Key Indicators
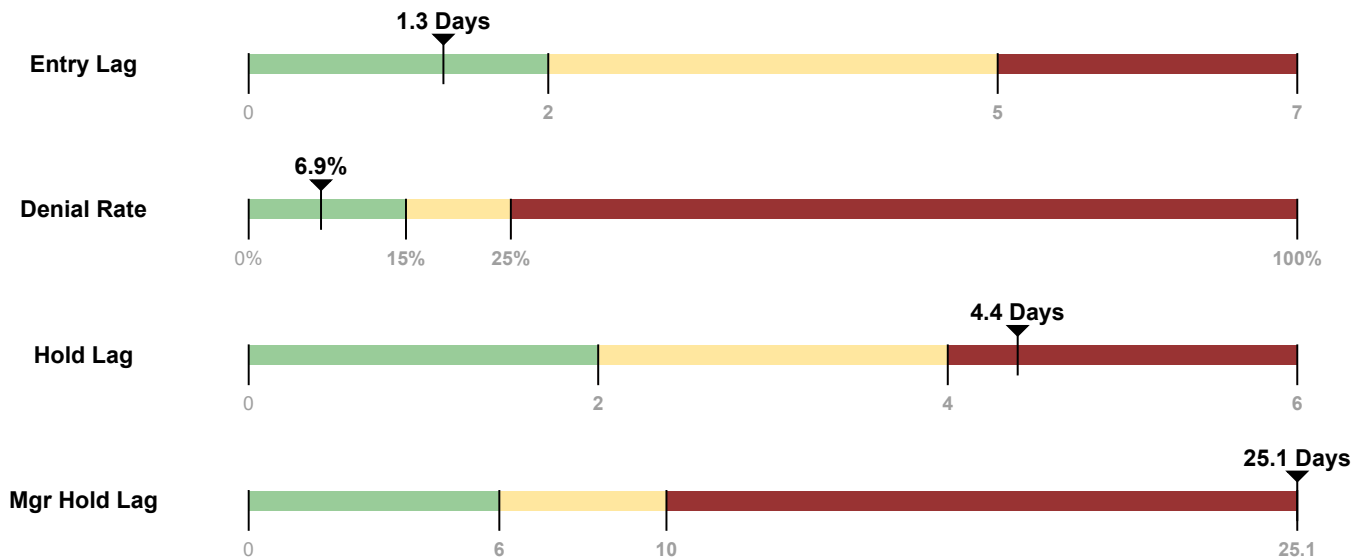
The key indicators compare your performance against athenahealth's established best practices using the most recent month's data.

