



Prateek Kashyap-00:00

So as we were discussing previously last week that how we are going to proceed ahead with the UAT testing and this phase of, you know, handing this.



Abhinav Srivastava-00:14

Different project to you.



Prateek Kashyap-00:16

Right. So we have divided this session more in terms of four ways like as per user types, where on each call we will be covering one particular user type. We will give you the complete explanation of the, of each module, how it is working. Okay, so.



Emily Clifford-00:39

So that you have hearing you and understanding you.



Prateek Kashyap-00:43

Am I audible?



Emily Clifford-00:45

Yeah, you're, you're coming in and out.



Prateek Kashyap-00:48

There might be something.



Abhinav Srivastava-00:50

Just one second. Is it fine now?



Emily Clifford-00:56

Yeah, it's better now.



Abhinav Srivastava-00:57

Hello, can you hear me? Yeah, we can hear you.



Emily Clifford-01:11

Hello?



Abhinav Srivastava-01:13

I think you're on mute now.



Emily Clifford-01:22

I'm not hearing anything. I don't know if somebody's talking.



Abhinav Srivastava-01:25

Can you hear me, Emily?

I can, I can now.

 **Abhinav Srivastava**-01:30

Okay. Has had some network issues. Let me check with him. Yeah, yeah.

 **Prateek Kashyap**-01:39

Is it fine now?

 **Abhinav Srivastava**-01:42

Yeah, I can hear you.

 **Emily Clifford**-01:44

Okay.

 **Prateek Kashyap**-01:44

Okay. So yeah, Emily, basically the plan is to. We will explain you each and every user role how what all functions are present in, in the, in the web panel and the application so that you have end to end understanding of how this platform gonna work. And since we have planned four sessions for this thing so that we will be taking you through, through each and every module as per, as per the day.

 **Prateek Kashyap**-02:16

Okay. And we have also prepared some user manuals that will be, you know, helpful for you to, you know, pass on to your team as well so that they also have an understanding on how to use the platform. Okay.

 **Emily Clifford**-02:30

Okay.

 **Abhinav Srivastava**-02:31

Yeah.

 **Prateek Kashyap**-02:32

So, and based on, based on the walkthrough we will be giving you, you can test this application into your day to day workflows and then if you find any gaps, operational gaps for this regarding this platform, then you can absolutely go ahead and share it with us so that we can work on top of it.

 **Emily Clifford**-02:57

Okay.

 **Prateek Kashyap**-02:59

So I have Lindsay with me as well. So Lindsay will going to be sharing his screen and we will be walking you through the practice admin for today.

 **Emily Clifford**-03:08

Okay. Okay.

And post this call. I will be forwarding you. I will be sending you a user manual on, you know, for. Regarding this user type so that you can go through it as well.

 **Prateek Kashyap-03:23**

And just before, you know, starting this thing, let me just give you an update for the application. Our team, there were some development issues regarding the dictation flow. Okay. So the team is promptly working on resolving those issues and we are trying our very best to make this work before Friday so that once we have a call on Friday, the application is working as per the expectations.

 **Prateek Kashyap-03:52**

So maybe Brian have to wait for a while. Once this issue is sorted, then he can start, you know, using that application.

 **Emily Clifford-04:00**

Okay. So he cannot be doing. He can't do anything until Friday, is that correct?

 **Prateek Kashyap-04:07**

Yes, kind of. I can say this because the dictation is the main thing which is happening on the application. If that is not working as of now, then it doesn't make sense to use it.

 **Emily Clifford-04:18**

Right?

 **Prateek Kashyap-04:20**

Yes, we are trying our very best. We just need two, three days to make this work and on Friday we can positively test it.

 **Emily Clifford-04:29**

Sounds good. Okay.

 **Prateek Kashyap-04:31**

Okay, over to you. You can start with from the login screen till the end and explain each and every functionality, how it is connected, what all options are there, everything okay?

 **Lince Varghese-04:45**

Fine.

 **Prateek Kashyap-04:46**

Yeah.

 **Lince Varghese-04:48**

So Emily, are you able to see my screen?

 **Emily Clifford-04:54**

Yep, yep.

So this is the practice admin, which we will be.

 **Abhinav Srivastava**-04:59

Let's.

 **Prateek Kashyap**-05:01

Sorry for jumping in. Your voice is, you know, quite faint.

 **Abhinav Srivastava**-05:05

So.

