



▶ Case Study: Consolidated Health Services

50+ Branches • Headquarters in Milford, OH • ZirMed Client since 2010

Before ZirMed:

The Revenue Cycle Management Team previously developed collector workbooks in Excel based on aging reports—a time-consuming, labor-intensive process that was inadequate and prone to error.

Case Study - AR Management:

- Denial & Appeal Management

Results:

- Streamlined appeals process
- Reduced steps involved in AR process
- Collectors now bring in significantly more money in much less time

Other ZirMed Solutions Used:

- Eligibility Verification
- Claims Management
- Remittance Advice
- Patient Payments
- Print Services

“ZirMed’s Denial & Appeal Management gives us a clear picture of our denials by payer and by branch location, so we can take immediate action on the trends we’re seeing.”

—Donald Hoskins
Manager, Revenue Cycle Support

Consolidated Health Services, a leading home health care and hospice provider, has been an innovative force in the home health market for over 35 years.

From its corporate office in Milford, OH, the company operates more than 50 branches throughout the country that provide nursing, medical social work, and home health aide services as well as home medical equipment, non-emergency medical transportation, and physical, occupational, speech, and home infusion therapies.

Why We Chose ZirMed

Previously, the company’s collectors were forced to work from aging reports because their service platform doesn’t allow zero-pay transactions to be posted. “With ZirMed, we’ve been able to bring

together our collectors’ work from multiple accounts and multiple payers into a single place,” said Donald Hoskins, Revenue Cycle Support Manager.

“Denial & Appeal Management gives us line of site to each work queue, which makes us much more efficient. For the first time ever, we can see denials quickly and get to work on them right away.” By helping the company’s collectors monitor their own results, ZirMed has empowered them to get ahead of their AR.

“We’re acting on our denials much faster than before. When we had to rely on our AR Aging Reports, we would focus on the older buckets of 30 days or more. Now, we can handle denials long before we create and analyze our reports,” Hoskins said. “It’s helping our collectors bring in significantly more money in much less time.”





Favorite Features

With the information he gets from Denial & Appeal Management, Hoskins can take steps to educate the staff about what they need to do to meet payer requirements.

"If it's a widespread issue with a single payer, we can broadcast it to all branches. If it's more localized, we can reach out to that branch, discuss the issue, and share best practices from a neighboring branch that's performing better."

He says it's great to be able to see clearly where a problem is coming from, but that's

just the first step. "The real payoff comes from actually correcting the problem—or better yet, preventing it from happening in the first place."

How ZirMed Benefits Consolidated Health Services

ZirMed's Denial & Appeal Management tool has added a critical missing piece to the company's collection process. "Now that we've made it a part of our daily processing procedure, our revenue cycle billers and collectors can react to denials almost immediately." By letting them see

more information in one place, it helps them prioritize their time.

"In the past we had to do a lot of scanning, copying, and faxing. Now our appeals process has been streamlined, and we can quickly create and file an appeal electronically," Hoskins said. "ZirMed has significantly improved our response times, which is certainly having a big impact on our DSO and cash collections."

Ready to learn more about ZirMed?
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INNOVATING CONNECTED HEALTHCARE

About ZirMed[®]

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