Eyther.AI

Transforming Healthcare Revenue Cycle Management

**Proposal Date:** [INSERT DATE] **Revenue Cycle Management Services Proposal**

**Submitted to:** [HOSPITAL NAME] **Location:** [HOSPITAL ADDRESS], Kota, Rajasthan

**Prepared by:** Eyther.AI

# Executive Summary

Thank you for the opportunity to showcase Eyther.AI's capabilities at [HOSPITAL NAME]. Following our product demonstration, we are pleased to submit this comprehensive Revenue Cycle Management proposal. Our name "Eyther" derives from "ether" - the fifth element that connects all others - reflecting our vision to become the essential connector in healthcare between hospitals, insurers, government agencies, and patients. Through our AI-powered service delivery model, we transform revenue cycle operations by bridging the critical gaps that have long challenged the industry.

**Key Value Proposition:** Through our dedicated on-site service delivery backed by AI-powered expert systems, we guarantee significant improvements in your revenue cycle performance, including less than 3% rejection rates, over 70% first-pass claim ratio, and 50% reduction in query resolution time. Our deployed

team members work closely with your hospital staff, supported by expert oversight to ensure accuracy and efficiency.

This proposal outlines a comprehensive 120-day pilot program designed to demonstrate measurable results, followed by a long-term partnership that will transform your revenue cycle management operations. Our service fee structure is transparent and performance-based, ranging from 2-4% of your total monthly claim value with no setup fees or implementation costs.

# Hospital Profile & Current State Analysis

## Hospital Overview

* **Hospital Name:** [HOSPITAL NAME]
* **Monthly Claim Value:** [INSERT MONTHLY CLAIM VALUE]
* **Primary Departments:** [LIST MAJOR DEPARTMENTS]
* **Patient Volume:** [MONTHLY PATIENT VOLUME]
* **Current Insurance Mix:** [PERCENTAGE BREAKDOWN OF INSURANCE TYPES]

## Current RCM Challenges

Based on our preliminary assessment and industry benchmarks, [HOSPITAL NAME] likely faces several common revenue cycle challenges:

* **Revenue Reconciliation Challenges:** [CURRENT RECONCILIATION GAPS] - Complex matching of payments with claims across multiple insurance schemes
* **Medical Terminology Understanding:** [CLAIMS TEAM KNOWLEDGE GAPS] - Limited understanding of clinical terminology by claims processing staff
* **Package Selection Accuracy:** [PACKAGE BOOKING ERRORS] - Incorrect selection of treatment packages in government schemes

leading to claim rejections

* **Claim Documentation Gaps:** [DOCUMENTATION CHALLENGES] - Incomplete or incorrect documentation affecting claim approval rates
* **Pre-Authorization Delays:** [AUTHORIZATION PROCESSING TIME] - Lengthy pre-authorization processes impacting patient care and revenue flow
* **Government Scheme Compliance:** [SCHEME COMPLIANCE ISSUES] - Difficulty maintaining compliance with constantly evolving RGHS/PMJAY guidelines

## Revenue Impact Analysis

Based on the comprehensive 12-month performance data provided by [HOSPITAL NAME] during our pre-demonstration consultation, we have prepared this personalized revenue impact analysis. Using your actual current metrics as the baseline, this analysis demonstrates the specific financial improvements you can expect from implementing Eyther.AI's revenue cycle management services. The projections below are tailored to your hospital's current performance levels and claim volumes.

### [HOSPITAL NAME] Current Performance vs. Eyther.AI Optimized State

|  |  |  |  |
| --- | --- | --- | --- |
| **Performance Metric** | **Current State of** [HOSPITAL NAME] | **Eyther.AI Guaranteed Performance** | **Your Projected Improvement** |
| Claim Denial Rate | [YOUR CURRENT DENIAL RATE]  (Industry avg: 12-  18%) | Less than 3% | [CALCULATED IMPROVEMENT]  reduction in denials |
| First Pass Claim Ratio | [YOUR CURRENT FIRST PASS RATIO]  (Industry avg: 55-  65%) | Over 70% | [CALCULATED IMPROVEMENT]  improvement in cash flow |

|  |  |  |  |
| --- | --- | --- | --- |
| **Performance Metric** | **Current State of** [HOSPITAL NAME] | **Eyther.AI Guaranteed Performance** | **Your Projected Improvement** |
| Accounts Receivable Days | [YOUR CURRENT AR DAYS]  (Industry avg: 45-60 days) | 30-35 days | [CALCULATED IMPROVEMENT]  days reduction |
| Administrative Hours per Claim | [YOUR CURRENT PROCESSING TIME]  (Industry avg: 45-60 minutes) | 10-15 minutes | [CALCULATED TIME SAVINGS]  reduction |
| Revenue Reconciliation Time | [YOUR CURRENT RECONCILIATION TIME]  (Industry avg: 5-7 days) | Same day | [CALCULATED TIME SAVINGS]  improvement |

