

PRECISION COMPLIANCE, PATIENT
ENGAGEMENT & REVENUE - CPR

FROM LOBBY TO PENTHOUSE LIVING IN 30 DAYS



Our 39 AI-Embedded (AI-E) Assessments are the building blocks for the CMS Standard of Care which rewards compliance and penalizes failure to act where medical necessity is found. We are the only Concierge, White Glove, Software as a Service Platform in healthcare. What does this mean?

Precision Healthcare Technology

is the sole owner of the AI-Driven technology that identifies individual medical necessities for every patient, engages the patient to begin next steps remotely and electronically, and can even coordinate advance care needed like referrals and orders for ancillaries.

Our proprietary process combined with carrot and stick compliance statements, results in far above average response rates, and you only pay when the patient responds and after you are paid. Since 2007, every new value-based initiative has been added live onto our platform. With ever-changing requirements, you could never expect to keep up with these standards. We will do this for you in the background away from your workflow.

- 1 Software as a Service is like Microsoft Office 365 in that you license it, download it, and use it.
- 2 Concierge means that we not only offer access to one-of-a-kind healthcare technology, but we run it for you, so your staff has no new technology to learn nor labor to perform.
- 3 White Glove in our case means that after we complete our work, we then transfer the data and records from our system into your system, submit billing, work the claims, and collect the money assuring that we are all paid promptly. Again, we will do everything for you.





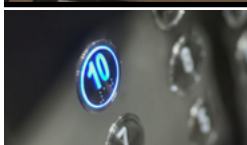
PENTHOUSE Pay our flat fixed rate - Conservatively \$12,100 for every 100 responding patients for \$2,000 = \$10,100 net profit



VIEW DECK
At the end of the month we query the code range we work in to show your collections



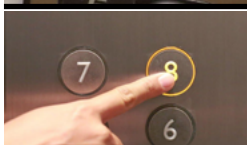
11
We submit claims into your billing process and work any claim adjudication questions



10
We move your encounter and report data from our system to yours - no integration needed



9
We complete administrative function of encounters for your review



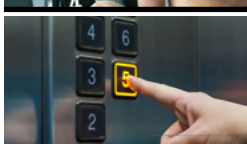
8
Tell us how you want to auto-prompt next steps with moderate and high risk patients



7
Key contact people within your practice - email introduction.



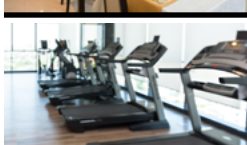
6
Send logo and review compliance statements - we can take the logo off your website



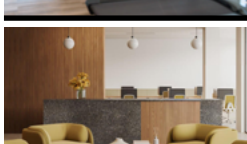
5
Patient contact data export from EMR or billing system - takes 5 minutes



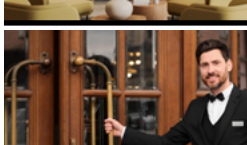
DINING Sign simple two page contract - \$20 per returned patient encounter paid after insurance pays



FITNESS
[Full & updated access to how the payers see your practice?](#)



LOBBY
[Review this document and the QuickStart guide here.](#)



GROUND
[Learn About Precision Compliance, Patient Engagement, & Revenue - CPR](#)

→ PLEASE ENTER THE BUILDING HERE ←

FIVE BIGGEST MISCONCEPTIONS

- 1** I'm already doing these things - Reality is exposed by data from combined nine sources including CMS which shows RAF score and Quality Measures rankings. Don't shoot the messenger.
- 2** We don't have the time or bandwidth for a project like this - It literally takes us two hours to set you up and 72 hours to launch, with the first cash flow within 30 days and we do everything for you.
- 3** We don't have the time, interest, nor staff to learn new technology and add these tasks - There is nothing for you to do as we triage low, medium, and high-risk patients to schedule follow up visits under your selected handling protocols. This ensures the most appropriate staff member is available for electronic, virtual, or live visits. Much more efficient and streamlined automated handling makes your job much easier to manage.
- 4** We have already tried some of these services - These are not optional programs! When medical necessity is found for primary mandated ancillaries such as AWV, CCM, RPM, BHI, TCM, PCM, etc., and you fail to attempt to engage the patient, you have failed in the eyes of the payers. Our proprietary electronic process is the ONLY way to affordably engage and enroll these services and it's a revenue center. Hence Compliance, Patient Engagement & Revenue - CPR.
- 5** You think you need a "Pilot" - We ran 20 Beta/Pilot programs for first run responses and can tell you exactly what to expect: the same amount of work and a fraction of the compliance and revenue. You can see these Beta/Pilot details, and an actual billing/collection run when you click on the [Patient Engagement link](#).

