

The Patient, Revealed.

Replacing chaotic data with intuitive Patient Portraits

The Pain

Primary care physicians are overwhelmed by chaotic patient data

33% of EMR time is spend on chart review - making it the number one time consuming activity for physicians

No sufficient technology is available to address this pain

Annals of Internal Medicine

EDITORIAL

Electronic Health Record Time Among Outpatient Physicians: Reflections on the Who, What, and Why

verhage and McCallie (1) add to a growing number of studies that quantify the amount of time outpatient physicians spend using the electronic health record (EHR). They also break down that time by physi-

The second concept is how encounters are counted and used as denominators to generate per-encounter measures. The authors were not able to tie documentation time to individual encounters. Instead, they treated

IUCUJCU.

The study offers specific guidance not only on the "who" but also on the "where" such optimization efforts should be focused. Chart review (33%), documentation (24%), and ordering (17%) combined accounted for almost 75% of EHR time. Although many shortcuts and tools have been developed for the latter 2 tasks (for example, note speed buttons and order sets), chart review stands out as the activity most in need of optimization but with the fewest tools available. Search bars are perhaps the most cutting-edge tool available at

Adler-Milstein, Julia. "Electronic health record time among outpatient physicians: reflections on the who, what, and why." Annals of Internal Medicine (2020).

Overview

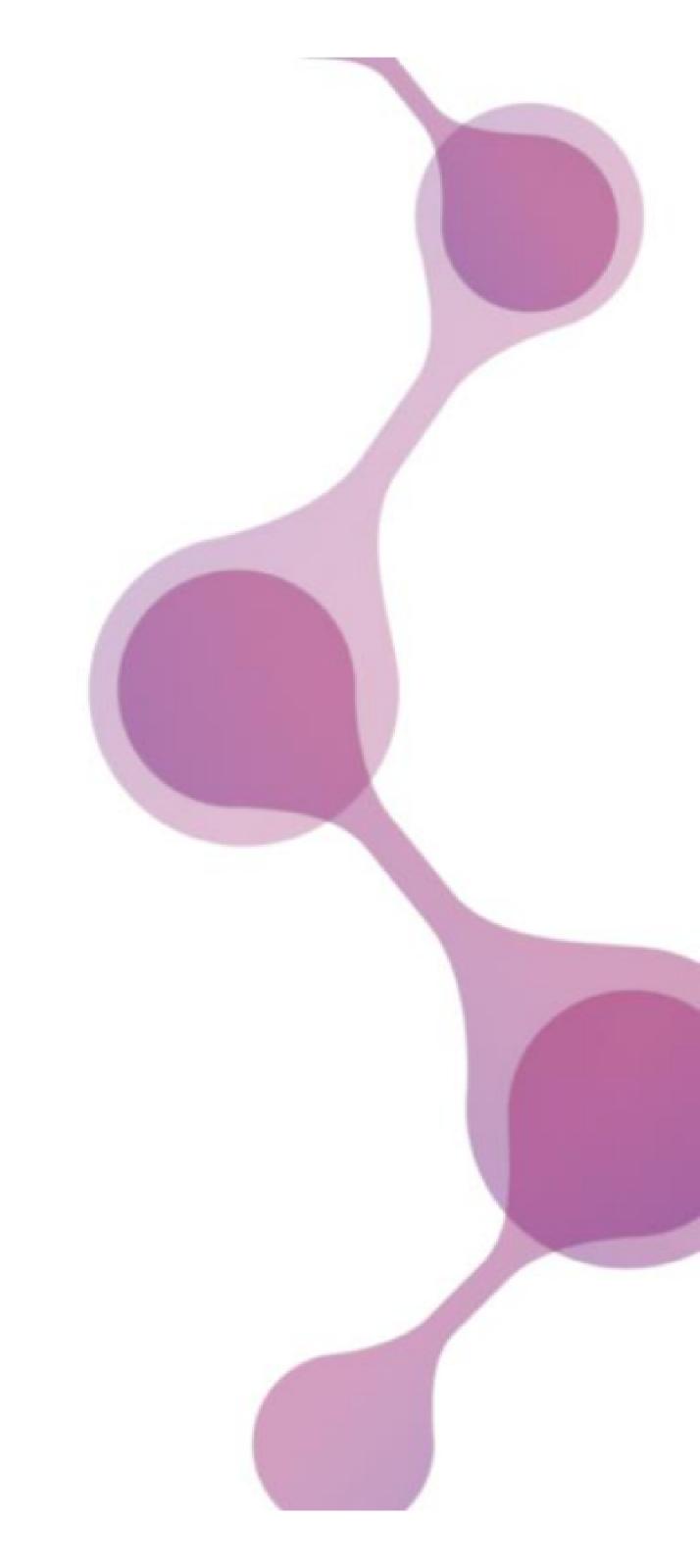
Leadership with a track record of building award winning AI decision support systems for the Military Intelligence

Team of multi-disciplinary experts (technology & medical)

