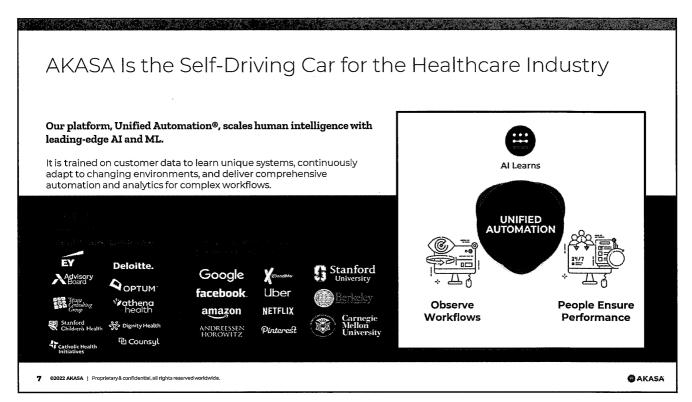
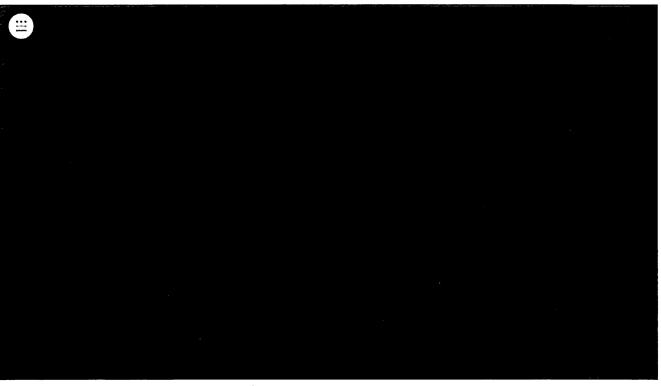


Shifting Gears: The Future of the Revenue Cycle Did you know? Visualize your future Staff For every \$1B in revenue, engagement 70 finance staff Near zero levels will are employed for the median increase/turnover technical will decline denials corporate services firm. Teams will 90% of staff will recover more spend time on reimbursement valuable work such faster and more as complex denial Yet, there are appeals or accurately 300 revenue cycle meaningful patient employees for the average interactions \$1B health system. @2022 AKASA | Proprietary & confidential, all rights reserved worldwide AKASA





Step-by-Step, Methodist Health System Cured Pain Points

HEALTHCARE

Methodist Health System, headquartered in Omaha, Nebraska, went all-in on automating the revenue cycle, starting in 2018 and going live in 2019.

The health system worked with Alpha Health, now called AKASA, for unified automation in the revenue cycle that tied into its Cerner EHR.

The work resulted in a reduced cost to collect, a higher yield and an improved patient financial experience.

"Our director of patient financial services was interested. We knew there would be opportunities down this path," said Jeff Francis, vice president of Finance and CFO for Methodist Health System. "We went all in. It wasn't a hard buy-in."

Methodist started with what Francis called the "pain points" in the revenue cycle and continued until automation over human intervention no longer made sense.

Automation has taken over the repetitive tasks. Staff people no longer have to spend seven minutes to see the status of a claim, make the notification and update within Cerner, he said. Responses to claims denials are now automatically sent to payers.

Al-based automatic denials

saves time and costs

"We were learning with them as we jointly determined where the pain points were," Francis said. "It was more step-by-step."

But no one lost their job, he said. Instead, revenue cycle personnel are now working on the more difficult accounts.

"We knew that we had an issue taking staff time and not adding value on time," Francis

The team then expanded robotic process automation and machine learning to every possible aspect of the revenue cycle.

"We had a narrow focus, knowing we could broaden it," Francis said. "We were finding new use cases in the front end and mid-cycle. We've continued to find new areas."



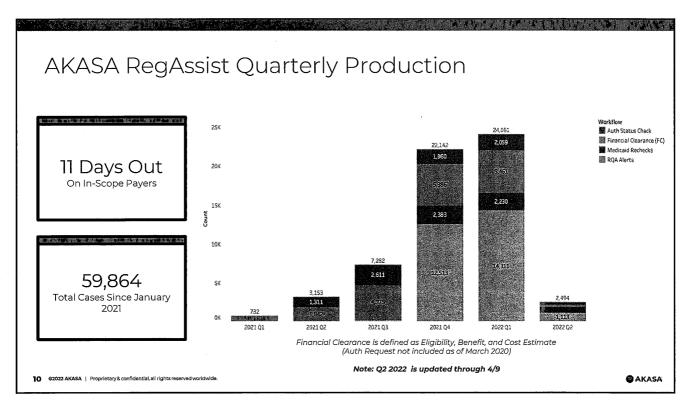
Al-based automation addresses workflows across revenue cycle