LET'S GET ON THE ELEVATOR AND CHECK OUT THE VIEW.





PRECISION HEALTHCARE TECHNOLOGY

COMPLIANCE STRATEGIES

STEALTH WORKFLOW INTELLIGENCE

Putting the “Art” & Science in Artificial Intelligence



Please tell me if this sounds familiar;



Q1: Compliance?! Me and my staff are running ragged just trying to keep up. Who is going to keep abreast of all of these new and constant changes and demands? I can barely breathe now!



A1: What if 64% of patients you saw over the past 30 days were replaced by the ones you should actually have been seeing? That's right; our data shows that 64% of your patients could have had services or visits triaged in advance electronically or virtually to determine if they even need to see you. The remainder could have been seen by another staff member, AFTER they got results back of labs or other assessments, and maybe then only an electronic or virtual follow up would have been needed. That is what our Stealth Workflow Intelligence does, and you never see it.



Q2: We have 700+ providers so we have 50 people who do nothing but RAF optimization and 70 who do patient engagement. How do you do better than them?



A2: Their attorney responded, “Then why are your scores so terrible and why are you missing \$353K average per provider for mandated services that hurt your scores?” That is what our Stealth Workflow Intelligence does, and you never see it. Same problem as Q1, just more providers.



Q3: At a meeting of Hospital CFOs, one executive said, “My hospital system has 213 employed providers, and your payer data shows we’re missing \$42.62 million dollars for services we are being penalized for not taking the revenue for. I know we are struggling but how do we fix this mess?”



A3: Respectfully, please step back and let us do what we do. That is what our Stealth Workflow Intelligence does, and you never see it. We got a standing ovation from these CFOs.



Q4: “My business is shared risk like ACOs, and Medicare Advantage and we understand compliance needs but we can’t afford to do any of this. How can you help us?”



A4: Simple! We deliver all of these same services to you for free, while sharing the fee for service sector revenue with you to help further offset your technology and staff costs. That is what our Stealth Workflow Intelligence does, and you never see it.

THE BOTTOM LINE?

Our platform is the only way to become and remain compliant and literally everything is operated and managed for you in the background away from your workflow. No upfront costs, no new technology to learn or labor for your staff, we transfer our work data into your system, then submit and adjudicate your claims, and you pay us when we get you paid. We do everything to keep you on track and you do nothing but reap the rewards. This is the only Concierge, White Glove, Software as a Service program in healthcare.



You can’t go anywhere without hearing about Artificial Intelligence (AI), but we have had our AI-embedded and active in our platform for years. What you will hear more about is “Blockchain”, which is exponentially more secure than HIPAA, which we have also deployed for years. But how does it help the provider and healthcare organizations?

The CMS Standard of Care is the baseline for compliance in the value-based world. Simply put, where medical necessity is identified, you must act to access rewards, or fail to do so and risk penalties. Your Risk Assessment Factor (RAF Score) is your public credit report and reflects two things; 1) What is the risk stratification level of your patients, 2) How well do you manage those risks compared to providers with similar patient risk profiles? The ONLY way to improve your RAF Score is with long term consistent compliance with the CMS Standard of Care. ONLY Precision owns this technology and has been adding every new mandate to it since 2007.

Our platform updates each new individual patient’s medical necessities in real time after each subsequent encounter, creates a care plan, automatically engages the patient to begin their journey or to take the next steps in accordance with your preferred protocols and referral processes, etc. Simply give us your preferences, and we turn the system on, and run it for you top to bottom from intake to money in your system and account from payers. We launch in 72 hours and first cash to you in 30 days! It takes you 10 minutes to get us started!

