



The Next Frontier in Healthcare

eCaring helps people live healthier happier lives at home

Payers

Hospitals

Plans

Providers

Health Care
Organizations today are
increasingly rewarded
for good performance
and penalized for bad
outcomes

Value-Based Payments

Capitated Rates

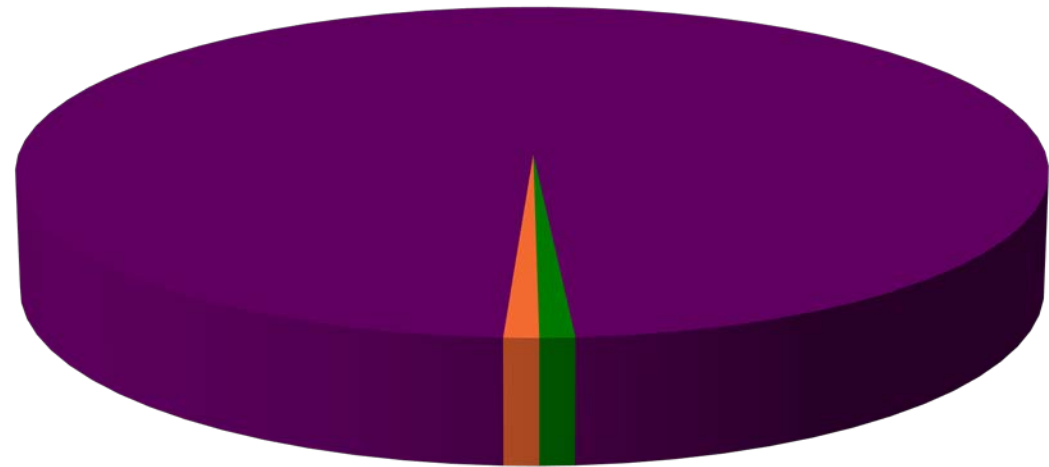
Bundled Payments

Shared Savings

Effective Care Management Requires Monitoring Patients Where They Spend the Majority of their Lives: the Home

- People interact with the health system when they have a medical event or for a scheduled checkup
- But patients spend most of their time at home
- Acutely and chronically ill patients need to be monitored every day to optimize treatment

How Patients Spend Their Time



- At Home/Outside of Healthcare System
- At the Hospital
- In a Physician's Office

eCaring captures real time data with unique tools providing ongoing monitoring from the home

Algorithms analyze data and give alerts as event is occurring, so care managers can react in real time

Alerts enable early interventions to potential issues before they become adverse medical events



Enhanced Revenues



Avoided Costs



Satisfied Patients

Significant Reductions in Utilizations and Costs



40% Reduction in annual hospital and ED visits¹



17% Reduction in average medical expenses²



35% Decrease in CHF readmissions³



\$4,000 Average annual Savings/Patient



1. Dual Eligibles program
2. Medicare Advantage program
3. Large Urban Hospital

Chronic Care Management Medicare Advantage Plan

Medicare Advantage Plan Trial Outcome

(Three Month Program)

| | Pre-Trial Period | Trial Period | Net Reduction |
|----------------------------------|---------------------|-------------------|------------------|
| Patients | 28 | 28 | |
| Costs | \$224,000 | \$185,556 | 17% |
| Savings | | \$38,444 | |
| Savings PMPM | | \$457.67 | |
| MLR | 77% | 64% | 17% |
| Annualized Savings Per Member | | <u>\$5,492.06</u> | |

ROI for a Medicare Advantage Plan >500%

MAP

- Avoided costs are average for all members on eCaring
- Higher quality measurements raise STARS score resulting in increased revenue for total population

Est. # Eligible Patients

10,000

Annual Savings Per Patient

\$4,000

Total Annual Savings

\$40,000,000

Total Patients in Plan

40,000

Potential Revenue Increase

\$20,000,000

Net Benefit

\$60,000,000

eCaring achieves these savings through a solution that is

- Practical
- Comprehensive
- Proactive
- Real-Time

Partnerships Provide National Coverage

SAMSUNG

verizon

The image displays the eCaring software interface across multiple devices: a laptop, a smartphone, and a tablet. The laptop screen shows a patient list with alerts such as 'Did not take any medication in 24 hours' and 'Refused meal at 11:24 hours'. The smartphone screen shows a patient's profile with icons for symptoms like 'Foot / Ankle Swelling', 'Sleep Activity', 'Medications', 'Shortness of breath', 'Chest Pain', and 'Weight'. The tablet screen shows a 'CareTracker' interface with a timeline of patient status and a list of symptoms.

