

Figure 2

Health Information Management Services Summary Dashboard

SAMPLE HIMS Dashboard - System Services Demonstration Purposes Only			
	Industry Standard	THR Standard	YTD
Regulatory Compliance			
Release of Information			
1. Continued Care Request TAT	15 days ¹	7 days	12
2. Insurance Request TAT	15 days ¹	15 days	15
3. Legal Request TAT	15 days ¹	15 days	15
4. STAT Request TAT	N/A	30 mins	29
5. Audit Request TAT	30 days	30 days	24
6. Disability Request TAT	30 days	30 days	29
7. ROI Quality Score	N/A	97%	97.5%
7a. Number of Privacy Breaches by HIMS ROI	N/A	N/A	8
7b. Number of Customer Complaints Received	N/A	N/A	53
Physician Documentation Compliance			
8. Completion rate of History & Physical within 24 hrs	N/A	95%	99.4%
9. Completion rate of H&P Update within 24 hrs	N/A	95%	92.5%
10. Completion of required elements for H&P update			
10a. H&P Reviewed documented	N/A	95%	99.7%
10b. Patient Examined documented	N/A	95%	98.5%
10c. Change/No Change in Patient condition documented	N/A	95%	99.9%
11. Completion rate of Operative Report within 24 hrs	N/A	95%	95.2%
12. Completion rate of Immediate Post-Op Progress Note - Timeliness	N/A	95%	90.7%
13. Completion of required elements for Immediate Post-Op Progress Note			
13a. Pre-operative diagnosis documented	N/A	95%	99.5%
13b. Post-operative diagnosis documented	N/A	95%	99.3%
13c. Name of Surgeon and assistant(s) documented	N/A	95%	99.4%
13d. Procedure documented	N/A	95%	100.0%
13e. Findings documented	N/A	95%	92.6%
13f. Specimen documented	N/A	95%	98.6%
13g. Estimated Blood Loss (EBL) documented	N/A	95%	99.4%
14. Percentage of valid outpatient diagnostic orders prior to treatment	N/A	95%	96.3%
14a. Number of accounts written off due to lack of supporting documentation, reason code 1279	N/A	N/A	48
14b. Dollar Amount of write-off due to lack of supporting documentation, reason code 1279	N/A	N/A	\$ 135,075.00
15. Medical Record Delinquency Rate	50% ²	25%	2.1%
16. Physician Suspensions	N/A	N/A	1948
17. Physician Suspensions Rescinded	N/A	N/A	13
Documentation Compliance			
18. Inpatient Post-discharge Analysis TAT	N/A	2 days	1.58
19. Outpatient Post-discharge Analysis TAT	N/A	2 days	1.70
20. Documentation Compliance Quality Score	N/A	97%	99.5%
Data Integrity			
21. Volume of Duplicates Corrected	N/A	N/A	29125
22. Duplicate MRN Merge TAT	N/A	25 mins	23
23. Duplicate Accounts Correction TAT	N/A	52 mins	46
23a. Number of Administrative Decision Status Changed Accounts ◊	N/A	N/A	901
24. Contact Mover Correction TAT	N/A	4 days	1.4
25. Volume of Duplicates Created	N/A	N/A	5318
25a. Created by PAIC	N/A	N/A	657
25b. Created by PAS	N/A	N/A	3602
25c. Created by Others	N/A	N/A	1058
26. Data Integrity Quality Score - Simple Deletes	N/A	95%	95.2%
Transcription			
27. History and Physicals TAT	8 hours	4 hours	0.94
27a. Psychiatric Evaluation	8 hours	4 hours	1.29
28. Consultations TAT	24 hours	6 hours	1.19
29. Operative Reports TAT	12 hours	8 hours	1.15
30. Discharge Summaries TAT	24 hours	12 hours	1.26
31. Volume (Lines Produced)	N/A	N/A	12,703,077
32. Transcription Quality Score	98%	98%	99.7%
33. Cost Per Line	N/A	\$ 0.09	\$ 0.10
34. Decrease in Traditional Transcription Volume	N/A	15%	12.1%
Records Management			
35. Medical Record Scanning TAT ◊	24 hrs	24 hrs	24
36. Records Management Quality Score ◊	N/A	95.0%	99.3%
37. Number of Document Corrections ◊	N/A	N/A	10858

