



Solutions Suite 2024

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From enrollment to claims adjudication, payments, reconciliation, reimbursement, and compliance, CureIS provides highly specialized solutions proven to deliver savings and efficiencies most healthcare organizations never thought possible.

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Managed Care Ecosystem
Revenue Cycle Management

About Us

Your Vision, Our Mission



Transparency

Integrity

Accountability

There's a reason clients call CureIS® Healthcare the most game-changing partner payers and providers have never heard of.

We've flown under the radar since 2006, quietly developing and implementing innovative automated solutions for the entire Government Programs Managed Care Data Ecosystem.

Our goal is to deliver streamlined, scalable automated solutions that eliminate costly errors and inefficiencies.

Our clients include health plans, hospital systems, large practices, and academic medical centers. Partnering with CureIS, they've saved millions of dollars and stayed ahead of the curve in this complex industry.

CureIS is more than an IT company, we are problem-solvers who take accountability to the next level in our mission to deliver clean, quality healthcare data.

Our team brings vast expertise to the table, from healthcare technology, operations, consulting, software, and leadership. We live our mission and values, and routinely win the "Best Places to Work" honor.

CureIS is defined by our client-centric commitment to service, accountability, and transparency. Unique among healthcare managed services providers, we back our solutions with full accountability and irrefutable ROI.

Your vision is our mission.

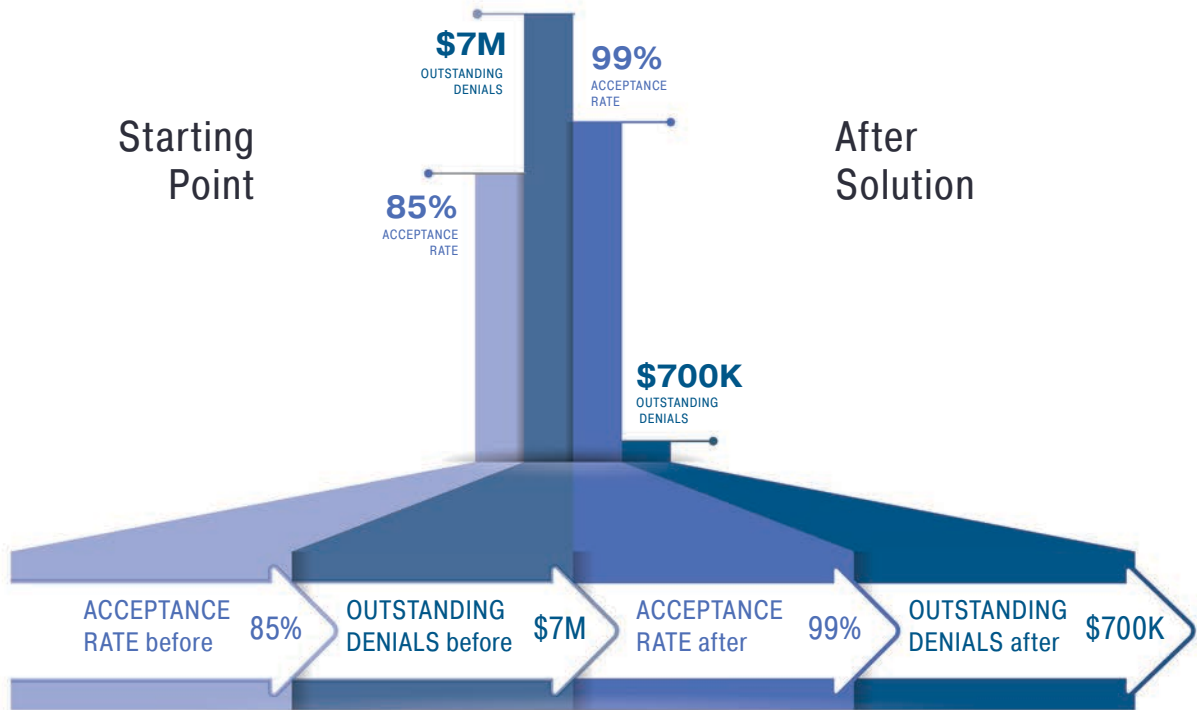
Discover a partnership that transcends expectations.

