

## How to Get Started!

The AccessKeys<sup>®</sup> are a set of Key Performance Indicators (KPI's) developed by NAHAM's Industry Standards Committee (ISC) for Patient Access. This report is a primer for anyone looking to implement the AccessKeys into their hospital's Patient Access Department. The AccessKeys contain 22 specific KPI's that measure how well front-end teams are performing in six domains:

- Collections
- Conversions
- Patient Experience
- Process Failures
- Productivity
- Quality

To get started, choose 2 or 3 of the AccessKeys that are most important to your organization and where the source data is easily accessible from your ADT/HIS or other reporting systems or ask your PFS, IT or Accounting Department for support. Once you have determined 2-3 processes you want to begin measuring, ask yourself the 6 core questions below: WHAT, WHY, WHEN, WHO, WHERE and HOW.

*Remember, this is an ongoing process. When your first set of goals are achieved, repeat the cycle by tackling other AccessKeys<sup>®</sup> likely to benefit your department.*

### Decide **WHAT** is important

- What are your most important goals this year? Choose the top 2 or 3 KPI's that will measure performance to those goals.
- What is the timeframe that you need to accomplish these goals?
- What format will you use to share this information?
- What data sources do you need? Is it automated? Is the data consistent? Will it be easy to obtain and manage?

### Decide **WHY** it's important

- Why this goal and not another? Is the goal achievable for your organization?
- What are downstream affects to staff, service lines, revenue cycle and patient satisfaction?

### Decide **WHEN**

- When will you measure performance – daily, weekly, monthly or quarterly?
- When will you implement the changes to support the metrics?
- When will the measures be due? Ensure adherence to reporting standards. Set clear expectations.

### Decide **WHO** will own

- Who is your audience? Who will you share this information with?
- Who will gather the measurements and distribute to the teams?
- Who will communicate and educate staff on the measures and process changes to support improvement?
- Who will be accountable for measuring the improvement?

### Decide **WHERE**

- Where will you communicate your information? Monthly staff meetings, leadership meetings?
- Where do you go from here? When you've obtained the data and completed root cause analysis, implement process improvements to help achieve departmental goals and celebrate your success!

### Decide **HOW**

- How will staff be trained to understand the new measures?
- How will you report team versus individual performance and include in recognition programs and annual reviews?
- How will you revise job descriptions to incorporate new performance standards?
- How will you keep it simple enough to manage?