact-based source of information and guidance  
           ● Contribute knowledge gained through networking with external organizations and experts |
| **3**     | ● Possess/seek a well-rounded/circumspect understanding of the subject matter and seek to understand the basis or foundation for different perspectives represented in the group  
           ● Manage and establish measures for effective group process and goal-oriented outcomes  
           ● Identify appropriate health center team members/representatives for effective group work and outcomes |
| **2**     | ● Learning workflow of other departments  
           ● Describe the current operational budget for each department and rationale |
| **1**     | ● Understand department roles in the health center  
           ● Understand department impacts to the health center fiscal viability |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

PROFESSIONALISM (continued)

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<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 7. Maintain work-life balance and personal health. | 5     | ● Exemplify and inspire others to achieve work-life balance  
● Have confidence that the department is empowered for and capable of functioning optimally in my absence  
● Engage the health center in local community and government festivals, charitable causes, sporting events and other activities  
● Exercise a flexible work schedule responsibly  
● Understand how to manage situational stress effectively |
| | 4     | ● Involved personally in local community and government festivals, causes, sporting events and other activities  
● Practice effective time management techniques  
● Possess and engage in strong personal interests outside of work |
| | 3     | ● Engage in strategies to manage stress and enhance creativity and effectiveness throughout the day (for example, mini breaks out of the office, refrain from eating lunch at desk, creative thinking/imagination)  
● Volunteer to mentor and support individuals in the community (for example, tutoring, meals on wheels, Boys and Girls Clubs, YMCA, Big Brothers/Sisters, Scouts, school programs, etc.)  
● Take time for self on a regular basis, for example: annual vacations, pampering, family time, etc.  
● Support work/life balance for staff members |
| | 2     | ● Understand that working long hours on a regular basis is not a reflection of commitment to the job  
● Budget an appropriate amount of time to complete a task and appropriately delegate to other team members  
● Engage with co-workers in recreational/fun activities  
● Have strategies to manage stress |
| | 1     | ● Aware of the real time requirements to meet job-related objectives  
● List and prioritize daily/weekly/monthly work tasks on a regular basis (for example, “To Do Lists”) to ensure focus is maintained on activities that are the most important and share lists with appropriate stakeholders  
● Able to think creatively with work-related and other tasks  
● Aware that maintaining/developing a healthy lifestyle is important to/impacts my overall sense of fulfillment and joy at work |
D. BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS

Assessing, evaluating and implementing management accounting and performance management systems for planning, measuring, controlling, monitoring, forecasting and reporting the financial performance of the health center. Assuring that all financial, accounting and administrative policies, functions, systems and processes are performed consistent with all Generally Accepted Accounting Principles (GAAP) as well as within the highest professional, ethical and legal standards.

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<tr>
<td>1. Ensure that finance operations, policies and procedures are consistent</td>
<td>5</td>
<td>- Can articulate complex health center financial reporting issues to leadership</td>
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<td>team members, Board members and external stakeholder users of health center</td>
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<td>financial reports (lenders, grantors, donors); including, specifically, alignment</td>
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<td>of financial reports with generally accepted accounting principles</td>
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<td>- Stay informed on changes (both required and proposed changes) to generally</td>
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<td>accepted accounting principles and demonstrates the ability to proactively model</td>
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<td>any such changes and inform internal and external users of health center</td>
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<td>financial reports as to the impact on financial reporting</td>
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<td>- Proactively monitor and manage changes to finance operations, policies and</td>
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<td>procedures to achieve compliance with generally accepted accounting principles</td>
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<td>- Possess a working knowledge of generally accepted accounting principles and can</td>
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<td>identify, understand and implement required changes in a timely and compliant</td>
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<td>- Educate and coach finance team members to improve team-wide understanding of</td>
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<td>the need for finance operations, policies and procedures to be consistent with</td>
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<td>generally accepted accounting principles</td>
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<td>- Oversee implementation and maintenance of finance operations, policies and</td>
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<td>(for example, in areas such as valuation of patient accounts receivable and</td>
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<td>- Can articulate details of application of generally accepted accounting</td>
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<td>principles to the presentation of health center financial statements, including</td>
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<td>measurement of assets, liabilities, revenues, expenses and net assets</td>
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<td>- Ability to recognize when assistance is needed regarding proper application</td>
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<td>of generally accepted accounting principles to health center accounting and</td>
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<td>reporting matters and engages resources as needed to ensure consistency of</td>
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<td>policies and procedures with generally accepted accounting principles</td>
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<td>- Demonstrate awareness of finance operations, policies and procedures</td>
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<td>- Can articulate the application of generally accepted accounting principles to</td>
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<td>- Learning about finance operations, policies and procedures</td>
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<td>- Aware of generally accepted accounting principles and their application to</td>
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HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES
BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS (continued)

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| 2. Ensure the development and effective management of accurate and efficient systems and processes for the health center’s finance functions (for example, planning, budgeting, forecasting, accounting, billing, credit/collections, payroll, grants administration and reporting and decision support of financial and operational outcomes). | 5 | ● Demonstrate a deep understanding of the unique issues of importance in each of the health center’s finance functions  
● Proactively communicate results, as necessary, to keep leadership team members and Board members informed on key strategic issues related to financial sustainability and/or compliance |
| | 4 | ● Anticipate and assesses opportunities for changes to health center systems and processes to promote added efficiency and effectiveness  
● Proactively makes changes to health center systems and processes to enhance finance team production |
| | 3 | ● Ability to successfully manage tasks that must be completed for each of the health center’s finance functions and can reliably assess accuracy of results obtained  
● Reliably manage finance team resources to accomplish successful outcomes for each of the health center’s finance functions (for example, through creation of calendars for completion of required tasks/workflow expectations) |
| | 2 | ● Demonstrate awareness of the systems and processes in place for each of the health center’s finance functions, including timing issues inherent in each finance function (for example, tasks that are to be completed daily, weekly, monthly, quarterly, annually, etc.)  
● Recognize the importance of having efficient and effective systems and processes in place to support health center financial sustainability considerations |
<p>| | 1 | ● Learning about the health center’s finance functions |</p>
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| 3. Ensure that financial and administrative operations are continuously    |       | ● Engage with leadership team members to identify best practices in aligning financial and administrative operations  
| aligned.                                                                   | 5     | ● Ensure appropriate communication of health center goals so that alignment of operations is done in an effective manner that supports health center financial sustainability considerations                                                                                                                                                                |
|                                                                            |       | ● Skilled/highly effective in leading development and implementation of action plan/strategy to enhance the alignment of health center financial and administrative operations  
|                                                                            | 4     | ● Collaborate internally to foster a culture of cooperation and trust among finance and other administrative team members                                                                                                                                                                                                                           |
|                                                                            | 3     | ● Possess ability to assess alignment of financial and administrative operations and identify opportunities for improvement  
|                                                                            | 3     | ● Develop a workable plan of action/strategy to realign financial and administrative operations where opportunities for improvement are identified  
|                                                                            | 3     | ● A team player who is not afraid to reach out to others to assist with problem solving (willing to consider multiple points of view to enhance outcome of action plan/strategy development)                                                                                                                                                           |
|                                                                            | 2     | ● Possess basic knowledge of the health center’s administrative operations and how the finance function supports/aligns with administrative activities (human resources, information technology, etc.)                                                                                                                                 |
|                                                                            | 1     | ● Learning about financial and administrative operations  
|                                                                            | 1     | ● Aware of importance of aligning financial and administrative operations to advance health center goals                                                                                                                                                                                                                                        |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS**

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| 4. Ensure the health center’s capital budget and resources are strategically aligned and effectively managed. | **5** | ● Articulate fiscal implications of planned capital outlays to leadership team members and Board members  
● Proactively engage with department leaders to establish expectations for appropriate and effective allocation of health center resources in support of Board approved strategic and financial plan goals and priorities  
● Establish need/expectation for self to be “at the table” when proposed capital acquisitions are vetted, and capital spending priorities are developed |
| | **4** | ● Lead the development of the health center’s capital budget  
● Collaborate with department leaders to gather information regarding capital investment needs |
| | **3** | ● Contribute to the development of the health center’s capital budget  
● Demonstrate an understanding of how to align health center capital outlays with strategic needs and priorities |
| | **2** | ● Recognize the importance of aligning health center capital outlays (including the timing of any such outlays) with strategic needs and priorities  
● Can articulate the capital budget process |
| | **1** | ● Learning about the health center’s capital budget process, including how strategic capital needs/investments are identified and prioritized |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS (continued)

<table>
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<tr>
<th>SKILLS/TASKS</th>
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<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 5. Utilize generally accepted financial tools and systems (including internal controls and segregation of duties) to generate/analyze data for successful safeguarding of health center assets. | 5     | ● Established as a trusted “champion” for safeguarding of health center assets (ability to see risk and design and implement appropriate action plan/controls to mitigate risk to the extent possible)  
● Seek information and knowledge regarding problems that have occurred in other health care organizations with respect to safeguarding of assets (for example, misappropriation of cash) in order to design and implement preventive action/enhance internal accounting controls where appropriate  
● Educate team members about internal controls and their relationship to health center financial sustainability considerations |
|                                                                             | 4     | ● Annually (or more frequently as facts and circumstances warrant) lead analysis of health center internal controls to assess appropriate segregation of duties to manage risk and safeguard health center assets  
● Routinely communicate importance of efficient and effective internal controls to keep topic top of mind with finance and leadership team members (as well as Board members) |
|                                                                             | 3     | ● Can articulate details of health center internal controls in place to safeguard health center assets in compliance with laws, regulations and policies  
● Engage with external auditor regarding opportunities for cost-beneficial enhancements/improvements to financial tools and systems  
● Know when to seek help when risk issues are identified for investigation and resolution (for example, where misappropriation of health center assets is believed to have occurred) |
|                                                                             | 2     | ● Demonstrate awareness of health center internal controls in relation to risk management and compliance with laws, regulations and policies |
|                                                                             | 1     | ● Learning about internal controls  
● Aware of the importance of segregation of accounting duties to enhance safeguarding of health center assets |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS (continued)