 **Emily Clifford**-05:07

And this is the dashboard. This is not the mobile app, is that correct? This is the desktop.

 **Prateek Kashyap**-05:13

Yeah, this is the desktop version. This is the website where Practice Admin can, you know, manage the whole. Whole users of the platform and hospital information, the clinical information, basically.

 **Emily Clifford**-05:29

Okay.

 **Lince Varghese**-05:31

Okay. Yeah. Continuing with this role, Emily, I think you are the practice Admin of entirely system. So this would be.

 **Emily Clifford**-05:44

Yeah, I'm going to stop you for one second just because I want to make sure. So I am the director of administration, however, I am not clinical. So what? There was a few things in the demo that you had said.

 **Emily Clifford**-05:58

Okay, this will go to the Practice admin to fill this out. That would not be me. That would be some sort of like clinical coordinator, something like that. So I guess what would be the most helpful right now is for you to show me somewhere, like a list of what each role is supposed to be responsible for within the app.

 **Emily Clifford**-06:18

So like if someone is within Practice Admin, what are their responsibilities?

 **Lince Varghese**-06:24

Yes, exactly. So Practice Admin basically have all the rights of Ambly. There are only few functionalities that Practice Admin cannot process. That is that are giving to the billing team, which is policy library, which actually intends to have a rag policy that the new policies that are coming from Aetna, Cigna, bcbs, all these policies will be embedded into our IMB system.

So this, this application that the files has to be uploaded to the IMB system. This provision only the Practice Admin doesn't have. And basically. And yeah.

 **Lince Varghese-07:14**

Emily, you want to say something?

 **Emily Clifford-07:17**

Me? No, I didn't say anything.

 **Lince Varghese-07:19**

Okay. Yeah. So Practice Admin generally have entire claim management on his Hands.

 **Emily Clifford-07:27**

Wait, say that again. Practice management has the claim management on their hands. Isn't that a billing, isn't that the billing team?

 **Abhinav Srivastava-07:38**

No, so what he's trying to say is that I mean the whole, the admin part of the practice like managing surgeons and adding patients wherever needed and also having. And they also have the full visibility of the claim management process. Like when a claim is created and it has gone to the biller then gone to the supervisor so they have visibility to everything and they can also create some templates which the surgeons can use before their dictation. So yeah, so from an administrative perspective they have all the controls that are needed.

 **Abhinav Srivastava-08:17**

But only thing that is missing from the practice admins access is the management of the maintenance of the claims. Sorry, the payer policies. Okay, so example, your payer policies need to be updated at some durations then Practice admin does not have that role. Only the billers and supervisors have those accesses which you will see in subsequent demos.

 **Emily Clifford-08:44**

Okay,.

 **Lince Varghese-08:46**

Yeah, that's what. Thank you for Abhinav for mentioning that clearly. So basically I was mentioned, I was trying to mention what is not included in practice admin first and these things what Abhinav stated as managing surgeons patients claims and in the sense claim management, not in the sense of reviewing them but in the sense of having visibility and exporting them. That provision we also give to billers and supervisor as well.

 **Lince Varghese-09:18**

So yeah, these templates which we have here are the templates which Dr. Brian or other doctors will be able to see them during the dictation and will select one or two of them according to the surgeries they are taking care of. So I'll go through one by one. First the dashboard itself. So this dashboard actually shows the like claims that has been generated today.

Approved pending review, urgent, total build and revenue projected. So these urgent are those build are those claims which are higher than like 48 hours of duration. And the pending is the total number of pending that has to be taken care of by the biller team or supervisor team. Okay.

 **Lince Varghese-10:20**

So pipeline is entire system view what all things are claims where all the benchmarks or the milestone of the claims is there. So each count we have registered here and been displayed on the pipeline itself by provider means. The surgeons that are being here in the platform they will be taking care of claims and their average AI and number of claims will be displayed in here. We can select multiple patients here and we can see that.

 **Lince Varghese-11:06**

For the sergeant. Suppose if I take off Emily otherwise just a second. Yeah. Yashwins has performed these claims and when it has been performed, how much hours has been passed.

 **Lince Varghese-11:26**

The procedure that was taken by the doctor during the dictation. The pair that we have here and the AI score that has been generated against the transcription and the state at what stage this particular claim is here. So we have multiple filters that we can go on. Okay, so this, this has a pagination view of the claims.

 **Lince Varghese-11:59**

We can shift it to multiple claims or extend our view towards up to 100 claims in a single.

