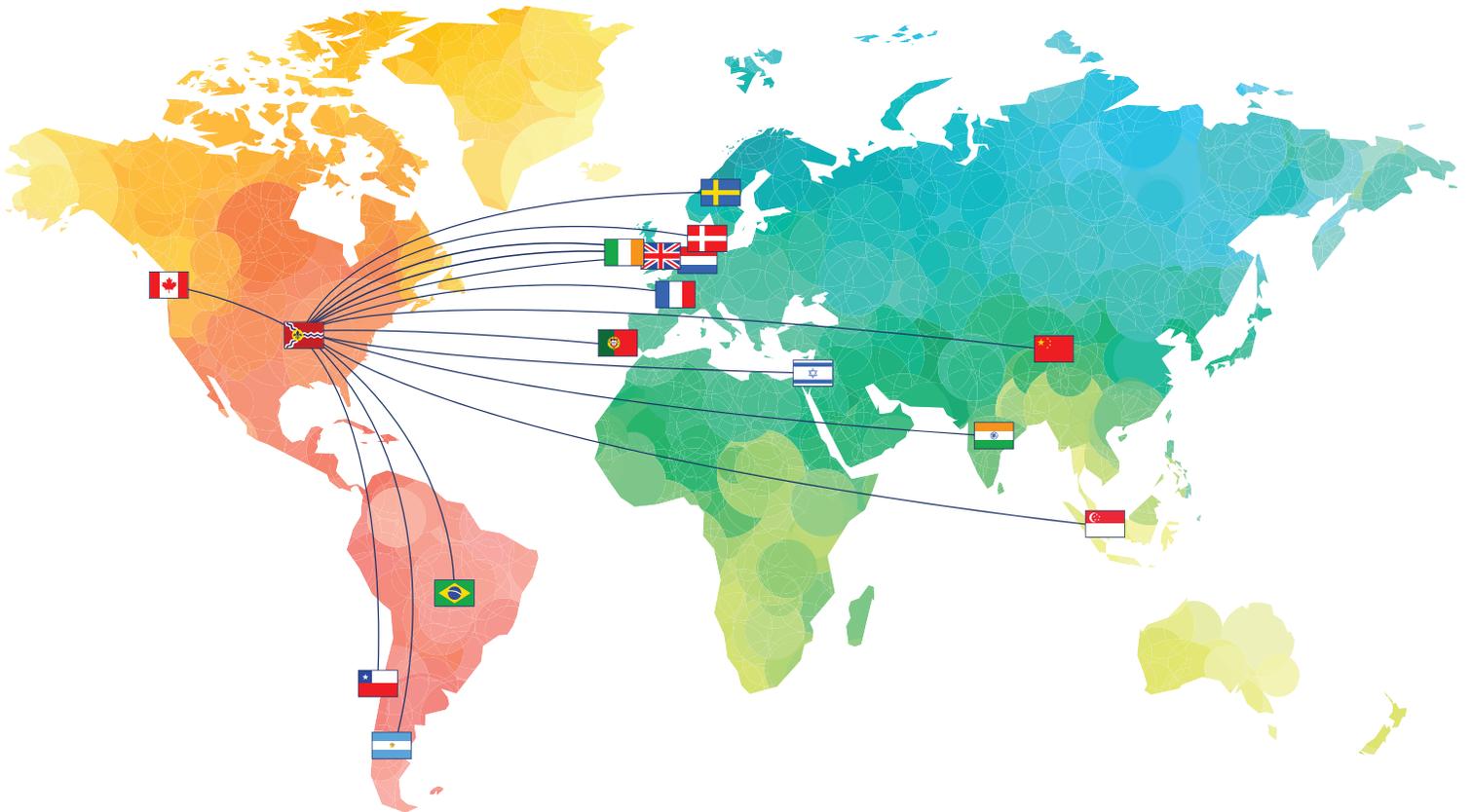




# GlobalSTL Health

INNOVATION SUMMIT



**November 17, 2021**

ST. LOUIS, MISSOURI, USA

Produced by:



**GLOBALSTL**  
AN INITIATIVE OF BIOSTL

# Welcome

Welcome to GlobalSTL's fifth annual Health Innovation Summit. We are pleased to host participants from around the globe in St. Louis – allowing health innovators, partner organizations and investors to experience our region's world-class, digital health innovation community firsthand.

GlobalSTL, launched in 2014, is an initiative of BioSTL to transform the St. Louis economy based on a foundation of innovation and global interconnectedness. Key to our success is identifying global innovation that brings strategic business value and impact to the St. Louis region's healthcare systems, corporations, research institutions, and ecosystem partners. GlobalSTL recruits high-growth international companies in St. Louis' industries of strength, including healthcare, agriculture, finance and cybersecurity.

GlobalSTL's goals are to establish three wins: (1) provide St. Louis companies access to cutting-edge technology to boost their competitive advantage; (2) secure prized U.S. customers and strategic partners for the international companies; and (3) leverage the first two wins to establish the U.S. headquarters of high growth international companies in St. Louis, thus enriching St. Louis' ecosystem with new jobs, new talent and innovation, and new economic activity.

This very deliberate approach has landed 19 new international companies in St. Louis. Since 2014, GlobalSTL has helped global companies reach **\$188 million in revenue and local investments, adding 250 new jobs to St. Louis.**

**Forty-one percent** of the startups invited to participate in the Summits have closed business deals with at least one of the strategic business partners they meet here.

In just five years, the GlobalSTL Health Innovation Summit has become the premier healthcare innovation business development event in the Midwest. **The 60 companies that have attended the four Summits prior to 2021 have raised more than \$3.1 billion in investment; 74% of which has been raised post-Summit.** GlobalSTL is proving an impressive value acceleration platform for top healthcare innovators.

The Board of Trustees of BioSTL, our leadership team and staff would like to thank you for your participation in the Summit and thank our sponsors for the support that made this event possible.

# Summit Agenda

WEDNESDAY, NOVEMBER 17, 2021

**7:30-8:30AM**

Breakfast at **Grand Salle**

**8:30-10:15AM**

Welcome and Panel Discussions at **Forest Park Ballroom**

Payer – Provider panel discussion with:

- Mark Bini, Chief Patient Experience Officer, Evernorth
- Ajay Pathak, Chief Strategic Ventures Officer, Mercy
- Krischa Winright, EVP, Senior Health Services, BCBSM Emerging Markets

Investor panel discussion with:

- Matt Hermann, Senior Managing Director, Ascension Ventures
- Lee Shapiro, Managing Partner, 7WireVentures
- Craig Cimini, Managing Director, Cigna Ventures
- Sam Brasch, Co-Founder, Convey Capital and Former Sr. MD, Kaiser Permanente Ventures

**10:15-10:30AM**

Break at **Grande Salle**

**10:30AM – 12:30PM**

Digital Health Company Pitches at **Forest Park Ballroom**

*Format: Each of the 15 companies will deliver a six-minute pitch. We will take a 10-minute break at approximately 11:30am.*

**12:30-1:30PM**

Lunch at **Grande Salle, with additional seating on lower level**

**1:30-2:00PM**

Keynote at **Forest Park Ballroom**

Carter Dredge, Senior Vice President & Lead Futurist, SSM Health

**2:00-2:15PM**

Break and transition to first 1:1 meeting

**2:15PM-5:15PM**

Curated 1:1 meetings between the digital health companies and regional healthcare organizations.

*Format: Nine rounds of meetings will be held. Each meeting is 20 minutes. Location: Grande Salle, Parlor I, Parlor II, Pavilion I, Pavilion II*

**Round 1:** 2:15-2:35pm

**Round 2:** 2:35-2:55pm

**Round 3:** 2:55-3:15pm

**Round 4:** 3:15-3:35pm

**Round 5:** 3:35-3:55pm

**Round 6:** 3:55-4:15pm

**Round 7:** 4:15-4:35pm

**Round 8:** 4:35-4:55pm

**Round 9:** 4:55-5:15pm

*Refreshments are available in Grand Salle (main level) and Pavilion (lower level) pre-function areas.*

*Casual networking seating is available in Pavilion (lower level) pre-function area.*

**5:00-7:00PM**

Networking Reception at **Forest Park Ballroom**

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## CONFERENCE WIFI CONNECTION:

**Network:** LeMeridien\_Conference

**Password:** GHIS2021



# Keynote Speaker



## **CARTER DREDGE**

*Lead Futurist, SSM Health*

Carter Dredge is Lead Futurist of SSM Health, a Catholic not-for-profit health system serving communities across the Midwest through a robust and fully integrated health care delivery system. He supports SSM Health's strategic objectives by identifying and developing innovative, emerging opportunities to accelerate large-scale health care transformation and ensure affordable access to high-quality health care.

Mr. Dredge currently serves on multiple boards, including Navitus Health Solutions, Lumicera Health Services, Civica Rx, and Graphite Health, and co-leads the Healthcare Utility Initiative – an SSM Health partnership with the University of Cambridge Judge Business School. Prior to joining SSM Health, he held several leadership roles at Intermountain Healthcare and Catholic Health Initiatives (now CommonSpirit Health).

# Panelists



## **SAM BRASCH**

*Co-Founder, Convey Capital and Former Sr. MD, Kaiser Permanente Ventures*

Sam is a Co-founder and Managing Director for Convey Capital, an emerging venture capital firm focused on the digital transformation of the healthcare system. Over Sam's 15 year career in venture, Sam has been an investor and board member for a number of the most impactful and successful companies in the space, including Ginger (Headspace Health), Health Catalyst (HCAT), iRhythm (IRTC), and Collective Medical (PointClickCare). Sam spent most of his first 10 years professionally in operating and management roles in healthcare technology companies, ranging from early stage startups to multinational corporations. Since that time, Sam has been a leading venture investor in the healthcare space, most recently as the head of the venture program at Kaiser Permanente.



## **MARK BINI**

*Chief Patient Experience Officer, Evernorth*

Mark Bini is the Vice President of Innovation and Member Experience at Express Scripts. Since 2008, Mark has been a key contributor to the advancement of Express Scripts' solution portfolio. Over this time, he has worked with other thought leaders to design and employ an industry-leading, behavior-centric approach to innovation that places clients and members in the "front seat" of product development. Mark is also responsible for Express Scripts' suite of digital therapeutic solutions that includes remote monitoring solutions for diabetes, asthma, and medication non-adherence. Mark's approach to innovation and the solutions that have spawned from it have played a key role in Express Scripts being named to Forbes' World's Most Innovative Companies.



## **CRAIG CIMINI**

*Managing Director, Cigna Ventures*

Craig is responsible for driving business growth via inorganic means. This includes the sourcing and execution of minority investments, joint ventures, and strategic partnerships.

In his current role, Craig leads the investment strategy for Cigna Ventures, Cigna's corporate venture capital fund, which deeply partners with entrepreneurs that are unlocking new growth possibilities in health care. The fund operates to further accelerate Cigna's mission to make healthcare more affordable, predictable, and simple while continuously incubating transformative innovation across three strategic areas: digital health/consumer experience, insights and analytics, as well as care delivery/enablement.



## MATT HERMANN

*Senior Director, Ascension Ventures*

Matt Hermann actively leads Ascension Venture's overall investing efforts. Matt has held board member or observer roles at several AV portfolio companies. Before joining AV in 2001, he served as vice president with Atlantic Medical, a New York-based venture capital management company focused on early- to mid-stage healthcare services and information technology investments. Prior to that, Matt served in financial management roles at two publicly traded healthcare companies, Nutrition 21, Inc. and Regeneron Pharmaceuticals, Inc., and worked at J.P. Morgan Chase & Co. and PricewaterhouseCoopers in New York City. He holds a BS in Engineering from Tufts University, and an MBA in Finance from New York University, Leonard N. Stern Graduate School of Business. In his free time, Matt enjoys participating in tennis, spending time with his family, and eating at restaurants with amazing food at reasonable prices.