Sample Financial Impact Calculation

The following sample calculation demonstrates the potential revenue impact for a hospital with **₹50 Lakhs monthly claim value** (typical for a 100-bed facility):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Revenue Optimization Area** | **Current State** | **Eyther.AI Optimized** | **Monthly Savings** | **Annual Impact** |
| **Denial Rate Reduction** From 15% to 3% | ₹7.5 Lakhs lost  (15% of ₹50L) | ₹1.5 Lakhs lost  (3% of ₹50L) | **₹6.0 Lakhs** | **₹72.0**  **Lakhs** |
| **First Pass Improvement** From 60% to 70% | ₹20 Lakhs delayed (40% requiring rework) | ₹15 Lakhs delayed (30% requiring rework) | **₹2.5 Lakhs** | **₹30.0**  **Lakhs** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Revenue Optimization Area** | **Current State** | **Eyther.AI Optimized** | **Monthly Savings** | **Annual Impact** |
| **AR Days Reduction**  From 50 to 32 days | ₹83.3 Lakhs tied up  (50 days \*  ₹1.67L/day) | ₹53.3 Lakhs tied up  (32 days \*  ₹1.67L/day) | **₹3.0 Lakhs** | **₹36.0**  **Lakhs** |
| **Administrative Efficiency**  75% time reduction | ₹4.0  Lakhs/month (Staff costs for RCM) | ₹1.0  Lakhs/month (Automated processes) | **₹3.0 Lakhs** | **₹36.0**  **Lakhs** |
| **Total Monthly Impact** | Combined Revenue Optimization | | **₹14.5**  **Lakhs** | **₹1.74**  **Crores** |

### Proven Results from Our Implementation Experience

Our track record with similar healthcare facilities demonstrates consistent and measurable improvements:

**Case Study - 120-bed Multi-specialty Hospital:** Achieved 87% reduction in denial rates within 90 days, resulting in ₹12 Lakhs additional monthly revenue

**Case Study - 80-bed District Hospital:** Improved first pass claim ratio from 58% to 73%, accelerating cash flow by 22 days

**Case Study - 150-bed Corporate Hospital:** Reduced administrative processing time by 78%, saving 420 staff hours monthly

**Case Study - Government Scheme Optimization:** Achieved 94% package selection accuracy for PMJAY claims, reducing rejections by 89%

**Net ROI Guarantee:** For every ₹1 invested in Eyther.AI services, hospitals typically see ₹4-6 return within the first year through

improved collections, reduced denials, and operational efficiency gains.

### Scalable Impact for Your Hospital

**For** [HOSPITAL NAME] with monthly claim value of [MONTHLY CLAIM VALUE], the potential annual revenue impact could reach [CALCULATED ANNUAL IMPACT] based on similar implementations.

This represents a **significant improvement in financial performance** while simultaneously reducing operational complexity and improving patient experience through faster processing and more accurate billing.

## Where Eyther.AI Disrupts the Market

Eyther.AI has identified and addressed the fundamental gaps in the current RCM market, creating a unique positioning as the "fifth element" that connects the entire healthcare ecosystem.

### Our Unique Market Position

|  |  |  |  |
| --- | --- | --- | --- |
| **Differentiation Area** | **Market Standard** | **Eyther.AI Innovation** | **Business Impact** |
| **Market Entry Strategy** | Assume existing insurance relationships | Insurance empanelment as core offering | Immediate access to new revenue streams |
| **AI**  **Implementation** | Basic automation and rules | True ML with predictive analytics | Proactive denial prevention vs. reactive management |
| **Service Model** | Technology OR services | Integrated technology + managed services | Complete solution without internal resource burden |

|  |  |  |  |
| --- | --- | --- | --- |
| **Differentiation Area** | **Market Standard** | **Eyther.AI Innovation** | **Business Impact** |
| **Performance Accountability** | Effort-based contracts | Outcome-based guarantees | Aligned incentives and measurable results |
| **Ecosystem Approach** | Point solutions | Connected hospital-insurer- patient platform | Network effects and sustainable competitive advantage |

Competitive Advantages That Matter

**First-Mover Advantage:** Eyther.AI is the first platform to combine insurance empanelment, AI-powered RCM, and ecosystem connectivity in a single solution designed specifically for the Indian healthcare market.

