



Arkansas State Medical Board
Centralized Credentials Verification Service

Quality Improvement Report
For the Period 10/1/2009 to 12/31/2009

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Arkansas State Medical Board Centralized Credentials Verification Service

Quality Improvement Report

For the Period 10/1/2009 to 12/31/2009

NOTE: The Quality Improvement Report has changed. The most recent quarter is now shown in the third data column, with the two previous quarters' data in the grey columns to the left of it. Also, a new column has been added to show any positive or negative difference between this quarter and the last quarter.

SECTION 1 -- RELEASE INFORMATION

	Previous Quarter	Last Quarter	This Quarter
Period:	4/1/09-6/30/09	7/1/09-9/30/09	10/1/09-12/31/09
Number of Business Days in Period:	64	62	61

ORDER & RELEASE STATISTICS:

	Previous Quarter		Last Quarter		This Quarter		Volume Change from Last Quarter (%)
	4/1/09-6/30/09		7/1/09-9/30/09		10/1/09-12/31/09		
New Initial Orders in System:	1,489		1,790		1,580		(decrease) -11.7%
New Recredential Orders in System:	1,823		2,074		2,438		(increase) 17.6%
TOTAL New Orders in System:	3,312		3,864		4,018		(increase) 4.0%
Initial Releases Total / % of Total	1,271	42.7%	1,846	47.7%	1,607	38.0%	(decrease) -12.9%
In-Cycle Recred Releases Total / % of Total	997	33.5%	894	23.1%	1,388	32.8%	(increase) 55.3%
Out-of-Cycle Recred Releases Total / % of Total	617	20.7%	1,069	27.7%	1,143	27.0%	(increase) 6.9%
Expedited Initials Total / % of Total	70	2.4%	67	1.7%	87	2.1%	(increase) 29.9%
Expedited Recredentials Total / % of Total	19	0.6%	57	1.5%	9	0.2%	(decrease) -84.2%
TOTAL Releases Completed:	2,974		3,866		4,234		(increase) 9.5%
Average Monthly Releases:	991		1,287		1,411		(increase) 9.6%
Number of Physicians Released:	2,197		2,661		2,855		(increase) 7.3%
Average TAT (Business Days)							TAT change from last quarter
Initials (Target = 15):	6.02		8.40		6.34		(reduced) 2.06
In-Cycle Recredentials (Target = 30):	0.20		2.72		2.57		(reduced) 0.15
Out-of-Cycle Recredentials (Target = 30):	10.81		20.98		15.63		(reduced) 5.35
Expedited Initials (Target = 5):	2.53		3.00		2.76		(reduced) 0.24
Expedited Recredentials (Target = 5):	1.68		2.00		1.57		(reduced) 0.43
% of Files Meeting Target TAT Goals:							% change from last quarter
Initials:	99.8%		99.8%		100.0%		(increase) 0.2%
In-Cycle Recredentials:	100.0%		100.0%		100.0%		(no change) 0.0%
Out-of-Cycle Recredentials:	100.0%		98.9%		99.9%		(increase) 1.0%
Expedited Initials:	96.7%		96.0%		99.1%		(increase) 3.2%
Expedited Recredentials:	100.0%		100.0%		100.0%		(no change) 0.0%

I/R = Initial/Recredential files; Initial=all credentialing elements; Recredential=updated credentialing info from last 2 years.

Releases = Physician profiles provided or "released" to customers via the on-line system.

New Orders = In-coming orders for physician profiles currently in process of being updated but not yet due to customer.

In-Cycle = Recredentialing orders placed according to the license renewal birth month cycle with quicker TAT.

Out-of-Cycle = Recredentialing orders not placed according to the license renewal birth month cycle that have to be updated.

Expedited = Customer ordered rush/expedited profile with a 5-day turnaround guarantee due to their internal time requirements.

TAT = Turn-Around-Time, the time from customer placing the order until the order is provided to them.

NOTE: Telemedicine physician orders are included in Initial orders.

ORDER AND RELEASE STATISTICS: Improvements, Barriers, Recommendations & Follow-Up

Improvements from last quarter:

Average turn-around-time in business days goals improved on all order types; Percentage of files meeting targeted goals improved on all order types, with In-cycle and Expedited Recredentials remaining at 100%, even though there was a slight increase in release volume and physicians represented.

Barriers:

Several organizations were completing order requests in anticipation of the holidays and several more were ordering duplicate In-cycle recredentialing orders before their normal reappointment date in order to switch over to the Birth month cycle, taking advantage of the reduced turn-around-time and discounted price for profiles. Productivity goals included a work ahead cushion to allow for staff being out due to seasonal illnesses and holidays.

Recommendations & Follow-Up:

Continue to adjust staff according to volume, reassigning as necessary to meet flow in each area, work ahead developing cushions as much as feasible, plan for staffing reductions and verification sources also out due to office closings, reduced staff, weather, seasonal illness and holidays, request privilege rosters and work aheads for telemedicine, locum tenens and contract physicians with multiple verifications to be processed. Continue to monitor for process improvement, opportunities to reduce and improve turn-around-time and increase or provide additional training as necessary.

INTERNAL QUALITY AUDIT STATISTICS:

- Internal quality audits are performed as required by NCQA.
- Files are randomly selected, with concentration on staff in training.
- 100% files audited this quarter and reported below were on files released within this quarter.
- Errors reported below WERE NOT reported by customers.

	Previous Quarter 4/1/09-6/30/09	Last Quarter 7/1/09-9/30/09	This Quarter 10/1/09-12/31/09	Increase or Decrease from Last Quarter (%)
TOTAL Number of Releases:	2,974	3,866	4,234	(increase) 9.5%
% of released files reviewed:	25%	25%	25%	(no change) 0.0%
Number of errors in audited files:	115	165	149	(decrease) -9.7%
Accuracy rate on audited files:	84.5%	82.9%	85.9%	(increase) 3.6%

INTERNAL QUALITY AUDIT STATISTICS: Error Types, Barriers, Recommendations & Follow-Up**Types of Errors:**

	OCTOBER	NOVEMBER	DECEMBER
Verification document not in file	12	5	9
Verification document not acceptable	1	1	0
Organization / Entity incorrect	0	2	4
Date discrepancy	1	0	0
Staff Privilege incorrect	3	1	6
Specialty / Clinical Scope incorrect	2	2	2
Good Standing entry incorrect	0	0	1
Data entry errors	4	0	0
Verification date or source incorrect	4	4	7
No clarification follow-up/update	4	1	5
Clarification remarks not entered	2	0	2
Clarification remarks deleted or purged from paper or elect. file	0	0	0
Verbal verification not signed/stamped or entered per process	3	0	0
Documented verbal verification could not be confirmed by source	1	0	0
Insufficient verification attempts	3	0	3
Out-of-state licenses not verified or reverified	1	0	2
No entry or documented attempts for primary practice	8	8	11
Time Gap	3	3	2
Info in file not entered or updated per process	2	2	4
Release error	2	3	3
TOTALS	56	32	61

Barriers:

Although staff have access to many different types of training resources and processes, physician files do not all fit the exact format. Exceptions exist and while most files are generic, there are files that require additional effort to work through or require exceptions to processes. These files slow staff down and then they rush to complete the other entries, creating errors.

Recommendations & Follow-Up:

The management staff continues to create and make available new training resources and processes geared to understanding the purpose and requirement for auditing files. Responsibility and accountability are emphasized continuously. Staff are informed of the results of auditing; volume/output for each person and the whole department. New training processes, review of processes and more extensive random audits by the Program Manager and trainer continue. The training needs of individuals are considered and provided one-on-one. Management continues to stress that no new processes should be randomly created and initiated without prior management review to avoid confusing the staff and avoid non-compliance issues. Accuracy compared to volume and difficulty are now included in all audit scoring. Continue to monitor for process and training improvement. Customers were provided corrected profiles in all cases where errors were noted after release of the profiles. In cases where the orders were released accidentally prior to due date but prior to completion, the files were worked and profiles provided immediately at no charge, or the release error corrected the same day as release.

Note: Quality audits were returned to 25% and a Quality Team identified to assist with quality audits. Files for audit may be randomly selected from release list prior to release. It will be noted at top of this section. The Quality Team

may be randomly selected from release list prior to release. It will be noted at top of this section. The Quality Team also meets periodically to review files and processes and continually communicates with trainers and specialists in order to remain consistent in education and training efforts and provide current resource and process information to credentialing staff.

SECTION 2 -- STAFFING NUMBERS AND REGISTERED USERS

Staffing Numbers:

Note: CCVS staffing tracked due to the impact on quality, training and productivity.

Month:	Last Quarter			This Quarter		
	Jul '09	Aug '09	Sept '09	Oct '09	Nov '09	Dec '09
# of Permanent Staff:	17	17	19	21	20	20
# of Temporary Staff:	0	0	1	1	0	0
Staff Loss (Perm/Temp):	0/0	0/0	0/0	1/1	0/0	1/0

Registered Users:

Total number of user organizations reported each period.

Period:	Previous Quarter 4/1/09-6/30/09	Last Quarter 7/1/09-9/30/09	This Quarter 10/1/09-12/31/09	% +/- from last quarter
Hospital:	234	235	238	(increase) 1.3%
MCO/Other:	40	40	40	(no change) 0.0%
Total Customers	274	275	278	(increase) 1.1%

MCO = Managed Care Organizations, Insurance Networks, PHOs

Other = Clinics, IPAs, Surgery & Outpatient Clinics

REGISTERED USER TRACKING: Barriers, Recommendations & Follow-Up

Barriers:

Tracking limitations and issues remain the same. Complaints about the CAQH and FCVS and confusion still being reported by a few new hospital medical staff credentialing employees, physicians that are not practicing in groups and people assisting the physicians in completing their applications and re-applications. Some physicians have expectations that the CCVS was supposed to complete their applications for them and do not understand why they are still receiving applications to complete and why they must continue to remind these organizations that they must get this information from the CCVS. The ASMB/CCVS has been informed that the state's insurance commission does track insurance products/organizations operating within the state and will provide a listing for the ASMB/CCVS within the next quarter.

Recommendations & Follow-Up:

The management team will send out special invitations targeting these groups to notify them of the planned credentialing workshop hosted by the ASMB/CCVS in March 2010. It is hoped that the physicians who are confused will send the person who is assisting them in completing these forms so clarification and assistance can be provided. However, the Customer Service staff continues to provide this on a one-to-one basis as these are identified. The Customer Service department will continue to follow-up with any non-compliant organizations as required and as they are identified. Continue to monitor for customer service assistance, statute compliance and quality improvement.

SECTION 3 -- CUSTOMER SATISFACTION/FEEDBACK -See Section 3 Addendum attached

CATEGORIES:	Previous Quarter		Last Quarter		This Quarter		Increase or Decrease from last QTR
	4/1/09-6/30/09		7/1/09-9/30/09		10/1/09-12/31/09		
<u>Positive Comments:</u>							
Positive Comments (Total / % of Total):	12	11.0%	7	4.4%	6	5.0%	(decrease) -14.3%
<u>Technology/System Issues:</u>							
Customer Tech (Total / % of Total):	1	0.9%	18	11.4%	16	13.3%	(decrease) -11.1%
CCVS Internal Tech (Total / % of Total):	11	10.1%	15	9.5%	36	30.0%	(increase) 140.0%
<u>Other:</u>							
Profile TAT Delay (Total / % of Total):	0	0.0%	0	0.0%	0	0.0%	(no change) 0.0%
Inconsistent Data (Total / % of Total):	6	5.5%	6	3.8%	16	13.3%	(increase) 166.7%
Credentialing Program (Total / % of Total):	47	43.1%	37	23.4%	6	5.0%	(decrease) -83.8%
Staff Related (Total / % of Total):	44	40.4%	82	51.9%	46	38.3%	(decrease) -43.9%
Known Cause (Total / % of Total):	0	0.0%	0	0.0%	0	0.0%	(no change) 0.0%
TOTAL CUSTOMER ISSUES:	109	2.7%	158	3.7%	120	2.8%	(decrease) -24.1%

# of releases WITHOUT Customer Service issues:	4,114	# of releases WITH Customer Service issues:	120
% of releases WITHOUT Customer Service issues:	97.17%	% of releases WITH Customer Service issues:	2.83%

POSITIVE COMMENTS: Improvements from last quarter

Positive responses regarding the program, staff and customer service from customers and physicians.

