



Belong Health

Series A Materials

September 2021

**Local health plans deserve a
partner to deliver fully integrated
care models for their Medicare +
Medicaid (Dual-Eligible)
beneficiaries**

Agenda

- 01** Introduction
- 02** Market Overview
- 03** Belong Health Offering
- 04** Anchor Launch Overview
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Meet Robert, one of our members. We believe he deserves integrated healthcare that’s personalized for his specific needs and keeps him engaged and supported.



Robert: Middle-Aged Dual Eligible Who isn't Engaged in Staying Healthy

- 66-year-old male
- Multiple chronic illnesses: HTN, DM, thyroid disease
- Poverty; difficulty managing money
- Unstable family dynamics



Belong Health is seeking Series A funding that will enable us to deliver a best-in-class Dual-Eligible Special Needs Plan alongside our first partner in our launch market

Anchor Signed

We signed a definitive operating agreement with MVP Health Care on August 23rd, 2021

We will be launching a Dual-Eligible Special Needs Plan January 1st, 2022, with MVP that has an estimated total contract value of

Our new plan will serve their existing market in upstate New York (Hudson Valley and Capital District)

Team Expanding

We continue to build our expert team of operators with a focus on:

- Complex care management and delivery solutions
- Growth and partnership development
- Provider engagement and risk sharing
- Health care analytics
- Health insurance + provider technology

Pipeline is on Track

Our funnel continues to grow at a steady pace and our model is resonating with leading payers and health systems, both of whom represent compelling partners for our proposed offering

Building Tech-Enabled Clinical Model

We are developing a next generation full-stack health plan operating platform, compiling the most innovative approaches from around the market, to deliver our members a superior care model that both supports them as individuals and reduces the cost of care management through proactive whole-person care

Leadership Team



J. PATRICK FOLEY
Co-Founder + Chief Executive Officer

Managed ninth largest MA + DSNP plan in the US @ Cigna-HealthSpring (\$1.5bn in premium) and 5-Star rated MA plan @ Essence Healthcare



DR. JENNIE BYRNE
Co-Founder + Chief Patient Officer

Chief Behavioral Health Officer at CareMore designing Integrated Care Models in advanced primary care



TAHASIN ALAM
Co-Founder + Chief Technology Officer

Co-Founder of Centivo, a leading technology-led insurance platform for self-insured employers



GEN GILLESPIE
Co-Founder + Chief Revenue Officer

Senior sales and strategy leader with national sales responsibility at Lumeris



LEWIS BIGGERS
Co-Founder + Chief Provider Officer

Senior healthcare market operations leader previously managing accountable care at Stanford Health Care



