



Care Coordination Platform (CCP)

Ursamin is a care coordination platform that helps Primary Care Physicians streamline the care journey for complex patients.

Reimagining care operations with Family practices, we can revolutionize care for patients living with multiple chronic conditions, while reducing the administrative burden on, and increasing reimbursements for, physicians



# MY STORY — MOM AND ME



## Why I Created Ursamin's Digital Care Coordination Platform

For 12 years my family and I struggled to help my mom manage her care across 20+ doctors. With 3 chronic illnesses, her care team was huge, as was the amount of work we had to do to just stay in front of it. It was hard for our family to communicate with all of her clinicians. We lacked a consolidated platform to coordinate her care.

Sadly, she ended up passing in 2017 from what was missed communications between the PCP and specialist, yielding unnecessary treatment that her body couldn't handle. It was when her PCP told me she "didn't know" about the treatment, it caught me off guard. Our collective anger and frustration eventually turned to passion to help others not have to suffer the same ongoing frustrations, and even worse ending.

With a 25 year sales career, I tried to find a platform I could sell that would bring the three together – caregiver, patient and provider. It didn't exist...so I decided to build a digital care coordination platform.

Join us in our mission to help clinicians and patients work more easily together and achieve better outcomes through our digital care coordination platform.

**Shannon Aylesworth**

Founder and CEO

## THE PROBLEM

# Multiple Chronic Disease (MCC) Coordination

Average number of doctors

# 12

- Required longitudinal data needed not in the current systems workflow
- Requires inclusion of new critical data points – mental health, RPM, CCM tools
- Family caregiver integral to patient outcomes due to age of typical MCC patient (65+)
- Alternative is expensive care coordinator role – spending time collecting data vs focusing on interventions and support resources for patients

### RESULTS:

**1** Worst Outcomes

**2** High Suicide Rates

**3** Higher Risk of Death



## Primary Care

- Quarterback of Care
- Average # of MCC patients - 750
- Burned out trying to handle it all



## Patient

- 12 doctors/Portals
- @4 visits/year
- Confused on what to do



## Caregivers

- Often MCC
- Plus 1-2 MCC loved ones
- Overwhelmed and frustrated

## THE SOLUTION

# A Digital Care Coordination Platform for **Primary Care Physicians and their Patients**



### PCPs and their Teams Gain:

- Physician Dashboard – practice management metrics
- Cohort stratification for simpler patient engagement planning
- Patient longitudinal data empowers improved reimbursements
- Scheduled education by cohort
- SDOH resources
- Behavioral health visibility



### Patients Receive:

- One login for healthcare information and requirements
- Easy Family and medical Caregiver access
- Consolidated calendar
- Integrated Care plan
- Educational approach tailored to patient preference
- Local SDOH Resources
- Medication Management

## THE RESULTS

# PCP Offices, Patients and Caregivers Gain Significant Benefits



### PCP Offices Gain:

- Streamlined patient management
- Reduced admin burden
- Improved reimbursements
- Increased patient adherence to the care plan
- Increased patient satisfaction
- Better patient support in between appointments



### Patients Receive:

- One location vs. 12
- Family support
- Appointment compliance
- Reduced confusion on care plan
- Education at their pace
- Community involvement
- Provider support throughout journey

### Caregiver Benefits:

- One login name and password
- More quality time with loved one
- Ability to continue working
- Reduced stress
- Education on how to support loved one's disease process
- Support structure from the community

# Why Now?

Timing...



## CURES Act

CURES Act allows Ursamin's Digital Care Coordination Platform to aggregate data from third party National Health Exchanges.



## Workforce Shortage

Nurses and office staff are struggling to coordinate care as patient health continues to decline



## Push towards Value Based Care

Doctors and health systems are incentivized for improved outcomes and patient satisfaction. Poor outcomes are penalized.



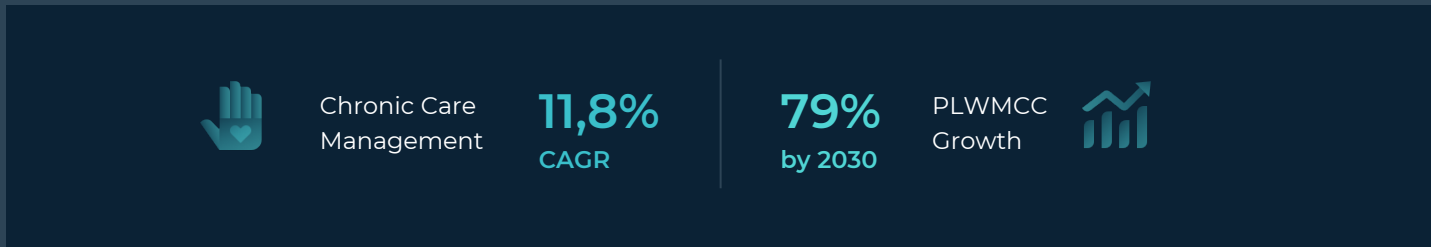
## Remote Patient Monitoring & Chronic Care Management

Ursamin's Digital Care Coordination Platform integrates with RPM devices, enabling physicians to bill for RPM and CCM.

# MARKET OPPORTUNITY



66 million Americans have multiple chronic illnesses growing to 83M by 2023.



