

Hospital for Special Surgery



Medical Records Epic Update **Process Definition Document**

Purpose: The Process Definition Document (PDD) formalizes the final design of an automation solution. It functions as an approval artifact for automation and operations teams, enabling the transition from design to development once approved.

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I. AUTOMATION OVERVIEW

1.1 Objectives

The automation will achieve

- Gathering medical record submission results and updating the account activities in Epic

1.2 Operational metrics

The automation will impact the following operational metrics

- Days to Submit Documentation
- Denial Rate due to untimely/incomplete documentation
- Denial Resolution Time
- Cash Acceleration (via faster denials closure)
- Touch Rate / Staff Productivity (Reduce effort on ADRs; increase capacity elsewhere)

1.3 Design Team

The following individuals contributed to the automation design, must be informed of changes, and agree to support the maintenance of this automation

Name	Role / Title	Contact
Agata Sacilowski	Operational Owner	sacilowskia@hss.edu
Christine Franco	Operational SME(s)	francoch@hss.edu
Mollie Morelli	Project Sponsor	nolanm@hss.edu
Joe Sanda	Solution Architect	joe.sanda@tarponhealth.com
Martine Lynch	Developer	lynchma@hss.edu

II. AUTOMATION DETAILS

2.1 Automation Overview

Item	Description
Area / Department	HB & PB Billing/Follow-up
Automation Name	Medical Records Epic Update
Automation Description	This automation gathers medical record submission results and updates the account activities in Epic

2.2 Applications

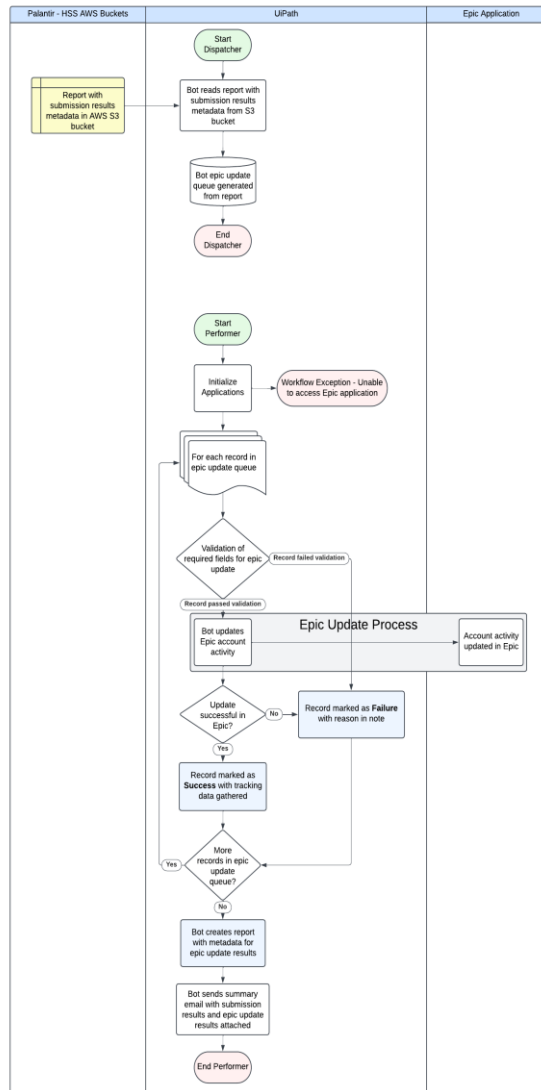
The table below lists the applications being utilized by the automation

Application	Comments / Access Needs
Epic	Uses bot credentials to access Epic
Thycotic Secret Server	Uses HSS AD credentials to access
UiPath	UiPath Studio and Orchestrator

2.3 High-Level Process Map

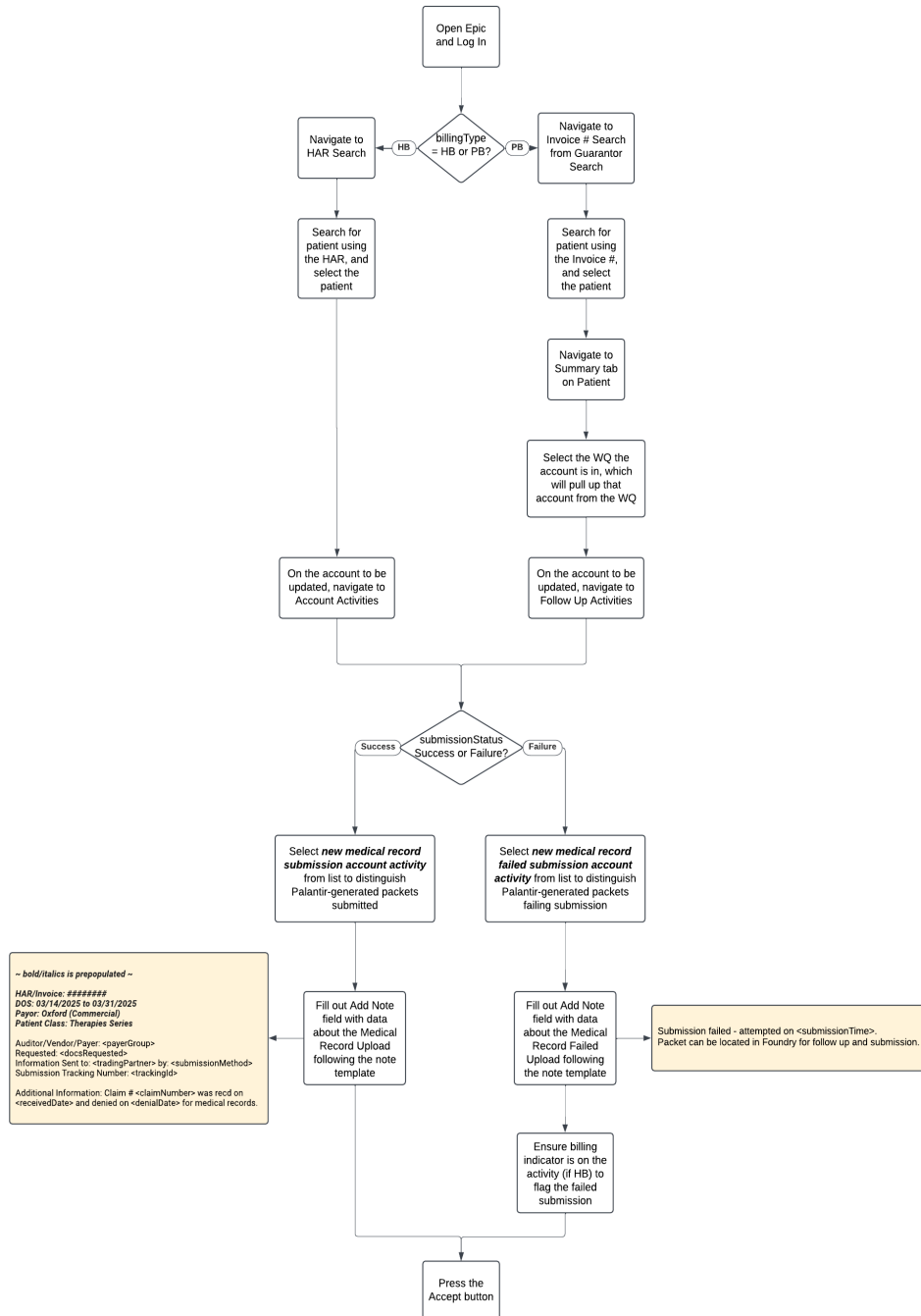
The diagram below contains the steps the automation will take (the 'to-be' process map)

