What's Driving Hospital Revenue Cycle Performance?









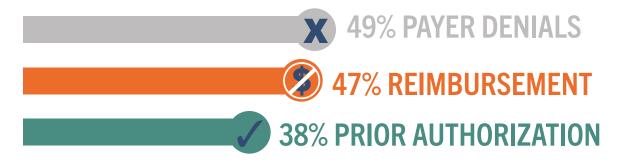
Most of the nation's hospital and acute-care facility leaders BELIEVE revenue cycle solutions are optimized for coding and audits.

YET ONLY 1/3 believe diagnosis-related group (DRG) optimization is a solved problem.

That's according to a recent HIMSS Media survey on healthcare organization management attitudes toward revenue cycle management.*

Here's what's on their minds:





BARRIERS TO BETTER REVENUE INTEGRITY





Finding qualified staff



36% large hospitals

56% small/mid-sized hospitals

44%

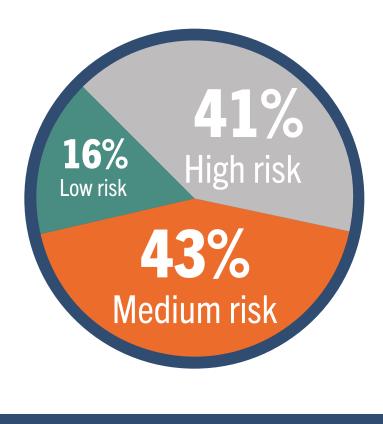


56% large hospitals 35% small/mid-sized

Integrating multiple revenue cycle tools/solutions

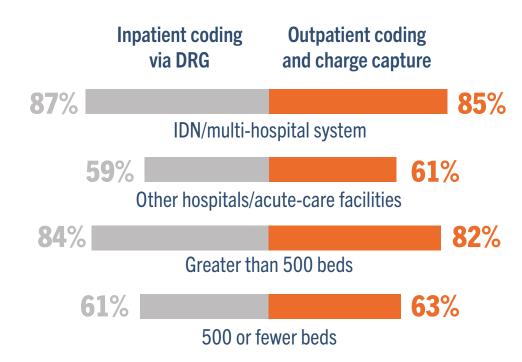
THE STAGE WHERE REVENUE IS MOST AT RISK

Clinical documentation and coding

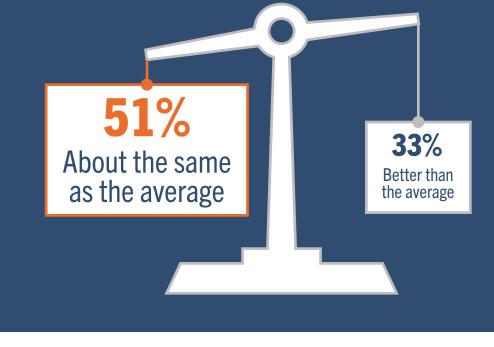


Yet the majority say "YES"

Their revenue cycle management solutions are optimized for:



THEIR INPATIENT CODING ACCURACY MEETS OR EXCEEDS 61% INDUSTRY AVERAGE**



32% Believe DRG optimization is a solved problem

WHAT STANDS IN THE WAY OF ADOPTING NEW SOLUTIONS?

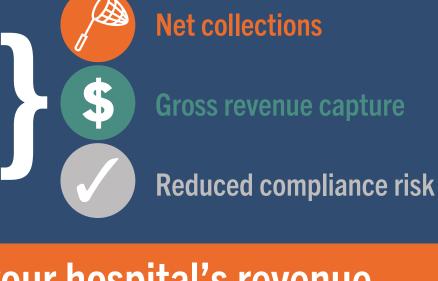






BUT HOSPITALS AND ACUTE-CARE FACILITIES ARE MOVING FORWARD





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This survey was conducted online among 102 qualified hospital and acute-care facility respondents employed in finance, revenue cycle, reimbursement and HIM roles. Besler was not identified as the sponsor.

**The 61% ICD-10 CM/PCS accuracy benchmark is provided by the 2017 Coding Contest, published by the American Health