Financial

DAR
25.1 Days
0   45   55   100

Self Pay
19.3%
0%   40%   60%   100%

Administration

Entry Lag
1.3 Days
0   2   5   7

Denial Rate
6.9%
0%   15%   25%   100%

Hold Lag
4.4 Days
0   2   4   6

Mgr Hold Lag
25.1 Days
0   6   10   25.1
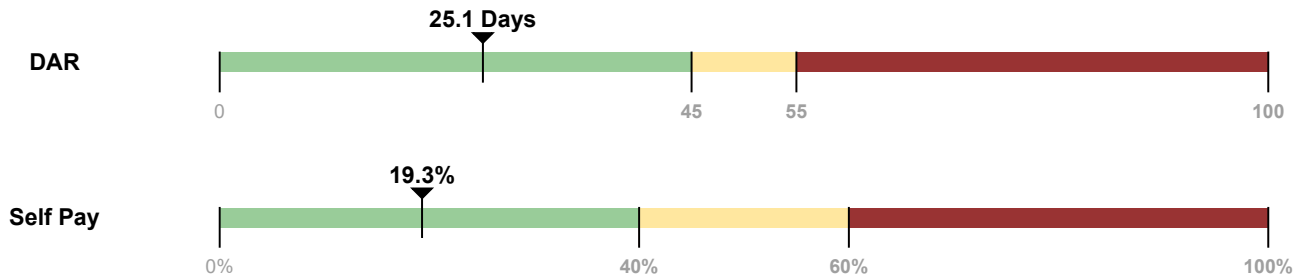
Days in Accounts Receivable (DAR): average number of days that outstanding dollars take to be resolved.
Self Pay: percentage of your self pay AR that is over 90 days. High values indicate that self pay management may need improving, and policies regarding collection agencies may need to be addressed.
**Entry Lag:** average length of time between the date of service on a claim and the date which the claim is actually entered into athenaNet. Long entry lag times lead to higher rates of backend denials.
Denial Rate: percentage of your claims that receive either a partial or full denial of payment from an insurer. Also referred to as the backend denial rate.
**Hold Lag:** average length of time that the practice staff takes to correct claims and resubmit them.
Manager (Mgr) Hold Lag: average length of time that the practice takes to resolve issues related to provider number enrollment or complex coding.
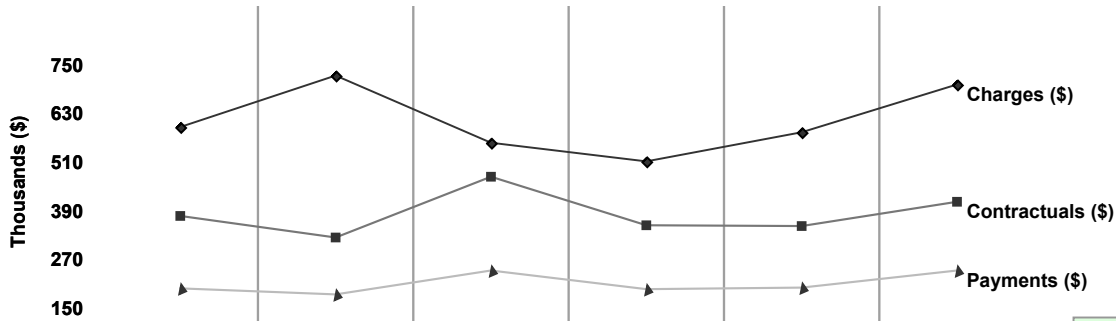
	Dec '19	Jan '20	Feb '20	Mar '20	Apr '20	May '20	Aggregates 2019	YTD 2020
Charges ($)	597,498.00	724,244.03	557,879.02	511,998.91	584,270.00	701,899.01	6,970,913.11	3,080,290.97
Contractuals ($)	377,356.58	324,140.82	474,006.88	353,818.77	351,599.96	411,613.46	4,370,853.41	1,915,179.89
Payments ($)	198,428.10	182,582.02	241,812.26	196,119.72	200,347.50	241,574.41	2,479,327.27	1,062,435.91
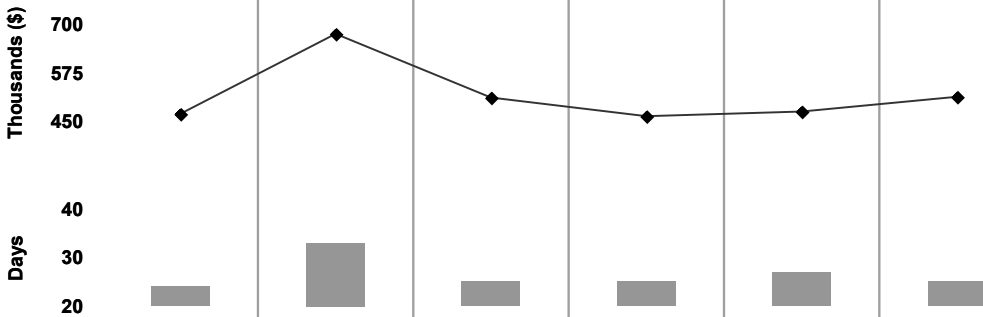
	Dec '19	Jan '20	Feb '20	Mar '20	Apr '20	May '20
Accounts Receivable ($)	469,697.73	676,260.97	512,112.21	463,975.06	476,167.88	513,782.02
DAR (Days)	23.9	32.7	24.7	24.9	26.5	25.1
Lost Patient Care Revenue (%)	3.6	3.6	5.8	5.3	6.3	3.6

Charges: gross charges for fee for service (FFS) and capitation business by month of transaction post.
Contractuals: total contractual adjustments by month of transaction post.
Payments: total dollars collected by month of transaction post.
Accounts Receivable: total dollars outstanding as of the end of the month.
DAR (Days): average number of days that outstanding dollars take to be resolved.
Lost Patient Care Revenue: the percentage of charges adjusted off to bad debt, collections, other (by the practice), and the amount outstanding after one year for charges one year old (by date of service).