## AJAY PATHAK

*Chief Strategic Ventures Officer, Mercy*

Ajay Pathak is Mercy's Chief Strategic Ventures Officer, leading the strategic planning for the health system's overall growth platforms. In this role, he is accountable for Mercy's ambulatory footprint, retail channels such as ambulatory surgery, imaging, and urgent cares, along with the system's strategic partnerships including its joint ventures. Prior to joining Mercy, Ajay worked for OSF HealthCare in a variety of leadership roles, including the President and CEO of OSF Saint Anthony's and the system's Chief Integration Officer. Leading up to his time in health system leadership, Ajay spent time in healthcare finance and strategic advisory with Lehman Brothers, Navigant Consulting, and the Advisory Board. Ajay earned his Bachelor's of Science (BS) in Biology and Sociology with an emphasis in Health Care from Union College and a Certificate Master's in Public Health (MPH) from Harvard School of Public Health, as well as a Master's in Business Administration (MBA) with a concentration in Finance from Georgetown University. He serves on numerous boards including the American Cancer Society (ACS) and New City School Board of Trustees.



## LEE SHAPIRO

*Managing Partner, 7WireVentures*

Lee is managing partner at 7WireVentures, a Chicago-based investment firm co-founded. He also served as Chief Financial Officer of Livongo Health. He serves on the public boards of Senior Connect and Clover Health. He is also active with and serves on the board of many of the 7wire portfolio companies. Lee led Livongo's 2019 IPO, successful secondary offering, \$550M convertible debt offering and entered into a merger agreement with Teladoc for \$18.5B at the highest valuation of any healthcare technology deal.

Lee served as president of Allscripts from 2001 through 2012. Based on his industry experience, he is a frequent speaker at industry conferences and a published contributor to the Forbes Business Council. Lee has been a member of the National Board of Directors of the American Heart Association for a number of years and is currently its treasurer. Lee earned his JD degree from The University of Chicago Law School and a BS in Accounting from The University of Illinois Urbana-Champaign.



## KRISCHA WINRIGHT

*Executive Vice President, BCBSM Emerging Markets*

Krischa Winright holds the role of Executive Vice President of Senior Health Services, an Emergent Holdings division of Blue Cross Blue Shield of Michigan. In this role, Krischa holds the accountability for the performance of the Medicare business unit for BCBSM, the 7th largest Medicare Advantage health plan in the nation. Krischa has a passion for innovation targeted at keeping healthcare affordable for seniors while continually improving quality.

She has an extensive background with over 25 years of healthcare business and technology leadership, including experience in Medicare Advantage and driving growth. Prior to joining BCBSM in 2017, Krischa served for 18 years in a variety of leadership positions including CIO and CMO with Priority Health as well as led all consumer digital solutions for the Spectrum Health enterprise. She is a married mother of three and a long-time Michigan Resident.

# Summit Moderator



## VIJAY CHAUHAN

*GlobalSTL Lead, BioSTL*

Vijay Chauhan is an experienced corporate business development executive and a startup CEO of multiple companies in the Life Sciences space. He was CEO of companies in the Consumer Healthcare, Ag/Renewable Energy and Cancer Diagnostics space.

Vijay leads BioSTL's initiative, GlobalSTL ([www.globalstl.org](http://www.globalstl.org)) to attract companies from more than 10 international countries including Israel, Ireland, Netherlands, France, etc. to St. Louis that can deliver competitive advantage to St. Louis corporations, leading research institutions and investors. GlobalSTL's mission is to be a navigator to St. Louis' world-class corporate and innovation ecosystem and to deliver strategic partners to drive business growth in North America for the international companies it recruits to St. Louis. GlobalSTL is sourcing innovation in the Agri Tech, Digital Health, Financial Tech, Cybersecurity and Industrial Technologies space.

Prior to this role, Vijay was Senior Entrepreneur in Residence (EIR) at the BioGenerator, the investment arm of BioSTL, and the St. Louis region's premier venture development organization for Life Science startups. As an EIR at BioGenerator, Vijay worked with 22 startups, raising capital and developing investable business plans for six companies.

Vijay has significant experience raising capital from angel, venture capital, private equity, strategic and governmental investors, developing business plans and forming strong management teams. Vijay worked at Monsanto in St. Louis as Vice President, General Manager, Nutrition and Consumer Sector, where as an entrepreneur he developed a new business in the areas of consumer health/functional foods. He also worked on multiple M&A transactions investing more than \$5 billion towards the implementation of Monsanto's Agriculture Biotech and Life Sciences strategy.

# GlobalSTL Strategy

GLOBALSTL IS ATTRACTING INNOVATIVE COMPANIES TO ST. LOUIS THROUGH A NEW APPROACH TO GROWING THE ST. LOUIS ECONOMY:



GLOBALSTL  
AN INITIATIVE OF BOSTL

# 2021 Strategic Partners



# 2021 Delegate Companies



ada

ADA



aiva

AIVA



ARRAY



BIOFOURMIS



CARE AI



CURRENT HEALTH



DARIO HEALTH



DAY TWO



HALO HEALTH



KYRUUS



LUMA



nQ MEDICAL



PACK HEALTH



SOCIALLY DETERMINED



VYNCA



Ada



ADA.COM | USA

## PITCH

Gold-standard symptom assessment, care navigation and handover solutions - underpinned by advanced AI and unparalleled medical quality.

There is no substitute for medical quality in healthcare, it's imperative to providing first-class care. Medical AI should be no different.

At Ada, we're here to support, not replace, your clinicians with our clinically accurate, comprehensive, and safe AI symptom assessment and care navigation platform. Our AI-powered enterprise solutions are used at scale by leading health systems, payers/insurers, employers, and life sciences, while our consumer app is trusted by 11 million+ users across 150 countries.

With our state-of-the-art AI and continually updated medical knowledge base we support your users from initial symptoms through their respective care options and connect them to the most appropriate care provider. Ada's assessment summary and suggested conditions is then visible to the attending clinician.

Partnerships are all about improving outcomes for your patients and delivering value to your organisation. Ada's integrated, intuitive and trustworthy digital front door solutions help reduce unnecessary care, avoid network leakage, connect care journeys and improve satisfaction.

## PROBLEM/OPPORTUNITY

Many patients do not understand their symptoms and likely conditions, and subsequently end up going to the wrong care, not going at the right time, or not going at all - all resulting in high costs, bad experiences and poorer outcomes.

Ada's platform addresses confusion faced by users by advising them whether to seek care and, if so, what type of care and urgency is most appropriate. We help redirect patients from unnecessary, high-priced healthcare services such as the ED and urgent care, and assist triage to more cost-effective modalities such as primary care, telehealth or other virtual care.

## SOLUTION/PRODUCT

Ada's AI platform serves as a digital front door on health partners' digital channels such as websites, portals and apps to help patients reliably assess their symptoms to identify potential conditions and appropriate care options. We take the user from initial symptoms through their respective care options, including self-care, a confirmed appointment with a provider or clinic, virtual, telehealth or asynchronous visit, as well as passing along a summary of their symptoms and suggested conditions to the attending clinician.

See how our enterprise AI works better here: <https://www.youtube.com/watch?v=yneID0pn2Bs> and a high-level overview of our platform at: <https://ada.com/enterprise/>. Also see a video overview and demo of our platform in use at Sutter Health at: <https://www.youtube.com/embed/e8vKelBhlcY>

## BUSINESS MODEL

We work with every partner to define their needs, priorities and budgets to produce a financial proposal based on their unique needs and value anticipated. Costs are impacted by the scope of the project, size of patient/user population, licensing model, and number of users or assessments. We welcome open discussions at an early stage.

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service Providers
- At-risk Providers
- Payers / Insurance Companies
- Benefit Managers

## MARKET

Ada is a global company serving healthcare partners on all continents. We work with health systems, payers, governments, and other digital health partners to more efficiently drive their patients to the appropriate care.

## EMR INTEGRATIONS

Yes, we have integrated directly with EHR platforms, including direct integration with Epic and to other services via SMART on FHIR or a direct API. It allows two-way data transfer, hands off the clinical assessment report (to clinician, call center, etc) and allows seamless scheduling for patient access via single-sign-on (SSO). We're flexible for client needs, for example, at Kaiser Permanente, we send assessment data as a payload via API for integration directly into Epic.

We have also successfully tested the integration with Cerner's EHR and others using our SMART on FHIR API.



### **HITRUST CERTIFIED**

Not at present, though we are willing to address this.

### **COMPETITIVE ADVANTAGE**

We pride ourselves on our medical quality, user experience and seamless integration. Clinicians choose Ada, and peer-reviewed published studies have shown that Ada has the industry's highest levels of clinical accuracy, safety and condition coverage - all resulting in better experiences and more value. Our 11 million users have made us the highest rated app with over 280,000 5 star reviews - more than any other competitor. With SDKs and API integrations, we become a trusted part of the user journey, to get more people to the right care and help deliver better outcomes, together.

We regularly test and calculate the accuracy of our condition and advice level suggestions using thousands of case sets and these show 90%+ accuracy. Our preference is to conduct independent scientific studies with academic institutions and publish these in peer-reviewed medical journals. See these at <http://ada.com/studies>.

Specifically, a paper in the BMJ Open found Ada's advice to be safe in 97% of cases, with 99% condition coverage and 70% accuracy for the top 3 suggestion fit compared to the competitor average of 38%.

### **TRACTION**

Ada powers the symptom assessment and care navigation platforms for several large health systems, including Sutter Health (3 million members) and Kaiser Permanente (12 million+ members) in the US; Santéclair in France (10 million users); Obeikan in Saudi Arabia (30 million+); Mediclinic International; and Axa OneHealth.

In addition, Ada has significant partnerships with several of the world's leading Life Sciences companies including Novartis, MSD, Bayer, and Pfizer. We also work with several governments to improve access to healthcare, such as Tanzania (aiming for 2 million users), South Africa (1.5 million), and Romania (2 million).

We are involved with the World Health Organization and the World Economic Forum to drive the creation and adoption of industry-adopted quality standards for AI in healthcare.

### **GO-TO-MARKET STRATEGY**

We've been working with Sutter Health as a co-development partner since we launched with them in April, 2019 to build the best platform for the US healthcare market and its unique needs. We also recently launched as Kaiser Permanente's national digital front door for all patient access and continue to grow rapidly.

### **CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Series B, March 2021, \$90M. Total of \$157M.

We are open to investor discussions.



# Aiva Health

AIVAHEALTH.COM | USA

## PITCH

Aiva is the voice OS for better health, using voice assistants like Amazon Alexa to connect patients and providers throughout the care journey. Smart speakers are one of the fastest-growing consumer technologies in history, and the Aiva platform offers three key components to make that technology safe and scalable for the enterprise healthcare market:

- Centralized control for secure, scalable management of devices and their software.
- Interoperability with existing health tech systems in areas like EHR, scheduling, patient experience, nurse call, telecom and building management.
- Software skills that increase efficiency and improve experience for both patients and clinicians.

Aiva's clients include Cedars-Sinai Medical Center, Houston Methodist Hospital, BayCare Health, Boston Children's Hospital and Yale New Haven Hospital. Investors include Google and Amazon.

## PROBLEM/OPPORTUNITY

Patient-provider communications haven't changed much in the past 150 years, hurting experience and outcomes for patients and undermining satisfaction for clinicians.

In the hospital, patients complain about isolation & boredom, a lack of control over their environment, slow clinician response times and inconsistent delivery of medication education. This leads to poor HCAHPS scores. Nurses are also frustrated by a constant stream of distractions, causing errors and preventing them from practicing at the top of their license, which contributes to nearly 20% leaving the profession in their first year.

Communication is also difficult post-discharge. Providers struggle to monitor the patient's condition, push educational content to them, interact with them remotely and generally keep them on their care plan. And many patients at home have a hard time with digital communication tools, which are often hard for ill or elderly people to use.

