MAP Keys® and MAP Key best practices from MAP Award winners

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OVERVIEW

• What is MAP?
• What are MAP Keys?
• Using the Keys to measure
• Applying best practices
• Performing like an Award winner
What is MAP?

Created by and for healthcare leaders, HFMA's MAP initiative sets the standard for revenue cycle excellence in the healthcare industry. MAP is a comprehensive strategy that allows organizations to:

- Measure revenue cycle performance using the industry-standard MAP Keys
- Apply evidence-based strategies for improvement
- Perform to the highest standards to improve financial results and patient satisfaction

The Patient-Centric Revenue Cycle Roadmap
MAP Initiative

MAP Keys (key performance indicators)
MAP Award (recognition of revenue cycle excellence)
Revenue Cycle Conference (formerly MAP Event)
MAP App (online benchmarking platform)

What are MAP Keys?

MAP Keys are the industry standard KPIs for measuring strategic revenue cycle performance. MAP Keys are:

- Clearly defined
- Measurable
- Discerning
- Comparable
MAP Keys

Apply to acute care providers, ambulatory providers, physician organizations, and integrated delivery systems

Five MAP Key groups:
- Patient Access (7)
- Pre-billing (4)
- Claims (2)
- Account Resolution (9)
- Financial Management (7)

MAP Keys: Patient Access (7)

- Percentage of Patient Schedule Occupied
- Pre-Registration Rate
- Insurance Verification Rate
- Service Authorization Rate – IP and/or Obs
- Service Authorization Rate – OP
- Conversation Rate of Uninsured Patient to Third-Party Funding Source
- Point-of-Service (POS) Cash Collections
MAP Keys: Pre-Billing (4)

Days in Total Discharged Not Final Billed (DNFB)
Days in Final Billed Not Submitted to Payer (FBNS)
Days in Total Discharged Not Submitted to Payer (DNSP)
Total Charge Lag Days

MAP Keys: Claims (2)

Clean Claim Rate
Late Charges as Percentage of Total Charges
MAP Keys: Account Resolution (9)

- Aged A/R as a Percentage of Total Billed A/R
- Aged A/R as a Percentage of Total Billed A/R by Payer Group
- Aged A/R as a Percentage of Total A/R
- Aged A/R as a Percentage of Total A/R by Payer Group
- Remittance Denial Rate
- Denial Write-Offs as a Percentage of Net Patient Service Revenue
- Bad Debt
- Charity Care
- Net Days in Credit Balance

MAP Keys: Financial Management (7)

- Net Days in A/R
- Cash Collection as a Percentage of Net Patient Service Revenue
- Uninsured Discount
- Uncompensated Care
- Case Mix Index
- Cost to Collect
- Cost to Collect by Functional Area
Poll & Discussion

Poll: Level of familiarity with the MAP Keys
- Know of them
- Use 5 or less Keys
- Use 10 or less Keys
- Use more than 10 Keys
- No familiarity with the Keys

Group Discussion:
- If you don’t use the Keys, how is your organization measuring revenue cycle performance?
- If you use the Keys, which ones do you use? Which have you avoided? Why?

Applying Best Practices from MAP Award Winners

22 organizations recognized in 2018
- 3 integrated delivery systems
- 2 hospital systems
- 9 individual hospitals
- 2 critical access hospitals
- 6 physician practices
Applying Best Practice: Scheduling / Pre-Registration / Insurance Verification / Pre-Authorization

- Real-time ED check-in – arrive at ED once staff is ready
- Online scheduling – complete forms, insurance verification, accelerate check-in
- EHR reporting functionality used to track patient wait times through important parts of service experience
- Real-time eligibility verification – allows pre-access team to schedule, pre-register, and provide estimate all in one phone conversation

Applying Best Practice: POS Cash Collections

- Proactive pre-service phone calls
- Embrace the Patient Financial Communications Best Practices – patient education alleviates “sticker shock”
- Standard deposits, credit card on file, automated payment plans
Applying Best Practice: DNFB