ALON KRASHINSKY
Co-Founder

15+ years experience launching built-for-purpose companies



MAURA MCGINN
SVP, People + Operations

Lead all people + recruitment strategy at Bright Health



NATASHA VANWRIGHT
VP, Care Management

Registered nurse with 20 years of health plan leadership experience



JULIE BEREZ
VP, Partner Operations

Prior leadership experience at RubiconMD and Bain



BRIAN LOVETT
Co-Founder

5+ years experience launching built-for-purpose companies

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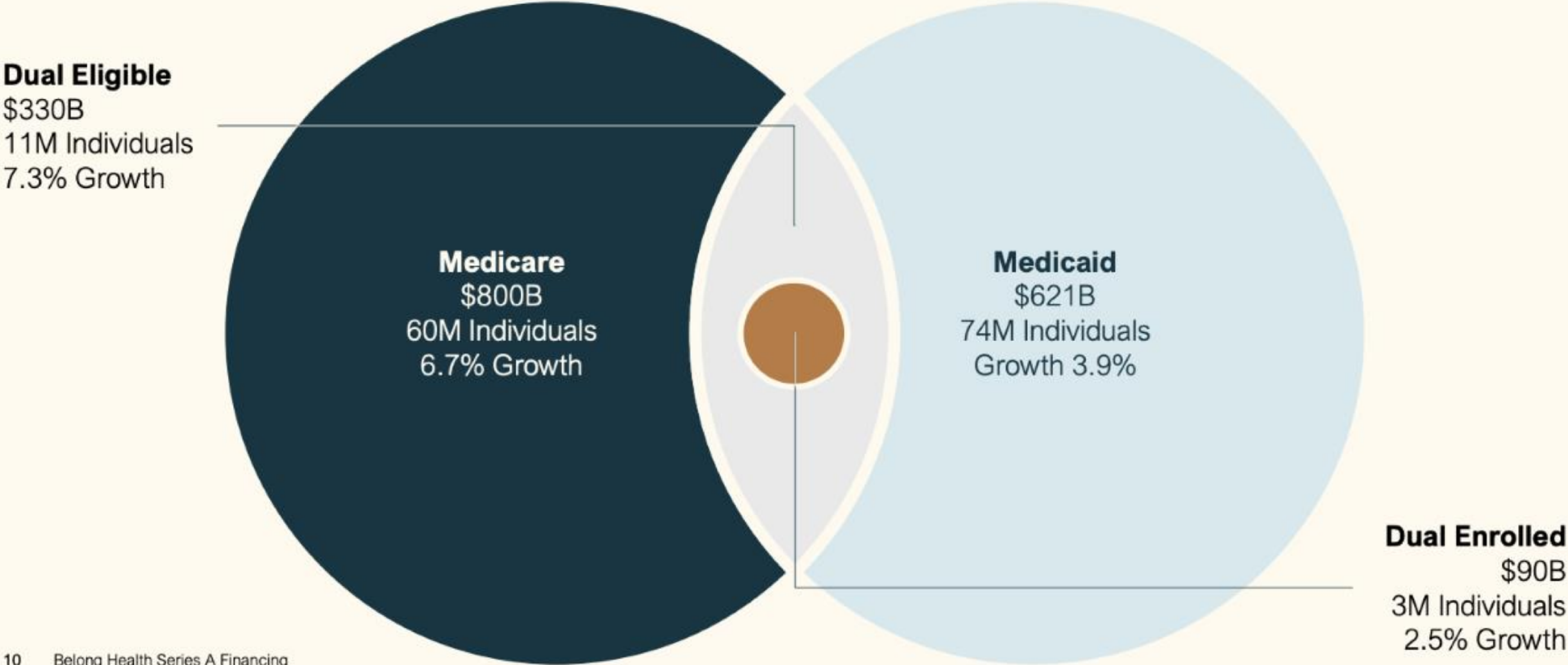
**Medicare Advantage is a
\$320B market with a forecast
5.6% CAGR through 2030**