 **Emily Clifford-12:07**

Okay.

 **Lince Varghese-12:09**

Okay. Next comes the analytics parts which actually displays the entire billing analytics of various timeline like today, this week, month, quarter and custom we have. So according to date we can go.

 **Abhinav Srivastava-12:28**

Through.

 **Lince Varghese-12:31**

And we can try visible all kinds of KPIs and revenue impact on our billing platform. As soon as we will get this picture payer APIs or payer details from the external sources, we'll be adding these fields as well. This is a surgeon management platform where we can add surgeons by their full name, NPI email address and specialty. These are the only fields we are considering as for now and if we try to add a surgeon.

 **Emily Clifford-13:28**

So if we want to add a new doctor to IM Billy, the practice admin would do that here.

 **Lince Varghese-13:34**

Yes. We also give supervisor the provision to act as to add a surgeon as well.

And does the email address have to follow what you're doing or are you just doing that for the test? For the demo.

 **Lince Varghese**-13:50

We can add any. Any email address we want. It was not clear. Come again please.

 **Emily Clifford**-13:57

I just want to make sure when I'm setting up a new doctor profile I'm using their correct email address. I don't need to add any sort of additional. Like what you're putting in is for the demo only, I imagine.

 **Lince Varghese**-14:08

No, not at all. You can have any kind of email address, like whatever is valid.

 **Abhinav Srivastava**-14:17

Yes, I mean in this form. As you can see, wherever the red asterisk is available, those fields are mandatory to be filled. So the name of course we need and the NPI number also we need and the surgeon's email address from where they would be logging in and to this family.

 **Lince Varghese**-14:38

Yeah. Continue adding, adding a new profile for the doctor. So as we can see that Dr. Brian MCU with this particular NPI ID is showing us pending here. And it is not in active states.

 **Lince Varghese**-14:57

If it is not in active state, this particular doctor cannot be like. Cannot login in here like every third word.

 **Abhinav Srivastava**-15:07

I'm sorry, your voice broke that you're saying hello.

 **Emily Clifford**-15:14

Is there someone who can lead this that has better service? I'm not hearing anything.

 **Abhinav Srivastava**-15:21

Okay. Do you have.

 **Emily Clifford**-15:26

The other thing you can do that might be more effective is if you can just voice over the demo and I can watch it later. Do you. Is that because I'm not. I'm not hearing what you're saying, so this isn't.

 **Emily Clifford**-15:43

This isn't useful right now.

 **Abhinav Srivastava**-15:46

Okay. Can you hear me?

I can, but then in like another minute, it'll. Everyone just go silent.

 **Lince Varghese**-15:53

Abhinav. What? Emily is asking for a video demo.

 **Abhinav Srivastava**-15:58

Yeah, but we would really prefer to walk this through with you because in case you have any questions or any doubts, we can get it cleared immediately.

 **Emily Clifford**-16:08

Yeah, I mean, I would. I would too. That would be ideal. We can keep going.

 **Emily Clifford**-16:11

I'm just letting you know I cannot hear probably 50% of what you're saying.

 **Abhinav Srivastava**-16:15

Okay. So I'll. I'll give it a try. I'll just do a voiceover and if my voice also faces the same challenge, then we.

 **Abhinav Srivastava**-16:23

We can switch to mode.

 **Emily Clifford**-16:26

Okay.

 **Abhinav Srivastava**-16:26

Sounds good. Okay, so. So this is the screen where the practice admin can manage surgeons.

 **Emily Clifford**-16:36

Okay.

 **Abhinav Srivastava**-16:37

You can view a list of all the surgeons that are tagged to your practice currently. And you can also create a new surgeon here or a new doctor. As you can see at the top right, there's this add surgeon button. Lindsay, can you press that?

 **Lince Varghese**-16:54

The credential one?

 **Abhinav Srivastava**-16:55

At surgeon. At surgeon. At the top right?

 **Emily Clifford**-16:58

Yeah.

So then this form opens up and we need some information, like the name of the doctor, their NPI number, their email address from which they would be logging in into the app. So for demo purposes, Lince is just entering some. Some dummy values here.

 **Emily Clifford**-17:21

Okay.

 **Abhinav Srivastava**-17:23

And this is the id. This is the email address where they will be receiving their login codes. So right now most of these emails have been diverted or forwarded to your id, but future when we release it to production, we will be using actual email addresses so you won't be spammed with unnecessary OTP emails.