The payor mix is determined by your fee for service charges. Shifts in your payor mix can lead to significant payment trends.

- 🟩 green indicates a positive shift
- 🟥 red indicates a negative shift

Collections per Work RVU: total amount collected on primary fee for service (FFS) charges divided by the total Work RVU that these charges represent. This number is calculated from closed primary claims during the time frame. The Work RVU does not include the GPCI modifier. **Collections per Total RVU:** same as Collections per Work RVU, but using Total RVUs that include the GPCI modifiers. **Impact:** summarizes the information in the payor mix table and tells you whether any change in your payor mix has resulted in a positive or negative impact on your collections, holding your collection rate constant. It is measured in dollars per Work RVU or Total RVU.

You are trended against your peer group within your practice and across athenaNet. Your peer group is defined as providers of your specialty. In the event that there is no comparison information, this means that a valid sample size is currently unavailable.

Entry Lag: average length of time in days between the date of service on a claim and the date which the claim is actually entered into athenaNet. **Hold Lag:** average length of time that the practice staff takes to correct claims and redrop them. **Manager Hold Lag:** average length of time that the practice takes to resolve issues related to provider number enrollment or complex coding. **Athena Catch Rate:** percentage of your claims that athenaNet prevented from being submitted that would have received a denial. **Denial Rate:** percentage of your claims that receive either a partial or full denial of payment from an insurer.

Payor Mix

	2019	2020 ytd	Variance	Collections per Work RVU	Collections per Total RVU
Medicare B-KY	24.3	26.6	+ 2.3	93.68	32.98
BCBS-KY	21.7	20.7	- 1.1	93.49	32.56
Humana	11.5	13.1	+ 1.6	96.18	33.78
Passport Health Plan	13.3	12.4	- 0.9	101.77	35.65
Tricare East	9.1	8.9	- 0.3	102.91	35.50
Wellcare	3.9	4.1	+ 0.2	98.57	35.82
other	16.0	14.2	- 1.8	88.70	34.82
Impact	...	...	**...**	**+ 0.04**	**- 0.04**

Operations and Denials

	2019	2020 ytd	Variance	Group Median	Specialty Median
Claim Entry Lag	1.4	1.5	+ 0.1	1.7	3.4
Hold Lag	4.2	5.9	+ 1.7	4.3	8.9
Manager Hold Lag	11.9	31.7	+ 19.8	29.0	34.2
Athena Catch Rate	7.1	7.5	+ 0.4	12.0	4.1
Denial Rate	9.3	10.0	+ 0.6	10.0	7.7

This section excludes all surgical cases.

You are trended against peers in your practice as well as all providers in your specialty using athenaNet.

Scheduled Patients per Hour: number of scheduled patients seen divided by Hours Used.

Work RVUs per Scheduled Patient: total number of Work RVUs for scheduled patients divided by the number of scheduled patients.

Estimated (Est.) Payment Rate per Work RVU: total payments, including secondary and patient, divided by the Work RVUs that these charges represent. This number is calculated off of FFS charges that closed during the time frame.

Earnings per Fully Utilized Hours: the implied hourly rate based on Hours Used. This number is calculated by multiplying scheduled patients per hour, work RVUs per scheduled patient, and the estimated payment rate per work RVU.

Lost Earnings From Unutilized Hours: the estimated additional collections per month that would have been realized if all Available Hours had been used.

Productivity

	2019	2020 ytd	Group Median	Specialty Median
Available Hours (avg monthly)	146.1	143.3	119.8	100.8
Hours Used (avg monthly)	103.1	105.6	91.0	49.9
Pct. Reschedule or No Show	32.5	32.2	18.0	29.2
Pct. Provider Unavailable	1.6	0.5	0.0	1.8
Net Utilization Rate	70.6	73.7	79.0	49.6
Scheduled Patients per Hour	6.4	7.1	4.3	3.9
Work RVUs per Scheduled Patient	2.6	2.5	1.1	1.3
Est. Payment Rate per Work RVU ($)	100.21	96.56	79.16	
Earnings per Fully Utilized Hour ($)	1,666.37	1,688.27	361.67	
Lost Earnings From Unutilized Hours ($)	71,665.32	63,675.85	10,412.60	

Listed are the top procedure codes that represent a substantial portion of your fee for service billed services.

