StreamlineHCI

Redefining Healthcare Industry

Healthcare Operations, Revenue and Growth—Streamlined.



End-to-end support that helps healthcare providers focus on patient care while the business behind care runs more efficiently.

StreamlineHCI combines medical billing and revenue cycle management, technology and automation, digital marketing, and virtual healthcare staffing within one coordinated service ecosystem.

Stronger revenue.
Smoother operations.
Better patient access.

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One Partner Across the Business of Healthcare.



Clinical excellence depends on operational systems that protect revenue, support patients and give providers time back.

StreamlineHCI supports healthcare organizations beyond a single department. From front-desk access and eligibility checks to claims, denials, credentialing, automation, virtual teams and digital growth, services are designed to work together around the complete practice journey.

Revenue Integrity

Manage the processes that turn documented care into timely, accurate reimbursement.

Operational Capacity

Extend administrative and clinical support capacity without unnecessary overhead.

Digital Enablement

Connect patient access, workflows, communication and growth through practical technology.

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Providers Should Not Have to Choose Between Patient Care and Business Performance.

Healthcare practices face rising administrative complexity at every stage of the patient and revenue journey.

Revenue

- Eligibility errors and authorization delays disrupt care and reimbursement.
- Coding or documentation gaps create avoidable claim risk.
- Unworked denials and aging receivables restrict cash flow.
- Credentialing delays postpone a provider's ability to bill payers.

Staffing

- Front-desk workload affects scheduling, access and patient experience.
- Disconnected vendors and systems reduce accountability and visibility.
- Staffing shortages push clinical teams toward administrative work.

Technology

- Disconnected vendors and systems reduce accountability and visibility.
- Manual tasks and duplicate data slow workflows and increase errors.
- Legacy or siloed technology limits insight and scalability.

Patient Growth

- Front-desk workload affects scheduling, access and patient experience.
- Weak digital presence makes sustainable patient acquisition harder.
- Inconsistent follow-up and communication reduce conversion.

The Impact: Lost time, delayed revenue, staff fatigue and a less consistent patient experience.

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Four Capabilities. One Coordinated Healthcare Partner.

StreamlineHCI is positioned to support both the financial health and operational growth of healthcare organizations.

1. Medical Billing & RCM

Full-cycle revenue support from eligibility and coding through payment, denials and reporting.

2. Technology & Automation

Websites, patient CRM, workflow automation, AI assistants and system integration.

Patient Care

3. Digital Marketing

Brand, search, paid media, social content and reputation strategies for patient growth.

4. Virtual Healthcare Staff

Trained remote professionals for front desk, billing, administration and documentation.

Integrated Value

Services can be engaged individually or coordinated around a broader transformation roadmap.

