Whitepaper:

The Cost of a Misfiled Medical Document

■ INTRODUCTION

Misfiling of medical documents is a common problem in all types of medical practices. A document may be misfiled for a number of reasons, and each misfiling comes with a cost to both the practice and the patient.

Often, the systems that practices use to handle the filing of documents rely too much on manual processes. That can lead to misfiled documents and delays in patient care, or, worse, patients being treated without the doctor being aware of the patient's full medical history and possibly ordering procedures that are unnecessary.

This white paper outlines the four most common scenarios that result in document misfiling as well as the cost of each misfiled document from the point of view of both the patient and the medical practice. The paper then shows how using automated indexing can help overcome these challenges and improve practice efficiency as well as patient care. It also provides a detailed checklist of what to look for in such a system.

■ HOW MISFILED DOCUMENTS HAPPEN

Human error has always been a concern in delivering the highest quality medical care possible. With the continued growth of electronic medical records (EMRs), human error still has the largest negative impact.

The four most common reasons for a medical document to be misfiled are:

1. the document is filed under the wrong patient name

2. the wrong naming convention is used,

3. the volume of indexing required in the practice is overwhelming,

4. the "bottom of the bin" issue.

The common denominator in each of these causes of misfiled documents is human error.

MISFILING REASON #1
Filing Under the Wrong Patient Name

Filing documents under the wrong patient name can happen easily. Typical practice software allows document indexers to pick the appropriate patient name from a drop-down menu. While much of the time the indexers will choose the correct patient, but when document volumes are high and the indexer is under pressure to complete their work they can easily get in a hurry and pick the wrong patient name.

Another scenario that results in documents being filed under the wrong patient name can occur when the document has a patient name but no other identifying data such as date of birth. At this point, if there is more than one patient with that name in the system, the indexer must determine which patient the document should be indexed under by making an educated guess.

The problem can then be compounded when the patient name the indexer is looking at is a common one. Take for example a practice that has a large Spanish-speaking patient base. If the chart gives the patient name as "Maria Rodriguez" but doesn't provide any other information, the indexer may have to choose from any number of patients with the same name.

At this point, the indexer may look at the condition for which the patient is being treated, such as diabetes, and attempt to choose a patient file that fits.

Suddenly, an already weak system is now prone to additional error.

MISFILING REASON #2
Wrong Naming Convention

Medical documents are also often misfiled due to naming convention issues. When indexing is being performed manually, it is up to the indexer to make an educated decision on what he or she wants to call a document.

For example, is it a diagnostic test, a diagnostic result, or a consultative report? The lack of a common naming convention means the document may or may not be easily accessible by the physician.

In these cases, even though the document is actually in the patient's file, the physician may not be able to find it if they are looking for a consultative report and it is filed as a diagnostic result. This results in decreased efficiency and wasted time for both the physician and staff as they search for the document needed.

MISFILING REASON #3
Volume of Indexing

For practices with smaller volumes of documentation to index and a large staff to handle these duties, errors from indexing may be less of an issue. However, as the volume of documents requiring indexing increases, the number of misfiled documents grows with it.

A standard indexer is usually required to process 350 documents per day. Each one must be sorted, scanned, and indexed leaving a wide margin for errors to occur. At the same time, many indexers must also perform other office tasks, such as answering phones or handling additional patient inquiries. As the number of documents the indexer must process in a day goes up, it is less likely that they will have the time to dig into the patient's chart and ensure they are indexing the document under the correct patient name.

MISFILING REASON #4
Bottom of the Bin

The bottom of the bin issue is another reason for the misfiling of documentation and also becomes more likely as document volumes go up. When indexers have more documents to process than they can reasonably handle, a patient may return to the practice before documentation from a previous visit has even made it into their file. This particular file may be in the office, but it's at the bottom of the bin because the indexer hasn't been able to process it yet.

◼ WHAT MEDICAL PRACTICES ARE DOING ABOUT DOCUMENT MISFILING AND WHY IT'S NOT WORKING

In a typical medical practice using manual indexing, when a document is missing, the following sequence of events typically will occur:

1. **The physician tells the nurse that they need the document.**

2. **The nurse calls medical records.**

3. **The medical records manager calls the indexer.**

4. **The indexer searches under the patient's name.**

5. **If the indexer can't find the document, they have to determine if they may have filed it under a different patient's name, and, if so. which one.**

6. **While this is happening, the nurse will usually have to contact the original source of the document and request that it be re-sent.**

For every misfiled document, this can result in a delay, lasting from five to 20 minutes—or even longer in some cases—to track it down. Additionally, if the document was filed under the wrong patient name and the practice is unable to acquire a new copy in a timely manner, the physician may be forced to treat the patient without some or all of the critical data necessary in order to deliver the highest quality of care.

The urgency of the situation can also result in a compounding of the problem. Often, when the indexer is able to find the specific document in question, they will index the replacement document. While this may seem like the appropriate step, it often creates duplicates of the document in the file instead. These duplicates often end up in the file under multiple naming conventions depending upon the choices made by the indexer.

◼ THE COST OF A MISFILED MEDICAL DOCUMENT

As previously stated, misfiled medical documents come at a cost to both the patient and the practice. For the patient, the cost is multi-fold. A misfiled document will result in a visit that takes longer than planned, the chance that the visit will not address the full spectrum of their needs and not be effective, and the possibility that their care will suffer due to the physician not having the necessary data for treatment.