- Policy – all charges to be posted at time of service.
- Requiring all device vendors to submit implant invoices on day of surgery
  - goal of final bill submitted <72 hours after discharge
- Barcode anything to reduce manual posting
- Active CDI programs – CDI queries and physician education will improve documentation and coding throughput

Applying Best Practice: Billed Aged A/R & Denials

- Policy requiring all device vendors to submit implant invoices on day of surgery 
  - goal of final bill submitted <72 hours after discharge
- Arrange work on denied claims based on contract rather than payer type
- Revenue Integrity/AI/Machine Learning
- Use technology to automate claim status checks – free staff to work exception-based issues
Focus: Improve Aged A/R

- Tips for Improvement
  - Implement a white board
  - Analyze composition of A/R by payer group
  - Identify causes for payment delays
  - Validate staffing levels
  - Develop options for more timely resolution of self-pay receivables

Applying Best Practice: Cash Collected as % of NPSR

- Contract management - loaded into EHR or patient accounting system
  - Team pursues claims not paid according to contract
- Outsourcing aged commercial and aged self-pay
- No interest loans for self pay
- Reducing denials
Focus: Improve Cash Collection

- Tips for Improvement
  - Implement a white board huddle
  - Stratify your aged trial balance
  - Look for root causes of payment delays
  - Measure work completed by account reps
  - Validate staffing levels based on Standard Work

Applying Best Practice: Patient/Consumer Experience

- Centralize the standard patient experience – statement, bill pay, health record
- Single phone number for patients to make all appointments – physician appointment, radiology, other outpatient services, etc.
- Service recovery – I need to respond now!
- Pre-service processing – PFC best practices
Group Discussion

- Is your revenue cycle focused on the patient experience? Why or why not?

- On a scale of 1-10, how do you grade your organization’s use of technology in the revenue cycle? Explain.

- In which revenue cycle performance metrics do you excel? To what do you attribute your success?

- In which revenue cycle performance metrics are a challenge? Why?

Performing like a MAP Award winner

HFMA’s Revenue Cycle Score

<table>
<thead>
<tr>
<th>MAP Key</th>
<th>Desired Direction</th>
<th>Actual Metric</th>
<th>MAP Key Range</th>
<th>Range Points (0-100 pts)</th>
<th>MAP Key Weight (sum to 100%)</th>
<th>Revenue Cycle Points</th>
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</thead>
<tbody>
<tr>
<td>Desired Direction</td>
<td>35 days</td>
<td>4.5 days</td>
<td>22%</td>
<td>25%</td>
<td>95%</td>
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<tr>
<td>Actual Metric</td>
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<tr>
<td>MAP Key Range</td>
<td>30.0 days-60.0 days</td>
<td>2.0 days-10.0 days</td>
<td>15.0%-30.0%</td>
<td>5.0%-35.0%</td>
<td>88.0%-100.0%</td>
<td>0.5%-5.0%</td>
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<tr>
<td>MAP Key Weight (sum to 100%)</td>
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<td>22.0%</td>
<td>12.0%</td>
<td>10.0%</td>
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<td>Revenue Cycle Points</td>
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<td>6.40</td>
<td>5.67</td>
<td>12.95</td>
<td>10.00</td>
</tr>
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</table>

Revenue Cycle Score (100 pts Possible) 72.7

Your total Revenue Cycle Score compares favorably with historical MAP Award applicants. Many organizations with performance at this level have won a MAP Award. A few organizations have received the MAP Certificate of Revenue Cycle Achievement. Facilities who do not win a MAP Award will be provided feedback reports containing useful metric comparison data and best practice information.

See how HFMA defines these MAP Keys®. Click here for hospital and health system definitions. Click here for physician practice definitions.

hfma.org/MAP/MAPAwards
Takeaways

Share two things you have heard, thought about or shared today that you will further explore when you return to your workplace.

Questions
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