PRECISION HEALTHCARE TECHNOLOGY
USE OF ARTIFICIAL INTELLIGENCE, AUTOMATION, & BLOCKCHAIN

Differentiators - What Makes Our One-of-a-Kind Technology Platform Special?

Why is Patient/Consumer Engagement So Important & Urgent?

The unfulfilled promise of "interoperability" is the curse of most all healthcare systems, with the 600+ Electronic Medical Records (EMR) companies closed to any outside interfaces. The European Union had a similar problem on its hands in 2022 when they required ALL phone and device makers to use the same USB-c plug and chargers. This meant that for example, Apple and Samsung would not have to change their phones but must be able to use each other's same cords and chargers.

Precision Healthcare Technology, TODAY can serve as the "Middleware" between all systems making transfers from phone to EMR paperless while driving AI-based compliance via true interoperability. And we do this without changing the function or DNA of your present EMR system, by automating the process in the background away from your workflow. In short, we lead with technology and support with labor. How does this work?

We are the only technology in healthcare with a "Concierge Software as a Service" offering that has us operating our proprietary technology for you. Our "White Glove" function has us transfer data from our platform to your EMR, submit into your billing system or billing company, and follow up on claims adjudication in real time. All for a very small, fixed fee, only per individual patient response to our electronic based encounters. We do these things on your behalf so that you and your staff don't have to.

Our strategic healthcare partners in these efforts represent 80% of the physicians in the US, over 110 hospitals and health systems and over 600 ACOs/Medicare Advantage plans. We also serve mental health, pharmacy and even provide global healthcare engagement solutions. This is just on the healthcare side before considering the consumer side. Why consumers?
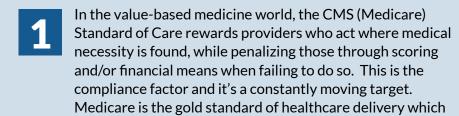
We have the most current and extensive compliance and performance data on 1,040,000 providers, updated nightly which show tremendous gaps in what providers think they are doing compared to what compliance requires. Now we know these gaps we need to know which patients need which services, hence our Patient/Consumer Engagement program.

Our statistics show that on average providers and organizations have valid contact information on only 48.63% of their patients, which means they are likely only to see them when they are sick. This is why we have such robust consumer outreach; to reconnect the health aware and conscious public back to their providers in advance of major problems.

PRECISION HEALTHCARE TECHNOLOGY
PRACTICAL VALUE BASED TECHNOLGY SOLUTIONS

1 In the value-based medicine world, the CMS (Medicare) Standard of Care rewards providers who act where medical necessity is found, while penalizing those through scoring and/or financial means when failing to do so. This is the compliance factor and it's a constantly moving target. Medicare is the gold standard of healthcare delivery which is modeled by everyone in the industry.

2 The greatest reason for claim denial and/or delayed payment is lack of documented medical necessity. Our system identifies, validates, excludes, and then documents where present, medical necessities for each individual patient and service as they occur, per encounter.

3 Even if you performed a required service on 100% of the eligible patients, you would still be penalized for failure to act on the medical necessities identified within the results of each successive encounter.

4 Only Precision's Workflow Intelligence can update in real time and electronically these medical necessities, generate care plans, and automatically engage the patient towards the required care coordination. This all happens in the background away from your staff with no upfront cost and no new technology to learn. Our blockchain system is far more secure than the standard HIPAA rules with auditable tracking of each click within and leaving our platform.

5 Our development partners began working in direct collaboration in 2007 in what was to become value-based measurement. Since that time each new initiative (PQRS, MACRA, MIPS, STAR HEDIS, QCM, etc.) has been loaded live onto our platform. Depending on your target measurement, we can turn on, off, or prioritize any of these measurement functions, and then overlay them on the CMS Standard of Care so that nothing is ever missed. We call this process, "Dynamic Clinical Synchronization".

EXAMPLE

From within the results of our proprietary AI-Embedded Health Risk Assessment, further individual patient medical necessities and care plans are generated for the following actions. Everything you are about to read currently requires human inference of results and labor driven action. Our system eliminates labor and automates the process to the specification of each individual provider in a group or organization.

1 Further Precision AI-Embedded assessments needed – 39 different possibilities, all with attached actions based on the embedded results of previously found medical necessities. <u>Again, only from within the results of our encounters do we learn new medical necessities and expected actions to meet compliance</u>.

2 Identifies the need for diagnostics, sends the electronic informed consent to the patient, and can link to the schedule function, and/or make the electronic referral via prepopulated requisition form to the local or remote target service provider.

