

THE PRECISION ACCOUNT MANAGEMENT PROCESS & RATIONALE

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1. Understand & register to work with Precision

Please view each tab in sequential order of the <u>Precision Network Solutions website</u>.

2. Identifying Your Best Market Targets

<u>Primary Targets</u> are Hospital/Health Systems with physician employees (one decision maker, everybody is required to participate, and the hospital gets the revenue), Physician and Multispecialty Groups, ACOs, Medicare Advantage, IPAs, etc. <u>Secondary Targets</u> are Payers, Benefits Managers, TPAs, Self-Insured Companies, etc.

3. Finding the Financial Opportunity for Your Prospect

Understanding the opportunity is a combination of two resources.



<u>PVBMT</u> will give you access to CMS reports on 1,040,000 providers. You will have unlimited access to this platform. <u>You can see a sample top half of a report on Slide 6 of our slide deck here</u>. The bottom half is the 16 quality measures compliance percentages.



If there is no data in PVBMT it means they physician is the "Supplier" and not the "Billing Provider" so CMS won't have that data, the provider or organization billing for them will. In that case we can closely estimate what the value would be simply by placing their total number of patients into our <u>ROI Calculator</u> tool here.



4. Introduction Email Message

This is the key to moving things quickly.

SAMPLE SHORT INTRODUCTION MESSAGE

Thanks so much for your interest in <u>Precision Healthcare Technology</u>! Here is a short overview of how we help specific types of organizations. The first message is a one-page <u>Elevator Pitch Overview</u> followed by <u>How Precision Serves Healthcare Organizations</u>, <u>Hospitals & Providers</u>. In your reading you will also learn that shared risk organizations such as <u>ACOs and Medicare Advantage</u> get all these benefits at no cost. Let's catch up soon!

5. Precision VBM University

Self-Guided Technology Demo Message – It makes no sense to do a technology demo for a platform provider will never see nor login into. That said, Precision VBM University is where we train our internal staff on operating our technology, so the practice doesn't have to. There are 18 lessons and 4 PDF guides of the services that we perform for every single encounter.



6. Contracting & Onboarding

The program fails to launch when the rep or strategic partner fails to do the simple tasks below. DO NOT WAIT for the provider or staff to get back to you. It's a two-page contract they can sign with their finger, and then export the contact data from their EMR or billing system which takes five minutes. THIS is the single biggest delay or blocker and it's the simplest and most preventable. It's all in the messaging as you will see.

What constitutes an active contract?

- 1. Signed Contract
- 2. Data/Logo
- 3. Contact Information for Practice Key Personnel
- 4. First HRA/Other Assessment Responses Showing on Live Portal
- 5. ACH or Credit Card Payment Information



7. New Account Welcome Email Message

Doug will send and copy everyone always, so we all remain in the loop. We don't want Phil, asking Betty what's going on with Martha and Precision. After you have the tasks above completed, please make an email introduction of your client to doug@precisionvbm.com and ray@precisionvbm.com At that point Doug will send the following Welcome message. This is a very important step to keep our emails from going to their Junk folders.

WELCOME TO PRECISION HEALTHCARE TECHNOLOGY

A very sincere thank you for choosing <u>Precision Healthcare Technology</u>! My name is Doug Sparks, and along with my partner and Co-Founder, Ray Vuono, our mission is to simplify and streamline all services that we provide with you. Here are a few things we can do to expedite this process.



Please enter my email (doug@precisionvbm.com), Ray's email (ray@precisionvbm.com), and our support@precisionvbm.com email addresses to your contacts list. Or copy from the above addresses. This will ensure that our joint communications don't end up in a junk folder.



NOW, please hit "**Reply All**" and enter any relevant email addresses of people on your team in the Copy (Cc) box. This could include the provider, office manager, billing, data, patient communications person, scheduler, accounts payable, etc. We will update our records to be sure we address the proper person as needed.



Following these two steps will confirm our joint contacts and allow us to begin immediately sending you daily or weekly encounter/billing reports so that you may begin immediately submitting claims for the services provided.



YOUR FOLLOW UP SCHEDULING PREFERENCES & PROTOCOLS ARE REQUESTED

From within the results of each successive encounter, our Al driven platform identifies new medical necessities and automatically creates suggested care plans for each individual patient that matches the <u>CMS Standard of Care</u> for compliance purposes. This <u>greatly aids</u> in your overall population risk stratification, which directly affects your RAF Score, as well as patient attribution credit towards any ACO or Medicare Advantage type shared risk program. Three birds with one stone, Compliance, Patient Engagement and Revenue or CPR.

Under these medical necessity standards, any patient found to be at *Moderate Risk (\$90 to you) requires a virtual or office visit. Any patient found to be at High Risk requires an office visit and a virtual or office follow-up (\$180 to you). We will prompt these patients to schedule with you as you direct.

