



BLACK BOOK RANKINGS 2013 USER SURVEY

# Top Practice Management and Revenue Cycle Management Ambulatory EHR Software Vendors



Publication Date: August 2013

---



---

Black Book™ annually evaluates leading health care/medical software and service providers across 18 operational excellence key performance indicators completely from the perspective of the client experience. Independent and unbiased from vendor influence, more than 300,000 healthcare IT users are invited to contribute to various annual customer satisfaction polls. Suppliers also encourage their clients to participate to produce current and objective customer service data for buyers, analysts, investors, consultants, competitive suppliers and the media. For more information or to order customized research results, please contact the Client Resource Center at +1 727.953.3355 or [info@Brown-Wilson.com](mailto:info@Brown-Wilson.com)

© 2013 Black Book Rankings LLC All Rights Reserved.

Reproduction of this publication in any form without prior written permission is forbidden. The information contained herein has been obtained from sources believed to be reliable. Brown-Wilson Group, Inc. the parent corporation of Black Book™, Black Book Rankings LLC, Black Book Market Research LLC, and The Black Book of Outsourcing®, disclaims all warranties as to the accuracy, completeness or adequacy of such information. Brown-Wilson Group shall have no liability for errors, omissions or inadequacies in the information contained herein or for interpretations thereof. The reader assumes sole responsibility for the selection of these materials to achieve its intended results. The opinions expressed herein are subject to change without notice. Brown-Wilson Group's unrivaled objectivity and credibility is perhaps your greatest assurance. At a time when alliances between major consultancies and suppliers have clouded the landscape, Brown-Wilson Group remains resolutely independent. We have no incentive to recommend specific EHR PM/RCM software vendors. Our only allegiance is to help you achieve the results you want with the best possible solution.

For more information, visit [www.BlackBookRankings.com](http://www.BlackBookRankings.com)



## TABLE OF CONTENTS

<b>2013 BLACK BOOK EHR PRACTICE MANAGEMENT RCM USERS SURVEY RESULTS OVERVIEW</b>	<b>5-12</b>
<b>INTRODUCTION</b>	<b>5</b>
<i>KEY FINDINGS</i>	
<i>SURVEY OVERVIEW</i>	
<b>BLACK BOOK METHODOLOGY</b>	<b>13</b>
<i>HOW THE DATA SETS ARE COLLECTED</i>	
<i>UNDERSTANDING THE STATISTICAL CONFIDENCE OF BLACK BOOK DATA</i>	
<i>WHO PARTICIPATES IN THE BLACK BOOK RANKING PROCESS</i>	
<b>COMPARATIVE VENDOR ANALYSIS – EHR PM/RCM</b>	
<b>TOP 20 SEAMLESS RCM PM EHR SYSTEM VENDORS</b>	<b>14</b>
<i>TOP #1 EHR PM/RCM VENDOR OVERALL, TOP VENDORS BY FOUR FUNCTIONAL SUBSETS</i>	
<i>TOP 20 EHR PM/RCM VENDORS, RANKED LIST 1 THROUGH 20</i>	
<b>STOP LIGHT SCORING KEY</b>	<b>16</b>
<b>OVERALL KPI LEADERS</b>	<b>20</b>
<i>SUMMARY OF CRITERIA OUTCOMES</i>	
<i>TOP SCORE PER INDIVIDUAL CRITERIA</i>	
<b>INDIVIDUAL KEY PERFORMANCE</b>	

## TABLE OF FIGURES

- Figure 1:** *Comprehensive EHR PM/RCM vendors defined*
- Figure 2:** *Key to raw scores*
- Figure 3:** *Color-coded stop light dashboard scoring key*
- Figure 4:** *Raw score compilation and scale of reference*
- Figure 5:** *Scoring key*

## TABLE OF TABLES

*Table 1: Top 20 EHR PM/RCM Vendors 2013*

*Table 2: Summary of criteria outcomes*

*Table 3: Top score per individual criteria*

### **Tables of Individual Key Performance Indicator, Top Ten Highest Mean by KPI**

**22**

***Table Vendor overall preference/vertical industry recommendations***

***Table 5: Innovation***

***Table 6: Training***

***Table 7: Client relationships and cultural fit***

***Table 8: Trust, Accountability and Transparency***

***Table 9: Breadth of offerings, client types, delivery excellence***

***Table 10: Deployment and outsourcing implementation***

***Table 11: Customization***

***Table 12: Integration and interfaces***

***Table 13: Scalability, client adaptability, flexible pricing***

***Table 14: Compensation and employee performance***

***Table 15: Reliability***

***Table 16: Brand image and marketing communications***

***Table 17: Marginal value adds***

***Table 18: Viability***

***Table 19: Data security and backup services***

***Table 20: Support and customer care***

***Table 21: Best of breed technology and process improvement***

## PART ONE INTRODUCTION

Black Book™ gathers insights via an interactive online survey and related telephone discussions and follow-up polling. The result is intended to serve as an annual barometer of the IT client satisfaction and managed services experience of medical groups, hospitals, clinicians, physicians, administrators, financial officers and technology professionals in the healthcare industry.

The largest user opinion poll of its kind in healthcare Black Book collects over 400,000 viewpoints on information technology vendor performance annually. In this segmented survey of healthcare financial leaders, over 8,000 respective administrative/financial/technology support staff of hospitals and physician practices contributed their perceptions to Black Book™ between April 2013 and July 2013 to measure outcomes and performance in the Revenue Cycle Management, Practice Management and Electronic Health Record technology continuum.

In a series of eight research reports on the 2013 State of the Revenue Cycle Management industry, Black Book™ is releasing comprehensive findings of users on the trends and directions of hospitals and physician practices, as well as the top ranked vendors in customer satisfaction and client experience.

Included in the 2013 Black Book™ Revenue Cycle Management survey sets released in August/September are:

**RCM Software** - (1) **Physician Practices Seamless PM/RCM/EHR Software** (this report); and (2) Hospital RCM Software

**Outsourcing RCM Services** – (3) RCM Outsourcing in Hospital Systems/IDNs/Systems/Chains; (4) RCM Outsourcing in Large Hospitals/Academic Medical Centers/Faculty Practices & Clinics; (5) RCM Outsourcing in Community Hospitals 100-250 Beds, (6) RCM Outsourcing in Small/Rural Hospitals under 100 Beds, and (7) RCM Outsourcing for Physician Groups

**Revenue Cycle Consultants and Transformation Experts** – (8) Hospitals RCM Consultants and (9) Physician Practices RCM Consultants

## KEY FINDINGS: STATE OF PHYSICIAN PRACTICE PROFITABILITY, ACQUISITIONS & TECHNOLOGY

72% of physician practices, whether networked, independent or part of a large group or hospital system anticipate declining-to-negative profitability in 2014 due to diminishing reimbursements and underutilized or inefficient billing and records technology.

Over the past year, the overwhelming desire to keep practices from being acquired or selling out has changed drastically. In May 2012, nine out of ten independent physicians wanted to maintain independence from hospital or larger group practice acquisition. Profit challenges have forced the number of practices actively seeking acquisition in Q3 2013 to more than triple, with almost one in three practices looking to sell out to another entity by the end of CY 2014.

Solo practitioners, the long hold out against acquisition, are shifting their plans, primarily because their technology, staff, and operational workflows are not equipped to deal with rising costs and declining reimbursements. Added to these issues are Affordable Care Act impacts, coding and documentation changes, EHR replacements and new payment reforms.

Paradoxically, 73% of solo physicians that are steadfast in rejecting all acquisition offers also declare they possess minimal office technology and have no plans to acquire EHRs, practice management, billing software and collection systems within the next 24 months.

88% of business managers fear that the ramifications of their outdated and/or auto-piloted revenue cycle management systems, particularly those not integrated to EHRs, will force their physician to sell the entire practice operation to a larger physician group or hospital within 12 months or face practice dissolution.

