tally

RCM Process Area	25th Percentile (Low Performer)	50th Percentile (Median)	90th Percentile (Top Performer)
Patient Scheduling & Registration	<60% scheduling accuracy, high no-show rate	80–85% same-week scheduling accuracy	>95% accuracy, <2% no-show rate
Authorization & Pre-Certification	<60% completed before DOS, frequent delays	80% completed before DOS	>98% completed, with auto-tracking
Insurance Verification	<70% verified pre-visit, often done at check-in	85% same-day verification	99% verified pre-visit via automation
Patient Check-In	<40% digital check-in, high manual dependency	70% digital or kiosk check-in	>90% digital or contactless check-in
Patient Financial Counseling	<10% receive estimates, limited financial transparency	30% of patients receive estimates	>80% receive accurate, digital estimates
Clinical Documentation Improvement (CDI)	<70% documentation completeness, frequent queries	85% documentation completeness	>95% real-time, query resolution within 48 hrs
Charge Capture	<70% within 72 hrs, frequent missed charges	90% within 48 hrs of service	>98% within 24 hrs, near-zero leakage
Coding	<80% coding accuracy, high rejection rates	90% coding accuracy	>98% accuracy, with auto-coding assist
Claim Submission	<70% clean claims, high rework volume	85% clean claims on 1st pass	>98% clean claim rate
Payment Posting	<60% posted within 72 hrs, backlog common	80% posted within 48 hrs of remittance	>98% posted same-day (via ERA auto-post)
Denial Management	>20% denial rate, limited appeal success	10–15% initial denial rate	<5% denials; 70–80% appeal win rate
Accounts Receivable Follow-Up	>35% of A/R >90 days	A/R >90 days at 20–25%	<10% of A/R >90 days
Patient Billing	<20% patient collections rate	30% patient collections rate	>75% collected within 30 days of billing
Reporting & Analytics	Manual spreadsheets, limited insight	Lagging, static reports	Real-time dashboards, site-level insights, AI-predictive trending

Contact us to receive more benchmarks and support growing your RCM capabilities.