CUSTOMER TECHNOLOGY ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT Cust Tech issues:	4,218	# of releases WITH Cust Tech issues:	16
% of releases WITHOUT Cust Tech issues:	99.62%	% of releases WITH Cust Tech issues:	0.38%

Barriers:

Customers had difficulty accessing the website or printing reports through unknown issues with their IT systems.

Recommendations & Follow-Up:

Customer user education issues with new staff unfamiliar with the ordering system, were not accessing correctly or had not checked the User Guidebook. Customer provided with the information, shown how to utilize the Guidebook, provided one-on-one direction or education or were sent written instructions for future use. Continue to monitor for quality improvement or user education opportunities.

CCVS TECHNOLOGY ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT CCVS Tech issues:	4,198	# of releases WITH CCVS Tech issues:	36
% of releases WITHOUT CCVS Tech issues:	99.15%	% of releases WITH CCVS Tech issues:	0.85%

Barriers:

System glitches, down-time, profiles not releasing correctly, customer could not order due to order field unavailability (greyed out), duplicate orders in system, other issues reported,\

Recommendations & Follow-Up:

Customer promptly provided one-on-one assistance by CS or IT staff. Continue to monitor and correct conversion issues/glitches as they are discovered and reported. IT staff preparing for major IT revisions and changes in the new year, as well as clearing user issues and internal system corrections. The customer was able to proceed or receive the required information, or the Customer Service staff emailed the information while IT was working on the issue, if resolution was delayed. Continue to monitor for process improvement.

PROFILE TAT ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT Profile TAT issues:	4,234	# of releases WITH Profile TAT issues:	0
% of releases WITHOUT Profile TAT issues:	100.00%	% of releases WITH Profile TAT issues:	0.00%

Barriers:

There were no Profile TAT issues reported by customers this quarter.

Recommendations & Follow-Up:

Continue to monitor fallouts to prevent customer service issues, for continued improvement.

INCONSISTENT DATA ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT Inconsistent Data issues:	4,218	# of releases WITH Inconsistent Data issues:	16
% of releases WITHOUT Inconsistent Data issues:	99.62%	% of releases WITH Inconsistent Data issues:	0.38%

Barriers:

Inconsistent data issues reported by customers this quarter were all on international medical graduates or newly licensed physicians listing foreign residencies or fellowships as employment or staff appointments and listing hospital staff privileges on insurance participation applications when their application with those hospitals had not yet been received or was still in process. This caused the organizations to contact the CCVS to reverify, assuming the profiles were incomplete.

Recommendations & Follow-Up:

All issues of inconsistent data must have documented verification/clarification attempts in the file and in the system. The organization is always notified asap of the result of their query, or as soon as a response can be obtained from the organization in the case of foreign verification attempts. Will continue to monitor for quality purposes and to obtain and provide updated profiles to customers as needed, and as determined by inconsistent data reports.

CREDENTIALING PROGRAM (MEDSUITE) ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT MedSuite issues:	4,228	# of releases WITH MedSuite issues:	6
% of releases WITHOUT MedSuite issues:	99.86%	% of releases WITH MedSuite issues:	0.14%

Barriers:

"Clean-up" of old entity names or name changes is ongoing and in most cases the change was made during the file release process causing some queries into those entries.

Recommendations & Follow-Up:

These issues will continue to improve as clean-up is completed and staff identify the wrong entities in their selection process and correct prior to submitting for release audit. Some of these issues were reported by retired or out-of-state physicians whose C CVS profiles, while provided to them in their renewal packets, have never been provided to organizations credentialing them for Arkansas. They have always worked out of state and their profiles are audited and corrected at notification. The customer or physician (if during renewal process) was always provided with a corrected profile immediately upon notification. Continue to monitor for staff training, process improvement, customer service improvement and timely resolution.

STAFF-RELATED DATA ENTRY ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT Staff-Related issues:	4,188	# of releases WITH Staff-Related issues:	46
% of releases WITHOUT Staff-Related issues:	98.91%	% of releases WITH Staff-Related issues:	1.09%

Barriers:

New staff continuing in training, volume increase for auditing and productivity causing rushing in processes by staff. Changing of some internal processes is not always easy for staff to adjust to and tends to slow them down as they attempt to change habits they've become used to over a period of time.

Recommendations & Follow-Up:

All training of the staff, and the trainer, are geared toward following the general processes but also with the knowledge and identification that some entries are specific to individual physicians or as a waiver decision at licensure. The need for processes to undergo review for process improvement and to assure the customer is always provided the most current and accurate product means the staff may have to learn new internal processes, or the internal processes will need to change to accommodate those goals. Continue to monitor for quality improvement and training improvement. Customers provided with new profiles where applicable, staff provided with documented training where applicable.

KNOWN CAUSE ISSUES: Barriers, Recommendations & Follow-up

# of releases WITHOUT Known Cause issues:	4,234	# of releases WITH Known Cause issues:	0
% of releases WITHOUT Known Cause issues:	100.00%	% of releases WITH Known Cause issues:	0.00%

Barriers:

There were no Known Cause issues this quarter so no barriers are reported.

Recommendations & Follow-Up:

Continue to monitor processes for improvement opportunities.

CUSTOMER SERVICE SURVEY: IT continues to work on making online surveys possible.

QI Report - Section 3
October 1, 2009 - December 31, 2009

Section 3 - Customer Satisfaction/Feedback

CATEGORIES	
6	Positive Comments
Technology/System Issues	
16	Customer
36	CCVS-Internal
Other	
0	Profile TAT Delay
16	Inconsistent Data
6	MedSuite Program
46	Staff Related
0	Known Cause
120	Total Customer Issues (not including positive comments)

In addition to the above, the following issues were addressed by the Quality Assurance/Customer Service Department:

522	Miscellaneous Customer Service issues: <i>Resolved or completed.</i>
3	Requests for incomplete profiles. <i>Completed.</i>
66	Requests for rosters, roster updates or roster inquiries because the organization did not provide one to the CCVS prior to the old roster expiration. Requests for signature pages on rosters that were provided, requests for dates on rosters or privilege or good standing information that was left off of roster. <i>Completed/resolved.</i>
10	Requests for order status checks. This was predominantly due to new customer staff unaccustomed to the system. Cannot pull files from working status to continually check status as this delays the release process for the other customers and physicians who are waiting on completion. <i>Resolved.</i>
309	New user staff education requests on how to order, form requests, where to look, difference between an attestation and authorization & release, profile definitions. <i>New user customers are always provided with new user packet of information that provides all information, customers are provided with one-on-one assistance whether they are new users or users who have forgotten how to do something.</i>
23	Billing Questions; Account Administration Questions; setting up new users or accounts; billing or credit card questions; changing log-in, forgot passwords, changing account administrators or removing users from account access; requesting partial refunds; organization signed up for wrong access; account locks; declined credit card notices
125	Returned A&Rs to customers due to wrong or unknown customer name in the organization blank, misdated or not dated A&Rs, stamped signatures, illegible names and license numbers or the organization name was not listed on the A&R or was not listed in the CCVS customer list. <i>Contact or follow up could not be made with those organization or physicians where the name was missing or illegible. All others corrected and, once returned, the A&R and order access was allowed. Any A&R no returned by release due date were canceled until the A&R was received and if elements had not expired in the interim the file was immediately released.</i>
3	Returned Attestations to customers due to wrong license number, wrong date, undated or questions not completed.
183	Cancellations: (22) customer/user initiated due to need to change order type to expedite, duplication of orders, ordered in error, ordered too soon; (4) CCVS Management initiated because the order could not be completed by due date due to no fault of the CCVS.
130	Requests for DEA/Malpractice updates. Expired after profile was released, not showing updated on web, physician office states renewal not in yet. <i>Notified customer once received.</i>
6	Physician requests for personal profiles. <i>Profiles were faxed, e-mailed, or mailed to physician at their request.</i>
9	Other physician questions or education provided by Customer Service.
6	Other physician issues transferred out of CS (license application status; questions regarding licensure or renewals; CME questions; Regulation 17 and Regulation 7 questions).
18	CCVS notified customer of documents or information needed to complete order (updated A&R, Attestation, other documentation, or physician's contact info).
27	Updated profile provided to customer within 30 days of original release
27	Facility emailed interim update to current physician roster.

**QI Report - Section 3 Breakdown
October 1, 2009 - December 31, 2009**

#	Section	Category	Code/Issue	Month											
				10	11	12	Grand Total								
	POSITIVE:	A. Positive	1.00 Positive comments from customers												
	POSITIVE: Total	A. Positive Total		3	1	2	6								
	MAIN CATEGORIES:	B. Technology-Cust	2.01 Difficulty accessing website 2.03 Difficulty printing report 2.99 Other Technology-Cust Issue	4	2	2	8								
	B. Technology-Cust Total			4	2	2	6								
	C. Technology-CCVS	3.01 System down 3.02 Profile did not release properly 3.03 Customer cannot order (fields grey) 3.05 Customer cannot access DEA/Malp 3.06 Duplicate order in system 3.99 Other Technology-CCVS Issue 3.99 Primary License indicator incorrect	1	10		11									
	C. Technology-CCVS Total			1	10		11								
	E. Inconsistent Data	5.00 Org info different than CCVS	10	13	13	36									
	E. Inconsistent Data Total		11	5		16									
	F. MedSuite Issues	6.00 ***Do Not Use*** issue 6.00 MedSuite Issues	11	5		16									
	F. MedSuite Issues Total		1	1		2									
	G. Staff Related	7.01 Profile released with expired item(s) 7.03 Profile missing information 7.04 Time gap in history not accounted for 7.05 Incorrect date(s) 7.06 Data entry error(s) 7.08 Document entered but not scanned 7.99 Misc. Staff Errors	1	4	1	6									
	G. Staff Related Total		4	9	2	15									
	MAIN CATEGORIES: Total		19	20	7	46									
	MISCELLANEOUS:	J. Misc./Other	21.01 Info requests sent to physicians 21.02 Document rec'd, OK to reorder 21.04 Telemed file at/near completion, OK to reorder 21.05 Verification request sent to customer 21.06 Customer referred to another department or agency 21.99 Asked telemed firm to give us list of potentials 21.99 Attestation sent to contract firm for physician 21.99 Contacted customer in desperation for attestation	142	138	127	407								
	MISCELLANEOUS: Total		1	1	1	3									
	Grand Total		33	31	22	86									

