

**UNIVERSITY OF CALIFORNIA, DAVIS  
AUDIT AND MANAGEMENT ADVISORY SERVICES**

**Epic Workqueue Management  
Audit & Management Advisory Services Project #16-65**

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**MANAGEMENT SUMMARY**

**Background**

The implementation of Epic included the creation of Workqueues (WQs), which act as “lists” of items that require follow-up. WQs within Epic include: patient, referral, charge router review, charge review, claim edit, follow-up, account, credit and adjustment review. The WQs and issues that users see depends on their roles. For example, a claim having several issues could appear in more than one WQ, requiring intervention from multiple staff depending on their area of expertise.

The WQs are primarily populated through automated billing and coding checks within Epic as a means to reduce denials which could delay receipt of payment. If a billing edit, or rule, determines that a claim needs manual intervention, the rule will route the issue within the claim to a WQ in Epic for review by the appropriate staff to address so the bill may be processed.

WQs can be created or modified by four different areas within UCDHS: Information Technology (IT) Epic Resolute, Patient Financial Services (PFS), Health Information Management (HIM) and Admission, Discharge and Transfers (ADT). At the time of our audit, there were 1,668 active WQs assigned to 276 owners.

**Purpose and Scope**

As part of the fiscal year 2016-2017 audit plan, Audit and Management Advisory Services (AMAS) conducted a review of Epic WQs. The purpose of the review was to assess the processes and controls over establishing, working, monitoring and deactivating work queues. The audit scope included active WQs as of October 1, 2016, Accounts Receivable (AR) balances from July 1, 2013 through September 30, 2016, and the Days in AR as reported by UCOP Health System Financial Reporting.

In order to complete our review, we evaluated existing policies, procedures and guidelines related to WQs. We also interviewed personnel from the IT Epic Resolute team, IT Education team, and PFS. We requested a consolidated listing of all WQs from IT, as one did not previously exist at the organization level. From the WQ listing we were able to identify WQ owners, and subsequently sent a survey to the WQ owners that addressed topics such as WQ assignment, review, training and reporting. Finally, we performed data analytics of WQ related items, and worked with PFS to examine a sampling of WQ items.

**Conclusion**

During the period of July 2013 through September 2016, UCDCM had an increase of approximately 17% in Net Patient Services Revenue. During that same period, the Net Patient AR increased by slightly less than 10% indicating an improved collection rate over the periods reviewed. This is confirmed by the reduction of the Days in AR from 53 days down to 43 days over the same period, a rate which is currently the lowest among the five UC Health Science Campuses. Overall, these results are indicative of the strong effort made in the billing and collection process and the improved efficiencies provided by the Epic WQs.

While the overall WQ process is functioning properly, AMAS observed opportunities for improvement that may address employee dissatisfaction with the existing environment surrounding WQs. AMAS distributed a survey to 247 of the 276 <sup>1</sup>individuals identified as WQ owners. Of the 247 surveys distributed, AMAS received 183 responses, or 74%, one of the highest response rates AMAS has experienced when conducting a survey. Survey respondents provided the following notable feedback:

- 22% indicated they were uncertain of the WQs assigned to them for review.
- 42% stated that they wished to obtain additional training on how to clear specific WQ items either for themselves or their staff. Many of these respondents indicated they were unaware of existing training opportunities, signifying a disconnect between those developing or providing the training and the users of WQs. <sup>2</sup>
- 54% had created departmental WQ policies. However, there is no way of identifying if the departmental policies are consistent or in alignment with the expectations of UCDHS Leadership.

Survey respondents also shared concerns regarding notification of changes to WQs, and the availability of detailed aging reports. Aging reports that would enable units to quickly identify the length of time an issue has been in a WQ and the length of time since the date of service would be beneficial so department leaders could address unresolved items or issues that may be approaching the timely filing cutoff date.

Finally, as a result of the survey, AMAS learned that there were multiple individuals listed as the WQ owner whose role within UCD had changed such that WQ ownership was no longer appropriate. A formal process for how to request changes to WQs or WQ ownership does not exist. A process was created during the course of this review but this process has not been formalized and communicated to all areas.

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<sup>1</sup> 29 individuals listed as the WQ owners either could not be located in the PPS system or were shown as terminated.

<sup>2</sup> WQ owners are not always at a management level so opportunities for training or reporting tools may not have been communicated by managers to the owners.

**I. OBSERVATIONS, RECOMMENDATIONS, AND MANAGEMENT CORRECTIVE ACTIONS****A. Documented guidance for WQ oversight**

An overall theme was observed in the survey feedback that even though WQ owners and users are generally addressing the issues in their assigned WQs there is a measure of frustration regarding the resources available to clarify the process. Some of the concerns identified, that if remedied could improve performance, are indicated below.

**1. *Additional policies and/or guidance may be necessary to provide clarity on WQ oversight responsibilities.***

At the onset of the review, AMAS was unable to identify specific policies or guidance for departments regarding the expectations of UCDHS Leadership in the oversight of WQs. The UCDCM Policy Manuals had not been updated to address the Epic WQ structure and additional guidance was not observed. This is not to say that units were unaware of the need to clear WQ issues expeditiously, but the criteria was not documented in a way to support accountability.

