

# EMS Ops Hub

## Executive Revenue Deck

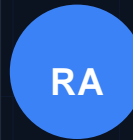
AI Revenue Intelligence for EMS & NEMT Operators

Detect billing risk before submission. Protect every claim, every mile, every modifier.

AVG. PRE-SUBMISSION REVENUE EXPOSURE DETECTED

# \$247,318 / qtr

Across modifiers · mileage · PCS · medical necessity · denials



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EMS Ops Hub

*"Your software processes claims. We protect revenue."*

# Executive Summary

EMS and NEMT operators lose 8–14% of net revenue silently — before a denial ever arrives. The losses come from missing modifiers, weak medical necessity language, uncaptured mileage, expired PCS forms, and underpaid claims that are never reconciled.

EMS Ops Hub introduces a [pre-submission revenue intelligence layer](#) that scores every claim from 0–100 before it leaves the system. Billing teams correct exposure before payers ever see the claim — protecting margin, compliance, and contractual reimbursement.

PRE-SUBMISSION RISK SCORE

**0 – 100**

Per claim, in real time

AVG. RECOVERED REVENUE

**+11.4%**

First 90 days, audited

DENIAL REDUCTION

**-38%**

Across pilot operators

AUDIT EXPOSURE

**↓ Material**

Documentation defensibility

# The Market Problem

EMS and NEMT billing systems were built to **process** claims — not to **protect** revenue.

The industry standard is reactive: errors surface only after a payer rejects a claim. By then, the appeal window is shrinking, documentation is stale, and revenue is already exposed.

- **Modifier Gaps**

The result is a recurring pattern of silent leakage:  
Origin/destination/ALS modifiers missing on submission.

- **Weak Medical Necessity**

Narratives that fail audit defensibility tests.

- **Uncaptured Mileage**

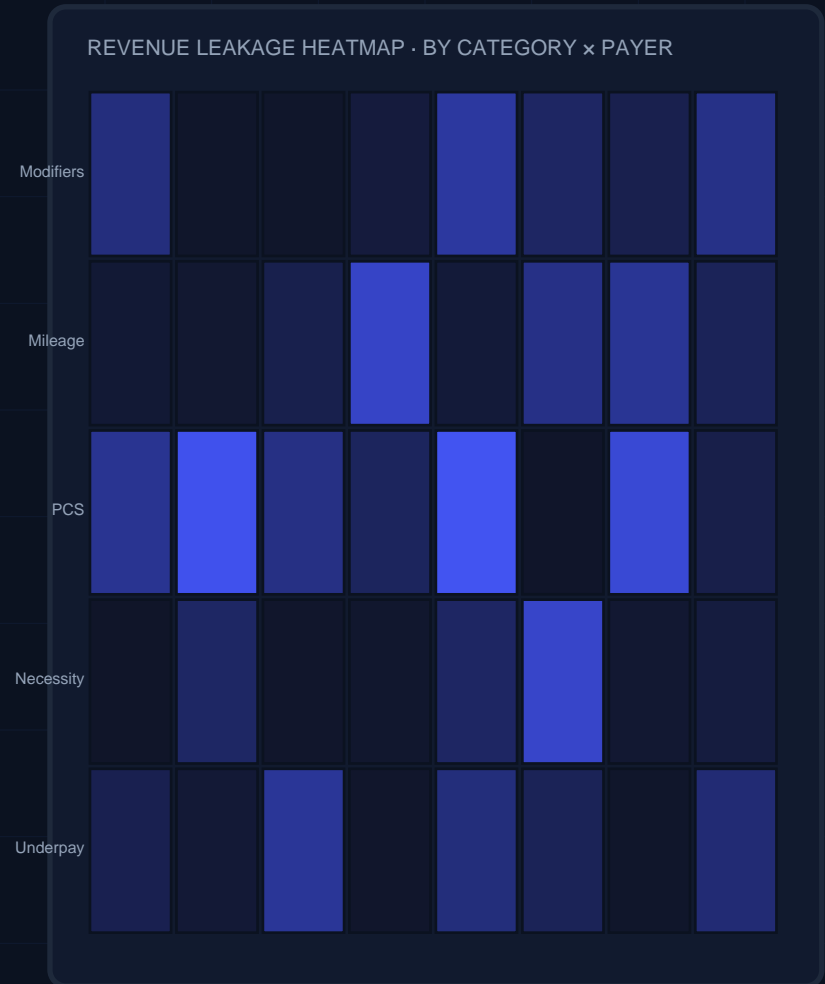
Routes underbilled vs. actual driven distance.

