Advanced Reporting Workshop

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Jim Smith - Client Advocate
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Agenda

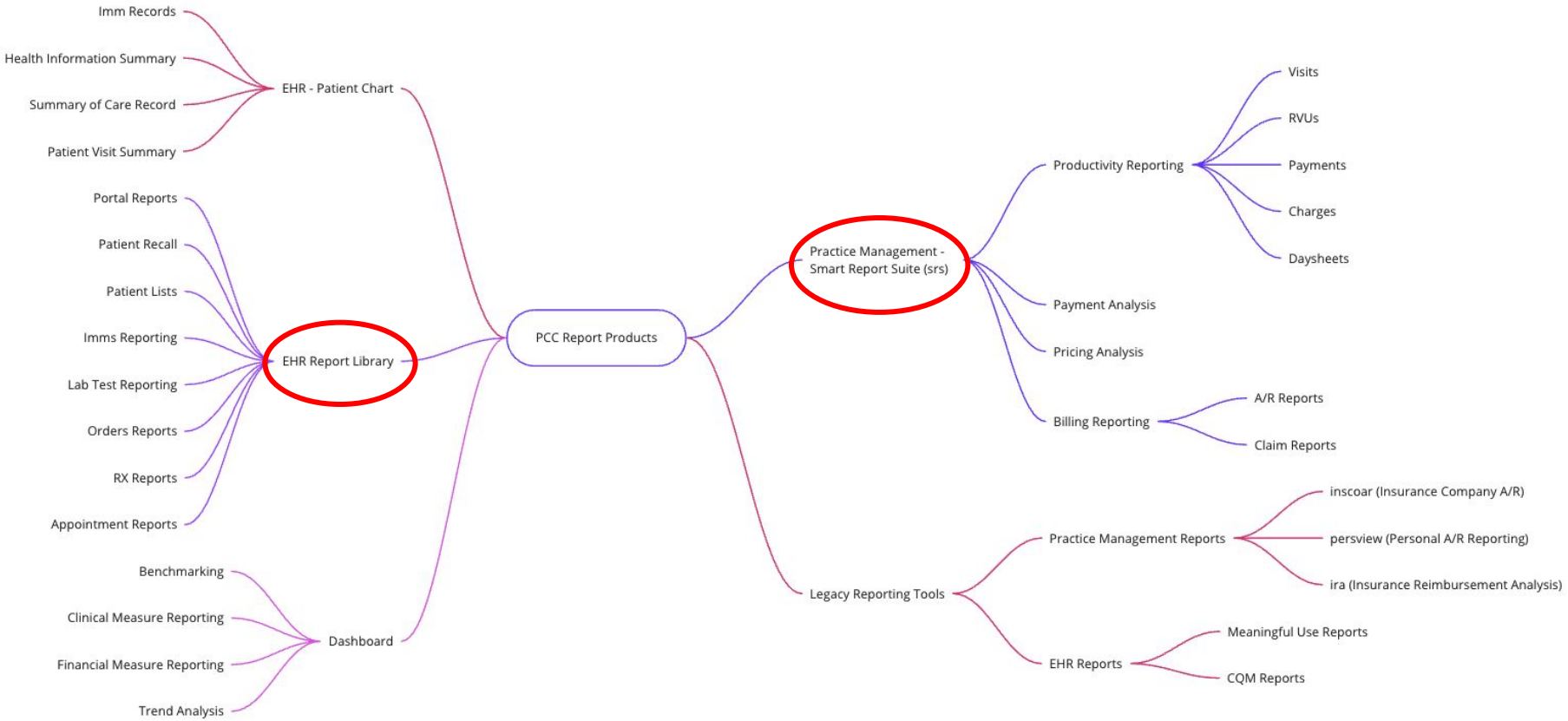
1. 10:00 - 11:15 - Presentation on reporting tools: Smart Report Suite (srs) and the EHR Report Library

2. 11:15 - 12:00 - Reporting Workshop

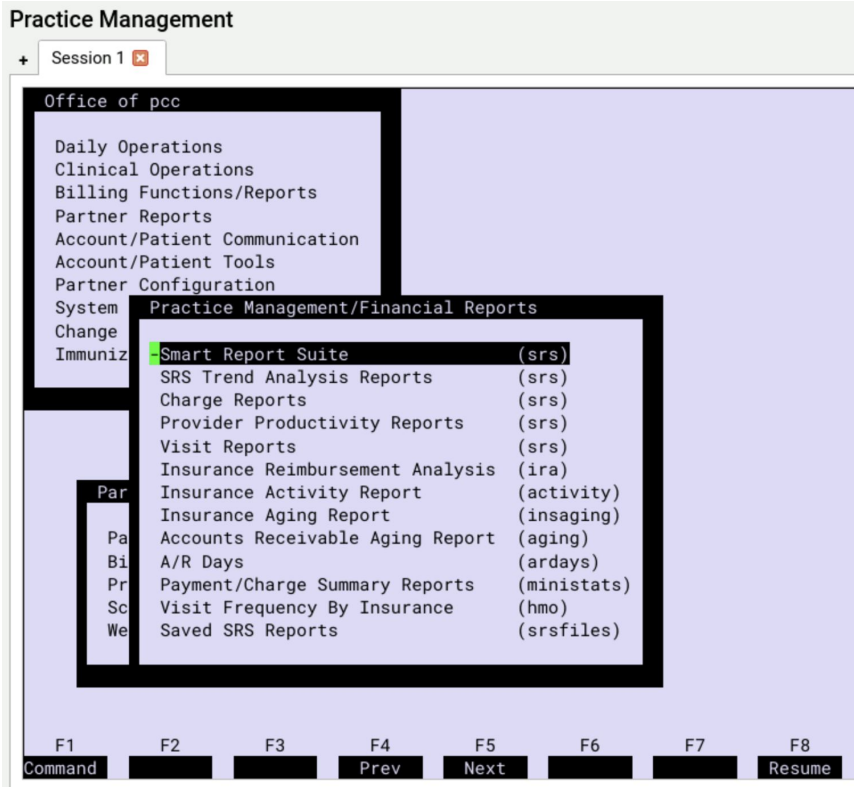
Session Goals

1. Understanding of reporting tools within PCC PM and PCC EHR and how they can be used to meet your financial and clinical reporting needs