 **Emily Clifford**-17:46

Anything on the back end for a new provider, if they are already within the Athena and Epic platforms, I imagine there's nothing to do. But what if it is a new provider that uses another EHR instead of Athena? What then happens? That has to be set up somewhere.

 **Abhinav Srivastava**-18:08

Yeah. So I mean, if it is a new system, then we'll have to definitely build a new connection there because that will require some coding and linking to their APIs and trying to ingest them into our system. So that will require some engineering effort, but we have a manual workaround which we will just show you. So here you can just Press on.

 **Abhinav Srivastava**-18:30

Create profile. Let's add a profile here. Yeah, so when you add a surgeon immediately, since this account is not verified yet, it will show us pending here in the status.

 **Prateek Kashyap**-18:47

Okay.

 **Emily Clifford**-18:48

Okay.

 **Abhinav Srivastava**-18:49

So when the doctor, when they'll receive the invitation email on their device. Liz, can you quickly show what the invitation email looks like?

 **Lince Varghese**-19:03

Yeah, I'll send an email. Email invitation to this.

 **Abhinav Srivastava**-19:08

Yeah. So you can also send, you can send an email from here again. So they will receive. So this is how they will receive an email.

 **Emily Clifford**-19:27

Okay.

So it will ask them to, you know, complete their account setup. Okay. So yeah, so how the surgeon signs up, we will take it up later. So right now we are focusing on practice admin, but they have a separate process to it.

 **Abhinav Srivastava**-19:45

So. Yeah. So accordingly you see the status here, it will be in pending and once the doctor completes their sign up, the status will move to active. As you can see in the doctors listed below in the list, the status will turn active.

 **Abhinav Srivastava**-19:59

So that's how you know that someone has signed up or not. So this is the surgeon management part. Yeah, Go to active and we can show how the edit screen looks like for a surgeon links. Yeah, and later even you want to change any details, you can come and change here.

 **Abhinav Srivastava**-20:24

But of course the NPI number is not going to be changed. Whatever you have entered in the first go is, is frozen. So if, if you have, if you, if you make a mistake while entering the NPI number, unfortunately the system will not allow you to edit that. So you'll have to create a new doctor profile for that doctor.

 **Abhinav Srivastava**-20:50

Is that clear?

 **Emily Clifford**-20:51

Yes.

 **Abhinav Srivastava**-20:53

Okay. So yeah, so next, next comes the patients part. So here. Yeah, so similar ux similar experience here as well.

 **Abhinav Srivastava**-21:07

At the top right you can see the Add patient button. You can click on the Add patient and here are all the details that you need to enter. So we'll show you how the Athena sync will work here.

 **Emily Clifford**-21:22

When am I adding a new patient? Like at what point is a new patient being added? I thought that was like automated.

 **Abhinav Srivastava**-21:31

So if, if during dictation, if the MRN number is provided by the doc. So there are two ways to it. Once you can either add it manually here you can just enter the MRN number and then click Sync Athena and then it will pull the details from Athena itself. Okay.

 **Abhinav Srivastava**-21:51

And sometimes that's, that patient might not.

 **Prateek Kashyap**-21:55

Be in your record.

So the doctor can just simply on the app they can just enter the MRN number and proceed with the dictation. And later the system will do the syncing part from, from the Back end. So this is just a workaround, since he also mentioned that in future you might need to integrate to another system. So we created this workaround so that you can at least add a patient manually.

 **Emily Clifford**-22:18

Okay. So the new patient setup step is not required. It's just a workaround in the event that Athena isn't syncing. And how would we know that?

 **Emily Clifford**-22:27

Is there going to be an error that says something? This patient cannot be found. And then we have to go and add a new patient back here.

 **Abhinav Srivastava**-22:35

Yeah. You'll receive an alert notification on dashboard. We'll show the notification parts as well. So this whole form, we'll quickly walk through all the sections here.

 **Abhinav Srivastava**-22:47

So this is the general demographics. Name, gender, date of birth, mrn. And then I'll go to the insurance section links. And here you can select the pair, the subscriber ID group numbers, all the details related to insurance claims.

 **Emily Clifford**-23:11

So this needs to be done prior to the surgeon dictating, because without the insurance, without the payer, you won't know which policy to refer to, right?

 **Abhinav Srivastava**-23:26

No. So not necessary. I mean, the doctor can just simply enter the MRN number and complete their dictation. What the system will do is that it will wait for an actual record in the system to be added against their mRNA, so the doctor can complete the dictation and be done with it.

