



You're Invited

**to Maximize Your Participation
in a very exclusive group, you may not
have even known you belong to.**

PRECISION ES² – EXPONENTIAL SYNERGIES² WHERE CONFLUENCE MEETS INFLUENCE

Healthcare technology development, marketing and implementation is a very costly, time consuming, and top-secret business. Always evolving, you are constantly challenged on every front of the business landscape in addition to these technological challenges.

The only thing more costly than development is acquisition, which rarely leaves anyone happy and, even less often, leaves a survivor as strong as one of the original parts. The worst part is your entire world, vision, and dream is turned upside down in what is many times a failed process.



How will you increase your stake to scalable market share and prove your differentiators in a crowded and noisy market where everyone thinks they are already doing all or parts of what you're doing? Especially when they are not even close. [Very simply, we band and work together to help you put you and your clients first, and realign the global incentives!](#)

With us, you just are authentic and purely you at your best and change nothing to participate. No cost, no investment, just brilliant technologies, and their teams working together in a cooperative and collaborative environment that breeds sustainable growth and success for our clients and partners!

You gain with value adds for your present clients, attract new clients, create new revenue silos from our efforts with you, and give you exponential exposure to the clients of our other noncompeting group partners.

[Precision Healthcare Technology](#), as you will read, is in nearly every sector of healthcare as well as the consumer aware public. Only our technology recognizes the individual medical necessities of every patient and updates those care plans and directs care coordination from within the results of each successive encounter to the CMS Standard of Care. Value based care rewards action on medical necessities and penalizes failure to act. We are that roadmap and air traffic controller, and we need to feed you these clients, where we take nothing in return.

IT'S AS EASY AS 1, 2, 3!

1

We start by showing the group, organization, or provider how they are scored in the eyes of CMS and the other payers. We have this indisputable data on 1,040,000 providers and will also give you free access to it for your own use. To track progress, RAF scores and quality measures for providers are updated on a rolling 90-day schedule and we are updated nightly. Together we do a great job, and we can prove it!

2

Now that we know where these care gaps are, we need to know which patients have which gaps. We do this by monetizing patient engagement for the entire practice population and share that revenue with you, without interfering with your current relationship, and taking no money from you.

3

Now that we know which patients need what care, we act as the Care Coordinator by meeting the practice where it is and wants to go. Do they wish to provide these services themselves, in house, with their own staff? Or do they have a vendor they want us to work with or refer a vendor to them? This is where we plug you in because we do not offer any of these services ourselves, but need to assure the loop to care is complete with quality partners. Again, we take nothing from you for the services we refer to that you perform.

Quite simply how do you fit, or want to work yourselves into this continuance? Literally anyplace from top to bottom, we want and need to empower you and shine the light on your brilliance. Together we rise! Thank you for your interest!



**MAJOR PROBLEMS
IN HEALTHCARE
ADDRESSED**

Our healthcare system is antiquated and broken but the solutions for the future exist today. By working together, we can turn these tools on with no upfront expense and no new technology to learn. In fact, it drives compliance, patient/consumer engagement and revenue or CPR.

**PRECISION
HEALTHCARE
TECHNOLOGY
SOLUTIONS**

Our studies show that providers only have valid contact information on 48.63% of their patients, which means they are likely only to see them when they are sick. Value based care requires and rewards preventive actions and penalizes failure to act on medical necessities.



INDUSTRIES & POPULATION SECTORS SERVED

Our comprehensive and current payer grading and performance data on 1,040,000 providers shows they are horribly out of compliance with the patients they do see and have no way to contact the other half.

Our Precision Global Outreach efforts will triage the existing patients for current risks, direct them to connect as needed based on medical necessity, and drive the health aware consumers to reach out and reconnect with their current providers, or help them find and connect with a new provider.