**Speed to Value:** While competitors require 6-12 months setup, Eyther.AI delivers results within 120 days through our empanelment- led approach.

**Revenue Guarantee:** We're the only provider offering <3% denial rates and 70%+ first-pass ratios with financial penalties for non- performance.

**Scalable Technology:** Our AI platform improves with each implementation, creating better outcomes for all clients unlike static traditional solutions.

**Total Cost of Ownership:** Performance-based pricing (2-4% of collections) vs. competitors' fixed costs regardless of results.

**Future-Proof Platform:** Built for government initiatives like ABDM and HCX, while competitors struggle with legacy architectures.

## Why Hospitals Choose Eyther.AI Over Competitors

The decision to partner with Eyther.AI represents a strategic choice to leapfrog traditional RCM approaches and embrace the future of healthcare revenue optimization.

**Immediate Impact**

Unlike competitors who require extensive setup periods, Eyther.AI delivers immediate value through insurance empanelment, opening new revenue streams from day one.

**Proven Results**

Our track record speaks for itself: consistent achievement of <3% denial rates and 70%+ first-pass ratios across diverse hospital implementations, backed by financial guarantees.

**Strategic Partnership**

Beyond vendor relationships, Eyther.AI becomes a strategic partner in your hospital's growth, with aligned incentives and shared success metrics.

**For** [HOSPITAL NAME], choosing Eyther.AI means partnering with the market innovator rather than following outdated approaches that have failed to solve the fundamental challenges of healthcare revenue cycle management.

# Government Insurance Schemes Analysis

**Rajasthan Government Specific Schemes(RGHS +MAA)**

Our team includes medical experts who previously worked within the RGHS& MAA system at government facilities, bringing insider knowledge of approval workflows, documentation intricacies, and state authority coordination. Our AI engine has been specifically trained by these former RGHS operational specialists who understand the nuanced package selection criteria, pre-authorization protocols, and compliance requirements that often cause claim rejections. This deep institutional knowledge enables us to navigate RGHS complexities with precision that external vendors simply cannot match.

## Pradhan Mantri Jan Arogya Yojana (PMJAY)

Our medical and operational experts include former PMJAY program administrators and empaneled hospital coordinators who have hands-on experience with package rate negotiations, HBP implementations, and NHA audit processes. These specialists have trained our AI algorithms on the subtle documentation requirements, coding hierarchies, and approval patterns that determine PMJAY claim success. Their insider understanding of district-level variations, empanelment renewal processes, and penalty avoidance strategies gives us unique advantages in maximizing PMJAY revenue.

# Eyther.AI Solution Architecture

## AI-Powered Core Platform

Eyther.AI's revenue cycle management service leverages advanced artificial intelligence to support our on-site team members in optimizing every aspect of the revenue cycle. Our deployed specialists are backed by an AI-powered expert system that continuously improves performance based on real-world data, ensuring optimal outcomes through human expertise enhanced by technology. Medical experts work behind the

scenes through the platform, reviewing and validating claims without requiring direct hospital staff access.

**Dhi - AI Departmental Assistant (Future Release):** Our planned conversational AI will provide instant access to departmental data and insights, enabling staff to make informed decisions quickly. Dhi will be able to answer complex queries about claim status, denial reasons, and optimization opportunities in natural language. *This feature is currently in our development pipeline and will be available in future releases.*

**Automated Intelligence:** AI agents handle data extraction, integration, and reporting across multiple systems, eliminating manual data entry and reducing human error. These agents work 24/7 to ensure continuous processing and monitoring, backed by human-in-the-loop medical expert processes that validate critical decisions and ensure trust and accuracy in all automated workflows.

**Accelerated Cash Recovery & Revenue Reconciliation:** Our automated reconciliation engine matches payments with claims in real-time, identifies discrepancies instantly, and accelerates cash recovery through intelligent follow-up processes. This eliminates manual reconciliation delays and ensures faster revenue recognition with complete audit trails for all financial transactions.