Congressional Budget Office

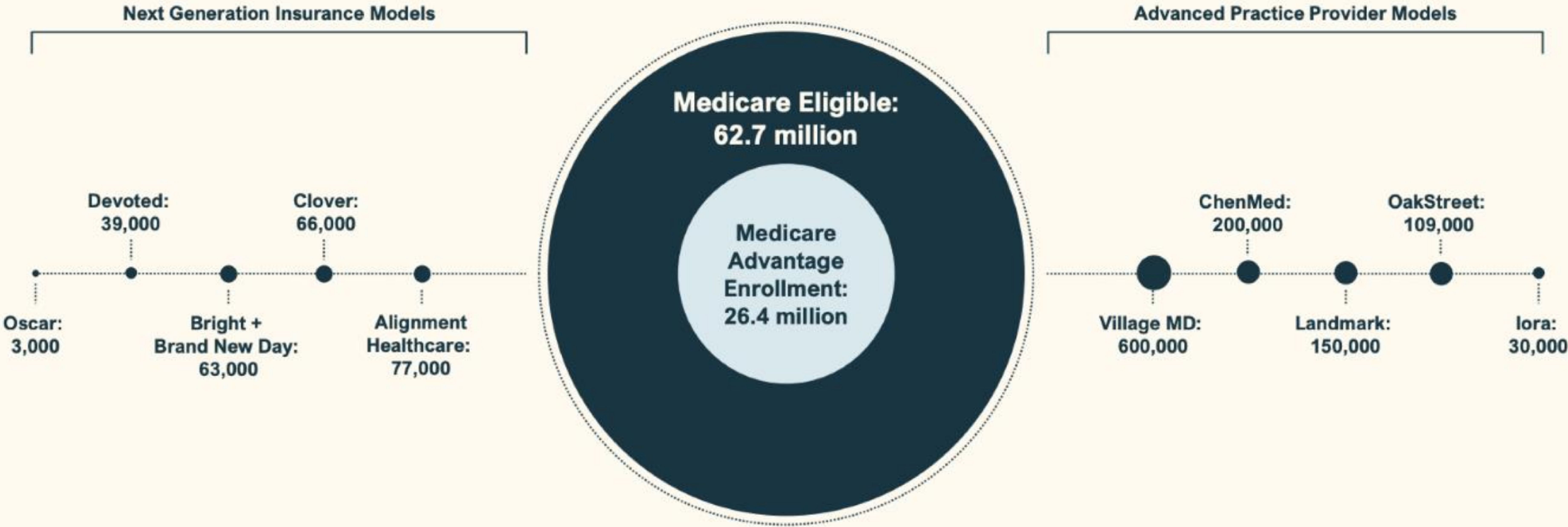
**Age-ins add \$1B in new
annual premium to the
market every 10 days**

*Assumes 10,000 age-ins a day and an average PMPM premium of \$800

In 2019, National Healthcare Expenditure was equal to \$3.8T and is forecast to grow 5.4% per year (1% faster than GDP). SNP eligibility growth currently materially outpacing MA enrollment.



Penetration of innovative healthcare models remains small relative to the total market:



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Our full-stack health plan operating platform delivers the complete set of services, technologies, and clinical assets to supplement a regional partner’s existing infrastructure.



We support our partners with all the required operational competencies to successfully deliver our advanced care model to members



Provider Engagement

- Support providers with analytical tools that deliver actionable insights
- Make it simple for providers to deliver detailed documentation
- Review performance data and share best practices
- Create financial arrangements that align incentives

Managed Services Organization

- Deliver streamlined, technology-enabled administrative services built for today
- Empower in-network providers to migrate to risk-based arrangements
- Support any existing partner infrastructure

IPA Management

- Build provider networks and physician-led governance that rewards top performers
- Verify and monitor provider credentials and drive continuous quality improvement
- Manage care coordination activities and drive patients to top performing specialists and facilities

Sales & Brokerage

- Evaluate and engage partner's existing brokers
- Contract with leading field marketing organizations to supplement broker network
- Contract with new brokers and hire sales professionals as required
- Engage community-based organizations to support grassroots enrollment

**Our clinical
management platform
cares for the member
across all points on the
continuum of their
healthcare needs**



Care Coordination

Superior documentation + best-in-class technology platform ensures the entire care team has the most up-to-date and comprehensive member data to inform clinical decision making.

Care Management

Comprehensive team-based approach drives better preventative care and disease maintenance and results in fewer unnecessary visits and procedures.

Transitions of Care

Works closely with community-based clinical assets (hospitals, SNFs, and other institutions) to safely manage the transition of care between levels of health care and across care settings to ensure members receive the right care in the right setting.

Social Determinants

Evaluates member needs holistically and works with community-based organizations to find ways to address traditionally non-medical needs to reduce care escalation. Integrated solutions for food security, transportation, and housing.

Behavioral Health

Full suite of in-person and virtual behavioral health services and engaged clinicians (Psychiatrists, Psychologists, Social Workers, etc.) to treat behavioral health issues.