<table>
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<th>LEVEL</th>
<th>SKILLS/TASKS</th>
<th>BEHAVIORAL EXAMPLES</th>
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<tbody>
<tr>
<td>6</td>
<td>Ensure timely, accurate, and (as appropriate) broadly distributed fiscal reporting as required for internal/external business communications, decision making and financial management.</td>
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### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS**  
*continued*

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<tr>
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</table>
| 7. Investigate, conduct financial analyses and make recommendations to help guide decision-making re: health center initiatives with major financial components or consequences [for example, Federal 340B drug program; Federal Torts Claims Act (FTCA) liability protection program; and/or new/alternative organizational models and opportunities, such as mergers/acquisitions, major expansion, financing alternatives, etc.]. | **5** Can articulate results of financial analyses regarding complex health center initiatives to leadership team members and Board members in support of decision-making  
Established as a skilled and trusted strategist who proactively looks for new programs/opportunities that align with health center goals and objectives, including adding financial value in support of the overall mission (for example, evaluation, planning and implementation of strategic growth initiatives such as mergers and acquisitions that support health center goals and objectives in a financially sustainable manner) |  
Skilled/highly effective in leading development and implementation of action plan/strategy to operationalize new and/or modify, as necessary, existing health center initiatives with major financial components or consequences  
Educate and coach finance team members to increase team-wide awareness of the financial implications of strategic health center activities |  
Oversee analysis in support of decision-making and present options for consideration  
Willing to engage external resources to assist with analysis and development of options when full knowledge of financial nuances of an initiative is not present within the health center team (“know what you don’t know” and seek qualified help to fill knowledge gaps in support of decision-making)  
Possess a working knowledge of health center initiatives with major financial components or consequences |  
Familiar with health center initiatives with major financial components or consequences  
Contribute to financial analysis in support of decision-making |  
Learning about health center initiatives with major financial components or consequences  
Assist with collection of data for analysis and decision-making |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS (continued)

<table>
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<th>SKILLS/TASKS</th>
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<tbody>
<tr>
<td>Manage receivables [outside of patient Accounts Receivable (A/R)], banking, cash and investments by optimizing bank and deposit relationships and initiating appropriate strategies to enhance cash position/cash flow.</td>
<td><strong>8.</strong></td>
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</table>
5. Enforce cash management policies and procedures that drive balance sheet strength and support health center financial sustainability goals (embrace importance of a cash flow culture for the health center)  
4. Lead identification of innovative solutions to enhance cash position/cash flow  
3. Collaborate effectively with department heads to align operations with cash management strategy  
2. Maintain an awareness of cash management best practices and measure/evaluate health center performance against established key performance indicator goals (for example, days in accounts receivable, days in accounts payable, days cash on hand)  
1. Develop plan to accumulate or increase cash reserves  
1. Conduct analyses of opportunities designed to enhance cash position/cash flow and makes recommendations as warranted  
1. Oversee cash management activities with a mindset that “cash is king” in support of the cash flow culture of the health center  
1. Routinely report cash and investment activity results to leadership team members, including maintaining a rolling forecast of anticipated health center cash flows for business planning purposes (for example, maintaining a 12 to 18 month rolling forecast of anticipated cash flows)  
1. Cultivate working relationship with financial institutions and investment brokers  
1. Familiar with health center financial institution and investment broker relationships  
1. Understand basics of health center cash flow activities, including investing activities  
1. Learning about health center cash management policies and procedures |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

BUSINESS SKILLS & KNOWLEDGE: ACCOUNTING & FINANCE OPERATIONS (continued)

SKILLS/TASKS
9. From a finance perspective, and in conjunction with leaders from Human Resources (HR), Providers, Clinical, and Operations support the identification of compensation & benefits, incentives and payroll systems.

LEVEL  BEHAVIORAL EXAMPLES
5  • Proactively identify and develop strategy to address payroll related issues to enhance health center operations while successfully managing health center financial outcomes, including cash management issues
• Continually search for innovative industry best practices and trends for analysis and consideration, including technologies and systems to increase accuracy, efficiency and ease of use in managing the financial aspects of human resources-related functions
• Share innovative practices with the professional community

4  • Lead the development of financial models used for decision-making
• Collaborate proactively with leadership team members, including Human Resources (HR), to evaluate, plan, develop and maintain financially viable strategies to support recruitment, retention and job satisfaction
• Maintain awareness of market conditions including compensation and benefits trends and impact on health center budgets

3  • Demonstrate an understanding of how changes in compensation, incentives and payroll-related issues impact health center financial outcomes
• Contribute to the development of financial models used for decision-making, including compensation, staffing models, and incentives
• Monitor and manage actual vs. budgeted salaries
• Model compensation and incentive scenarios and evaluate against facility performance and fairness within and across job categories
• Ensure payroll functions are audited on a regular basis for accuracy in pay, deductions, salary/incentives reconciliation, reporting and compliance with all applicable state and federal regulations, information security and employee access to personal records (includes Form 5500 filing for retirement plans)
• Conduct cost-benefit analyses of existing and new payroll and compensation systems to determine when in-house or out-sourced systems are more efficient and effective for the health center

2  • Aware that Human Resources (HR) costs (salary and employee benefits costs) are the most significant expense category for the health center
• Oversees implementation of existing payroll and compensation systems
• Contribute to data collection for analysis

1  • Learning about Human Resources (HR) activities and how such activities intersect with the finance function
<table>
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<th>SKILLS/TASKS</th>
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<th>BEHAVIORAL EXAMPLES</th>
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<tr>
<td>10. Direct the purchasing functions (for example, contract solicitation and</td>
<td>5</td>
<td>• Identify industry best practices and trends for analysis and consideration</td>
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<td>contract solicitation and maintenance, vendor selection, organization</td>
<td></td>
<td>• Establish and nurture relationships with key health center vendors</td>
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<td>policies and procedures, etc.).</td>
<td>4</td>
<td>• Enforce policies and procedures for purchasing functions and proactively revise</td>
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<td>policies and procedures where opportunities for improvement are identified</td>
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<td></td>
<td>• Educate and coach finance team members regarding purchasing activities and the</td>
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<td></td>
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<td>impact on financial sustainability considerations</td>
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<td></td>
<td>3</td>
<td>• Oversee purchasing activities to ensure compliance with policies and procedures</td>
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<td>(for example, soliciting competitive bids for goods and services when required</td>
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<td></td>
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<td>as part of the vendor selection process)</td>
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<td>• Evaluate the value of purchasing groups and renegotiate as needed.</td>
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<td>• Aware of federal regulatory requirements regarding contract procurement and</td>
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<td>monitoring for health center goods and services paid for in whole or in part with</td>
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<td>federal grant/award dollars (familiar with Health Resources and Services</td>
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<td>Administration's (HRSA) Health Center Program Compliance Manual)</td>
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<td>2</td>
<td>• Demonstrate awareness of policies and procedures regarding purchasing activities</td>
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<td></td>
<td>• Contribute to data collection for analysis</td>
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<td></td>
<td>1</td>
<td>• Learning about policies and procedures regarding purchasing activities</td>
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<td>SKILLS/TASKS</td>
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<td>BEHAVIORAL EXAMPLES</td>
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<td>11. Oversee financial and pension audits including compliance with all</td>
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<td>● Articulate audit results to leadership team members, Board members (including the Finance Committee) and external stakeholder users of health center audit reports (lenders, grantors, donors)</td>
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<tr>
<td>applicable laws and reporting requirements and correspondence with</td>
<td>5</td>
<td>● Proactively work with leadership team members and Board members (including the Finance Committee) to develop and implement corrective action plans/measures where required</td>
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<td>external auditor and state/federal agencies.</td>
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<td></td>
<td>4</td>
<td>● Educate and coach finance team members regarding health center audit processes</td>
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<td>● Proactively communicate with external auditor and state/federal agencies to accommodate information flow and expedite completion of audit processes (including resolution of problems encountered during the audit process)</td>
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<td>3</td>
<td>● Oversee health center audit processes and coordinate activities with external auditor and state/federal agencies</td>
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<td>● Coordinate gathering of information requested by external auditor (within the finance department and other departments as necessary) and provides information for completion of the audit processes</td>
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<td>2</td>
<td>● Understand audit requirements related to the health center's financial statement audit; Single Audit in accordance with OMB Uniform Grants Guidance (if applicable); and employee benefit plan audit (if any)</td>
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<tr>
<td></td>
<td>1</td>
<td>● Learning about health center audit requirements</td>
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### E. BUSINESS SKILLS & KNOWLEDGE: GRANTS MANAGEMENT

Managing the financial tasks required for grant applications and management of grant funds while ensuring financial compliance with all applicable requirements.

