

PROGRAM OPTIONS

FLEXIBLE SOLUTIONS. MEASURABLE RESULTS.

Choose the program structure that best fits your organization's goals and maximizes the value of every patient response.



PROVEN
METHODOLOGY
Built on CMS &
Payer Intelligence
since 2007



NO DISRUPTION
Integrates with
your existing
workflow and
EHR systems



MEASURABLE
IMPACT
Better care.
Better outcomes.
Better revenue.



PROVIDER PROTECTION

COMPLIANT FIXED SERVICE FEES
COLLECTIONS-FINANCED PAYMENTS

- ✓ Predetermined, fixed fees for defined services — not a percentage of medical reimbursement or clinical revenue.
- ✓ Payments toward our outstanding invoices may never exceed 50% of net collections actually received in the current month (Options 1 and 2).
- ✓ Provider retains 100% of all downstream clinical revenue from services identified in the CMS/Payer Report Card.
- ✓ No percentage-based pricing. Our fees do not increase or decrease based on the amount reimbursed.

ALL PROGRAMS INCLUDE A COMPREHENSIVE PATIENT ENGAGEMENT AND COMPLIANCE INTELLIGENCE INFRASTRUCTURE



Provider-Branded
Electronic Outreach
Email & SMS campaigns
that re-engage your
patients.



Personalized
Human Follow-Up
Direct outreach to
responding patients
(especially Moderate
and High Risk).



Risk Stratification
for RAF Scoring
Identify risk factors and
collections requiring
clinical validation.



Preventive Service
Completion
Identify and document
required measures for
applicable credit.



Patient Attribution
Support
Connect qualifying
encounters and services
to payer attribution
rules.



Priority Scheduling
and 12 Months
of Navigation
Move patients to
completed care and
next steps.

1 99421 – 99423 ONLY
COLLECTIONS-FINANCED

Assessment encounters with collections-
based payment of our fixed fees.
Includes the full patient engagement and
compliance intelligence infrastructure.



PROVIDER
CHARGE

Fixed fee per response
(invoiced and financed as
collections come in)



OUR REVENUE

50% of net collections
after RCM fee



RCM FEE

10% of collections



PAYMENT
METHOD

Outstanding invoices may
be paid with up to 50% of net
collections received each month



YOUR
BENEFITS

- ✓ All program benefits above
- ✓ Assessment reimbursement
- ✓ No PMPM fee

2 HYBRID
COLLECTIONS + \$5 PMPM

Assessment encounters plus
\$5 PMPM for ongoing navigation
and service connections.
Includes the full patient engagement
and compliance intelligence infrastructure.



PROVIDER
CHARGE

Fixed fee per response
(invoiced and financed as
collections come in)
+ \$5 PMPM per responding
patient (ongoing)



OUR REVENUE

50% of net collections
after RCM fee
+ \$5 PMPM per responding
patient



RCM FEE

10% of collections



PAYMENT
METHOD

Outstanding invoices may
be paid with up to 50% of net
collections received each month



YOUR
BENEFITS

- ✓ All program benefits above
- ✓ Assessment reimbursement
- ✓ 12 months of navigation
- ✓ Connections to Renova and
other service resources

3 \$8 PMPM
FIXED MONTHLY FEE

Simplified model with no dependence
on assessment reimbursement.
Includes the full patient engagement
and compliance intelligence infrastructure.



PROVIDER
CHARGE

\$8 PMPM per responding
patient (\$96 annually)



OUR REVENUE

\$8 PMPM per responding
patient



RCM FEE

Not applicable



PAYMENT
METHOD

Monthly invoice
(no collections calculation)



YOUR
BENEFITS

- ✓ All program benefits above
- ✓ No reliance on assessment
reimbursement
- ✓ 12 months of navigation
- ✓ Connections to Renova and
other service resources

THE PRECISION PATIENT JOURNEY



PATIENTS
IDENTIFIED
(CMS/Payer Intelligence)



OUTREACH &
ENGAGEMENT
(Provider-Branded)



PATIENT RESPONSE
(Assessment & Risk Capture)



TRIAGE &
SCHEDULING
(Appropriate Next Steps)



SERVICE CONNECTION
(Provider or Renova)
(Option 2 and 3)



BETTER OUTCOMES
& REVENUE
(Provider Retains 100%)



Proprietary YOUNiversal Workflow Intelligence™
Built on CMS/Payer intelligence to identify, validate and
connect the services that qualify for compliance credit.

YOUuniversal Care

Healthcare for People. Human Touch.

Not a Dent. **A Difference.**