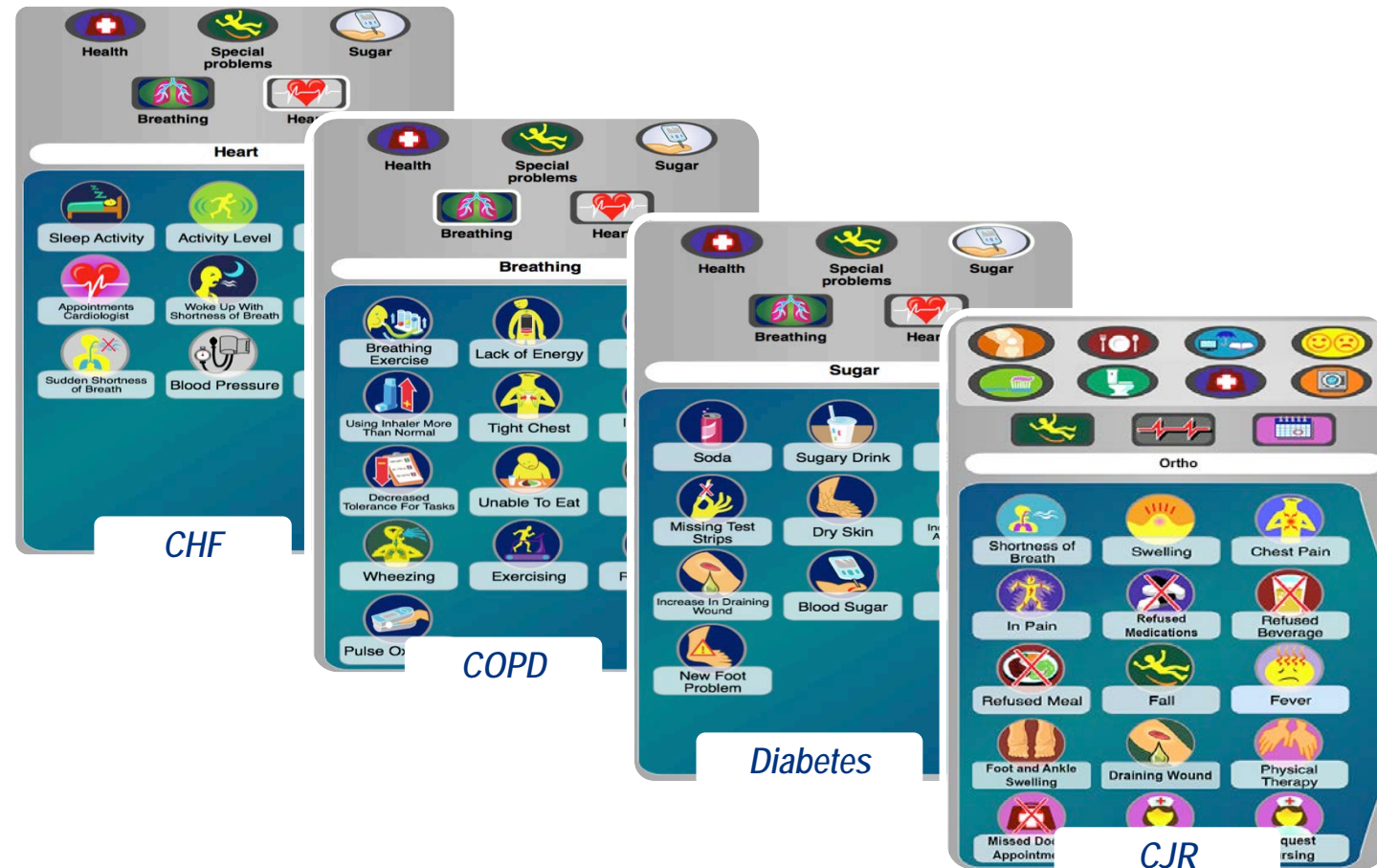
Practical - Intuitive Technology for Immediate Impact