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<tr>
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</table>
| 1. Ensure timely and successful completion of financial components of health center grant applications, including Section 330 and other Federal, State and Local funding. | 5 | ● Establish a monitoring system to ensure compliance with the financial requirements/components of the grant  
● Develop reporting mechanism to stakeholders and Board of Directors on compliance with grant requirements  
● Identify trends and develop strategies to address existing or potential issues with compliance |
| | 4 | ● Reconcile financial elements of the grant with current health center operations/budget  
● Align grant application with strategic plan of the health center  
● Recommend modifications and assist in the decision making for grant applications |
| | 3 | ● Establish timeline for completion of key grant requirements/deliverables  
● Engage key stakeholders and advise them of their roles in the grant administration process  
● Identify critical elements/data needed for accurate completion of applications  
● Understands overall financial performance of the health center and resulting capacity to manage supported projects |
| | 2 | ● Create a user-friendly stand-alone format for grant financial requirements derived from the Electronic Handbook (EHB), payment management system, and other grant requirements  
● Assist in building the crosswalk between the operational and grant budgets |
| | 1 | ● Assist in preparation of grant budgets  
● Become familiar with the purpose, structure and utilization of Electronic Handbook (EHB) and payment management system for the Section 330 grant, and requirements for other funding streams |
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<tr>
<th>SKILLS/TASKS</th>
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<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 2. Appropriately track and monitor all private donor contributions (individual/corporate/private foundation/other). | 5     |  ● Evaluate private donor grant opportunities for relevance to the health center strategic plan and recommend grants to pursue  
      ● Train and empower staff to monitor private donor contributions accurately and timely  
      ● Explore and identify additional private donor contribution sources with major stakeholders  
      ● Ensure tracking of private/donated funds is consistent with General Ledger (G/L) and balance sheet  
      ● Project utilization and need for private contributions/donations  
|                                                                              | 4     |  ● Develop reliable process for receiving and tracking all private donor funds  
      ● Distinguish between restricted and un-restricted private donor funds  
      ● Develop process for tracking disbursement of private/donated funds  
|                                                                              | 3     |  ● Monitor all private donor contributions on a monthly basis  
      ● Track all disbursements of private donor funds  
|                                                                              | 2     |  ● Becoming familiar with the sources of restricted and unrestricted private donor contributions  
      ● Understand General Ledger (G/L) postings for all private donor contributions  
|                                                                              | 1     |  ● Developing a grants management protocol  
      ● Develop a schedule for utilization of funds consistent with the designated grant period  
|                                                                              | 5     |  ● Developing a tracking format/procedure for the drawdown and use of funds over the life of the grant  
      ● Analyze and report findings and recommendations on a monthly basis to health center administration and Board of Directors  
      ● Ensure utilization of funds complies with the certificate of award and the stated purpose(s)  
|                                                                              | 4     |  ● Understanding the content and parameters of the certificate of award documents associated with all grants  
      ● Develop budget based on certificate of award specifications  
      ● Review all drawdowns and subsequent utilization of funds  
|                                                                              | 3     |  ● Track utilization of funds in the operational system of the health center  
      ● Code expenses accurately by fund and correct grant numbers in the General Ledger (G/L)  
|                                                                              | 2     |  ● Familiar with all grants, their associated sources and intents  
      ● Understand the overall process of grants management  
|                                                                              | 1     |                                                                                                                                                                                                                                                                                                                                                     |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: GRANTS MANAGEMENT** *(continued)*

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<tr>
<td>4. Ensure complete, accurate and timely payor billing and grant drawdowns/reimbursement to enable sufficient cash flow for ongoing health center activities</td>
<td>5</td>
<td>● Closely monitor all key Revenue Cycle Management (RCM) indicators</td>
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</table>
|                                                                             | 4     | ● Complete the Federal Finance Report (FFR) on quarterly and annual bases  
|                                                                             |       | ● Reconcile grant drawdowns to grant and operational budgets                                                                                          |
|                                                                             | 3     | ● Ensure monthly grant drawdowns  
|                                                                             |       | ● Reconcile drawdowns to Federal Finance Report (FFR) balances                                                                                      |
|                                                                             | 2     | ● Review unbilled reports on monthly basis                                                                                                             |
|                                                                             | 1     | ● Monitor bank accounts to validate cash levels  
|                                                                             |       | ● Review financial statements monthly to ensure accurate posting of all funds                                                                         |
### F. BUSINESS SKILLS & KNOWLEDGE: REVENUE CYCLE & REIMBURSEMENT

Applying knowledge of traditional and alternative reimbursement models, key performance indicators, and policies and procedures to assure optimal decision-making and compliance with all applicable requirements, regulations, and laws.

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</table>
| 1. Guide health center staff in understanding critical revenue cycle/reimbursement mechanisms and issues. | 5     | ● Develop functioning Revenue Cycle Management (RCM) team with key stakeholders in the health center  
● Develop reporting mechanisms to track key performance indicators  
● Explore new product lines that augment current operations  |
|                                                                              | 4     | ● Develop working relationship with major payor representative  
● Knowledge of all Managed Care Organization (MCO) specific incentive programs  
● Periodically review all processes for modifications  |
|                                                                              | 3     | ● Share collection goal computations and educate  
● Develop action plans to address shortfalls  
● Develop network of resources  |
|                                                                              | 2     | ● Meet with managers of other key staff that have roles in Revenue Cycle Management (RCM)  
● Review with managers all procedures to ensure clear understanding of roles  
● Develop annual competency check lists used to evaluate Revenue Cycle Management (RCM) related skills  |
|                                                                              | 1     | ● Take part in customer service training activities  
● Understand basis of key Revenue Cycle Management (RCM) indicators  
● Train with financial Revenue Cycle Management (RCM) staff understanding their roles  |
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</table>
| 2. Negotiate and monitor payor contracts to include optimizing rates, building revenue, meeting agreed upon reimbursement and adhering to policies. | 5     | ● Position providers with pay for performance  
● Collaborate with health center leaders to track contract performance indicators and proactively develop and implement action plans as needed  
● Develop procedure for incentive payments  
● Proactively address reimbursement as it pertains to new or modification of existing programs  
● Participate in Revenue Cycle Management (RCM) committee meetings |
|                                                                             | 4     | ● Hold monthly meetings of payor reps to discuss trends and action plans needed to ensure best outcomes  
● Ensure all appeal issues are addressed in a timely manner  
● Familiar with all payor contracts  
● Ensure reimbursement actuals are as contracted  
● Understand implication of the timeline for credentialing |
|                                                                             | 3     | ● Understand basics of Electronic Health Record (EHR)/Practice Management System (PMS)/Clearinghouse navigation and billing function  
● Navigate comfortably within billing system  
● Run scenarios of different reimbursement models on current operations to identify optimal procedures  
● Work with PCAs and state partners to identify different options for FQHC Alternative Payment Methodology (APM) models |
|                                                                             | 2     | ● Build cost models for specific programs  
● Investigate partnerships of active Accountable Care Organizations (ACO) in the network  
● Determine base line levels of acceptable risk  
● Stay abreast of reimbursement models making impact in the health center service area  
● Engage with Accountable Care Organizations (ACO) to learn of possible opportunities |
|                                                                             | 1     | ● Schedule and attend monthly meetings with Managed Care Organization (MCO) representatives  
● Investigate educational opportunities offered by the state Primary Care Association (PCA) with alternative payment organization representatives  
● Understand basis of new alternative reimbursement models |
| 3. Help guide investigation, analysis, and decision-making regarding alternative reimbursement models (for example, Accountable Care Organization (ACO)/value-based models, risk-based reimbursement, etc.). | 5     | ● Run scenarios of different reimbursement models on current operations to identify optimal procedures  
● Work with PCAs and state partners to identify different options for FQHC Alternative Payment Methodology (APM) models |
|                                                                             | 4     | ● Build cost models for specific programs  
● Investigate partnerships of active Accountable Care Organizations (ACO) in the network  
● Determine base line levels of acceptable risk  
● Stay abreast of reimbursement models making impact in the health center service area  
● Engage with Accountable Care Organizations (ACO) to learn of possible opportunities |
|                                                                             | 3     | ● Schedule and attend monthly meetings with Managed Care Organization (MCO) representatives  
● Investigate educational opportunities offered by the state Primary Care Association (PCA) with alternative payment organization representatives  
● Understand basis of new alternative reimbursement models |
|                                                                             | 2     | ● Schedule and attend monthly meetings with Managed Care Organization (MCO) representatives  
● Investigate educational opportunities offered by the state Primary Care Association (PCA) with alternative payment organization representatives  
● Understand basis of new alternative reimbursement models |
|                                                                             | 1     | ● Understand basis of new alternative reimbursement models |
### SKILLS/TASKS

4. Ensure that the health center Cost Report successfully addresses Medicaid (if applicable) and Medicare Federally Qualified Health Center (FQHC) Prospective Payment System (PPS) reimbursement rate issues and optimizes related rates.

### LEVEL | BEHAVIORAL EXAMPLES
---|---
5 | - Prepare change in scope of service request as may be allowed/required by Medicaid
- Ensure accuracy of annual Medicare and Medicaid cost reports
4 | - Develop models to ascertain direct and indirect costs for all product lines
- Calculate overhead cost amount and allocation
- Align provider productivity levels with state and Health Resources and Services Administration (HRSA) expectations by product line
3 | - Develop relationships with key State Medicaid personnel
- Review remittance advices periodically to ensure correct reimbursement
- Maintain thorough understanding of Managed Care Organization (MCO) contracts and their potential impact on Medicaid reimbursement
- Know when to seek assistance with Medicare/Medicaid Cost Reports
2 | - Run reports verifying actual reimbursement rates versus contract amounts
- Identify the services are within the scope for payment for Medicare and Medicaid
1 | - Review state specific Medicaid requirements
- Review state Medicaid requirements for specific Managed Care Organization (MCO) contracts
- Review out-of-network reimbursement rates
- Identify reimbursement exceptions ("carve-outs") and their impact on accounts receivable levels
5. Assure processes are in place to educate/inform the optimization of the revenue cycle within the context of the reimbursement method for all administrative and clinical functions that contribute to the capture, management, and collection of patient service revenue.