2. Experience using these tools to build and customize reports relevant to your practice


PCC Report Products
EHR - Patient Chart
Imm Records
Health Information Summary
Summary of Care Record
Patient Visit Summary
EHR Report Library
Portal Reports
Patient Recall
Patient Lists
Imms Reporting
Lab Test Reporting
Orders Reports
RX Reports
Appointment Reports
Dashboard
Benchmarking
Clinical Measure Reporting
Financial Measure Reporting
Trend Analysis
Practice Management - Smart Report Suite (srs)
Productivity Reporting
Visits
RVUs
Payments
Charges
Daysheets
Payment Analysis
Pricing Analysis
Billing Reporting
A/R Reports
Claim Reports
Legacy Reporting Tools
Practice Management Reports
inscoar (Insurance Company A/R)
persview (Personal A/R Reporting)
ira (Insurance Reimbursement Analysis)
EHR Reports
Meaningful Use Reports
CQM Reports

Smart Report Suite

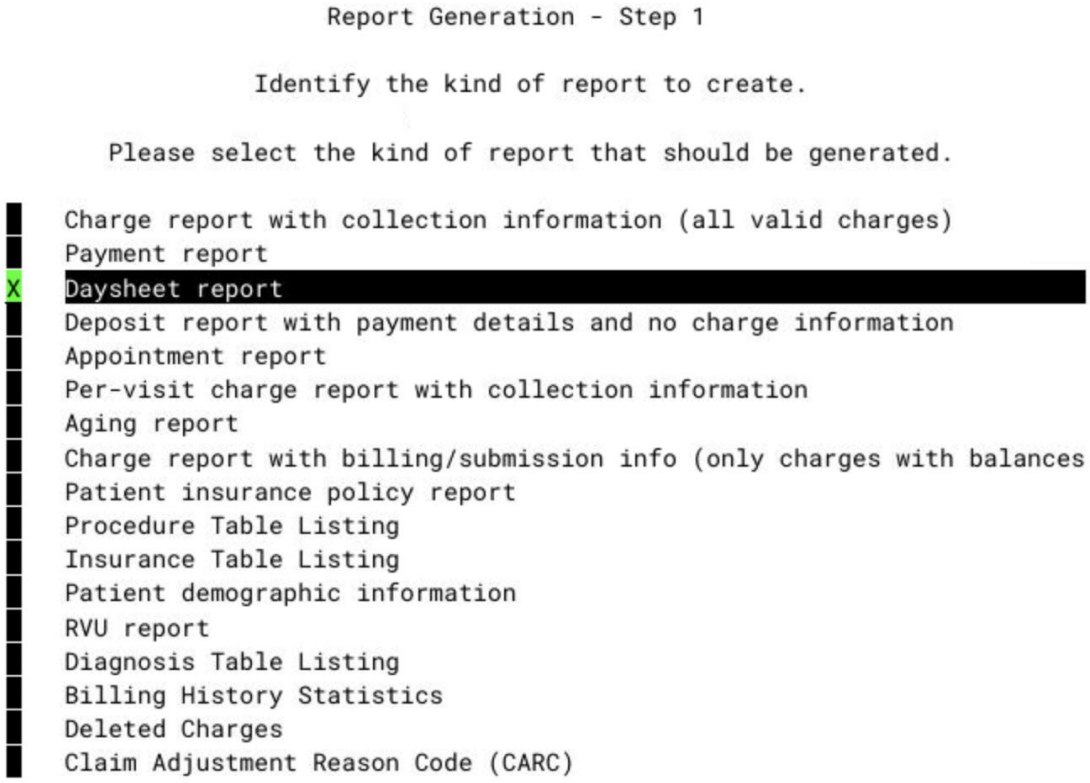


- Versatile and stable Practice Mgt reporting tool
- Use srs for reporting on productivity data (visits, charges, payments, RVUs)
- It can be a lot of trial and error when creating reports. Support can help!

Five Common Productivity Report Data Sources in srs

1. Daysheet-based reports
2. Charge-based reports
3. Payment-based reports
4. Visit-based reports
5. RVU-based reports

Daysheet-based reports



Daysheet-based reports

- Based on daily transaction logs of charges, payments, adjustments, and refunds.
- Best report for reflecting overall charges, payments, adjustments, and refunds attributed to a specified time period, by provider if desired.
- Can be useful for provider productivity reporting
- Very limited detail (no detail on CPT code/name, payment types, etc)

Daysheet-based reports

- Can be useful for reconciling to bank account deposits
- Limitations:
  - No CPT code detail: Can’t show “provider charges for everything excluding vaccines” for example
  - Cannot show totals by place of service

Example: Provider Productivity

Let's create a custom report to show provider charge, payment, adj, and refund totals posted in a given month. We're looking for report output like this:

Provider charges, payments, adjustments (daysheet)

Service Provider Name	Non Service Charges	Service Charges	Adj	Cash	Check	Credit Card	Refund	Total Pmts
Elizabeth Casey, M.D.	$0.00	$0.00	$0.00	$0.00	$40.00	$50.00	$-20.00	$70.00
James Davidson, M.D.	$0.00	$260.00	$19.53	$0.00	$262.84	$50.00	$-262.84	$50.00
None	$0.00	$0.00	$0.00	$0.00	$0.00	$-120.00	$0.00	$-120.00
Office	$0.00	$0.00	$0.00	$0.00	$0.00	$20.00	$0.00	$20.00
	$0.00	$260.00	$19.53	$0.00	$302.84	$0.00	$-282.84	$20.00