Crunching the Numbers

An Arizona Case Study

CureIS®

SOLUTIONS THAT GET RESULTS



Crucial Wins

GOVERNMENT SANCTIONS	From \$MILLIONS to \$ZERO	CURE	EncounterCURE ClaimsCURE
VISIBILITY INTO GOVERNMENT PROGRAMS DATA	From est.40% to 100%	Client	Health System
		Date	2022

Challenge

A prominent Arizona Health System partnered with CureIS to overcome two complex challenges:
 + millions of dollars in reserve impact due to denials.
 + lack of visibility into government programs data.

Solution

This client invested in the powerhouse combination of EncounterCURE and ClaimsCURE. They immediately achieved 100% visibility into the crucial data. Within twelve months, sanctions were reduced from millions to zero and acceptance rates climbed to 99%.

Rapid ROI

At CureIS, we don't make vague promises about results.

We quantify them in advance using a proven ROI formula, so you know exactly what to expect from partnering with us. In real dollars. That's not all. We hold ourselves accountable for achieving those results. Our ROI calculation becomes a Key Performance Indicator, tracking the metrics that propel your success.

When a leading California-based Independent Physician Association added over 200K lives across 40 carriers, they more than doubled their enrollment decision workload.

With CureIS as their strategic partner, this IPA successfully managed their rapid expansion without having to increase their team size. Harnessing our EnrollmentCURE solution, we implemented automation, workflows, business rules, and powerful data management tools for this client, efficiently supporting new requirements and enhancing provider satisfaction.

Our dedicated Automation SWAT team continuously monitors performance, identifying opportunities to automate decisions, add value, and eliminate technical debt.

As the IPA continues to grow, so does their ROI, as per-member costs for enrollment management drop significantly month after month. Their investment in CureIS not only achieved initial KPIs but also positioned them for sustainable growth and long term success.

Empowering Growth, Amplifying ROI - a California Success Story -



When you partner with CureIS there are no hidden costs. Our ROI formula provides transparency you can trust and performance measures you can count on.

Tailor Your Transformation

Our menu of capabilities is extensive. Here are just a few you can incorporate into a solution:

MAXIMIZE PAYMENTS

ClaimGuard - precision data preprocessor

Cleans and matches data at multiple points during claims adjudication to ensure each claim has the maximum chance of being paid. Builds in time for scrutiny to avoid incurring interest charges.

AutoDispute - claims validation and payments review

Automatically reviews payments against your invoice and the health plan contracts to determine if payments match your expected receivable. Strengthens your resolution position, by helping prepare disputes that target a 100% success rate.


MAXIMIZE ACCURACY

Payment Integrity Rules - your policy and interpretation

Audits 100% of claims according to your specific policies and criteria for regulatory compliance and contract fulfillment.

Registration and Insurance support

Using enrollment files, CureIS can rapidly populate your eligibility, registration, and insurance information with accurate data.

 Explore our full Solutions Suite on pages 10-13.

Your optimized future awaits.

Adaptable solutions empower business decisions at Dignity Health®

Adaptable solutions support nimble decision-making. When the Valley Care IPA became part of the Dignity Health Medical Foundation, Dignity chose to leverage the flexibility of our EnrollmentCURE solution to manage Billing and Accounts Receivable functions, harnessing the seamless integration of CureIS tools with their athenaIDX system.

In its standard configuration, EnrollmentCURE is a highly effective tool for managing patient data across multiple health plans. Along with many features that support revenue cycle management, the solution verifies enrollment information to ensure adjudication is not performed on inaccurate data.