86% of business managers are certain their old practice management and revenue cycle cannot accommodate upcoming regulatory requirements and updates. Nearly 100% state the practice's financial software and workflows are unprepared for ACO participation.

97% of business managers confirm that an innovative, seamless RCM/PM/EHR system would ensure long term practice independence, and greatly improve productivity and profitability.

87% of physicians disagree with the business managers' collective forecast and do not see a seamless RCM/PM/EHR implementation as the silver bullet to save the practice from acquisition. 14% of independent physicians vehemently refuse to consider new technology purchases until they are acquired or close the practice, whichever comes first.

88% of Hospitals and 76% of Large Physician Groups procuring independent physician practices find there was little/no useful salvageable technology (EHR, PM, or RCM) in the acquisition of practice assets.

81% of practices acquired in last 12 months had attempted an EHR or upgraded PM implementation. 63% of independent practices believe an attempted technology upgrades or implementations were necessary to improve practice value prior to an acquisition. 98% of independent physicians claim that short sighted IT acquisitions, as part of their practice sell off plans to hospitals and larger clinics, actually devalued their practice worth. 97% failed to get the EHRs to a highly functional level before acquisition. Only 4% achieved Meaningful Use 1.

69% of independent physicians blame declining profitability as the reason they resist acquiring modern practice management/RCM and EHR. Of those on track for acquisition, 99% are holding off on all technology and software purchases.

93% of all independent physicians consider outsourcing revenue cycle management services and technology processes as the most sensible solution as they consider being acquired or attempting to survive as an autonomous entity.

## **KEY FINDINGS: IMPROVING PRACTICE PERFORMANCE WITH SEAMLESS RCM/EHR**

87% of all Physician practices agree their billing and collections systems/processes need upgrading.

42% are considering an upgrade of their RCM software within 6 -12 months.

92% of those seeking an RCM PM upgrade or system change out are only considering an EHR centric module.

18% are considering using a Consultant to assist in integrations, transformations or new product implementations.

71% of physician practices are considering a combination of new software and outsourcing services to improve their RCM systems.

89% of those state a preference for a single source vendor for all RCM PM and EHR modules.

96% of physician practices that have achieved Stage 1 meaningful use attestations and incentives state they are already confronting Practice Management concerns, particularly the influx of new patients, ICD-10 coding, billing requirements, joining accountable care organizations and staff training through EHR integration.

More than half of practices with over 10 physicians or more have budgeted (or plan on increasing expenditures) for consultants specializing in RCM/PM integrations/transformations, as well as recommendations on outsourcing part or all of their processes, ACO participation, RCM upgrades, EHR and HIE connectivity, and software selections.

## **STATE OF EHR/RCM/PM TRANSFORMATION & REPLACEMENT MARKET**

Revenue cycle management (RCM) is the life force of any practice, solo or group, private or nonprofit. Effective patient registration, insurance and benefit verification, charge capture, and claims processing are essential to maintaining practice viability.

The advantages of physicians implementing a seamless electronic practice management (PM) system along with Electronic Health Records (EHR) software are becoming more and more apparent. Doing so can improve patient-physician relationships, as these systems can give patients access to their medical records, lab results, and allow for better interaction with physicians.

***89%*** of physicians currently replacing their EHRs are seeking a seamless single source vendor, and prefer vendors that offer software, outsourcing and consulting options in their EHR/RCM/PM transformation.

***96%*** of practices achieving meaningful use 1 attestation and/or highly satisfied with EHR vendor performance agree that fully-integrated practice management/revenue cycle management systems equipped with EHR software is the key to ensuring practice survival and even independence from hospital or large group acquisition.

As evidenced by the growing number of meaningful use failures and immature EHR systems dropping off the competitive market, far too many EHR's claimed to integrate seamlessly into practice and revenue cycle management systems. Fewer systems had evidence of seamless integration across revenue cycle management, clinical communications and analytics solutions.

Transferring patient charges from the electronic health record (EHR) to your practice management (PM) and RCM system should be seamless. Electronically transmitting data is an example of efficient workflow. But, many EHR vendor products are forcing physicians to use labor intensive activities, repetitive processes, paper work and redundant data input.

Practice management systems can make medical billing more efficient with integrated billing software, improving accounts receivable from patients, insurance companies, Medicare, and reforms such as Accountable Care participation.. Billing and coding tools within a system can transform the physician practice by eliminating the need for your medical billers to sift through the ICD9/10, HCPCS, Medicare CPT and payor fee schedules, freeing up staff to conduct other revenue generating activities.

An elite group of both cloud-based and legacy system practice management, electronic health records (EHR), and medical billing software and services for medical groups are making the grade. Products are connecting providers to their patients and one another through a fully-integrated, digital healthcare ecosystem that can be accessed on any browser or device. These innovative systems are transforming thousands of physicians increase collections, streamline operations, acclimate to reimbursement reforms, provide productive workflows, and improve patient care.

**PRACTICES CONFIRMING RCM/PM/EHR ACTIVITIES (CHANGE WITHIN NEXT 12 MONTHS)**

Primary Goal of Physician Practice acquiring new RCM Software (2013-2014)	Strongly Prefer
Upgrade RCM/PM only	45%
Upgrade RCM/PM/EHR Collectively	60%
Outsource RCM (Full Enterprise)	12%
Part RCM Software Upgrade/Some Outsourcing	81%
Seamless RCM/Practice Management/EHR	92%
Prefer One Vendor for RCM/PM/EHR Solution	83%

Vetting a seamless EHR/RCM/PM solution is extremely complex as many physicians have discovered that after purchasing a solution set, they are unable to do much of what was promised and even less has been delivered. The lagging EHR vendors are mainly built to compliance specifications and providers are finding these are completely unusable for a practice with regular workload. The practice management module looks appropriate but they can be very fragmented and physicians complain of going through several applications and screens to accomplish even simple tasks. The after-purchase service provided by supposedly seamless EHR/RCH/PM vendors can be very generic, particularly among the newer start up cloud EHRs. Resolutions and customer service via the phone are said to be difficult with vendors that are not proficient in seamless delivery models. Interoperability and connectivity issues should be addressed prior to implementations as over 40% of practices report issues continuing past the six month point with simple lab reporting and submitting claims to Medicare.

**NEW PM/RCM SOFTWARE ACQUISITIONS (IMPLEMENTED IN LAST 12-18 MONTHS)**

Status of Practice Improvements		
Situation/Insight	After 6 months	After 12 Months
Still in New User Survival Mode	88%	30%
Cannot customize due to staffing issues/turnover	91%	19%
Will not maximize RCM software (ever)	57%	8%
Cannot integrate practice technologies	64%	48%
Limited data building and underutilized features	97%	83%
Mastered basic and intermediate tasks so that return on investment is being realized	81%	94%



## IMMEDIATE IMPROVEMENTS TO PRACTICE REALIZED AFTER RCM IMPLEMENTATION & TRANSFORMATION INITIATIVES

Select Six or Less of the Top Improvements Noted after RCM Transformation Activities		
	NEW RCM SOFTWARE IMPLEMENTED	NEW RCM OUTSOURCING SERVICES
Productivity & Rebalanced Workflows	94%	8%
EMR Charge Sweeps & Reconciliation	90%	9%
Accurate and Actionable Daily Reports	82%	15%
Payment Resolution	82%	25%
Filing Insurance Claims (Primary & Secondary)	77%	40%
Resolve Rejections	70%	49%
Post Payments	23%	57%
Perform Collections	8%	95%
Follow up on Appeals and Denials	8%	90%
Perform Audits A/R & Charge Lags	10%	91%
Review payor denials and rejections	12%	83%
Improve Coding and Compliance	56%	80%
Create Favorite Lists	3%	1%
Lock down financial balances	10%	3%
Update Fee Schedules	4%	5%

Source: Black Book™

## RCM SATISFACTION BY PRACTICE SPECIALTY TYPE

PRIMARY CARE (GENERAL PRACTICE, FAMILY PRACTICE, PEDIATRICS, GERIATRICS, INTERNAL MEDICINE) REPORT HIGHEST SATISFACTION AND ROI FROM RCM/EHR/PM IMPLEMENTATIONS WITHIN LAST TWELVE MONTHS. SURGICAL SPECIALISTS AND LEAST SATISFIED WITH RCM/PM OPTIONS FOR SEAMLESS EHR, FOLLOWED BY PHYSICIAN PRACTICES IN THE MEDICAL SPECIALTIES.