**Document Digitization:** Advanced OCR capabilities automatically process and extract data from various document types, including prescriptions, discharge summaries, and insurance forms. This reduces processing time and improves accuracy.

**Predictive Analytics:** Our platform uses historical data and machine learning to predict claim outcomes, identify potential denials before submission, and recommend optimization strategies.

## Comprehensive Management Features

Our platform provides end-to-end revenue cycle management capabilities designed specifically for Indian healthcare providers:

**Role-Based Dashboards:** Customized analytics and insights for different management roles, from frontline staff to executive leadership. Each dashboard provides relevant KPIs and actionable insights.

**Real-Time Claim Tracking:** Complete visibility into claim status from submission to settlement, with automated alerts for delays or issues requiring attention.

**Denial Management:** Sophisticated denial analysis and management system that identifies root causes and provides specific recommendations for resolution.

**Revenue Optimization:** Smart allocation of resources and automated identification of revenue optimization opportunities across all departments, enhanced by advanced revenue reconciliation capabilities that automatically match payments with claims across multiple insurance schemes. Our smart revenue recovery tools proactively identify outstanding payments, automate follow-up processes, and optimize collection strategies to minimize accounts receivable days and maximize cash flow efficiency.

# Implementation Roadmap

**Phase 1: Assessment & Setup (Days 1-30)**

The implementation begins with deploying a dedicated Eyther.AI team member at your hospital to understand current RCM processes and establish streamlined workflows. Our specialist will work directly with your staff to collect claim documents, process them through our expert-backed system, and manage all insurance communications on your behalf.

#### Key Activities:

Assessment of current RCM processes and claim documentation workflows

Deployment of dedicated Eyther.AI team member at hospital premises

**Phase 3: Full Deployment & Optimization (Days 91- 120)**

The final phase involves complete system deployment across all departments and claim types, with focus on optimization and performance achievement.

**Key Activities:**

Establishment of document collection and processing workflows with hospital staff

Creation of communication protocols between deployed team member and hospital departments

Setup of backend expert review system for claim validation and approval

Hospital staff orientation on coordination with deployed Eyther.AI specialist

Hospital commitment and support assurance for pilot success and potential insurance desk expansion

Baseline performance metrics establishment for pilot measurement

**Phase 2: Pilot Implementation (Days 31-90)**

During this phase, we'll implement the Eyther.AI platform for a selected set of departments or claim types, allowing for controlled testing and optimization before full deployment.

**Key Activities:**

Gradual system rollout with continuous monitoring Staff training and support

Performance monitoring and optimization Issue resolution and system refinement Weekly progress reviews and adjustments

Full system deployment Advanced feature activation

Performance optimization based on pilot results Comprehensive staff training completion

# Service Delivery Model

## On-Site Team Deployment Model

Eyther.AI provides comprehensive end-to-end service delivery through dedicated on-site specialists deployed at your hospital, backed by expert medical and RCM professionals who review and validate all decisions through our AI-enhanced backend system.

**On-Site Service Delivery:** Our deployed team members work directly at your hospital, collecting claim documents from your staff, processing them through our expert-validated system, and managing all insurance communications. Medical experts review every claim before approval, ensuring accuracy and compliance.

**Expert-Backed Workflow:** Your deployed specialist follows a proven workflow: collect documents from hospital staff → upload to expert review system → await medical expert approval → communicate with insurance desk → handle any queries back to hospital staff. This ensures quality control while removing burden from your team.

**Scalable Service Model:** Starting with our pilot approach, we can gradually expand to potentially take over your entire insurance desk operations based on performance and your preferences, providing complete RCM outsourcing with continuous optimization and expert oversight.

# Performance Metrics & Success Indicators

## Guaranteed Performance Metrics

Eyther.AI commits to achieving the following performance metrics within the 120-day pilot period:

|  |  |  |  |
| --- | --- | --- | --- |
| **Metric** | **Current Industry Average** | **Eyther.AI Target** | **Measurement Method** |
| Claim Rejection/Denial Rate | 12-18% | Less than 3% | Monthly claim analysis |
| First Pass Claim Ratio | 60-70% | More than 70% | Initial submission success rate |
| Query Resolution Time | 48-72 hours | 50% reduction  (within 1 hour) | Response time tracking |
| Denial Management Response | 5-7 business days | 3 response cycles | Turnaround time measurement |
| Accounts Receivable Days | 45-60 days | 30-35 days | Monthly AR aging analysis |

## Continuous Monitoring & Reporting

Our performance monitoring system provides continuous visibility into all key metrics through multiple reporting channels:

**Weekly Reports:** Comprehensive weekly performance reports covering all key metrics, trends, and recommendations for improvement.

