

Exploration of Internet⁺ Financial Reimbursement Management Mode of Smart Hospital

Xingyue Qian

Shaanxi Provincial People's Hospital, Shaanxi 710068, China.

Abstract: Based on the background of smart hospital construction, this paper analyzes the process and problems of traditional financial reimbursement mode, explores the Internet⁺ financial reimbursement management mode, designs the process and practices the application, in order to realize smart finance, promote the integration of industry and finance, and help promote the high-quality development of public hospitals.

Keywords: Smart Hospital; Internet⁺; Financial Reimbursement

Introduction

In June 2021, the State Council issued "Opinions on Promoting the High-Quality Development of Public Hospitals" to make deployments on the new effectiveness of public hospital development. The Opinions point out that public hospitals are the main body of China's medical service system, and at present, there is an urgent need for public hospitals' medical, teaching, scientific research and other business systems and resource systems such as human, financial and material resources to break barriers and use the Internet to achieve resource sharing. Financial management, as the basis of hospital economic management activities, should make use of the Internet⁺ model and hospital industry financial integration thinking to promote the management of the way from the brutal type to refinement.

1. Status of traditional financial reimbursement

1.1 Reimbursement process

Under the traditional financial reimbursement mode, the accountant of the department receives a paper version of the reimbursement form or loan application form at the Finance Office, prepares the corresponding attachments according to the Financial Reimbursement Guide, and submits them to the auditing accountant of the Finance Office for review and approval, the person in charge of finance and the dean in charge of finance, and the dean for signature after transferring to the cashier for reimbursement in accordance with the approval process in turn.

2. Problems

2.1 The reimbursement process is cumbersome, and the return rate and return rate are high

Under the traditional financial reimbursement mode, the departmental accountant will submit the reimbursement to the auditing accountant of the Finance Department for review and approval after being reviewed and signed by the department director and the hospital leader in charge, and the auditing accountant will return the reimbursement to the accountant if he finds any problem.

2.2 Restricted reimbursement time and place

In the medical industry, the working hours are special, and the reimburses have to work 24-hour shifts, for example, after the night shift, they still have to make reimbursement according to the financial working hours. In addition, under the traditional financial reimbursement mode, due to the different office locations and time schedules of the person in charge of approval at all levels, the account preparer has to make repeated trips to review and sign.

2.3 Systems are independent and information is difficult to share

Under the traditional financial reimbursement mode, the departmental accounts need to fill in the budget items and amounts manually, and the auditing accountant needs to check the project accounts to see if there is any budget left to be executed, so there is a disconnection between fund management and budget management. The departments need to check the asset account and the balance of the budget items at the finance office. The asset card account and the financial account are recorded and reconciled separately every month, and the assets are disposed of in separate accounts. Although individual hospitals realize OA reporting, they do not share information with the financial system, and the phenomenon of information silo is prominent, and the cost of information acquisition is high.

2.4 Not conducive to epidemic prevention and control

Under the traditional financial reimbursement model, account preparers and auditing accountants need to communicate and coordinate face-to-face, and the reimbursement presents aggregation and contact, which is not conducive to the requirements of epidemic prevention and control in the context of epidemic normalization.

3 Design ideas and key points

3.1 Intelligent hospital Internet + financial reimbursement management mode design ideas

In order to create a full process of Internet + financial reimbursement model, based on the traditional reimbursement process, built-in reimbursement guidelines, online reimbursement, online identification of invoice authenticity, duplicate reimbursement, budget execution control, automatic generation of vouchers, discrepancies and report analysis.^[1]

3.2 Key points of Internet+ financial reimbursement management mode of smart hospital

Firstly, the financial system and all kinds of information guide required for reimbursement business are embedded in the front-end of reimbursement business of HRP system, and the employees enter all kinds of business reimbursement to pass the bills to the corresponding position, and the data can be imported through EXCEL table to reduce the reimbursement return rate and return rate and improve the efficiency of reimbursement. Secondly, the budget management highlights the prior control, and the section fills in the online reimbursement form to select the budget items to be able to realize the real-time response of the budget balance. Thirdly, electronic invoices can be automatically verified for authenticity when uploading attachments, identifying invoice numbers and preventing secondary reimbursement problems.