- Easy to use interface empowers patients and care to generate real time actionable health care information from the home
- Integrates with existing systems and care manager workflow
- Customized solutions for payers, hospitals, health plans and providers
- Patient Specific Alerts enable impactful early interventions



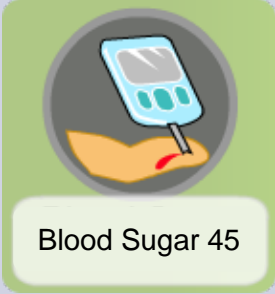


Comprehensive: A Single Integrated System

- One system for post-acute, post-procedure and chronic care management
- Customized data, alerts manage care, stratify risk on population, condition, disease and individual level
- Ongoing monitoring and longitudinal records for quality, performance documentation, and engagement



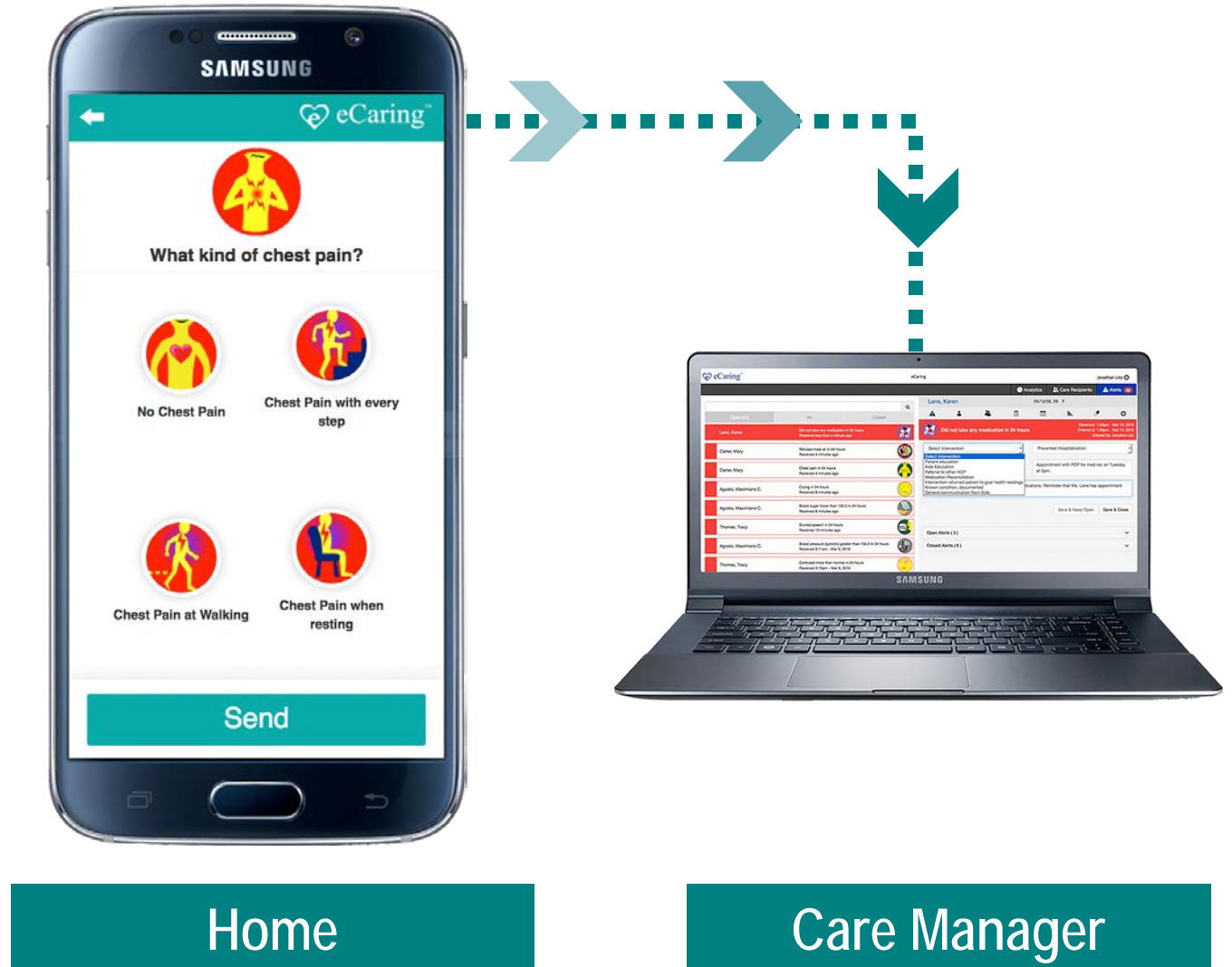
CHF, COPD, Diabetes, CJR Panels

Proactive – Manage Problems Before They Escalate

| Alert | Intervention | Outcome |
|---|---|---|
| <p>Blood Sugar 45, patient with diabetes crashing</p>  <p>Blood Sugar 45</p> | <p>Care Manager called into home immediately, forestalling typical response of ED visit. Told aide to have patient drink a glass of orange juice.</p> | <p>Blood sugar rose to 106 in half an hour, patient felt better, and avoided an ED visit.</p> |
| <p>Aide entered slurred speech</p>  <p>Slurring Speech</p> | <p>Care Manager immediately called into the home and learned the patient's blood sugar was extremely high. Care Manager ordered a nurse to visit the home and administer insulin.</p> | <p>The patients blood sugar was returned to normal range, avoiding a trip to the ED.</p> |
| <p>Short of Breath</p>  <p>Sudden Shortness of Breath</p> | <p>Patient had cold for approximately 5 days, suddenly became short of breath. Aide was diligent in inputting patient's deteriorating condition. Care Manager dispatched home visit physician to see patient. The patient was given a nebulizer x2 per day.</p> | <p>Patient treated in her home and stabilized. Prevented hospital admission.</p> |

Real-time: Monitoring Keeps Patients at Home

- Ongoing tracking of:
 - Medications Adherence
 - Physical and Mental Health
 - Clinical Data
 - Discharge plan compliance
- Algorithms generate customized alerts enabling early interventions
- Access for all relevant parties: care managers, clinicians, family members
- Increasing patient engagement and satisfaction
 - 15% of data tracks quality metrics on ongoing basis vs. six month calls