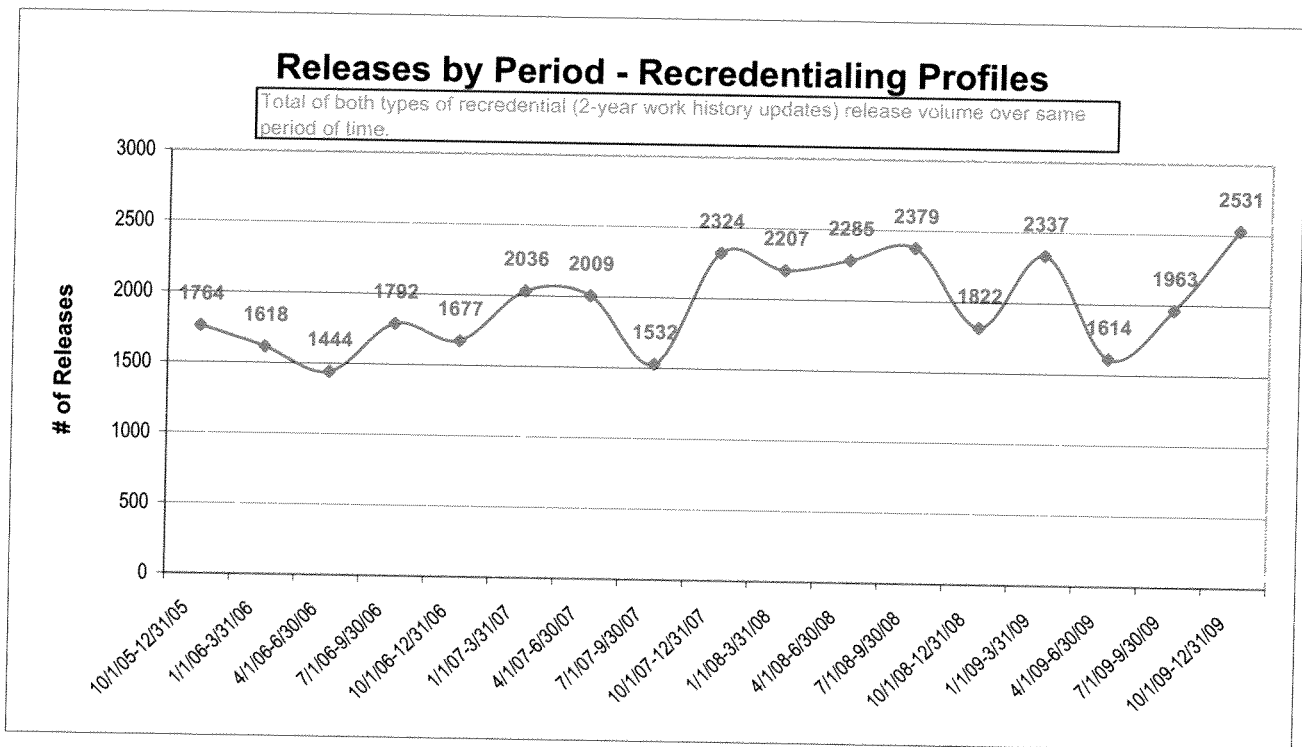
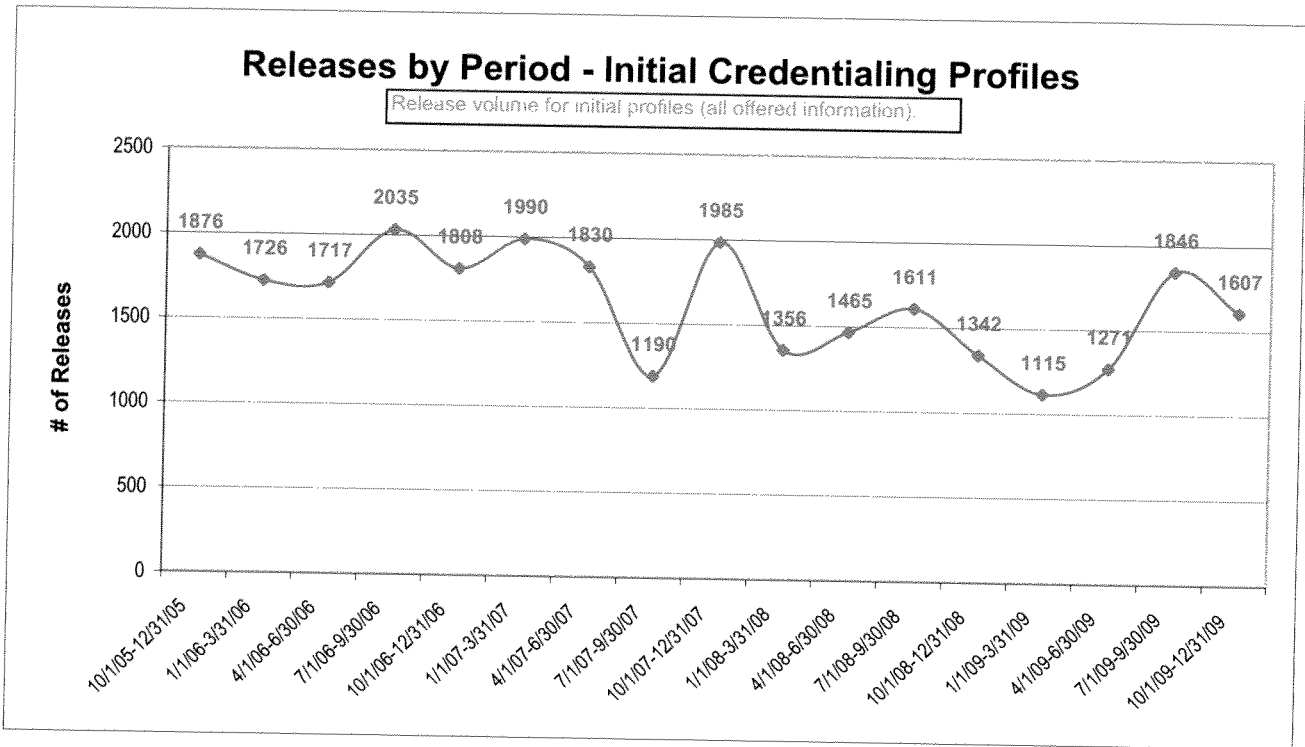
**QI Report - Section 3 Breakdown
October 1, 2009 - December 31, 2009**

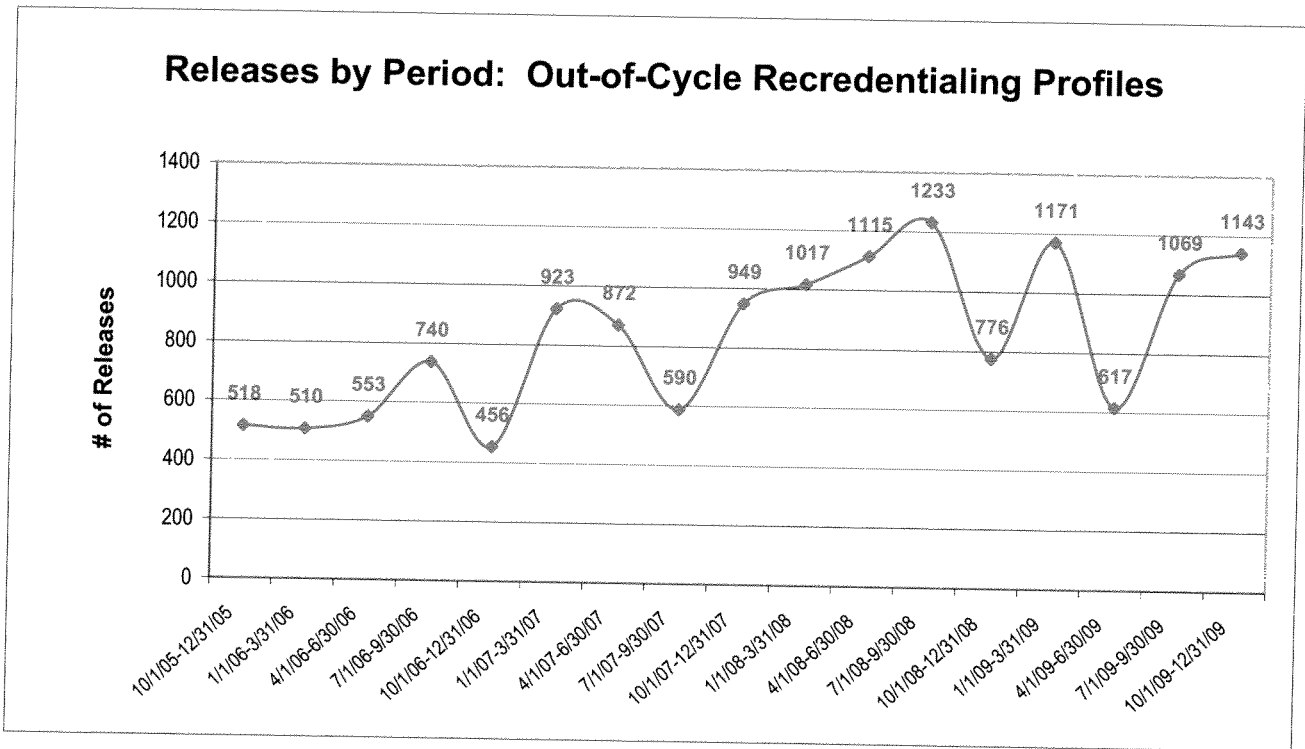
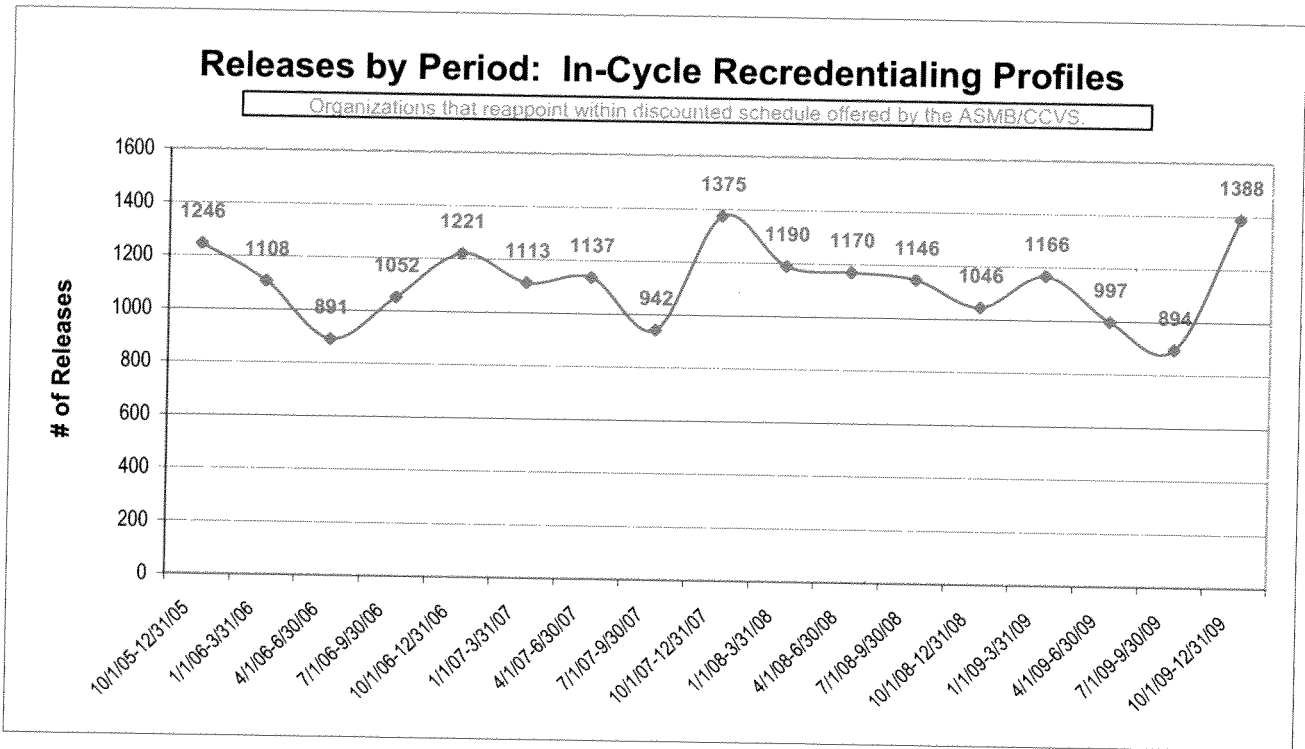
17.57 Unable to complete by due date				1	1
17.99 Other CCVS Cancellation					1
R. Cancellations-CCVS Total					
S. DEA/Insurance		3	2	4	9
18.01 Customer request to update DEA		11	10	1	22
18.02 Customer request to update insurance		25	29	50	104
18.99 Other DEA/Insurance issue			3	1	4
S. DEA/Insurance Total		36	42	52	130
T. Personal Profile Sent to F20.01 Physician requested personal profile		1	2	3	6
T. Personal Profile Sent to Phys Total		1	2	3	6
U. Other Physician Issue	20.99 Other Physician Services Issue	1	2	6	9
U. Other Physician Issue Total		1	2	6	9
V. Phys referred to Other De	20.02 Physician referred to another department or agency	2	2	2	6
V. Phys referred to Other Dept Total		2	2	2	6
W. Order Issues	16.01 Cust notified attestation expired/expiring	4	1	1	6
	16.02 Cust notified A&R expired/expiring	2	3	3	8
	16.99 Other Order Issue		1	3	4
W. Order Issues Total		6	5	7	18
W. Profile Update	19.01 Cust requested updated profile		1	1	2
	19.02 Cust requested update, not provided	1	2	1	4
	19.03 Update provided to customer proactively	11	9	1	21
W. Profile Update Total		12	12	3	27
X. Roster Updates	10.03 Facility sent change/addition to roster	5	5	17	27
X. Roster Updates Total		5	5	17	27
MISCELLANEOUS: Total		649	386	432	1467
Grand Total		702	433	458	1593