- **Expired PCS**

Physician Certification Statements unmonitored.

- **Silent Underpayment**

EOB variances vs. contracted rates never reconciled.



# Platform Overview

One intelligence layer. All trip types. EMS Ops Hub sits between your dispatch/ePCR and your billing system, scoring every claim before submission and continuously monitoring reimbursement accuracy after payment.

01

## Pre-Submission Risk Engine

Real-time 0–100 risk score per claim. Modifier, ICD, mileage, PCS, narrative checks.

02

## Real-Time Revenue Intelligence

Live billing-gap alerts, AI corrections, prioritized high-risk queue.

03

## Underpayment & Contract Protection

EOB variance, contract-rate monitoring, automated appeal triggers.

04

## Executive & Fleet Control

Revenue-per-truck, trip-type margin, multi-base rollup, 30-day audit mode.

# Section 1 — Pre-Submission Risk Engine

## Claim-Level Risk Score

Every claim receives a real-time financial risk score from 0–100 before submission.

Analyzes modifiers, ICD codes, mileage, documentation, and payer history.

Allows billing teams to correct errors before revenue is exposed.

## Denial Probability Prediction

AI models evaluate historical payer behavior and internal documentation trends.

Predicts the likelihood of denial before submission.

High-risk claims are automatically escalated for review.

## Modifier Gap Detection

Detects missing origin/destination modifiers automatically.

Compares transport type and facility classification to billing rules.

Prevents revenue loss caused by incomplete coding.

## ICD-10 Validation Engine

Flags invalid, mismatched, or incomplete diagnosis codes.

Ensures alignment between narrative documentation and coding.

Reduces audit exposure and medical necessity denials.

## ALS / BLS Billing Validation

Detects level-of-service mismatches in documentation vs. billing.

Prevents downcoding errors and overbilling compliance risks.

Protects reimbursement integrity.

## Mileage Revenue Detection

Analyzes recorded mileage against documented transport routes.

Identifies underbilled or miscalculated distance charges.

Protects recoverable mileage revenue.

# Section 1 — Pre-Submission Risk Engine (cont.)

## Dynamic Route Intelligence

Accounts for road closures, detours, and actual driven path.  
Compares documented vs. realistic route mileage.  
Prevents silent revenue leakage.

## Bariatric Classification Detection

Evaluates patient weight documentation for billing accuracy.  
Flags cases where bariatric criteria were not properly applied.  
Protects appropriate level-of-care reimbursement.

## Wait-Time Revenue Capture

Identifies documented standby or delayed transport scenarios.  
Calculates potential billable wait-time revenue.  
Prevents overlooked time-based charges.

## PCS Compliance Monitoring

Monitors expiration and presence of Physician Certification Statements.  
Flags missing or outdated PCS forms before submission.  
Reduces preventable denials.

## Signature Completeness Audit

Ensures crew, facility, and patient signatures are present.  
Prevents incomplete documentation submissions.  
Reduces compliance-based claim rejection.

## Section 2 — Real-Time Revenue Intelligence

### Live Billing Gap Alerts

Instant alerts when billing inconsistencies are detected.  
Displayed before claim submission.  
Enables immediate correction.

### AI Correction Recommendations

System provides specific correction suggestions.  
Example: "Add Modifier QL" or "Clarify medical necessity."  
Reduces guesswork for billing teams.

### High-Risk Claim Queue

Claims are prioritized by financial risk exposure.  
Billing teams focus on highest-impact corrections first.  
Improves workflow efficiency.

### Batch Claim Risk Scanning

Entire claim batches are analyzed simultaneously.  
Identifies patterns across submissions.  
Prevents systemic billing errors.

### Submission Readiness Indicator

Visual indicator confirms whether a claim is safe to submit.  
Prevents premature claim transmission.  
Standardizes quality control.

### Medical Necessity Language Detection

Analyzes narrative wording for compliance strength.  
Flags weak documentation language.  
Strengthens defensibility during audits.