INDUSTRY EVOLUTION TO END-TO-END PM/RCM/EHR VENDORS TOP TEN OFFERINGS TO ALL SPECIALTIES RESPONDING			
	Primary Care (General, Peds, IM)	Medical Specialties	Surgical Specialties
Kareo	A	A	B
Vitera	A	B	B
eClinicalWorks	A	B	C
Cerner	A	C	C
athenahealth	A	C	C
CareCloud	A	B	C
Allscripts	A	C	C
McKesson	B	A	C
Bizmatix	B	B	B
GE Healthcare	B	B	C

Source: Black Book™

KEY: A = 90% SATISFACTION    B = 80% SATISFACTION    C = 70% SATISFACTION

## TOP 20 SEAMLESS EHR/PRACTICE MANAGEMENT & REVENUE CYCLE MANAGEMENT SOFTWARE VENDORS

2013 Rank by User Satisfaction/ Client Experience	EHR PM/RCM Vendor
1	KAREO
2	CARE360 QUEST DIAGNOSTICS
3	CARECLOUD
4	ATHENAHEALTH
5	ECLINICALWORKS
6	VITERA
7	MCKESSON
8	OPTUM
9	CERNER
10	APRIMA
11	GREENWAY
12	PRACTICE FUSION
13	GE HEALTHCARE
14	EPIC
15	E-MDS
16	NEXTGEN
17	ALLSCRIPTS
18	CHARTLOGIC
19	ADP ADVANCEDMD
20	HENRY SCHEIN/MICRO MD

Source: Black Book™

**User Reasons for Seamless EHR PM/RCM highest vendor satisfaction rates 2013**  
*Clients select top four that apply to their respective vendor performance and relationships*

ACO development & Payment Reform Preparations	85.5%
Seamless EHR Integration	83.7%
Demonstrated cost savings & ROI	70.1%
Improved charge/reimbursement execution & coding	68.3%
Continuous Physician productivity improvements	41.0%
Innovation in reimbursement capabilities	39.6%
Clinician (physician and nursing) satisfaction	15.9%
Ongoing flexibility to adapt	15.4%
Customization, disparate systems issues resolved	12.0%
Responsiveness to users	11.4%

Source: Black Book™

**SURVEY PARTICIPATION: SEAMLESS EHR PM RCM**

This segment of the Black Book™ Revenue Cycle Management Software survey for physician practices included insights from 7,430 users. Each survey pool was collected across five separate polls from January 2013 to July 2013.

<b>PHYSICIAN PRACTICES, GROUPS &amp; CLINICS AMBULATORY SERVICES</b>			
Respondent Title	Number of Survey Participants Q1	Number of Survey Participants Q2	Total
CEO or Administrator	286	260	546
CFO or Finance Director/Manager	330	404	734
CIO or IT Director/Manager	145	298	443
Business Office or Billing Manager	1752	1477	3229
Billing Staff	240	349	589
Physician	556	802	1358
Nurse or Clinician	171	109	280
Other	114	137	251
<b>TOTAL</b>	<b>3594</b>	<b>3836</b>	<b>7430</b>

Physician Practice & Groups Respondent Title	Percent of RCM PM Survey Participation Pool 2013
CEO or Administrator	7%
CFO or Finance Director/Manager	10%
CIO or IT Director/Manager	6%
Business Office or Billing Manager/Staff	51%
Physician	18%
Nurse/Clinician or Other	7%
<b>TOTAL</b>	<b>100%</b>

## 2013 BLACK BOOK™ METHODOLOGY

### *How the data sets are collected*

Black Book collects ballot results on 18 performance areas of operational excellence to rank vendors by electronic medical and health record product lines. The gathered data are subjected immediately to an internal and external audit to verify completeness and accuracy and to make sure the respondent is valid while ensuring that the anonymity of the client company is maintained. During the audit, each data set is reviewed by a Brown-Wilson executive and at least two other people. In this way, Black Book's clients are able to clearly see how a vendor is truly performing. The 18 criteria on operational excellence are subdivided by the client's industry, market size, geography and functions outsourced, and are reported accordingly.

Situational and market studies are conducted on areas of high interest such as e-Prescribing, Health Information Exchange, Accountable Care organization, hospital software, services providers, educational providers in e-health, benchmarkers and advisors. These specific survey areas range from four to 20 questions of criteria each.

### *Understanding the statistical confidence of Black Book data*

Statistical confidence for each performance rating is based upon the number of organizations scoring the electronic medical and health records service. Black Book identifies data confidence by one of several means:

- Top-10-ranked vendors must have a minimum of 10 unique clients represented. Broad categories require a minimum of 20 unique client ballots. Data that are asterisked (\*) represent a sample size below required limits and are intended to be used for tracking purposes only, not ranking purposes. Performance data for an asterisked vendor's services can vary widely until a larger sample size is achieved. The margin of error can be very large and the reader is responsible for considering the possible current and future variation (margin of error) in the Black Book performance score reported.
- Vendors with more than 20 unique client votes are eligible for top 10 rankings and are assured to have highest confidence and lowest variation. Confidence increases as more organizations report on their outsourcing vendor. Data reported in this form are shown with a 95% confidence level (within a margin of 0.25, 0.20 or 0.15, respectively).
- Raw numbers include the quantity of completed surveys and the number of unique organizations contributing the data for the survey pool of interest.

### *Who participates in the Black Book Ranking Process?*

More than 334,000 practice management and physician leaders and other users ranking from hospital executives, clinicians, IT specialists and front-line implementation veterans are invited to participate in the 2013 annual Black Book EMR EHR e-Health initiative satisfaction survey. Non-invitation receiving participants must complete a verifiable profile, utilize a valid corporate email address and are then included as well. The Black Book survey web instrument is open to respondents and new participants each year from October 1 to December 31 at <http://blackbookrankings.com> and <http://blackbookpolls.com>. Only one ballot per corporate email address is permitted and changes of ballots during the open polling period require a formal email request process to ensure integrity. A follow up EHR survey was conducted from February 1 to April 30 to analyze the replacement market phenomenon within the HIT marketplace. Additionally, from April 15 to July 31 to collect data on Revenue Cycle Management solution satisfaction including Physician Practice Management applications, services and initiatives.