## SOLUTION/PRODUCT

Aiva makes communication and control much easier for patients and providers, directly addressing two of the primary asks from GlobalSTL's "Shopping List": consumer-centric healthcare experience and telehealth capabilities

In the hospital, we put enterprise-managed voice assistants like Alexa into patient rooms and connect them to provider mobile devices and other smart devices. When patients tell Aiva what they need, we understand and route the request to the most appropriate resource -- like medication to an RN, bathroom assistance to a CNA and food to the kitchen. Caregivers can respond instantly back into the room in their own voice. This greatly reduces response times and means nurses only get requests meant for their role. Aiva also enables hands-free calls via Alexa -- so patients can easily call family members and staff can make touchless calls to other staff. Aiva also powers Smart Rooms (voice control of TVs, lights, temperature) and allows providers to deliver medical education, discharge protocols and other info via voice.

At home, Aiva makes it much easier for patients to connect with their provider, adhere to their care plan and avoid unplanned readmission. They can get reminders about appointments and medication, report conditions and vitals, access FAQs and other educational content and conduct telehealth sessions with physicians -- all hands-free.

## BUSINESS MODEL

Aiva charges an annual SaaS fee tied to the size of the provider. There is a set-up fee, as well as a 3rd-party interface fees, although we waive the latter for 3rd-party systems we've already connected with.

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service Providers
- At-risk Providers
- Payers / Insurance Companies

## MARKET

Aiva targets several sectors of the healthcare industry, including hospitals, surgery centers, rehab facilities, skilled nursing, assisted living, insurers and in-home care. Our same core benefits apply across the care continuum -- improving communication with care teams and providing easier control over the environment, whether it's a hospital room, a senior living apartment or the home of a chronically ill patient.



## EMR INTEGRATIONS

Aiva voice-enables 30+ common enterprise platforms. A number of examples are listed below. In most cases, the interaction is via API -- theirs or ours -- but in some cases we use other means, such as HL7 or FHIR.

Building Management:

- Johnson Controls
- MetaSys (JCI) Siemens Desigo
- EHR / EMR: Cerner
- EPIC PointClickCare
- Messaging Application (Clinical Communication & Collaboration): Hillrom-Voalte
- Cerner Careaware Connect
- PatientSafe
- Vocera Microsoft Teams
- Middleware: Connexall
- Nurse Call System Rauland
- Hillrom
- Patient Engagement TV: GetWellNetwork
- Sonifi
- eVideon
- TigrTV Journey
- RTLS:Centrak (via Custom Interface Engine)
- Telephony: Cisco Avaya

## HITRUST CERTIFIED

No

## COMPETITIVE ADVANTAGE

Aiva is currently the only end-to-end voice platform deployed in U.S. hospitals. We're managing voice devices in thousands of U.S. hospital rooms. We feel there are 3 keys to our early lead among providers:

1. Focusing on nurse satisfaction as much as patient satisfaction. In addition to tracking patient experience via surveys and HCAHPS, Aiva regularly surveys nurses and works with nursing leadership to gauge impact and satisfaction.
2. Integrating with existing technology. Aiva already integrates with 30+ systems in areas like EHR, patient experience (TV) platforms, staff messaging, medication education and room controls like lighting, blinds and HVAC. We enable patients and staff to interact with these systems simply using their voice, easing and increasing their utilization.
3. Bringing enterprise-grade security and control to voice technology. Aiva's HIPAA-compliant solution enables providers to scale rapidly while still customizing settings for particular units or patient groups.

## TRACTION

Aiva is fortunate to work with more than 35 health care systems, including Cedars-Sinai Medical Center, Houston Methodist Hospital, Boston Children's Hospital, Yale New Haven Hospital and BayCare Health. Driven by our provider partners, we have steadily expanded our capabilities. For example, within hospitals we're extending voice assistance into areas such as nurse stations, nurse break rooms, operating rooms and pharmacy offices. Our revenue grew by 7x last year.

## GO-TO-MARKET STRATEGY

Aiva has emerged as a thought leader for voice technology in health care. We leverage this positioning in our go-to-market strategy, emphasizing education in our advertising, conference presence, webinars and email campaigns. We also educate the industry through channel partners, including Hillrom, AWS Marketplace and CDW.

## CAPITAL RAISED TO DATE / RAISING CURRENTLY?

Total raised \$5M

Yes, currently raising capital



# Array

ARRAYBC.COM | USA

## TRANSFORM ACCESS TO MODERN BEHAVIORAL CARE, FROM HOSPITAL TO HOME WITH ARRAY

Access to quality, timely behavioral health care is more important than ever. Unfortunately, communities across the nation face a **shortage of behavioral health providers**. In fact, approximately 120 million Americans live in a mental health professional shortage area and 96% of counties in the U.S. have an unmet need for psychiatric prescribers.

**Telepsychiatry can eliminate these access issues** by allowing patients to connect with qualified, remote behavioral health clinicians. With telepsychiatry, healthcare organizations can enjoy ready access to skilled, reliable, and experienced behavioral health clinicians and avoid the cost, time and logistical burden associated with recruiting and retaining these scarcely available specialists.

**Array Behavioral Care is the leading and largest telepsychiatry service provider in the country with a mission to transform access to quality, timely behavioral health care.**

Array Behavioral Care exclusively delivers live video psychiatry and therapy services from licensed behavioral professionals who we employ and closely manage to provide real, timely capacity and specialty expertise where it is needed most. Our measurement-based virtualized practice offers reliable capacity that augments existing networks and can complement other behavioral care programs or interventions in flexible ways, particularly when Array's AtHome, Scheduled and OnDemand offerings are combined.

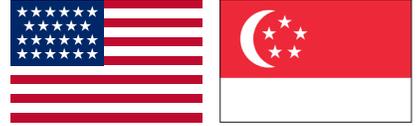
Array recognizes that access to clinical capacity is the foundation to a successful behavioral health offering. In 2020 alone, despite the nationwide shortage of psychiatrists, Array added more than 300 new telepsychiatry clinicians to our existing team to meet the rising need for care. We currently employ hundreds of psychiatry and behavioral health clinicians with specialties across the gamut and licensure in all 50 states, giving us the capacity and flexibility to scale with our healthcare partners as their patients' behavioral health needs grow and demand evolves.

Our key differentiators include:

- **DEPTH OF EXPERIENCE.** For more than 20 years, Array has partnered with hundreds of hospitals and health systems, community healthcare organizations and payers of all sizes to expand access to care and improve outcomes for underserved individuals, facilities, and communities.
- **CARE ACROSS THE CONTINUUM.** Array is uniquely positioned to offer telepsychiatry solutions across the continuum of care, with three flexible delivery models that provide patients and healthcare organizations with timely access to behavioral health care services regardless of acuity or setting.
  - Array's OnDemand Care model provides as-needed psychiatric assessments, care and consultation to hospital emergency departments, psychiatric crisis centers, inpatient units, and other healthcare organizations. Our OnDemand telepsychiatry services are generally one-time encounters focused on determining the appropriate disposition and plan for an individual in psychiatric crisis.
    - At least 10% of all ED patients present with a psychiatric illness. Unfortunately, behavioral health resources are scarce, and EDs nationwide report long delays in getting these patients properly assessed, treated, and dispositioned. As a result, ED length of stay for behavioral health patients is increasing to days instead of hours. This gridlock hinders ED throughput, increases length of stay for all patients, and increases left without being seen rates, resulting in poor clinical outcomes, diminished patient and staff satisfaction, and decreased financial performance.
    - Array's OnDemand Care model is designed to overcome the challenges of managing the variable influx of acute psychiatric patients in your ED. With 24/7 availability options and industry-leading response times, Array's telepsychiatrists are available to provide timely evaluations and treatment recommendations that are focused on the most appropriate and least restrictive disposition decisions.
  - Array's Scheduled Care model provides clinic-based scheduled telepsychiatry services, doc-to-doc consultations, behavioral health integration, and various in-home care options for patients and community organizations such as community mental health centers, Federally Qualified Health Centers, outpatient clinics, primary care sites, colleges and universities, and residential facilities.
    - With scheduled telepsychiatry, Array assigns a consistent clinician or small group of clinicians to serve a regular caseload during scheduled hours.
  - Array's AtHome Care model delivers behavioral health care directly to individuals in their homes or any private place through secure, convenient, online video calls. Array AtHome partners with payer organizations to meet the growing behavioral health needs of their members, improve clinical outcomes and reduce expensive ED visits and hospitalizations by giving members access to telepsychiatry and virtual therapy services through our large network of qualified clinicians.
    - Array AtHome makes it easier for patients to get the help they need, when and where it works for them, with licensed professional therapists and psychiatry providers. Using our secure, HIPAA-compliant platform, patients can connect with a clinician that's the right fit for them, schedule appointments and access sessions using a computer, smartphone or tablet.



- **TOP CLINICIANS.** Array clinicians are selected from a national pool of excellent candidates and go through a rigorous vetting and training process before beginning to practice telepsychiatry. Our robust clinician team comprises different levels of professionals and areas of expertise and is overseen by a group of clinical leaders and supported by licensing, credentialing, regulatory and compliance experts. Our clinical team is comprised of psychiatrists, child and adolescent psychiatrists, mid-level providers, and masters-level clinicians and serves nearly every population, including tribal communities, the working well, chronically and persistently mentally ill, as well as many others. They also see patients of all ages, across the lifespan. All recruiting and onboarding are done in-house, and the ability to recruit, engage, and retain excellent clinicians is the absolute core competency of our practice. Our experience and thought leadership in the telebehavioral care space and our emphasis on clinical quality and support attracts clinicians to Array.
- **QUALITY CARE.** Over the past two decades, Array has played a leading role in helping to shape the telepsychiatry industry, define the standard of care and advocate for improved regulations. Our behavioral health thought leaders and clinical experts are dedicated to providing high-quality, reliable and safe patient care and finding new and innovative ways to transform access and improve care delivery for underserved populations.



# Biofourmis



BIOFOURMIS.COM | USA

## OVERVIEW

Biofourmis is a global, tech-enabled, healthcare delivery company proud to power personalized, predictive care through an artificial intelligence-based advanced analytics platform, medical-grade wearables, and a licensed, clinical care team. Our world-class engineers, innovators, and clinical experts have developed the most robust care-at-home platform to support patients & providers. Our solutions span the entire care continuum: acute, post-acute, and complex chronic care. We deliver the right care to the right person at the right time, for better clinical outcomes and a lower cost of care.

## COMPANY

- Over 400 employees with headquarters in Boston, U.S. and additional offices in Europe and Asia
- \$145m of capital raised including \$100m Series C led by SoftBank Vision Fund
- Over 4.5m real world data points collected from patients (75% cardiometabolic, 25% oncology)
- Over 80 global patents granted
- Over 50 partnerships, including multi-year collaborations with leading pharmaceutical companies, health systems, and payers
- 15 regulatory authorizations including FDA and authorizations in 6 other countries

Our vision is to predict patient deterioration, before it happens, in order to change outcomes for the better. We're united by a singular purpose: to free chronic patients from the exhausting, stressful, and expensive cycle of clinical exacerbations and hospital readmissions. We aim to help patients and their clinical teams stay connected, confident, and one step ahead of their disease. We operate at the intersection of care delivery, software technology, and machine learning.

## SOLUTIONS

- An end-to-end, robust, technology platform designed to simplify care-at-home. We offer hospital at home; remote patient monitoring; and chronic disease management solutions that support patients and their clinicians across the care continuum of acute, post-acute, and complex chronic care
- Automation, Prediction and Optimization: Deep expertise in machine learning and data science in the form of clinically meaningful and regulatory-cleared clinical deterioration prediction models; smart alarms that reduce alarm burden and fatigue while improving operational efficiency; and software algorithms that automate medication optimization to improve quality of care and health outcomes
- Enhanced Experiences and Outcomes: A strong, committed vision for leveraging technology to deliver positive customer experiences and transformative care models that improve clinical outcomes while reducing total healthcare costs
- Solutions that also support pharma partners with clinical trials, market access studies, and commercialization of therapies. Biofourmis provides a platform for active/passive data capture using digital tools and novel patient-centric digital biomarkers that act as surrogates for endpoints.