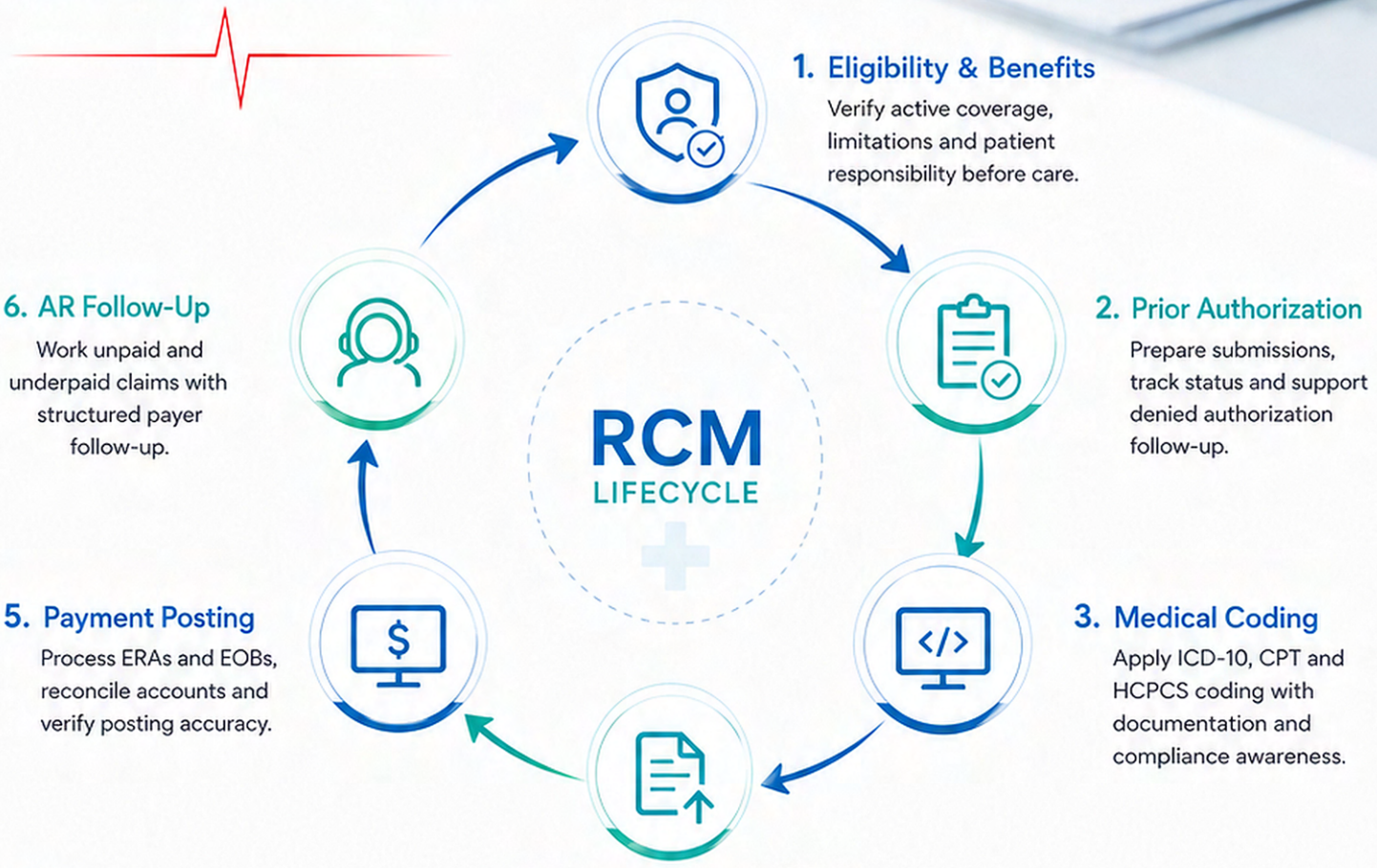
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Manage the Complete Revenue Cycle— Not Just Claim Submission.

StreamlineHCI supports the activities required to convert services rendered into accurate, timely and visible revenue.



1. Eligibility & Benefits

Verify active coverage, limitations and patient responsibility before care.

2. Prior Authorization

Prepare submissions, track status and support denied authorization follow-up.

3. Medical Coding

Apply ICD-10, CPT and HCPCS coding with documentation and compliance awareness.

4. Clean Claim Submission

Scrub, submit and monitor claims to reduce preventable rework.

5. Payment Posting

Process ERAs and EOBs, reconcile accounts and verify posting accuracy.

6. AR Follow-Up

Work unpaid and underpaid claims with structured payer follow-up.

The Impact: Faster collections, stronger cash flow and a healthier bottom line.

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Resolve Today's Denials. Prevent Tomorrow's.

Denial management is strongest when recovery activity is connected to root-cause improvement.



REVENUE DISCIPLINE

Every denial should produce either a recovery action, a prevention action or a documented closure reason.

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Move Providers from Application to Billable Participation.

Credentialing and payer enrollment require accurate information, persistent follow-up and proactive deadline management.



01 Provider Intake

Collect licenses, certifications, education, malpractice and practice information.

02 CAQH Management

Create, update and maintain provider profiles and attestations.

03 Payer Enrollment

Prepare and submit Medicare, Medicaid and commercial payer applications.

04 Follow-Up

Monitor status, respond to requests and escalate avoidable delays.

05 Revalidation

Manage re-credentialing, payer revalidation and expiring requirements.

06 Network Visibility

Track participation status across providers, payers and locations.

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Create a Better Experience Before the Appointment Begins.

Eligibility, scheduling and responsive communication shape both patient confidence and revenue quality.



1 Appointment Scheduling

Support multi-channel booking, rescheduling and calendar coordination.

2 Patient Reminders

Reduce preventable no-shows with approved outreach and confirmations.

3 Inbound Support

Answer common questions and route clinical or sensitive matters appropriately.

4 Eligibility Calls

Confirm coverage and help identify financial responsibility before service.

5 Referral Coordination

Support documents, status follow-up and communication across care pathways.

6 EHR / PMS Workflow

Work within approved systems and documented practice procedures.

PATIENT-CENTERED OPERATIONS

Clear, timely communication reduces friction for both patients and staff.

