PRECISION
HEALTHCARE TECHNOLOGY

CHANGING HEALTHCARE TO LIFECARE ...

... WITH BLINDING S*%&D!

My apologies for the language, but the "**S*%&d**" in the title is really the word "**Speed**", which apparently is banned in healthcare. Healthcare is the most volatile industry with compliance, regulations and reimbursement being changed nearly monthly with little or no notice. Ironically many healthcare organizations are run by systems and people who don't like change or are so risk averse they set up a death march of committees to make sure nothing ever changes. Crazy, huh?

On the lighter side, glaciers move faster, politicians are jealous of healthcare's pace to do anything, and in a race against a pregnant lady healthcare comes in third. Thanks, Tommy Lasorda, for that last one. **In any case, this epidemic lack of action is not helping the provider or the patient and crippling the organization!**

Our technology covers the first part of the subtitle in that we can operate at "**Blinding Speed**". Because our Precision Stealth Workflow Intelligence operates in the background, the provider never sees it thus they are blinded to its process. No technology to learn and no new staff responsibilities! Back to speed;

1. We start with CMS and other Payer data to show the organization and provider that sadly they are failing in their efforts to achieve compliance in the value-based world.

2. Though most are absolutely certain they are already doing these things well, our data is irrefutable. Don't shoot the messenger!

3. These are not optional services but mandated services. The CMS Standard of Care requires that where medical necessity is found, the provider must act and gain rewards, or fail to act and incur a variety of penalty types.

4. We share this data which tells to the dollar what revenue they have missed in mandated services, and then we go get the money for them.

5. Even if they had access to our technology, they still wouldn't have the staff or bandwidth to act so we literally do EVERYTHING for them, so they must do NOTHING!

6. Absolutely nothing changes in their office or the way they operate. What are the steps?

7. Precision engages the entire patient population in an electronic billable encounter to gain patient attribution and triage your risk profile which is the first half of your RAF Score.

8. Now that we know your care gaps, we need to know which patients have which gaps.

9. By medical necessity, patients found to be at moderate risk require a virtual or live visit, and high risk patients require an office visit and a virtual or live follow up. We facilitate these onto your schedule as you direct, and you keep 100% of the revenue.

10. Now that we know which services for each individual patient where medical necessity is found, we connect them to those services electronically. This is the second half of your RAF Score.

The results of these efforts are superb **Compliance, Patient Engagement, & Revenue – CPR**, all while nothing whatsoever changes in your office.

LOGISTICS

We can launch in 72 hours, revenue in 35 days, even larger organizations can implement in 30 days, we onboard provider member partners of the organization, no cost upfront, nothing owed until after insurance pays, we move data from our system and transfer into your EMR, submit our Superbill directly into your process, and follow up on claims until you are paid. You do NOTHING and we do EVERYTHING! Per 100 patients engaged you pay $2,000 and expect $12,100 in compliance driven revenue!

LOGIC SPEAKS

Do you really need committee approval to go after mandated services proven by CMS data that are not being done? As your Strategic Partner, Precision's technology is tied to the CMS Standard of Care and can do literally every task for you, do you really need a committee? Please just let us do what we do. Thank you!