*Great Staffing Strategy - Many providers take this opportunity to add a NP to handle these scheduled patients virtually, while assisting in the clinic the rest of the day.

Please advise how you would like each case handled so that we can put these directions in the autoresponders to your patient's assessment submissions.

- Moderate Risk Patients Scheule Preference Schedule Link, Email, Call, Person, Extension
- High Risk Schedule Patience Preference Schedule Link, Email, Call, Person, Extension

Thank you again and we really look forward to working together to improve your Compliance, Patient Engagement, and Revenue (CPR) performance.

8. Email Implementation Message

Doug will send this message once we have all the required information back from the rep or the strategic partner and the information is logged into your registered account.



QUICKSTART IMPLEMENTATION WITH PRECISION HEALTHCARE TECHNOLOGY

Again, a very sincere thank you for choosing Precision Healthcare Technology! My name is Doug Sparks, and along with my partner and Co-Founder, Ray Vuono, our mission is to simplify and streamline all services that we provide with you.

Knowing that everyone is busy, and that coordinating many schedules can be problematic, we prefer to launch implementation and follow up communication via email. Our job is to do as much for you as we can but know which specific people can help us in those efforts when we need a quick question answered. Along those same lines, we always respond with a "Reply All" so that everyone is always in the loop.

Here are some key people and/or contacts we need to assist you in our efforts on your behalf. Thank you in advance for adding these people to your email response. We understand that many times the same person covers multiple areas. We implement nothing with these other staff members without permission.



Provider and Office Manager/Administrator – <u>We work for you</u>, so these are our "Point People" who help serve as our "Air Traffic Controllers".



Data/IT/EHR Contact – The initial patient contact data file can be pulled from any EHR or billing system in five minutes by this person. In addition, we will have updated data that we wish to transfer back to your system, or you may have a specific program (allergy, sleep, lab, ANS, etc.) that you want us to query for validated medical necessity.



Patient Communications Specialist – When we send communications to your patients on your behalf, we need to assign a person and/or extension within your staff for the patient to call about the validity of our program and relationship. Providing this back line or extension and a named person reduces these calls by 90%+. In addition, to maximize the program you will want to include our billable assessment links within your appointment schedule and schedule reminder system. This person will help us to expedite these actions smoothly on your behalf.



Billing Contact – We will provide you daily, weekly, or monthly Encounter Billing Reports (EBRs) throughout the month so that you can begin submitting these charges for payments. We are happy to assist with this entire claim process all the way through to resolution of denial or payment. Theoretically and practically, if you want to have cash flow every day you should submit claims every day. We simply follow your selected schedule.



Accounts Payable – We advance considerable technology and labor on your behalf, so it is important that we are paid promptly. The typical expected value of our services is that for each 100 patients engaged monthly, you should collect \$12,100 in E-Visit and follow up visits facilitated by our system based on risk levels. For that you pay us only \$2,000 as we do not share in any of your other subsequent visit revenue. We need to be involved daily in submitting and working on these claims for prompt payment for you.

Please feel free to reach out to us at any time for clarification. Thank you for helping us to help you! Your staff and patients will also thank you!

9. Outreach Schedule

Model for Initial and Continuing Outreach

- Once we receive contract, data and logo we send the first emails and texts to the entire patient population on Tuesday and Thursday respectfully.
- For the following two weeks we follow the same schedule, but only to those who did not respond.
- Each Monday we send an encounter report for the previous week's response count.
- Week 3 four is always off.
- Week five, which begins a new cycle is based on care coordination steps for month one, or other assessments and services where medical necessity is found
- Ant target ancillary or another program the provider is offering.
- On the fourth month, we repeat the process.
- This gives us a year of data to map progress.



10. Contract/Invoice Legal & Compliance Disclaimer

Value adds reminders accompany all reports and invoices.

Contract/Invoice Legal & Compliance Disclaimer

We are pleased to have advanced significant technology and labor resources on your behalf. In addition, as long as your account remains current you receive our proprietary access to your latest public performance data such as RAF score and compliance status on 16 Quality Care Measures. If your ACO or Medicare Advantage programs are registered with us these assessments are free.

For compliance purposes, our contract requires us to be paid a small flat fee per patient response. We provide and submit superbills to you to assist you in expedient insurance claims filing and payment, and we help with denials and reconciliation. Our invoices are not based on or subject to your collections. However, we are paid when you are paid. That said, we must be in the claim submission and adjudication process to limit the time that we have extended these costly resources. We will show you a collection report for what you have been paid every 30 days and those payments are due immediately.