## APPROACH

1. Biofourmis Care: Solution provider for care-at-home solutions, including service delivery from SaaS platform, clinical monitoring services, wearable sensors, and other wrap-around clinical, integration, and logistical services.
2. Biofourmis Therapeutics: Platform provider to pharma partners to support development of digital therapies, clinical trials, market access studies, and commercialization of therapies.

## CUSTOMERS

- Traditional Fee-for-Service Providers
- At-risk Providers
- Payers / Insurance Companies
- Pharmaceutical Companies

## INTEGRATIONS

Our Biovitals® platform integrates with EMRs via HL7 or FHIR. We have deep experience with integrating 3rd party technology. Our solutions incorporate existing, third-party technologies to enhance functionality and user experience. (e.g. two-way, patient to provider video conferencing)

To enable future integrations, we have SOPs for qualifying all 3rd party technologies and vendors (with consideration of technology, availability, reliability, privacy, security, and regulatory). Depending on the nature of the technology, the vendor's technology is evaluated by a management committee to ensure that the vendor and technology will meet the agreements and SLAs that Biofourmis enters into with its customers. Once selected, the technology and vendor are incorporated into Biofourmis' standard SOPs for monitoring and business continuity. Our software solutions currently integrate with over 50 3rd party wearables and peripherals.



## DIFFERENTIATORS

Our end-to-end solution and service is comprehensive, covering all components needed for successful delivery to a patient, provider, and health system. Our competitors offer components of a virtual care solution, however their solutions are typically missing elements such as: clinical support; AI for personalized care pathways; EHR integration; patient applications; and/or integrated continuous-monitoring wearables. Biofourmis offers a turnkey solution including an FDA-cleared Biovitals machine learning platform; use case specific medical-grade wearable sensors; fully-featured patient and clinician apps to ease and improve engagement; EHR integration; existing integrations with 3rd party wearables; and wrap-around clinical, technical, and logistical services.

The Biofourmis FDA-cleared Biovitals platform is best in class and utilizes machine learning to create a personalized baseline within hours of monitoring initiation. This baseline is continuously refined, utilizing smart alerts to predict clinical deterioration before they occur. Our solution also enhances operational efficiency and drives improvements in quality of care and health outcomes.

## CURRENT STATE

Biofourmis has successfully implemented numerous large-scale deployments managing thousands of patients across various regions. Our list of marquis, world-renowned customers includes the Mayo Clinic, Mass General Brigham, and Novartis, to name a few. At the peak of the COVID-19 pandemic, we supported many health organizations and national health departments, around the world, by enabling them to quickly scale using our resources and infrastructure to support over 70,000 patients without missing a beat.

Biofourmis is focused on providing exceptional customer service to each customer, from the pharmaceutical companies to academic researchers to integrated delivery networks to rural communities. Our customer success team has a singular goal - to ensure that every patient and every clinician has the support he or she needs to predict and prevent clinical deterioration and improve quality of life.

In the past year alone, we have grown our implementation, clinical support, technical support and customer success teams by 300% and are well on our way to growing by another 200% over the next year.



# Care AI

CARE.AI | USA

## PITCH

Our very personal and passionate mission is to power more human care by advancing AI monitoring and predictive technology that is enabled by the largest behavioral dataset for healthcare, Advanced Edge Sensors and our IDA Platform.

As an AI company, we are focused on using our transformative innovations to deliver Self-Aware Rooms®, Smart Facilities, and Remote Patient Monitoring to autonomously optimize quality and patient experience. At the same time, our AI solutions automate repetitive tasks, predict problems before they occur and allow providers to focus on the emotional support and personalized care that only they can provide.

care.ai edge sensors are deployed throughout the care space, providing real-time AI-powered inferences about conditions, events and activities. All relevant data is stored in the IDA Platform for further analysis and review. When a sensor infers that an intervention is needed, for example, an alert notification is automatically sent to designated team members who can provide the appropriate intervention.

## PROBLEM/OPPORTUNITY

Healthcare facilities in the U.S. are faced with staff shortages, burdensome regulation, and financial pressure that require them to find ways to do more with less. care.ai brings autonomous monitoring to healthcare facilities to allow providers and other staff to focus on the human care that only they can provide, using technology to infer and alert only as interventions are needed.

## SOLUTION/PRODUCT

IDA is our Intelligent Data Acquisition Platform, an AI-powered digital care team member whose sole purpose is to constantly monitor conditions inside your care environment. It's like having a human care team member at every entrance, and a sitter in every room, and IDA is continually learning and storing only the most relevant data. With the world's largest behavioral data set for healthcare, IDA can predict problems before they occur, look for trends that might impact quality and send alerts once detected.

## BUSINESS MODEL

Platform as a service

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service
- Providers At-risk Providers
- Payers / Insurance Companies

## MARKET

The total addressable market in the U.S. is extensive given that care.ai's IDA platform and edge sensors can be deployed for valuable use cases in any healthcare facility and setting. Hospitals, ambulatory clinics, and post-acute facilities can all reap benefits from the power of care.ai's ambient intelligent monitoring.

## EMR INTEGRATIONS

Yes, we have extensive experience integrating with EHRs, time & attendance systems, other HR-related systems, and so on. We can use whatever interface mechanisms are available for a given system, such as HL7, FHIR, proprietary system-specific APIs, etc.

## HITRUST CERTIFIED

No

## COMPETITIVE ADVANTAGE

care.ai's platform provides healthcare organizations the tools to address multiple clinical, operational and patient experience use cases, all from a single platform. care.ai Command Center views and IDA Mobile alerts allow the right users to view the right information at the right time. In an age of alert fatigue, providers and staff learn to trust IDA alerts over the cacophony of alerts from various point solutions that are focused only on single use cases.

## TRACTION

care.ai partners with top health systems across the country including, HCA, LifePoint, Kaiser Permanente, CommonSpirit, Houston Methodist, Tampa General, OSF and more.



The COVID-19 pandemic has raised industry awareness of the care.ai Smart Entry solution specifically, which provides infection-control measures such as contact-free entry screening and symptom self-attestation. But infection control is only one of the many potential use-case applications offered by the IDA Platform, which include:

- Fall Risk Detection & Prevention
- Pressure Ulcer Prevention
- Rounding Adherence
- Protocol Adherence
- Hand Hygiene Compliance
- PPE Utilization Compliance
- Contact-Free Check-In & Clock-In
- Symptom Self-Attestation
- Infection Track & Trace
- Vaccination Tracking
- BOLO Alerts & Security Screening
- Remote Patient Monitoring
- Virtual Visits
- Medication Compliance

#### **GO-TO-MARKET STRATEGY**

care.ai has strong presence in the U.S market to date and is actively working to extend its footprint of Smart Entry clients to ultimately become the most trusted operating system to power smart hospitals, clinics and other facilities.

#### **CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Yes, currently raising capital



# Current Health



CURRENTHEALTH.COM | UK

## PITCH

Current Health offers an enterprise care-at-home platform to enable healthcare organizations to deliver high-quality, patient-centric care at a lower cost.

## SOLUTION

Current Health provides a full end-to-end, simple and cohesive experience for patients and clinicians, fully integrated into the EMR, that enables health systems to deliver on new home-based care models.

Inside the home, Current Health can provide a fully managed kit that contains everything needed to get a patient quickly up and running. This can include providing connectivity, via our Home Hub, a fully configured tablet and pre-configured monitoring devices, that provides equitable access to care. Equally, Current Health can support full BYOD if patients prefer to use their own smartphone.

Our patient application, running either on our managed tablet or on the patient's own smartphone, allows symptom reporting, medication reminders, food diaries, video visits, reminders & nudges, consent & forms and review of educational content.

Current Health collects a configurable amount of data from the patient at home. For high-complexity and high-acuity patients, this can include our passive wearable device, worn on the upper arm. This provides wireless, continuous monitoring of patient vital signs (oxygen saturation, pulse rate, respiration rate, skin temperature, activity levels) with the same accuracy as an ICU monitor.

Current Health also integrates wirelessly with a wide range of best-in-class peripheral devices, to capture vitals such as blood pressure, weight, spirometry, EKG and glucose levels. As an example, Current Health and Dexcom have partnered to make continuous monitoring of glucose available through the Current Health platform.

Current Health assimilates all captured data, including symptoms and EMR data, into our risk prediction and stratification algorithms. Actionable insights, tailored to the population and individual patients, are then sent to the EMR, our standalone dashboard or the Current Health clinical command center. Our dashboard, available via web, iOS, and Android, provides healthcare teams with a single view of all monitored patients grouped by risk. Healthcare teams can leverage on-demand or scheduled video calling to assess the patient and intervene, all while keeping the patient at home.

## BUSINESS MODEL

Current Health sells directly to health systems to enable them to better manage care at home. In addition to our standard offering above, Current Health offers clinical monitoring and logistics to help health systems scale their remote care programs.

Our physician-led, 24/7 command center staffed by board certified physicians who practice internal medicine, hospital medicine and emergency medicine. They are supported by a team of APPs and RNs who are licensed in all 50 states. Our command center is configured depending on the specific population and clinical needs. This can include full operation 24/7/365 or service covering only certain shifts. Current Health providers do not carry patient panels. We support our clients and their patients only. Current Health does not bill payers for services provided, although clients may bill for those services. Our goal is to allow our clients' clinicians to practice at the top of their license, outsourcing clinical management and alarm supervision/triage as appropriate. Our clinical team practices evidence-based, state-of-the-art remote care medicine, leveraging our technology and our clients' clinical resources.

Additionally, Current Health can provide end-to-end logistics that manage the inventory, delivery, pickup, and cleaning of all monitoring components used by patients.

## EMR INTEGRATIONS

Current Health has an HL7 v2 interface but uses Redox for most integration. There are several areas of integration that allow for the import of patient related items from the EHR:

- Orders
- Clinical Context Information
- Observations/Symptoms
- Scheduling

## COMPETITIVE ADVANTAGE

Single platform to manage care at home - We provide a single platform that integrates with third-party applications and best-in-class peripheral devices to provide a single pane of glass to manage care inside the home. This allows us to tailor our program to meet the needs of multiple programs within an organization while allowing for a longitudinal view of patients.





Ability to care for high & low risk patients - Our platform can be tailored to all patients. We are uniquely able to care for high-acuity patients due to our FDA-cleared continuous monitoring device, but can extend our care to lower acuity populations, providing insight across the population.

Actionable data Insights - Our highly specific alarms separate the signal from the noise, identifying the patient who needs attention in the moment. Our clinical alarms can be tailored to the needs of an individual patient or population to remove alarm burden and ensure the proper action is taken at the right time.

Patient-centric design - We've designed both our product and processes to ensure patient adoption and adherence. We can provide fully pre-configured kits as well as cellular connectivity if needed. We work closely with our partners to design care plans that are clinically and socially appropriate to our patients, which has resulted in over 90% patient adherence across customers.

### **TRACTION**

Today, Current Health manages over 11,000 virtual patient beds around the world. In 2020, Current Health grew new customers by 400% to include leading health systems like Geisinger, Mount Sinai, Baptist Health, and major pharmaceutical companies and research orgs, such as AstraZeneca and Mayo Clinic. In 2020, the company saw its revenue grow by 3,000% and employee count grow by 100%. In early 2021, Current Health raised \$43M in its Series B funding, led by investors from top healthcare and pharma venture capital firms, such as NorthPond Ventures and LRV Health, as well as a leading hospital system, OSF Innovation. In November 2021, Current Health was acquired by Best Buy, strengthening its ability to offer the last-mile logistics and support that the Best Buy Health brand is known for.

Key areas of success for our partners include significant cost savings. For example, customers have seen 25% reduction in readmissions, 1-2 day reduction in length of stay, and 87% reduction in ER visits. Additionally, Current Health sees 90%+ patient activation and adherence and in patient surveys saw 85% of patients extremely likely to recommend.