Our complementary care delivery assets work to support existing health care infrastructure and support our members where they are



In-Home Care

- Comprehensive clinical model that delivers the right type of care giver to the home as needed
- Seeks to avoid downstream cost by delivering a superior care experience directly to the member, where they are
- Captures more member “health signals” by documenting social and other issues as observed in the members day-to-day life
- Palliative and Hospice level services

Extensivists

- Delivers more intensive clinical oversight and engagement for complex patients with greater needs
- Follows the patient through any inpatient experiences and continues to engage them post-discharge to monitor care plan adherence
- Ensures smooth care transitions by working closely with caregivers help them follow post-discharge care instructions

Other Owned Care Delivery Assets

- Additional provider assets employed to supplement existing provider networks.
- Most likely owned primary care clinics that are specifically built to deliver our high-touch clinical model for members not requiring home care
- One-stop-shop-type asset including primary care, radiology, and high-volume specialties

Our data analytics and technology infrastructure deliver a unique experience for providers and members that power better clinical decision making and behavior



Data Platform

- Ingest a wide range of data sets, stores the raw content in our data lake, cleans and normalizes non-conforming data types, and distributes the data to our analytics platform or our partners' technology platforms
- Includes public, licensed, and proprietary data from sources including: CMS FFS, Medicaid, CMS Roster, partner claims data, licensed third-party claims data, etc.

Analytics Platform

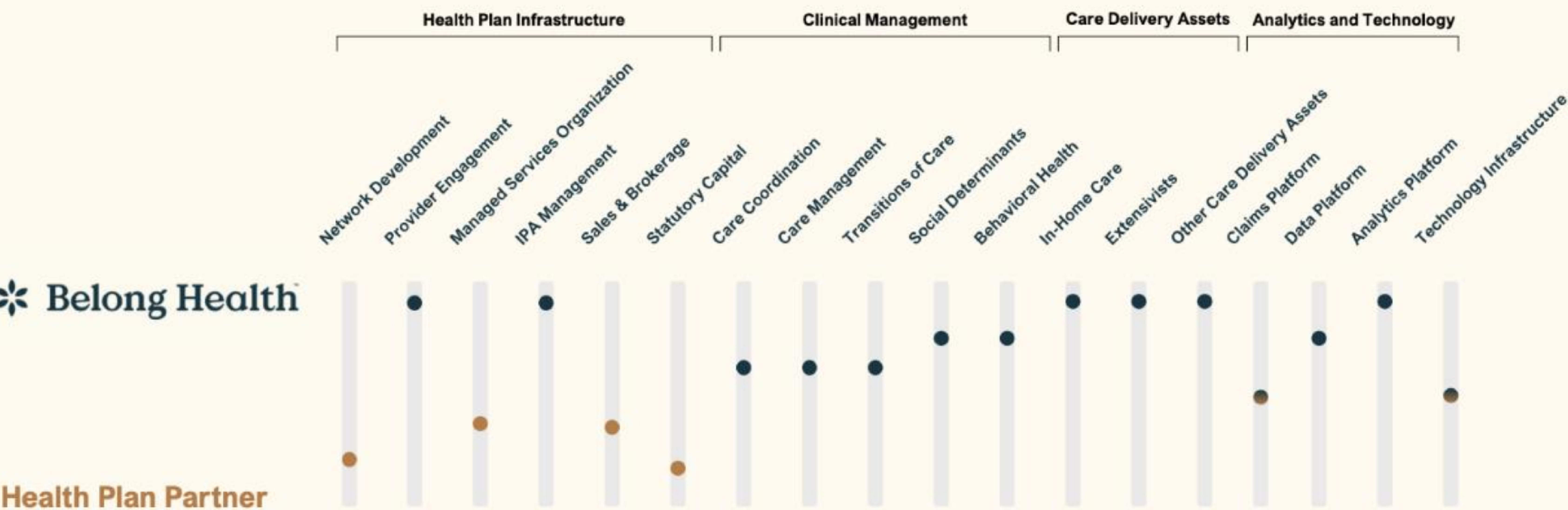
- Market-leading analytics platform provides our end-user with the right data at the right time to make smarter clinical and administrative decisions
- Thoughtfully designed interfaces and dashboards work to provide the appropriate data to inform decisions without overwhelming users with extraneous content
- Enables simple data entry for more comprehensive documentation