We do not invoice for 35 days to allow you to reap the financial benefits of our work on your behalf. Our services and benefits extend far beyond billing for E-Visits by way of compliance, attribution, and shared risk gains regardless of whether you choose to bill for our services or not. Our system also triages your patients by risk level and coordinates virtual or live visits to your schedule for you based upon your direction. We also can monetize your appointment reminders.



11. Report/Invoice Summary Value Summary

This cost to benefit spreadsheet accompanies all reports and invoices.



Example – In the sample real invoice you will see the practice was charged \$13,400 which created a value of \$101,618. On each invoice we provide "Qucklinks" for payment so they may instantly connect and pay electronically rather than use a manual process.



Precision Support – Responds to email inquiries within moments of receipt. Our responses are friendly, thanking them for their business, and letting them know that we are always there for therm. Attitude matters, and we do our best to deal with these potentially tricky subjects in the most positive way. If nothing else, these responses have helped us significantly in clarifying our processes and messaging.



Our objective is to be so consistently dependable and helpful that we are viewed as a critical part of their team, as this is the key to sustainability.

Superbill/Invoice - 3/24	#	Billed	TOTAL	Follow Up Visits		
E-Visit-99421 - Low Risk	109	\$28	\$3,052	0	\$0	\$3,052
E-Visit-99422 - Moderate	296	\$38	\$11,248	296	\$26,640	\$37,888
E-Visit-99423 - High Risk	267	\$48	\$12,816	534	\$48,060	\$60,876
TOTAL	672	To Bill	\$27,116	830	\$74,700	\$101,816

Expected PHT Invoice/This Period

\$13,440

Notes to Superbill

THIS IS NOT A BILL!

- 1. Patients reporting "Moderate Risk" require one virtual or office visit
- 2. Patients reporting "High Risk" require one virtual or office visit + one follow up visit
- 3. Patients are prompted to schedule these follow-ups at your direction

12. Patient Compliance Statements

This carrot and stick approach of compliance statements is why we have a tremendous response rate compared to any other types of patients or consumer engagement. Please note the last sentence as this avoids calls to the office to check on authenticity.

COMPLIANCE STATEMENTS

You are receiving this communication because our mutual focus is to stay ahead of illness between visits to see your physician provider. By doing so hopefully we will reduce or minimize the need for office visits. Please take a few minutes NOW to update our records.

- Your provider has asked us to engage with you when certain assessments or services are required due to "Medical Necessity."
- Medical Necessity is the basis and trigger for all services to be covered by insurance.
- Because providers may be penalized for failure to report this data.
- You may face a potential delay in prescription refills of other services until your provider receives this information back from you.
- Please take a few minutes and complete this assessment now as directed. You owe it to yourself and your family to stay ahead of health issues.
- For questions regarding the validity of this message please call "Mary at extension 14". Thank you!

As an additional reward for your participation, please feel free to download our <u>Precision</u>
<u>Health Access App</u> which allows you to securely download and store your patient records on your phone.

<u>This links you to free services</u> from <u>Precision Life Benefits</u> as well as a discount should you choose a subscription or a la carte service.

This reward is for you and all of the members of your family

13. Patient/Consumer Messaging

<u>Precision Health Access</u> phone app and <u>Precision Life Benefits Marketplace</u>. Between our provider network, <u>Strategic Partners</u> and <u>large corporate partners</u> we expect 100+ million downloads of our free health records app and storage for health records transfer capabilities.

YOU OWE GOOD HEALTH TO YOURSELF & FAMILY!

In life we are all striving to maintain balance between constantly varying degrees of wellness and illness whether physical, mental, emotional, or environmental. Sometimes the slightest thing, or a combination of events can knock us off this fine balance, thus exacerbating the negative or the positive. Our <u>best weapon is awareness</u>, and it is free for you to download, store and track your personal progress.

<u>Please click here to download our FREE Precision Health Access phone app</u> to access three simple self-assessments or tools that you may choose to utilize to assist your journey. This is your private and secure information and can never be shared except by you. The app download and storage will always be free. <u>Please click here to find out why this is the best life and health assurance you can have, and it costs absolutely nothing.</u>



Health Risk Assessment – There are 19 questions, with simple pull-down menu options, covering a variety of overall areas.



General Anxiety & Depression – Seven questions to help you remain aware of trends from your feelings within and how they affect your daily wellbeing.



Social Determinants of Health – This assessment displays a potential result of where you are on the first two assessments and can provide a great early warning system of potential problems ahead that you can address in advance.

Thank you again for joining us in these efforts for "<u>self-care</u>" as "<u>managed care</u>" requires that we as individuals play a starring role in our own health and wellness story! We're honored to be your partner and advocate!

14. Our Global Mission

To unite both patients and consumers to same health records platform for free. Perhaps you know some influential people or potential strategic partners you could introduce us to.