Arkansas State Medical Board

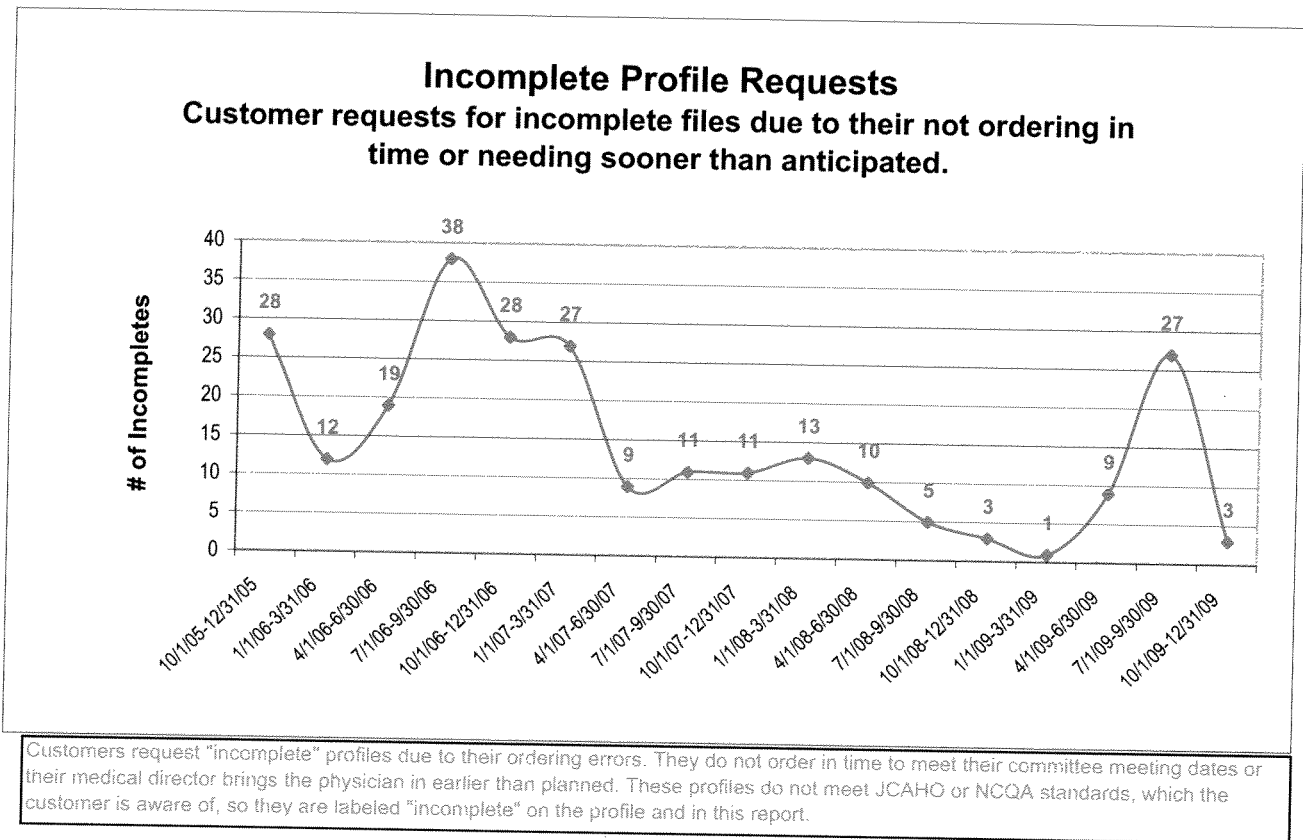
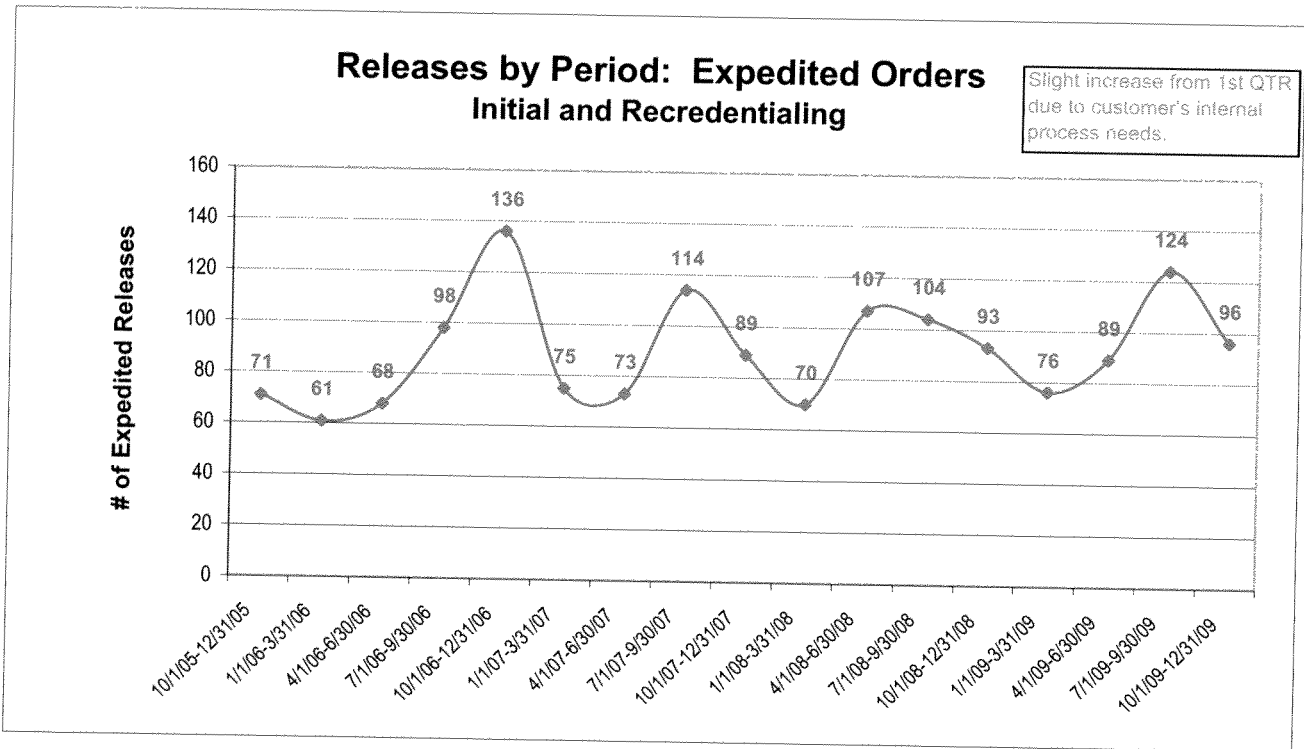
Quality Improvement Report for the Period 10/1/2009-12/31/2009

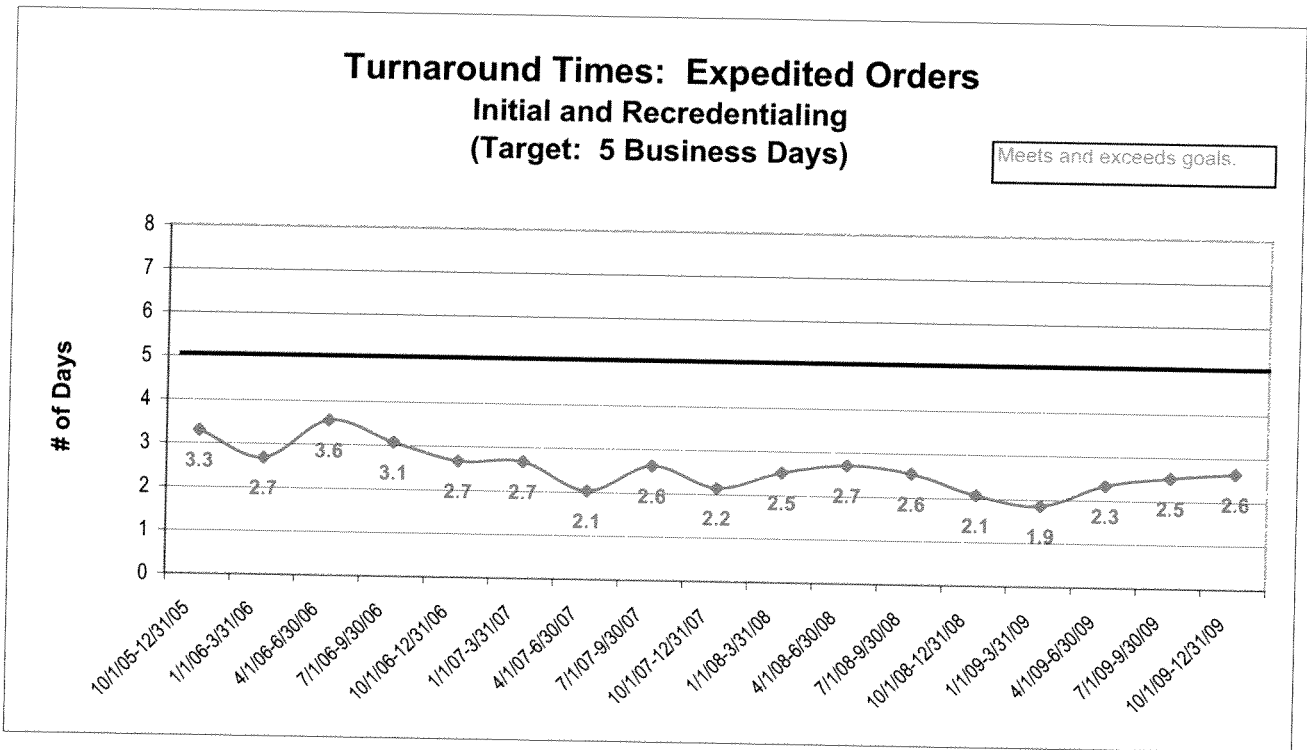
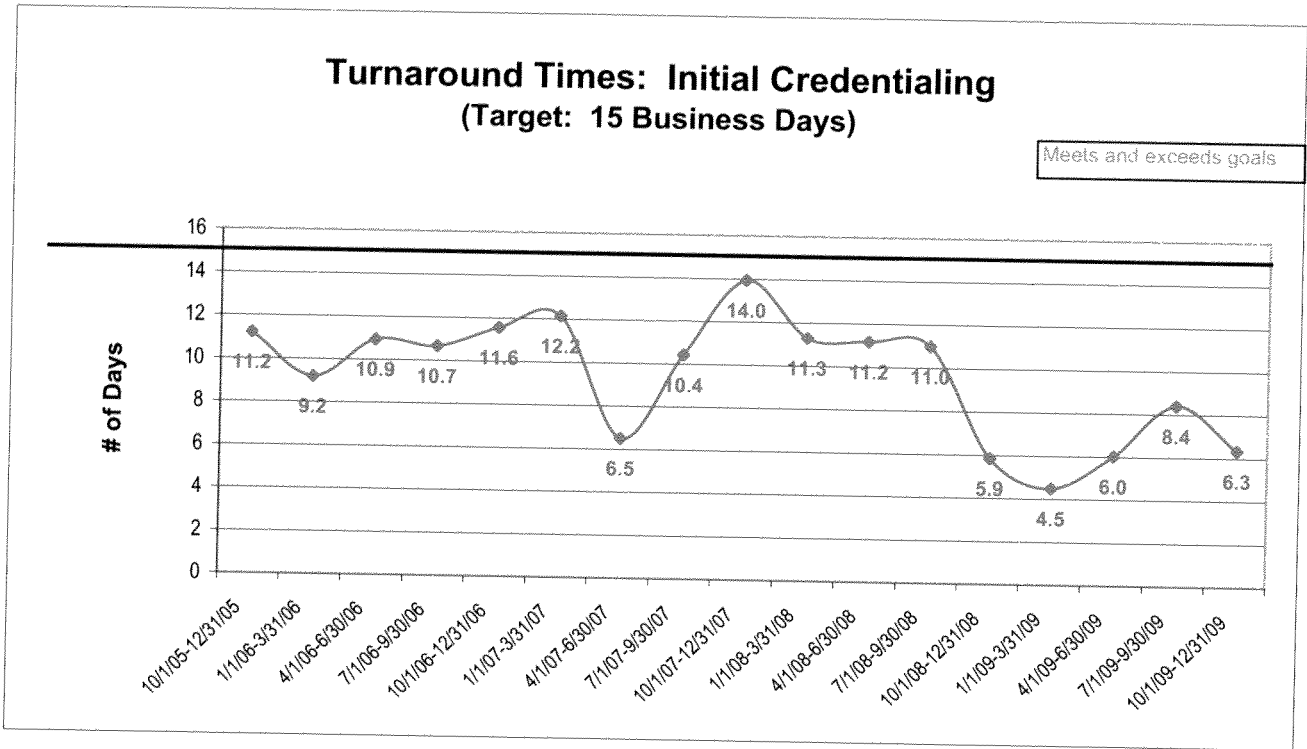
Charts & Graphs

