

ANNEX 4. ANALYTICAL TREE

1. TYPES OF RELATIONSHIPS

1.1. Competitiveness of contract awarding

- 1.1.1. Uninsured
- 1.1.2. Public Health
- 1.1.3. Ambulances
- 1.1.4. ARS
- 1.1.5. Other

1.2. Contract renewal

- 1.2.1. Uninsured
- 1.2.2. Public Health
- 1.2.3. Ambulances
- 1.2.4. ARS
- 1.2.5. Other

1.3. Litigation

- 1.3.1. SOH
- 1.3.2. ARS

2. CONTRACT INCOMPLETENESS

2.1. Uncertainty

- 2.1.1. Variability of prices of hospital inputs
 - 2.1.1.1. Uninsured
 - 2.1.1.2. Public Health
 - 2.1.1.3. Ambulances
 - 2.1.1.4. ARS
 - 2.1.1.5. Other
- 2.1.2. Variability of prices (input-output) of hospital products
 - 2.1.2.1. Uninsured
 - 2.1.2.2. Public Health
 - 2.1.2.3. Ambulances
 - 2.1.2.4. ARS
 - 2.1.2.5. Other
- 2.1.3. Variability of quantity demanded
 - 2.1.3.1. In capitation contracts
 - 2.1.3.2. In DRG-type contracts
 - 2.1.3.3. Ambulances
 - 2.1.3.4. Public Health

2.2. Complexity of contracted products

- 2.2.1. Technical skills required to perform products
- 2.2.2. Difficulty to clearly define the products
 - 2.2.2.1. Boundaries of benefit packages
 - 2.2.2.1.1. POS-S vs non POS-S
 - 2.2.2.1.2. Public Health
 - 2.2.2.2. Boundaries of DRG-type categories
 - 2.2.2.3. Effects of definitions of boundaries
- 2.2.3. Quality of provided services
 - 2.2.3.1. Concern for quality on the side of the provider
 - 2.2.3.1.1. Uninsured
 - 2.2.3.1.2. Public Health
 - 2.2.3.1.3. Ambulances
 - 2.2.3.1.4. ARS
 - 2.2.3.2. Observability and verifiability of quality

2.3. Costs of contracting

- 2.3.1. Design and negotiation
 - 2.3.1.1. Uninsured
 - 2.3.1.2. Public Health
 - 2.3.1.3. Ambulances
 - 2.3.1.4. ARS
 - 2.3.1.5. Others
- 2.3.2. Monitoring and follow-up
 - 2.3.2.1. Audits
 - 2.3.2.1.1. Uninsured
 - 2.3.2.1.2. Public Health
 - 2.3.2.1.3. Ambulances
 - 2.3.2.1.4. ARS
 - 2.3.2.1.5. Others
 - 2.3.2.2. Resolution of disputes
 - 2.3.2.2.1. Uninsured
 - 2.3.2.2.2. Public Health
 - 2.3.2.2.3. Ambulances
 - 2.3.2.2.4. ARS
 - 2.3.2.3. Billing processes
 - 2.3.2.3.1. Uninsured
 - 2.3.2.3.2. Public Health
 - 2.3.2.3.3. Ambulances
 - 2.3.2.3.4. ARS
 - 2.3.2.3.5. Others
- 2.3.3. Enforcement
 - 2.3.3.1. SOH
 - 2.3.3.2. ARS
- 2.3.4. Cooperation
 - 2.3.4.1. SOH
 - 2.3.4.2. ARS

2.4. Overall perception of completeness

- 2.4.1. Uninsured
- 2.4.2. Public Health
- 2.4.3. Ambulances
- 2.4.4. ARS
- 2.4.5. Other

3. ASSET SPECIFICITY

3.1. Site, physical, dedicated, human, time

- 3.1.1. Uninsured
- 3.1.2. Public Health
- 3.1.3. Ambulances
- 3.1.4. ARS
- 3.1.5. Others

3.2. Dedicated capacity

- 3.2.1. SOH
- 3.2.2. ARS

3.3. Investment in capitated population

- 3.3.1. Risk of hold-up
- 3.3.2. Optimal investment vs conservative approaches
- 3.3.3. Uninsured

4. INFLUENCE ACTIVITIES

4.1. SOH and coexistence of hierarchical relations

- 4.1.1. Share of budget as a source of power

- 4.1.2. How the SOH influences agenda
 - 4.1.2.1. Budget design and contracts
 - 4.1.2.1.1. Design and execution of budget
 - 4.1.2.1.2. Contracting selected services
 - 4.1.2.1.3. Payment mechanisms
 - 4.1.2.2. Regulatory (tutelar) function
 - 4.1.2.2.1. Nature of regulatory function
 - 4.1.2.2.1.1. Public health
 - 4.1.2.2.1.2. Licensing
 - 4.1.2.2.1.3. Network coordination
 - 4.1.2.2.2. Regulatory activities (meetings, memos etc)
 - 4.1.2.3. Board of directors
 - 4.1.2.4. Performance agreements
 - 4.1.2.5. Informal mechanisms
 - 4.1.2.5.1. Peer pressure
 - 4.1.2.5.2. Preferential treatment
 - 4.1.2.5.3. Direct pressure from SOH
- 4.1.3. Effect of SOH influence on manager's agenda
- 4.1.4. Manager's strategies to deal with SOH influence

4.2. Labor unions

- 4.2.1. Types of influence of LU
- 4.2.2. Effect of LU on manager's agenda
- 4.2.3. Manager's strategies to deal with LU influence

4.3. Politicians

- 4.3.1. Local
 - 4.3.1.1. Types of influence of LP
 - 4.3.1.2. Effect of LP on manager's agenda
 - 4.3.1.3. Manager's strategies to deal with LP influence
- 4.3.2. Higher level

4.4. Community

- 4.4.1. Types of influence of Community
- 4.4.2. Effect of Community on manager's agenda
- 4.4.3. Manager's strategies to deal with Community influence

5. DECISION RIGHTS

5.1. Personnel management

- 5.1.1. Civil service
 - 5.1.1.1. Share of provisional vs. permanent
 - 5.1.1.2. Dynamics and effectiveness of civil service regulations
 - 5.1.1.3. Types of incentives and its effects on civil servants
- 5.1.2. Fixed-term
 - 5.1.2.1. Share of fixed-term FTEs
 - 5.1.2.2. Autonomy to hire and fire
 - 5.1.2.3. Types of incentives and its effects on fixed-term
 - 5.1.2.4. Autonomy to create and abolish jobs

5.2. Budget

- 5.2.1. Process of budget setting and approval
- 5.2.2. Process of budget execution
- 5.2.3. Control on recurrent vs capital expenses
- 5.2.4. Effects on hospital performance

5.3. Procurement

- 5.3.1. Dynamics of purchasing alliance
- 5.3.2. Autonomy to opt-out
- 5.3.3. Effects of purchasing alliance on hospital performance

5.3.4. Other strategies for smart procurement

5.4. Strategic plan

5.4.1. Autonomy to set competitive strategy

5.4.2. Effects on other hospitals

5.4.3. Reactions by neighbouring hospitals

5.4.4. How the SOH manages the balance of separate strategies

5.4.5. Network coordination

5.5. Purchasing and selling off of fixed assets

5.6. Company law