# Dario Health

DARIOHEALTH.COM | ISRAEL/USA

## DARIOHEALTH: NEXT GENERATION DIGITAL THERAPEUTIC SOLUTIONS

DarioHealth: Next Generation Digital Therapeutic Solutions

Using proven behavioral science techniques and advanced AI technology, Dario's multi-condition single platform approach benefits individuals and organizations (Providers, Health Systems, Health Plans and Employers) through a single coordinated and fully integrated program.

## CHANGING BEHAVIORS TO IMPROVE COSTLY CHRONIC HEALTH NEEDS

The most common chronic conditions make up most of the spend and share a single underlying cause—poor health behaviors. First-generation digital health solutions have struggled to engage people at scale, because lasting behavior change is hard. Dario's next-generation digital therapeutics address behavior change by hyper-personalizing the experience for each user. Our AI-driven personalization engine learns the unique wants and needs of each person and adapts their journeys. Our AI-driven personalization engine learns the unique wants and needs of each person and adapts their journeys across 6 key domains: timing, tone, content, intervention, frequency, and channel

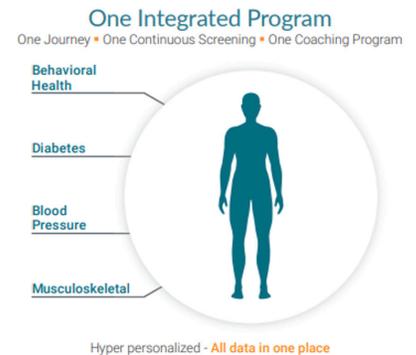
## THE DARIO DIFFERENCE: SCALABLE, MEANINGFUL ENGAGEMENT

DarioHealth started as a direct-to-consumer business in 2011 and achieved success by focusing on user experience excellence. Dario's unique user-centric approach to product design and engagement creates an unparalleled experience that is highly rated by users and delivers sustainable results.

Most digital health solutions see a 43% drop-off after the first two months, but Dario enjoys an 80% retention rate after the first year and boasts a 4.9 average star rating among hundreds of thousands of users.

## A SINGLE, INTEGRATED PLATFORM ADDRESSES THE MOST COMMON HEALTH NEEDS

All of Dario's solutions include a digital application powered by an AI Personalization Engine, Health Partner Coaching, Clinical Specialist Support, and, where applicable, an integrated tracking device that transmits health data via smartphone.



## CLINICALLY PROVEN TO DELIVER RESULTS

Dario solutions have been validated across more than 26 clinical studies. Some of the key findings:

- Diabetes and Pre-Diabetes: 1.4% A1C reduction after 12 months
- High Blood Pressure: 38% reduction in blood pressure by one stage
- Mental Health: 59% reduction in depression
- Pain and Injury: Up to 64% pain reduction

## IMPROVING CHRONIC CONDITIONS FROM AFAR WITH DARIO REMOTE PATIENT MONITORING

Dario's Remote Patient Monitoring solutions enable providers to maximize out-of-office patient management with highly engaging technologies that deliver real-time insights. Our technology improves efficiencies, enabling providers to manage patients and prioritize interventions as needed. Dario is designed to give providers the tools to understand and influence patient behavior between office visits. We put patient insights at your fingertips in real time so you can impact patient health when it matters most.

## PATIENT UTILIZATION DATA AT YOUR FINGERTIPS

DarioEngage™ - A dynamic, integrated web-based platform puts patient utilization data at your fingertips.

- **Health Status Tracking**
  - Glucose levels, carbs, activities, insulin dosing, weight, and more
  - Configurable intake forms and questionnaires
- **Patient Management**
  - Real-time data prioritizes interventions
  - Real-time alerts and patient activity tracking
  - Emergency notification and response capabilities
- **One-to-One Communication**
  - Multi-channel digital interaction: Chat, In-App Messages, Email, Text
  - Education content library



- **Easy to Deploy**

- Cloud-based SaaS solution
- Open APIs for EMR and Data Lake platform integration
- Minimum setup and configuration to launch

#### **PROVIDER BENEFITS**

- Real time data and utilization capture for quick access to patients' current health status
- Integrated billing process
- 4 applicable CPT codes through CMS and private payers offering Medicare Advantage
- Increase Practice Revenue

#### **USERS LOVE DARIOHEALTH**

- 80% Retention rate
- 77 Net Promoter score
- 4.9/ Stars App store rating

*"Due to my Dario, I have my diabetes completely under control according to my doctor. I don't know how I would keep my diabetes under control without my Dario!" – Amanda*

#### **LEARN MORE**

Clinical Outcomes: <https://www.dariohealth.com/clinical-research/>  
Diversity & Inclusion: <https://www.dariohealth.com/diversity-and-inclusion/>  
Articles: <https://www.dariohealth.com/articles/>  
Dariohealth.com

[LinkedIn](#)



# Day Two



DAYTWO.COM | USA

## PITCH

DayTwo, the leader in precision nutrition with the world's largest and highest resolution microbiome discovery platform, offers a sustainable path to remission for metabolic disease (diabetes, prediabetes, clinical obesity).

The company's solution includes gut microbiome profiling, artificial intelligence to predict blood sugar response to foods, and dedicated virtual care. The company's results set a new national benchmark for diabetes and metabolic disease care -- with significant sustained clinical results in reducing A1C, improving Time in Range, and reducing or eliminating prescription medications. DayTwo's scientific research is cited by the National Institutes of Health as a foundational element in its 10 year, \$150 million strategic plan for precision nutrition.

## PROBLEM/OPPORTUNITY

Current interventions for metabolic disease (diabetes, prediabetes, clinical obesity) are limited in their ability to achieve sustainable clinical outcomes because they are based on a) solely monitoring the disease or b) generic and/or elimination diets that are one size fits all and some of which (such as the Ketogenic diet) are very difficult to maintain (based on ADA, AACE and Endocrine Society literature) and can negatively impact health (cholesterol, kidney and liver function) and c) poor engagement. Metabolic disease is caused by environmental and biologic circumstances and without addressing both of these, success is difficult to achieve. This set of diseases require a precision medicine solution that can solve the issue through precision nutrition--the ability to know which food is right for each person.

## SOLUTION/PRODUCT

After 10 years of scientific research, and the development of an AI-based algorithm that predicts blood sugar response to food, DayTwo offers members with metabolic disease a unique solution: precision nutrition- based Food Prescriptions™. By identifying the right nutrition plan for each person, that includes carbs, DayTwo reduces or eliminates medication by improving Time in Range and lowering A1C.

### How It Works:

- Members return a gut microbiome stool sample to the DayTwo lab
- Samples are run through the DayTwo's proprietary AI-based blood sugar prediction engine, to generate Food Prescriptions
- Through an integrated high touch, high tech platform, that utilizes telehealth and behavioral science, employees are supported to achieve a pathway to remission.

### Differentiators:

- Achieves a path to remission through precision-based science: a high-resolution gut microbiome analysis and a proprietary AI-based blood sugar prediction engine
- Covers all metabolic diseases through a high touch / high tech virtual model: including diabetes, prediabetes, clinical obesity and NAFLD
- Supports Members' Existing Care: coordinates care between patient members and their existing doctors
- Easy to implement: meets people where they are

## BUSINESS MODEL

DayTwo is offered through employers and health plans with up to 100% fees at risk within a per engaged member per month model.

### Use Cases for Which Customer Segments

- Traditional Fee-for-Service
- Providers At-risk Providers
- Payers / Insurance Companies
- Benefit Managers

## MARKET

Diabetes, prediabetes, and clinical obesity impact over 50% of US adults or almost 200 million people. The average cost of someone with diabetes is \$20k per year versus an average for the overall population of \$4k (KFF, 2017)

## EMR INTEGRATIONS

DayTwo integrates best with employers, health plans and providers who take risk. For those member lives where an entity has a financial incentive to manage risk and cost, DayTwo is an ideal partner to manage population risk and cost for those with metabolic disease. DayTwo is a fee-for-outcome vendor and has structured its business model to align and take risk for the members DayTwo serves. DayTwo puts 100% of its fees-at-risk upon successful control of blood sugar for each member, as measured by A1C improvement. Employers, Health Plans and Providers who understand the value of blood-sugar control for populations with Diabetes or Prediabetes is worth a multiple of the investment in the DayTwo program, annually.



**HITRUST CERTIFIED**

Yes

**COMPETITIVE ADVANTAGE**

DayTwo offers a proactive solution to metabolic disease, telling patients what foods or food combinations will keep their blood sugar in control before they eat. This is unique in the market.

**TRACTION**

DayTwo works with some of the largest employers and health plans in the US. DayTwo's solution has been cited in the American Diabetes Association's Standards of Care for 3 years in a row and is a foundational element in the National Institutes of Health's 10 year \$150M strategic plan on precision nutrition.

**GO-TO-MARKET STRATEGY**

DayTwo works with employers, health plans and government entities to deliver its solution.

**CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Series B, \$35M, Total of \$85M

Yes, currently raising capital



# Halo Health



HALOHEALTH.COM | USA

## PITCH

Halo Health is the healthcare technology company for clinical communication and collaboration. Founded by clinicians, for clinicians, only Halo Health offers the Halo Clinical Collaboration Platform which unifies all communication channels (secure messaging, video, voice, alerts), and enables role-based collaboration which ensures the right message gets to the right person, role or team at the right time – instantly.

## PROBLEM/OPPORTUNITY

Fragmented communication causes serious problems in patient safety, quality of care, health system profitability, and provider performance. Halo Health offers a differentiated clinical collaboration platform, enabling unified communications as a service (UCaaS) for healthcare, allowing health systems to realize their digital health objectives.

## SOLUTION/PRODUCT

The cloud-native Halo Clinical Collaboration Platform combines secure messaging, Video, VOIP, on-call scheduling, teams and workflows to improve clinical communication and collaboration. It is consistently rated as a KLAS Top Performer and noted for supporting the greatest breadth of clinical communication workflows.

The AWS cloud-based, light footprint of the platform allows for easy scalability with minimal provisioning required by IT teams, a uniqueness that proved valuable in 2020 as medical systems had to do more with less.

## BUSINESS MODEL

SaaS Subscription Model  
Professional Services & Implementation  
Ongoing Customer Success & Support

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service Providers
- At-Risk Providers

## MARKET

Halo Health serves acute care organizations, including academic medical centers, integrated delivery networks, and community hospitals - as well as their ambulatory and post-acute settings of care, including home health and hospice in providing connected collaboration and communication in an easy-to-use mobile or desktop application.

## EMR INTEGRATIONS

Halo Health integrates with the top EHR solutions in the market, enabling clear communication and access to patient demographic, events, and alerts, driving superior patient outcomes. These include Epic, Cerner, Meditech, Allscripts, Athena Health, Nextgen, Medhost, eClinical Works and more.

### 1. HL7 ADT integration

Users can quickly search for an active patient the same way they search within the EHR by name, MRN, date of birth or room number.

### 2. Critical Results (ORU)

Halo's EHR collaboration module ensures that real-time information such as sepsis alerts, critical labs and urgent consult reach the right clinician at the right time to prevent costly delays in care, while protecting physicians from data overload or needless interruptions.

### 3. EHR Alerts (SMTP)

EMR inboxes fill up with hundreds of notifications a day. Instead, save time by routing mission critical EHR alerts through Halo. Halo's EHR Alert integration through SMTP allows for care team members to be notified of:

- a. Urgent Consults entered in EMR
- b. Patient Transfers
- c. Patient Bed Assignments
- d. Sepsis Alerts

Halo Health leverages the power of an industry leader integration engine, Redox, which allows over 1,200+ Provider Connection in a single developer-friendly model that is designed to support Halo Health's vision of a single cloud-based interoperable platform.

## HITRUST CERTIFIED

Yes



## COMPETITIVE ADVANTAGE

The Halo Health advantage begins with the feature-rich Halo Clinical Collaboration Platform (CCP). The Halo Health Platform includes a unified secure communication solution, that ensures compliance with HIPAA regulations, and has many unique features that help clinicians streamline workflows and communication.