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| 5     | ● Develop and implement successful action plan for issues identified during analysis  
        ● Assure Board's understanding of data findings and plan of action |
| 4     | ● Analyze and track trends of all key reimbursement indicators  
        ● Note changes in key reimbursement indicators and communicate to appropriate individuals  
        ● Resolve issues communicated by clinical staff concerning their role in the reimbursement processes |
| 3     | ● Ensure key stakeholders understand their role in Revenue Cycle Management (RCM)  
        ● Develop annual competency training models for key stakeholders |
| 2     | ● Ensure finance staff understands their roles in Revenue Cycle Management (RCM)  
        ● Meet with clinical staff including providers to explain their roles |
| 1     | ● Review and understand Financial Policies and procedures as they pertain to billing, collection and timing |

6. Identify key performance indicators showing the strengths and weaknesses of the organization.

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| 5     | ● Share key indicator dashboard with plan for addressing negative indicators  
        ● Share key financial performance indicators with Board to provide rationale for improving indicators  
        ● Monitor industry trends for new performance indicators |
| 4     | ● Compare indicators with those of similar health centers, make adjustments where needed  
        ● Ascertain the factors that influence movement of the indicators (facilitators and deterrents)  
        ● Ensure indicators are tied to the fiscal viability of the health center  
        ● Ensure indicators are integral to the health center's strategic plan |
| 3     | ● Accurately report monthly collection goals  
        ● Note discrepancies within payor sources  
        ● Note the indicators influenced by outside entities |
| 2     | ● Develop reporting for all key performance indicators  
        ● Work with Information Technology (IT) to develop monthly reports on key indicators |
| 1     | ● Identify and understand the key performance indicators  
        ● Understand the role of key stakeholders in each indicator, especially non-finance |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

G. BUSINESS SKILLS AND KNOWLEDGE: HUMAN RESOURCES MANAGEMENT

Facilitating the development of knowledge, attitudes, skills and behaviors necessary for team members to function together with a high degree of engagement and satisfaction within the department and the health center and at the highest possible levels of effective performance; team growth, development & engagement.

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</table>
| 1. Hire, orient, retain, develop and ensure effective Human Resources (HR) management of high-performing team members. | 5     | - Delegate many daily, weekly, monthly tasks to senior financial leaders  
- Focus on strategic priorities, new business development, analysis and coaching leaders, and providing decision support to the Board and the rest of the leadership team  
- Maintain awareness of resources outside the health center  
- Act as an internal consultant/mentor to support the growth of high-performing health center managers/leaders  
- Encourage staff involvement in leadership roles with industry and/or outside professional and civic organizations, representing the health center to the community at large |
|                                                                             | 4     | - Actively engage team members in preparation of financial statements, Board presentations, and provide support for new or unfamiliar tasks  
- Developing a team of highly effective managers, capable of overseeing/doing most process-related & tactical work  
- Encourage team members to attend and participate in external conferences and represent the health center within the community |
|                                                                             | 3     | - Provide day to day oversight of a well-performing accounting and finance staff  
- Engage in staff development of management skills and capacity for taking on higher levels of responsibility  
- Analyze staff needs and development opportunities  
- Recruits, develops, and retains a diverse, high-quality workforce in an equitable manner |
|                                                                             | 2     | - Actively engage in departmental tasks and processes  
- Learning how to effectively hire and manage staff level team that effectively manages and completes all tasks and processes associated with the department |
|                                                                             | 1     | - Maintain focus on the management and execution of the department functions  
- Hire and train new staff frequently  
- Learning about team dynamics and performance, and engaging in ongoing teaching and oversight of tasks and duties |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: HUMAN RESOURCES MANAGEMENT (continued)**

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<tr>
<th>SKILLS/TASKS</th>
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<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 2. Optimize team and individual performance in service to the health center and its mission (for example, manage expectations; provide timely feedback and recognition; ensure individuals have the knowledge, skills, mindset and support needed, etc.). | 5 | ● Receive regular invitations to operational departmental meetings, provide support and innovation toward improving other departmental operations (may include finance staff members as well)  
● Ensure entire health center is well-trained and effectively using all tools, system, and technologies necessary to affect an efficient organization  
● Develop and promote finance staff as teachers and trusted advisors to others, sought after for advice, counsel and support  
● Mentor and have mentored and developed Chief Financial Officers (CFO) now working elsewhere |
| | 4 | ● Ensure finance staff are involved with external industry and professional organizations, encouraging leadership and staff development  
● Meet regularly with and coach staff toward improved performance and career development |
| | 3 | ● Maintain favorable staff culture and workplace  
● Ensure staff members are well trained and execute all functions timely and accurately  
● Establish good partnerships with departments throughout the health center |
| | 2 | ● Able to articulate the mission of the health center and the role of the finance team in assuring services are available to those in need  
● Encourage team members to engage frequently in training and seek out supervision when needed |
| | 1 | ● Learning rules and regulations associated with the industry  
● Focus on major daily staff management activities; seek advice for complex situations |
## HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

### BUSINESS SKILLS & KNOWLEDGE: HUMAN RESOURCES MANAGEMENT

(continued)

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<tbody>
<tr>
<td>3. Mentor key members of the finance team to build strong leaders for the future (includes succession planning).</td>
<td></td>
<td>- Have developed senior leaders to function with relatively high degree of autonomy; potential Chief Financial Officer (CFO) successor(s) are identified</td>
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<td></td>
<td>5</td>
<td>- Capable and/or ready for broader role in health center [for example, Chief Operating Officer (COO)]</td>
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<td>- Able to engage senior finance staff members as Chief Financial Officer (CFO) proxy in other department meetings, Board meetings, and developing influence within the health center</td>
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<td></td>
<td></td>
<td>- Sought after by other Chief Financial Officers (CFO) within the industry for advice and counsel</td>
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<td></td>
<td>- Skilled at delivering feedback to staff, challenge key staff members to accept more challenging assignments</td>
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<td>4</td>
<td>- Advocate for key staff members to engage in organizational wide task forces, broadening their scope and depth of knowledge and relationships in other parts of the health center</td>
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<td></td>
<td>- Skilled at hiring and developing a competent team of professionals requiring minimal supervision and instruction</td>
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<td>3</td>
<td>- Promote the ongoing development of more experienced staff by providing opportunities to participate in or lead special projects</td>
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<td></td>
<td>- Prefer hands on management, frequently engaged in close supervision and training of newer staff members</td>
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<td>2</td>
<td>- Able to delegate responsibilities well</td>
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<td></td>
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<td>- Viewed as “teacher” as much as a “supervisor”</td>
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<td></td>
<td>1</td>
<td>- Learning basic principles of management and supervision of others</td>
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<td>- Learning about delegating tasks and accountability and avoiding micromanagement of others</td>
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## HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

### BUSINESS SKILLS & KNOWLEDGE: HUMAN RESOURCES MANAGEMENT (continued)

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<tbody>
<tr>
<td>4. Model and create a work environment where staff members demonstrate</td>
<td>5</td>
<td>- Experience limited difficulty hiring from the outside due to a highly regarded reputation for professionalism and growth opportunities</td>
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<tr>
<td>unconditional respect, collaboration and kindness within the finance</td>
<td></td>
<td>- Experience low unintended turnover, high comradery, recognized for community and extracurricular involvement by the team</td>
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<td>department and health center (includes all staff, Board of Directors,</td>
<td>4</td>
<td>- Comfortable with key staff members engaging with departments throughout the health center to help create solutions, solve problems, offer advice and counsel</td>
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<td>patients, families and community residents).</td>
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<tr>
<td>5. Model and coach team members to develop self-awareness, knowledge,</td>
<td></td>
<td>- Manage minor to moderate employee relations issues independently</td>
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<td>sensitivity, respect and openness to cultural differences.</td>
<td>4</td>
<td>- Use appropriate decision-making to involve Human Resources when needed</td>
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<td></td>
<td>3</td>
<td>- Learning strategies to develop and maintain employee satisfaction</td>
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<td></td>
<td>2</td>
<td>- Developing cooperative and collaborative work environment that includes a diverse population of staff members</td>
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<td>1</td>
<td>- Proactively work with Human Resources (HR) and outside resources to train and maintain awareness for sensitivities and cultural competence</td>
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<td>- Becoming aware of interpersonal issues arising from cultural differences among the team members</td>
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<td>- Learning to recognize the presence and impact of various staff alliances and informal leadership and authority</td>
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### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: HUMAN RESOURCES MANAGEMENT (continued)**