3.3 Design process

First, sort out the current financial reimbursement mode, original vouchers, reimbursement form filling, approval process, transfer payment method; second, according to the different reimbursement matters classification summary, draw flow chart, set approval link, attachment requirements, budget control; third, the classification of good reimbursement

process, embedded in HRP front-end system, so that workers in the cell phone mobile terminal or computer terminal, at anytime and anywhere to upload documents, automatically check the authenticity and Fourth, the leader in charge confirms the reimbursement form to complete the online approval; Fifth, the reimbursement personnel drop the original bills, the system automatically scans and compares the paper bills, intelligently reviews them, and after the reimbursement person confirms them, automatically encapsulates and packs them; Sixth, the finance personnel accepts the invoices and generates the payment to be done through the audit, and the system transfers them to the cashier and submits the bank transfer Payment; seventh, according to the bank return, automatically generate financial vouchers and budget vouchers. Eighth, generate financial statements and related analysis at the end of the month.

4. The Internet⁺ financial reimbursement management mode application

Hospital S is a third-grade public hospital in Shaanxi Province, which gradually implemented the Internet⁺ financial reimbursement mode in 2020, and now travel expenses, labor expenses and research funds have been fully implemented online.^[2] Taking travel expenses as an example, the online reimbursement process is divided into the following stages.

4.1 Business trip approval

The employee who travels on business fills out the "Travel Approval Form" under the new process finance office, fills in the reason of travel and uploads the notice of meeting or training at the same time, fills in the budget amount according to the standard and submits it, no budget or insufficient budget can not be submitted to achieve prior budget control. The business trip can only be approved by the section director after review and approval by the leader in charge of scientific research or the leader in charge of teaching and the leader in charge of the institute.

4.2 Return to report

After returning from a business trip, the employee fills out the "Travel Expense Reimbursement Form" under the Finance Department, fills in the location and time of the business trip according to the financial reimbursement guidelines, and uploads the relevant bills as attachments.^[3] The system pops up the corresponding accommodation standard, ticket standard, and automatically calculates the meal allowance, city transportation allowance, etc. If the accommodation and round-trip tickets are within the standard, the system will be based on the actual amount of accommodation and tickets incurred; if the actual amount of accommodation and round-trip tickets exceeds the standard, the reimbursement will be based on the standard amount.

4.3 online review and approval.

The employee submits the "travel expense reimbursement form", and the auditing accountant of the financial department audits - the chief of the competent travel expense reimbursement section reviews and approves - the financial director approves, the system link automatically flows to the cashier, the cashier transfers to the employee's bank card according to the amount of reimbursement through the bank enterprise direct link system The accountant generates vouchers according to the bank receipt and carries out account processing.

5. The direction of further improvement

5.1 Strengthen the construction of intelligent hospital information

technology to help the development of financial information technology.

The biggest problem facing the implementation of Internet⁺ finance is network security. With the increasing volume of online reimbursement business, employees will image a large number of bills and other attachments to the intranet system through the external network, and the risk of data security on the intranet of hospital finance rises. Second, with the

construction of multiple hospital areas in public hospitals, the growth of hospital workers, multiple workers in different locations at the same time to log into the system to occur business data, making the server pressure, if information technology hardware and software equipment is not updated in a timely manner to expand capacity, it is easy to cause network paralysis, affecting the daily financial work. Therefore, public hospitals should improve information network security, increase network load, improve quality and speed, and escort for Internet+ finance.

5.2 Improve the standardized management of financial reimbursement and consolidate the foundation of internal control

In accordance with the financial management system of institutions and hospital financial management regulations, establish a standardized management process for financial reimbursement, standardize approval authority, determine the responsibility of each financial position, clarify the standardized process, integrate financial internal control points and risk points into job responsibilities, which is conducive to financial management compliance and efficiency, reduce financial risks, and at the same time effectively improve communication efficiency, reduce rotation, new employees The problems such as unclear boundaries and unclear responsibilities arising from the handover of work.

5.3 Strengthen the construction of talent team and promote the overall development of financial staff.

In the context of smart hospital construction, with the promotion of the integration of Internet+ finance, the knowledge reserve of Internet+ mode for financial personnel is especially important. Financial management is a continuous learning and improvement work, financial staff should continuously improve their professional quality and level through internal and external, online and offline training, seminars and salons to exchange experience sharing, etc., in order to adapt to the changing internal and external environment of financial management, promote the change of management mode to refinement, and help public hospitals develop with high quality by means of strong financial promotion construction.

References

- [1] Zhao Huizhu. "Internet + financial reimbursement" a new model of hospital financial management [J]. Economist,2021(08):104+106.
- [2] Jiao Xiufang, Zhang Haibin. Optimization of digital reimbursement model in large public hospitals[J]. Journal of Liberation Army Hospital Management,2021,28(07): 661-664.
- [3] Zhou Jing. Exploring the "zero-contact" model of college reporting in the post-epidemic era [J]. New Accounting, 2021(03): 22-24.