**THE PRECISION HEALTHCARE TECHNOLOGY
ECOSYSTEM IS HELD IN YOUR HANDS**



PRECISION
HEALTHCARE TECHNOLOGY





PRECISION HEALTHCARE TECHNOLOGY WORKFLOW INTELLIGENCE BENEFITS

HEALTH AWARE CONSUMER - ALWAYS FREE

- Downloads free Precision Health Access (PHA) app.
- Begins to store health records from their providers and facilities.
- Completes Precision AI Embedded Assessments (AI-E).
- Precision AI-E Health Risk Assessment classifies risk level.
- From within the HRA results, person may wish to engage a provider.
- May be their current provider or find a new one.
- Can determine if they want electronic, virtual, or live visit.
- Use our app to schedule with current or new provider.
- Access free, subscribed, or ala carte health and benefit services.

PATIENT BENEFITS

- Takes or transfers their medical data for the appointment.
- Prints or transfers to provider's Electronic Medical Records (EMR) system.
- No redundant paperwork or records transfer requests.
- From within results of each encounter, PHT guides the provider to next steps.
- Provider has programmed preferences for each referral type into system.
- Automatic transfers and referrals prompt provider for confirmation.
- Automatic referral and scheduling function.
- Appointment updates with any additional information needed requested.
- Update your PHA phone app with the latest visit information.

PROVIDER BENEFITS

- PHT Outreach delivers AI-E Assessment to entire patient population - 12.44% Cost to Return - \$12,100 in revenue for \$2,000 for each 100 patients.
- Results in accurate patient attribution counts and ongoing updated contact information - only charged for responding patients.
- The patient's AI-E Assessment results come back to provider and automatically responds next steps to the patient based on these results.
- Provider offers schedule visit types (electronic, virtual, or live) so appropriate staff can be available for the patient's specific needs.
- If patient needs lab or other services, this is automatically put in motion before the encounter with the patient to stop unnecessary visits.
- From within these results, the provider knows what next steps the patient requires in compliance with the CMS (Medicare) Standard of Care.
- PHT's Concierge, White Glove Service transfers this data back to the provider's EMR, submits claims and processes any claim adjudication edits needed in real time.
- These completed efforts assure compliance and lift in Risk Assessment Factor (RAF) Score - The provider's "public credit score".

ANCILLARY SERVICE PROVIDER BENEFITS

- With medical necessity defined and confirmed, patient receives informed consent to participate.
- Patient schedules with the relevant provider and both receive results so the patient isn't in the dark about outcomes. No more missed mandated services.

STRATEGIC SERVICE PARTNERS - IT TAKES A VILLAGE TO SIMPLIFY A COMPLICATED PROCESS!

- Strategic Partner represents 80% of physicians and 50% of Nurse Practitioners & Physicians Assistants - 2 million members.
- Strategic Partner does EMR integration for hundreds of hospitals and health systems - provides front & back end EMR support hence we are already in essence in every EMR system.
- Shared Risk Programs - ACOs/MAs/MSSPs - For 25 years have managed shared risk capitation payer contracts. We provide our services for free to this sector and then share our fee for service revenue.
- Mental Health - Though many specific and conditional assessments are required, only our model allows these facilities to be paid for the encounters.
- Pharmacy - Compliance requires certain specific assessments for refills which providers rarely perform. Pharmacies monetize this process with us.
- Precision Health Access - Created a health access phone app originally for T-Mobile and then expanded it to many other corporate partners.
- Precision Life Benefits - Offers subscription based and ala carte choices for health access and benefits products as well as other valuable resources.
- Precision Global Outreach - Leads all messaging; 30 years working with Fortune 500 companies and creating viral web/social media in support.
- Private Equity Firms - Have clients and partners with emerging technologies that would benefit from this exponential exposure and application.
- Google Cloud Healthcare - Will securely store all patient access data and provide tools needed to connect to every partner listed above.
- National network of local providers who patients can engage electronically, virtually, and live, based on insurance or cash pay services.

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 TECHNOLOGY 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.

BLOCK CHAIN



00101110
10101100



1

PRECISION HEALTHCARE TECHNOLOGY

WORKFLOW INTELLIGENCE

SERVICES GENERATION

1

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

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. **NO**, 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

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. This is a great tool for Independent Physicians Associations (IPAs) as well!

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

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 STRATEGIC 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.

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”!**