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More Patient Focus. Less Charting Burden.

Documentation support helps providers protect time, improve record completion and maintain cleaner downstream workflows.



Remote Scribe Documentation Support

1. Medical Scribes

Support real-time or near-real-time clinical documentation under provider direction.

2. Medical Transcription

Convert dictated content into structured, terminology-aware clinical notes.

3. EHR Data Entry

Enter approved information into the practice's designated record system.

4. Chart Completion

Help organize outstanding documentation and administrative follow-up.

5. Quality Review

Check completeness and consistency against defined practice standards.

6. Secure Handling

Use authorized workflows for sensitive healthcare information.

CLINICAL RESPONSIBILITY

Providers retain responsibility for reviewing and approving clinical documentation.

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Skilled Support Without the Traditional Overhead.



Extend practice capacity with remote professionals trained around healthcare workflows, service standards and defined roles.

Virtual Receptionists

Calls, routing, scheduling, check-in support and general inquiries.

Virtual Medical Assistants

Records, refills, lab follow-up, referrals and patient communication.

Billing Specialists

Claims, payment posting, denials, AR follow-up and software support.

Medical Scribes

Clinical documentation and chart-completion assistance.

Administrative Support

Data, documents, email, calendars and operational reporting.

Training & Oversight

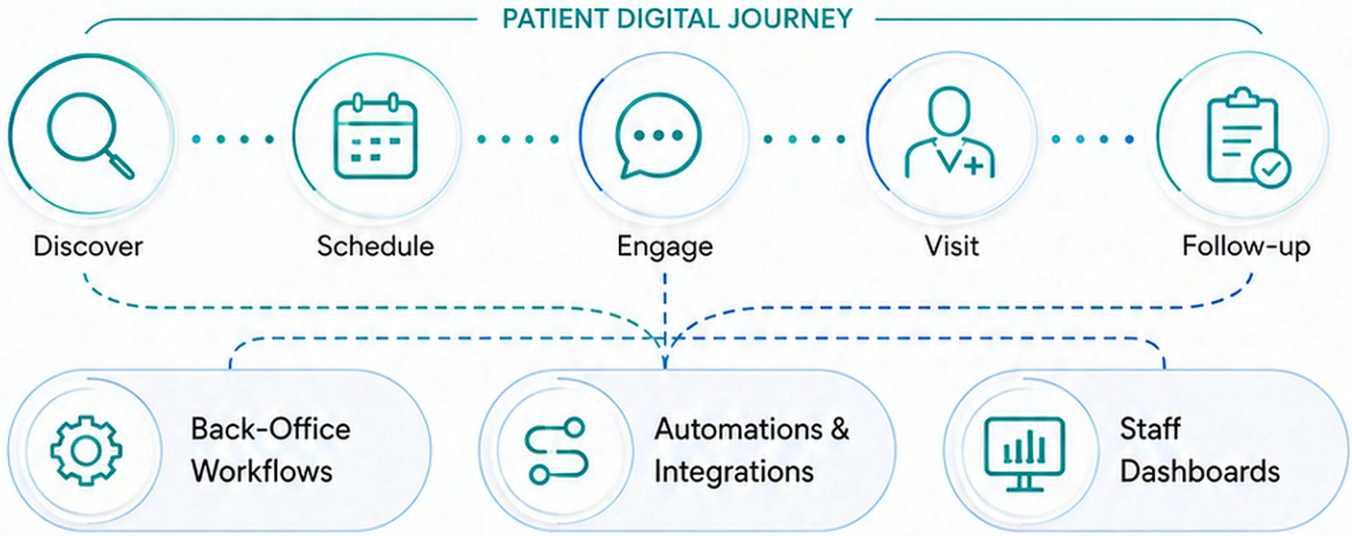
Onboarding, performance monitoring, quality assurance and development.

Dedicated support. Managed quality. Healthcare-focused workflows.

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Modernize the Practice Without Losing the Human Experience.

Technology should reduce friction, connect workflows and make care easier to access—not create another burden for the team.



1. Healthcare Websites

Responsive, patient-friendly digital experiences with appointment pathways.

2. Patient Management CRM

Organize inquiries, reminders, communication history and relationship workflows.

3. Practice Automation

Reduce repetitive steps across documents, tasks, billing and follow-up.

4. AI Chatbots & Assistants

Support FAQs, intake direction, scheduling and intelligent routing.

5. Secure Communications

Enable approved email, messaging and follow-up infrastructure.