Criteria for this report run.
Posting Date Range: 01/01/19 - 04/30/20

Includes Relinked Payments and Adjustments

Transaction vs Posting Dates

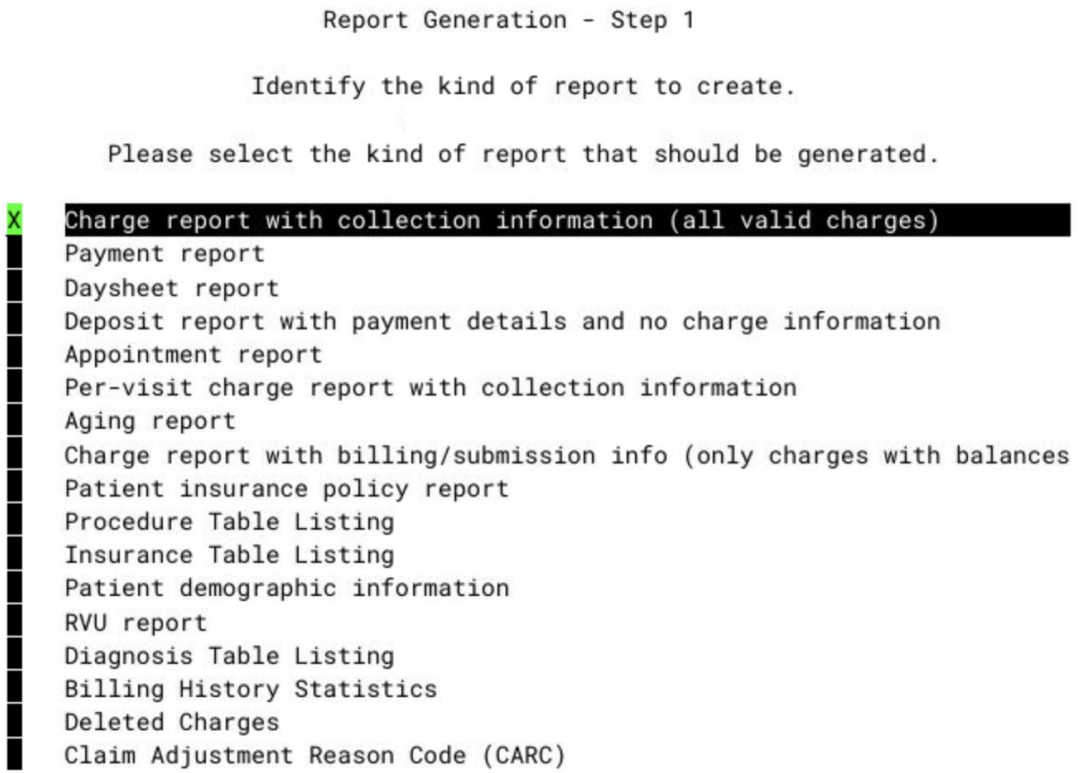
Transaction Date

- For charges, this is the date of service
- For payments, this is the date attributed to the payment.
  - For insurance payments, this is typically the date of the check
  - For other payments, it's the date entered by the user

Posting Date

- For charges and payments, this is the system-generated date of physical posting into the system. A PCC user cannot change a posting date.

Charge Based Reports



Charge Based Reports

- Show charges either transacted during a time period (transaction date) or physically posted into the system during a time period (posting date)
- Extensive subtotaling capabilities (provider, place of service, procedure code/group, etc)
- Also show payments made on the charges being reported
- Refunds are reflected as charges

Example: Charges by Provider

Let's create a custom report showing charge totals by provider and procedure group. Output should look like this:

HASH(0x2fc6418)

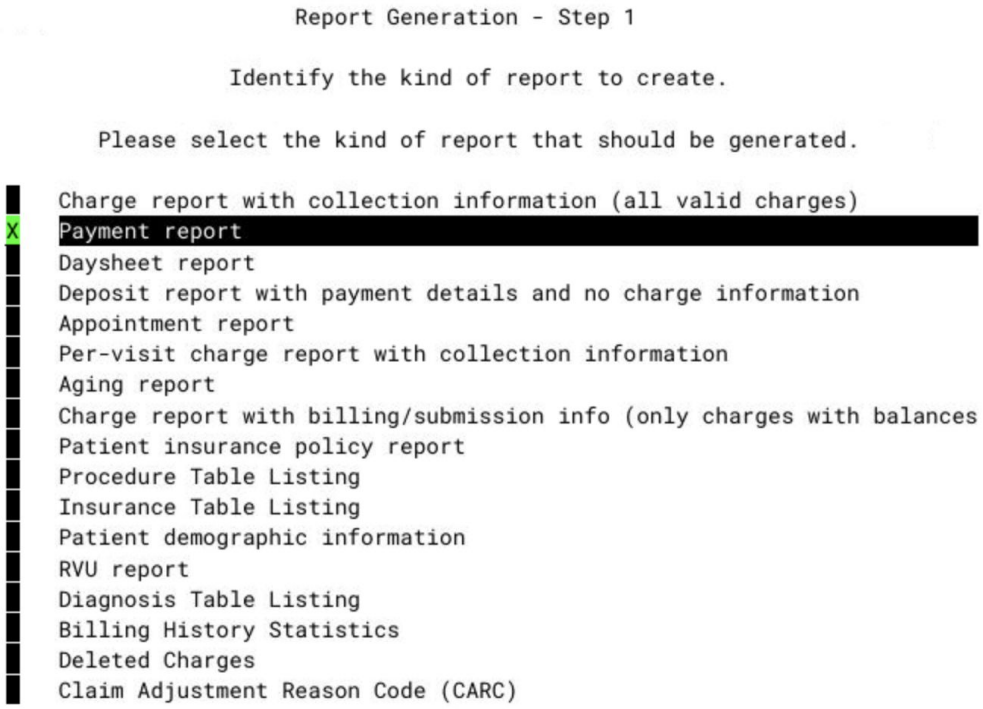
Service Provider Name: Beverly Crusher, MD

Service Provider Name	Procedure Group Name	Units	Charge Amount	Amount Deposited (all pmts)	Amount Due	Amount Collected (all pmts + all adjs)	Percent Collected (all pmts + all adjs)
Beverly Crusher, MD	Imms Administration	15	$504.00	$11.50	$400.00	$104.00	20.63%
Beverly Crusher, MD	Immunizations	12	$963.02	$0.00	$963.02	$0.00	0.00%
Beverly Crusher, MD	Injections	4	$190.00	$12.42	$1.02	$188.98	99.46%
Beverly Crusher, MD	Laboratory Procedures	19	$319.00	$36.00	$266.00	$53.00	16.61%
Beverly Crusher, MD	Medical Procedures	2	$33.00	$0.00	$33.00	$0.00	0.00%
Beverly Crusher, MD	Medical Tests	8	$122.00	$5.00	$85.29	$36.71	30.09%
Beverly Crusher, MD	Office Visits, Est Patients	17	$2,481.00	$437.74	$1,292.68	$1,188.32	47.90%
Beverly Crusher, MD	Physical Exams, Est Patients	5	$891.00	$0.00	$824.96	$66.04	7.41%
Beverly Crusher, MD	Unclassified	1	$175.00	$0.00	$175.00	$0.00	0.00%
Beverly Crusher, MD		83	$5,678.02	$502.66	$4,040.97	$1,637.05	28.83%

Example: Charges by Provider

- Start with “Charge and Reimbursement Comparison by Provider”
- Amount deposited represents payments **on the charges being reported.**
    - Payments on charge reports cannot be compared to payments on payment-based or daysheet reports

Payment Based Reports



Payment Based Reports

- Useful for getting more detailed subtotals of payments (i.e., payments by check number)
- Always recommended to run by transaction date
    - For insurance payments, this is typically the date of the check
    - For other payments, it’s the date entered by the user

Why Run by Transaction Date?