During the course of the review of existing UCDCM policies, 1205 Outpatient Charge Submission and 1919 Medical Services Abstracting Unit Charge Submission were updated by PFS to provide guidance on the expected resolution time for an issue to be cleared from certain types of WQs. However, the revisions between the two policies were inconsistent and did not provide guidance for all WQ types.

Finally, while the results of the survey indicated that 54% of respondents have created local policies, there is no way of identifying if the policies are consistent or in alignment with the expectations of UCDHS Leadership.

**Recommendations**

- a. Existing UCDHS policies should be assessed to determine if additional WQ policies or guidance is warranted.
- b. Changes in UCDHS policies governing WQs should be communicated to WQ owners and users so that unit policies can be aligned with UCDHS policies.

**Management Corrective Actions**

1. By July 15, 2017, PFS will review existing policies, and revise them to improve guidance for department WQ owners and users.
2. By July 15, 2017, PFS will ensure changes to UCDHS policies governing WQs are communicated to WQ owners and users.

**2. *Management reports to provide detailed WQ aging are not available.***

As part of our review, AMAS distributed a survey to those individuals identified as WQ owners. It was generally observed in the feedback that owners were aware of the expectation to address WQ issues timely. However, WQ owners also believed that more detailed reporting regarding aging of items in the WQs would be beneficial, such as the length of time the item had been in the WQ and the length of time since the date of service. Current reports on WQ aging provide aging information at a summary level only (e.g., a count of items remaining in a WQ with no age assigned, or reporting items over seven days old in total).

Implementing more detailed reporting on WQ aging and making it available to the WQ owners could aid the departmental review process. An aging report could improve monitoring for compliance with the policy updates requiring WQ issues to be addressed within a specified number of days of arriving in the WQ. This could make owners cognizant of potential denials due to an issue not being resolved prior to the timely filing date and reduce re-work associated with appealing denied claims.

### **Recommendation**

- a. Aging reports should be created for department management level review that will help units prioritize work, establish accountability and minimize denials due to untimely billing.

### **Management Corrective Action**

1. By May 15, 2017, IT will communicate to WQ owners along with WQ owner's management, the existing report workbench templates that are available and request feedback on any additional data elements needed.
2. By December 15, 2017, after collaborating with area management, IT will submit for approval a budget and prioritization schedule to address WQ types where the reporting does not exist or is insufficient, including reports to provide WQ content aging.

### ***3. Training resources and opportunities for WQ owners and users could be improved.***

WQ training currently consists of on-line resources that can be accessed through the UCDHS intranet, and monthly labs sponsored by IT where WQ users can work collaboratively to address issues in their WQs. While these training resources can be helpful to WQ owners and users, they are not well known. Additionally, on-line training resources can be challenging to locate on the UCDHS intranet, and are often not widely applicable beyond the specific WQ type and/or Epic module being addressed.

The predominant concern of WQ owners responding to the AMAS survey was related to education resources and other training opportunities, for both themselves and their staff assigned to resolve the WQs. Of the 74% of WQ owners that responded to the survey, 42% indicated that additional training related to WQ oversight would be beneficial. Specifically, WQ owners requested a resource of common WQ issues and the steps to take to resolve those issues.

The survey results also indicated there was a strong interest in utilizing Reports 2 Web by WQ owners. Only 31% of respondents indicated that they use this reporting tool, with the other 69% reporting not having access or not knowing what it is. As the reports available in Reports 2 Web vary from the reports available in Epic, providing access and education on the uses of Reports 2 Web could be beneficial to departments in managing their WQs.

**Recommendations**

- a. IT should collaborate with stakeholders to reevaluate the training and education resources for WQ oversight, and develop a communication plan to connect the resources to the users.
- b. IT should provide training opportunities to those persons wishing to utilize Reports 2 Web.
- c. IT should consult with UCHDS Web Development regarding anchoring a link to the EMR education resources to the UCDHS Insider Page.

**Management Corrective Actions**

1. By May 15 2017, IT will communicate to the appropriate level of management the existing WQ training opportunities.
2. By December 15 2017, IT will collaborate with stakeholders to identify areas of improvement for WQ training and develop a build plan and timeline.
3. By May 15 2017, IT will add Reports 2 Web training documentation and instructions on how to request access to the EMR website.
4. By May 15, 2017, IT will work with Public Relations to provide a link to EMR training resources as part of the UCDHS Insider Page.

**B. Maintenance of WQ owner field**

***Assigned WQ owners are not always accurate, and there is not clear direction on how to make changes to WQ ownership.***

To provide accountability, an owner is assigned to each WQ. In order to ensure that WQs are appropriately monitored and worked, the assigned WQ owners must be accurate. Results from the survey distributed to those listed as WQ owners indicated that 22% of respondents were not aware that they were an assigned WQ owner and/or were unsure of their responsibilities as a WQ owner. Additionally, some WQs were assigned to individuals, though still affiliated with UCDHS, whose roles were no longer such that the WQ ownership was appropriate.

**Recommendations**

- a. As a report is now available identifying WQ owners, the list of WQs assigned should be confirmed annually.
- b. Information on how a department can request a change to WQ ownership should be published on the EMR education resources page.

**Management Corrective Actions**

1. By December 15 2017, IT will develop a process to confirm WQ ownership on an annual basis.
2. By November 15 2017, IT will update the EMR education resources page to include the process to request changes to WQ ownership.