3 Identifies and electronically gains informed consent from the patient, provides direction, and/or scheduling for the top mandated value based ancillary services – Annual Wellness Visits (AWV), Chronic Care Management (CCM), Remote Patient Monitoring (RPM), Primary Care Management (PMC), Behavioral Health Index (BHI), Transitional Care Management (TCM), etc. **No annoying phone tag!**

4 Same as above except for the many available outside ancillaries such as labs, allergy, sleep assessment, bone density, ABI/ANS, etc. This class is the most often started and failed, yet one area of our greatest success. <u>NO</u>, you cannot be paid for lab work, but you can be paid for the electronic encounter that includes the assessment that determines objective medical necessity for what specific labs are needed.

5 Based on rules and conditions set by each provider, we can automatically and electronically make a referral to another provider, specialist, or facility, under any number or range of circumstances or use cases you may desire.

6 To avoid leakage, based on individual medical necessities, we can instantly and electronically make transfers and referrals within a system, and/or closed or optional provider networks as you designate. Stop missing services within your own system caused by human oversight.

7 <u>All these services are accessible at no cost to shared risk organizations such as Accountable Care Organizations (ACOs), Medicare Advantage Programs (MAs), and other Medicare Shared Savings Programs (MSSPs) where we partner on fee for service sectors</u>. This is a great tool for Independent Physicians Associations (IPAs) as well!

WHY IS THIS SO IMPORTANT?

1 Precision Health Access is a free phone/device app that allows consumers and patients the ability to securely save, store and transfer their health records rather than having to log into the many password protected portals of their family's providers and facilities. This function will always be free, and we expect 100+ million downloads via relationships with our corporate partners.

2 Our platform sits on top of an "everything and the kitchen sink" Electronic Medical Records (EMR) system that today can transfer these records electronically, instantly without paper documents or record requests between facilities. We work with the EMR companies and do not compete.

3 We will provide access to our Precision Health Records (PHR) format APIs to the 600+ EMR companies for free so they too can help expedite these processes as we can today in our platform. Once these records are in their system, all the above features become active for every provider. There are no losers here as everyone wins! Thank you for your time and interest.

EXACTLY HOW WILL PRECISION "CHANGE HEALTHCARE TO LIFECARE" & WHAT QUALIFIES YOU?

CORE SERVICE

Precision Patient Engagement – Our Presence & Utility in the Healthcare Sector

1. Precision Healthcare Technology's founding partners have continually developed proprietary AI and blockchain driven technology solutions for healthcare since 2002, and business models since 1987.

2. This journey has been a repeat cycle of finding, defining, and refining a market's opportunity.

3. Many of our programs and technology contributions have gone on to become industry staples and/or standards for their time. We can test and solve many problems in advance because our platform is built on top of a very comprehensive Electronic Medical Records (EMR) system.

4. Our access to compliance and performance data on 1,040,000 physician providers shows care gaps and demonstrates to the dollar, revenue lost and penalties that could be owed for failing to act on these medical necessities. The provider sees their updated RAF Score (public healthcare credit report) and where they stand on the top 16 Quality Measures, and how they improve over time with our help. Take the missed revenue or face the penalties.

5. Only Precision can identify medical necessities and create care plans in real time to the CMS (Medicare) Standard of Care. Each subsequent encounter updates these medical necessities. The #1 reason for claim denial is lack of documented medical necessity. The #1 cause of penalties and missed revenue is failure to act on these medical necessities, largely because only we have the tools to find them.

6. Now that we know the care gaps, our Precision Patient Engagement Program creates a billable event for the entire patient population. This electronic process triages which patients need which services and automatically directs them to take the next step to connect with the clinic or facility as directed.

7. We can launch in 72 hours, there is never an upfront fee, and there is no new technology for the staff to learn, as we perform all our services in the background away from their office workflow.

OUR STRATGEIC PARTNERS

Our strategic healthcare partners represent 80% of the physicians in the US, over 110 hospitals and health systems, and over 600 ACOs/Medicare Advantage plans. For every $2,000 a provider spends with us they should conservatively make $12,100. Our Beta/ Pilot shows that number at $18,180. We currently have 5.89 million patients under contract, onboarding or pending contract completion. This is just on the healthcare side before considering the consumer side. With providers only having valid contact data for 48.63% of their patients, it's clear their own efforts are failing.

HOW ARE WE PAID

We are paid $20 per patient per quarter or month for patients who respond to our electronic engagement, or about 30% of the gross number of patients contacted. We get these numbers because we have developed a system that revolves around the use of a series of carrot and stick compliance statements that prompt immediate action. Patient response is electronic on their own devices at their convenience. Our profit margin is 50% minimum depending on the sector.

SHARED RISK PROGRAMS

On May 23, 2023, we formed Precision Healthcare Technology to be offered to clients and partners in a Software as a Service (SaaS) model. Part of this scaling strategy was to offer our services free to the shared risk sectors of each organization. Accountable Care Organizations (ACOs), Medicare Advantage plans (MAs) and Medicare Shared Savings Programs (MSSP) desperately need our technology but can't afford to spend the money in a cost restrained reimbursement model.