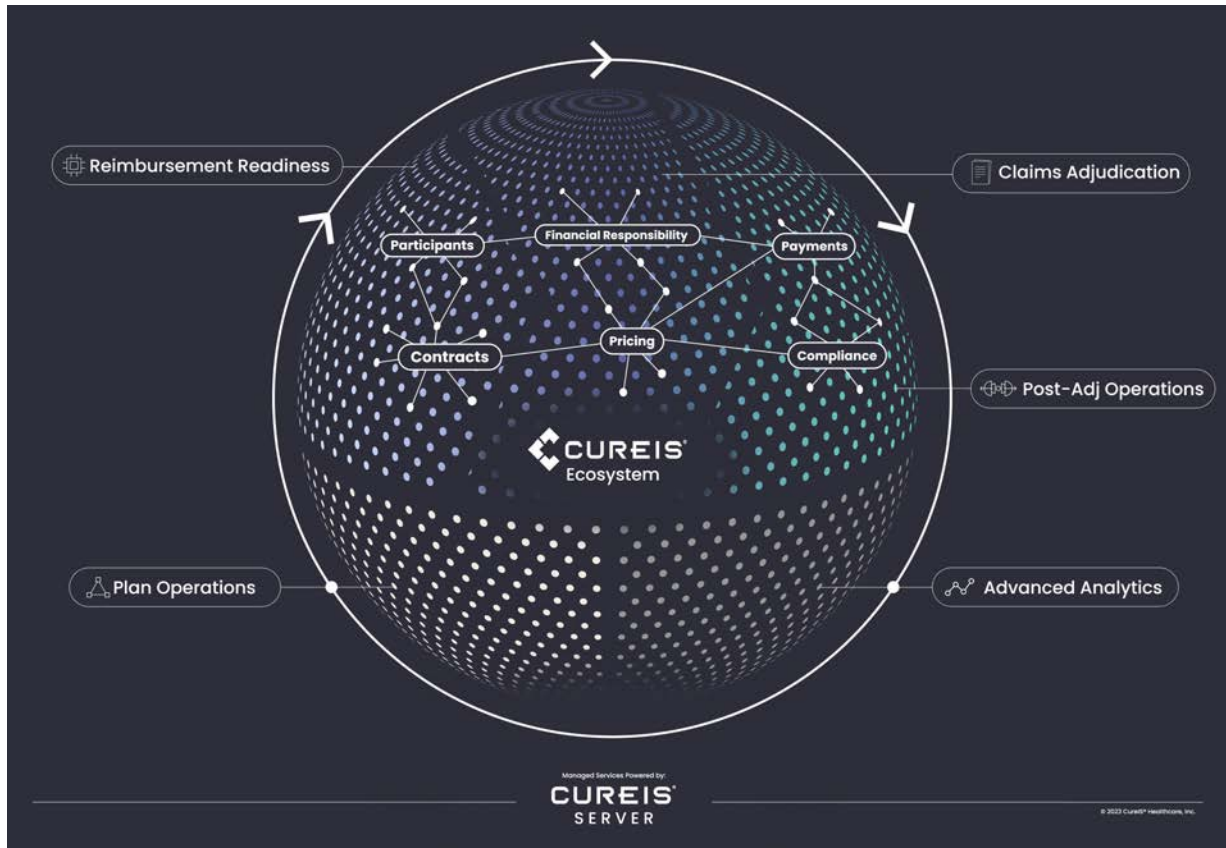
Dignity is applying its key functionalities to processing the IPA rosters, aiming to optimize efficiency, enhance relationships, and make significant savings.

Our solutions work within an integrated ecosystem powered by our CureIS Server technology.

The Managed Care Ecosystem

CureIS streamlines complex healthcare operations, achieving unparalleled efficiency, accuracy, and speed. Our tools seamlessly process millions of data points daily, in any format, from any source, ensuring clean, quality data is at the core of every operation.

Our Government Managed Care Ecosystem streamlines operations within five domains.



It's never been faster to eliminate errors and achieve compliance.

Healthcare organizations are often hindered by complex, error-prone manual procedures and IT systems that don't support business requirements. It's not unusual for a payment process to take days and involve personnel from multiple departments, draining resources and adding an unnecessary layer of costs to operating expenses. Frequently recurring issues exacerbate the situation.

CureIS simplifies these complexities. From enrollment to claims adjudication, payments, reconciliation, reimbursement, and compliance, we provide highly specialized solutions proven to deliver savings and efficiencies most healthcare organizations never thought possible.

