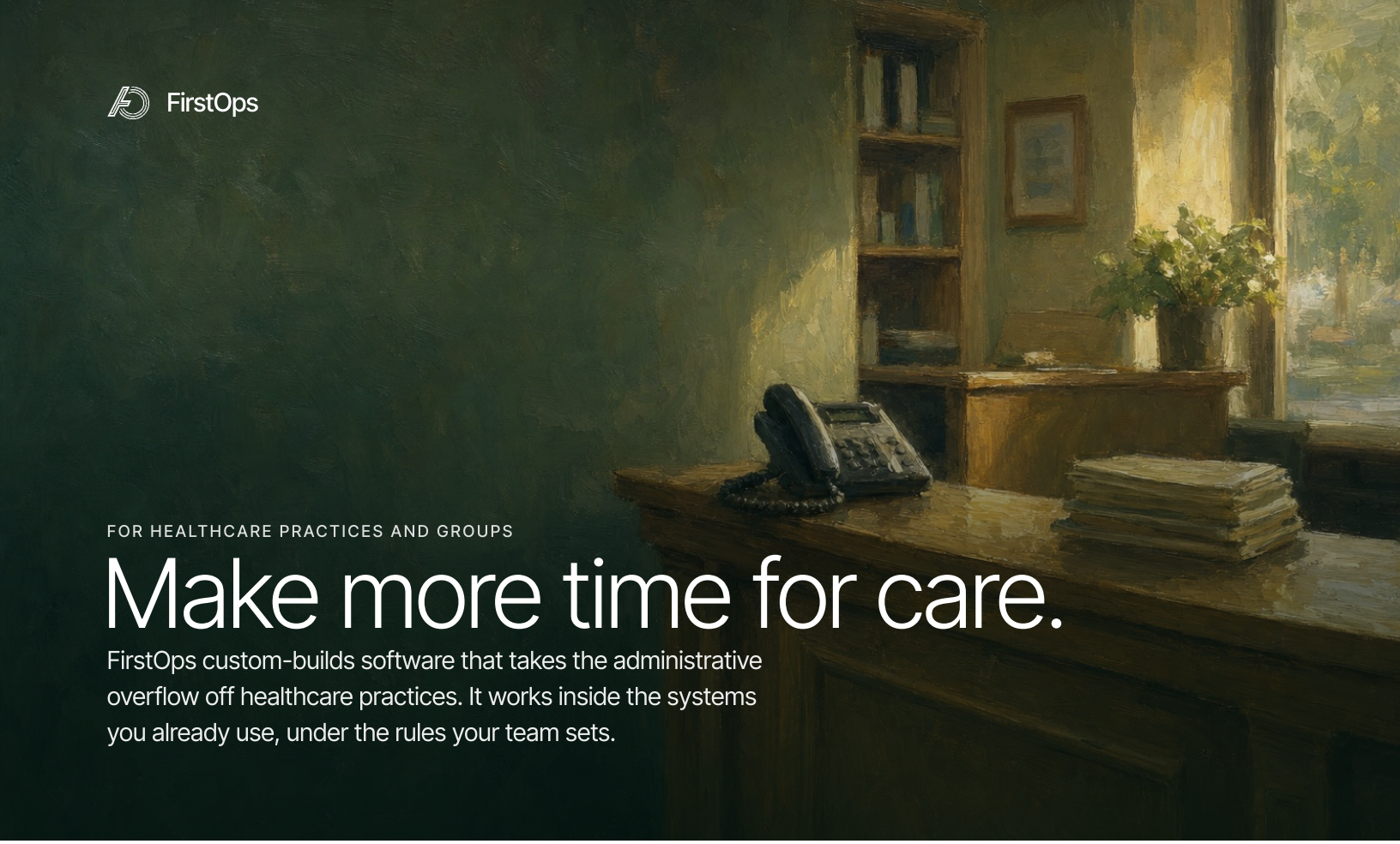


FirstOps

FOR HEALTHCARE PRACTICES AND GROUPS

Make more time for care.