**Monthly Executive Dashboard:** Monthly executive summary reports with strategic insights and performance analysis.

**Real-Time Dashboards:** Access to live dashboards including CFO Dashboard, Owner Dashboard, and Claims Dashboard for immediate performance visibility.

**Quarterly Business Reviews:** Detailed quarterly reviews with strategic recommendations and performance optimization opportunities.

# Risk Mitigation & Quality Assurance

## Data Security & Compliance

Eyther.AI maintains the highest standards of data security and regulatory compliance, ensuring your hospital's sensitive information is protected at all times.

**Security Measures:** Multi-layered security architecture including encryption, access controls, audit trails, and regular security assessments.

**Compliance Standards:** Full compliance with Indian healthcare regulations, data protection laws, and international standards including HIPAA-equivalent protections.

**Backup & Recovery:** Comprehensive backup and disaster recovery systems ensuring continuous operations and data protection.

## Performance Guarantees

We stand behind our performance commitments with concrete guarantees and risk mitigation measures:

**Service Level Agreements:** Detailed SLAs covering system uptime, response times, and performance metrics with clear remediation procedures.

**Performance Penalties:** Financial penalties for failure to meet guaranteed performance metrics, ensuring accountability and continuous improvement.

**Continuous Improvement:** Regular system updates, feature enhancements, and optimization based on performance data and industry best practices.

# Investment Structure & Terms

## Service Fee Structure

Our pricing model is designed to align our success with your hospital's financial performance, ensuring mutual benefit and sustainable partnership.

* **Monthly Service Fee:** 2-4% of total monthly claim value processed through our platform
* **Setup Fees:** No setup fees or implementation costs
* **Additional Charges:** No hidden fees or additional charges for standard services

**Example Calculation:**

Monthly Claim Value: [INSERT MONTHLY CLAIM VALUE] Service Fee (at 3%): [CALCULATED FEE]

Potential Revenue Improvement: [ESTIMATED IMPROVEMENT] Net Benefit: [NET BENEFIT CALCULATION]

## Contract Terms

* **Pilot Period:** 120 days initial pilot program to demonstrate value and achieve performance metrics
* **Contract Duration:** Initial 12-month term following successful pilot completion
* **Renewal Terms:** Automatic renewal with 90-day notice period for termination
* **Payment Terms:** Monthly billing based on actual claim value processed
* **Termination:** Either party may terminate with 90-day written notice

## Return on Investment

Based on industry benchmarks and our performance guarantees, [HOSPITAL NAME] can expect significant return on investment:

**Revenue Improvement:** 5-15% increase in collectible revenue **Operational Savings:** 20-30% reduction in RCM operational costs **Staff Productivity:** 40-50% improvement in staff efficiency

**Cash Flow:** 25-35% improvement in cash flow cycle

# Next Steps & Timeline

## Immediate Actions Required

To proceed with this partnership, we recommend the following immediate actions:

1. **Internal Review:** Review this proposal with your executive team and department heads
2. **Demo Session:** Schedule a detailed product demonstration with key stakeholders
3. **Site Assessment:** Arrange for our technical team to conduct detailed site assessment
4. **Contract Negotiation:** Initiate contract discussions and finalize terms
5. **Implementation Planning:** Develop detailed implementation timeline and resource allocation

## Proposed Timeline

* + **Proposal Review:** [INSERT DATES]
  + **Contract Execution:** [INSERT DATES]
  + **Implementation Start:** [INSERT DATES]
  + **Pilot Completion:** [INSERT DATES]
  + **Full Deployment:** [INSERT DATES]

# Contact Information

Eyther.AI Team:

**Email:** [INSERT EMAIL]

**Phone:** [INSERT PHONE]

# Acknowledgments

We acknowledge the valuable support and collaboration of TTP

Health in advancing healthcare revenue cycle management solutions in the region.

[TTP HEALTH LOGO]

Thank you for considering Eyther.AI as your revenue cycle management partner. We look forward to transforming your hospital's financial performance and operational efficiency through our innovative AI-powered solutions and dedicated expert support.

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