Leveraging over 20 years of experience in healthcare operations and IT, we've designed our solutions and services to adapt quickly to new requirements, data sources, and processes. Proven workflows and an extensive menu of business rules and edits enable rapid implementation of regulatory changes and business decisions. Even the most complex updates can be tested and implemented - with 100% accuracy - in hours, rather than days, weeks, or even months.

Seamless Integration With Existing Technology

CureIS solutions are platform agnostic, enabling seamless integration into your existing technology infrastructure, including athenaID[™], Epic[®], and HealthEdge[®]. If you transition to a new platform, CureIS migrates in tandem, preserving your investment

Overnight Processing

While you sleep, CureIS tools effortlessly complete the most complex, cumbersome tasks, eliminating delays and ensuring smooth operations around the clock.

Proactive Control

Meticulously clean healthcare data coupled with pre-processing before data is loaded for adjudication and payments processes enables proactive control over outcomes.

Complete Visibility

Your team is empowered with complete visibility into the system from the moment they begin their workday. Alerts flag for any issues requiring manual attention, ensuring nothing slips through the cracks. In-depth analysis and reports offer real-time insights to facilitate swift and informed business decisions.

Complete Security

Rest easy. Your data is in trusted hands. Our Enterprise-Grade security is HIPAA and SOC2 compliant, meeting the highest standards of data protection. With comprehensive disaster recovery protocols in place, your data is safe and secure.