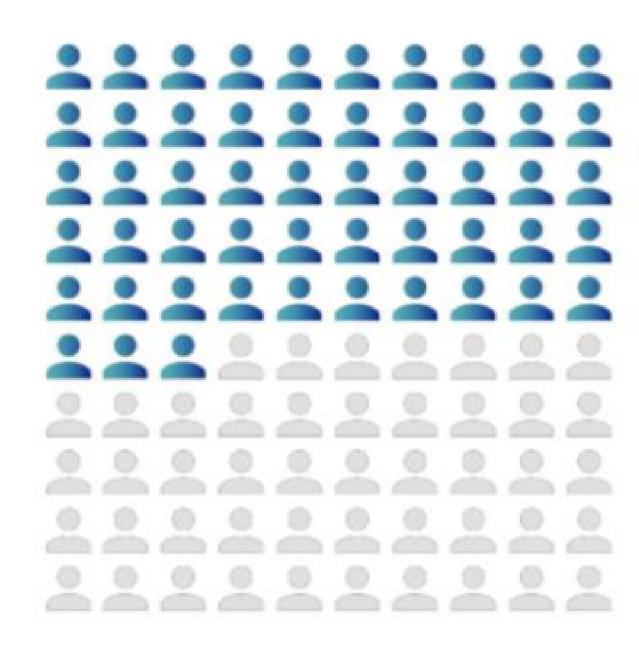
Partnered with HIMSS Davies ambulatory award winner (NOMS) and American Academy of Family Physicians (<u>AAFP</u>)

Proven economic ROI for practice groups and health systems

Significant reduction in missed clinical data and reduced physician burnout



The Big Miss (primary care)



53 out of 100 visits

Will have at least one missed important clinical element*



Physicians are burned out**



\$30B

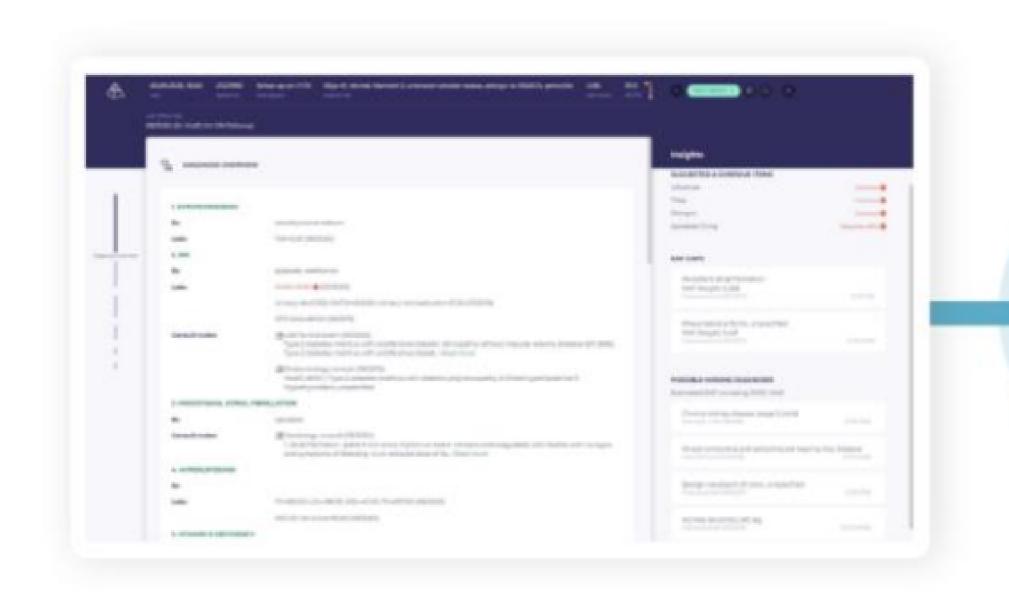
Total potential loss primary care market



^{*}Based on Navina's research and pilots

^{**}Survey of America's physicians conducted on behalf of The Physicians Foundation by Merritt Hawkin 2018

Using Al to create actionable Patient Portraits



Holistic data

We use AI and machine learning to make sure that what's most important is immediately clear, based on the entirety and complexity of each patient's data and history.

Diagnostically linked

Our platform maps the clinical relationships between problems, labs, medications and consult notes, drawing from coding and clinical guidelines.

Actionable insights

Navina highlights abnormalities, possible missing diagnoses, quality metrics and RAF gaps, at the point of care, supporting value based-activities.

Economic value for primary care doctors, multi-specialty groups & ACOs

Providers are increasingly transforming to Value Based Care insurance plans

Income depends on performing an accurate assessment of patients' Risk Adjustment Factor (RAF)¹



⁾ RAF – Risk adjustment factor, The RAF is a relative measure of the probable costs to meet the healthcare needs of the individual beneficiary. The RAF is used to adjust capitated payments for eneficiaries enrolled in VBC insurance plans.