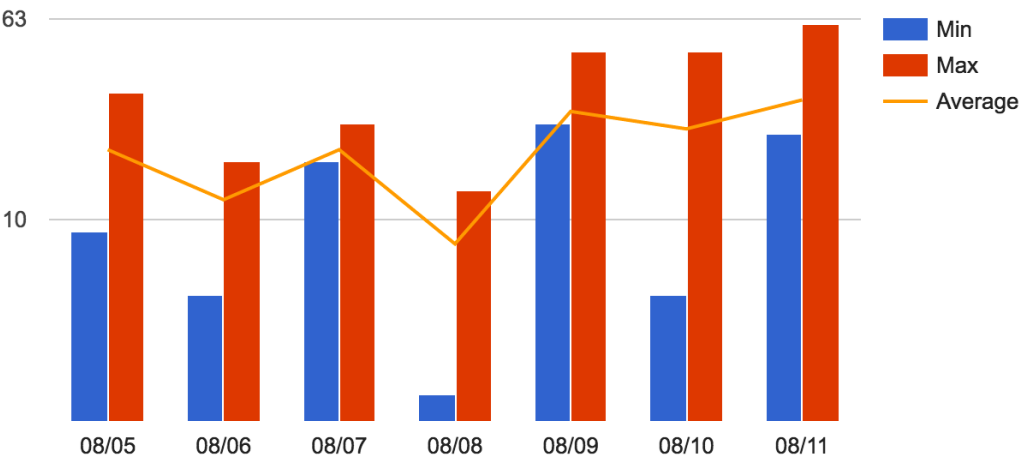


Response From Months To Minutes

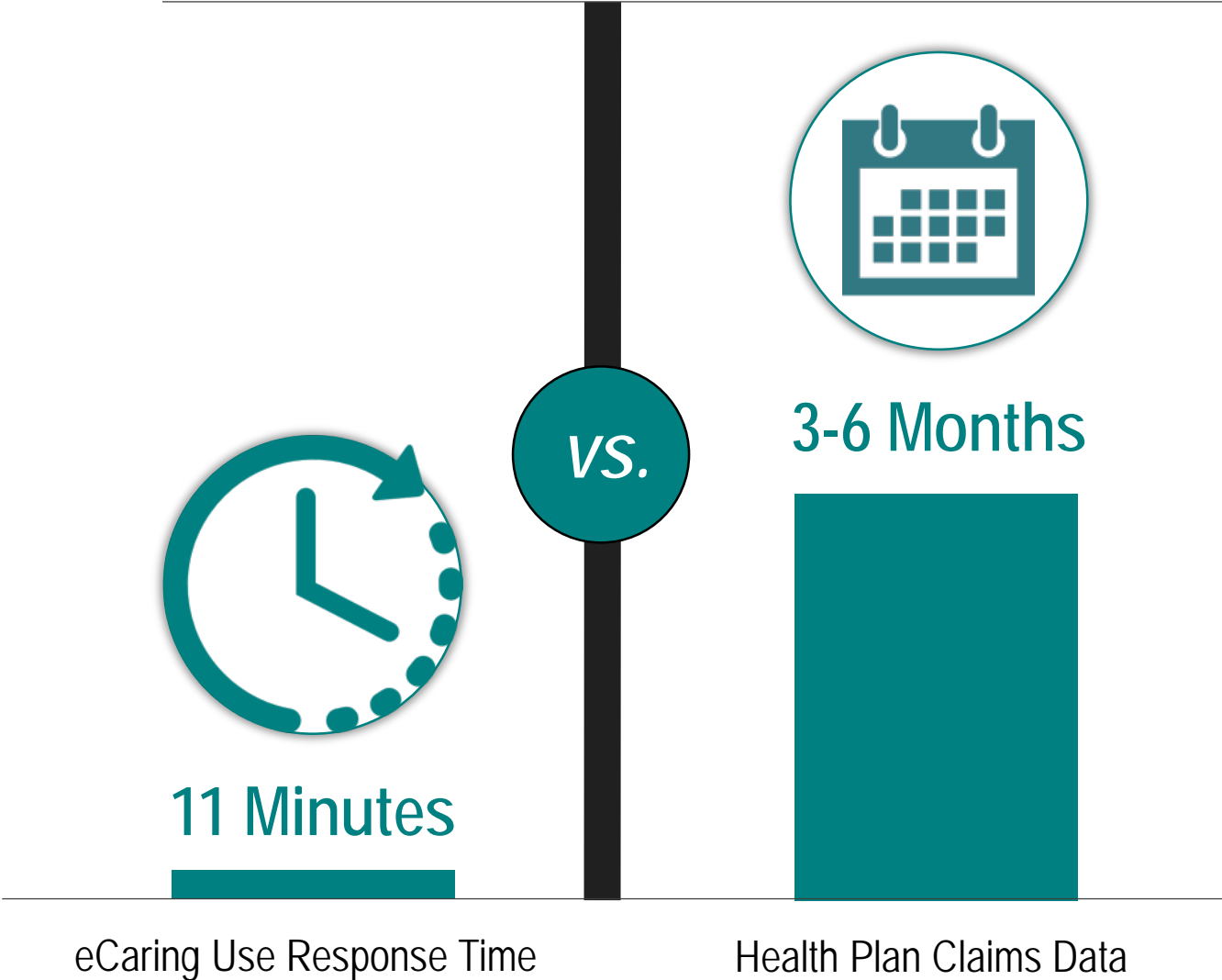
eCaring: Time to Alert First Intervention

Weekly from November 21, 2016 to November 27, 2016


Time from Alert Entry to the First Intervention



Time to Know about Critical Event



New Data and Analytics to Measure and Improve Outpatient Performance



Refused meal in 24 hours

Observed: 12/05/2016, 11:30am
Entered at: 12/05/2016, 12:00pm
Entered by: Glenda Meléndez

