



PRECISION
HEALTHCARE TECHNOLOGIES
Changing Healthcare
to Lifecare

YOUR VIRTUAL TOUR OF YOUR NEW HEALTHCARE HOME & NEIGHBORHOOD!

**THE FUTURE IS NOW!
BREAKTHROUGH TECHNOLOGIES &
PROGRAMS BY PRECISION!**

**I'll describe our long road to "Change
Healthcare to Lifecare" with a long question ...**

(Very Important Five-Minute Read)

QUESTION

What's the hardest thing about sharing 18 years of transformative technology developments, eight years of program model refinement that not only connect 17 sectors of healthcare and consumer health, and eight websites with over 400 webpages of information ...

... AND to do so without up front or out of pocket cost, no new technology to learn, no operational changes, with a guaranteed profit, while providing exponential exposure to the clients, providers, patients, and consumers of all other sectors?

ANSWER

Simplifying the explanation of our unseen and unknown "Ghost in the Machine" has been the biggest challenge, but I think we've got it!!

NOTE

You and your staff do hundreds of similar tasks weekly with no compliance credit or revenue! PLEASE stop trying to manage with humans what only our AI driven, [Precision Stealth Workflow Intelligence](#) can do!

BACKGROUND

Since 2007 Precision has helped to architect and build value-based measurement and management platforms with CMS/Payers. These algorithms are not in any EHR or dataset, and the only master structure for all payers resides within Precision's platforms.

- We have current and updated CMS/Payer compliance and quality measures data on 1,061,000 providers and can tell them to the dollar what revenue they are being penalized for not taking.
- The penalties that you never see - On one sample code a compliant provider receives \$352, and a noncompliant provider gets \$179. There are 42 different reimbursement levels in this one region for any one code! Only Precision can optimize this for you while you change nothing!
- They keep 100% of this missed compliance-based revenue as we are compensated separately for our AI triage, care coordination and navigation codes.
- You cannot possibly achieve compliance unless you bill for our electronic triage, care coordination and navigation codes, even if they don't get paid.

RESULTS?

The very same system that was built to penalize organizations and providers can correct their path in the background with their own rules without any operational changes required. There is no new technology to learn, no upfront or out-of-pocket costs, and a profit is guaranteed. [More information here.](#)



GLARING EXAMPLES OF NEED

Each of these organizations was absolutely certain they had their practice locked in!

- 1 An organization with 704 providers is missing on average \$353K in compliance mandated services despite spending \$200K on data, 70 people on patient engagement and 50 people of RAF Scores –
- 2 A shared risk organization with 3.5 million capitated lives gets our technology and services completely free, by sharing revenue with us on the 9.5 million fee for service patients they don't even serve.
- 3 One hospital leader who couldn't possibly see another patient found out that 64% of those patients should never have been on his schedule. He simply set the triage rules and now he is in control of his schedule and better serves his patients.
- 4 A provider with attribution credit for only 2,316 of his 8,620 patients now enjoys a \$48 pmpm on nearly all of them.
- 5 One practice that was missing \$1.438 million in compliance mandated services can be accomplished with Precision for \$479,564 in a shared risk environment. Payers love that this program starts with the cost of a stamp only when a patient responds.
- 6 At a Hospital CFO Roundtable one group with 213 physician employees missing \$42 million in compliance mandated services now has clear a path to profitability at no cost or operational changes while better serving the patients. When asked the best way the CFO could help, I said, *"Respectfully, stay out of our way. You have no control of the penalties our system creates. We simply substitute solutions without you too, but at your direction."* I got a standing ovation!