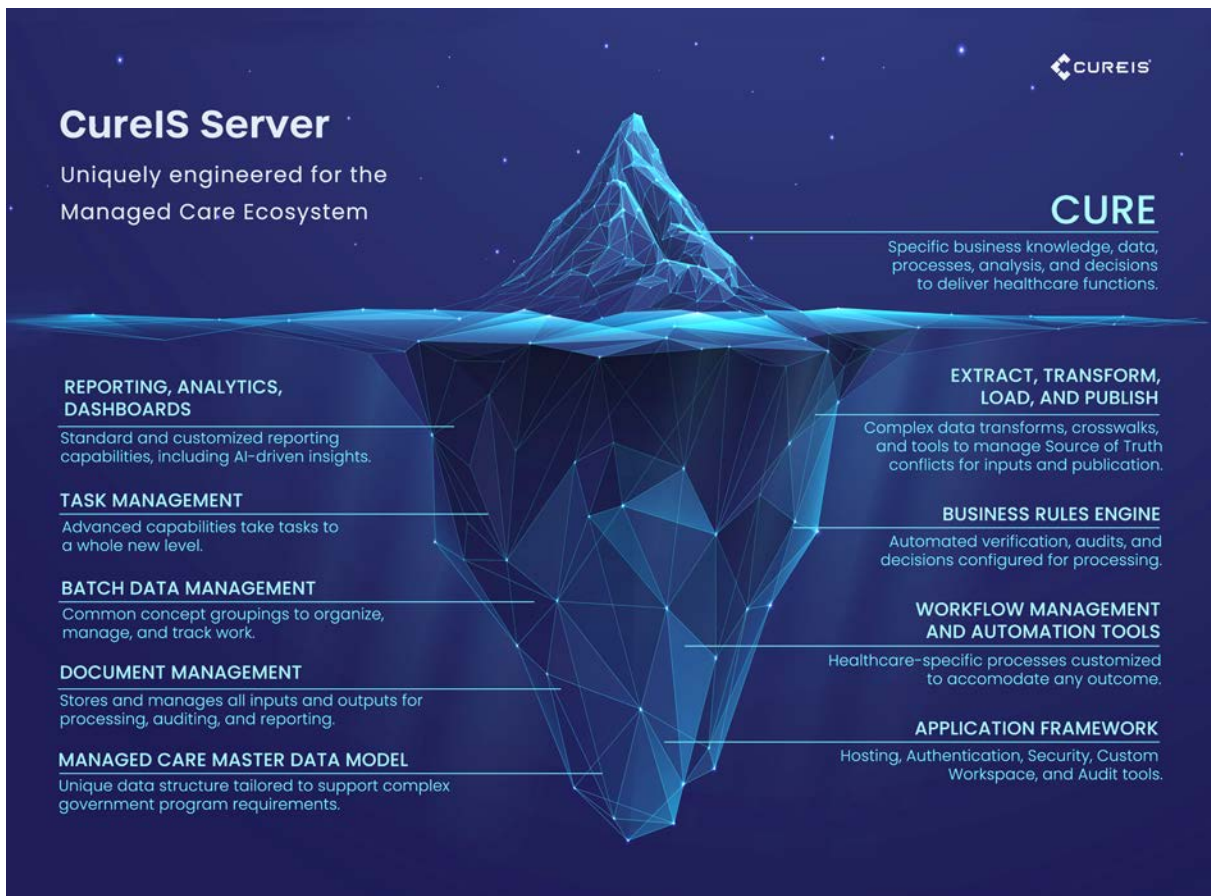


The CureIS Server is the underlying key to data governance.

The CureIS Server

CureIS is known for doing things differently.

We redefine norms by building each solution - or 'CURE' - with the cutting-edge technology of the CureIS Server at its foundation. Our Server operates as the unseen force 'beneath the waterline' providing exceptional data synchronization and governance across all our solutions.



Harnessing our Managed Care Master Data Model, the Server:

- +** Elevates data governance
- +** Achieves more efficiency with less effort
- +** Drives economies of scale

Imagine being able to implement business decisions and regulatory changes seamlessly across your entire data landscape. No lag time. No manual intervention.

Partnering with CureIS provides you with unfettered data integrity, consistency, reliability, and visibility, simplifying challenges and supporting your unique healthcare operations.

Data Governance and Integrity

Clean, quality, conformed data is crucial for positive outcomes in automated healthcare systems. CureIS specializes in synchronizing data from multiple sources of truth - both internal and external - to manage the conflicts that cause confusion, delay, inconsistent results, and other costly challenges.

Your Policies

Sophisticated rules, edits, and automated workflows implement your policies and interpretation exactly as you determine. Changes are tested and implemented within minutes and hours, not weeks or months.

Leveraging Your Investment

Our meticulously engineered data model lets you leverage data across multiple solutions, to amplify capabilities. This seamless crossover unlocks untapped potential within your existing infrastructure and maximizes the CureIS value proposition for your business.

Your Security

The risks of cyber attacks and security breaches have never been greater. CureIS proactively mitigates risks with enterprise-grade security to ensure your organization maintains seamless operations and service levels, regardless of external challenges.



Clean, quality, conformed data is crucial for automated healthcare systems.

Our Solutions Suite

EnrollmentCURE

Seamless enrollment, increased acceptance

Our solution verifies enrollment information, ensuring adjudication is not performed on inaccurate data. Aligns members with the right benefit plans, and PCPs, matches capitation or premium payments to the selected plans, and eliminates downstream issues that result in reprocessing, appeals, and encounter denials.

ProviderCURE

Clean, consistent provider data

Maintains a continuously updated master provider record, collecting and cleaning data from disparate sources. Our solution ensures consistency across HR, credentialing, network, adjudication data, and PCP assignments to help facilitate accurate provider network reimbursement.

PaymentsCURE

Faster, smarter payment processing

Accelerates the turnaround time on every payment in or out. The solution provides active management of incoming Capitation, Premiums, Subsidies and Claims, and outgoing Provider and Broker Payments files from various sources and seamless information exchange between payer/payee systems and your finance system.

ReimbursementCURE

Fast, easy updates for changing rates

Reduce operational overheads and ensure providers receive prompt, appropriate compensation for services rendered. Our solution rapidly automates mandated fee schedule updates and prepares impacted claims or invoices for reprocessing at the correct rate.



Each 'CURE' operates independently but also in synergy with others. Integrating additional solutions adds exponential value, creating economies of scale as you optimize your entire system.

ContractCURE

Standardized interpretation

Standardizes provider contract interpretation, implementation, and testing within managed care, utilizing defined models, thorough analysis, and stakeholder review. Facilitates proper adjudication outcomes, reduced administrative costs, fewer provider appeals, and improved provider satisfaction.