### Consolidated Applications, Unified Communication

Communication, scheduling and team coordination are all unified on a comprehensive, cloud-based mobile platform.

Mobile devices replace outdated pagers, phones and their associated maintenance.

Alerts and alarms from medical devices are incorporated into Halo CCP prioritized notifications, while images and lab results are shared with ease, including the patient's EHR record

This technology consolidation eliminates the need for multiple costly applications and support agreements.

### Workflows are Streamlined and Accelerated

Halo Health number of workflows are unmatched in the category, more than any other solution provider, according to KLAS (2020) permitting the widest range of complex communications, including role and team- based messaging.

As a result, many of the steps associated with clinicians and support staff are streamlined; the time to communicate, coordinate is reduced, accelerating the collaboration on the delivery of patient care. Workflows are continually optimized as organizations find new uses for Halo.

The Halo Clinical Collaboration Platform has native on-call scheduling functionality that manages schedules, on-call workflows, and status changes in real-time that automates role-based communication.

Unique to healthcare communication is how clinicians transition in and out of roles, on shifts and teams. The Halo Clinical Collaboration Platform has functionality to accommodate even the most complex roles and teams.

### Supports Interoperability

Halo Health's Halo Link empowers organizations to easily collaborate and communicate with clinicians in affiliated organizations and across health networks – whether or not they share the same EHR instance, supporting interoperability and Digital Health objectives.

In total, only Halo Health offers the breadth and depth of communication and collaboration solutions in one, cloud-hosted, highly available solution.

## TRACTION

Halo Health serves hundreds of thousands of clinicians every day at more than 200 health care systems across the United States. Tens of millions of messages, images, voice and alerts are exchanged on an annual basis.

In the last 12 months, Halo Health has reported an 85% increase in information exchanged – records, messages, voice – underscoring the adoption of the Halo Health platform, in part due to rapid acceptance during the COVID-19 pandemic.

## GO-TO-MARKET STRATEGY

Halo Health serves acute care organizations, including academic medical centers, integrated delivery networks, and community hospitals. Our unique Halo Link solutions allow communities of care, from the hospital campus to rehab hospitals, ambulatory surgery centers and primary care to be linked, allowing clinicians to quickly and easily communicate changes in care, improving the patient experience.

## CAPITAL RAISED TO DATE / RAISING CURRENTLY?

Series A 16.9MM. Total of \$20MM

Not Raising currently.



# Kyruss

KYRUUS.COM | USA



## PITCH

Kyruss helps healthcare organizations connect people with the right care across their key access points. The company's industry-defining provider search and scheduling platform enables leading health systems, hospitals, and medical groups nationwide – spanning more than 300,000 providers and 70+ healthcare organizations – to attract and retain patients with a modern and consistent access experience. Robust provider data management forms the foundation of the platform, helping people find the right providers and care settings for their needs based on rich, system-wide information.

To extend its impact on care navigation, Kyruss acquired HealthSparq in 2021 to bridge payer and provider access channels like never before.

## PROBLEM/OPPORTUNITY

Kyruss supports both healthcare organizations and the patients they serve: Challenges building and maintaining accurate provider directories are widespread, leading to a lack of visibility for health systems into who's in their network, what they do, and when they have appointment availability; and patients seek appointments through several different entry points to a health system—including via the website, call center, and provider offices—so why solve access challenges in only one of them?

Our ProviderMatch platform enables health systems to unify and optimize patient access enterprise-wide with the same provider information appearing in each channel. The result? A better patient experience that drives higher acquisition, conversion, and retention.

## SOLUTION/PRODUCT

Kyruss provides the only enterprise-wide patient access solution on the market. KyrussOne—the award-winning data management platform that powers the ProviderMatch suite—makes it easy for health systems to unify, manage, and maintain their enterprise-wide provider data, so they can ultimately understand and take steps to optimize provider utilization across the network. With KyrussOne, health systems can streamline data management processes, boost data quality, and drive the success of strategic patient access initiatives.

Use Cases for Which Customer Segments

- Traditional Fee-for-Service Providers
- Payers / Insurance Companies

## MARKET

Enterprise Health Systems [~1,000+ providers]

Large academic medical centers, not-for-profit, and for-profit systems; major children's hospitals

Mid-Market Health Systems and Hospitals [~250 - 1,000 providers]

Includes specialty hospitals, smaller health systems, and community hospitals

Has acute care presence (unlike medical groups)

Heterogeneous EHR landscape: Epic, Cerner, Meditech, athena, eCW, NextGen prevalent

Medical Groups [typically 50-500 provider groups]

Independent medical groups (i.e., not owned by a health system) Single- (e.g., Ortho) or multi-specialty groups

Ambulatory presence only (no acute care)

Varied EHR landscape - those above, plus wide range of smaller players

## EMR INTEGRATIONS

Kyruss' solutions directly integrate with our customers EHRs and we support Epic, Cerner, Athena, and AthenaIDX, the former GE Healthcare Centricity/IDX solutions. We use a mix of APIs to integrate with the EHRs:

- Epic: We're in the App Orchard and use Epic private APIs for integration.
- Cerner: We're part of their CODE program and listed in their App Gallery. Our primary integration uses Cerner's FHIR APIs.



- Athena: We're in the Athena Marketplace and use their private APIs.
- AthenalDX: We integrate using GE's Health Care Objects package to integrate with Centricity Business Solutions product.

Additionally, we use well-known HL7 messages to augment our integration to reduce API transaction load on the EHR and allow our customers to scale a consumer find care and scheduling experience without the concern of putting undue pressure on their mission critical EHR platform.

#### **HITRUST CERTIFIED**

No

#### **COMPETITIVE ADVANTAGE**

Kyruus, a physician founded and led organization, is the leader in provider search and scheduling for healthcare organizations, dedicated to a vision to make healthcare work better for everyone by connecting people to the care they need.

Today, Kyruus powers the patient access initiatives of top healthcare organizations across the US, transforming how people find and book care through our multi-channel platform. Looking to transform care navigation even more, in 2021, Kyruus acquired HealthSparq, a leader in healthcare guidance and transparency serving 100 health plan brands. The combined company is enabling unprecedented payer-provider connectivity to make it easier for people to navigate and schedule care across access channels.

#### **TRACTION**

Kyruus now works with over 300,000 providers and 70+ healthcare organizations across the US, facilitating over 1M appointments booked online to-date.

We also believe we can have the biggest impact on our customers and the patients they serve by partnering with other best-of-breed companies and collaborating across the healthcare ecosystem: Microsoft Dynamics, Salesforce Health Cloud, Brandify, Binary Fountain, Cerner, and AWS.

#### **GO-TO-MARKET STRATEGY**

Currently active and successfully engaged with the US market for 10+ Years.

#### **CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Total of \$150MM

Not currently raising capital



# Luma Health



LUMAHEALTH.IO | USA

## PITCH

Needing care is hard. Getting it shouldn't be.

Health systems are now competing on experience - not just care quality. Patients are paying more for their care than ever before, and have new expectations of their care accelerated by new market entrants and a global pandemic.

Access, IT, and finance leaders must proactively design patient-centric experiences. Adding more people or point solutions to the mix will only perpetuate slow, inefficient, and disjointed patient journeys.

Luma Health brings a platform to unify and automate all patient journeys-- clinical, operational, financial. Luma Health has grown consistently since its founding to become the glue that connects a health system's technology stack through workflow automation, conversational patient engagement, and staff collaboration. Powered by integration with leading EHRs, Luma Health helps healthcare organizations deliver differentiated patient experiences.

## PROBLEM/OPPORTUNITY

Today, patients increasingly base their healthcare decisions not just on their care needs, but also on convenience. This trend, which received a big boost during the pandemic, will directly impact the way patients interact with healthcare. As a result, health system leaders now have a responsibility to build patient-centered experiences that stitch together previously disconnected portals, systems, and workflows-- with a simplified, text-first, and one-click approach.

Luma Health's platform is uniquely suited to the current challenges. Instead of patients needing to be their own care ambassadors, they can schedule or cancel an appointment, check-in for in-person or virtual care, and manage post-visit follow-ups by simply replying to a text message, in their preferred language, without having to download or log in to another app.

The platform also automates complex use cases, from care gap/ attribution list outreach, to getting patients in for chronic care management, to referral conversion for specialty clinics.

We believe that there is a unique opportunity right now for software to deliver on the promise of digital health – and the Luma Health platform lives up to that promise.

## SOLUTION/PRODUCT

Luma Health is one of the few true platforms in the patient engagement space. With a range of EHR-integrated features and capabilities, Luma Health helps customers craft their ideal patient experience and build automated workflows for complex use-cases.

Luma Health's platform helps clinics & health systems synchronize every part of the patient journey before and after care, with automated reminders, self-scheduling, waitlist offers, mobile patient intake, mass patient broadcasts, patient education and clinical touchpoints, secure patient-provider chat, telehealth, and feedback/reputation management. The communication is available in 20+ languages and currently reaches 25M+ patients.

The platform makes it easier for providers to reach more patients by converting more referrals, better managing attribution lists, and automatically reaching out to patients - helping them keep a full schedule and keep patients coming back.

## BUSINESS MODEL

Our business model is described in the answers below on our Go to Market strategy.

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service Providers
- At-risk Providers

## MARKET

Luma Health currently targets the outpatient care segment for multi-specialty, single specialty, and primary care solutions. Our target market includes mid-size clinics, regional health groups, and enterprise health systems.

Our buyers range from independent medical providers and office managers at small physician practices, to CEOs, CFOs, CIOs, and other C suite decision-makers at leading hospitals and health systems.

Our end users include administrative and operational staff, as well as clinicians including providers, nurses, and care coordinators.



**Our Ideal Customer Profile:**

- Multi-specialty / single-specialty medical clinics and health systems - Size: 20-500+ providers
- High appointment and/or procedure volume
- Long wait times to get an appointment
- High referral volume
- Desire to transform patient engagement

**EMR INTEGRATIONS**

Luma integrates with 80+ leading partner EHRs. We have been the most-deployed patient engagement solution and the largest consumer of Cerner APIs.

We use both standards-based (HL7, FHIR, SMART-on-FHIR, etc.) and proprietary integration (SFTP, custom APIs, etc.) to build deep EHR connectivity.

**HITRUST CERTIFIED**

Yes

**COMPETITIVE ADVANTAGE**

We address the full breadth of patient engagement. While our competitors address similar problems, we offer an end-to-end solution that addresses pain points across the full patient journey. KLAS has recognized Luma Health as the only vendor in the space approaching platform status, with capabilities far exceeding our promises.

These capabilities have all been developed in-house, not acquired.

We offer deep EHR integration, not vaporware, with more than 80 different EHRs including Epic, Cerner, Meditech, Allscripts, Athenahealth, eClinicalWorks, and more. We can integrate in any way that the organization chooses (via SFTP, APIs, HL7, and more), offering scalability, customizability and configurability.

Luma Health is highly configurable and customizable to align with customers' workflows and use cases. Our platform handled 500,000 requests per second and supported half a million patients at a time to power vaccine operations at leading health systems.

Luma Health's technology is easy to use and remotely installed. The product is web-based and compatible with all leading internet browsers.

Specialized customer success managers train and set up end users for success during a comprehensive onboarding and implementation period. The phased implementation approach ensures all stakeholders are engaged, transitions are smooth, and results are delivered.

**TRACTION**

- Used by over 550 health systems across the US
- Reaches 25 million patients
- Recognized by KLAS as exceeding promises, the only non-EHR vendor in the space approaching true platform status
- Designated as a "Momentum Leader" by G2
- Recognized by Gartner's GetApp as a 'Category Leader' in April 2021
- Winner of UCSF Digital Health Awards

**GO-TO-MARKET STRATEGY**

Luma Health's GTM efforts are focused on three key segments: small clinics, mid-sized providers, and large health systems.

Our pricing model is subscription-based. But in contrast to other vendors in the same space that charge customers per message (limiting the ability to engage patients across all touchpoints), Luma Health charges per provider per month.