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<tr>
<th>SKILLS/TASKS</th>
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<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 6. Facilitate self and team knowledge and utilization of Emotional Intelligence concepts and strategies to improve interpersonal communications and effectiveness. | 5 | ● Recognized as a trusted leader and counsel within and among the Board, leadership team, and among policy setters within the industry  
● Affect change, manage differences, influence strategy and direction for the industry as well as the health center |
| | 4 | ● Effective at managing change, resolving conflicts, minimizing chaos and drama in both the department and the health center at large |
| | 3 | ● Able to effectively communicate changes and efficiently influence the health center with compliance to changes and/or other process requirements  
● Moderately successful at affecting and communicating change |
| | 2 | ● May prefer utilization of expedient/impersonal forms of communication (e.g., email, text messaging) over more time-consuming interpersonal communication modes  
● Proactively seek solutions to lower costs, improve efficiencies in all areas of the business  
● Skillfully determine functions to outsource vs. insource based upon cost effectiveness and performance |
| | 1 | ● Learning how to gain attention and priority of others to operational and process related changes  
● Learning how finance and administration in health centers influences organizational transformation  
● Learning required metrics, reporting requirements, and beginning to align staff resources to best achieve departmental results |
| 7. Lead the finance team with a transformational mindset, effectively manage change and engage the team. | 5 | ● Demonstrate the ability to research, develop, and implement health center-wide improvements and efficiencies  
● Integrate departmental systems, reduce capital investments in technology hardware  
● Oversee data management processes that result in quick and efficient measurement and reporting on organizational outcomes  
● Lead the charge for new business development, mergers/acquisitions and advanced decision support |
| | 4 | ● Proactively seek solutions to lower costs, improve efficiencies in all areas of the business  
● Skillfully determine functions to outsource vs. insource based upon cost effectiveness and performance |
| | 3 | ● Consistently find ways to streamline processes and procedures within the functions under management  
● Engage team members in researching and improving new systems and tools |
| | 2 | ● Proficient with current systems and processes  
● Effectively manages staff/contractor/vendors to ensure all functions under management perform at a satisfactory level |
| | 1 | ● Learning how finance and administration in health centers influences organizational transformation  
● Learning required metrics, reporting requirements, and beginning to align staff resources to best achieve departmental results |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### BUSINESS SKILLS & KNOWLEDGE: HUMAN RESOURCES MANAGEMENT (continued)

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</table>
| 8. Model and facilitate finance team understanding and implementation of appropriate self-care/ work-life balance (for example, demonstrate knowledge of the causes and effects of the lack of self-care, identify instances of lack of successful self-care, offer effective self-care improvement and maintenance strategies, etc.). | **5** | - Lead a highly functioning finance and administrative organization  
- Spend significant time with local, national organizations and associations, growing in knowledge, network, and community leadership  
- Actively ‘walk the talk’ related to wellness, physical health and work-life balance |
| | **4** | - Engage in substantive professional and personal development efforts  
- Allow for and encourage completion of advanced degrees and/or certifications of team members  
- Promote and encourage wellness, provide access and time for physical health and fitness |
| | **3** | - Manage a department that works traditional and consistent work weeks.  
- Model good work-life balance and encourage healthy communication and mutual support among team members  
- Ensure that everyone in the department benefits from scheduled and enjoyable use of their paid time off benefits, and shares learnings from outside development workshops with the team |
| | **2** | - Developing an understanding of how daily, cyclical and unexpected work tasks impact work-life balance  
- Beginning to establish priorities and manage time to successfully complete the most impactful tasks/goals  
- Ensure all staff members receive training and support related to time management principles and are afforded time away for professional development |
| | **1** | - Learning how to manage personal time and department functions in efficient and fluid manner  
- Learning importance of taking time away from work and beginning to encourage team member to do the same  
- Learning to recognize how stress in the workplace impacts employee performance and long-term satisfaction |
H. BUSINESS SKILLS & KNOWLEDGE: STRATEGIC PLANNING & MARKETING

Strategically assessing and evaluating courses of action and identifying imaginative opportunities to improve performance and position, implementing innovative and cost-effective solutions leading to effective change management and business process improvement.

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</table>
| 1. Demonstrate business acumen and creativity in strategic finance and budget planning. | 5     | • Integrate budget and cash flow solutions that are accessible, on demand, to a wide audience, e.g., department directors, board members, external auditors, etc.  
• Engage health center leaders to articulate budget variances in their department/clinic; provide the data and challenge them to use their knowledge about their span of control to articulate trends and variances |
|                                                                            | 4     | • Integrate strategic framework into budget planning  
• Forecast utilization of cash and communicate variances to key stakeholders on a consistent basis  
• Implement software solutions or technological efficiencies that compare actual results to budget without using excel formulas and manual manipulation of data |
|                                                                            | 3     | • Communicate individuals’ roles and responsibilities for the proper planning, implementation and management of budgets against results throughout the health center  
• Engage in regular analysis of actual results to budget  
• Publish key performance indicators that compare actual results to budget, i.e., revenue/visit, days cash on hand, operating margin, etc. |
|                                                                            | 2     | • Actively seek out and engage in learning opportunities concerning budgeting trends and strategies  
• Build a budget roadmap; identify needs by department, funding source, clinic, etc.  
• Project patient service revenue based on expected visits and care teams |
|                                                                            | 1     | • Explore training opportunities  
• Collaborate with internal partners to understand their budget needs |
2. Identify and evaluate a range of strategic options for funding operations and capital development, enabling and executing the strategic plan.

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<tr>
<th>LEVEL</th>
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</table>
| 5     | ● Demonstrate a deep understanding of the health center’s strategic vision and proactively engage in driving results at local, state and national levels  
       | ● Collaborate with health center leaders to engage customer segments, expand access to health care, and articulate outcomes |
| 4     | ● Continually seek out opportunities to expand the health center’s strategic plan to meet the health care needs of the community  
       | ● Articulate opportunities and threats, keep abreast of funding opportunities as they arise  
       | ● Stay abreast of environmental trends that impact health care services |
| 3     | ● Engage with internal leaders to discuss the health center strengths, weaknesses, opportunities, and threats; explore ways to expand patient access by leveraging those strengths  
       | ● Define customer segments |
| 2     | ● Aware of local competitors and community health care needs |
| 1     | ● Learning about the health center’s strategic plan and processes  
       | ● Explore training opportunities |
HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES
BUSINESS SKILLS & KNOWLEDGE: STRATEGIC PLANNING & MARKETING  (continued)

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<tr>
<th>SKILLS/TASKS</th>
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</table>
| 3. Adopt and apply innovative methods and technologies to implement strategy and manage change. | 5 | - Advocate for innovative and readily available best practice training programs at the local and national level; focus on technological efficiencies, data informed decision making, and real-life case studies that exemplify how health centers rely on technology to drive favorable financial results  
- Challenge the status quo of financial systems; engage in discussions with health center leaders about operational efficiencies, technical evolution and paperless processes |
| | 4 | - Automate financial reports, dashboards, etc., and reduce manual data manipulation  
- Create a culture of fast and easy access to health center data and financial reports, advocate for paperless systems, cloud managed data, and access on demand for key stakeholders |
| | 3 | - Implement systems that improve access to data  
- Continually seek out operational efficiencies, network with peers to learn about their best practices and implement innovative solutions where applicable  
- Strive to maintain both a big-picture and detailed systems orientation. |
| | 2 | - Understand that increased investment in software solutions can reduce employee workload and allow for employees to work at the top of their skill set  
- Learn where inefficiencies exist, collaborate with internal leaders to understand areas of dissatisfaction and barriers to accessing health center data and financial reports |
| | 1 | - Explore health center trends and learn where opportunities for effectual change exist |
### Skills/Tasks

4. Contribute relevant healthcare environment trends, threats, risks & opportunities to developing and existing projects/ventures.

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<th>Level</th>
<th>Behavioral Examples</th>
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</table>
| 5     | ● Actively engage in local, state, or national groups to discuss healthcare trends, opportunities and threats  
       | ● Collaborate with internal health center leaders to develop projects that favorably impact health outcomes based on opportunities and healthcare environment trends |
| 4     | ● Articulate healthcare trends, opportunities and threats  
       | ● Actively participate in internal discussions related to healthcare environment and the impact health centers can have on health outcomes |
| 3     | ● Identify current healthcare trends, opportunities and threats  
       | ● Explore the potential financial impact of implementing health center programs or projects |
| 2     | ● Understand the health center’s strategic plan and current projects  
       | ● Seek training opportunities or join a local, state, national advocacy group to learn about the healthcare environment and stay abreast of new and changing trends |
| 1     | ● Explore health center trends and learn where healthcare opportunities and threats exist |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### I. BUSINESS SKILLS & KNOWLEDGE: INFORMATION MANAGEMENT

Using secure technology to ensure that health information is confidential, available when and where it is needed and contributes to safer, higher quality, more coordinated, more efficient and less costly care for everyone; health information technology. **Note:** The skills/tasks and behaviors indicated below are especially appropriate for Chief Financial Officers (CFO) to whom Information Technology (IT) reports. In situations where IT does not report to the CFO, select only the Skills/Tasks and Behaviors that are relevant for competency assessment.