### *EHR PM/RCM vendor rankings and results – 2013*

16,880 qualified users of systems with validated corporate/valid email addresses ranked 422 EMR-EHR suppliers offering individual or bundled arrangements as part of the Black Book annual survey, which was conducted via web survey instruments. Additionally 19,000

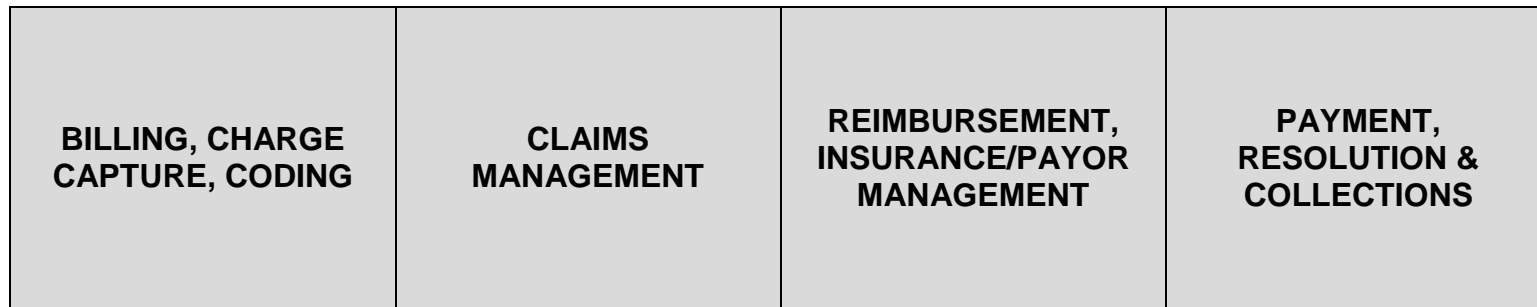
about-to-be users answered questions about budgeting, vendor familiarity and vendor selection processes but current non-user ballots are not counted in the vendor ranking process of client satisfaction. The four most highly utilized systems of EMR systems are included as subsets. 7,100 replacement market prospective EHR buyers took part in the follow up 2013 survey.

2,855 Physician Practices, Groups and Clinics (7,430 staffers and clinicians) submitted satisfaction ballots to rank and report client experience among practice management and revenue cycle management software and services vendors. 1,107 Hospitals (and 2,984 hospital staffers & managers) participated in the 2013 RCM vendor review process.

## Stop Light Scoring Key

### STOP LIGHT SCORING KEY

**Figure 1: Comprehensive EHR Practice Management & Revenue Cycle Management vendors are defined as being comprised of four surveyed functions**



Source: Black Book™



Stop Light Scoring Key  
**Figure 2: Key to raw scores**

0.00–5.79 ▶	◀ 5.80–7.32 ▶	◀ 7.33–8.70 ▶	◀ 8.71–10.00
<b>Deal breaking dissatisfaction</b>  <b>Does not meet expectations</b>  <b>Cannot recommend vendor</b>	<b>Neutral</b>  <b>Meets/does not meet expectations consistently</b>  <b>Would not likely recommend vendor</b>	<b>Satisfactory performance</b>  <b>Meets expectations</b>  <b>Recommends vendor</b>	<b>Overwhelming satisfaction</b>  <b>Exceeds expectations</b>  <b>Highly recommended vendor</b>

Source: Black Book Rankings

**Figure 3: Color-coded stoplight dashboard scoring key**

**Green** (top 10%) scores better than 90% of EHR PM RCM vendors. Green coded vendors have received constantly highest client satisfaction scores.

**8.71 +**

**Clear** (top 33%) scores better than 67% of EHR PM RCM vendors. Well-scored vendor which have middle of the pack results.

**7.33 to 8.70**

**Yellow** scores better than half of EHR PM RCM vendors. Cautionary performance scores, areas of improvement required.

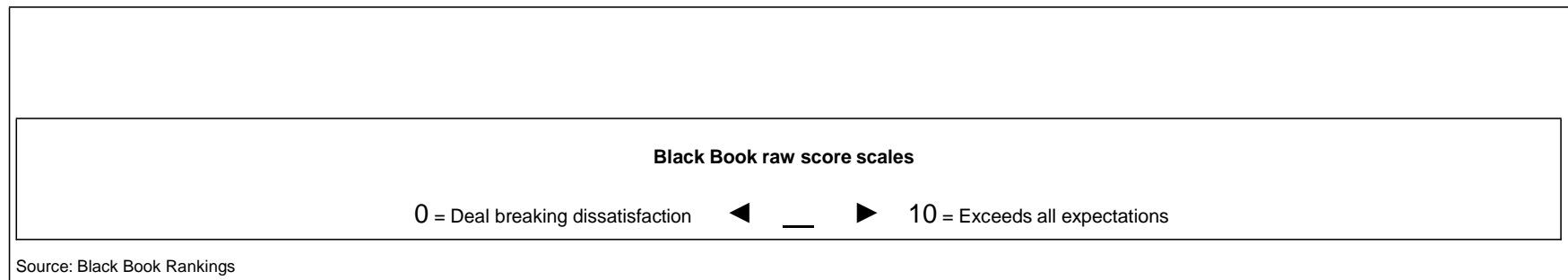
**5.80 to 7.32**

**Red** scores worse than 66% of EHR PM RCM vendors. Poor performances reported potential cause for service and contractual cancellations.

**Less than 5.79**

## Stop Light Scoring Key

**Figure 4: Raw score compilation and scale of reference**



Individual vendors can be examined by specific indicators on each of the main functions of EHR PM/RCM as well as grouped and summarized subsets. Detail of each subset is contained so that each EHR PM/RCM vendor may be analyzed by function and end-to-end EHR PM/RCM services collectively.

## Overall KPI Leaders

**Figure 5: Scoring Key**

OVERALL RANK	Q6 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
5	1	PRACTICE SOLUTIONS CORPORATION	9.02	7.56	5.59	5.82	7.00

Source: Black Book Rankings

**Overall rank** – this rank references the final position of all 18 criteria averaged by the mean score collectively. This vendor ranked fifth of the 20 competitors.

**Criteria rank** – refers to the number of the question or criteria surveyed. This is the sixth question of the 18 criteria of which this vendor ranked first of the 20 vendors analyzed positioned only on this particular criteria or question.

**Company** – name of the EHR PM/RCM vendor.

**Subsections** – each subset comprises one-third of the total EHR PM/RCM vendor mean at the end of this row, and includes all buyers and users who indicate that they contract each respective service subsection with the supplier, specific to their enterprise.

**Mean** – congruent with the criteria rank, the mean is a calculation of all three subsets of EHR PM/RCM functions surveyed. As a final ranking reference, it includes all vertical industries, market sizes and geographies.



2013 Black Book™ Top 20 Software Vendors  
 Seamless EHR/Revenue Cycle Management  
 Practice Management

OVERALL KEY PERFORMANCE INDICATOR LEADERS  
 PHYSICIAN PRACTICE MANAGEMENT/REVENUE CYCLE MANAGEMENT  
 SUMMARY OF CRITERIA OUTCOMES

RCM Table 1: Summary of criteria outcomes, EHR RCM PM SOFTWARE VENDORS		
Total number one criteria ranks	Vendor	Overall rank
9	KAREO	1
3	ATHENAHEALTH	4
2	CARE360/QUEST	2
1	OPTUM	8
1	VITERA	6
1	CERNER	9
1	NEXTGEN	16

Source: Black Book Rankings

2013 Black Book™ Top 20 Software Vendors  
Seamless EHR/Revenue Cycle Management  
Practice Management



**TOP SCORE PER INDIVIDUAL CRITERIA: PHYSICIAN PRACTICE MANAGEMENT SOFTWARE**

RCM Table 2: Top score per individual criteria				
Question	Criteria	EHR/RCM/PM	Vendor	Overall Rank
1	Vendor overall preference/vertical industry recommendations		KAREO	1
2	Innovation		CARE360 QUEST	2
3	Training		KAREO	1
4	Client relationships and cultural fit		VITERA	6
5	Trust		KAREO	1
6	Breadth of offerings, client types, delivery excellence		ATHENAHEALTH	4
7	Deployment and outsourcing implementation		KAREO	1
8	Customization		OPTUM	8
9	Integration and interfaces		KAREO	1
10	Scalability, client adaptability, flexible pricing		CERNER	9
11	Compensation and employee performance		CARE360/QUEST	2
12	Reliability		KAREO	1
13	Brand image and marketing communications		ATHENAHEALTH	4
14	Marginal value adds		NEXTGEN	16
15	Viability		ATHENAHEALTH	4
16	Data security and backup services		KAREO	1
17	Support and customer care		KAREO	1
18	Best of breed technology and process improvement		KAREO	1