 **Abhinav Srivastava**-23:44

The practice admin can come later and, you know, add a patient against that MRN number here. And as soon as the system finds the same MRN number, the linking will be done there and then the claim would be generated. So it's not dependent that, you know that everything comes on the admin, that they have to do it in any scenario? It's not like that.

 **Emily Clifford**-24:05

And then are there alerts or notifications for the practice admin that the surgeon had dictated a note and the practice admin needs to make sure that the patient is listed in there. Like, are there. What is the notification process like?

 **Abhinav Srivastava**-24:25

I'm not sure about this notification. Lindsay, have you set up this.

 **Lince Varghese**-24:31

As soon as the doctor does a dictation, he will provide an MRN number. So if MRN number syncs up with Athena. So there are two flows.

Sorry, your voice is breaking links. So, yeah, I mean, in short, Emily. Yes, that is provisioned in the system. You will get to know it.

 **Abhinav Srivastava-24:57**

We'll come to it later. So, yeah, let's create a patient record here. Yes. Okay, Done.

 **Abhinav Srivastava-25:15**

Okay. So this is how you add a new patient manually. Okay. Okay, let's move to the claim management part.

 **Abhinav Srivastava-25:32**

Yeah. So these are all the claims that are active in the system, you'll see and you can see them across various statuses and you can filter them. At the top there are filters. They can filter them according to the surgeons, according to the pairs, the claim statuses.

 **Abhinav Srivastava-25:51**

So if you want to look at all the pending claims for Dr. McHugh Neurosurgery and you can refilter them here. And yeah, so here you can find all the details. Lindsay, can you expand one claim to show how it looks like? Yeah, so when you go down.

 **Abhinav Srivastava-26:14**

So at the top you can see the status is in review because this is one pillar for the review and not completed yet.

 **Emily Clifford-26:21**

So.

 **Abhinav Srivastava-26:23**

But in the meantime, you can still have a look at what the claim looks like. Lynce, please scroll down. So, yeah, here are the basic patient details, then the clinical dates and narratives. Where are the CPD and ICD codes?

 **Lince Varghese-26:52**

So these are service lines that represent CPT codes.

 **Abhinav Srivastava-26:57**

Okay.

 **Lince Varghese-26:58**

Dated. And this is CPT code. First one, second one, third one. Like that and so on.

 **Abhinav Srivastava-27:06**

Yeah. So you see all the CPT and ICD codes mapped to that claim here. You can have a look at them.

 **Lince Varghese-27:13**

Okay.

Okay.

 **Emily Clifford**-27:16

If you needed to add one, Is that something you do here?

 **Abhinav Srivastava**-27:20

No. So then in that case, like we discussed, right, you have to then ask the doctor to do the dictation again or you know, add.

 **Emily Clifford**-27:30

What's that add service line right there. You can't add it right there.

 **Abhinav Srivastava**-27:35

That button doesn't do anything.

 **Lince Varghese**-27:38

No, not right now.

 **Abhinav Srivastava**-27:41

Yeah, because the. Every CPD and ICD codes that are mapped here has. Has to have a basis in a doctor's dictation, right? From what we.

 **Emily Clifford**-27:51

So, so say that happens, say they. They forgot one CPT code and the narrative next to it, where do they go? They go back out and re. Dictate the whole thing or just add to the dictation.

 **Lince Varghese**-28:05

Actually, they can add. The biller and supervisor has this provision to add a service line or the IC as well.

 **Emily Clifford**-28:14

So you can use.

 **Abhinav Srivastava**-28:17

Yeah, but we still need a doctor's dictation against that.

 **Emily Clifford**-28:22

Because if it is not, that makes sense. I'm just wondering, like, where do they go to do that? Like if they go back out, do they have to restart the dictation or is there a button that you can hit that then says add to current dictation?

 **Abhinav Srivastava**-28:40

Yes. So in there. So the doctors will also get to see all the claims against again, map to them and there they can, you know, create another dictation and do the. Do the additional thing or the missing Part there, which then goes back to the biller.

 **Emily Clifford**-28:59

Okay.

Yeah, so, okay, so this is the claims management part. So basically we have made it as similar as possible to the CMS 1500 format, but since this is in digital format, you might see some variance to the actual one. Let's go back to the cube. The claims queue links.

 **Abhinav Srivastava**-29:30

You can. Okay, claim management here. So, yeah, so this is how the whole claim queue will look like to the practice admin. Okay, next let's go to the coding templates.