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</table>
| 1. In collaboration with the Information Technology (IT) department, lead Health Information Technology (HIT) and financial management systems development/selection & implementation for accounting, billing, payroll & compensation, reporting and decision support. | **5** | ● Lead successful evaluation, selection and implementation of enterprise systems [Electronic Health Record (EHR), Practice Management (PM), Human Resources (HR), Accounting], using personal experience  
● Keep abreast of technological developments such as ‘Software as a Service’ (SaaS), ‘Platform as a Service’ (PaaS), ‘Desktop as a Service’ (DaaS) and all other forms of ‘Cloud Computing’ to evaluate the potential gains of system replacement, upgrade or supplementation  
● Lead information systems strategic planning and effectively manage Chief Executive Team (C-Suite) expectations  
● Recognized as a thought leader and mentor for health data management and groom protégés for career advancement opportunities |
|                                                                            | **4** | ● Contribute to successful major system upgrades and conversions to electronic systems utilizing industry standard best practices and/or through lessons learned and key strategies from prior experience  
● Delegate day to day system management to deputies, who rarely need supervision on basic tasks  
● Monitor national trends in Health Information Technology (HIT), and lead Chief Executive Team (C-Suite) and Information Technology (IT) team in strategic and operational planning (for example, which systems to adopt and when to upgrade, and planning next steps)  
● Maintain awareness of innovative, cost-effective third-party systems and technologies for the financial aspects of managing human resources, information security and employee access to personal records |
|                                                                            | **3** | ● Build competence within the Information Technology (IT) department to understand existing and alternative technologies and implement upgrade plans  
● Know when to consult external/third party experts in identifying best practices and strategies for Health Information Technology (HIT) management |
|                                                                            | **2** | ● Understand the strengths and weakness of major Health Information Technology (HIT) systems |
|                                                                            | **1** | ● Gaining familiarity with Health Information Technology (HIT) systems |
## HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

### BUSINESS SKILLS & KNOWLEDGE: INFORMATION MANAGEMENT (continued)

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</table>
| 2. Ensure interoperability between/among technologies, in order to optimize financial results. | 5 | ● Maintain close working relationship with consumers of and contributors to the health center’s data, including Health Information Exchanges; national and regional research initiatives, Health Center Control Networks (HCCN) providers of data analytics, and payor organizations  
   ● Establish enterprise systems capable of collecting, integrating and analyzing data from multiple sources and generating reports for efficient and effective management of the health center internal and external reporting  
   ● Direct Information Technology (IT) team use of integration engine and other tools to transform health data to ease system interoperability  
   ● Implement and maintain systems to flag data discrepancies or disconnects between Practice Management (PM) and Electronic Health Record (EHR) systems  
   ● Anticipate how Value-Based Care or other Federal/State initiatives will impact utilization of the Electronic Health Record (EHR), Practice Management (PM) and data exchange systems, and respond proactively |
| | 4 | ● Establish automated processes for Practice Management System (PMS) and Electronic Health Record (EHR) interoperability and communication with external systems  
   ● Ensure Information Technology (IT)/Reporting staff can generate reports combining data from two or more enterprise systems |
| | 3 | ● Define priority list for interoperability goals for the health center  
   ● Manage Information Technology (IT) staff to begin creating data exchange between existing systems |
<p>| | 2 | ● Articulate comprehensive understanding of existing communications (or lack thereof) between major systems |
| | 1 | ● Learning the interdependencies of major Information Technology (IT) systems |</p>
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</table>
| 5     | ● Maintain awareness of the reputations, stability, financial condition and general feature set of major providers of Electronic Health Records (EHR), Electronic Medical Records (EMR), Practice Management Software (PMS), Personal Health Records (PHR), and care management systems in general  
      ● Establish bi-directional data flow with Health Information Exchanges (HIE) and major Payers (includes patient metrics)  
      ● Implement systems and applications to identify early-stage problems in mission critical data, and initiate remediation before problems escalate |
| 4     | ● Implement top of the line enterprise systems for Electronic Medical Record (EMR), Practice Management Software (PMS), Human Resources (HR), Anti-Malware, Perimeter Security, Data exchange, Accounting  
      ● Accomplish upgrades with minimum system downtime and disruption and lead Information Technology team to conduct post-mortems on all system failures |
| 3     | ● Put plans in place to remedy deficits and install missing systems  
      ● Establish reliable Information Technology (IT) systems, experiencing few outages and crises |
| 2     | ● Identify deficits where they exist in enterprise systems  
      ● Learning lessons from Information Technology (IT) crises and outages |
| 1     | ● Studying enterprise systems [Electronic Medical Record (EMR), Electronic Health Record (EHR), Practice Management Software (PMS), Accounting, Reporting, Human Resources (HR), issue tracking, etc.] to gain familiarity with features and issues and current support arrangements |

3. Know and appropriately utilize Electronic Health Records (EHR), Electronic Medical Records (EMR), Personal Health Records (PHR), Practice Management Software (PMS) and other technologies as appropriate for financial operations and reimbursement.
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: INFORMATION MANAGEMENT**

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</table>
| 4. Ensure that Information Technology (IT) infrastructure and staffing optimally support health center operations from a financial perspective. | 5 | - Collaborate with health center Information Technology (IT) leaders to establish a comprehensive mission for HIT that includes maintaining high-level system security [for example, 3rd party audits, penetration (PEN) testing, failover, and disaster recovery], preservation of core institutional knowledge [for example, accomplish staff transitions without knowledge loss] and a 3-Vision plan for the IT infrastructure [includes: Network, Storage (hardware) and Computing (Software)]
  - Encourage key Finance and Information Technology (IT) staff to play roles in national meetings and collaborative health and finance information management initiatives with other organizations
  - Develop and manage Finance and Information Technology (IT) teams capable of making three to five-year strategic health center Information Technology (IT) projections, create plans to achieve the objectives, and deliver on time
  - Oversee system self-monitoring, upgrades, outages and status communications with users to minimize downtime, confusion and inconvenience |
|  | 4 | - Ensure core systems function at desired levels
  - Ensure backup systems run to on-site and off-site locations, and are regularly tested
  - Assure implementation of security measures, including annual 3rd party audits, penetration (PEN) tests, and the issues identified are swiftly resolved |
|  | 3 | - Create remediation plans for staffing and system deficits
  - Manage routine issues internally with IT team
  - Ensure backup systems operate in a timely manner for all enterprise systems
  - Ensure Information Technology (IT) operations are effectively managed by IT director
  - Ensure inter-site data links are stable and speeds of document retrieval are satisfactory |
|  | 2 | - Assess strengths and weaknesses of Information Technology (IT) team and of core IT systems (see learning)
  - Understand job skills necessary for each level of Information Technology (IT) support personnel
  - Understand the gist of issues in Information Technology (IT) discussions, and gauge the impact of failures in different systems |
|  | 1 | - Meet regularly with Information Technology (IT) team to learn its current practices and work rhythm
  - Review Information Technology (IT) staff qualifications and pay scale and industry norms
  - Acquiring basic understanding of Local Area Network (LAN), Wide Area Network (WAN), Firewall, anti-malware, backup and issue reporting systems |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: INFORMATION MANAGEMENT**

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<th>BEHAVIORAL EXAMPLES</th>
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<tr>
<td>5. Demonstrate understanding of and ability to effectively manage and utilize necessary office technologies and software (communications, array/analysis, presentation, etc.)</td>
<td>5</td>
<td>● Evaluate and integrate advances in software and systems and accessibility to improve communications and management throughout the health center</td>
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<td>4</td>
<td>● Demonstrate and model high level understanding and facility with utilization of technologies designed for remote team engagement, document sharing and editing and general communications</td>
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<td>● Utilize Industry leading applications like Microsoft Office Suite of software (e.g., Word, Excel, PowerPoint, etc.), MS Teams, Google’s G-Suite (e.g., Docs, Forms, Drive, etc.), Adobe Suite, etc. to communicate accurately, concisely, persuasively and at the level of understanding of the intended audience</td>
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<td>3</td>
<td>● Model fluid and appropriate utilization of communications and business software, utilization of document security/protection features and exemplar adherence to organization policies concerning the same (e.g., PDF, password protections, etc.)</td>
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<td>● Exercise appropriate choices of communication medium – phone, email, text, memo, Excel, PowerPoint – that is consistently appropriate to the issue</td>
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<td>● Utilize features available in online meeting platforms (e.g., Zoom, MS Teams, WebEx, etc.) to conduct and manage meetings efficiently and increase engagement</td>
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<td>● Motivate direct reports and ensure that they are working toward a minimum of competent skill level for utilization of software and communications including Word, Excel, PowerPoint, online meetings and document sharing and editing, etc.</td>
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<td></td>
<td>2</td>
<td>● Demonstrate a fundamental level of understanding and appropriate utilization of communications technologies and software</td>
</tr>
<tr>
<td></td>
<td></td>
<td>● Understands how to secure technical support when needed</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>● Engage in improving technology-based communication skills on a continual basis</td>
</tr>
<tr>
<td></td>
<td></td>
<td>● Seek coaching on technology-based communication, presentation, analysis and reporting skills; utilize newly learned skills immediately and seek out feedback on results</td>
</tr>
</tbody>
</table>
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**J. BUSINESS SKILLS AND KNOWLEDGE: RISK MANAGEMENT**

Designing and implementing policies and systematic internal audit and control processes to assess, manage and mitigate threats to the health center's financial and business viability.

**SKILLS/TASKS**

<table>
<thead>
<tr>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Lead finance and accounting-related risk management activities and Enterprise Risk Management (ERM) program.</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td>- Known as a subject matter expert regarding risk management and mitigation strategies</td>
<td></td>
</tr>
<tr>
<td>- Work with regulatory agencies to identify and inform policy and legislation</td>
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<tr>
<td>- Create and effectively shape risk management workshops and trainings for health centers</td>
<td></td>
</tr>
<tr>
<td>- Have in depth knowledge of finance and accounting risks related to the health center and health care industries, and thorough understanding of risk mitigation strategies for these risk events</td>
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</tr>
<tr>
<td>- Understand the regulatory impact of risk-related events</td>
<td></td>
</tr>
<tr>
<td>- Have the ability to identify potential internal risk issues and implement strategies to mitigate the risk</td>
<td></td>
</tr>
<tr>
<td>- Implement basic risk management activities and strategies related to a health center’s current operations</td>
<td></td>
</tr>
<tr>
<td>- Understand the basic concepts of risk management</td>
<td></td>
</tr>
<tr>
<td>- Establish procedures to manage adverse events as they occur</td>
<td></td>
</tr>
</tbody>
</table>

2. Establish and/or measure finance and operating compliance with all internal policies and practices, as well as local, state and federal laws and regulations.