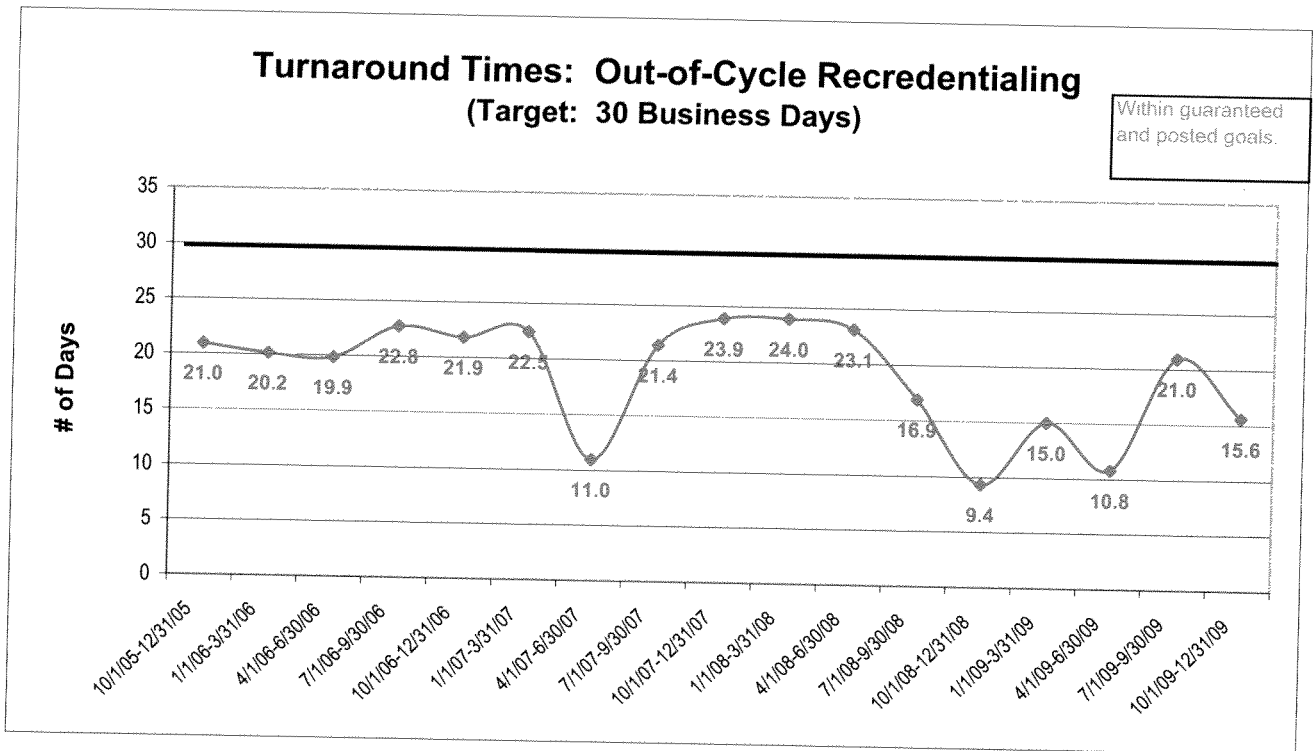
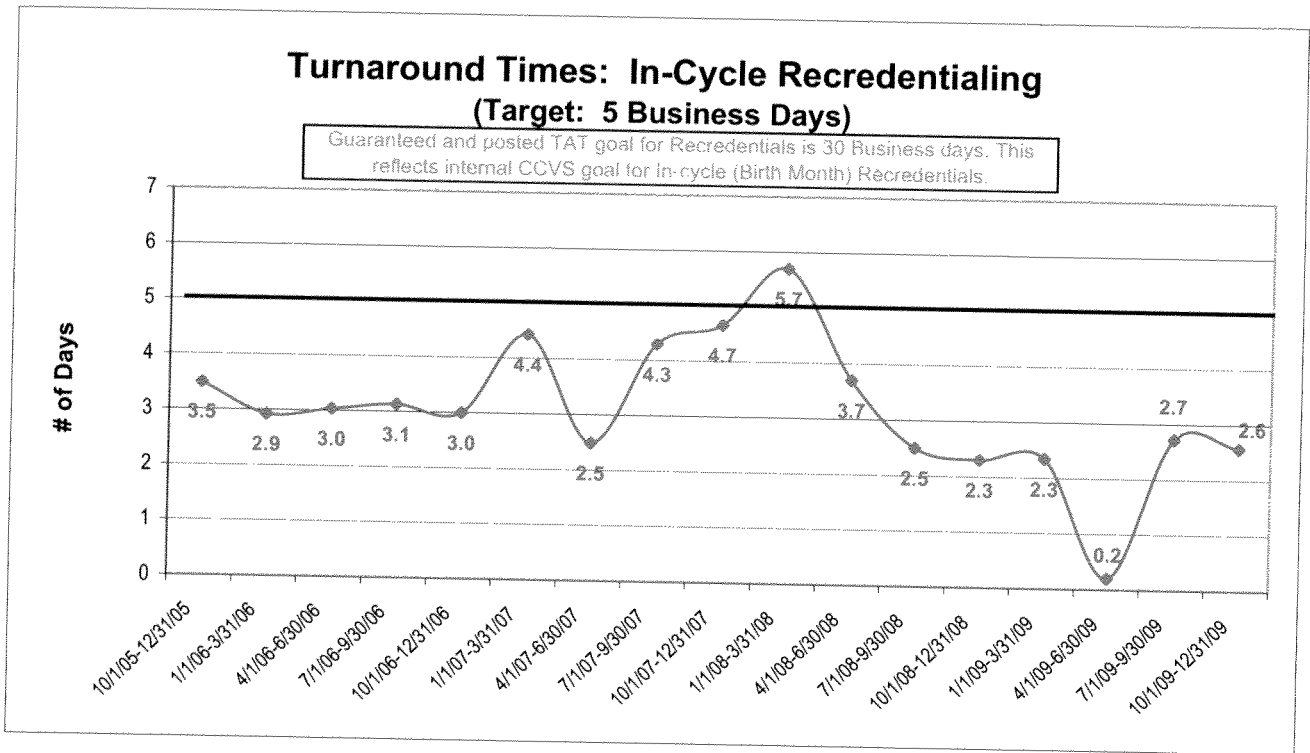


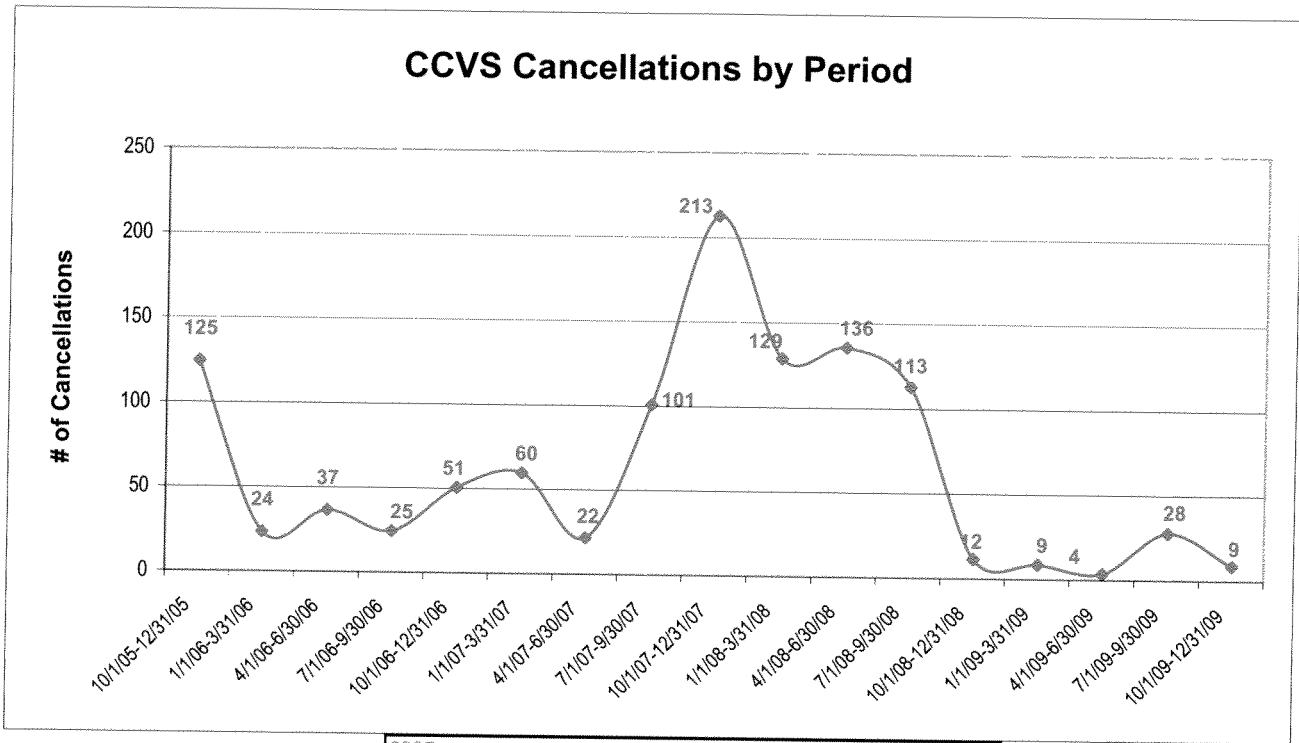
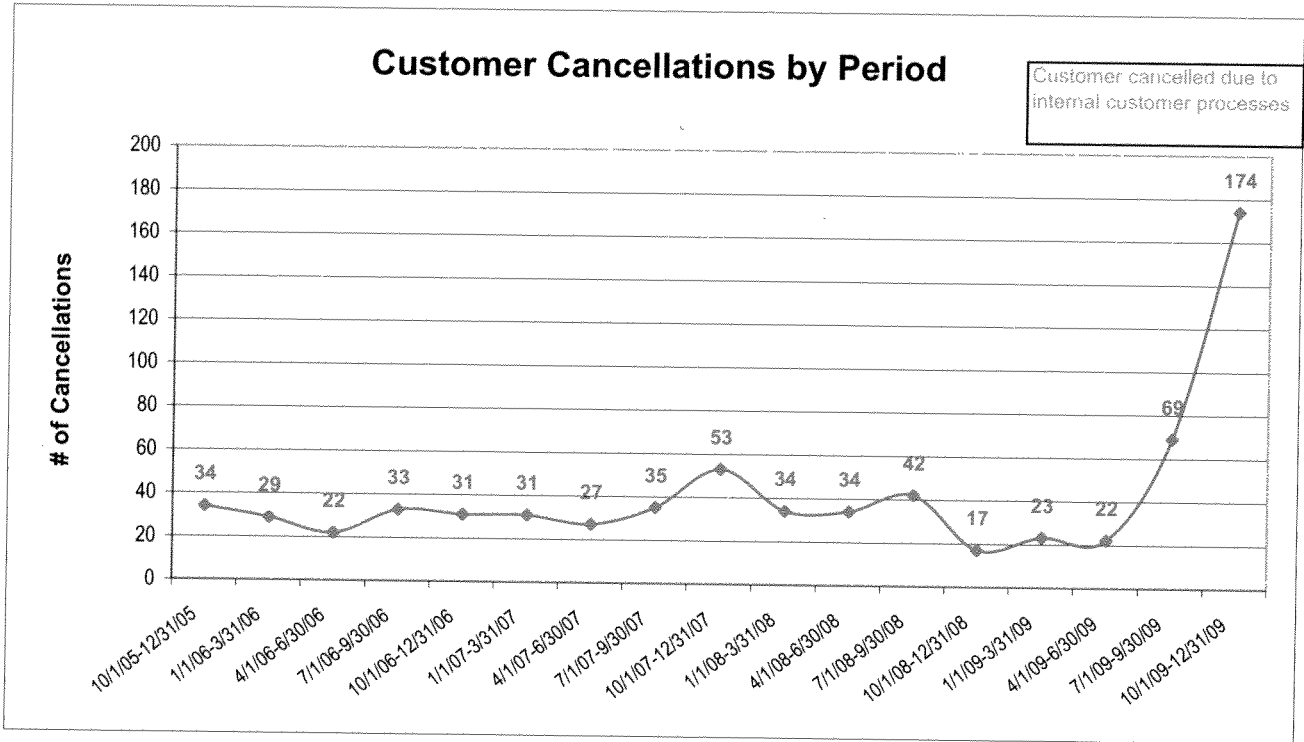


Recredentialing schedules vary per organization from every year, every two years or every three years. Not all organizations choose to recredential in-cycle for the discount due to their internal reappointment schedules.