6. Systems & Digital Assets

Manage domains, certificates, licenses, vendors and integrations.

IMPLEMENTATION PRINCIPLE

Start with the workflow problem, then select and configure the technology.

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Help the Right Patients Find, Trust and Choose Your Practice.

Healthcare marketing must combine visibility, credibility, education and responsible conversion pathways.

Discover
Patients find your practice through search, ads, referrals and recommendations.

Trust
Clear messaging, credible information and social proof build confidence.

Book
Simple, convenient booking options drive action and new patient visits.

Experience
Positive experiences, clear communication and quality care build loyalty.

Advocate
Happy patients leave reviews, refer others and become brand advocates.

1. Brand Development
Positioning, identity, messaging and cross-channel consistency.

2. Search Engine Optimization
Local, on-page, technical and content optimization.

3. Paid Media
Google and social advertising with performance monitoring.

4. Social Media
Educational content, community engagement and publishing.

5. Content Marketing
Blogs, patient resources, email and thought leadership.

6. Reputation Management
Review monitoring, feedback processes and response support.

RESPONSIBLE GROWTH
Marketing content should protect patient privacy and avoid unsupported clinical or outcome claims.

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Flexible Support Across Diverse Models of Care.

The website presents broad multi-specialty support, with workflows tailored to payer rules, documentation patterns and practice operations.


