Precision Healthcare Technologies®

PRECISION PROCESS

The 15-Step Implementation Journey

YOUniversal Care®
Powered by Precision Healthcare Technologies®

Designed for *No Upfront or Out-of-Pocket Expense* to Your Practice.

Precision YOUniversal Care™ turns proven missed compliance-mandated medically necessary services into completed patient care through a streamlined process that operates largely outside your existing workflow.

PMPM obligations are invoiced separately under the selected option.

1 INTRODUCTION → AGREEMENT

Understand the program, confirm the value, and authorize implementation.

1 Review CMS/Payer Report Card
Evaluate proven missed compliance-mandated medically necessary services for your practice.

2 Review Two-Minute Overview
Understand what Precision does, how it works, and the benefits to your practice and patients.

3 Review Precision / YOUniversal Care Process
Walk through the complete patient engagement, clinical, and administrative workflow.

4 Select One of Three Program Options
- Quarterly E-Visits
- Response-Only
- Hybrid

5 Sign Provider Agreement
Execute the provider agreement and authorize implementation.

2 PRE-LAUNCH → LAUNCH

Prepare the organization, data, outreach, and launch workflow.

6 Identify Key Staff Contacts
Confirm primary contacts for office management, EHR/IT, billing/RCM, outreach and scheduling.

7 Securely Obtain Required Patient Data
Provide your entire patient population, including inactive patients, as authorized.

8 Prepare Provider-Branded Outreach
Create email and SMS communications through MyCareMessage™ with your practice branding.

9 Introduce Optional Renova National Support Network
Independent service support in all 50 states, provider choice. No referral compensation to Precision.

10 Set Up Risk-Based Autoresponders
HRA-completed event triggers a completion message and suppresses remaining reminders. Moderate/high risk follow-up routed to your clinical team.

3 IMPLEMENTATION → ONGOING OPERATIONS

Execute, measure, report, invoice, and reconcile on an ongoing basis.

11 Track Outreach and HRA Completion Daily
Monitor outreach, responses, HRA completions, risk levels, scheduling and follow-up activity.

12 Prepare and Route Patient-Specific Encounter Documentation to Provider and RCM
Provider confirms actual qualifying clinical work/time, authenticates and authorizes, RCM limited to agreed PYC-supported services.

13 Report Provider Activity and Care Progress Monthly
Share patient engagement, HRA completion, risk status and service progress.

14 Invoice Provider Under Selected Program
Collections-financed fixed quarterly response invoices or separate PMPM invoicing as applicable.

15 Reconcile Collections and Fixed Invoices Monthly
Payments toward quarterly invoices are capped at 50% of net collections after the 10% Data Transfer / Encounter Creation / RCM fee.

EVERY RESPONSE SUPPORTS

Preventive Care | RAF Risk Stratification | Patient Attribution | Clinical Triage | Authorized Service Connections

WORKS WITH WHAT YOU ALREADY HAVE

No new EHR or systems required. | Provider retains 100% of clinical collections.

OUR ROLE
Upstream intelligence, patient engagement and navigation — zero clinical services.

YOUR ROLE
Clinical review, validation, authorization and care.

THE RESULT
Medically necessary care addressed, stronger compliance and outcomes.