WHO WE SERVE & HOW WE SERVE

- 1 [Hospitals, Organizations & Providers](#) - Click to see three things we do for providers, their staff, and their patients that no other technology can do.
- 2 [Our CMS/Payer Report Cards](#) - Don't shoot the messenger but this is current data of how payers view and grade you. *Nice to meet you! You're missing \$333,901 in compliance mandated services that you think you're doing. No problem: we've got it covered for you, and you keep 100% of this clinical revenue!"*
- 3 [ACO/Medicare Advantage Programs](#) - We separate fee for service from capitated populations and escalate care electronically by resources available. This allows us to share the fee for service revenue back with shared risk to offset capitation spending.
- 4 [How & Why Have These Corporate Giants Been Critical to Our Success?](#) - When you realign the incentives and benefits while truly helping to simplify the lives of providers, staff and patients, you find out just how great the se corporate citizens are.
- 5 [How Exactly do We Benefit & Connect All Our Strategic Partners Together](#) - Most products and services cover only a subset of the patient population whereas we engage and monetize all patients and then have our partners in other sectors share in revenue together when we use each other's services.
- 6 [Benefits to Generative AI and Health/Wellness Apps](#) - In a lunch conversation with the head of Google Cloud Healthcare Worldwide, the Eureka moment was that without Precision, AI workflow is as useless as Google Maps without a destination entered. We plan to work with all of them at no cost!
- 7 [Our Simple Process & Rationale](#) - Sounds great but how does it work? We do EVERYTHING, so you change NOTHING! Again, 18 years of technological development can't be explained, and the lessons learned from eight years of model iterations are to completely remove you from work machines can do. **Lead with technology so you have the bandwidth to support with humans!**
- 8 [Consumers & Patients Health Records Ownership](#) - in a 50/50 JV with healthcare intelligence giant, Milliman, for the first time in history we offer a free downloadable health records app and free personal storage, OR a subscription model that updates all patients records in real time in one place no matter where the care was delivered.
- 9 [Our Hospital Program](#) - pays for this subscription for the patient while at the same time, closes compliance gaps electronically and virtually.
- 10 [Precision Health Access, Supported by our Precision Life Benefits](#) discount group purchasing organization is intended to provide everyone access to options, pricing and then connect to the selected care with either subscription, cash, insurance or any combination you choose! This somewhat supports and offsets the free services we share globally.

SERVING OTHER SECTORS OF INTEREST

- 11 [About Our Stealth Workflow Intelligence](#) – Putting the “Art” & Science in Artificial Intelligence.
- 12 [Rural & Small Hospitals](#) - Interestingly these very same strategies work for outlying or underserved areas of even the largest systems. Creating satellite offices without expense has never been easier by collaborative service offerings.
- 13 [Dynamic Chronic Care Management](#) – Medicare considers this the most valuable program yet only 4% actually receive it. Here’s how we can up that to 12% and share revenue on the other 96%. No service is coordinated without validated and documented medical necessity.
- 14 [Dynamic Care Management](#) - Value based compliance, executed properly will make providers far more revenue by better serving more patients without ever seeing them, than they will ever accomplish in their office.
- 15 [Electronic Health Records Companies](#) – Making these guys the hero instead of the villain in our efforts to “[Change Healthcare to Lifecare](#).” With many of the 630+ companies almost giving their technology away, we offer revenue shares and differentiator value adds.
- 16 [Mental Health Initiatives](#) - For compliance, patient engagement, and revenue you are required to keep current assessment data to validate medical necessity for RX use and its misuse. These must be billable encounters to get compliance credit.
- 17 [Independent Physicians Associations \(IPAs\)](#) – Immense value adds for missed compliance mandated services means you share in our revenue for your organization.
- 18 [Revenue Cycle Management \(RCM\)](#) – If each provider is proven to be missing \$300,000 in compliance mandated services, what does that do for your client and your bottom line by “gifting” Precision to their compliance efforts?
- 19 [Benefits to Payers/Insurance Companies](#) – Payers benefit with updated risk stratification and the comfort in knowing that we can deliver twice the number of services, for half the cost, and with no claim denials. Precision escalates care electronically for the best match of visit type and staff.
- 20 Benefits to the Pharmacy Industry – Walgreens spent billions of dollars trying to create billable collaborative relationships with providers. We have done it at no cost. Shortly 16,000 independent pharmacies will share our health records ownership initiative with their customers. Every pharmaceutical rep will do the same with their provider clients. See how they are monetized for this.



SERVING OTHER SECTORS OF INTEREST

- 21 [Consumer Services](#) – We can't provide instant access to consumers and patients across 17 sectors electronically without them controlling their own health records. For the first time in history this is now a reality in our 50/50 JV with [Milliman](#).
- 22 Benefits to Membership Organizations, Nonprofits and Charities – Always looking for value adds for their members and supporters without exacerbation of “donor fatigue.” We can actually donate back to THESE organizations when they share our PSAs for health records ownership.
- 23 [Global/International Healthcare](#) – It doesn't matter what payer system or country payment model, they all need data to triage and escalate care based on visit type, service and staff member. The CMS Standard of Care states that where medical necessity is found, the provider must act. We identify, validate, doesn't and connect to any and every service based on medical necessity.
- 24 [Benefits to Private Equity](#) – Precision is the secret weapon to assure growth and success. Every such investment requires urgency and a predictable target result. This is how we approach all clients!
- 25 [Precision Network Solutions](#) – supports our Strategic Partners, professional consultants, and sales reps in the simplicity of presenting our many programs.

Thank you again for your time and patience in understanding our mission.

Let's connect and see what we can build together.