Source: Black Book™



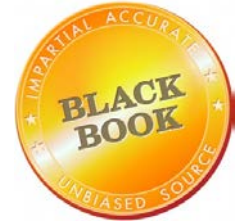
2013 Black Book™ Top 20 Software Vendors  
Seamless EHR/Revenue Cycle Management  
Practice Management

**PART TWO: RANKED VENDOR PERFORMANCE**

**2013 INDIVIDUAL KEY PERFORMANCE: SEAMLESS EHR/PM/RCM  
SOFTWARE VENDORS**

**PHYSICIAN PRACTICES & GROUPS**





Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**RCM Table 3: AMBULATORY PHYSICIAN PRACTICES, Top Ranked Electronic Health Records , Revenue Cycle & Practice Management Vendors – raw scores 2013**

Rank	Vendor	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Mean
1	KAREO	9.75	9.52	9.49	9.22	9.55	9.00	9.73	9.29	9.32	9.16	9.55	9.65	9.07	8.96	9.34	9.50	9.66	9.51	<b>9.40</b>
2	CARE360/QUEST	9.44	9.79	8.79	8.84	9.30	9.32	9.30	9.32	8.61	9.08	9.62	8.79	8.34	8.78	9.24	8.58	8.58	8.89	<b>9.00</b>
3	CARE CLOUD	9.15	9.49	8.90	9.06	7.36	8.66	9.01	8.10	8.34	8.95	8.96	8.68	8.24	9.07	8.44	9.34	7.47	8.73	<b>8.71</b>
4	ATHENAHEALTH	8.82	9.69	8.46	8.70	9.10	9.36	8.71	7.95	8.82	9.27	8.80	6.14	9.43	7.86	9.53	8.83	8.22	8.76	<b>8.69</b>
5	ECLINICALWORKS	8.86	9.21	8.11	8.81	9.11	8.22	8.72	8.66	8.40	9.36	9.06	8.80	7.67	8.31	7.95	8.46	8.64	8.93	<b>8.63</b>
6	VITERA	8.96	8.01	8.84	9.30	8.40	8.39	8.82	7.81	7.59	7.49	7.70	8.57	8.39	7.69	8.46	8.95	9.29	8.36	<b>8.39</b>
7	MCKESSON	8.52	8.10	8.13	7.44	8.77	8.53	8.38	7.85	8.70	7.18	9.25	8.30	7.81	8.88	9.20	8.40	8.52	8.43	<b>8.36</b>
8	OPTUM	7.48	9.20	8.04	8.28	7.62	9.34	9.21	9.53	7.44	8.14	9.27	8.41	9.09	8.79	6.85	7.01	8.56	8.34	<b>8.35</b>
9	CERNER	8.46	7.54	9.04	8.36	8.85	7.83	7.32	8.72	6.84	9.42	8.14	7.91	8.48	7.03	8.68	8.57	8.66	9.31	<b>8.29</b>
10	APRIMA	7.43	9.13	6.66	8.88	8.37	7.35	8.63	7.39	7.34	7.62	9.32	8.79	8.11	8.09	6.83	8.71	9.11	8.69	<b>8.14</b>
11	GREENWAY	6.78	7.48	8.37	8.33	8.85	7.82	7.09	7.03	7.66	8.09	8.92	7.63	6.70	7.34	7.79	8.81	9.43	8.37	<b>7.92</b>
12	PRACTICE FUSION	8.70	7.90	8.57	8.04	6.97	6.78	8.56	8.03	7.38	7.11	7.18	9.32	8.09	8.34	7.98	7.13	7.33	8.02	<b>7.86</b>
13	GE HEALTHCARE	8.34	7.35	7.92	7.36	8.24	7.88	6.74	8.18	8.22	7.63	7.02	7.32	8.53	9.34	7.77	7.99	7.30	7.67	<b>7.82</b>
14	EPIC	8.20	9.30	7.55	7.76	7.81	7.49	8.07	7.19	6.56	8.25	6.95	7.47	6.90	8.94	7.38	7.39	6.73	9.13	<b>7.73</b>
15	E-MDS	9.18	7.70	8.04	7.77	7.28	7.79	7.60	8.56	5.84	7.00	6.08	6.80	6.55	8.50	6.72	8.59	8.75	7.20	<b>7.55</b>
16	NEXTGEN	8.46	9.01	9.01	6.83	7.36	7.86	5.59	7.75	8.94	7.26	5.21	7.38	6.86	9.46	7.54	5.92	7.34	7.98	<b>7.54</b>
17	ALLSCRIPTS	8.77	6.33	7.09	7.17	6.20	8.67	6.02	5.97	7.43	8.14	7.84	8.42	7.98	7.01	6.03	9.34	8.47	7.26	<b>7.45</b>
18	CHARTLOGIC	7.12	7.70	7.60	5.30	7.92	8.06	9.04	6.78	6.51	5.87	8.73	6.73	6.99	5.87	7.23	5.87	7.14	6.64	<b>7.06</b>
19	ADP ADVANCEDMD	7.20	7.36	8.52	7.11	6.72	6.12	6.99	5.50	6.73	7.62	7.53	4.99	7.65	7.16	7.60	5.53	7.77	7.43	<b>6.97</b>
20	HENRY SCHEIN MICROMD	6.88	7.61	7.59	7.11	6.85	5.06	7.36	6.69	8.06	5.35	7.83	6.64	7.52	8.14	5.75	6.13	7.73	7.04	<b>6.96</b>



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q1. Vendor overall preference by similar users of seamless EHR/PM/RCM peer group vertical industry recommendations for vendor expertise**

RCM Table 4: Organizational structure meets the needs of stakeholders or customers and stakeholder satisfaction is the most important priority. PM/RCM/EMR client is likely to recommend the vendor to similar sized physician groups, physicians within the same specialty or delivery setting.

OVERALL RANK	Q1 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.73	9.82	9.78	9.65	9.75
2	2	CARE360/QUEST	9.26	9.19	9.62	9.67	9.44
15	3	E-MDS	9.01	9.38	9.22	9.09	9.18
3	4	CARE CLOUD	8.92	9.10	9.44	9.13	9.15
6	5	VITERA	9.20	8.42	8.94	9.27	8.96
5	6	ECLINICALWORKS	9.19	8.85	8.58	8.80	8.86
4	7	ATHENAHEALTH	8.63	8.39	8.86	9.40	8.82
17	8	ALLSCRIPTS	8.92	8.72	9.23	8.19	8.77
12	9	PRACTICE FUSION	8.21	8.52	9.15	8.93	8.70
7	10	MCKESSON	8.28	9.06	8.43	8.29	8.52

Source: Black Book Rankings





Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q2. Innovation**

RCM Table 5: Customers are also continuing to push the envelope for further enhancements to which the EMR/RCM/PM vendor is responsive. RCM clients also believe that their vendors' technology is helping them manage practices more effectively, generate accurate records and reimbursement billings and cut their overhead in ways that were difficult or impossible to accomplish before the software was implemented. Vendor is responsive to make client recommendations with cutting edge improvements.

