

PUBLIC DEMO DELIVERABLE | SYNTHETIC DATA ONLY

Chart Readiness Audit

A sample client report showing how ChartReady AI turns a 25-chart packet into a prioritized, staff-ready documentation cleanup plan.

Agency: Pilot Agency (synthetic demo) Scope: 25 synthetic active episodes Prepared: August 9, 2026
No real patient data was used. Results illustrate the pilot format, not expected customer outcomes.

Executive snapshot



The review found 19 blocking items across 16 charts, plus 11 warnings requiring staff review. The first cleanup wave should focus on unsigned physician orders, missing visit notes and expired authorizations.

Top priorities

- 1

Unsigned physician order - 6 finding(s) across 6 chart(s).
Orders without a physician signature cannot support the plan of care and typically hold the billing packet.
- 2

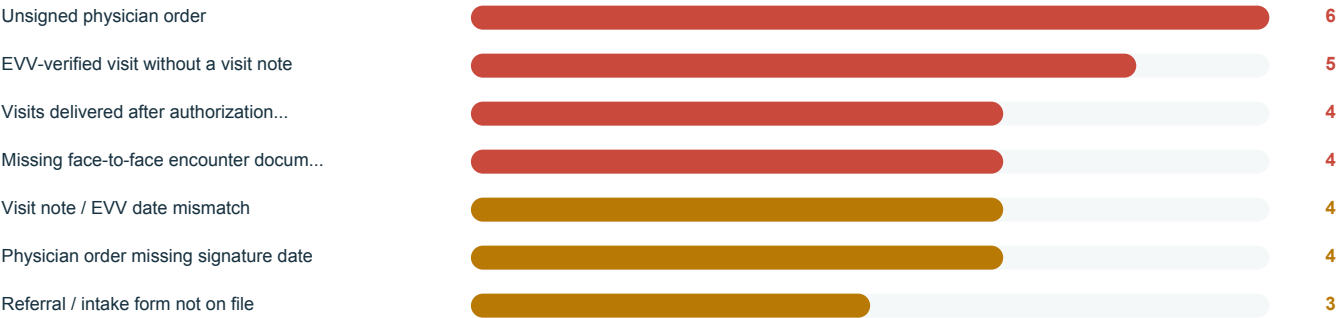
EVV-verified visit without a visit note - 5 finding(s) across 5 chart(s).
A visit confirmed by EVV but lacking a clinical note is a direct billing blocker: the service cannot be documented.
- 3

Visits delivered after authorization end date - 4 finding(s) across 4 chart(s).
Visits past the authorization window are at high risk of being unpayable without retro-authorization.

What the agency receives: one prioritized report, affected chart IDs, evidence-linked findings, owner actions and a workflow proposal. Staff keeps final judgment and every submission decision.

Findings by type

The sample rules surfaced seven repeatable documentation patterns. Counts show findings, not dollars or guaranteed denials.



SEVERITY	FINDING	COUNT	WHY IT MATTERS
BLOCKER	Unsigned physician order	6	Orders without a physician signature cannot support the plan of care and typically hold the billing packet.
BLOCKER	EVV-verified visit without a visit note	5	A visit confirmed by EVV but lacking a clinical note is a direct billing blocker: the service cannot be documented.
BLOCKER	Visits delivered after authorization end date	4	Visits past the authorization window are at high risk of being unpayable without retro-authorization.
BLOCKER	Missing face-to-face encounter documentation	4	Medicare home health certification requires a documented face-to-face encounter; without it the episode is not billable.
WARNING	Visit note / EVV date mismatch	4	Note and EVV record on different dates slow down review and need reconciliation before the claim is assembled.
WARNING	Physician order missing signature date	4	A signature without a date cannot be validated against the episode timeline and often bounces back at review.
WARNING	Referral / intake form not on file	3	A SOC episode without the referral document on file leaves the admission source unverified.

Interpretation: 11 of 19 blockers fall into two operational queues: unsigned orders and EVV-confirmed visits without a matching note. Those queues are the fastest place to start because they have a clear owner and a repeatable follow-up action.

Guardrail

A flag is not a clinical conclusion and does not automatically change the chart. Qualified agency staff reviews the cited evidence, decides whether a correction is appropriate and follows payer and agency policy.

03 | WORK QUEUE

Chart-level worklist

Rows 1-13 of 25. B = blocker; W = warning. Opaque chart IDs are used so the worklist can be discussed without exposing names or medical record numbers.