Medication Reconciliation

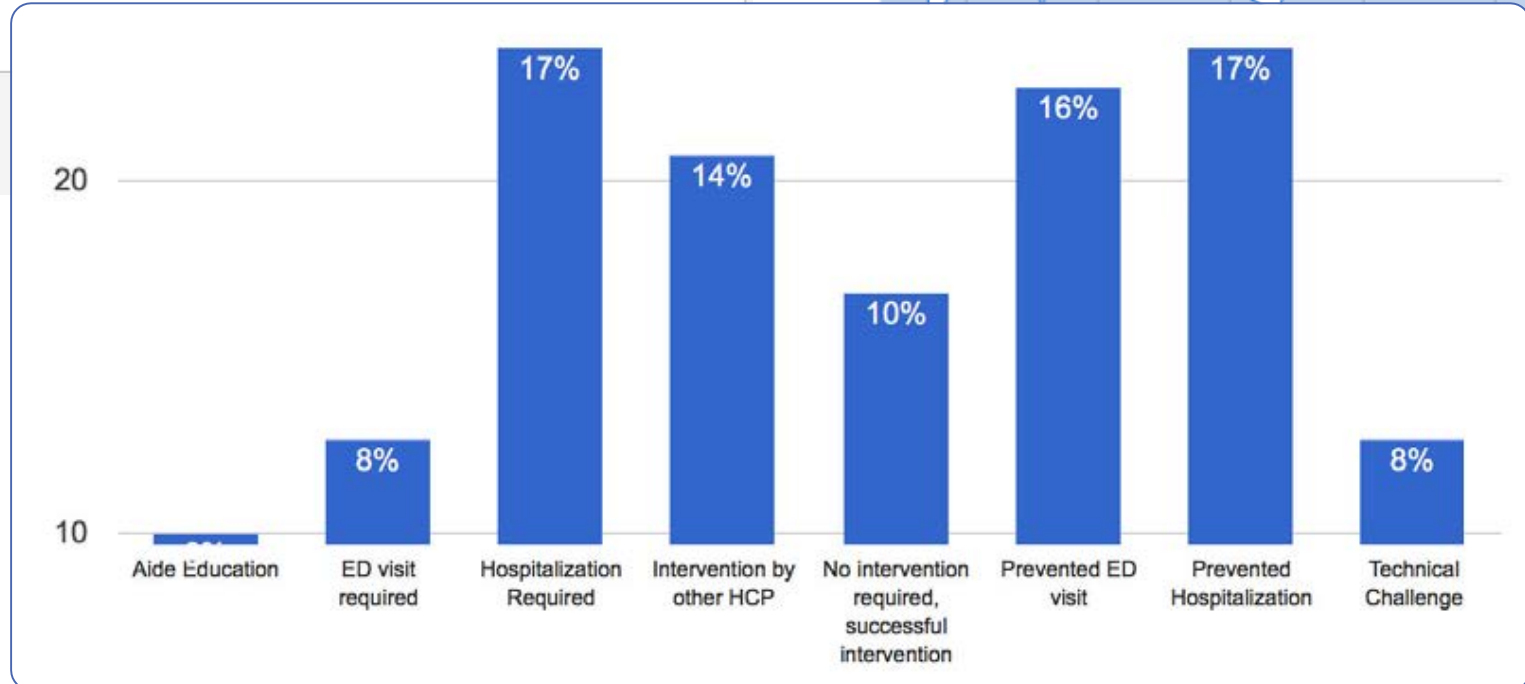
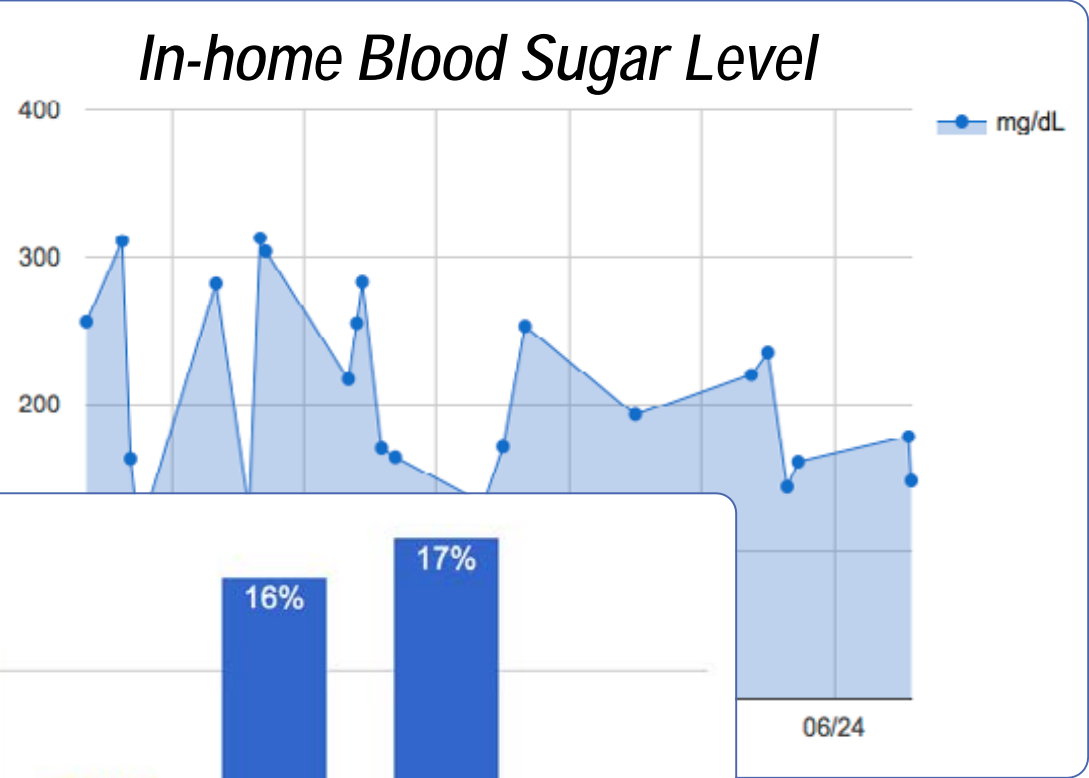
Prevented ED Visit