OVERALL RANK	Q2 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
2	1	CARE360/QUEST	9.87	9.71	9.87	9.69	9.79
4	2	ATHENAHEALTH	9.76	9.87	9.73	9.39	9.69
1	3	KAREO	9.34	9.60	9.71	9.42	9.52
3	4	CARE CLOUD	9.32	9.08	9.79	9.76	9.49
14	5	EPIC	8.89	9.52	9.62	9.17	9.30
5	6	ECLINICALWORKS	8.75	9.19	9.41	9.47	9.21
8	7	OPTUM	9.09	9.41	9.30	8.99	9.20
10	8	APRIMA	9.25	9.39	9.12	8.76	9.13
16	9	NEXTGEN	9.31	8.91	8.99	8.82	9.01
7	10	MCKESSON	8.91	8.87	8.86	9.31	8.99

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q3. Training**

RCM Table 6: Software vendor leadership provides significant and meaningful training opportunities for internal employees and client staff in RCM and Practice Management. Leadership strives to develop technology staff, EHR RCM client service and customer servicing consultant employees in particular. Training modules are effective and practical so that minimal post-implementation training is required on or off site. Regular updates are timely and require minimal additional training to implement.

OVERALL RANK	Q3 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.58	9.56	9.42	9.40	<b>9.49</b>
9	2	CERNER	9.33	8.78	8.74	9.29	<b>9.04</b>
16	3	NEXTGEN	9.08	9.39	8.76	8.82	<b>9.01</b>
3	4	CARE CLOUD	8.69	8.94	9.09	8.87	<b>8.90</b>
6	5	VITERA	8.11	9.23	8.83	9.20	<b>8.84</b>
2	6	CARE360/QUEST	8.71	9.13	8.74	8.59	<b>8.79</b>
12	7	PRACTICE FUSION	7.86	8.24	9.20	8.98	<b>8.57</b>
19	8	ADP ADVANCEDMD	8.93	8.66	8.31	8.19	<b>8.52</b>
4	9	ATHENAHEALTH	8.67	8.26	8.05	8.87	<b>8.46</b>
11	10	GREENWAY	8.11	8.41	8.32	8.63	<b>8.37</b>

Source: Black\* Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q4. Client relationships and cultural fit**

RCM Table 7: RCM Software vendor leadership honors customer relationships highly. The relationship with the vendor elevates the customer reputation. Improving physician practice and healthcare delivery efficiency and effectiveness is a priority of the supplier. Governance of engagement is neither complex for buyer nor does it require vendor management attention regularly. There is no regular transparency or quality issue. There are no culture clashes or misfits that threaten relationship's success or client's satisfaction.

OVERALL RANK	Q4 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
6	1	VITERA	9.00	9.31	9.27	9.62	9.30
1	2	KAREO	9.54	9.23	8.90	9.29	9.22
3	3	CARE CLOUD	9.00	9.15	9.28	8.93	9.06
10	4	APRIMA	8.89	9.01	8.84	8.78	8.88
2	5	CARE360/QUEST	8.93	8.89	8.82	8.73	8.84
5	6	ECLINICALWORKS	8.71	9.24	8.67	8.62	8.81
4	7	ATHENAHEALTH	8.58	8.89	8.38	8.94	8.70
9	8	CERNER	8.68	7.33	9.20	8.25	8.36
11	9	GREENWAY	8.15	8.83	8.06	8.30	8.33
8	10	OPTUM	8.67	8.33	7.88	8.23	8.28

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q5. Trust, Accountability and Transparency**

RCM Table 8: Trust in enterprise reputation is important to RCM clients as well as prospects. Client possesses an understanding that its organization has the people, processes, and resources to effectively deliver the desired business and clinical results, based on its industry reputation and past performance. There are no disconnects between promises and delivery, and integration between electronic health records, practice management applications and revenue cycle management software is seamless.

OVERALL RANK	Q5 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.64	9.76	9.55	9.24	9.55
9	2	CARE360/QUEST	9.45	9.21	9.45	9.09	9.30
5	3	ECLINICALWORKS	9.32	9.42	8.69	9.01	9.11
4	4	ATHENAHEALTH	9.04	9.24	8.54	9.57	9.10
3	5	CARE CLOUD	8.93	8.60	8.94	8.91	8.85
11	6	GREENWAY	8.51	8.85	8.53	9.52	8.85
7	7	MCKESSON	9.30	8.94	8.03	8.81	8.77
6	8	VITERA	8.69	8.33	7.85	8.74	8.40
10	9	APRIMA	8.80	8.54	8.23	7.90	8.37
13	10	GE HEALTHCARE	8.56	8.58	8.09	7.73	8.24

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q6. Breadth of offerings, varied client settings, delivery excellence across all user types**

RCM Table 9: EHR/RCM vendor offers industry recognized horizontal functionality and vertical industry applications, and manage bundled services such as ACO, reimbursement reform and developing new e-Health initiatives. Vendor routinely drives operational performance improvements and results in the areas they affect. Comprehensive offerings are constructed to meet the unique needs of the client’s billing and collections initiatives. Breadth of vendor modules offers comprehensive system services and broad modules.

OVERALL RANK	Q6 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
4	1	ATHENAHEALTH	9.33	9.31	9.33	9.45	9.36
8	2	OPTUM	9.34	9.25	9.34	9.38	9.33
2	3	CARE360/QUEST	9.51	9.39	9.17	9.20	9.32
1	4	KAREO	9.18	9.17	9.13	8.53	9.00
17	5	ALLSCRIPTS	8.82	8.97	8.49	8.40	8.67
3	6	CARE CLOUD	8.40	8.38	9.41	8.44	8.66
7	7	MCKESSON	8.99	8.63	7.92	8.58	8.53
6	8	VITERA	8.75	8.22	7.87	8.73	8.39
5	9	ECLINICALWORKS	8.37	8.43	8.12	7.97	8.22
18	10	CHARTLOGIC	8.16	8.47	7.98	7.62	8.06

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q7. Deployment and Revenue Cycle Management solution implementation**

RCM Table 10: RCM software client deploys at a pace acceptable to the client. RCM/PM solutions eliminate excessive supervision over vendor implementations. Vendor overcomes client implementation obstacles and challenges effectively. Technical, organizational and cultural implementation obstacles are handled professionally and punctually. Application implementation time meets standard expectations. Implementations are efficient and sensitive to users' specific situations which may cause delays.

OVERALL RANK	Q7 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.69	9.88	9.64	9.71	<b>9.73</b>
2	2	CARE360/QUEST	9.12	9.05	9.48	9.53	<b>9.30</b>
18	3	CHARTLOGIC	8.87	9.24	9.08	8.95	<b>9.04</b>
3	4	CARE CLOUD	8.78	8.96	9.30	8.99	<b>9.01</b>
6	5	VITERA	9.06	8.28	8.80	9.13	<b>8.82</b>
5	6	ECLINICALWORKS	9.05	8.71	8.44	8.66	<b>8.72</b>
4	7	ATHENAHEALTH	8.49	8.25	8.72	9.37	<b>8.71</b>
10	8	APRIMA	8.78	8.58	9.09	8.05	<b>8.63</b>
12	9	PRACTICE FUSION	8.07	8.38	9.01	8.79	<b>8.56</b>
7	10	MCKESSON	8.14	8.92	8.29	8.15	<b>8.38</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q8. Customization**

RCM Table 11: RCM/PM and EHR products and process services are customized to meet the unique needs of specific practice client purpose, processes and physician models. Little resistance is encountered when changing performance measurements as clients' needs vary. Extraordinary efforts are made to adapt and convert client special needs into workable solutions with efficient cost and time considerations. All software applications allow for modifications that are not costly or complex.

