



Case Study: Healthcare

Genesis Healthcare System

The Challenge

Consistent growth over the last decade and being the largest healthcare provider in a six-county region meant a growing number of patients were passing through the doors on a daily basis. Offering a myriad of services – everything from wellness checks to specialty services like radiology, coupled with the spectrum of ambulatory services that are available from a federally qualified health center, led to an increasingly overworked front desk staff and lots of opportunities for human error. One of the biggest concerns were rejections due to plan coverage issues. The average days in accounts receivable number was also alarmingly high, guiding the leadership team to evaluate new tools to reduce the time it took to collect payment. Genesis also required a partner with proven experience working with Medicare and Medicaid, its largest payers. With the amount of claim edits, rejections and denials steadily increasing, Genesis was in desperate need of a solution to help alleviate these problems.



The Client

Genesis Healthcare System is a health system based in Zanesville, Ohio that includes a not-for-profit hospital, a network of more than 300 physicians and multiple outpatient care centers throughout the region. In addition to traditional hospital services, it offers a broad range of services through its affiliated organizations.

The Solution

Having worked with TriZetto Provider Solutions, a Cognizant Company, since 2010, Genesis immediately looked first to their clearinghouse partner over other vendors. Donita Scott, a patient account supervisor, was the decision maker tasked with finding the right solutions.

“I was happy with my previous experience and it was apparent that TPS offered everything we were looking for, so they were the obvious choice.”

Knowing that TPS already carried out basic Medicare eligibility checks, the client inquired about additional ways to prevent coverage-related issues. The solution was the automatic Auto Eligibility product, which runs an eligibility query before claims are sent to the payer and automatically notifies users if coverage issues arise. To tackle the high instances of claim edits and also prevent additional rejections, the Epic Rapid Retest™ and integrated Claim Edits from TPS were used to address Genesis’ issues. Rapid Retest performs claim edits in real time and determines if a claim issue was resolved prior to resubmission. Without this tool, the client would have to wait days to confirm if the issue was truly corrected. TPS also built customized edits to address payer-specific requirements that had become significant issues.

TPS prevented approximately 350 denials for Genesis Healthcare System, amounting to approximately \$1.1 million in revenue.

The Results

Genesis was able to reduce denials, rejections and the amount of days in accounts receivable by utilizing intelligent EDI concepts. With the help of TPS, Genesis took control of eligibility issues by automatically confirming coverage before claim submission. Spotting discrepancies before claims go out the door has had a drastic effect on the amount of rejections. This also prevented lost time, as it would take weeks to hear back from payers in the past.

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> **Donita Scott, Patient Account Supervisor**

Stated Ms. Scott, “The capability to see all of our data in a few simple clicks is very convenient and has definitely made it easier to manage denials and collect revenue.”

She added that Auto Eligibility is a beneficial value-add because it complements the clearinghouse services, making them intuitive and providing a one-stop-shop to manage claims and remits.

“We quickly saw a reduction of denials due to Auto Eligibility and Custom Edits and faster resolution of external claim edits due to Rapid Retest. We have more electronic posting than ever before, which allows payments to post faster,” stated Ms. Scott.

Overall, tools from TPS had a huge impact on denial reduction. According to the client, it prevented approximately 350 denials, which would have equated to more than \$1.1 million. With the right solutions now in place, Genesis is preventing eligibility issues and seeing reduced rejections, and most importantly, getting paid faster and retrieving as much revenue as possible.

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For more information on how TriZetto Provider Solutions can help you, call **1-800-969-3666** or visit **www.trizettoprovider.com**



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