



PRECISION HEALTHCARE TECHNOLOGY

Benefits to Ancillary Service Providers

Only [Precision owns technology](#) that can identify individual patient medical necessities and then generate care coordination plans to the CMS Standard of Care, the gold standard in healthcare. Then on an ongoing basis, these same actions are updated in real time with each subsequent encounter with the patient.

Software as a Service (SaaS) means you buy or license software for your intended need. [Precision's Concierge SaaS or C-SaaS](#) operates the technology for you so that there is no staff training or new technology to learn. In fact, you never login to our system.

All our patient engagement efforts happen in the background away from the workflow of the provider and staff, and triage which patients need to be seen either via electronic, virtual, or live office visit and which staff type is the most appropriate match for that encounter.

We charge a flat low rate only for those patients who respond, there is never an upfront cost, and you do not receive an invoice for 65 days to allow you to benefit from our actions before your invoice comes due. For compliance reasons, we are not allowed to be paid based on your insurance collections, yet we send you daily, weekly or monthly superbills to ingest into your billing system. We also assist with claim denials and resubmissions of corrected claims or claims missing information from your office. [Why is this important for ancillary service providers and their clients?](#)

There is not a more transient offering for providers to their patients than ancillary services, as they are the most often started and often failed. Though everyone has likely tried CCM, RPM, AWV, Allergy testing, sleep studies, etc., failure to engage and retain the patient is an ongoing challenge.

With [Precision's Patient Engagement program](#), we capture the entire patient population into a risk stratification funnel that then breaks out individual medical necessities, and then prompts electronic enrollment.



EXAMPLE 1 – A provider said he and his patients love their CCM program. [According to our performance data](#), 1,773 patients had medical necessity for CCM but only 29 were enrolled. Upon our technology platform identifying that medical necessity, the patient automatically receives a hyperlink by text and email to sign their informed consent, and schedule their first visit, all without the need for human interaction. Now you're only calling the nonresponses.

EXAMPLE 2 – A sleep study group working with a provider noticed only four referrals to their program the previous month. Our data showed 404 patients had medical necessity and 179 completed the informed consent and scheduled for the following month.

EXAMPLE 3 – Providers can't be paid for lab work, but they can be paid on the AI embedded assessment that we place within the electronic encounter that provides and validates third party objective medical necessity for what specific testing that individual patient needs.

1. The provider can bill for these qualifying assessments when our Precision process is used; even assessment links delivered within appointment schedule reminders.
2. We don't charge ancillary providers; in fact we pay you for the work done with Precision that is unrelated to your services. Unlike most ancillaries, we are paid in 65 days, not after insurance pays.
3. By bringing this enhanced compliance and revenue to the provider client, you have created loyalty and a market differentiator.
4. Many ancillary services choose to lead or cobrand with Precision Patient Engagement for these reasons.