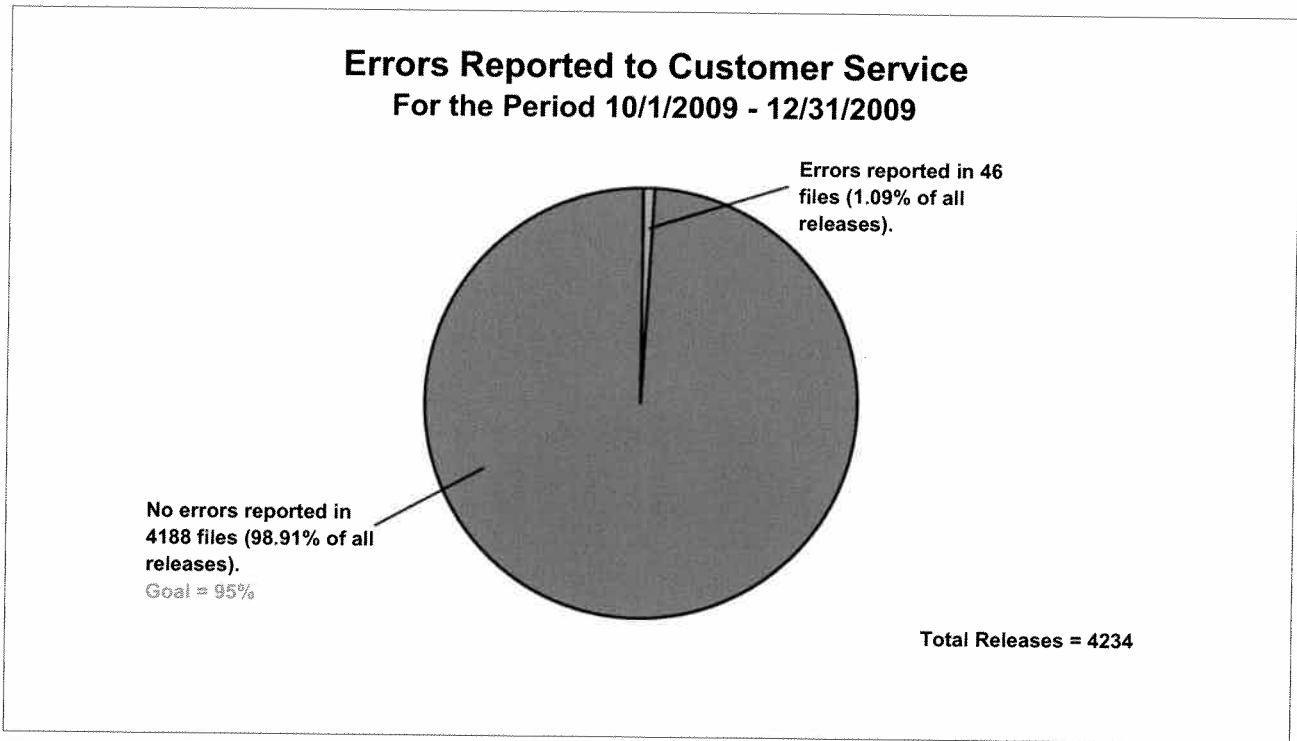
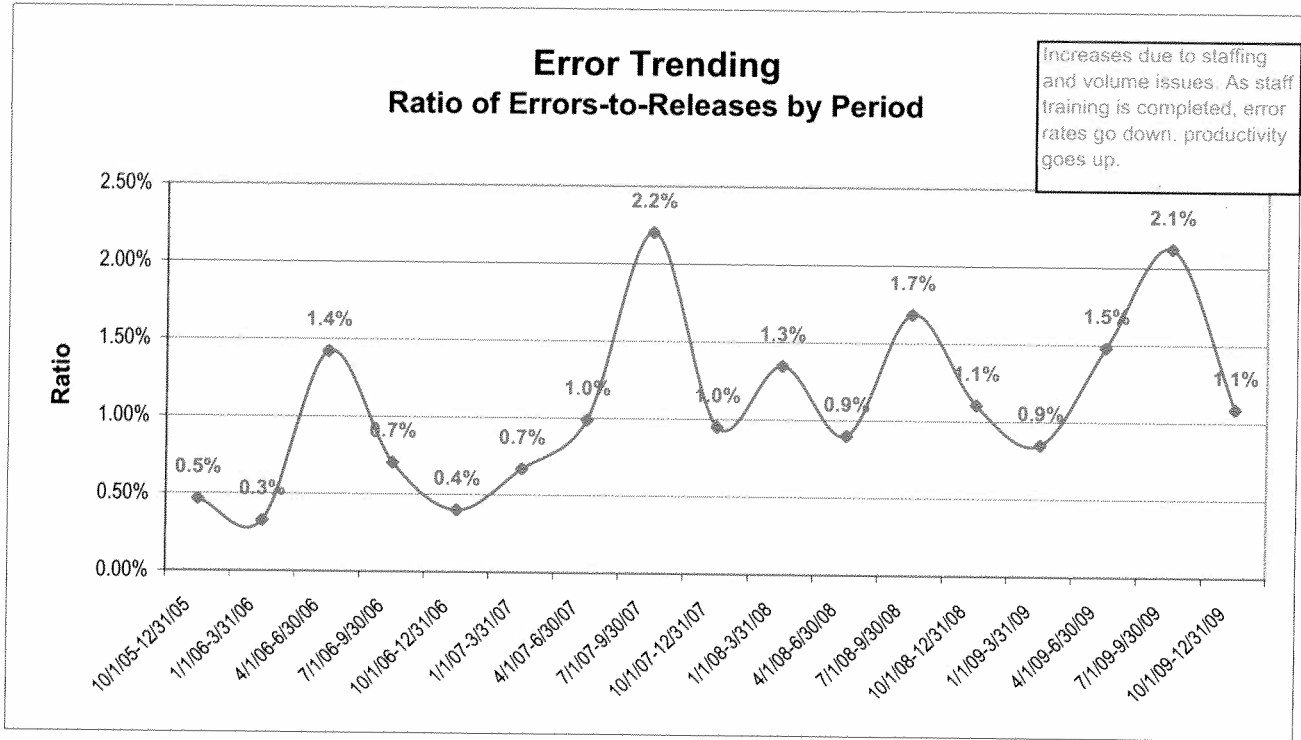






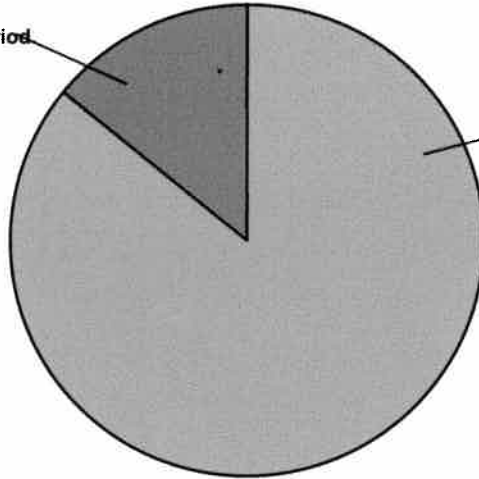


2007 cancellations due to failure to obtain attestations from physicians. Decrease in 1st QTR but increasing again in 2nd QTR due to telemed cancellations.



Errors Found in Internal Audit For the Period 10/1/2009 - 12/31/2009

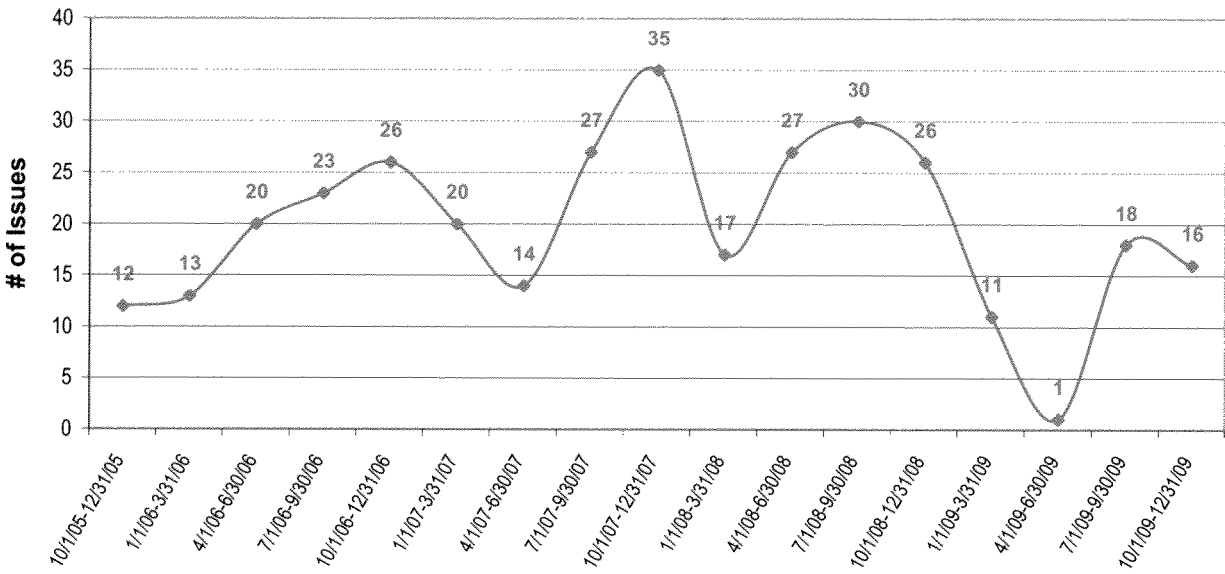
Errors were noted in
14.1% of files
audited this period.



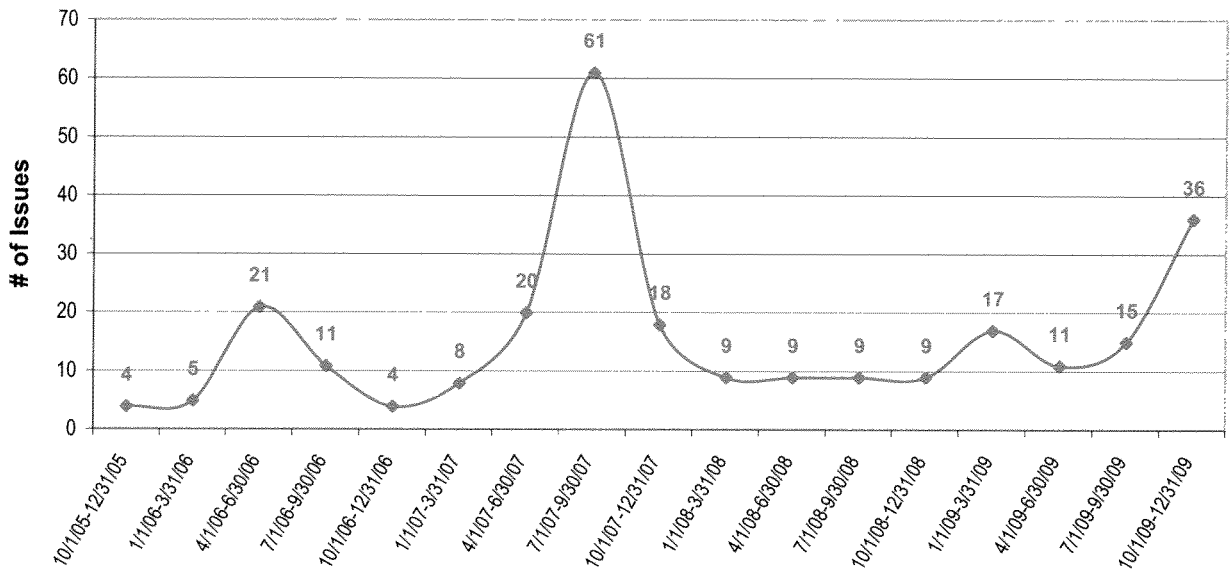
85.9% of files audited
this period had NO
errors noted.
Goal = 95%