CHART	EPISODE	PAYER	B	W	STATUS	FINDINGS
PT-001	SOC	Medicare	0	0	READY	No findings in sample rules
PT-002	RECERT	Medicare	1	0	NOT READY	Unsigned physician order; Recertification episode - verify timing
PT-003	SOC	Medicare	0	1	AT RISK	Physician order missing signature date
PT-004	RECERT	Medicare	1	0	NOT READY	EVV-verified visit without a visit note; Recertification episode - verify timing
PT-005	SOC	Medicare	0	1	AT RISK	Visit note / EVV date mismatch
PT-006	SOC	Medicare	2	0	NOT READY	Unsigned physician order; Missing face-to-face encounter documentation
PT-007	SOC	Medicare Advantage	1	0	NOT READY	Visits delivered after authorization end date
PT-008	SOC	Medicare	0	2	AT RISK	Physician order missing signature date; Referral / intake form not on file
PT-009	RECERT	Medicare	1	0	NOT READY	Unsigned physician order; Recertification episode - verify timing
PT-010	SOC	Medicare	1	0	NOT READY	EVV-verified visit without a visit note
PT-011	RECERT	Medicare	0	1	AT RISK	Visit note / EVV date mismatch; Recertification episode - verify timing
PT-012	RECERT	Medicare Advantage	1	0	NOT READY	Visits delivered after authorization end date; Recertification episode - verify timing
PT-013	SOC	Medicare	2	0	NOT READY	Unsigned physician order; Missing face-to-face encounter documentation

Suggested daily huddle: clear red rows first, assign each blocker to intake, clinical operations or billing, then close amber warnings before packet assembly.

Chart-level worklist, continued

Rows 14-25 of 25. This sample includes two clean charts to show that the report separates ready records from records needing action.

CHART	EPISODE	PAYER	B	W	STATUS	FINDINGS
PT-014	RECERT	Medicare	0	1	AT RISK	Physician order missing signature date; Recertification episode - verify timing
PT-015	SOC	Medicare	1	0	NOT READY	EVV-verified visit without a visit note
PT-016	SOC	Medicare	0	2	AT RISK	Visit note / EVV date mismatch; Referral / intake form not on file
PT-017	RECERT	Medicare	1	0	NOT READY	Unsigned physician order; Recertification episode - verify timing
PT-018	SOC	Medicare Advantage	1	0	NOT READY	Visits delivered after authorization end date
PT-019	SOC	Medicare	2	0	NOT READY	EVV-verified visit without a visit note; Missing face-to-face encounter documentation
PT-020	RECERT	Medicare Advantage	0	0	READY	Recertification episode - verify timing
PT-021	SOC	Medicare	1	1	NOT READY	Unsigned physician order; Referral / intake form not on file
PT-022	RECERT	Medicare	0	1	AT RISK	Physician order missing signature date; Recertification episode - verify timing
PT-023	RECERT	Medicare Advantage	1	0	NOT READY	Visits delivered after authorization end date; Recertification episode - verify timing
PT-024	SOC	Medicare	1	0	NOT READY	EVV-verified visit without a visit note
PT-025	SOC	Medicare	1	1	NOT READY	Visit note / EVV date mismatch; Missing face-to-face encounter documentation

Recommended workflow changes

PRIORITY	OWNER ACTION
Unsigned physician order	Create a 48-hour signature queue; escalate orders still unsigned after 7 days.
EVV-verified visit without a visit note	Reconcile EVV to notes daily; route verified visits without a note after 24 hours.
Visits delivered after authorization end date	Track authorization end dates; begin re-authorization 10 days or 3 visits before expiry.
Missing face-to-face encounter documentation	Gate Medicare SOC intake on documented face-to-face encounter evidence.
Visit note / EVV date mismatch	Reconcile note and EVV dates weekly before billing packet assembly.
Physician order missing signature date	Reject undated returned signatures at document intake.
Referral / intake form not on file	Do not schedule SOC until the referral and referring-physician contact are on file.

Method, validation and next step

30/30
SYNTHETIC
DEFECTS FOUND

100%
SYNTHETIC
PRECISION

100%
SYNTHETIC
RECALL

0
RAW PHI USED

Validation note

The deterministic checklist found all 30 injected defects in this synthetic validation set with no false positives. These are test metrics, not a promise for live agency data. Real pilot accuracy must be measured against agency-validated findings because EHR exports and documentation practices vary.

How the two-week pilot works

- 1** Data gate
Synthetic input or documented de-identification before transfer; no raw PHI in the pilot.
- 2** Checklist pass
Deterministic checks over presence, signatures, dates and cross-record matches.
- 3** Human validation
Agency staff validates each flag and keeps every clinical and billing decision.
- 4** Readiness report
Blocker list, affected charts, evidence, ownership and suggested workflow changes.
- 5** Measured decision
Compare review time and confirmed findings before choosing ongoing service.

Scope and limitations

The pilot reviews 25 synthetic charts or charts the agency de-identifies before transfer under a documented method. Plain Safe Harbor removes patient-related date elements except year, so date-interval checks need synthetic dates or an Expert Determination method that permits suitable transformed dates. Raw PHI is blocked until a separate BAA-covered production and security gate is complete.

ChartReady checks documentation presence, signatures, dates and cross-record consistency. It does not diagnose, select final OASIS responses, make coding decisions, change a care plan, submit a claim or guarantee payment. Qualified agency staff owns every final determination.

See what a 25-chart cleanup plan looks like for your agency.

Request the \$300 pilot at chartready.lessrec.com or email hello@lessrec.com