## Section 2 — Real-Time Revenue Intelligence (cont.)

### Payer Rule Conflict Alerts

Detects when billing conflicts with payer-specific rules.  
Reduces contract-based denials.  
Improves reimbursement accuracy.

### Documentation Inconsistency Detection

Compares fields across the entire claim record.  
Flags conflicting entries (times, locations, service levels).  
Prevents red-flag audits.

### Staff Error Pattern Tracking

Identifies recurring documentation patterns by staff.  
Allows targeted training intervention.  
Improves long-term billing accuracy.

### Risk-Based Workflow Prioritization

Automatically organizes billing workflow by exposure level.  
Reduces manual sorting.  
Improves processing efficiency.

# Section 3 — Underpayment & Contract Protection

## Underpayment Detection Engine

Compares expected vs. actual reimbursement.  
Flags discrepancies below contracted rate.  
Protects contractual revenue.

## Contract Rate Monitoring

Stores payer-specific contracted rates.  
Validates each payment received.  
Prevents silent underpayment.

## EOB Variance Analysis

Parses explanation-of-benefit data.  
Detects unexplained payment reductions.  
Provides financial transparency.

## Payer Violation Alerts

Identifies patterns of underperformance by payer.  
Supports escalation and negotiation strategy.  
Improves leverage.

## Recovery Opportunity Identification

Pinpoints claims eligible for appeal or rebilling.  
Quantifies recoverable revenue.  
Improves cash flow.

## Appeals Trigger Automation

Automatically flags cases suitable for appeal.  
Reduces missed recovery opportunities.  
Increases appeal efficiency.

## Section 3 — Underpayment & Contract Protection (cont.)

### Revenue Leakage Heatmap

Visualizes where revenue is lost most frequently.  
Displays by payer, trip type, or location.  
Improves executive oversight.

### Margin Impact Calculator

Calculates financial impact of detected issues.  
Quantifies loss per claim and aggregate.  
Supports board-level decision-making.

### Recovery Timeline Tracker

Tracks appeal progress and reimbursement corrections.  
Measures recovery speed.  
Improves revenue cycle transparency.

### Payer Mix Profitability Analysis

Analyzes margin contribution by payer category.  
Supports strategic contracting decisions.  
Optimizes growth strategy.

## Section 4 — Executive & Fleet Control

### Fleet Revenue Dashboard

- Displays revenue per unit in real time.
- Identifies underperforming assets.
- Improves operational alignment.

### Revenue Per Truck Intelligence

- Tracks productivity and reimbursement per vehicle.
- Aligns billing performance with deployment.
- Improves ROI analysis.

### Trip-Type Profitability Analytics

- Compares dialysis, 911, discharge, and NEMT margins.
- Identifies highest-yield transport types.
- Supports scheduling optimization.

### Dialysis Optimization Detection

- Analyzes recurring dialysis routes for efficiency.
- Identifies revenue improvement opportunities.
- Improves contract performance.

### Route Profitability Insights

- Combines route data with reimbursement.
- Identifies inefficient transport patterns.
- Supports dispatch strategy.

### Location Rollup Reporting

- Aggregates revenue by base location.
- Supports multi-location operators.
- Enables executive comparison.

## Section 4 — Executive & Fleet Control (cont.)

### Executive Financial Overview

High-level summary of total exposure and recovery.  
Provides board-ready metrics.  
Supports strategic planning.

### Multi-Base Performance Tracking

Tracks performance differences across service areas.  
Identifies local operational gaps.  
Supports regional oversight.

### AI Revenue Projection Model

Forecasts future revenue exposure trends.  
Models growth and denial impact.  
Supports investor discussions.

### Compliance Risk Heatmaps

Displays risk distribution visually.  
Supports internal audit review.  
Reduces compliance surprises.

### Growth Opportunity Modeling

Identifies service expansion opportunities.  
Quantifies projected revenue impact.  
Supports scaling decisions.

### 30-Day Revenue Audit Mode

Full audit simulation across all claims.  
Measures improvement potential.  
Supports sales conversion.

## Section 4 — Executive & Fleet Control (cont.)

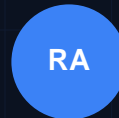
### **Enterprise Financial Reporting Automation**

Generates executive-ready reports automatically.  
Reduces manual financial compilation.  
Improves decision speed.

CLOSING

**Your EMS software  
processes claims.**

**EMS Ops Hub protects revenue.**



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