FirstOps custom-builds software that takes the administrative overflow off healthcare practices. It works inside the systems you already use, under the rules your team sets.

The work it takes on: answering and returning calls, confirming appointments, checking coverage, billing, following up on claims, posting payments. It runs on the scheduling, billing and phone systems a practice already uses, and the practice's own staff set the rules it works within.

We are a small company and we work inside the practices we serve. Our software is in use in private practices today. This document describes what it does, in the front office and in the billing office.

FRONT OFFICE · PAGE 2

Answering and returning calls
Confirmations and cancellation recovery
Eligibility and prior authorization

BILLING OFFICE · PAGE 3

Billing
Accounts receivable
Payment posting

KNOWLEDGE

One record built from your schedule, claims and call logs. It shows what needs attention, at which location, and answers questions from your own data, with the source shown. Think of it as ChatGPT for your practice, private and secure.

AGENTS

Software built for your practice that does administrative work the way you do it. You set the rules once: what it handles on its own, what it brings to a person first. The rest runs without anyone touching it, and every action is on the record.

HOW WE WORK

We start by learning how your practice runs. Together we choose one measurable outcome, set it up on your systems, and run it alongside your team. Our fee is tied to that outcome, not to seats or licenses: we do well only when you do.

FRONT OFFICE

Front office

Three areas of front-desk work the software can take on. Each runs inside the schedule and phone system you already use, under your staff's supervision.

PHONE

Answering and returning calls

The agent answers when the front desk cannot and books or confirms appointments in your schedule. It calls back and books patients who reach you through any channel: phone, your website, Facebook, Instagram. You decide which calls are passed to a person.

> IN PRACTICE
>
> A request that arrives at night, by voicemail or on Instagram, is a booked appointment by morning. The front desk starts the day with a summary of each one.

SCHEDULE

Confirmations and cancellation recovery

The agent calls and texts patients with unconfirmed appointments for the next day and records who confirmed. When a slot opens up, it works your waitlist and recall list to fill it, and reports what it booked by location and provider.

> IN PRACTICE
>
> A manager can see each location's confirmed and open slots the evening before. A cancellation is offered to waiting patients the same day.

BEFORE THE VISIT

Eligibility and prior authorization

The agent checks coverage ahead of the visit and flags services that will not be paid as scheduled. It prepares prior-authorization requests with the supporting record attached, for your staff to review and send.

> IN PRACTICE
>
> Coverage problems are known before the patient arrives, and authorizations are requested before the visit rather than after.



The record and the agents work from the same data. When the record shows unconfirmed appointments for tomorrow, the confirmation agent calls from that list, and the front desk can see every call it made and every booking it changed.

BILLING OFFICE

Billing office

Three areas of billing work the software can take on, within the rules your team sets.

CLAIMS

Billing

The agent scrubs each claim, corrects what would be denied, and submits it through your practice management system or clearinghouse, under the rules your billing team sets.

> IN PRACTICE
>
> Claims go out clean and on time, and fewer come back.

FOLLOW-UP

Accounts receivable

You see what is outstanding, what is about to be written off, and why. The agent works it: calls payers for status, corrects and resubmits, files appeals, and brings the cases you have asked to see to a person first.

> IN PRACTICE
>
> Money that would have been written off is pursued, and your team can see what was recovered and what was not.

REMITTANCES

Payment posting

The agent reconciles each remittance against your claims and posts the payments in your practice management system. Anything short of what you are owed is flagged and sent to follow-up.

> IN PRACTICE
>
> Payments are posted the day they arrive. Underpayments are caught, not absorbed.

YOUR TEAM STAYS IN CHARGE

You set the rules once: what the agents handle on their own, and what they bring to a person first. Most work runs without anyone touching it.

Anything sent to a payer follows the approval you choose, down to a named person for the cases you care about.

Every call, booking, correction and submission is logged, so you can see what was done and why, and change the rules whenever you want.

Knowledge only reads your systems. A BAA is signed before we see a record.

If you would like to talk

Tell us the one thing you most want to improve. We will show you where it stands today, using your own records. There is nothing to sign up for and nothing to buy.

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