OVERALL RANK	Q8 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
8	1	OPTUM	9.39	9.41	9.72	9.58	<b>9.53</b>
2	2	CARE360/QUEST	9.47	9.50	9.02	9.30	<b>9.32</b>
1	3	KAREO	9.36	9.37	9.05	9.36	<b>9.29</b>
9	4	CERNER	8.53	8.44	8.56	9.33	<b>8.72</b>
5	5	ECLINICALWORKS	8.92	8.39	8.30	9.01	<b>8.66</b>
15	6	E-MDS	8.07	8.78	8.28	9.09	<b>8.56</b>
13	7	GE HEALTHCARE	8.49	7.94	7.31	8.97	<b>8.18</b>
3	8	CARE CLOUD	7.28	8.55	8.03	8.54	<b>8.10</b>
12	9	PRACTICE FUSION	7.71	7.93	8.52	7.94	<b>8.03</b>
4	10	ATHENAHEALTH	6.94	7.75	7.94	9.16	<b>7.95</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q9. Integration and interfaces**

RCM Table 12: EHR/RCM vendor supports interfaces so information can be shared between necessary applications. Solutions are easily integrated to existing backend systems as needed and feasible for connectivity and interoperability purposes. Seamless interfaces to legacy applications and cloud systems alike are performed as required for optimal functioning. Human integration and interface activities are administered precisely. Systems communicate effectively among provider groups and ancillaries. True interoperability with other healthcare organizations is factored into implementation including financial and clinical data.

OVERALL RANK	Q9 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.31	9.48	9.17	9.31	9.32
16	2	NEXTGEN	8.51	9.17	8.94	9.13	8.94
4	3	ATHENAHEALTH	8.59	9.02	8.63	9.03	8.82
7	4	MCKESSON	8.45	8.42	8.68	9.26	8.70
2	5	CARE360/QUEST	9.19	8.05	8.90	8.29	8.61
9	6	CERNER	8.72	8.33	8.05	8.98	8.52
5	7	ECLINICALWORKS	8.87	8.53	7.98	8.22	8.40
3	8	CARE CLOUD	8.44	8.12	8.61	8.20	8.34
13	9	GE HEALTHCARE	8.77	7.33	8.34	8.43	8.22
20	10	HENRY SCHEIN MICROMD	7.69	8.57	8.01	7.95	8.06

Source: Black Book Rankings





Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q10. Scalability, client adaptability, flexible pricing**

RCM Table 13: RCM software solutions vendor provides flexible pricing allowing the client to choose and pay for the precise functionality and services needed. Vendor Invests in significant infrastructure and has the ability to provide services to enterprise organizations. IT products and services meet the changing and varied needs of the physician practice customer. Pricing is not rigid or shifting and meets needs of client.

OVERALL RANK	Q10 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
9	1	CERNER	9.55	9.40	9.44	9.27	<b>9.42</b>
5	2	ECLINICALWORKS	9.29	9.55	9.25	9.34	<b>9.36</b>
4	3	ATHENAHEALTH	9.20	9.16	9.33	9.38	<b>9.27</b>
1	4	KAREO	9.54	9.44	8.59	9.06	<b>9.16</b>
2	5	CARE360/QUEST	8.61	9.19	9.16	9.37	<b>9.08</b>
3	6	CARE CLOUD	8.84	9.12	9.00	8.83	<b>8.95</b>
14	7	EPIC	7.86	8.00	8.10	9.02	<b>8.25</b>
8	8	OPTUM	8.36	8.47	7.14	8.60	<b>8.14</b>
17	9	ALLSCRIPTS	8.62	7.78	8.58	7.57	<b>8.14</b>
11	10	GREENWAY	7.64	8.16	8.57	7.98	<b>8.09</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q11. Vendor staff expertise, compensation and employee performance**

RCM Table 14: RCM vendor team of employees is considered top in industry for professionalism and skill. Vendor attracts and retains high performing staff. Vendor is focused on building and developing a strong employee team of producers. Employees act like owners/leaders. Company is moving towards leveraged pay at all levels. Vendor is using effective tools to tie performance metrics to compensation policy and compensating top leaders. Human resources-related criteria are scored from the client perspective on this indicator.

OVERALL RANK	Q11 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
7	1	CARE360/QUEST	9.46	9.81	9.37	9.84	9.62
1	2	KAREO	9.57	9.60	9.56	9.48	9.55
10	3	APRIMA	9.47	9.46	9.36	8.99	9.32
8	4	OPTUM	8.98	9.60	9.00	9.48	9.27
2	5	MCKESSON	9.07	9.19	9.17	9.56	9.62
5	6	ECLINICALWORKS	9.09	8.99	8.98	9.17	9.06
3	7	CARE CLOUD	8.95	8.82	9.28	8.79	8.96
11	8	GREENWAY	8.53	8.70	9.36	9.08	8.92
4	9	ATHENAHEALTH	9.05	8.26	8.94	8.95	8.80
18	10	CHARTLOGIC	8.41	8.24	9.16	9.10	8.73

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q12. Reliability**

RCM Table 15: RCM software supplier meets agreed terms as evidenced by routine, acceptable service level reporting and industry expectations. Depth and breadth of applications/solutions are acceptable in meeting client needs. Online reliability is maximized and outages/downtimes are minimized. Solid product and service capacities are demonstrated consistently. Service levels are consistently met as agreed. Services and support response is maximized by vendor team.

OVERALL RANK	Q12 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.72	9.72	9.56	9.61	<b>9.65</b>
12	2	PRACTICE FUSION	9.20	9.41	9.05	9.61	<b>9.32</b>
5	3	ECLINICALWORKS	8.26	8.91	8.97	9.04	<b>8.80</b>
2	4	CARE360/QUEST	8.53	8.74	8.54	9.34	<b>8.79</b>
10	5	APRIMA	9.22	8.96	8.56	8.41	<b>8.79</b>
3	6	CARE CLOUD	8.80	8.71	9.06	8.13	<b>8.68</b>
6	7	VITERA	8.85	8.86	8.27	8.30	<b>8.57</b>
17	8	ALLSCRIPTS	8.52	8.20	8.69	8.28	<b>8.42</b>
8	9	OPTUM	8.66	8.46	8.42	8.12	<b>8.42</b>
7	10	MCKESSON	7.77	8.32	8.09	9.03	<b>8.30</b>

Source: Black Book Rankings



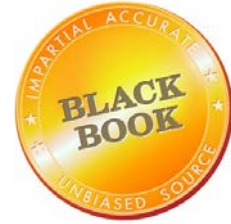
Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q13. Brand image and marketing communications**

RCM Table 16: RCM/EHR vendor's marketing and sales statements/pitches are accurately and appropriately represented by actual product and service deliverables. Image is consistent with top vendor rankings scored by client base. Sales presentations and proposals are delivered upon and corporate integrity/honesty in marketing and business development are highly valued. Company image and integrity are values upheld top-down consistently. High level of relevant client communications enhances the RCM vendor.

OVERALL RANK	Q13 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
4	1	ATHENAHEALTH	9.35	9.29	9.47	9.59	<b>9.43</b>
8	2	OPTUM	9.37	8.76	9.22	9.00	<b>9.09</b>
1	3	KAREO	9.32	9.17	8.97	8.82	<b>9.07</b>
13	4	GE HEALTHCARE	8.21	8.91	8.68	8.31	<b>8.53</b>
9	5	CERNER	9.00	8.87	8.14	7.89	<b>8.48</b>
6	6	VITERA	7.53	8.83	8.79	8.41	<b>8.39</b>
2	7	CARE360/QUEST	8.34	7.77	8.72	8.52	<b>8.34</b>
3	8	CARE CLOUD	8.42	8.88	8.23	7.41	<b>8.24</b>
10	9	APRIMA	7.49	8.04	8.75	8.14	<b>8.11</b>
12	10	PRACTICE FUSION	8.30	8.34	7.61	8.10	<b>8.09</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q14. Marginal value adds**

RCM Table 17: Beyond stimulus achievement, EHR vendors' cost savings are realized as generally estimated and not over-positioned or over/underestimated in ways that effect major client satisfaction or costs. Vendor offers value-adds as a practice management partner in cost savings and avoidance initiatives and creative programs through bundled RCM product design. Vendor provides true RCM and practice business transformation opportunities to physician practices and other medical settings utilizing EMR seamlessly with RCM.