- Because payment relinking happens all the time
- **When a payment is relinked, the posting date for that payment changes**
- When reporting monthly payment productivity, you don't want to count a payment in a given month if it was already counted for a prior month

Example: Payments by Provider and Procedure

Let's create a custom report showing payment totals by provider and procedure group. Output should look like this:

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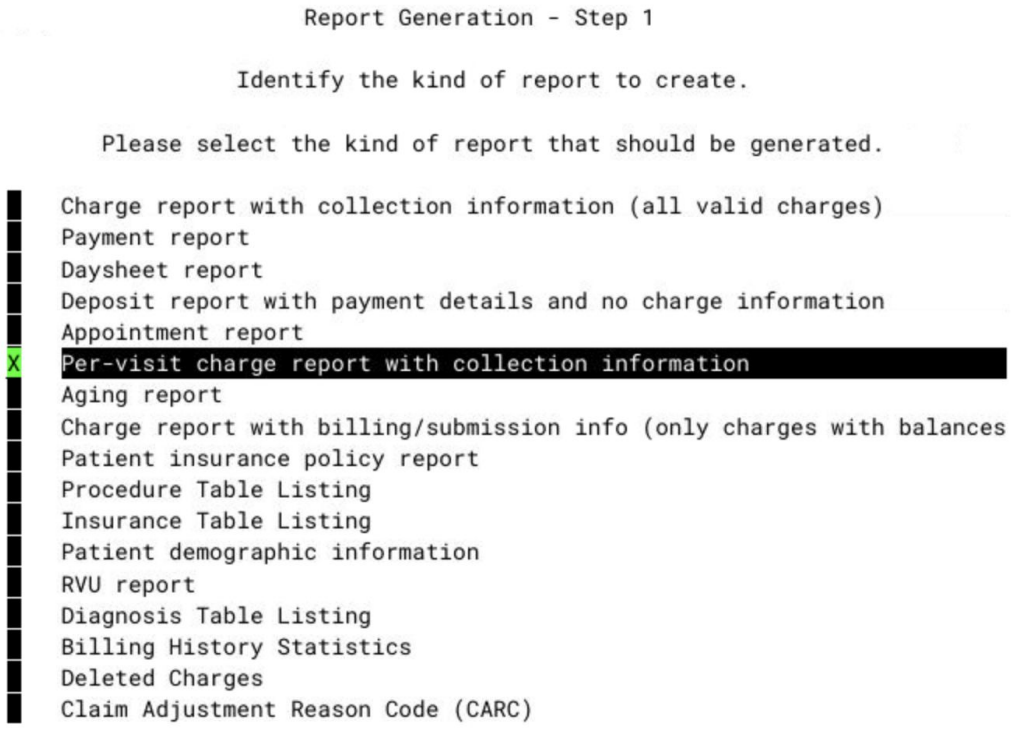
Service Provider Name: Beverly Crusher, MD

Service Provider Name	Group Name	Personal Pmt	Ins Pmt	Personal Adj	Ins Adj	Amount Collected (all pmts + all adjs)
Beverly Crusher, MD	Imms Administration	$0.00	$49.20	$0.00	$114.80	$164.00
Beverly Crusher, MD	Immunizations	$0.00	$19.93	$0.00	$15.07	$35.00
Beverly Crusher, MD	Injections	$0.00	$12.42	$0.00	$176.56	$188.98
Beverly Crusher, MD	Laboratory Procedures	$0.00	$27.58	$0.00	$80.42	$108.00
Beverly Crusher, MD	Medical Procedures	$0.00	$0.00	$0.00	$0.00	$0.00
Beverly Crusher, MD	Medical Tests	$0.00	$7.98	$0.00	$61.22	$69.20
Beverly Crusher, MD	Office Visits, Est Patients	$20.00	$407.74	$0.00	$763.30	$1,191.04
Beverly Crusher, MD	Physical Exams, Est Patients	$0.00	$168.20	$0.00	$237.84	$406.04
Beverly Crusher, MD	Unclassified	$35.00	$0.00	$0.00	$0.00	$35.00
		$55.00	$693.05	$0.00	$1,449.21	$2,197.26

Example: Payments by Provider and Procedure

- Start with “Payment Breakdown by Provider”
- Always run by transaction date
- Insurance payment and personal payments are reported separately
    - Combine these to get total payments

Visit Based Reports



Visit Based Reports

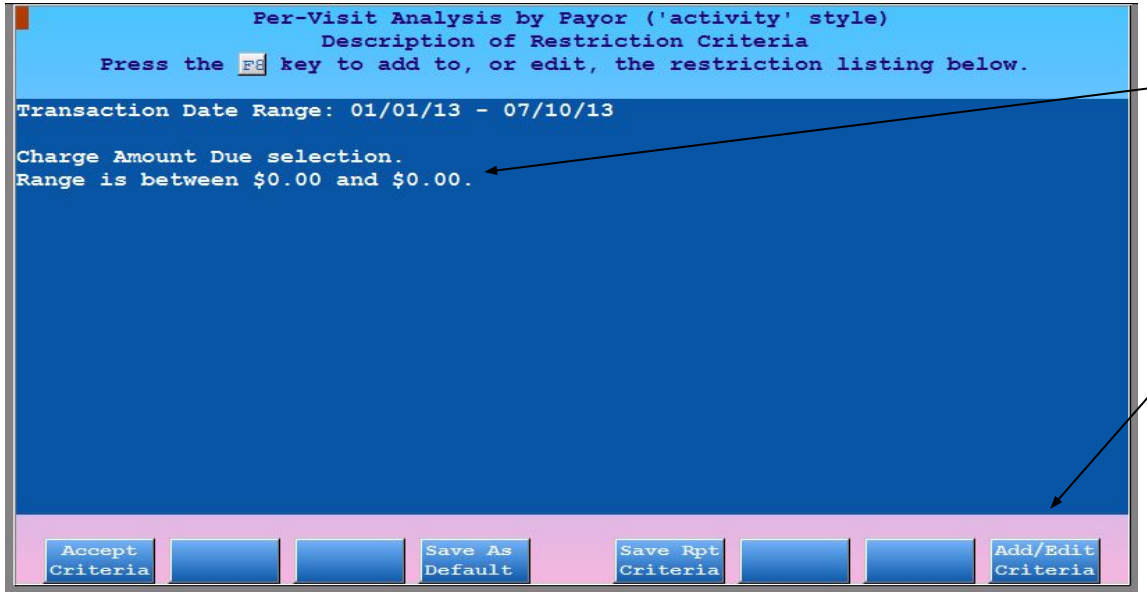
- Based on PCC's charge database
- Based on transaction (service) date of visit
- Useful for counting and categorizing visits (sick, well, vaccine-only, telemed, hospital, etc)
- Also shows payments made on the visits being reported
- Extensive subtotaling capabilities (provider, location, etc)