 **Abhinav Srivastava**-29:47

So these are the templates that the doctor can use before dictation and to. To supplement their dictation or to just skip the whole dictation requirement altogether. So they can just select the template while before the dictation they can just select the template. And if they want to add another CPT or ICD codes to the existing template, they can do additional dictations and then the templates codes and the dictations codes will get merged together into a claim.

 **Abhinav Srivastava**-30:23

And these templates right now are managed by the practice admin. We have kept it with the practice admin since this is.

 **Emily Clifford**-30:35

I lost the screen.

 **Abhinav Srivastava**-30:37

Yeah, I think Lynn stopped. Okay, close the vpn. So that's why. Yeah, so where was I?

 **Abhinav Srivastava**-30:45

Yeah. So all the solid templates will be with the practice admin. They can create the templates from their screens and these will be visible to the doctors.

 **Emily Clifford**-30:59

Okay.

 **Abhinav Srivastava**-31:00

As per the initial, some requirements that you had shared quite, quite some time back, we have created some templates here and whatever other templates that remain to be created, we'll be creating it beforehand so that you have the basic set of templates with you. And in future, if you want to change any or create a new template, you can simply create it from here. So this is how the template will look like. You can just write the template name, which is mostly going to be the procedure name, I guess.

 **Emily Clifford**-31:32

Okay.

 **Abhinav Srivastava**-31:33

And then the CPT codes and modifiers to that.

 **Emily Clifford**-31:39

Okay.

And these are some notes that you want if you want to add. And these some ICD10 codes. Okay, just publish this. So once you publish it.

 **Abhinav Srivastava-31:57**

So this one, as you can see we created just now, it is now visible in the queue and same thing will also be visible to the doctors in their apps.

 **Emily Clifford-32:06**

And did you say the one? The templates that are currently in here, are they based on the 21 dictations we had given? Or is that something else? Or is this based on the cheat sheet codes?

 **Emily Clifford-32:19**

Like what, where are these pulled from?

 **Abhinav Srivastava-32:22**

These are from the cheat sheets.

 **Emily Clifford-32:25**

Okay, so then technically there should be a lot more because I think we gave like three pages of. Oh, okay, great. So we wouldn't, I don't think we'd be able, I don't think we would need to be adding anything new because everything that's on that cheat sheet, there's nothing new outside of that. So as long as you can confirm that all procedures mapped to all CPT codes on those, all of those cheat sheets, then we shouldn't need to be able to, we shouldn't need to be adding any more templates.

 **Emily Clifford-32:58**

Is that correct?

 **Abhinav Srivastava-32:59**

Yeah, that's the idea. For the demo purpose, we just created some sample set of templates here just so that you see something here. But yeah, towards the end we would be uploading all of that here. So you don't need to create anything new, but you might want to edit something.

 **Abhinav Srivastava-33:18**

So let's just show that edit flow once. Yeah, so in the existing template, when you open it, you'll see everything that has been mapped to it. And if you want to change anything, you can just change here and click on save changes. Okay.

 **Emily Clifford-33:34**

Yeah,.

 **Abhinav Srivastava-33:38**

Then here comes. Yeah, so this is the template part that is done. So then comes the administration part.

 **Emily Clifford-33:44**

Okay.

So here you can, you know, select some hospitals, you can add a new hospital, a new location where like the doctors might be going for a surgery. So you can add that hospital here. Since right now our connection with EPIC has not been established. So currently this is just for a record keeping purpose so that we have an idea of the exact geocode where the surgery or the procedure happened.

 **Abhinav Srivastava**-34:20

But later when we get registered in the EPIC marketplace, we can then establish some sort of connection to, you know, pull it, pull all of this data through some APIs from the back end. But for now we have this manual workaround.

 **Emily Clifford**-34:33

Okay,.

 **Abhinav Srivastava**-34:40

So quickly, a side question. In the FairHealth account credentials that you shared with us, Emily, we can only see rates linked to one geocode.

 **Emily Clifford**-34:56

That is what they, that's what they use. They use just rates linked to one geocode.

 **Abhinav Srivastava**-35:02

Okay. So yes, so just wanted to confirm. So because tomorrow if, if you add a new hospital which has a different geocode, then in that case. Yeah, then that, get that, that will become a challenge to match the rates.

 **Abhinav Srivastava**-35:16

So we are relying right now on just that everything is happening in that geo. That geo zip code.