Technology Infrastructure

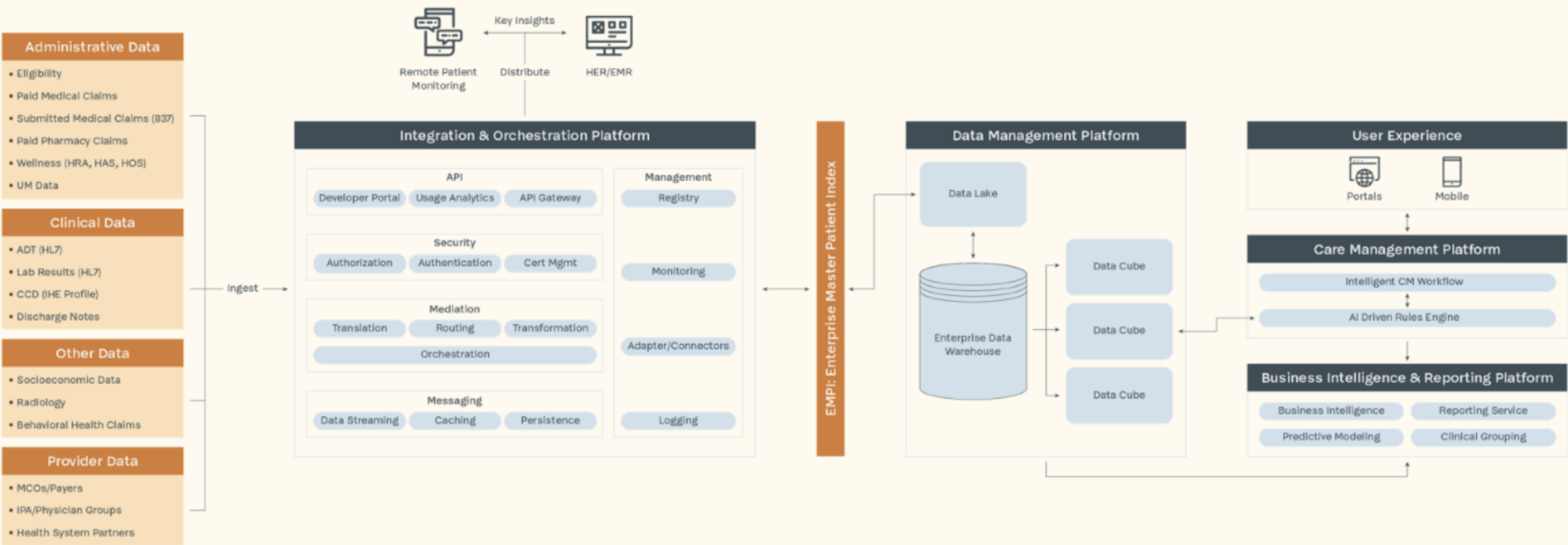
- Advanced health insurance technology platform that supports our data and analytics needs and powers interoperability with our partners' existing platforms
- Cloud-native architecture guarantees robust security, scalability, and cost containment
- Artificial intelligence and machine learning power near real-time prompts and alerts to our care management team at the point of service

Collaborative Approach

The implementation of our full-stack solution depends on the completeness of our partner's offering. We seek to lead across Provider Engagement, Clinical Management, and Care Delivery.



A modern, integrated technology stack is essential to delivering clinical and administrative service and driving a leading patient experience



Our focus on platform flexibility will allow us to integrate with our partners and seamlessly exchange data to develop key insights that we can deliver directly to the point of care including:



- Capability to work with various value-added third-party vendors, such as analytics providers, who can further augment our service offerings
- Ability to interchangeably leverage major cloud vendors — such as AWS, Azure, and Google Cloud — without being tied to any specific vendor
- Proprietary technology suite provides analytics and insights at the point of care by aggregating and analyzing data at the population, provider, and consumer level
- Care Managers and Customer Service Reps work from a single member-centric dashboard that prompts them to act on open clinical, quality, and member experience tasks
- Care Delivery teams are supported in real time with the most appropriate care insights derived from all available data sources and served up through our integration and orchestration platform
- Instead of working in data silos, everyone supporting members and providers can leverage the full breadth of "knowledge" that resides within the health plan, to help care teams save time and money, while maximizing member engagement

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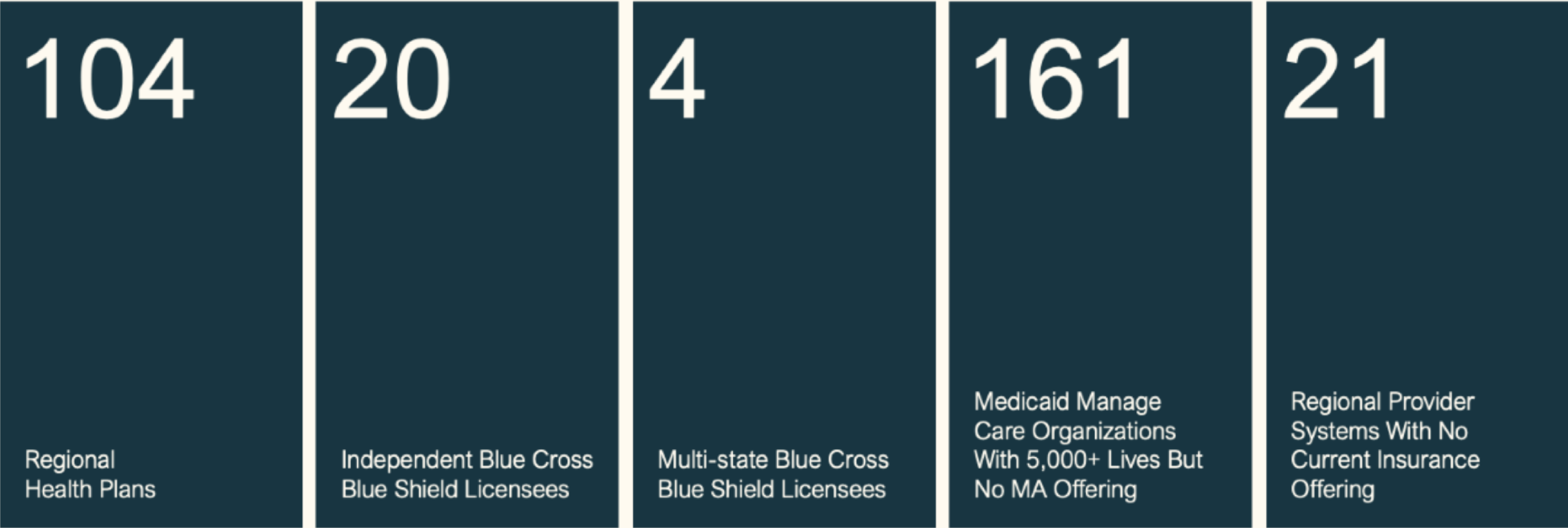
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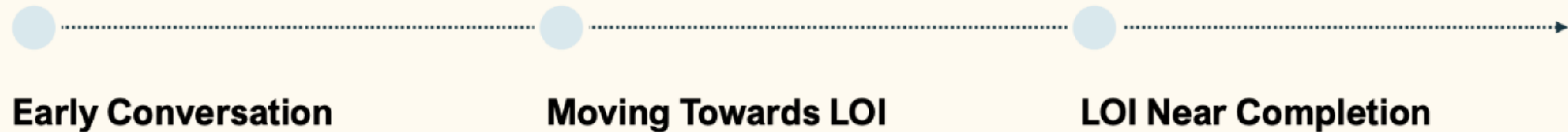
Prospective Partners

Our range of target customers include a mix of regional and multi-state insurance providers and health systems:



Pipeline Update

We're accelerating traction in the market and bringing in world-class leadership to cement a leading position



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