OVERALL RANK	Q14 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
16	1	NEXTGEN	9.53	9.42	9.30	9.58	<b>9.46</b>
13	2	GE HEALTHCARE	9.66	9.34	9.02	9.35	<b>9.34</b>
3	3	CARE CLOUD	8.99	8.84	9.30	9.13	<b>9.07</b>
1	4	KAREO	9.62	9.04	8.73	8.46	<b>8.96</b>
14	5	EPIC	9.33	9.07	8.63	8.74	<b>8.94</b>
7	6	MCKESSON	8.73	9.44	8.58	8.78	<b>8.88</b>
8	7	OPTUM	8.42	8.94	9.51	8.30	<b>8.79</b>
2	8	CARE360/QUEST	7.81	8.95	8.86	9.49	<b>8.78</b>
15	9	E-MDS	8.46	8.48	8.41	8.62	<b>8.49</b>
12	10	PRACTICE FUSION	8.07	8.64	7.88	8.76	<b>8.34</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q15. Viability and managerial stability**

RCM Table 18: Vendor's viability, employee turnover, financial stability and/or cultural mismatches do not threaten relationship. Senior management and the board exemplify strong leadership principals to steward appropriate resources that impact RCM buyers. Client is confident of long term industry viability for this vendor based on investments, client adoption, exceptional outcomes and service levels. Field management is notably competent, stable and supportive of clients. Entire vendor organization demonstrates and provides evidence of competent financial management and leadership.

OVERALL RANK	Q15 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
4	1	ATHENAHEALTH	9.41	9.38	9.49	9.84	<b>9.53</b>
1	2	KAREO	9.72	9.43	8.76	9.45	<b>9.34</b>
2	3	CARE360/QUEST	9.39	9.14	8.87	9.54	<b>9.24</b>
7	4	MCKESSON	9.52	8.79	9.36	9.14	<b>9.20</b>
9	5	CERNER	8.36	8.84	9.03	8.49	<b>8.68</b>
6	6	VITERA	8.13	8.57	8.50	8.63	<b>8.46</b>
3	7	CARE CLOUD	8.52	8.02	8.69	8.52	<b>8.44</b>
12	8	PRACTICE FUSION	7.53	7.38	7.66	9.33	<b>7.98</b>
11	9	GREENWAY	7.23	7.29	7.77	8.85	<b>7.79</b>
10	10	APRIMA	8.29	7.67	7.82	7.32	<b>7.78</b>

Source: Black Book Rankings



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q16. Data security and backup services**

RCM Table 19: In order to provide secure and constantly dependable revenue cycle management service offerings for physicians, groups and clinical entities, an EMR/RCM vendor has to provide the highest level of security and data back-up services. The vendor's service in these two areas is superior to the security and back-up system of past internal systems of the physician practice.

OVERALL RANK	Q16 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.45	9.59	9.49	9.47	9.50
17	2	ALLSCRIPTS	9.35	9.31	9.42	9.26	9.34
6	3	VITERA	8.71	8.77	9.32	9.00	8.95
4	4	ATHENAHEALTH	8.84	8.51	8.98	8.98	8.83
11	5	GREENWAY	9.09	8.30	9.10	8.75	8.81
10	6	APRIMA	8.82	8.73	8.83	8.46	8.71
3	7	CARE CLOUD	8.57	8.66	8.85	8.29	8.59
15	8	E-MDS	7.78	8.85	8.83	8.89	8.59
2	9	CARE360/QUEST	8.12	8.69	8.70	8.82	8.58
9	10	CERNER	8.15	8.99	8.90	8.24	8.57
Source: Black Book Rankings							



Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q17. Support and customer care**

RCM Table 20: Account management provides an adequate amount of onsite administration and support to clients. There exists a formal account management program that meets client needs. Media and clients reference this vendor as an RCM services leader and top vendor correctly. Customer services and relationship satisfaction is manifested through significant flagship clients as well as smaller and newest customers similarly. Vendor provides appropriate number of accessible support and customer care personnel.

OVERALL RANK	Q17 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.66	9.73	9.59	9.65	<b>9.66</b>
11	2	GREENWAY	9.58	9.16	9.37	9.61	<b>9.43</b>
6	3	VITERA	8.91	9.47	9.22	9.55	<b>9.29</b>
10	4	APRIMA	9.40	9.18	8.69	9.17	<b>9.11</b>
15	5	E-MDS	8.73	8.55	9.12	8.62	<b>8.76</b>
9	6	CERNER	8.39	8.40	8.97	8.87	<b>8.66</b>
5	7	ECLINICALWORKS	8.26	9.10	8.88	8.33	<b>8.64</b>
2	8	CARE360/QUEST	8.63	8.62	8.19	8.86	<b>8.58</b>
8	9	OPTUM	7.90	8.43	9.15	8.75	<b>8.56</b>
7	10	MCKESSON	8.68	7.73	8.92	8.76	<b>8.52</b>

Source: Black Book Rankings





Individual Key Performance, Ambulatory EHR  
 REVENUE CYCLE MANAGEMENT  
 PRACTICE MANAGEMENT SOFTWARE

**Q18. Best of breed technology and process improvement**

RCM Table 21: A seamless EHR/RCM/PM product management and related technology services are considered best of breed. Vendor technology elevates customers above competitors via interface capabilities, equipment, processes, deliverables, professional staff, leadership, quality assurance and innovative initiatives. RCM services are delivered above previous in-house billing and collection service levels. Technology is relevant to exchanging health information among providers, as well as sufficiently offering patient access.

OVERALL RANK	Q18 CRITERIA RANK	EHR PM/RCM VENDOR	BILLING, CHARGE CAPTURE, CODING	CLAIMS MANAGEMENT	REIMBURSEMENT, INSURANCE/PAYOR MGMT	PAYMENT, RESOLUTION & COLLECTIONS	MEAN
1	1	KAREO	9.46	9.73	9.39	9.44	<b>9.51</b>
9	2	CERNER	9.07	9.47	9.19	9.50	<b>9.31</b>
14	3	EPIC	9.30	9.19	8.48	9.55	<b>9.13</b>
5	4	ECLINICALWORKS	9.05	8.81	8.62	9.24	<b>8.93</b>
2	5	CARE360/QUEST	9.19	8.68	8.47	9.23	<b>8.89</b>
4	6	ATHENAHEALTH	8.42	9.26	8.39	8.96	<b>8.76</b>
3	7	CARE CLOUD	9.20	8.78	8.68	8.25	<b>8.73</b>
10	8	APRIMA	8.20	8.35	9.02	9.18	<b>8.69</b>
7	9	MCKESSON	8.75	8.10	8.16	8.70	<b>8.43</b>
11	10	GREENWAY	7.90	8.77	7.87	8.95	<b>8.37</b>

Source: Black Book Rankings



## **APPENDIX**

### **BLACK BOOK™**

#### ***A DIVISION OF BROWN-WILSON GROUP INC., BLACK BOOK CONSULTING***

We hope that the data and analysis in this report will help you make informed and imaginative RCM/RCO/PM/EMR/EHR business decisions. If you have further requirements, the Brown-Wilson Group consulting team may be able to help you. For more information about BWG and Black Book's consulting capabilities, please contact us directly at [info@brown-wilson.com](mailto:info@brown-wilson.com)

#### ***DISCLAIMER***

All Rights Reserved.

No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form by any means (electronic, mechanical, photocopying, recording or otherwise), without the prior permission of the publisher, Black Book Rankings.

The facts of this report are believed to be correct at the time of publication but cannot be guaranteed. Please note that the findings, conclusions and recommendations that Black Book Rankings delivers will be based on information gathered in good faith from both primary and secondary sources, whose accuracy we are not always in a position to guarantee. As such, Black Book Rankings can accept no liability whatever for actions taken based on any Information that may subsequently prove to be incorrect.

