RCMEASY GUIDE

RCM KPIs Every Practice Should Track

Six numbers that tell you what's really happening with your billing.

Why Measurement Matters

Practices that only look at total collections at the end of the month miss the early warning signs. A rising denial rate or a slowing days-in-A/R trend shows up weeks before it ever hits the bank account — if you're watching for it.

Days in A/R

The average number of days it takes a practice to collect payment after a claim is submitted. A rising trend is often the first sign something in the process — eligibility checks, coding accuracy, or follow-up cadence — has broken down.

Clean Claim Rate & First-Pass Resolution Rate

How often claims go out error-free, and how often they get paid without any rework at all. Low numbers here point to upstream coding or eligibility problems — not payer behavior — and are usually the fastest metric to improve once identified.

Denial Rate & Aging Buckets

What share of submitted claims come back denied, and how outstanding balances are distributed across 30, 60, and 90+ day buckets. Together, these give the clearest picture of where follow-up effort should go first.

Net Collection Rate

Of what a practice was contractually entitled to collect, what it actually collected. This is the single number that best reflects overall revenue cycle health, because it accounts for contractual write-offs rather than comparing against the full billed charge.

How RCMEasy Surfaces These

All six of these metrics are visible automatically, in real time, through RCMEasy's client portal — no manual spreadsheet required, and no waiting for a monthly summary to see a trend developing.

NEXT STEP

Talk to an RCM Expert

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