⁾ HCC - Hierarchical condition category (HCC) coding is a risk-adjustment model originally designed to estimate future health care costs for patients. Each HCC is mapped to an ICD-10 code. Along vith demographic factors (such as age and gender), insurance companies use HCC coding to assign patients a risk adjustment factor (RAF) score

Better Together

Working closely together since 2012
Won the national security award for AI breakthrough
Navina is our 11th joint project





RONEN LAVI

- Retired Lieutenant Colonel from the IDF, 8200 unit 24 years
- Artificial Intelligence and Cybersecurity experience
- Established and led the IDF's new Al lab that developed decision support system for frontline decision makers



SHAY PERERA CTO

- Retired Major of the IDF, Elite Intelligence unit 10 years
- CTO and head of AI research group in Ronen's department
- M.Sc. in EE specialized in Deep Learning & Computer Vision
 Including Data Science background



Our Management - Vast Healthcare Experience



KFIR OVED, PhD

Co-founder and CTO at MeMed Dx, leading development of tech suite to validation. Listed among top 25 voices in Precision Medicine announced by BIS Research



YAIR LEWIS, MD, PhD VP Medical

Board certified in Internal Medicine. MD from the Hebrew University and PhD in Molecular Biology from the Technion.



MAOR ADLIN VP Business

10+ years experience in global sales, operations, marketing, and business development in the US healthcare market



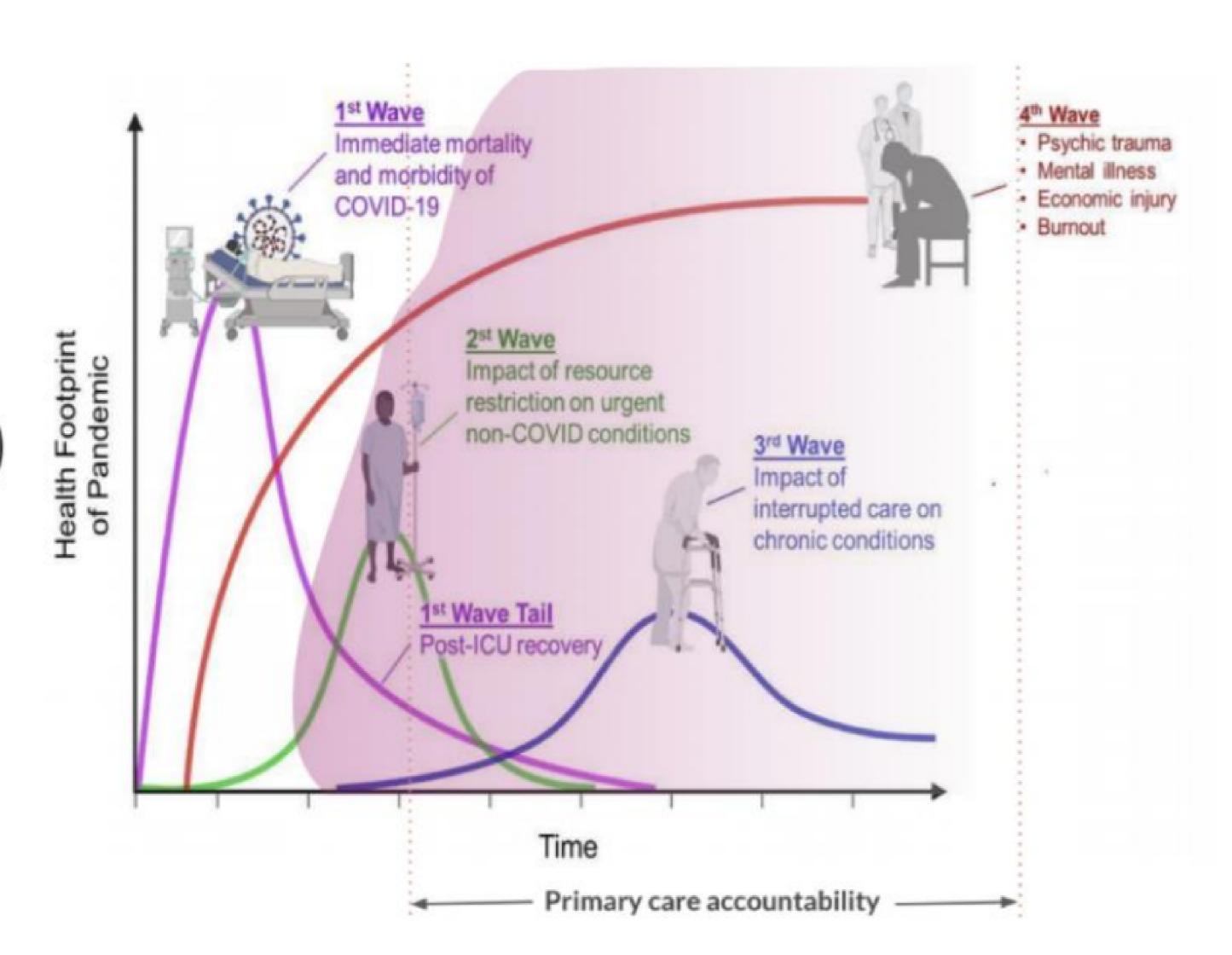
ROTEM BEN DAVID VP Product

10+ years in healthcare product management, including signal processing and ML experience in both B2B and B2C



Navina is more valuable in the post-COVID era





Significant increase in primary care visits

Data access - crucial for telemedicine

Growing adoption of value based plans

Improving efficiency is a must





Thomas



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