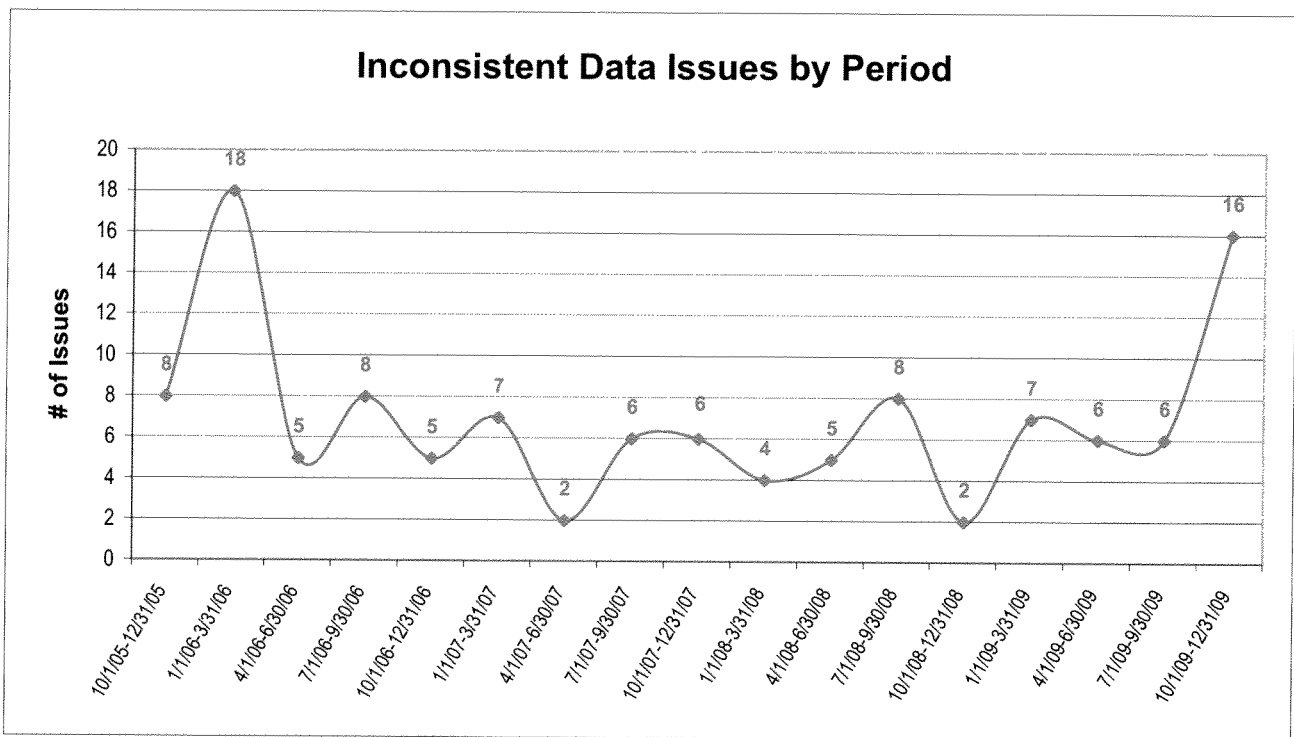
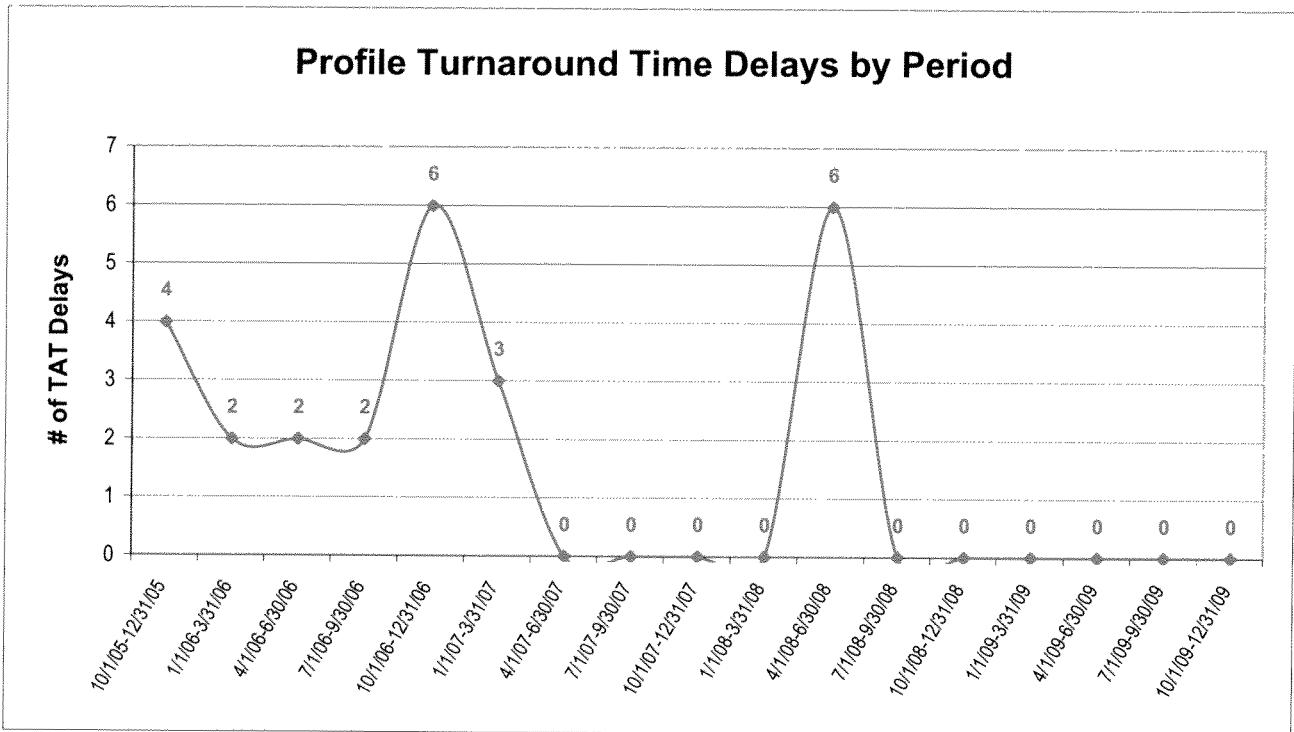
Total Audits = 1059

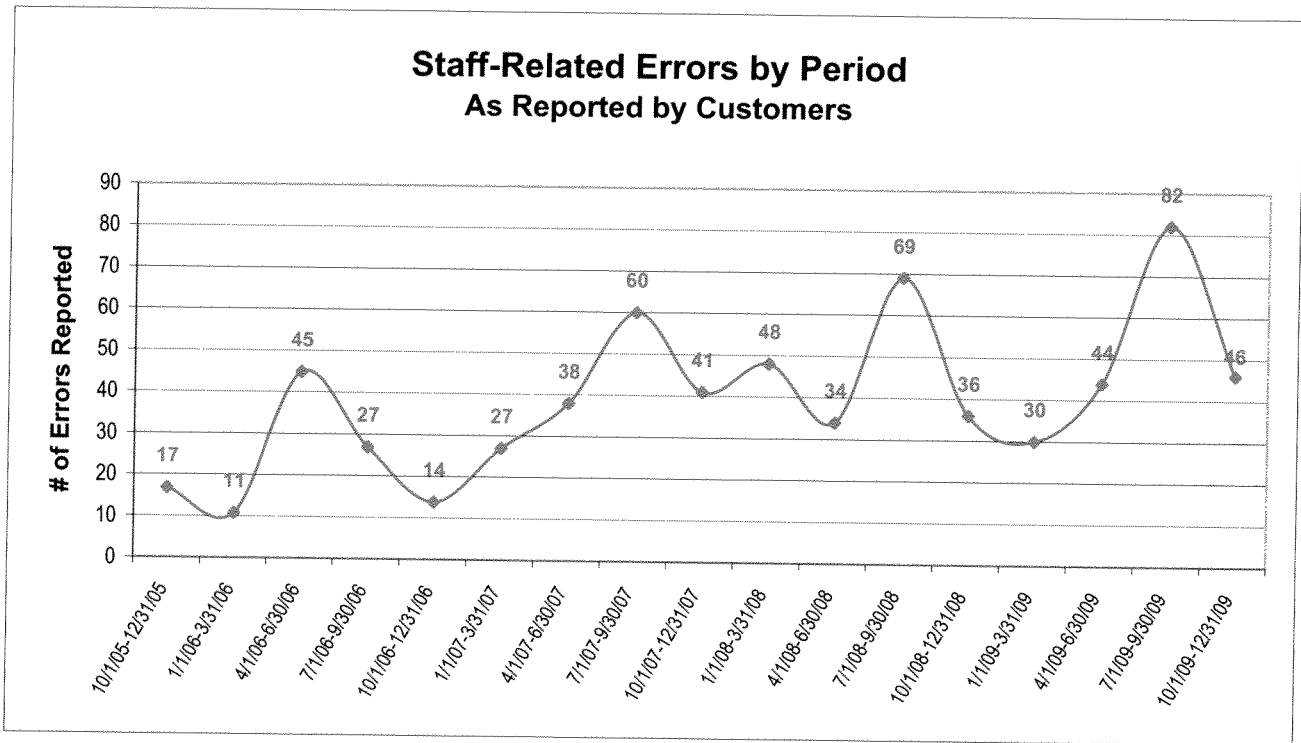
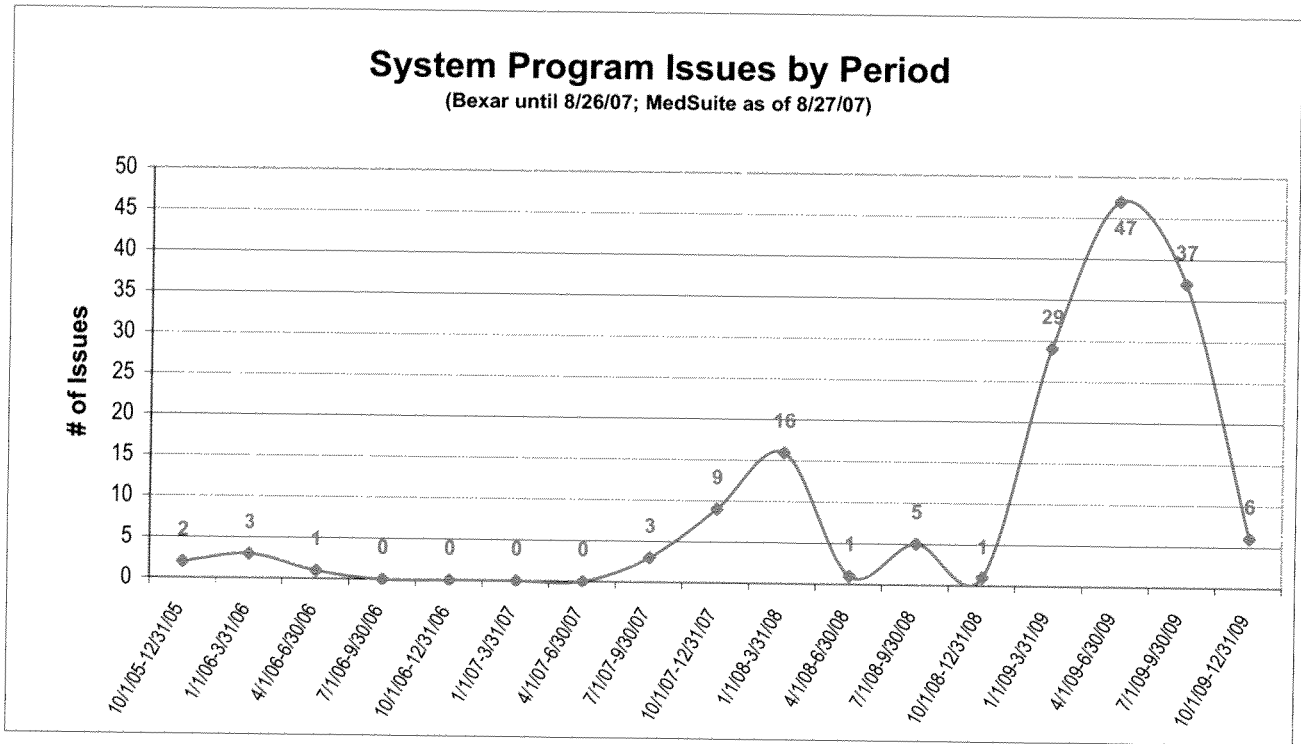
Customer Technology Issues by Period