The first three columns represent the number of services performed.

Estimated Payment: total payments, including all insurance and patient, received per service line. This number is calculated off of charges closing within the last three months. In the event that a procedure code has never been used before, this field will be empty.

Estimated Value: estimated payment multiplied by the number of services performed last month. This number represents the total dollars that are expected to be collected, based on historical data. This does not necessarily represent what you will collect.

Procedure Code Detail

|	Mar-20	Apr-20	May-20	Estimated Payment	Estimated Value May-20
64483,50	50	72	77	316.50	24,370.45
64483	47	50	94	218.66	20,554.33
64635	35	42	55	373.00	20,514.93
64636	61	52	83	224.53	18,636.06
64635,50	14	19	30	575.19	17,255.70
64493	66	89	91	152.30	13,858.88
62321	53	58	55	241.94	13,306.89
27096,50	37	35	50	264.74	13,236.76
63650	2	0	6	1,872.99	11,237.93
99204	97	93	68	138.29	9,403.63
62323	22	36	41	223.42	9,160.19
64484	40	45	86	104.29	8,968.92
J0702	150	178	220	32.38	7,122.80
64494	72	88	93	76.49	7,113.46
L0650	2	3	5	1,088.98	5,444.88
64490	15	21	28	175.62	4,917.31
27096	33	23	26	185.73	4,828.96
64633	12	5	12	400.04	4,800.46
G0483	27	32	25	178.20	4,455.01
64636,50	1	15	16	239.52	3,832.24
All Others	549	629	621	48.27	29,977.52
Total	**1,385**	**1,585**	**1,782**	**141.97**	**252,997.31**

Your coding is trended against your practice (Group), all athenanet providers in your specialty (Specialty), and the national 2014 CMS database (National).

Please note your current bell curve.

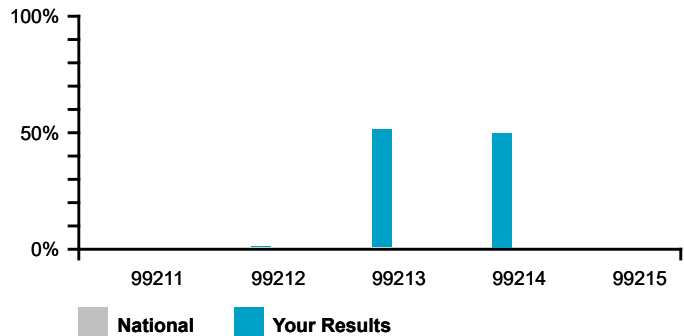**New Patients**

	2019	2020 ytd	Group Average	Specialty Average	National Average	Variance to National
99201	...	0.2	0.1	0.5	...	+ 0.2
99202	0.1	...	0.1	1.9	...	+/- 0.0
99203	20.9	16.0	19.2	24.1	...	+ 16.0
99204	79.0	83.8	80.5	64.6	...	+ 83.8
99205	...	...	0.1	9.0	...	+/- 0.0

E&M Coding: New Patients
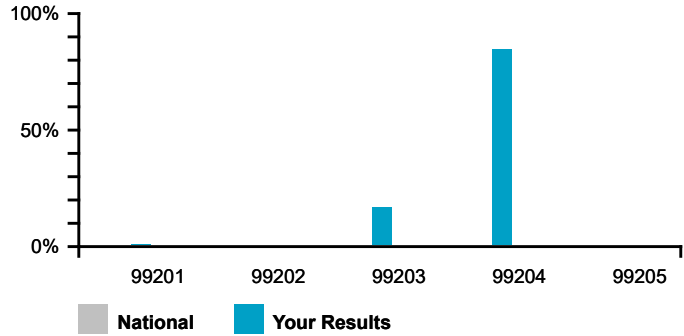
Established Patients

	2019	2020 ytd	Group Average	Specialty Average	National Average	Variance to National
99211	1.0	...	0.1	0.6	...	+/- 0.0
99212	1.0	0.4	1.0	3.1	...	+ 0.4
99213	44.0	50.6	66.9	47.2	...	+ 50.6
99214	54.0	49.0	32.0	47.3	...	+ 49.0
99215	...	...	0.0	1.8	...	+/- 0.0

E&M Coding: Established Patients