AuditCURE

Comprehensive claim review and selection

Reduce costly reprocessing, increase encounter acceptance rates, and enhance auditor productivity with tools that enable comprehensive claim review and selection at multiple stages throughout the adjudication process. AuditCURE optimizes claims adjudication by reviewing claims against quality standards, encompassing both auto-adjudicated and manually processed claims.

ClaimsCURE

Pre-verification enables streamlined adjudication

Incoming claims are pre-screened before they reach the adjudication system, identifying issues and triggering flexible options for handling potentially rejected, duplicate, and misdirected claims. Our solution verifies eligibility, provider approval, covered services, and valid codes using reference data from government and all relevant sources.

EncounterCURE

Next-level encounter management

Encounter data discrepancies are automatically corrected before submission, ensuring fast, accurate encounter reporting. The solution can select, prepare, and publish encounters from adjudication or billing systems. EncounterCURE also receives and organizes encounter responses, creating tasks for your team to address.

Our Solutions Suite

RecoveryCURE

Maximize revenue recovery

Whether you're recovering for DoFRs, insured services, carveouts, or enrollment guarantees, our automated technology and custom billing capabilities identify, analyze, and prepare claims for revenue recovery. Crucially, we track and match payments and manage disputes, ensuring you receive every dollar you are owed.

LettersCURE

Streamlined letter generation

CureIS manages compliant templates, data and language, making letter production more efficient and cost-effective. Our solution seamlessly integrates into your environment to fully manage the creation and delivery of member and provider letters, such as reminder notices, authorization denials, and Integrated Denial Notices (IDN).

ComplianceCURE

Regulatory and contract compliant outputs

Stay ahead of changing government and carrier contractual requirements. ComplianceCURE generates and delivers up-to-date regulatory outputs such as Medicare Claim Activity and Monthly Timeliness (MTR), Organization Determinations, and Appeals and Grievances (ODAG).

CapitationCURE

Timely, accurate reconciliation

End the verification issues that lead to overpayments, disputes, avoidable interest, and administrative resource drain. Our solution supports initial capitation payments with an automated true-up process to ensure transparency, accuracy, and efficiency with your capitated provider partners.



Our automated solutions are purpose-built to manage the complexities of healthcare operations.

BrokerCURE

Smarter commissions

CureIS simplifies the complex process of calculating commissions, matching members with the right plans, and processing payments accurately. Our solution enables rapid implementation of changes, error minimization, and significant operational cost reduction.

AppealsCURE

Centralize your provider appeals management

Properly documenting and reporting your appeals responses is just as important as getting them right. CureIS helps organize your appeals management workflows, responses, and escalations. Centralize your disputes, appeals, grievances, and decisions for reference and compliance with auditors.