For the practice, the first cost comes from the negative impression a misfiled document results in for the patient. When the patient is left waiting for care and wondering why the practice can't find medical records, it creates a concern for the quality of the physicians and their staff in the practice.

The patient may think, "Is this someone I want to take care of my health when they are so disorganized that they can't find my records?"

Documents that are misfiled also result in a decreased efficiency for the practice and increased stress for both the physicians and staff. For each document that must be found, the staff is forced to scramble, creating delays for other patients and a backlog for the entire practice.

◼ WHY AUTOMATED INDEXING IS THE BETTER CHOICE

Automated indexing performs better than manual indexing for five reasons:

1. Eliminates guesswork,

2. Guarantees accuracy,

3. Uses an exception cue,

4. Reduces staffing needs,

5. Allows re-allocation of staff to patient-facing activities.

REASON #1 FOR CHOOSING AUTOMATED INDEXING
Eliminates Guesswork

Automated indexing takes the guesswork out of manual indexing. The computer can't make a mistake on date of birth or pick the wrong patient name based on their condition. It also eliminates the problems with naming conventions by using optical character recognition to "see" certain phrases in the document. This allows for the automatic choosing of the appropriate naming convention based on those approved by the organization.

REASON #2 FOR CHOOSING AUTOMATED INDEXING
Guarantees Accuracy

In automated indexing, the computer guarantees that the appropriate patient is being identified. It looks at first name, last name, and date of birth to ensure that the right patient is chosen. The computer cannot pick the wrong drop-down like a manual indexer. It does not make mistakes.

REASON #3 FOR CHOOSING AUTOMATED INDEXING
The Exception Cue

The reason that the computer cannot make a mistake in automated indexing is that if it is unable to identify the correct patient with 100 percent accuracy, the document will go directly to an exception cue. This means that the practice is immediately notified that there is a potential problem with the document and that it needs to be dealt with in a timely manner.

REASON #4 FOR CHOOSING AUTOMATED INDEXING
Reduced Staffing Needs

Automated indexing results in reduced staffing needs for a practice's Healthcare Information Management (HIM) department.

Automated indexing allows the practice's indexer to go from dealing with 350 documents per day to only a few that result in an exception cue.

REASON #5 FOR CHOOSING AUTOMATED INDEXING
Re-Allocation of Staff to Patient-Facing Activities

With the decreased HIM burden from automated indexing, many practices are able to re-allocate their staff rather than simply reduce it. This allows personnel to focus more on patient-facing activities. Staff members are able to perform an increased number of patient follow-ups, ensure patients remain on-schedule for their exams, and ultimately generate more revenue for the practice.

To find out more about how to eliminate the problem of misfiled medical documents through automated indexing and let you and your staff concentrate on your most important job, providing care, visit indxlogic.com

■ CONCLUSIONS

Many medical practices in the U.S. currently use a costly, inefficient, and error-prone process to index medical documents, resulting in an increased number of misfiled documents. Many of these practices have a pressing need for a new approach.

Automated indexing provides these benefits: gets rid of guesswork in filing documents, guarantees accuracy of document indexing, ensures that any documents that are prone to filing errors move to an exception cue, reduces HIM staffing needs, and allows for the re-allocations of staff to perform more patient-facing activities.

From the integrity of InDxLogic to the reliability of document and data management, InDxLogic DM is the most reliable Health Information Management system in the market.

COMPANY

With more than half a century of combined experience, trusted InDxLogic partners with you to provide innovative solutions for document indexing, data extraction and HIM tasks.

EXPERIENCED SUPPORT

Our trained support representatives provide outstanding customer support. We are committed to your success, providing our partners ongoing project management, implementation management and
training, enabling you to get the most out of your InDxLogic services and software.

SECURITY

InDxLogic uses Secure Socket Layer (SSL) technology for mutual authentication, data encryption and data integrity. SSL is the industry standard security protocol to encode sensitive information, such as health and financial information.

LOCAL AND REMOTE REDUNDANCY

InDxLogic provides Day ForwardTM secure off-site redundant data archive, so that in the unlikely event of a failure of the local enterprise server, the back up document will be available along with the most recent production data.

ACCESS AND EVENT MONITORING

InDxLogic tools include long-term event and login access logging system. The InDxLogic system adheres to demands of regulatory compliance requirements like HIPAA, SOX, GLBA, and PCI.

Excellence in service, software and support: InDxLogic provides innovative software and services combined with full deployment and informatics support to help you offer the quality of care your patients expect.

With InDxLogic software and services, you can customize how your enterprise handles your valuable incoming clinical messages as documents. You will be able to seamlessly communicate with your clinic and enterprise information systems, greatly reducing the potential for error through manual data entry and indexing. InDxLogic will make your clinic more efficient and productive.

For more information about InDxLogic Document Management Solutions, contact InDxLogic at:

SALES@INDXLOGIC.COM

InDxLogic, Inc.

5080 Spectrum Drive

Suite 830 East

Addison, TX 75001

Voice: +1 (877) 473-5496

Fax: +1 (469) 277-3373

Support: help@indxlogic.com

Sales: sales@indxlogic.com

InDxLogic is a complete Document Management tool that automates document indexing, incoming eFax management and chart export, including attachments. InDxLogic captures data and closes orders automatically. For Centricity CPSTM users, our new EOB Manager stores encrypted EOB documents to the CPS PM for easy research by ticket #, check # or batch#. With InDxLogic services, central management tools enable true Health Information Management.