Primary and Internal Medicine


Mental & Behavioral Health


Cardiology and Vascular Care


Orthopedics and Pain Management


Dermatology and Plastic Surgery


Neurology, Psychiatry and Psychology


Pediatrics and OB/GYN


Gastroenterology and Pulmonology


Nephrology, Urology and Oncology


Physical, Occupational and Speech Therapy


Urgent Care, Telehealth and Hybrid Clinics


DME, Home Health, Hospice, SNF and ASC



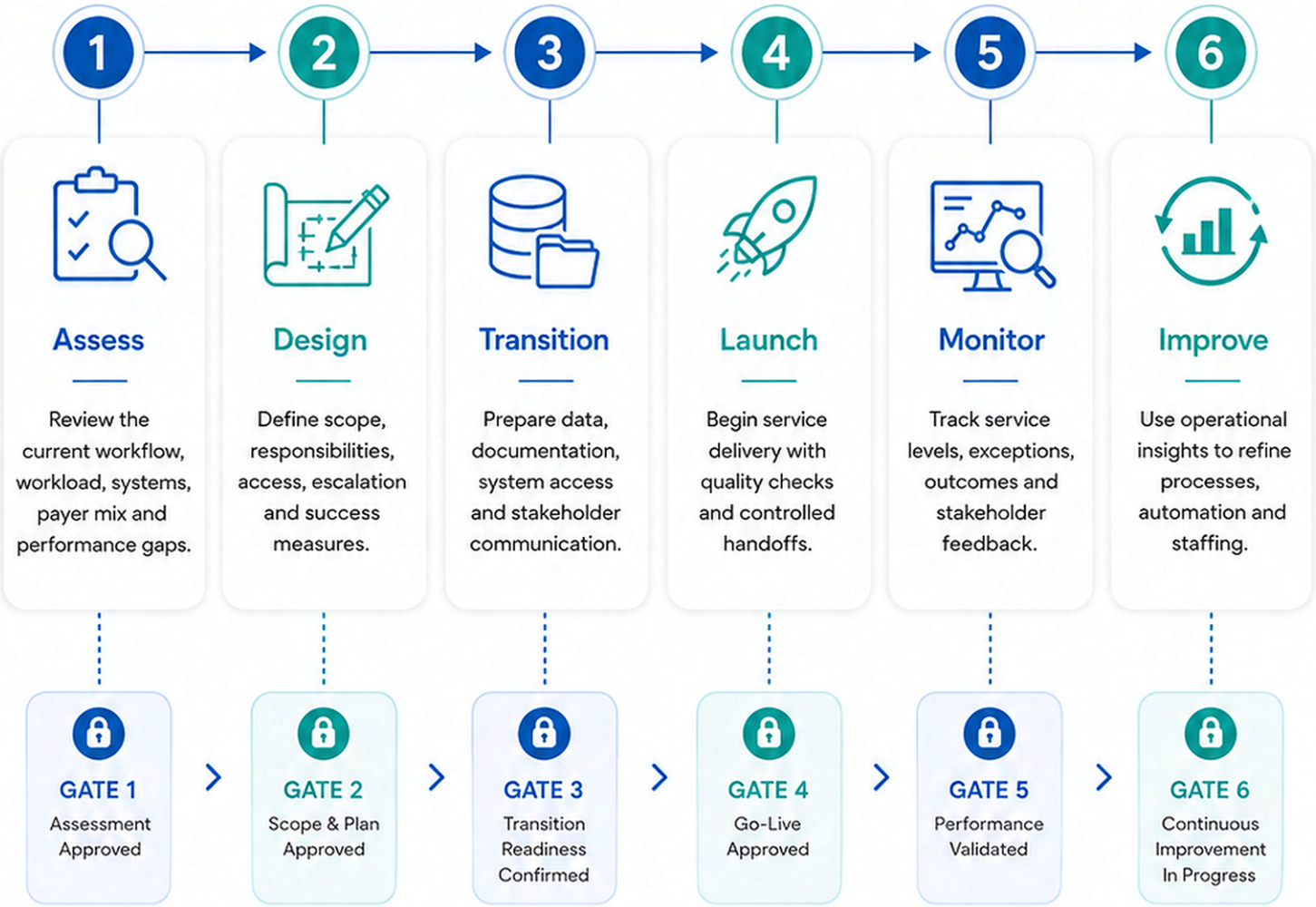
SCOPING REQUIREMENT

Specialty expertise, payer mix, systems and service requirements should be confirmed during discovery.

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A Structured Path from Discovery to Measurable Improvement.

Every engagement should begin with operating context, clear responsibilities and agreed measures of success.



Clear handoffs. Defined accountability. Measurable outcomes.
A continuous path to better performance.

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Protect Revenue. Recover Time. Strengthen the Patient Experience.

StreamlineHCI services are designed to improve the operating conditions that influence practice stability and growth.

1. Cleaner Revenue Workflows

Reduce preventable errors, rework and gaps across the billing lifecycle.

2. Stronger Cash-Flow Visibility

Create clearer views of claims, payments, denials and aging receivables.

3. More Provider Capacity

Shift eligible administrative and documentation work away from clinicians.

4. Better Patient Access

Improve responsiveness, scheduling and pre-visit communication.

5. Scalable Operations

Add trained capacity and repeatable workflows as the organization grows.

6. Connected Growth

Align digital visibility, patient acquisition and operational readiness.

SUGGESTED KPIS

Clean-claim rate • Days in AR • Denial rate • Collection rate • Authorization turnaround • No-show rate • Response time

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Operational Depth Across Revenue, Technology, Staffing and Growth.

StreamlineHCI offers a coordinated alternative to managing multiple disconnected service partners.

1



End-to-End Perspective

Understand how patient access, documentation, billing and growth affect one another.

2



Healthcare-Focused Teams

Align roles and workflows with the operational realities of healthcare practices.

3



Flexible Service Scope

Engage one service area or coordinate multiple capabilities.

4



Technology Enablement

Use automation and digital systems to reinforce—not replace—sound processes.

5



Quality & Visibility

Define responsibilities, monitoring and reporting around each engagement.

6



Backed by CrecenTech

Supported by broader technology, marketing, staffing and managed-service capabilities.



The power of **StreamlineHCI**. The backing of **CrecenTech**.

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Healthcare Support Built Around Privacy, Accountability and Appropriate Oversight.

Service design must protect sensitive information and keep clinical responsibility with authorized healthcare professionals.

1. HIPAA-Aligned Workflows

Use approved systems, access and procedures for protected health information.

2. Role-Based Access

Provide only the information and permissions required for assigned work.

3. Documented Processes

Define responsibilities, handoffs, escalation and quality checks.

4. Human Oversight

Keep providers and authorized practice leaders in control of clinical decisions.

5. Secure Communication

Use approved channels for documents, messages and patient information.

6. Verified Claims

Publish performance, certification and security claims only with supporting evidence.

DUE DILIGENCE

Formal compliance, security, data-location and contractual commitments should be confirmed for each engagement.

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Give Your Providers More Time for What Matters Most.

Start with the operational challenge creating the greatest impact on revenue, staff capacity or patient experience.



Schedule a Complimentary Discovery Consultation

Bring your current workflow, systems, team structure, payer mix and key performance concerns. **StreamlineHCI** will help identify the most practical starting point and define a service roadmap around your priorities.

StreamlineHCI is a subsidiary of CrecenTech.
Service scope, compliance responsibilities, performance expectations and commercial terms should be confirmed in the applicable agreement.

CONTACT

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