Visit Categories

- Categories defined for sick, well, consult, hospital, counseling, vaccine only, telephone, portal/email, telemedicine, and misc
- Based on CPT codes within the visit
- Well and sick codes on same day? This is categorized as a well visit

Example: Revenue-per-Visit by Payor

srs Visit Reports → Per Visit Analysis By Payor ('activity' style)"

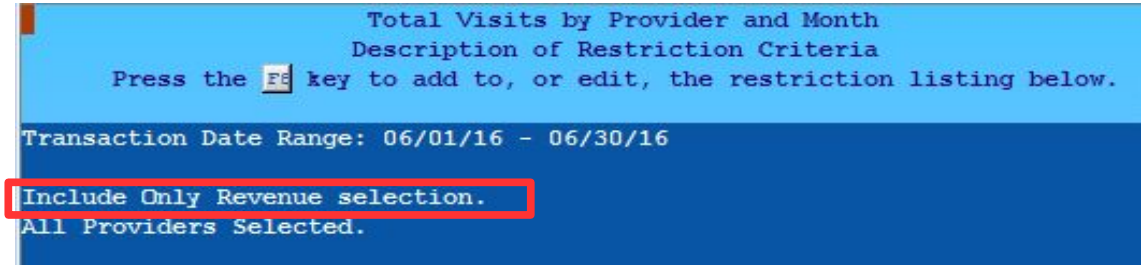


Press <F8> to add restriction criteria of "VISIT Amount Due for Visit" and specify $0 to $0. This ensures you are only looking at paid visits.

Why so many Misc Visits?

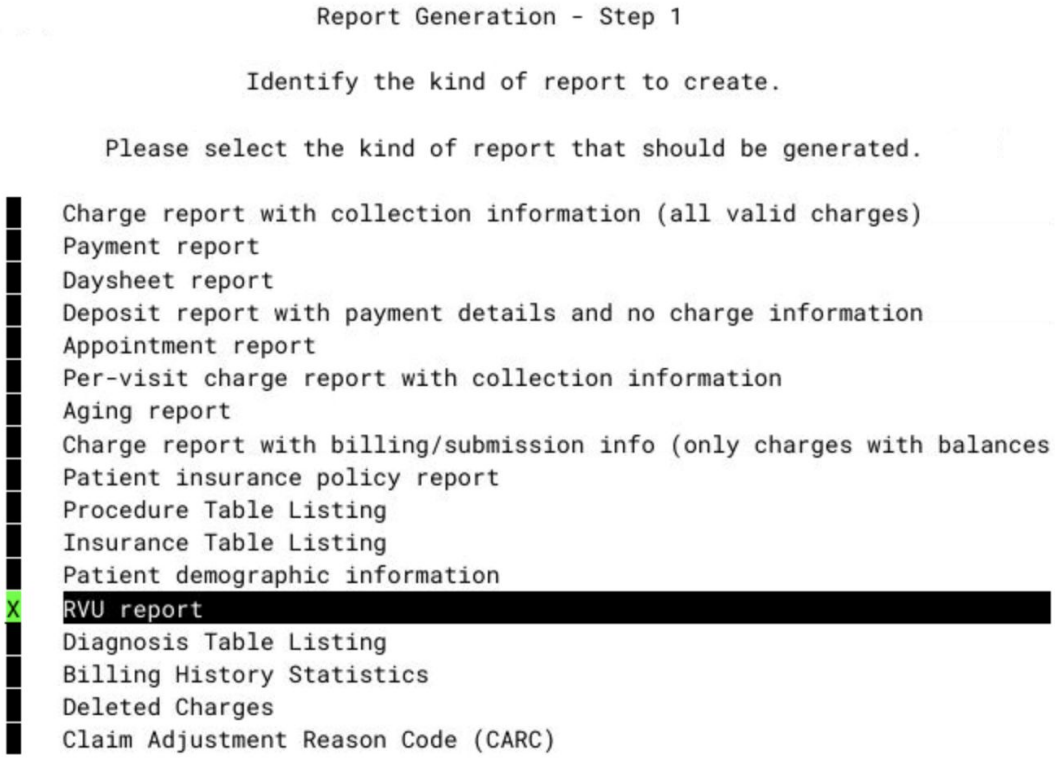
- If a visit has CPT codes that do not match a category defined in the config file, it gets classified as “Misc”
- Did you add the “Include only Revenue charges” criteria?
- Example for later: Create a custom visit-based report to identify which visits were classified as “misc”

Include Only 'Revenue' Visits



- Non-Revenue Services such as no-show or form fees can inflate total visits. Therefore, restrict the report to include only revenue services
- Add restriction criteria of “VISIT Include Only Revenue Charges.” This will report accurate visit totals

RVU Based Reports



RVU Based Reports

- Based on PCC's charge database
- Based on transaction (service) date of visit
- Most CPT codes have Relative Value Units (RVUs) which are updated annually and vary by geographic region
- RVU reports can be useful for determining adequate pricing or for provider productivity
- Extensive subtotaling capabilities (provider, location, etc)

Srs Tips and Tricks

- Avoid lots of subtotals for custom reports you will use in a spreadsheet
- Use F4 “Save as Default” to save criteria (this is a per-user setting)