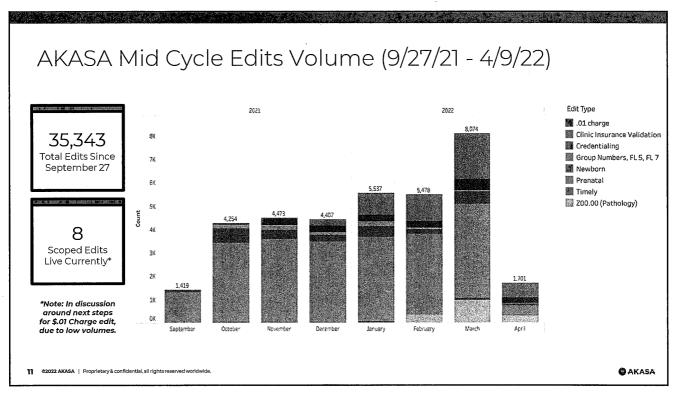
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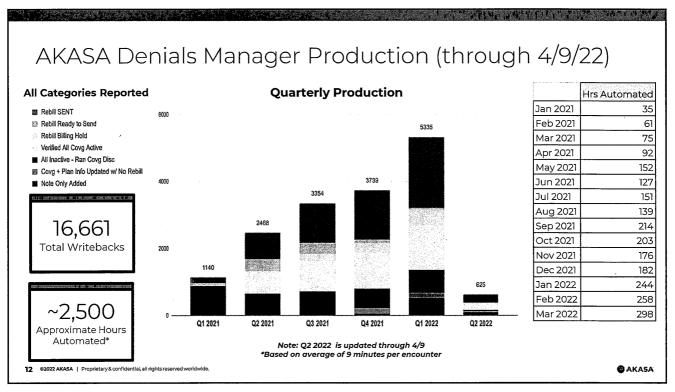
Al-based automation drives higher yield

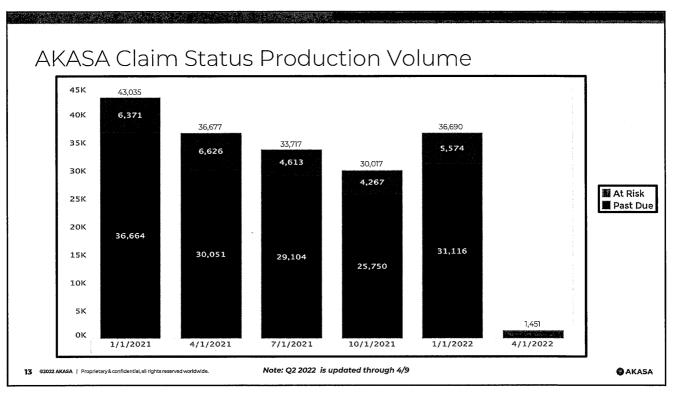
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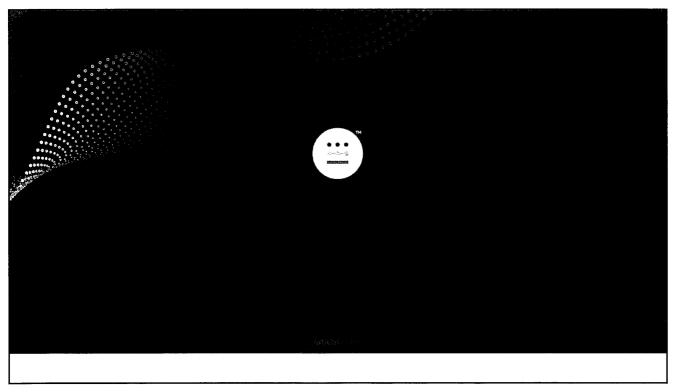
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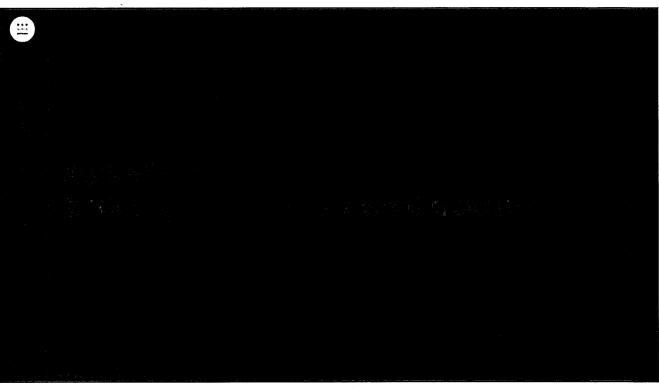