<table>
<thead>
<tr>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Establish/support strong external relationships and knowledge sharing networks with other health centers</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td>- Recommend compliance measure improvements on the local/state/federal level</td>
<td></td>
</tr>
<tr>
<td>- Identify emerging or potential compliance issues and solutions proactively</td>
<td></td>
</tr>
<tr>
<td>- Implement remediation activities to prevent sanctions and negative judgements</td>
<td></td>
</tr>
<tr>
<td>- Implement policies and procedures to meet and maintain compliance at the health center</td>
<td><strong>4</strong></td>
</tr>
<tr>
<td>- Describe the general purpose of compliance regulations in healthcare and its impact on health center operations</td>
<td><strong>3</strong></td>
</tr>
<tr>
<td>- Gather, review and understand current compliance and regulatory issues at the health center</td>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### BUSINESS SKILLS & KNOWLEDGE: RISK MANAGEMENT

#### SKILLS/TASKS

#### LEVEL | BEHAVIORAL EXAMPLES
---|---

3. Ensure finance team successfully adopts ongoing risk management awareness and approaches.

#### LEVEL | BEHAVIORAL EXAMPLES
---|---

<table>
<thead>
<tr>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
</table>
| 5 | ● Recognized as a leader in risk management strategy  
   ● Conduct training and knowledge sharing opportunities with other health centers |
| 4 | ● Ensure staff maintains current knowledge regarding regulatory changes and proactively adjust risk management strategies to identify areas of potential risk |
| 3 | ● Understand risk management concepts and the policies and procedures to remediate risk events  
   ● Ensure staff members have a good understanding of risk management policies and procedures |
| 2 | ● Aware of policies and procedures that address the specific circumstances and operations of the health center |
| 1 | ● Learning policies and procedures regarding risk management activities |


#### LEVEL | BEHAVIORAL EXAMPLES
---|---

<table>
<thead>
<tr>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
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</thead>
</table>
| 5 | ● Have the operational ability to change clinical workflows to leverage data shared by the Managed Care Organizations (MCO) to maximize risk sharing contracts  
   ● Work proactively with Managed Care Organizations (MCO) to design risk sharing opportunities |
| 4 | ● Use historical data and projections to accurately model potential impact of potential risk sharing opportunities to determine whether or not the health center should participate |
| 3 | ● Possess in-depth understanding of the terms in risk management contracts  
   ● Able to internally model and predict directional impact of risk-based contracts |
<p>| 2 | ● Understand risk-based contracts and metrics as related to the health center |
| 1 | ● Understand basic managed care concepts such as risk based contracting and how Accountable Care Organizations (ACO) function |</p>
<table>
<thead>
<tr>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>• Work on a national level in advocacy or lobbying to limit the use of Recovery Audit Contractors (RAC) as a source of revenue for the federal government, limit the use of the program to identify and penalize fraudulent organizations.</td>
</tr>
<tr>
<td>4</td>
<td>• Proactively monitor internal operations to identify the precursors of fraud and prevent the occurrence of Medicaid fraud.</td>
</tr>
<tr>
<td>3</td>
<td>• Establish policies and procedures to identify and report instances of Medicaid fraud.</td>
</tr>
<tr>
<td>2</td>
<td>• Empower staff to identify billing inconsistencies and other issues incurred.</td>
</tr>
</tbody>
</table>
| 1     | • Understand basics of healthcare billing.  
      • Understand fraud and error in billing, and the Medicaid Integrity Program.  

**SKILLS/TASKS**

5. Oversee Medicaid Integrity Program, contractors and recovery audit contractors.
K. BUSINESS SKILLS AND KNOWLEDGE: QUALITY IMPROVEMENT

Designing and implementing policies and systematic processes to manage, measure, analyze and improve organizational performance resulting in greater efficiency, cost-effectiveness and satisfaction.

<table>
<thead>
<tr>
<th>SKILLS/TASKS</th>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
</table>
| 1. Ensure utilization of proven quality tools and techniques to foster continual improvement in financial management (measurement, guidelines analysis, Plan, Do, Study, Act (PDSA) cycles, benchmarking, LEAN Management, etc.) while actively participating (self and finance team) in the health center’s Quality Management program. | 5 | ● Develop persuasive arguments to educate stakeholders, including Board members, of the importance of financial quality benchmarks  
● Creatively integrate utilization of principles of quality management from various schools of thought to affect more comprehensive and impactful planning and implementation  
● Recognized professionally as a leader in financial quality management through speaking, writing, consulting, participation in national task forces/committees and/or contributing to the development of financial quality benchmarks and processes for health centers |
|  | 4 | ● Educate and coach finance team, health center leaders and Board on financial quality benchmarks, analytic skills and quality improvement processes  
● Facilitate the integration of financial with clinical quality indicators and benchmarks in strategic/tactical planning and ongoing quality improvement processes throughout the health center, using proven processes, such as Plan, Do, Study, Act (PDSA), Lean Management, etc.  
● Recognize early when results may be indicative of potential failure to meet goals and proactively engage health center leaders in analyzing the data, identifying the barriers and developing measurable plans to course-correct |
|  | 3 | ● Develop financial quality indicators and goals for the health center that integrate requirements of outside stakeholders  
● Develop tracking, analysis and reporting mechanisms for quality indicators  
● Assemble appropriate team members to determine barriers to meeting quality goals and develop and implement corrective action plans |
|  | 2 | ● Track and identify trends in measurements  
● Describe the root causes of variances between goal and actual performance  
● Develop reporting mechanisms for stakeholders |
|  | 1 | ● Explain the rationale for the selection of the quality indicators in the plan  
● Explain the rationale for tracking indicators to monitor quality of financial operations  
● Participate in collecting, aggregating and analyzing data |
<table>
<thead>
<tr>
<th>SKILLS/TASKS</th>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
</table>
| 2. Ensure regulatory, reimbursement, accreditation (for example, JCAHO) and other quality reporting and compliance requirements are met. | 5     | - Continually evaluate quality indicators, to ensure their relevance to the overall quality of the financial management of the health center  
- Identify and engage all essential stakeholders in developing plans to address deficiencies  
- May serve as a Surveyor for regulatory/accreditation organizations  
- Contribute to the regulatory/reimbursement body of knowledge for finance-related subjects  

|                                                                           | 4     | - Maintain current knowledge of and take action on all Policy Information Notices (PINs) and Program Assistance Letters (PALs)  
- Take a regular and active role in finance-related health center quality and compliance committee activities  
- Review and modify current financial policy and procedures at regular intervals and as needed to maintain compliance  

|                                                                           | 3     | - Review and modify billing, reimbursement and incentive programs for compliance through regular revenue cycle management team review  
- Collaborate with clinicians/providers to ensure appropriate and timely documentation policies and compliance  
- Develop plans for removing barriers to achieving optimal reimbursement and regulatory compliance, such as provider credentialing delays impacting delivery of care and reimbursement  
- Perform in-house audit on financial operations to assure compliance with current regulatory standards and procedures and industry best practices  

|                                                                           | 2     | - Describe on-site review guidelines and processes  
- Review most current Operational Site Visit (OSV) findings and ensure that corrective action plans are successful  
- Perform comparative analysis of current reimbursement to contracted requirements  

|                                                                           | 1     | - Learning about current regulatory guidelines from accrediting agencies and Health Resources and Services Administration (HRSA)  
- Explain the basic revenue cycle management workflow  
- Familiar with the current health center financial policy and procedure manual  

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### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

**BUSINESS SKILLS & KNOWLEDGE: QUALITY IMPROVEMENT** *(continued)*

<table>
<thead>
<tr>
<th>SKILLS/TASKS</th>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
</tr>
</thead>
</table>
| 3. Ensure center compliance with financial aspects of ongoing accreditation and Patient Centered Medical Home (PCMH) recognition. | 5     | - Collaborate with other health centers and Primary Care Associations (PCA) to develop understanding of best practices within a scope of shared parameters  
- Seek participation on user advisory boards for one or more accreditation agencies  |
|                                                                             | 4     | - Discuss accreditation standards and requirements to maintain compliance across all health center payors  |
|                                                                             | 3     | - Ensure alignment with Patient-Centered Medical Home (PCMH) guidelines/regulations on a regular basis (for example, monthly)  
- Develop, implement and monitor effectiveness of tactical plans to address deficiencies with regulations (for example, periodic audits based on current accreditation guidelines)  
- Monitor productivity of Patient-Centered Medical Home (PCMH) model against set performance targets and address unfavorable trends in a timely manner  |
|                                                                             | 2     | - Identify key operational aspects of Patient-Centered Medical Home (PCMH) model  
- Track and monitor financial aspects of Patient-Centered Medical Home (PCMH) as directed  |
|                                                                             | 1     | - Describe the general purpose and requirements of Patient-Centered Medical Home (PCMH) model  
- Describe the roles and responsibilities of the main clinical stakeholders in Patient-Centered Medical Home (PCMH) model  
- Describe the role and responsibilities of finance at different process decision points within the flow of care delivery  |
### HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