The platform is organized into modules. Depending on their needs, health systems can start with the full platform or start small and add modules over time for seamless scalability that's cost-effective and easy-to- deploy.

We also focus on developing strategic partnerships that enable us to accelerate GTM and product impact (partners include Cisco, TSI, etc.).

Luma Health has a direct sales team as well as a channel/reseller partnerships team.

**CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Total of \$26MM

Yes, currently raising capital



# nQ Medical



NQ-MEDICAL.COM | USA

## PITCH

nQ is a computational biotechnology company with a Digital Biomarker Discovery Platform that phenotypes neurodegenerative diseases through passive, AI-aided analysis of personal device interactions. Our biomarkers are used for early detection (years earlier than gold standard assessment tools), uses RWE to track disease progression over time, and because we track disease progression, we can measure the impact of therapy (Rx, device or CBT).

Our FDA Breakthrough designated digital biomarker platform has been developed for Alzheimer's, Parkinson's, and ALS in early and newly diagnosed/untreated stages of disease. Our AD trial has advanced to yield early and promising results measuring cognitive decline (at the subdomain level) and delineating PD and AD symptomatology.

Please see link below to our April 20, 2021, American Academy of Neurology symposium. It is worth watching the first 26 minutes to see the use case for nQ in neurology by Cleveland Clinic's Dr. Justin Miller. The second presentation is our PI, Dr. Aaron Ritter sharing results from the trial:

<https://kenes.cloud.panopto.eu/Panopto/Pages/Viewer.aspx?pid=702c0fd1-2e14-40b9-b5ad-acfd00eafaeb>

## PROBLEM/OPPORTUNITY

In prodromal stages of neurodegenerative diseases such as AD, digital biomarkers can detect subclinical symptoms known to predict phenoconversion better than biochemical markers which often predict disease risk but not timing. Some key advantages of our digital biomarkers include:

- Continuous, longitudinal, remote, real world quantification of psychomotor symptoms;
- Patients are not burdened with completing structured tasks or clinic visits for data collection. Patients use their personal devices as they normally would and data is collected passively and transparently, often 24/7.

## SOLUTION/PRODUCT

nQ is a computational biotechnology company with a Digital Biomarker Discovery Platform that phenotypes neurodegenerative diseases through passive, AI-aided analysis of personal device interactions. Our biomarkers are used for early detection (years earlier than gold standard assessment tools), uses RWE to track disease progression over time, and because we track disease progression, we can measure the impact of therapy (Rx, device or CBT).

## BUSINESS MODEL

nQ is SaaS with a 4-part business model:

1. Supporting remote decentralized clinical trials via remote recruitment; remote, real-world, highly granular tracking of disease progression during the course of the trial; and earliest possible measurement of the therapeutic efficacy of the compound/device;
2. Commercial deployment as a digital therapeutic;
3. Remote patient monitoring/Ambient telemetry tool supporting virtual and live clinic visits;
4. Delivery of a unique database of well characterized patients with a combination of genetic data, health record data, and multi-sensor data for population health (risk stratification) and drug discovery.

Use Cases for Which Customer Segments

- Traditional Fee-for-Service Providers
- At-risk Providers

## MARKET

The TAM for each of the 4 business model parts are:

1. All pharmaceutical and medical device companies with portfolios in neurology (all diseases/disorders of cognition and/or motor, eg, Alzheimer's, ALS, Parkinson's, Multiple Sclerosis, et al);
2. All pharmaceutical and medical device companies with portfolios in neurology;
3. Payors and providers (recognizing that there are currently few, if any, TeleNeurology offerings). NOTE: nQ is developing its own TeleNeurology program with national leading KOLs.
4. All pharmaceutical and medical device companies with portfolios in neurology.

## EMR INTEGRATIONS

nQ has been built with open APIs for integration into EMR, EDC, or other proprietary platforms. To date, we have conducted several successful integrations but not yet directly to EMR. We have integrated to a channel provider that in turn is integrated into the EMR



**HITRUST CERTIFIED**

No

**COMPETITIVE ADVANTAGE**

1. Leading AI company in delivering digital biomarkers;
2. No proprietary device required (works on all Apple, Android, Windows devices);
3. No task-based app (100% passive data collection)
4. FDA Breakthrough designation

**TRACTION**

US market:

2019 Revenues \$550,000

2020 Revenues \$900,000 (the year of COVID) 2021 Revenues (projected) \$1.5M

5 clinical trials completed/3 ongoing

Partnerships with LabCorp, VHA, and Cleveland Clinic

**GO-TO-MARKET STRATEGY**

1. Early revenues from Pharma in R&D
2. Post FDA clearance - commercial deployment via Pharma to support Rx (extend patents)
3. Post FDA clearance - integration to telehealth providers for ambient telemetry
4. Post-FDA clearance - direct sales to Medicare Risk Plans and the VHA for RPM

**CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

\$2.2M raised recently, \$6.5M total

Yes, currently raising capital



# Pack Health



PACKHEALTH.COM | USA

## PITCH

Pack Health is a human-powered digital patient engagement platform that is comprehensive, high-touch, compassionate, and accessible. We match members with a human Health Advisor, not a one-size-fits-all chatbot; Health Advisors reach out to members five times a week, through phone, text, and email, at the members preference. We engage members around goal setting and have the crucial conversations about what's getting in their way of better health. This helps us get to the root of social determinants of health that may be impacting members' lives, or other barriers that may stand between the doctor's advice and their daily habits.

Honing in on what members actually need, rather than throwing tons of information at them, is what makes Pack Health much more engaging than other programs--and it's proven. Our program demonstrates a 5:1 return on investment. We are NCQA accredited across five domains of population health, and we are the only virtual program in the state of Alabama to receive Full CDC DPP Recognition status.

## PROBLEM/OPPORTUNITY

Individual health and chronic conditions can't be treated in a silo approach. To improve whole-person health and behaviors at home, where the majority of health management occurs between doctor visits, solutions must address comorbidities, behavioral health, and social determinants of health that influence daily choices. The members we work with have 2-3 diagnoses on average, and are typically overwhelmed with the changes their care team has recommended. They know what they should be doing, but they haven't been successful on their own, often due to inherent barriers. Our approach involves weekly SMART goal setting to drive the member towards long-term goal achievement, improved compliance, and healthier daily behaviors for the primary condition and associated comorbidities.

## SOLUTION/PRODUCT

A better way to better health begins with relationships, listening, and breaking down barriers to healthier choices. Our engagement platform changes health behaviors to close gaps in care and improve outcomes. When patients join our platform and become Pack Health members, they are paired with a board-certified Health Advisor. Members connect with their Health Advisor, who supports them weekly, through calls, texts, and emails.

Pack Health's Health Advisors build a relationship with each member founded on compassion and accountability to empower and guide members through their health journey. Each Pack Health program is designed to centralize whole-person health by addressing chronic conditions, comorbidities, care navigation, and social determinants. In addition to human-to-human health coaching, Pack Health's platform offers condition-specific education, remote patient monitoring, integrated grocery delivery and meal support, and medical device training/support.

Our solution drives improvements across clinical and lifestyle metrics, demonstrating a nearly \$5:1 ROI. Unlike our competitors, our one-to-one, single-point-of-contact approach combines technological advances with human compassion - what we call 'digital empathy'. Combining relationship-based coaching, device integration, and resources designed to address social determinants of health allows Pack Health to offer payers a higher level of touch and service at a lower cost than other vendors.

## BUSINESS MODEL

Pack Health's business model centers around four core areas of business:

- HEOR/RWE Pilots
- Commercial Program Design
- Commercial Patient Support - Expansion Services

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Payers / Insurance Companies
- Benefit Managers

## MARKET

Target customers for Pack Health's patient engagement platform are health plans, health systems, life science companies, and research organizations. Pack Health's platform has been used by over 100 employers, payers, pharmaceutical manufacturers, hospital systems, and organizations including Abbvie, American Cancer Society, Blue Cross Blue Shield of Alabama, Humana, MD Anderson Cancer Center, Novo Nordisk, and University of California, San Francisco. The end-users are individuals living with one or more chronic conditions across therapeutic areas such as metabolic, autoimmune, cardiovascular, respiratory, behavioral health, oncology, and more.



### EMR INTEGRATIONS

Pack Health's flexible platform is built to scale on Salesforce. Pack Health is able to send or receive file feeds through APIs or SFTP for our clients or their vendor platforms (e.g., rewards/incentive platforms). We also have the ability to build integrations, based on client-specific referral protocols and resources, into our operating system. Some examples are case management, health plan resources or programs and referrals to other vendors.

Pack Health is flexible and agnostic to different types of vendor integrations. Pack Health additionally utilizes Glooko and Validic partnerships to collect health metrics from devices and wearables that participants utilize (e.g., fitness devices/apps, smart glucometers, scales, and blood pressure cuffs).

### HITRUST CERTIFIED

Yes

### COMPETITIVE ADVANTAGE

Pack Health's competitive advantage is breadth and depth of services. That's what makes our digital patient engagement platform unique in a flooded industry. There are many niche vendors working on specific conditions, but we are the only company covering 25+ chronic conditions, meal and grocery delivery, behavioral health, remote patient monitoring, and social determinants of health support, using a proven successful engagement strategy. We have developed a platform that caters to personal goals across all covered conditions.

This enables us to solve vendor fatigue at the employer level and achieve results at the population level, while improving the engagement experience at an individual level. For each member, as we learn about their goals and barriers, we tailor the engagement to provide relevant resources the member needs. Examples include home food delivery, prescription assistance, transportation, targeted education, meal and exercise plans, reminders and accountability, care coordination, and connection to community resources.

Many of our competitors rely on specific devices, artificial intelligence, and member apps, while others require long, scripted calls that are not engaging to the participant. Pack Health makes for a more cost-efficient and effective partner than our competitors. Our other key differentiators include robust data collection, billing options through claims or invoice, simple and intuitive engagement, and a focus on individual barriers rather than just clinically focused education. We're an ideal solution for those members who know what they should be doing to manage their health but haven't been successful on their own.

Furthermore, we're able to do all this while providing human-to-human support. Our solution is human-first, rather than app-first, creating a culture among our members of accountability, reliability, transparency, and collaboration. While solving for chronic conditions, we're also able to address specific factors like loneliness.

### TRACTION

Pack Health's platform has been used by over 100 employers, payers, pharmaceutical manufacturers, hospital systems, and organizations including Abbvie, American Cancer Society, Blue Cross Blue Shield of Alabama, Humana, MD Anderson Cancer Center, Novo Nordisk, and University of California, San Francisco.

We're also proven and published in case studies, pilots, and peer reviewed journals:

Pack Health's digital health coaching program delivers 5:1 ROI for Coca-Cola UNITED. More details at this link:

<https://packhealth.com/news-pack-health-roi-ccbcu/>

Pack Health publishes research confirming impact for patients with type 2 diabetes in JMIR Diabetes. Here is a link to the study:

<https://preprints.jmir.org/preprint/24981/accepted>.

Addressing Food Insecurity with Blue Cross and Blue Shield of North Carolina (Blue Cross NC). More details on the partnership at this link: <https://packhealth.com/news-bcbssc-pack-health-food-insecurity/>

Pack Health and the American Diabetes Association (ADA) Announce Diabetes Support Digital Health Coaching Pilot. Read more at this link: <https://packhealth.com/news-ada-diabetes-support-pilot/>

### GO-TO-MARKET STRATEGY

Pack Health was introduced in the US market in 2014.

### CAPITAL RAISED TO DATE / RAISING CURRENTLY?

Series A - \$11M, Total \$11M

Yes, currently raising capital



# Socially Determined



[SOCIALLYDETERMINED.COM](https://sociallydetermined.com) | USA

## PITCH

Socially Determined developed the health care industry's first purpose-built analytic platform to assess and address the impact of Social Determinants of Health (SDOH) and social risk factors – at scale. Our analytic platform, SocialScape®, generates community-level SDOH risk exposure indices, individual-level social risk factor scores, and advanced analytics to quantify and visualize how these risks impact key business metrics, such as avoidable utilization, health equity, and total cost of care.