Nauseous from new meds, consulted dieticiain211

patient anxious, treated in home223

Make sure maintains new diet227

Real Time Alert for Rapid Intervention



Track Outcomes by Provider

Integration between Post Acute and Chronic Care Minimizes Costs and Problems for All Stages of Care

Post-Acute



Chronic Care

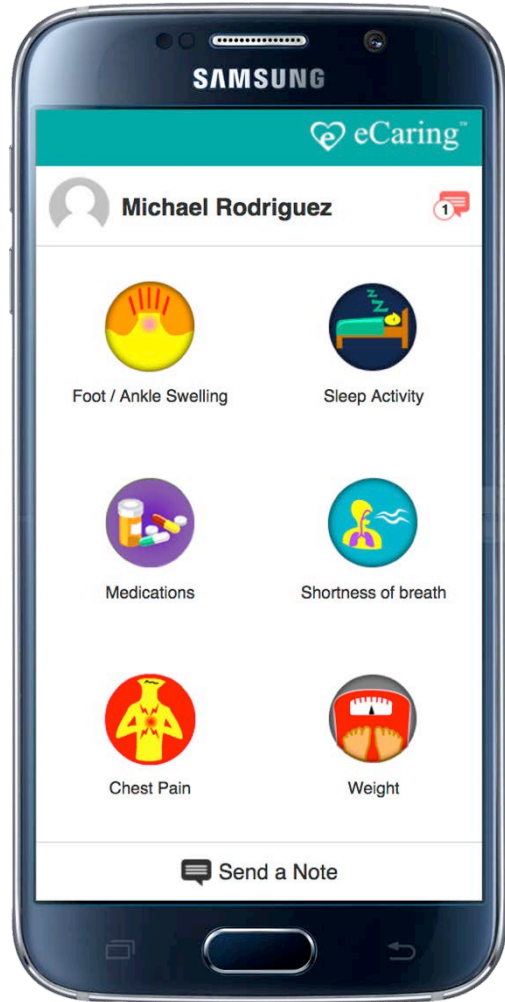
Beyond the Hospital Walls

- Readmission Reduction
- Bundled Payments
 - Mandatory: CJR, Cardio
 - Voluntary: BPCI
- ↑ HCAHPS Scores drive Revenues
- Maintain Patient In-network

@Home for Lowest Costs

- Value-Based Payments, Insurance
- Quality Incentive Payments/Penalties
- Dual Eligibles Financial Incentives
- ↑ Ratings, STAR Scores → Higher Revenues
- Keeps Members with Preferred Providers