PRECISION HEALTHCARE TECHNOLOGY - QUICKSTART GUIDE

Our sole objective in providing our White Glove version of the only Concierge Software as a Service Healthcare Technology Platform, is to onboard, implement and execute our entire system in the background away from your workflow. These efforts are led by our team advancing considerable technology and human capital on your behalf so that your staff doesn't have to learn new technology or perform the associated labor. We can launch in 72 hours and your efforts to expedite our successful start require even less time.

1. Signed Two Page Contract

No money upfront, we are paid a small flat rate when you're paid if we do file transfer and assist in the claim submission into your EMR.

2. Data/Logo

All EMRs/Billing systems can export contact data in two minutes. We can take your logo from your website if that is easier for you.

3. Contact Information for Practice Key Personnel

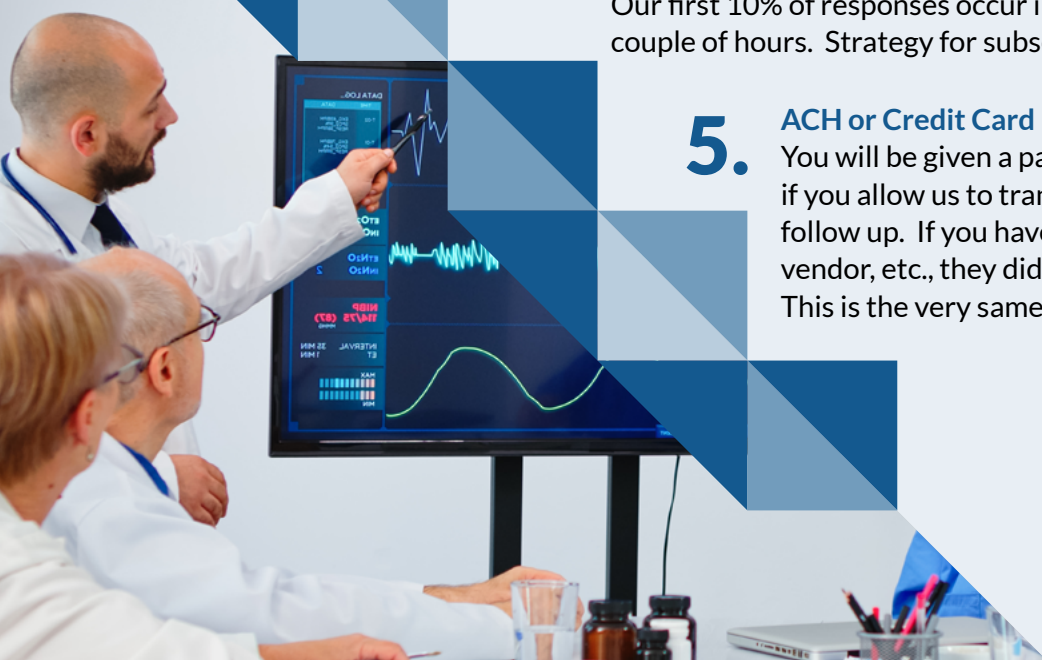
Please see below.

4. First AI-Embedded HRA/Other Assessment Responses Showing on Live Portal

Our first 10% of responses occur in the first day, and many times within a couple of hours. Strategy for subsequent months.

5. ACH or Credit Card Payment Information

You will be given a payment link based on actual collections if you allow us to transfer our data and submit claims and follow up. If you have ever used a billing company, CCM vendor, etc., they did their work in your system for you. This is the very same thing.



QUICKSTART IMPLEMENTATION WITH PRECISION HEALTHCARE TECHNOLOGY

Knowing that everyone is busy, and that coordinating many schedules can be problematic, we prefer to launch implementation and follow up communication via email. Our job is to do as much for you as we can but know which specific people can help us in those efforts when we need a quick question answered. Along those same lines, we always respond with a “Reply All” so that everyone is always in the loop.

Here are some key people and/or contacts we need to assist you in our efforts on your behalf. Thank you in advance for adding these people to your email response. We understand that many times the same person covers multiple areas. We implement nothing with these other staff members without permission.