SocialScape allows our health plan, health system and employee partners to assess the impact SDOH and social risk factors have on their members, communities, and business performance. It empowers leadership and operational teams to leverage these insights to develop and implement effective strategies to mitigate risk through strategies such as enhanced care management, informed member outreach and engagement, place-based intervention programs, and community-based partnerships.

## PROBLEM/OPPORTUNITY

Health plans and health systems across the country see every day how social risk challenges, such as food insecurity, housing instability and financial strain, impact key business metrics, including avoidable utilization, quality measure attainment, and total cost of care. These organizations lack visibility into the true drivers of cost, utilization and we believe our social risk analytics provide that full view for a person, a population and a community. Socially Determined is a risk analytics company empowering our clients to assess and address SDOH and social risk factors impacting the communities and populations they serve, through our risk intelligence platform, SocialScape.

## SOLUTION/PRODUCT

Our analytic platform, SocialScape, was purpose-built to transform thousands of data elements into curated social risk intelligence. This includes federal, state and local data, which is combined with commercial and consumer data as well as what the industry refers to as Alternative Risk Data. Collectively, this information represents the raw inputs into the curated social risk intelligence that we generate using our proprietary risk models, which include the domains you see listed in the center of the slide: Financial Strain, Food Insecurity, Housing Instability, Transportation Barriers, Health Literacy Challenges and (more recently) Digital Health Equity.

Equally as important as quantifying social risks in and of themselves is the ability to integrate our risk insights with our clients' enterprise data sets. Whether they be clinical, claims, programmatic, etc. the goal is to quantify the impact that social risk is having on our clients' business today and measure potential returns on investments made to mitigate this risk.

In addition to our SocialScape platform, we have a cross-discipline team of SDOH subject matter experts who provide advisory services to help our clients operationalize our social risk insights to drive quantifiable business impact. We believe that social risk is a missing ingredient in providing effective, efficient, holistic care and by partnering broadly with pioneering organizations, we can impact the lives of millions of people for the better.

Importantly, SocialScape is constructed in a HIPAA-compliant secure Cloud Infrastructure. And as a company, Socially Determined has achieved HITRUST certification in recognition of the sensitive information that our clients entrust us with.

## BUSINESS MODEL

We provide access to our platform and associated services through a flexible subscription-based pricing model. Our base subscription includes access to the SocialScape platform, our risk metrics, and associated data for your members and communities. The subscription also includes a package of hours from our analysts and subject matter experts to support your internal teams with interpretation and operationalization of our risk insights. Subscription pricing is based on the operating revenue of your organization for the SocialScape platform fee, a fee for the baseline number of bundled service hours, and per member per year fee for the individual risk score analytics. Beyond the annual subscription, we offer a range of custom analytic and strategic services that are scoping and priced based on our clients' internal capabilities and support needs.

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- Traditional Fee-for-Service Providers
- At-risk Providers
- Payers / Insurance Companies
- Benefit Managers

## MARKET

We are currently focused on the US market and support providers, payers, life science companies, and government organizations; we have been honored to support a cross section of innovative organizations and leaders who believe that by systematically quantifying how social risk impacts their business, they are better equipped to take meaningful action.



### **EMR INTEGRATIONS**

As part of our work with health systems, health plans and our technology partners, we can and have integrated our social risk analytics into other platforms using APIs or other secure file transfer processes. Some of our health systems are integrating our insights into their population health analytics (e.g. Healthy Planet for Epic). Additionally, in our work with 3M, we've integrated our analytics into their care management platform that is utilized by health plans. Lastly, many of our customers utilize both our product and our UI and also take in our social risk data directly into their enterprise data warehouses or their data lake.

### **HITRUST CERTIFIED**

Yes

### **COMPETITIVE ADVANTAGE**

We have a limited number of direct competitors and therefore partner with most organizations in the SDoH space including the community network providers like Aunt Bertha and UniteUs. In terms of our unique advantages, Socially Determined is the only organization that is calculating risk score, engineered features and drivers of risk for each person, integrating with clinical and claims data and then conducting full evaluation and measurement activities. These capabilities immediately differentiate us from data vendors or risk analytic only companies.

We also utilize our strategic delivery team in partnership with our customers to utilize and get value from our product and our insights. Every customer we've ever had benefits from our ability to interpret and translate our findings into their business strategy and operations.

### **TRACTION**

We're based in Washington, DC and partner with more than 20 customers across the United States including health systems, health plans, government agencies, employers, life science companies and employers. We've developed multi-year partnerships with leading organizations like ProMedica Health, CareFirst and OSF Health and have measurable results from our work. Additionally, we have formal channel partnerships with global organizations including 3M and TransUnion which has increased our traction especially with health plans, providers and life science companies.

### **U.S. GO-TO-MARKET STRATEGY**

Since we're a U.S. based company and we've described that approach above, I think this section has been answered already.

### **CAPITAL RAISED TO DATE / RAISING CURRENTLY?**

Total of \$17M (Seed, Series A and Convertible Note)  
Currently raising Series B Round



# Vynca

VYNCAHEALTH.COM | USA

## PITCH

Over 12M adults in the US are living with a serious illness, and they often need care that extends beyond curative treatment. That's where Vynca comes in. Our serious illness management platform helps care teams manage their most vulnerable populations – regardless of where the individual is located. Coupling technology and analytics with our board-certified, physician-led palliative care team, we address the physical, mental, spiritual, and social needs of every individual. Through telehealth and community-based palliative care services, Vynca improves quality of life and reduces unnecessary, unwanted healthcare utilization and expenditure at the end-of-life.

## PROBLEM/OPPORTUNITY

Almost \$205 billion is spent on care for individuals in their last year of life. As these costs and the number of adults living with serious illness grow, educating clinicians to have conversations around serious illness and future care preferences continues to be a challenge.

There are also 10,000 people aging into Medicare daily. Chronic disease and serious illness is often more prevalent in this older, more vulnerable population. The spend for those Medicare beneficiaries who are seriously ill is \$34,000 versus a healthy beneficiary, where the spend is \$9,459. Combine all of this with the shortage of palliative care clinicians in the US, and many do not have access to supportive care that improves the lives of these individuals. Palliative care clinicians are trained to have these conversations around serious illness and provide supportive care. Due to the lack of available resources, many individuals do not have the opportunity to discuss or receive the care they want and desire.

Through our tech-enabled services, we partner with the existing care team, providing that extra layer of support to engage individuals in advance care planning conversations and focus on symptom management to improve their quality of life. With 24/7 access to a board-certified palliative care physician, Vynca helps reduce unnecessary ED visits, hospital admissions, and costs, and ensures timely and appropriate access to hospice.

## SOLUTION/PRODUCT

Vynca offers a serious illness, tech-enabled solution that allows healthcare organizations to manage the lives of their most vulnerable, expensive patients. While some organizations offer just technology, engagement in advance care planning conversations, or palliative care services, Vynca provides all of these: technology and analytics used to identify and assess individuals who would most benefit from an advance care planning conversation and palliative care; comprehensive, whole-person palliative care services; and the technology needed to digitally capture information, share across care teams, and coordinate care.

## BUSINESS MODEL

B2B2C

## USE CASES FOR WHICH CUSTOMER SEGMENTS

- At-risk Providers
- Payers / Insurance Companies

## MARKET

With over 12M adults living with serious illness, there is a \$26 billion total addressable market for palliative care in the US. Availability and access to palliative care varies greatly by geography, hospital size and tax status. Larger, more urban, non-profit hospitals are more likely to offer palliative care. Even in those hospitals offering palliative care, they are often understaffed, and not able to reach the entire population that would benefit from their services.

While hospital-based palliative care programs have grown over the past few years, community-based programs are growing at a slower rate. Nearly 80% of crisis ED visits and hospitalizations (minus pneumonia) are because of exacerbations from a serious illness. Since there is a lack of community-based palliative care programs to cover the demand, many of these individuals have few, if any options, other than going to the ED. By providing more access to community-based palliative care, namely via telehealth, individuals receive appropriate care in a more appropriate setting – anytime, anywhere.

## EMR INTEGRATIONS

Vynca has implemented integrations and has strategies for data exchange via API and HL7 over HTTPS/IpSec Tunnel with multiple applications including Epic Hyperspace, Cerner Powerchart, PointClickCare, AMR ePCR, athenahealth, and others.

## HITRUST CERTIFIED

No



### COMPETITIVE ADVANTAGE

Vynca is the only tech-enabled solution that couples technology and analytics with virtual palliative care services. Vynca's full offering includes provider network integration, advance care planning technology, advance care planning facilitation, care coordination, and virtual palliative care services. While some of our competitors offer some of this, Vynca's full suite helps healthcare organizations manage and improve the lives of their most vulnerable populations through personalized care that incorporates the tenets of palliative care.

Through our solutions and community-based palliative care, mainly via telehealth, Vynca can help ensure success in risk-based contracts, reduce costs, reduce CMS penalties for avoidable readmissions, and improve the overall healthcare experience for the individual and their family.

### TRACTION

Vynca has partnered with over 140 US hospitals, 8 state registries, post-acute providers, ACOs, and health plans such as Blue Shield of California and Partnership HealthPlan of California. Our care network expands across all states, and houses and shares advance care plans for nearly 1 million individuals. Vynca also has key strategic partnerships, including Cerner, who selected us as their advance care planning vendor.

Vynca is focused on improving the patient experience, decreasing costs, and increasing quality. In one study to better understand Vynca's impact on the last 30 days of life, we reviewed one year of death data from Oregon and focused on our impact on bed days, hospital admissions, ED visits and hospice metrics.

### RESULTS:

- 25% fewer ED visits
- 25% fewer hospitalizations
- 31% fewer in-patient bed days
- 53% higher hospice facility deaths

### GO-TO-MARKET STRATEGY

While Vynca currently partners with many healthcare organizations across the US, we are focused on growing market share with health plans, ACOs, and other providers bearing risk. These markets are of focus due to expected growth, advance care planning requirements for value-based care programs such as VBID, the Radiation Oncology Model, BPCI-A, and palliative care being a defined benefit by many commercial plans, Medicare Advantage, and Managed Medicaid.

### CAPITAL RAISED TO DATE / RAISING CURRENTLY?

Series B (June 2019) \$10.3MM. Total of \$15MM

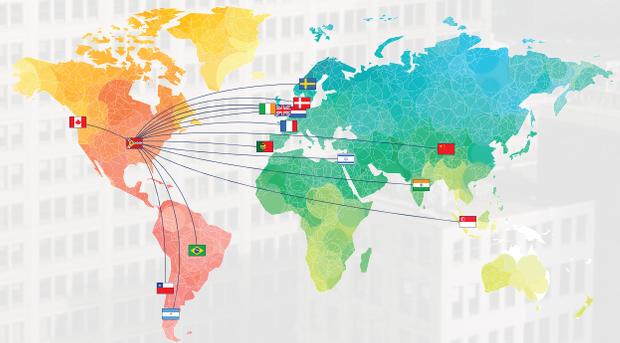
Yes, currently raising capital

# WELCOME TO THE NEIGHBORHOOD

You couldn't have picked a better time to make the move to St. Louis, and we're so excited for you to join us. **The region is experiencing a renaissance** that's happening from the ground up, driven by innovators, doers, thinkers, and makers.

St. Louis is a national leader in fueling startups and global leader in cutting-edge industries. **We embrace innovation and creativity, while offering world-class culture, neighborhoods, and talent.** We support our neighbors and are fiercely loyal to our hometown heroes and organizations.

We're committed to help build a place that insists on moving forward by bringing people, businesses, and institutions together in bold ways that make St. Louis a place where you can start up, stand out, and stay. Just like we did.



# STLMADE

START UP | STAND OUT | STAY



# GlobalSTL Health

INNOVATION SUMMIT

**November 17, 2021**

ST. LOUIS, MISSOURI, USA

Produced by:



**GLOBALSTL**  
AN INITIATIVE OF BIOSTL