

Sylo Solutions and [Company Name]: Monthly Report

Executive Summary:

In the past month, our automated medical coding system has excelled in processing a total of 10,000 charts with an impressive accuracy rate of 98.5%. The Prior Authorization Module boasted a success rate of 92%, significantly reducing the manual workload for your billing department, and the Patient Billing Module was able to reduce average time to payment (ATP) to X days. Key achievements include a 15% reduction in coding turnaround time with a 5.4% increase in accuracy and a 20% increase in prior authorization approval rates.

Coding Module Metrics:

Our Coding Module continues to set high standards with the successful processing of 10,000 charts in the last month. Our software achieved an accuracy (first acceptance) rate of 98.5% with the help of your team, ensuring that your claims are coded correctly the first time. The average turnaround time for coding has been reduced to 5 minutes, enhancing the efficiency of your revenue cycle.

Prior Authorization Module Metrics:

Our Prior Authorization Module has successfully initiated and processed 500 prior authorization requests, with an impressive approval rate of 92%. The average time for obtaining prior authorization has been streamlined to just 48 hours, minimizing delays in patient care and optimizing your

Financial Performance:

The financial performance of our services remains robust, generating a revenue of \$1.5 million from the coding and prior authorization processes. Breakdown analysis reveals a diversified revenue stream from various insurance providers, with an average revenue growth of 10% compared to the previous month. While this can be due to many factors, we believe that the increase in coding accuracy has contributed to 49% of this revenue increase. We're looking to further boost these numbers going into next month, catching more revenue and profit through your RCM cycle.

Future Opportunities:

Looking ahead, we are exploring opportunities for further process optimization. The development of new features and modules is underway to address specific pain points and enhance the overall user experience. Your feedback is invaluable as we continue to evolve our services. Please do not hesitate to reach out to me at hello@sylosolutions.com (replace with actual email) to see what we can do to improve our services.

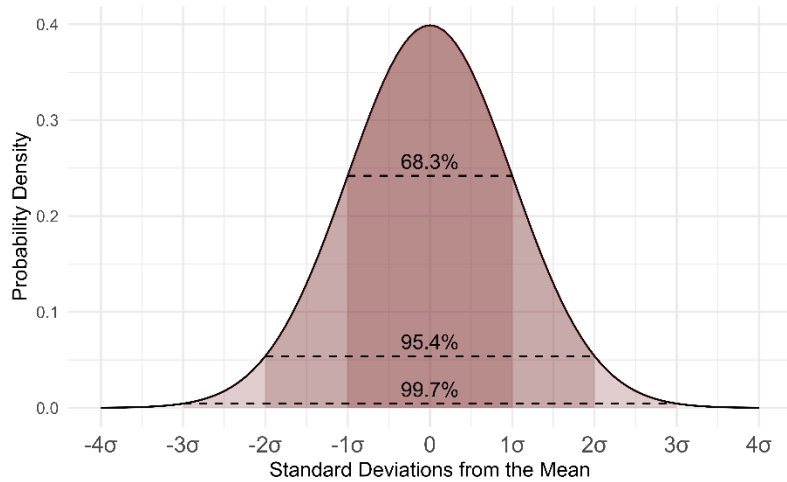
Predictive Analysis:

Based on current trends, we forecast a coding workload of 12,000 charts for the upcoming month, anticipating a revenue growth of 12%. Our predictive analysis also

reimbursement process. This is an area that we are looking to improve looking ahead to next month, as we hope to be able to see prior authorization approvals at around 30 hours.

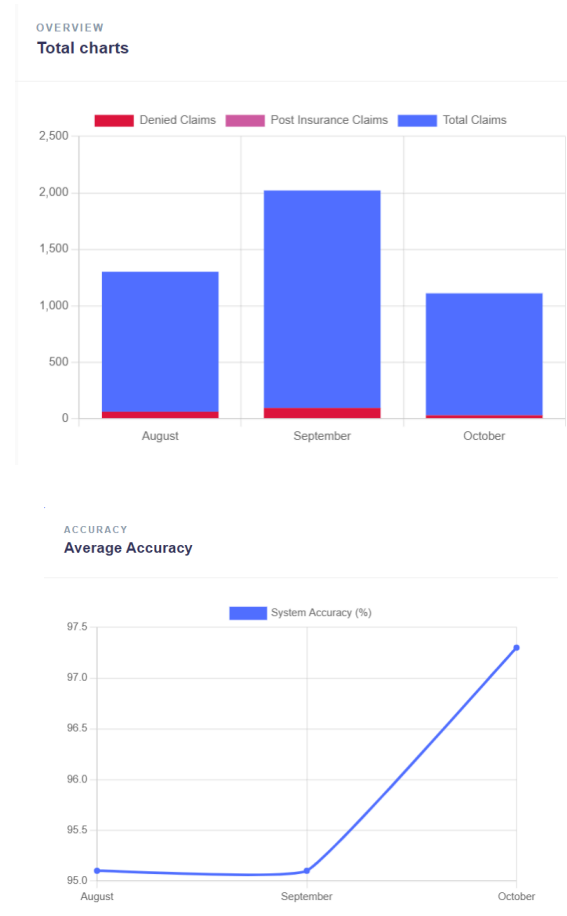
Patient Billing Module Metrics:

With the Patient Billing Module in action, we processed 95% of claims successfully, contributing to a positive impact on revenue. Our patient communication strategy, tailored to individual preferences, resulted in an 80% response rate to billing inquiries and improved overall patient satisfaction. Most of the patients paid before the 3rd outreach attempt was sent (figure 1), meaning most of the claims got paid within X amount of time.



suggests potential areas for further streamlining the billing process, ensuring sustained success in the months to come. With this in mind, we're predicting a revenue growth of 13.2% for the next month, and our system will also increase total efficiency another 3.4%.

Visuals and Graphs:



Details to include in future reports:

- 1. Number of claims**
- 2. Total dollar volume/value of monthly claims accepted**
- 3. Predictive Analysis - Percentage of medicaid vs private insurance (pie chart as % of revenue), include breakdown of providers/insurance company payors as a percentage of total**
- 4. Efficiency of claims process (recommendations for better/cleaner Dr notes), could provide Dr by Dr breakdown of claims efficiency for comparison and baselining**
- 5. Average claim size this month (number of claims divided by total dollar amount value of claims processed)**
- 6. Independent Dr reports for billed claims (i.e which Dr has highest average claim value and average volume of claims per month, per quarter, YTD, historical, etc)**
- 7. Estimated cost savings**
- 8. Recommendations for:**
 - a. Taking better/cleaner Dr notes (i.e. what are the top 10 most frequently incomplete CPT Codes that are missing initial information for the system to be able to automatically process so more claims can be automatically processed without**
- 9. Provide insight into how Sylo Code is enhancing its software to ensure proper level of coding for maximum insurance reimbursement (upcoding)- show the provider trend line for this**