aIDX Optimize

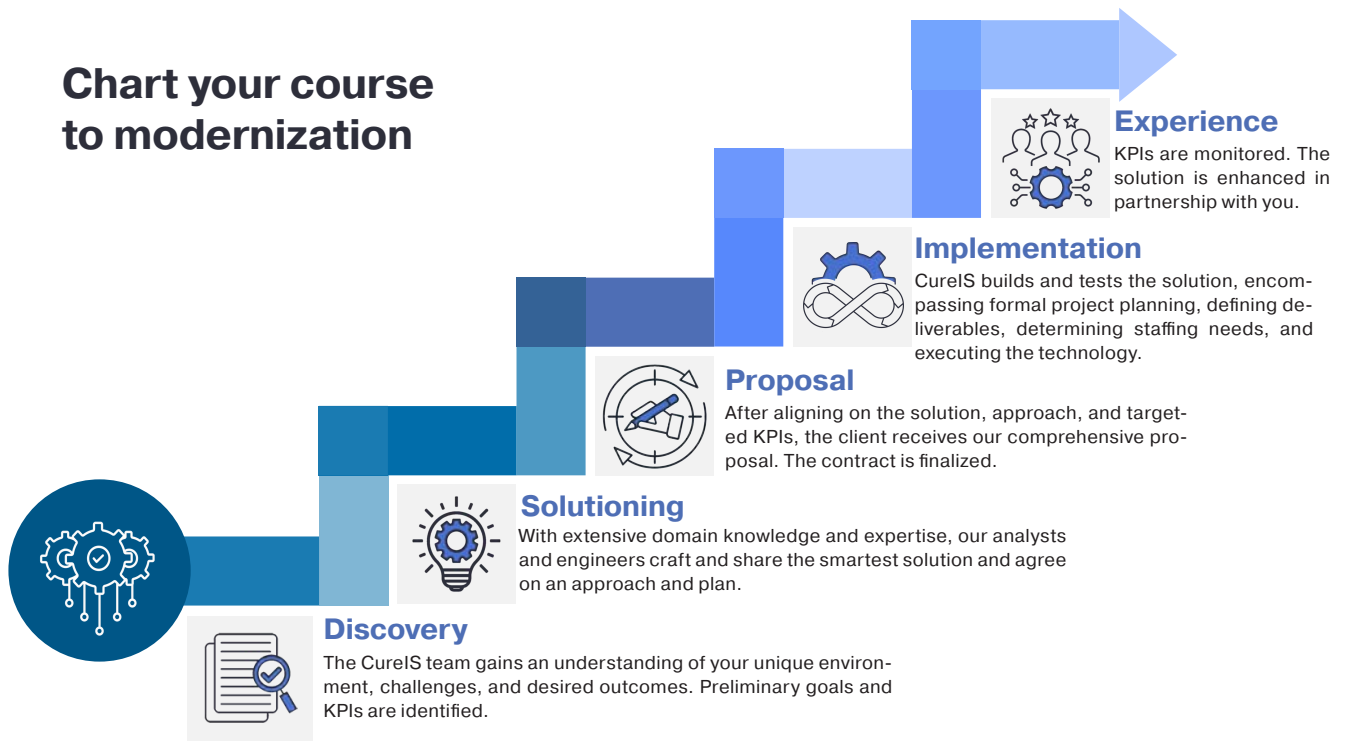
Turnkey system management

Entrust your athenaIDX management to a proactive, accountable partner with a track record in delivering measurable results. Our proven aIDX Optimization solution is calibrated to maximize your aIDX investment and keep you ahead of current and future challenges.

Your Future Awaits

Step up with CureIS

Chart your course to modernization



Transition Without Turmoil

There's never an ideal time to replace a familiar system. Perceived complexity, cost, and disruption often deter healthcare organizations from initiating change until financial impacts leave little choice.

When you optimize your system with CureIS, the results are swift. Drawing on our industry expertise, we build our solutions to be platform agnostic, enabling seamless integration with existing applications. If you decide to change platform, no problem. You retain control of your data, decisions, and processes. This is just one of the many ways CureIS strives to deliver transition without turmoil.

Our Guiding Principles

As a niche player in the constantly shifting healthcare landscape, CureIS thrives on responding quickly to regulatory changes, emerging trends, and evolving client needs. Our agility allows us to stay ahead of the curve and deliver smart solutions that make a real difference.

Our company culture is characterized by cutting-edge innovation and out-of-the-box thinking, but is also grounded in genuine care and meaningful integrity. What truly sets us apart is our people. CureIS is a community of driven individuals who are passionate about

our work. Our growth is fueled by the talent and dedication of our team members, and we place immense value on their contributions.

Transparency. Integrity. Accountability.

In our partner relationships, we are guided by principles of transparency, integrity, and accountability. We share our clients' business challenges and goals, and measure our KPIs by your success.

Chris Sawotin

CEO & Founder



Boasting nearly two decades of leadership, Chris Sawotin attributes CureIS's competitive edge to our distinctive corporate culture. "As fervent innovators with minimal turnover, we maintain a stable and skilled workforce, driving sustained innovation and operational excellence."

This stability and accumulated expertise not only accelerates product development but also delivers tangible benefits to CureIS clients.

"Our team combines industry knowledge with cutting-edge technology, streamlining operations and reducing errors. Through proactive problem-solving, we demonstrate our commitment to delivering exceptional value and service to our clients."

**Connect
with us**



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