# EMERGING COMPETITIVE LANDSCAPE

## EMR Solutions

MyChart



- 
- Provider communication tool
  - Limited patient input
  - Patient still has 1 portal per provider (12-14)
  - Inconsistent patient experience
  - Different values for outpatient vs. inpatient

## Care Coordination Platform



Ursamin

- 
- Provider agnostic
  - Built for both patient and provider user experience
  - Unique approach to workflow (typically takes 3 years to build)
  - Longitudinal patient insights for better outcomes
  - Simple integration for new revenue gen tools

## Care Delivery



MH monogram health

- 
- Focused on patients
  - Manual interventions by extended team
  - Expensive model focused on specific acute care models
  - No data connection to PCP





## BUSINESS MODEL

Physicians and health systems pay a **\$15 PMPM/\$100 PMPA** fee for number MCC patients (average 25%)

Subscription Platform  
**\$15 PMPM**

**B2B**

Physicians get an ROI from the \$15 PMPM per patient in the following ways:

- 1. RPM/CCM revenue:** Physicians can bill an average of \$475 per month.
- 2. Practice Improvement Opportunities** such as Education & Survey distribution (i.e. \$82.76 per patient for education and self management or \$6 per patient mental health questionnaire)
- 3. Value Based Care (MIPS) Shared Savings Program** (10% incentive payment) – Tracking patients progress empowers better insight into population health and insertion points for improved outcomes

## MEETING PHYSICIAN BUSINESS NEEDS IN ANY MODEL

Fee For Service

Value Based Care



Chronic Care Reimbursement



Increase scale of patients



Shared Savings Program



Increase scale of patients



# FINANCIALS

## Year 1-5 Revenue Conservative View

|      | Doctors | Patients Per Doctor | Total Patients on Ursamin |
|------|---------|---------------------|---------------------------|
| 2024 | 10      | 625                 | 6250                      |
| 2025 | 30      | 625                 | 18750                     |
| 2026 | 60      | 625                 | 37500                     |
| 2027 | 100     | 625                 | 62500                     |
| 2028 | 150     | 625                 | 93750                     |

### Assumptions

**\$99**

Per year per patient

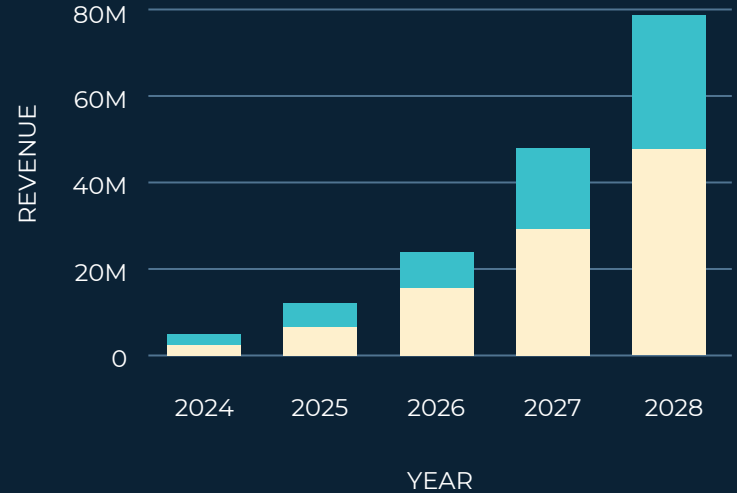
**2500**

Patients as average doctor rate

**9%**

Churn Rate

# 5 YEAR FORECAST



Conservative View - Direct Sales  
Scalability - Payers



**SHANNON  
AYLESWORTH**

Founder 25 Years

- Successful Startup Sales Leader 5x
- Drove Over \$600M new revenue generation for 2 unicorn startups, both \$1.5B exits



**FRED  
KOPLOW**

Digital Health 25 Years

- Specializes in new patient access methods for medical providers
- Upgraded 3 major systems patient access platform covering 7M patients, 80 hospital



**JOHN  
RINN**

Engineering 22 Years

- Development of next gen CRM data platforms
- Over 75 projects integrating systems to maximize access to relevant data



**LEVI  
SPIRES**

Marketing 28 Years

- Founded and sold 2 marketing companies
- Specializes in branding and Content
- Consumer Demand Generation



# TRACTION

- ◆ **January 2024** – **35 Pilots** identified for launch to PCP market
- ◆ **December 2023** – **Project Healthcare** and **Springboard Enterprises** Acceptance
- ◆ **September 2023** – **Fundraising/Advisor/Customer** campaign to PCP community -152 health professionals signed up
- ◆ **June 2023** – **\$200k** Raised from Angels
- ◆ **May 2023** – **Dr. Julie Shapiro** signed to Advisory Board; **South Shore Hospital partnership** on Clinical workflow development
- ◆ **Jan 2023** – **MVP** launched with ongoing testing for patient UI; Launched Provider UI Build
- ◆ **Dec 2022** – Partnership with **Regenstrief Institute**, **Titus Schulyer** and **Dr. Atif Zafar** to develop provider specific data sharing
- ◆ **Nov 2022** – **\$150K** – individual Angel
- ◆ **Oct 2022** – **3000+ consumer surveys** for patient/caregiver feature priority list
- ◆ **Sept 2022** – **Alpha/Beta testing** for UI/UX feedback and onboarding experience



# Thank you!

Please contact us to join us as  
an investor today!



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