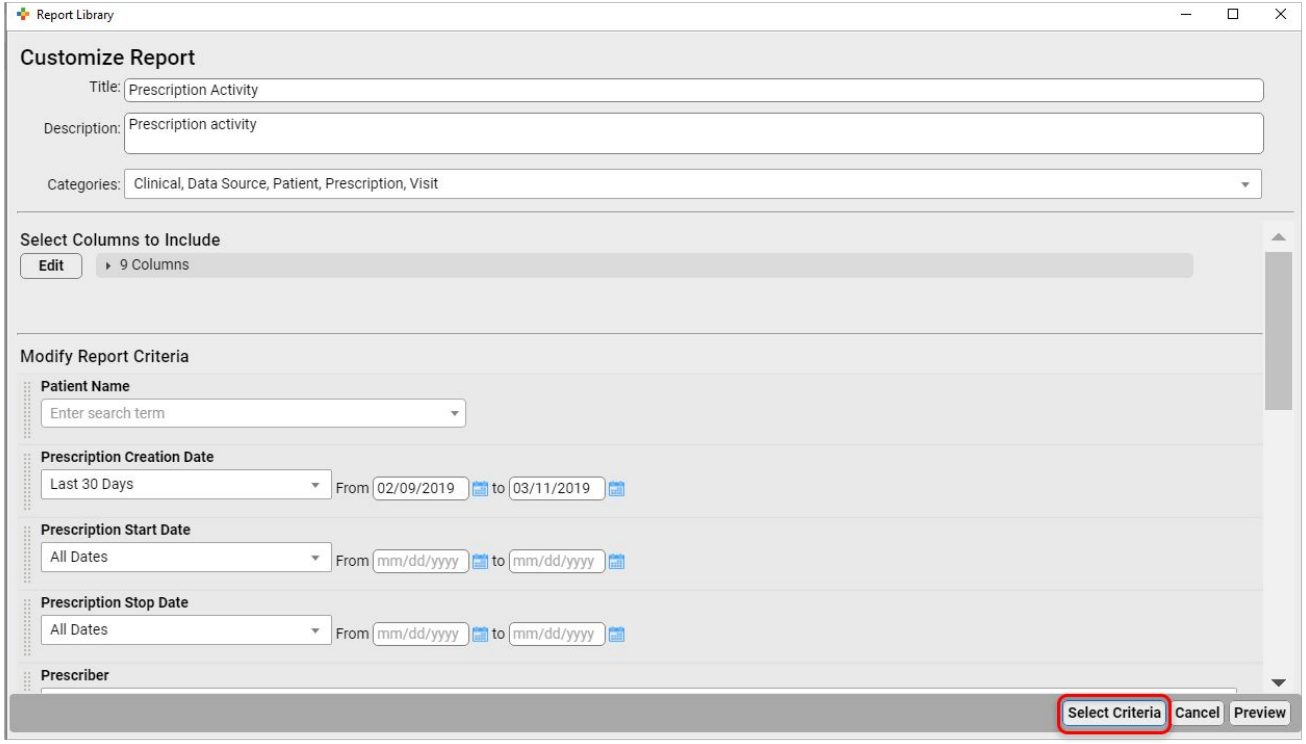
EHR Report Library

- Easy to customize
- Permissions-based to control user access
- Reports can be scheduled to run automatically in the future
- Includes broadcast messaging functionality

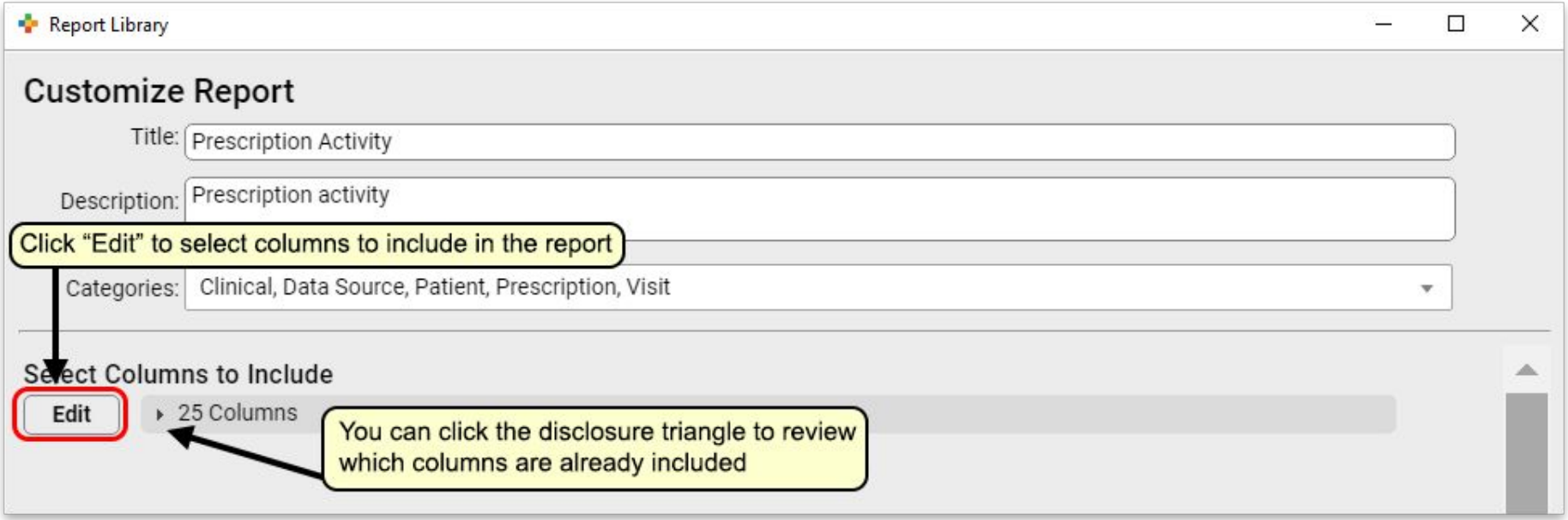
Report Library Data Sources

- Patient Lists
- Appointments
- Immunizations
- Orders
- Lab Tests
- Portal
- Prescriptions
- Payments (Front Desk Payment Reconciliation)