1. **Provider and Office Manager/Administrator** – We work for you, so these are our “Point People” who help serve as our “Air Traffic Controllers”.
2. **Data/IT/EMR Contact** – The initial patient contact data file can be pulled from any EHR or billing system in five minutes by this person. In addition, we will have updated data that we wish to transfer back to your system, or you may have a specific program (allergy, sleep, lab, ANS, etc.) that you want us to query for validated medical necessity.
3. **Patient Communications Specialist** – When we send communications to your patients on your behalf, we need to assign a person and/or extension within your staff for the patient to call about the validity of our program and relationship. Providing this back line or extension and a named person reduces these calls by 90%±. In addition, to maximize the program you will want to include our billable assessment links within your appointment schedule and schedule reminder system. This person will help us to expedite these actions smoothly on your behalf.
4. **Billing Contact** – We will provide you with daily, weekly, or monthly Encounter Billing Reports (EBRs) throughout the month so that you can begin submitting these charges for payments. We are happy to perform or assist with this entire claim process all the way through to resolution of denial or payment. Theoretically and practically, if you want to have cash flow every day you should submit claims every day. We simply follow your selected schedule.
5. **Accounts Payable** – We advance considerable technology and labor on your behalf, so it is important that we are paid promptly. The typical expected value of our services is that for each 100 patients engaged monthly, you should collect \$12,100 in E-Visit and follow up visits facilitated by our system based on risk levels. For that you pay us only \$2,000 as we do not share in any of your other subsequent visit revenue. We also offer rewards discounts for prompt payment.

Please feel free to reach out to us at any time for clarification. Thank you for helping us to help you! Your staff and patients will also thank you!



PRECISION HEALTHCARE TECHNOLOGY'S CONCIERGE SOFTWARE AS A SERVICE ADDS WHITE GLOVE FEATURES

Only Precision owns AI embedded technology that identifies individual patient medical necessities and then generates 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.

Our platform then directly engages the patient to begin to act based on those individual medical necessities automatically, all in the background away from the provider's workflow. We 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 and schedule availability.

Your EMR Assessments are not OUR AI embedded assessment. Even if you had 100% participation in a program you would still be penalized for failing to act on the medical necessities found within the results of the encounter. NOBODY can do this but Precision as only we own and have access to this technology. Even though it's everywhere now in the media, we have had AI and blockchain for many years.



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. There is no cost upfront and nothing owed until you collect from payers.

Our new "[White Glove](#)" service has us enter our information on your data directly into your EMR and can submit your resulting claims or even oversee scheduling live in your system for you. As you can see, we advance a lot of technology and labor on your behalf while waiting to be paid. This makes it essential that we assist and streamline your efforts to effectively bill and collect? If you have ever used a billing company or other ancillary service who post activity live in your system then you are familiar with this very simple process.

PRECISION PROGRAMS ASSURE COMPLIANCE, PATIENT ENGAGEMENT & REVENUE OR CPR

- 1. Where are you in the eyes of CMS and other payers?** – With live and updated compliance and performance data on 1,040,000, we know exactly and can track your progress on your RAF Score and the top Quality Measures. We can tell you to the dollar how much revenue you have missed by failing to act where medical necessities are found. Missing these services can also result in penalties.
- 2. Now that you know your compliance gaps, we need to find out which patients need which services** – As if your performance scores didn't show the realities of how the payers view you as a provider, on average providers only have valid contact information for 48.63% of their patients. This means you are only seeing sick patients and your patient engagement program is the reason you may be falling short of the "graders" expectations. We improve and update your system constantly with the most current data.
- 3. Our services are offered at little or no cost to ACOs & Medicare Advantage plans registered with us** – Even though shared risk programs represent typically only 20-30% of the practice population, you need the best results with the smallest cost and that is our electronic Patient Engagement. Same comprehensive service at no cost if our program is operating in the fee for service sector of the practice.
- 4. What's next? Confirmation of medical necessity and ancillary service program enrollment** – Though Precision does not contract or perform the many ancillary services your patient qualify for, we do facilitate electronic enrollment and even scheduling. Through our Precision Network Solutions, we provide a care coordination team who helps you decide if you want to perform these services yourself, will train your staff, will work with any present vendor, or help you to find a new vendor.