Though these organizations only make up 20-30% of the provider's revenue, the fixed monthly payment the providers receive from these organizations typically pays their plant and staff costs, so when these groups speak the providers listen. By offering our services free, in return we get the 70-80% of the practice's fee for service business, and then share that revenue back with the referring organization. It's a new revenue source for them and a great value to bring to their client practices.
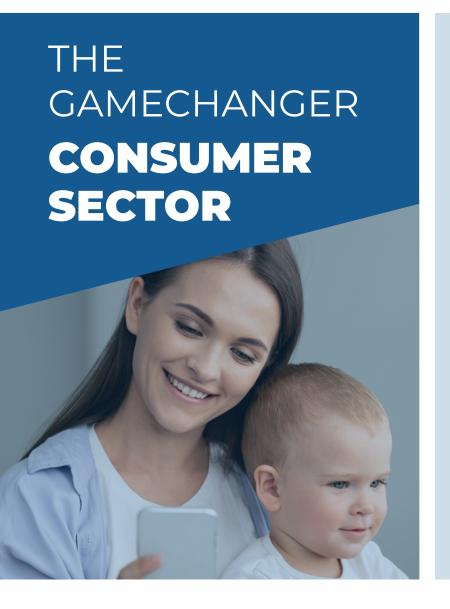
CAPITATION PAYMENT MODELS

In the process of working with an organization that runs shared risk programs for 3.5 million patients, the CEO said, "I'm grateful for these free technology services but we're paying per member per month for other similar services that I'm guessing you can do for much less". And just like that we're building a model together which gives us market entry where we had no previous presence, by partnering with the leader of one of the largest such organizations in the country.

PHARMACY OPPORTUNITIES

There are 22,000 independent pharmacies which include pharmacies within grocery store chains. These low margin, cash squeezed organizations are about to begin using our technology for billable assessments in conjunction with the prescribing provider serving as the collaborative partner. Many of these prescriptions require certain often missed assessments to remain compliant for current or extending prescriptions. This generates a $23 reimbursement for a cost of about $3 for our technology and billing reports.

PRECISION
HEALTHCARE TECHNOLOGY

THE GAMECHANGER
CONSUMER SECTOR

The Best Life & Health Assurance is FREE!

Together we can change Healthcare to Lifecare

Problem – Your health records are spread across the password protected patient portals of every healthcare provider you or your family has even seen. You cannot access these in one place when you need them most. Ironically, you may have been sharing some of this information on social media five minutes before you became a "patient", and now you can't get to it.

- In fairness, healthcare is not to blame, is not at fault, but rather the result of patient privacy laws.

Solution - TODAY we have the technology to store and transfer these records on your phone to any EMR, for easy access by you for FREE! Everyone wins & no one is hurt by this movement! EMR companies will certainly agree.

HATE is a very strong word but let's just say that universally;

- Physicians have a hate, hate relationship with their EMR systems. They are expensive, complicated, time consuming, and take the physician's attention away from YOU!

- Patients don't like constantly filling out the same redundant paperwork.

- Neither doctor nor patient are served by delaying care and/or creating later visits because they need to request past medical records from another provider or facility you have been treated in the past.

Eric Topol, MD, in his book, "The Patient Will See You Now" describes such a world. I highly recommend this book as Dr. Topol is far ahead of his time with his visionary outlook. This is only a world that can be created by all of us working together.

The technology is in place today, as we helped architect it and build it, so we are your perfect advocate. We make our money from healthcare, so for Precision this is not about making money at all, but rather causing great change for the good of mankind, hence the nonprofit, PROACT.   To further make this point, when was the last time you saw a nonprofit NOT seeking donations? Probably never. We do not! We own the technology and want to direct it to the benefit of an improved system, but .....
WE NEED YOUR VOICE!!

Our FREE Precision Access phone app, with free record storage, will allow your health information to go right into any Electronic Medical Records system thus making this paperless and removing the ridiculous redundancies and records transfer requests. In our effort to make this a reality, we are donating our technology to you, and not charging the 600+ EMR systems a penny to implement, and now they can sell a paperless upgrade to their clients while attracting new ones.

We offer several free AI embedded assessments and other benefits when you make the download. We also offer a completely optional subscription model to many health-related products and services as well as ala carte menu via Precision Life Benefits embedded within the app. This helps us to offset the cost to the great majority who may choose not to use any of the other optional services we offer.

To nudge the EMR companies into this simple change will require the voice of every healthcare organization and 100 million downloads of our free app. By comparison, internet browser Duck Duck Go has 250 million downloads. In fact, many large corporate entities and charities are joining us in the effort to spread these Public Service Announcements (PSAs) messages as we donate a significant portion of any service revenue back to their causes. For more information, please go to our PROACT website to learn more about this crucial messaging. Thank you so much for helping us **"Change Healthcare to Lifecare"**!