AKASA's Unified Automation for Revenue Cycle

Patient Access

Eligibility

Automatically input insurance card scans into registration system fields and check eligibility

Prior Authorizations

Identify authorization requirements for patient services to be rendered, initiate sending request form to patients' insurance provider via payer websites, and check on authorization request submission status

Document Indexing and Processing

Extract information from documents (e.g., payer correspondence and provider orders) upon receipt and automatically populate into the EHR

Price Estimation

Produce accurate price estimates for patient financial responsibility

Medical Necessity

Complete medical necessity checks and issue ABNs where necessary

Mid-Cycle

Predictive Denials ScrubbingPrevent denials through predictive analytics that reside in or alongside the scrubber

Inpatient/Professional Coding

Complete coding on inpatient and professional claims

Charge Reconciliation

Review charge entry and reconcile to ensure all charges are captured

Claim Edits

Automatically edit claims that are scrubbed for resolution to support claim adjudication

CDI Queries

Complete documentation reviews and issue physician queries to achieve appropriate documentation for quality/reimbursement

Attachment Submission

Identify and retrieve documentation needed to include with claims that need supplemental information; documents to be retrieved include, but are not limited to, medical records, itemized bills, and high-cost implant invoices

Business Office

Technical Denials ResolutionAutomate appeals and submit rebilled claims for technical denials

Clinical Denial Resolution

Create and submit appeals for denials currently supported by case management/utilization review

Underpayment Appeals

Identify payment variances and appeal contractual underpayments

Payment Posting

Complete payment postings and reconciliations based on client procedures

Balance Adjustments

Complete claim adjustments in EHR/PAS using ML models and indicate next steps (e.g. credit balances)

Comprehensive Follow-Up

AKASA will complete a comprehensive follow-up to payer responses by taking account information from EMR and checking the payer portal

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AKASA

Data Collection Overview







Workflow-Specific Data EDI Files - 837s, 835s Claim Edits and/or Denials EHR & Billing System Access Accounts for all applications and systems used by current staff.

Staff Shadowing Virtual staff shadowing from TeleOps

Organizational Documents SOPs, Org Charts

Payer Portals & Application Sites Payer portal logins

Staff Desktop Observation WorkLogger recordings of Financial (Clearance and Business Office Staff



Productivity and KPI's Pre-AKASA performance benchmarks

Selected Database Extracts Ability to run pre-developed queries on database

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EDI Documentation and Security





Overview: AKASA requests 6 Months of historical X12 (837s and 835s) files, along with ongoing daily feed to allow for payer analyses and enablement of automation workflows

Documentation and Security:

- This data would be transmitted (both historical and ongoing) via secure FTP.
 - Leverage AWS Secure Shell File Transfer Protocol over SSH Port 22.
 - SFTP Credentials are encrypted and stored in AWS Secrets Manager.
 - 835s/837s and all sensitive data are automatically routed to a unique customer database.
- Designated PHI storage locations are encrypted and comprehensive access controls are in place.
- Encrypted S3 Volumes house unique databases for each customer to ensure data segregation.
- PHI is retain for a mutually agreed upon time frame, or retained one year (from transmission date) by default prior to deletion.

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System Access Documentation and Security







Overview: AKASA requests system access for EMR/RCM Apps, and payer websites. This access enables AKASA to both build the automation and also perform the automated work.

Documentation and Security:

- Any data would be transmitted via SFTP, using an SFTP protocol and end-to-end encryption.
- Access to payer portals are encrypted using HTTPS/TLS.
- Access to customer systems are protected via Citrix.
 - o Citrix Workspace is a complete digital workspace solution that delivers secure access to the information, apps, and other content that is relevant to a person's role in your organization.
- The bots will reside in AKASA VPC which is fully compliant with HITRUST.
 - See "Documentation Requestion AKASA Bot Security.docx"



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Worklogger Software Powers AKASA's Onboarding



Proprietary computer vision learning

Computer vision is a field of artificial intelligence that trains **computers** to interpret and understand the visual world. Using digital images from cameras and videos and deep learning models, machines can accurately identify and classify objects — and then react to what they "see."



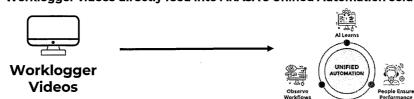
Worklogger helps AKASA:

Learn your work without disruption: Staff continue normal workflows while AKASA observes best practices

Identify and classify encounters: With minimal input from Staff, Worklogger can track key data points like payer, encounter type and duration worked

Prioritize and triage: In the event AKASA is unable to work an encounter, the Worklogger videos can serve as helpful audit trail to prioritize and triage the event

Worklogger videos directly feed into AKASA's Unified Automation solution



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