 **Emily Clifford**-35:23

Yes.

 **Abhinav Srivastava**-35:23

So that all the rates reflect accurately. Okay, thanks for confirming that. So this is where you manage all the hospitals. Yeah, similarly, users.

 **Abhinav Srivastava**-35:38

So yeah, you can see all the administrative users here according to their roles, who are the practice Admins and who are the medical billers in your system? Who are the billing supervisors? And you can add rather invite billers or supervisors to this system from here. So this control is.

 **Abhinav Srivastava**-36:01

We have given it to the practice admin only because for the system practice admin is the owner of the whole administrative part. Right. Okay. So this is the user management and then here come the pairs.

 **Abhinav Srivastava**-36:20

So why isn't there anything in pairs links? Can you hear me? Is he on mute? Yeah, I can hear you.

So those pairs are all embedded pairs. If you want to add more pairs, since we have 30 more pairs to be added, this is a provision where we can add pairs as well.

 **Abhinav Srivastava**-37:04

Okay. So right now around six pairs we have already are already in the system and they are embedded. Yeah, but if you want, why don't.

 **Emily Clifford**-37:12

They show here though?

 **Abhinav Srivastava**-37:14

Yeah, so that is the question. I think we should show them here regardless. Links.

 **Lince Varghese**-37:21

Fine, fine.

 **Abhinav Srivastava**-37:21

We will, we will note down this point. Okay. Yeah, just a second. Logged out.

 **Abhinav Srivastava**-37:42

Yeah. So there, here you'll see all the active integrations to the system. Like for example the Google Cloud platform storage. This is where the whole backend of the IMBLE system is.

 **Abhinav Srivastava**-37:57

So you see the connectivity status to that and then on the top in red you can see Athena Center City. So right now the connection has broken. I guess that's why you're seeing disconnected, but we'll configure that anyways. So then you will also see this in green.

 **Emily Clifford**-38:16

What happens if as we're using this in practice, something like a connection breaks? Where is are we going to know? Like where's the alert? Are you going to be able to help us with that?

 **Emily Clifford**-38:28

Like where do we go for any sort of IT support once we go live?

 **Abhinav Srivastava**-38:35

Yeah, so for support we'll always be available, so that's not going to be an issue. But you'll also receive an alert. So you'll receive some in system alerts as well which will show the alerts section, the notification section. Yeah, so here you can see some alerts since we are doing something.

 **Abhinav Srivastava**-38:59

So that's why some backend system error is coming. So you'll come to know here immediately on your dashboard that if something has failed and let's say one transcription has failed. So at the bottom you can see that notification is also appearing that a transcription failed. So you will get to know about these critical alerts here in system as well.

I want to add one more thing that we will have further integration of EPIC and other things. So these things will be added up automatically here and can be configured later on.

 **Abhinav Srivastava**-39:37

Yeah, so as, I mean, we onboard more systems, integrate more systems and more databases. You see that list here? And you'll see the. You'll be able to track the status of each system, whether it's connected or not.

 **Abhinav Srivastava**-39:51

So this will be your view. Yeah. So let's go to AI system. So these are just some AI health monitoring things, whether the AI model is active or not and which models we are using.

 **Abhinav Srivastava**-40:09

So you can see the model names here and some technical stuff here.

 **Lince Varghese**-40:16

So this is an oncology configuration which actually embeds all the abbreviations that can be used in the dictation by a surgeon and it can be understood by the AI system so that it cannot miss anything during a dictation, during the. The transformation of the transcription to ICD or CPT codes.

 **Abhinav Srivastava**-40:41

Yeah. So this is just a supporting section. So scroll down links. Let's let us walk Emily through this.

 **Abhinav Srivastava**-40:48

So, so AI. So to not let AI get confused with some short, short forms that you might use like dbs. What does DBS mean? Now, AI can think of multiple things about dbs, but if it is here in the system that DBS is deep brain stimulation, then AI will not make that mistake and will always interpret DBS as a deep brain stimulation terminology.

 **Abhinav Srivastava**-41:16

So this is just a guiding section for AI. So you can track all of these acronyms that we have configured here. You can add more acronyms which you find are needed, or you can edit the existing description of an acronym from this dashboard itself. Okay, so this is just something to, you know, to guard the.

 **Abhinav Srivastava**-41:40

Like a guardrail for the AI just so that it does not hallucinate. Yeah.

 **Emily Clifford**-41:45

Okay.