Medical Records - Epic Update - High-Level Design - 7/14/25



2.4 Epic Navigation Process Map

The diagram below contains the steps the automation will take (the 'to-be' process map)



2.5 Toolkit documentation

The table below provides a list of toolkits and links to the completed ROI, planning toolkits, and any additional design documentation

Toolkit	Link to documentation	Comments
Plan Toolkit	Tarpon Health - Medical Records Epic Update - Plan Toolkit - 07.14.2025	

2.6 Out of scope

The table below provides a list of automation scenarios or account populations that are out of scope or unobtainable

Scenario / Population	Rationale	Comments
Additional steps or activities not listed in the Epic Navigation process map	Steps for HB/PB account activity update are outlined and are the primary function of this automation	Differing Note templates for accounts failing submission step and requiring follow up could be used, assuming other account activity fields are not added
Using other account activities that use other fields beyond Add Note	Having the same sequence of actions after selecting account activity would be the cleanest, simplest solution	Differing account activities or Note templates that share the same steps (Add Note; Accept) would be much easier to scale to
Movement of failed submission packets	On 7/9/2025, it was determined that Operations would find packets on Foundry instead of a shared drive location	The automation will not download or move packets to a location for operations, as they will know where to access them and how to do so

III.APPROVAL

3.1 Approval

Upon review and approval of this Process Definition Document (PDD), I, Agata Sacilowski, on June 27, 2025, hereby approve this plan for development.

I acknowledge that while this automation will experience downtime, the ultimate responsibility for the process remains with my department. I commit to collaborating with the automation team to maintain the automation and meet our uptime goal. This commitment extends to ongoing responsibilities, including but not limited to: testing, implementing enhancements, handling break-fix scenarios, managing application upgrades, and supporting process changes or improvements as required.

3.2 Future Initiatives

Below is a list of future operational, technical, or known application changes that may impact the automation

- Additional payers may be added to the automated medical record submission workflow.

3.3 Downtime Plans

Below are the actions the operational team will take in the event of automation downtime

Scenario	Action (taken by operations)	Contact
Level 1 <i>Downtime = 1-2 days</i>	Automation can catch up before accounts begin routing to follow up WQs	sacilowskia@hss.edu francoch@hss.edu nolanm@hss.edu adele.brettschneider@tarponhealth.com joe.sanda@tarponhealth.com lynchma@hss.edu
Level 2 <i>Downtime = 2-7 days</i>	After 3 days with MR Requested activity, but no MR Submitted activity, account qualifies for manual follow-up WQ Start allocating workers to the follow-up WQ	sacilowskia@hss.edu francoch@hss.edu nolanm@hss.edu adele.brettschneider@tarponhealth.com joe.sanda@tarponhealth.com lynchma@hss.edu wolfd@hss.edu
Level 3 <i>Downtime = 7-14 days</i>	Further escalation takes place: Loop in any internal (IT, etc.) or external (Payer, Vendors) that could help resolve the issue	sacilowskia@hss.edu francoch@hss.edu nolanm@hss.edu adele.brettschneider@tarponhealth.com joe.sanda@tarponhealth.com lynchma@hss.edu wolfd@hss.edu taylorlme@hss.edu
Level 4 <i>Downtime = Indefinitely</i>	Discuss as an operations and automation team what adjustments need to be made to resume operations as they were pre-automation Documentation is reviewed for Epic changes that were made during the implementation	sacilowskia@hss.edu francoch@hss.edu nolanm@hss.edu adele.brettschneider@tarponhealth.com joe.sanda@tarponhealth.com lynchma@hss.edu wolfd@hss.edu taylorlme@hss.edu Mollie to choose any additional parties

3.4 Revisions

Complete the table below for any document revisions

Rev. #	Date	Section/page	Revision summary	Author
1	07-09-2025	2.3, 2.4, 2.5, 2.6	Remove failed submission packet handling	Joe Sanda

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