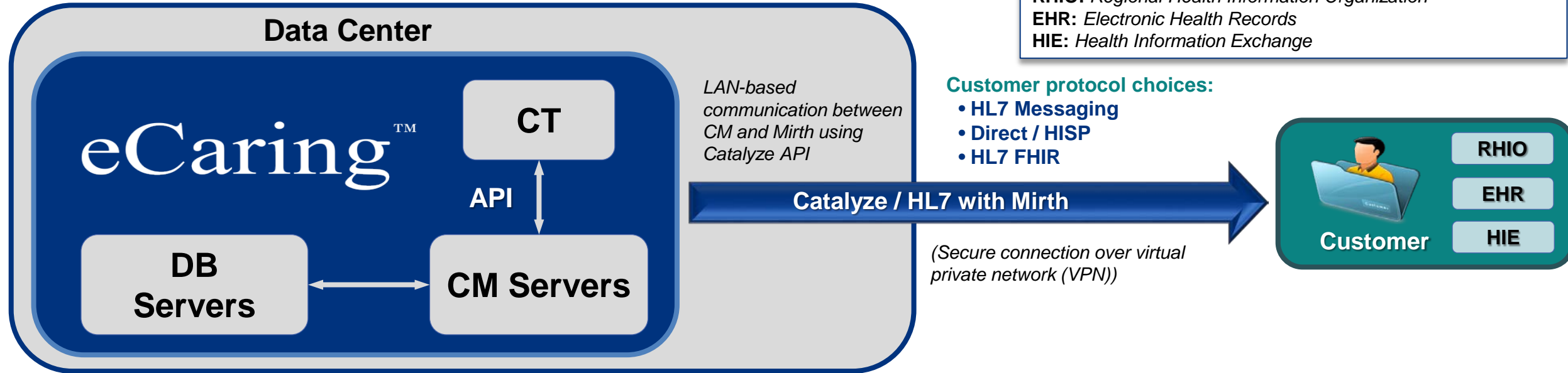
Robust Product Roadmap Meeting Market Needs



- **Smartphone app** for low cost rapid deployment
- **Prompt system** for gathering crucial data
- ***FamilyConnect*** for EAP programs, consumer use
- **Data mining** for pharma
- **Clinical trial** data supplementation
- Customized data sets for **veterans, pediatrics**
- **Sell-through** opportunities through platform

eCaring Interoperability Overview

CT: CareTracker
CM: CareManager
DB: Database
HL7: Health Level-7
HISP: Health Information Systems Program
FHIR: Fast Healthcare Interoperability Resources
RHIO: Regional Health Information Organization
EHR: Electronic Health Records
HIE: Health Information Exchange



Possible integrations:

- Single Sign On
- Patient Vitals
- Medication refusals
- Alert notifications

Catalyze provides the necessary hardware to run a dedicated Mirth service. They also provide eCaring with a REST API to integrate their service.

Mirth integrates with customers EHR using existing HL7 channels. Catalyze sets up the necessary VPN connection with customer.

Customer can also connect directly to eCaring using our API.

- Manual Flat File Exchange
- Automated FlatFile Exchange
- CareManager API

Experienced Leadership, Board and Advisors

Management

Robert M. Herzog, CEO

CEO, senior management Motionbox, Diva, IP Network, ON2 Corp, Softcom, Granite Films and City Winery, major corporations including JPMorgan Chase, Cahners Communications and the Sarnoff Research Center.

Pamela Hall, COO

Co-Founder and COO of United Preference, leading health & wellness incentive administration & data analytics platform provider

Stuart Hunt, CTO

Reuters Health; the NBA; ABC News; The Smithsonian; Sotheby's; IBM; AT&T; OnHealth.com; Pfizer; NYU Stern School of Business; the Internet Shopping Network; Scholastic

Sara Dijak, Director of Client Services

Over 10 years of health care experience from large hospital systems to technology adoption in the clinical setting with a multifunctional and entrepreneurial spirit.

Board of Directors

James Flynn

Jim is General Partner of Deerfield Management, over \$5 billion in assets invested in over 150 companies

Dr. Avi Kometz, M.D.

Partner Ascent Biomedical Ventures; 18 years experience in the healthcare industry

Josh Grotstein

Citigroup, NBC Digital, Prodigy), and CNBC).

Stephen Jackson,

CEO AlignCare, Board MJHS; founded Plan Data Management acquired by TriZetto.

Board of Advisors

Dr. Holly Atkinson, M.D.

Chief of Medical Affairs HealthiNation; Assistant Professor, Mt. Sinai; broadcast medical correspondent NBC, CBS, PBS and Lifetime Medical Television founder, CEO Reuters Health Information

Chris O'Brien

Everyday Health's Senior Vice President and General Manager, Medpage Today. Founded Motionbox, sold to Hewlett-Packard

David Pachter,

Founder and CEO of NearSay and LocalVox; SVP Business Development and Operations at Softcom/IVT; COO at Heavy.com.

Mark Mannino

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Dr. David Bernard,

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and in their homes.*

For more information, please contact us at info@ecaring.com