 **Abhinav Srivastava**-41:48

And these are some system metrics. Some more system metrics. I. If these are required, we can keep here, or you can just simply hide them because these would be more required for the engineers.

Yeah, I don't think we would know what these mean.

 **Abhinav Srivastava-42:05**

Yeah, I thought so. So here is the audit log and compliance log. So the next two sections are more related to the HIPAA compliance requirements that we have. So here is the audit log.

 **Abhinav Srivastava-42:19**

So any action that happens on the app, a new profile is created, a new person is, is invited, a new record is synced. So any activity that needs to be tracked. You see a detailed log here that what happened, who did what and when. So you'll get that full map here.

 **Abhinav Srivastava-42:41**

And you can export all that data from that export CSV button at the top.

 **Prateek Kashyap-42:45**

Right.

 **Abhinav Srivastava-42:47**

So you might need it in future just to. Just to trace any administrative action that happened. Someone Data or something. So this will be helpful and also required under HIPAA requirements.

 **Lince Varghese-43:01**

Okay.

 **Abhinav Srivastava-43:02**

And we can also just quickly search through user name, whatever action happened. All of that is here. We'll, we just added some logs here. We'll be adding more events so that the full, full breadth of the logs is captured.

 **Abhinav Srivastava-43:20**

This is something that is in progress. The next is compliance as well. Go to compliance. Yeah.

 **Abhinav Srivastava-43:27**

So this, so it also, HIPAA would also require us to, you know, keep a track of the, the infrastructure, the kind of encryptions that we are using and you know, and some, I mean the health of the audit logs and everything. So this is for that, those purposes that tomorrow if someone asks you about the compliance that your system is following, you can simply refer to this screen and, and show them that this is how we are following them.

 **Emily Clifford-43:59**

Okay.

 **Abhinav Srivastava-44:02**

Yeah. So this is more or less. Yeah. And light mode and dark mode switch also is there.

 **Abhinav Srivastava-44:12**

So if you want to view it in dark mode or light mode, you can just simply click that button. So yeah, this is broadly the practice admin dashboard that we have.

Okay.

 **Emily Clifford**-44:26

Now can I ask you. It's all, it looks good, it's all self explanatory. I'm sure once we actually can, you know, Dr. McHugh can actually use it, there'll be real questions. My question for you guys, and this is, you know, maybe a VJ question.

 **Emily Clifford**-44:40

What I'm not clear on is what happens after the claim is submitted? Is there. Have you already started building out the back and forth between clearinghouses and all of that, or is that another scope of work? Is this a conversation I should be having with Vijay or are one of you aware of this already?

 **Abhinav Srivastava**-45:03

No. So I mean, as far as we know, I mean the claims had to be pushed to Athena. Right. But as we found that there are some limitations as to what we can write into the Athena system.

 **Abhinav Srivastava**-45:17

So we have created a workaround where you can download the claim form and manually upload it right in the portal. Right. For clearinghouse, we'll need to get back to you whether it was in this, in this phase of scope or in the next phase. We'll have to verify that once.

 **Emily Clifford**-45:35

Yeah, okay. It's probably in the next phase. Okay, I'll talk to Vijay about it. You don't need to worry about it.

 **Abhinav Srivastava**-45:43

Just give me two seconds. I'll probably verify it here itself. Yeah, so I, I see it. It is probably in the future scopes, but not right now.

 **Abhinav Srivastava**-46:13

But yeah. Yes, Vijay, I would be able to answer that better.

 **Emily Clifford**-46:18

Okay. Yeah, sounds good. Thanks.

 **Abhinav Srivastava**-46:21

So yeah, so yeah we understand that in the app Dr. Is facing some issues but apart from that the other flows and other features are independent of that and you can explore it here. So any other so you can just log in using these credentials which we shared here and you know, take it for a test drive yourself and any issues that you come across you can simply just drop an email to us and we will be able to support you with that. And we'll try to get back on the updated app flow before Friday itself so that the doctor can at least do some test dictations before he actually comes on the call with us. That would be the ideal scenario.

 **Abhinav Srivastava**-47:08

So we will try to get it up and running before that.

Okay.

 **Abhinav Srivastava**-47:12

So yeah, sounds great.

 **Emily Clifford**-47:14

Thank you all so much.

 **Abhinav Srivastava**-47:16

Yeah, thank you. And yeah, talk to you tomorrow.

 **Emily Clifford**-47:20

Okay. Bye bye.