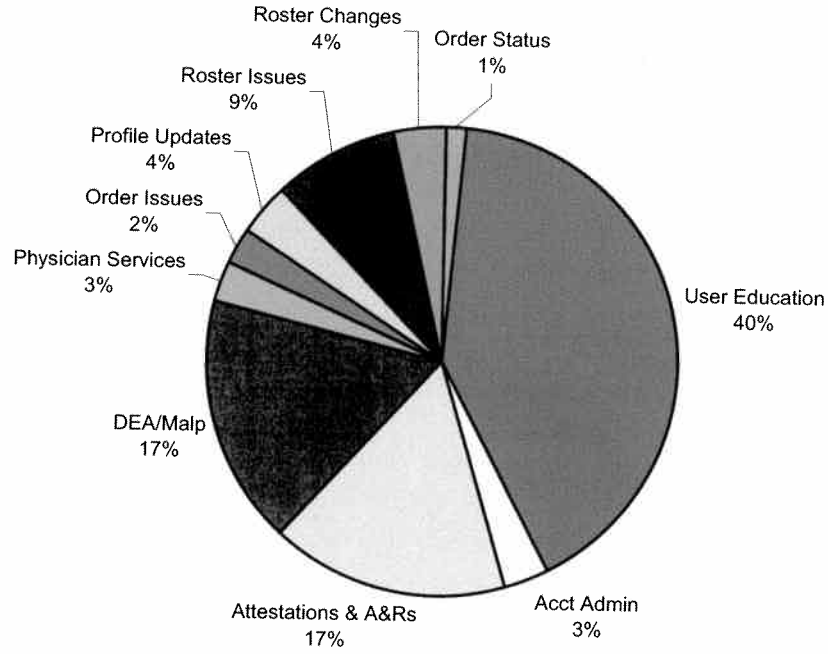
Internal Technology Issues by Period





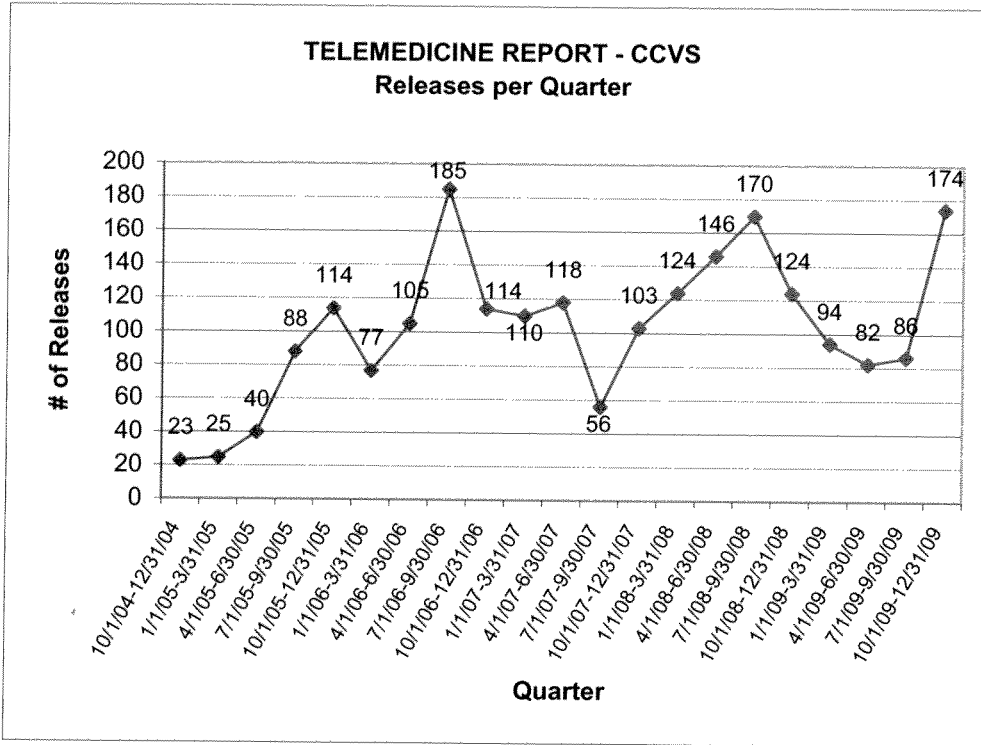


Breakdown of Miscellaneous Issues Not Previously Reported For the Period 10/1/2009 - 12/31/2009



Total issues: 756

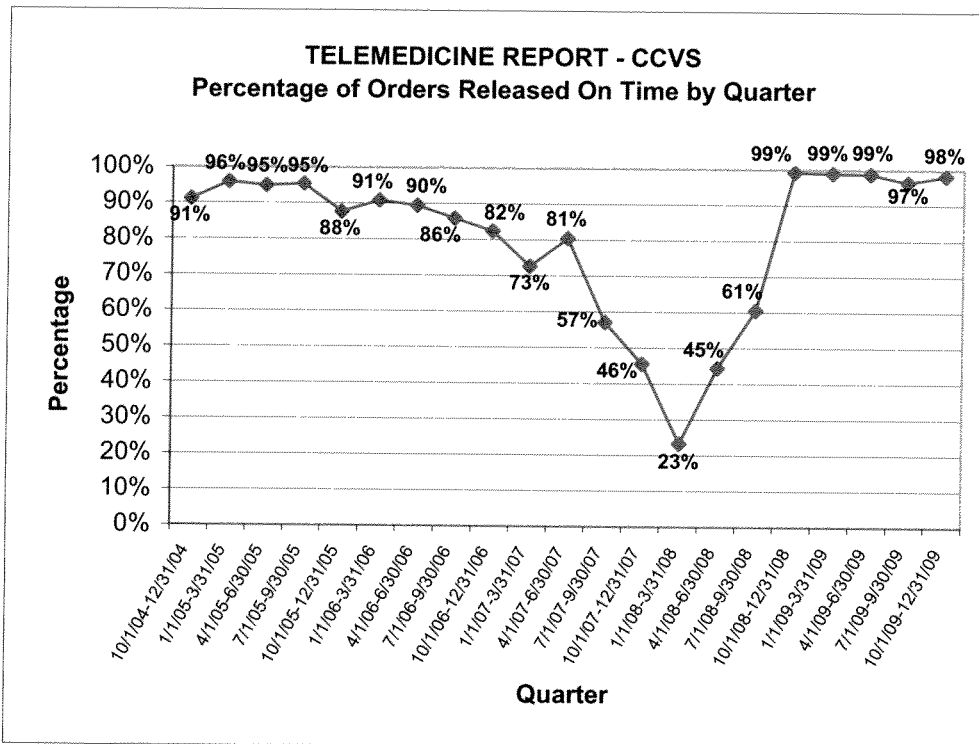
**QI Report - Telemedicine
10/1/2009-12/31/2009**



This graph shows the number of releases per quarter.

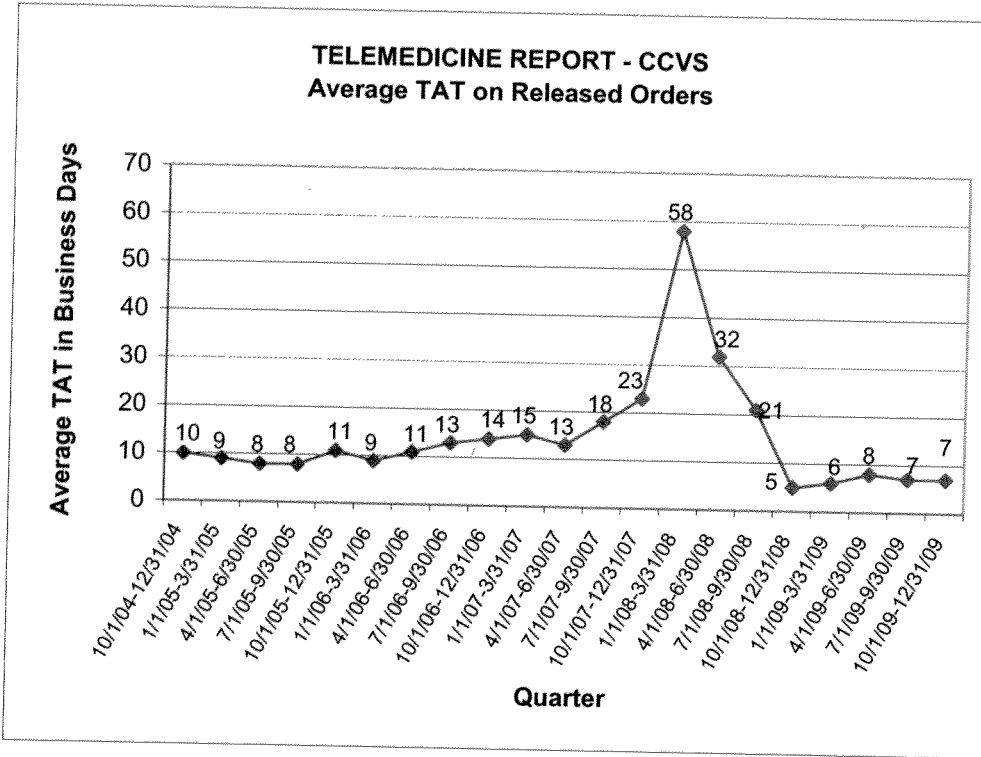
Annual (FISCAL) release totals are as follows:

- 2004 = 16 releases
- 2005 = 114 releases
- 2006 = 356 releases
- 2007 = 527 releases
- 2008 = 429 releases
- 2009 = 470 releases
- 2010 = 260 releases thus far

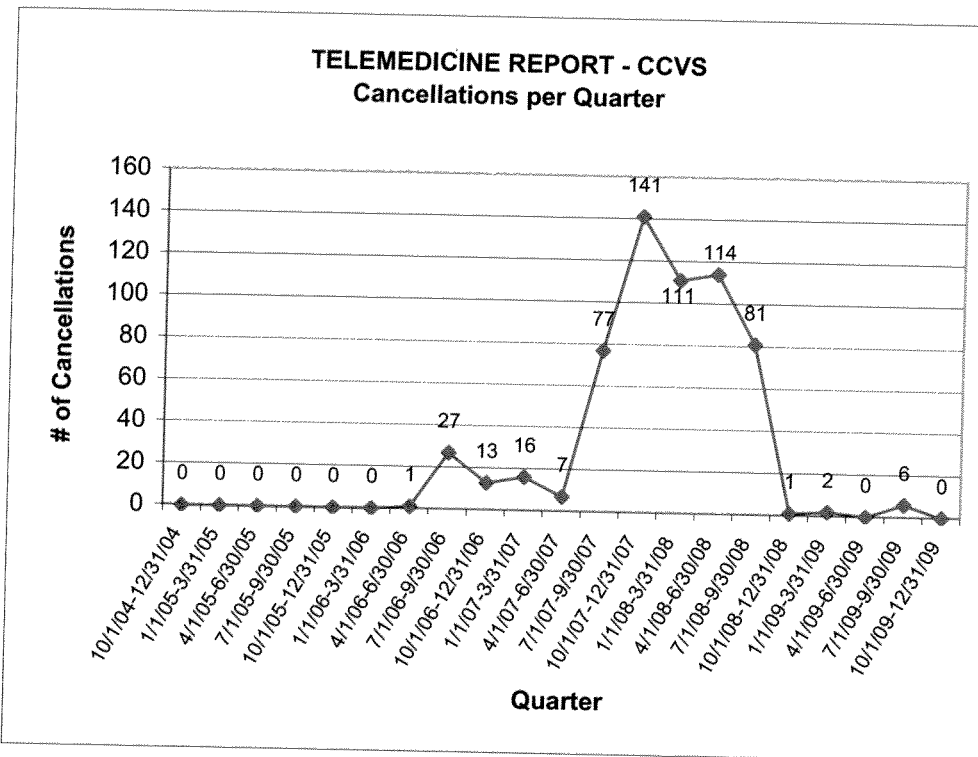


This graph shows the percentage of telemedicine orders that were released within TAT goals each quarter.

QI Report - Telemedicine
10/1/2009-12/31/2009



This graph shows the average Turnaround Time (TAT) for telemedicine orders. All TATs are shown in BUSINESS DAYS.



This graph shows the number of telemedicine orders that were canceled by CCVS Management due to inability to complete the order by the due date.