#### BUSINESS SKILLS & KNOWLEDGE: QUALITY IMPROVEMENT (continued)

<table>
<thead>
<tr>
<th>SKILLS/TASKS</th>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 4. Maintain awareness, consideration and integration of Triple/Quadruple Aim objectives in all quality initiatives [Improving quality of healthcare, patient experience, cost efficiency and provider well-being (“Joy in Work”)]. | **5** | ● Monitor stakeholder expectations, understand and communicate impacts and actively engage/lead initiatives to manage both  
● Clearly define ‘quality’ for patients, staff, payors, and other stakeholders on which the health center is dependent  
● Advocate for the development of an inclusive vision of work-life quality and creatively identify funding for initiatives designed to meet the needs of the staff members  
● Fluently communicate the relationship and alignment of the Quadruple Aim and health center mission and quality goals with internal and external stakeholders |
| | **4** | ● Ensure administrative costs are reasonable and adequate for maintaining a well-functioning, efficient and satisfied workforce  
● Coach and educate health center leaders and finance team on important aspects and practices of the Quadruple aim that impact healthcare operations, finance department and quality of service and care  
● Encourage the identification of creative methods to address the Quadruple Aim in routine finance department and overall health center operations |
| | **3** | ● Describe the true costs of service delivery and utilize conventional and creative methods for increasing value of resources utilized, for example:  
● Monitor and report on staffing matrix for all departments  
● Monitor and report on administrative costs  
● Partner/collaborate with buying groups and/or establish relationships with vendors for best pricing on supplies and services  
● Cost share with other health centers where practical  
● Analyze and communicate the health center financial operations implications of Quadruple Aim initiatives, including cost-benefit  
● Collaborate with stakeholders to collect and analyze information to understand the specific health center barriers/facilitators to the achievement of Quadruple Aim objectives and collaborate with team members to identify and implement solutions |
| | **2** | ● Make recommendations on the roles finance may play in achieving the Quadruple Aim objectives  
● Identify the health center’s unique drivers for each objective  
● Collaborate with peers and other stakeholders to collect and analyze information to facilitate the development of effective plans for Quadruple Aim objectives |
| | **1** | ● Learning how each of the Quadruple Aim objectives drives the realization of an effective healthcare delivery system and about the finance department role in supporting them |
## HEALTH CENTER CHIEF FINANCIAL OFFICER COMPETENCIES

### BUSINESS SKILLS & KNOWLEDGE: QUALITY IMPROVEMENT (continued)

<table>
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<tr>
<th>SKILLS/TASKS</th>
<th>LEVEL</th>
<th>BEHAVIORAL EXAMPLES</th>
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</table>
| 5. Evaluate the finance department structure, policies, processes and organizational impact for continual improvement of the efficiency and effectiveness of the group and provide opportunities for professional growth of individuals. | 5     | - Evaluate and update staff competency indicators based on changes within the industry, new regulations, programs or opportunities  
- Provide opportunities for networking and accessing resources outside of the health center to support professional development of team members  
- Review and revise the policies and procedures (P&P) manual at regular intervals and as directed by regulatory agencies  
- Develop measurable annual goals for each staff member that support the health center as well as personal goals  
- Continuously monitor key financial operations indicators for performance and process improvement (such as cash collections, days in accounts receivable, balance sheet reconciliation, etc.)  
- Stay abreast of all local, state and federal regulations and Policy Information Notices (PIN) and update policies and procedures (P&P)  
- Describe the comprehensive financial management requirements of the health center, identify competencies required of the finance team to meet those requirements and designate positions needed and competency indicators for each role within the department  
- Collaborate with staff to identify training opportunities of interest and of benefit to the health center, including cross training among areas of shared responsibility  
- Evaluate and make continual improvements to department processes and structure to increase efficiency, accuracy and organizational impact of the finance functions  
- Effectively communicate/discuss finance department quality improvement processes, results/impacts on others and review/revise current strategies and goals on a regular basis (for example, Chief Executive Officer (CEO), Board, others)  
- Assure health center adherence to current policy and procedural manual  
- Facilitate effective and efficient intra-departmental workflow and processes  
- Collaborate and cross-train with co-workers on methods of verifying completeness and accuracy of tasks performed  
- Develop procedural and tasks checklists for staff self-evaluation  
- Possess working knowledge of the health center financial policy and procedure manual  
- Develop mentoring relationship with an experienced Federally Qualified Health Center (FQHC) financial executive  
- Explain the interdependence of the roles of finance department team members and those of other departments in the health center (for example, customer service staff) |
# Acronyms/Jargon/Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-Vision</td>
<td>IT Infrastructure consisting of Network, Storage (Hardware) and Computing (Software)</td>
</tr>
<tr>
<td>ACO</td>
<td>Accountable Care Organization</td>
</tr>
<tr>
<td>APM</td>
<td>Alternative Payment Methodology</td>
</tr>
<tr>
<td>A/R</td>
<td>Accounts Receivable</td>
</tr>
<tr>
<td>Bcc</td>
<td>Blind carbon copy or Blind copy</td>
</tr>
<tr>
<td>Cc</td>
<td>Carbon copy or Copy</td>
</tr>
<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
</tr>
<tr>
<td>CFO</td>
<td>Chief Financial Officer</td>
</tr>
<tr>
<td>COO</td>
<td>Chief Operations Officer</td>
</tr>
<tr>
<td>C-Suite</td>
<td>Chief Executive Team</td>
</tr>
<tr>
<td>DaaS</td>
<td>Desktop as a Service</td>
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<tr>
<td>EHB</td>
<td>Electronic Handbook</td>
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<tr>
<td>EHR</td>
<td>Electronic Health Record</td>
</tr>
<tr>
<td>EMR</td>
<td>Electronic Medical Record</td>
</tr>
<tr>
<td>ERM</td>
<td>Enterprise Risk Management</td>
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<tr>
<td>FFR</td>
<td>Federal Finance Report</td>
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<tr>
<td>FQHC</td>
<td>Federally Qualified Health Center</td>
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<tr>
<td>FTCA</td>
<td>Federal Torts Claims Act</td>
</tr>
<tr>
<td>G/L</td>
<td>General Ledger</td>
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<tr>
<td>GAAP</td>
<td>Generally Accepted Accounting Principles</td>
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<tr>
<td>HCCN</td>
<td>Health Center Controlled Networks</td>
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<tr>
<td>HIE</td>
<td>Health Information Exchange</td>
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<tr>
<td>HIMSS</td>
<td>Health Information and Management Systems Society</td>
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<tr>
<td>HIT</td>
<td>Health Information Technology</td>
</tr>
<tr>
<td>HR</td>
<td>Human Resources</td>
</tr>
<tr>
<td>HRSA</td>
<td>Health Resources and Services Administration</td>
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<tr>
<td>IT</td>
<td>Information Technology</td>
</tr>
<tr>
<td>LAN</td>
<td>Local Area Network</td>
</tr>
<tr>
<td>Lean</td>
<td>Lean management processes</td>
</tr>
<tr>
<td>MCO</td>
<td>Managed Care Organization</td>
</tr>
<tr>
<td>Mirth</td>
<td>The Web Reach brand of an open-source healthcare interface engine and interface repository</td>
</tr>
<tr>
<td>NACHC</td>
<td>National Association of Community Health Centers</td>
</tr>
<tr>
<td>OSV</td>
<td>Operational Site Visit</td>
</tr>
<tr>
<td>P&amp;P</td>
<td>Policies &amp; Procedures</td>
</tr>
<tr>
<td>PaaS</td>
<td>Platform as a Service</td>
</tr>
<tr>
<td>PAL</td>
<td>Program Assistance Letter</td>
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<tr>
<td>PCA</td>
<td>Primary Care Association</td>
</tr>
<tr>
<td>PCMH</td>
<td>Patient-Centered Medical Home</td>
</tr>
<tr>
<td>PDSA</td>
<td>Plan, Do, Study, Act method of quality improvement</td>
</tr>
<tr>
<td>PEN</td>
<td>Penetration audit (for information technology security)</td>
</tr>
<tr>
<td>PHR</td>
<td>Personal Health Records</td>
</tr>
<tr>
<td>PIN</td>
<td>Policy Information Notice</td>
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<tr>
<td>PMS</td>
<td>Practice Management Software</td>
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<tr>
<td>PPS</td>
<td>Prospective Payment System</td>
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<tr>
<td>RAC</td>
<td>Recovery Audit Contractor</td>
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<tr>
<td>RCM</td>
<td>Revenue Cycle Management</td>
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<tr>
<td>SaaS</td>
<td>Software as a Service</td>
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<tr>
<td>SMS</td>
<td>Short Message Service (texting)</td>
</tr>
<tr>
<td>WAN</td>
<td>Wide Area Network</td>
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</tbody>
</table>
ACHE Healthcare Executive 2021
Competencies Tool Modifications for Health Center CFOs

The following adaptations were made to the structure of the ACHE tool to enhance application for health center CFOs:

Knowledge of the Healthcare Environment
Knowledge of the Healthcare Environment is defined as the understanding of the healthcare system and the environment in which healthcare managers and providers function. These skills and tasks are integrated as applied skills throughout the domains to reflect more accurately the functional roles of the health center CFO.

Business Skills & Knowledge

■ General Management
General Management skills and tasks are integrated as applied skills throughout the domains to reflect more accurately the functional roles of the health center CFO.

■ Financial Management
Three (3) Financial Management tasks/skills central to the role of health center CFOs are identified as representative of this category and are presented as domains: Accounting and Finance Operations; Grants Management and Revenue Cycle and Reimbursement.

■ Organizational Dynamics and Governance
Elements of this skill/task are integrated into the Communication and Relationship Management and Leadership domains to reflect more accurately the functional roles of the health center CFO.

■ Patient Safety
Elements of this skill/task are integrated into the Leadership, Stakeholder Advocacy, and Risk Management domains rather than as a discrete category to reflect more accurately the functional roles of the health center CFO.