



**PRECISION**  
HEALTHCARE TECHNOLOGY  
Changing Healthcare  
to Lifecare

# **BENEFITS TO REVENUE CYCLE MANAGEMENT COMPANIES (RCM)**



We have come a long way from the concept of a billing person or company, which solely focuses on claims submission and payment processing, to the once futuristic notion of present RCM capabilities that covers a broader spectrum, including patient scheduling, registration, insurance coverage verification, eligibility checks, coding, claims denials management, payment posting, and collections. You are not only the compliance gateway, but also the literal financial lifeline of any organization. We're here to help both you and your clients earn new revenue and streamline the process along the way.

Unfortunately, your provider and organization clients are still working in the dark ages with overstretched staff responsibilities within a constantly constrained labor force, all combined with epidemic staff turnover. Not unlike a busy restaurant, we regularly see six people each doing 1/6 of one job and shifting throughout the day to other jobs as needed.

## THE PROBLEM

Through no fault of your own, you do your best to avoid, "Garbage in, means garbage out", but it all comes back to the originating source. [Precision Healthcare Technology](#) is a one-of-a-kind technology tied to current CMS provider compliance reports, and the CMS Standard of Care, that states to the dollar what that provider is missing in mandated services. This means failure to perform where medical necessity was found. This not only causes missed compliance and revenue but creates a system of various types of penalties. Only Precision owns and has access to this technology.



## WHAT'S SO SPECIAL ABOUT PRECISION?

Within the results of each current or successive encounter, new medical necessities and care plans are generated to mirror what the provider is expected to do by CMS and other payers. Our platform then connects the entire patient population, in the background and away from the provider's workflow, to begin their next steps electronically in a billable encounter. This gives us risk stratification and improves attribution.



## THE SOLUTION

Please remember that when medical necessity is identified, these are not optional services but rather required services. **As much as the provider believes either they or their EMRs are doing this work, our CMS/Payer data shows they are failing miserably.** Only our technology can close these gaps. Very simply, in three easy steps we;

- 1.** We show the provider or organization how they are currently being seen by CMS and others including RAF Score and compliance requirements for the top 16 Quality Measures. Now that we know this missed mandated value, we go get that revenue for the providers, and you.
- 2.** Knowing what gaps the provider has, we must now find which patients have medical necessity for which services. This is a billable electronic encounter to the entire patient population.
- 3.** Now we know what services are needed, we need to connect those patients to the links to expedite those services automatically rather than hoping the provider considers or remembers to make the referral.

## EXAMPLE

We provided CMS Report Cards for one organization with 700+ providers for their first 10 PCPs in alphabetical order from their website. Just these first 10 providers were missing an average of \$353,000 EACH or \$3.53 million in mandated revenue.

Working with Precision, you provide an exponential lift in compliance and revenue to your clients, which of course drives your revenue as well. Let's connect and see what we can achieve together. Please reach out to our Co-Founder, Doug Sparks – [doug@precisionvbm.com](mailto:doug@precisionvbm.com) Thank you in advance.

**We Do the Driving – You Benefit with No Change in Workflow or How You Operate**

## THE BOTTOM LINE

We can launch in 72 hours, no cost up front, nothing owed until after you are paid, only pay for those patients engaged, no technology to learn, we transfer data from our system to your EMR and submit to billing, follow claims through to payment adjudication, all with no new staff responsibilities.

This is the fastest path to compliance and success. Per 100 patients engaged, you can conservatively expect \$12,100 in revenue for \$2,000 spent. We do everything for you, so you and your staff don't have to.