SAMPLE HIMS Dashboard - System Services Demonstration Purposes Only

	Industry Standard	THR Standard	YTD
Coding			
Coding Productivity (records/hr)			
38. Inpatient	N/A	2.7	2.5
39. Outpatient Surgery / Observation	N/A	7	7
40. Outpatient Diagnostics	N/A	30	29
41. Emergency Room / Recurring	N/A	20	21
Coding Reviews			
42. CVIR			
42a. CVIR Coding TAT (includes clinical dept. resolution)	N/A	6 days	6
43. HAC			
43a. % Agreement between Coding and Quality	80%	80%	75.0%
44. PSI			
44a. % Agreement between Coding and Quality	80%	80%	96.1%
Physician Queries			
45. Number of Coding Queries Submitted	N/A	N/A	14900
46. Physician Response Rate to Coding Queries	85%	85%	97%
47. Physician Agreement Rate to Coding Queries	80%	80%	96%
Coding Denials			
48. Number of Revenue Integrity Code to Charge Edits	N/A	N/A	1155
49. Number of DRG Validation Requests Received	N/A	N/A	1807
50. Number of DRG Validation Requests Completed	N/A	N/A	1714
51. Number of DRG Validation Requests Agreed	N/A	N/A	1277
52. Number of DRG Validation Requests Appealed	N/A	N/A	443
53. Number of Denial Accounts Received	N/A	N/A	23472
54. Total Charges Associated with Denial Accounts Received	N/A	N/A	\$ 473,511,868
55. Number of Denial Accounts Completed	N/A	N/A	23831
56. Total Charges Associated with Denial Accounts Completed	N/A	N/A	\$ 475,105,971
CMI			
57. 2017 MCR CMI	N/A	N/A	1.6815
58. 2018 MCR CMI	N/A	N/A	▲ 1.7432
59. 2018 MCR Cases	N/A	N/A	40,252
60. 2017 CMI - All	N/A	N/A	1.5418
61. 2018 CMI - All	N/A	N/A	▲ 1.5770
62. 2018 Cases - All	N/A	N/A	154,072
HIMS Coding Department Quality Reviews * (Quarterly)			
*63. Inpatient Coder Accuracy Rate	N/A	95%	95%
*64. Outpatient Coder Accuracy Rate	N/A	95%	92%
*64a. Simple Visit Coding Error Rate ◊	N/A	<2%	6%
65. Compliance Risk - Overpayment %	N/A	< 5%	2%
66. Compliance Risk - \$ Overpayment	N/A	N/A	\$ 837,213
67. Business Risk - Underpayment %	N/A	< 5%	1%
68. Business Risk - \$ Underpayment	N/A	N/A	\$ 90,520
THR Coding Compliance Audit (Quarterly) *			
69. Compliance Risk - Overpayment %	< 5%	< 5%	4%
70. Compliance Risk - \$ Overpayment	N/A	N/A	\$ 123,787
71. Business Risk - Underpayment %	< 5%	< 5%	1%
72. Business Risk - \$ Underpayment	N/A	N/A	\$ (50,121)
Financials			
73. Cost per Adjusted Discharge	\$ 78 *	\$ 78	\$ 70.17
Total Operating Revenue			
74. Budget	N/A	N/A	\$ 2,916,336
75. Actual	N/A	N/A	\$ 2,526,373
76. Variance	N/A	N/A	\$ (389,963)
WIP			
77. HIM Billing WIP	N/A	\$ 8,970,752	\$ 11,114,305
78. HIM WIP Goal Met (number of entities)	N/A	12/12	
79. Physician Billing WIP	N/A	\$ 15,534,718	\$ 14,577,396
80. Physician WIP Goal Met (number of entities)	N/A	12/12	
◊ New Metric for 2018 ¹ Texas Administrative Code ² Joint Commission standard ³ PwC 25 percentile			
Legend			
Target Met			
1-5% of Target			
> 6% of Target			
* Legend - THR Coding Compliance Audit Error Rating			
0-5% Error Rate			
6-10% Error Rate			
Over 11% Error Rate			

