

HealthCPA: Proven Results for Cash-Only Medical Practices

Introduction

HealthCPA partners with medical practices that opt-out of some or all insurance contracts, submitting claims on behalf of patients with PPO insurance coverage.

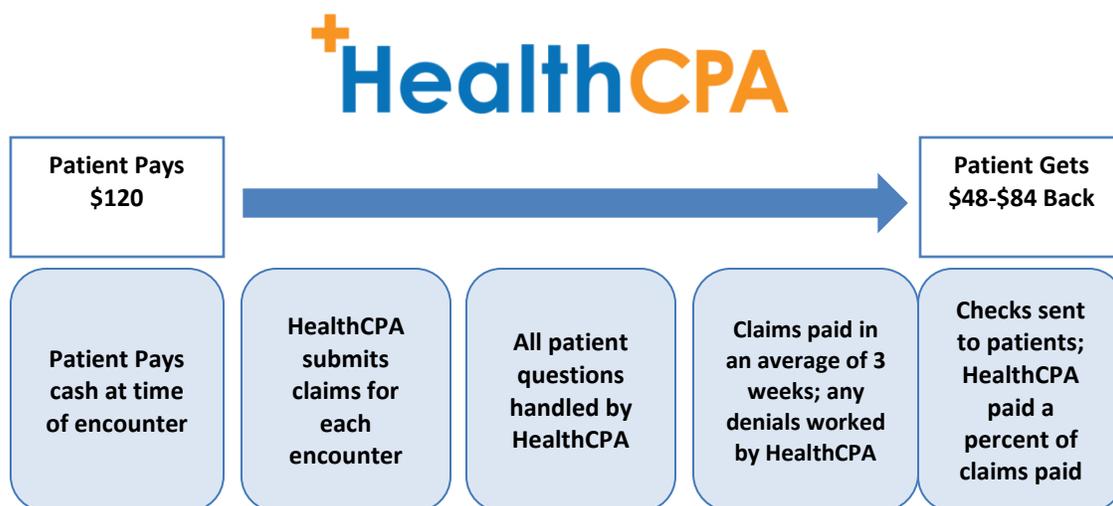
HealthCPA's proprietary "ClaimHelper" service is a technologically advanced, patient-friendly way to reduce overhead and drive more revenue into medical practices. By successfully unlocking out-of-network benefits, HealthCPA effectively reduces out of pocket costs for patients, delivering several key benefits to the practice:

- 1) Attracting and converting more prospective patients
- 2) Better retention from existing patients, with those patients procuring more services
- 3) Practice overhead is reduced, as office staff no longer has to prepare and provide itemized superbills or answer questions for patients struggling to submit claims on their own
- 4) Patients love the service, which saves them time and "finds money" they otherwise likely wouldn't have seen

Service Overview

HealthCPA's *ClaimHelper* service for cash-only medical practices is unique in the marketplace, and provides a complete solution for both the practice and patients. The solution is platform-agnostic, working with all varieties of practices, regardless of their EMR vendor, and can also accommodate those practices who don't have an EMR installed yet. Once patients have consented to having their claims submitted by HealthCPA, a direct link between HealthCPA and the practice is established, enabling daily or weekly sharing of patient encounters. HealthCPA then scrubs the encounter data and prepares claims with an attention to detail and skill level that maximizes reimbursement.

How It Works



Case Study: Medically Supervised Weight Loss Clinics

In June 2012, HealthCPA deployed its *ClaimHelper* service across all 9 locations of a leading Medically Supervised Weight Loss provider in California. Although the practice had been able to grow rapidly on a cash-only basis since inception, management perceived the potential benefits of providing the service. With 12 months of experience and over 10,000 claims submitted, some powerful learnings have emerged, demonstrating a return on investment of over 5 to 1.

Data Prior to Deploying HealthCPA

- Less than 30% of patients with PPO insurance submitted claims to insurance
- Less than 50% of patients submitting claims to insurance received reimbursement
- Average Lifetime of a Patient: 15 Visits
- Average Visit Value: \$90 (after initial intake appointment)
- Total Revenue Per Patient: \$1,350 (after initial appointment)

Data Post-HealthCPA Deployment

- 100% of patients with PPO Insurance had claims submitted by HealthCPA
- 95% of claims submitted to insurance were approved
- Average Lifetime of a Patient with HealthCPA ClaimHelper: 20 Visits
- Avg. additional revenue realized, per patient: \$450
- Avg. HealthCPA total fees Per patient: \$92
- ROI overall: 4.9 : 1
- 3+ Office staff freed up from preparing superbills and answering patients' claims-related questions – equal to 1-2 FTE / month