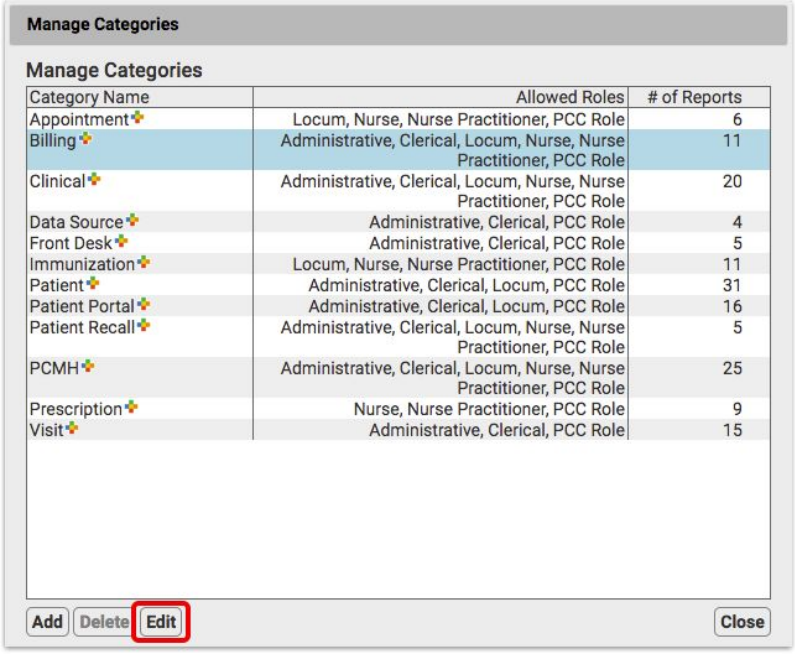
Customize Reports - Select Criteria

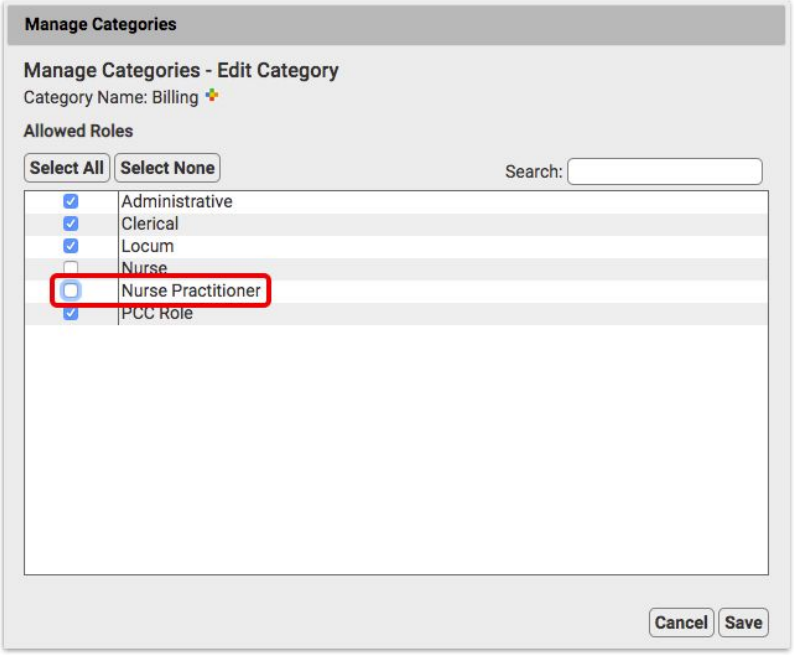


Customize Reports - Select Columns

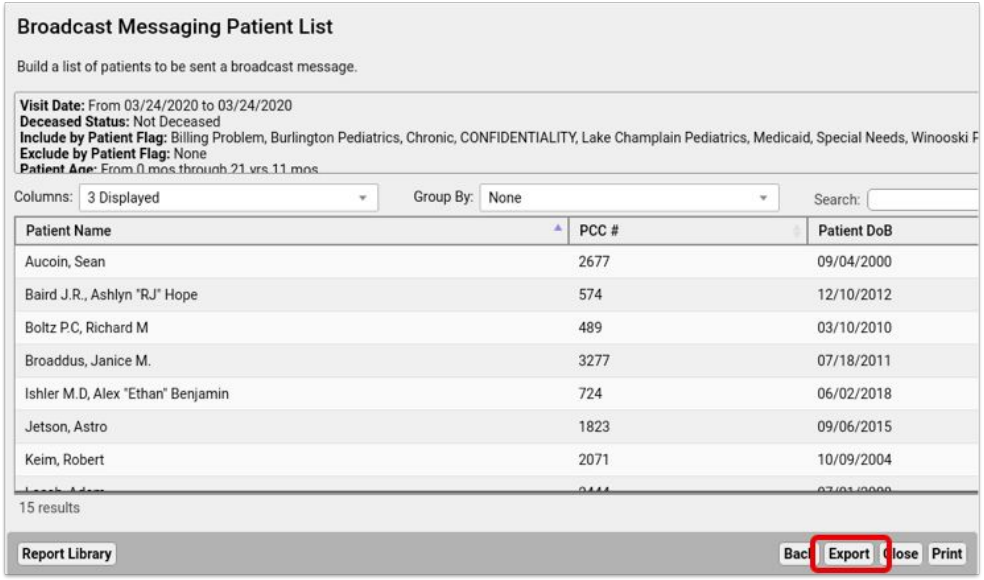


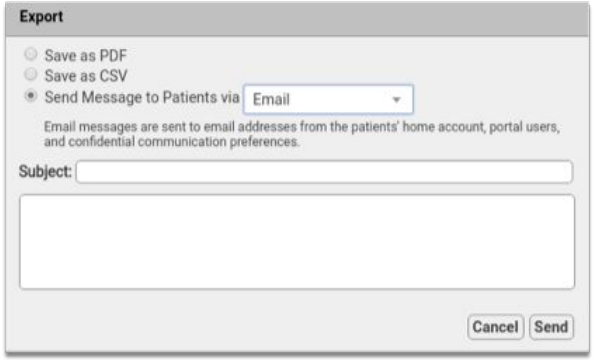
Restricting Report Access





Broadcast Messaging



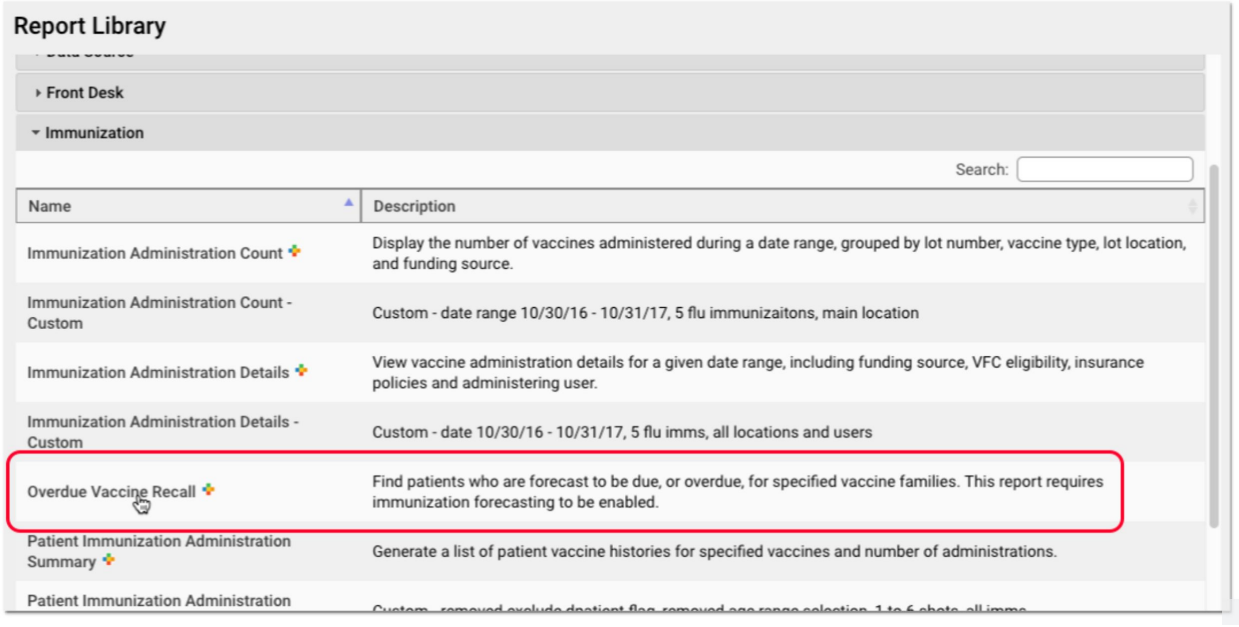


Example - Well Visit Recall

- Start with - Patient Recall -> “Preventive Care Recall”

- Restrict on:
  - Visit date (last 3 yrs to include active patients)
  - Exclude by Patient flag (exclude pats w/ any type of inactive flag)
  - Patient age (focus on specific age range)
  - Physical due date (all past dates through next 90 days)
  - Exclude by scheduled appointment (exclude all well visit appointment types over next 365 days)

Example - Identify 11-12 year olds Due for HPV Vaccine



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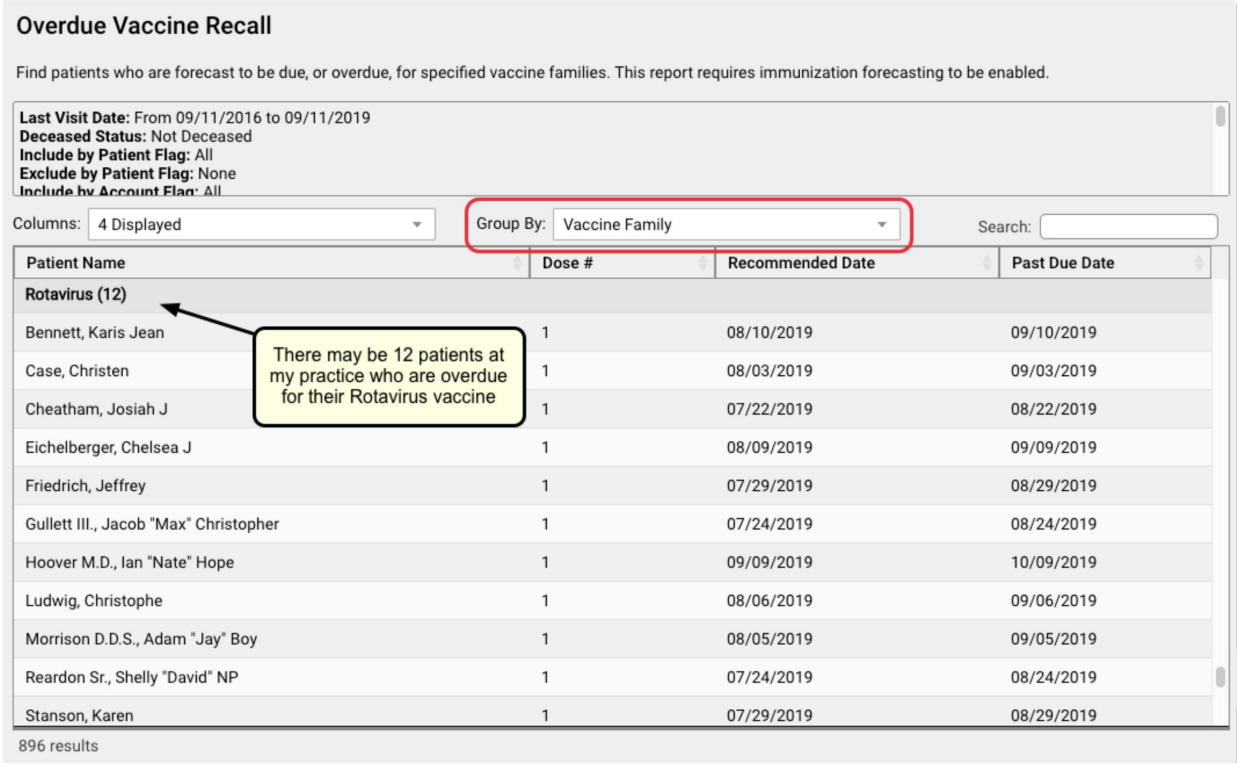

Overdue Vaccine Recall

Find patients who are forecast to be due, or overdue, for specified vaccine families. This report requires immunization forecasting to be enabled.

Last Visit Date: From 09/11/2016 to 09/11/2019
Deceased Status: Not Deceased
Include by Patient Flag: All
Exclude by Patient Flag: None
Include by Account Flag: All

Columns: 4 Displayed | Group By: Vaccine Family | Search:

Patient Name	Dose #	Recommended Date	Past Due Date
Rotavirus (12)			
Bennett, Karis Jean	1	08/10/2019	09/10/2019
Case, Christen	1	08/03/2019	09/03/2019
Cheatham, Josiah J	1	07/22/2019	08/22/2019
Eichelberger, Chelsea J	1	08/09/2019	09/09/2019
Friedrich, Jeffrey	1	07/29/2019	08/29/2019
Gullett III., Jacob "Max" Christopher	1	07/24/2019	08/24/2019
Hoover M.D., Ian "Nate" Hope	1	09/09/2019	10/09/2019
Ludwig, Christophe	1	08/06/2019	09/06/2019
Morrison D.D.S., Adam "Jay" Boy	1	08/05/2019	09/05/2019
Reardon Sr., Shelly "David" NP	1	07/24/2019	08/24/2019
Stanson, Karen	1	07/29/2019	08/29/2019

896 results

There may be 12 patients at my practice who are overdue for their Rotavirus vaccine

Reporting Workshop

- Experience using these srs and Report Library to build and customize reports relevant to your practice
- Refer to exercises or build a report specific to your practice needs

Session Takeaways

1. An understanding of underlying data sources within PCC PM and Report Library
2. Experience and confidence with creating custom reports on your own

References

- Reports Drop-In (In-Person Only)
- Customizing Smart Report Suite (srs) Reports
- Creating Custom Reports Using Report Library

What Questions Do You Have?

Later Viewing

This and all other UC2023 course recordings will be available for later viewing through the app.