

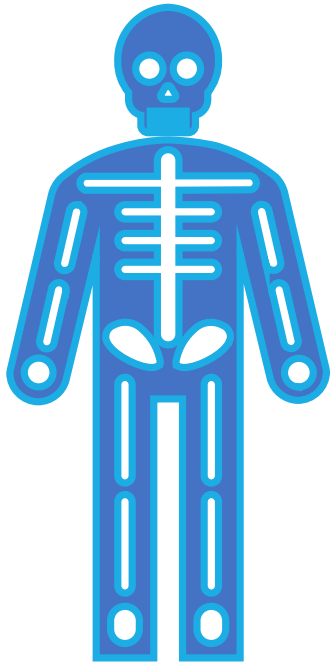


# Reducing Health Care Costs Through Better Patient Outcomes

*Pegwin Insights™ is an Artificial Intelligence (AI) platform used to prevent costly medical complications and patient harm while improving hospital financial performance.*



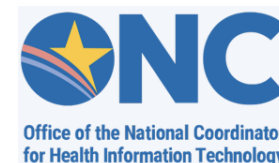
# PROBLEM



## *Patient Death Within 30 Days After Surgery*

The 3rd leading category of  
mortality worldwide:

*Preventable By Early Detection of  
Postoperative Patient Abnormalities*





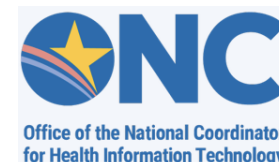
# There Is A Global Unmet Need For Addressing Complications After Surgery

*The 3rd leading category of mortality worldwide... In the US alone:*

70% of surgeries have complications →  
**30 million patients**

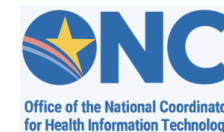
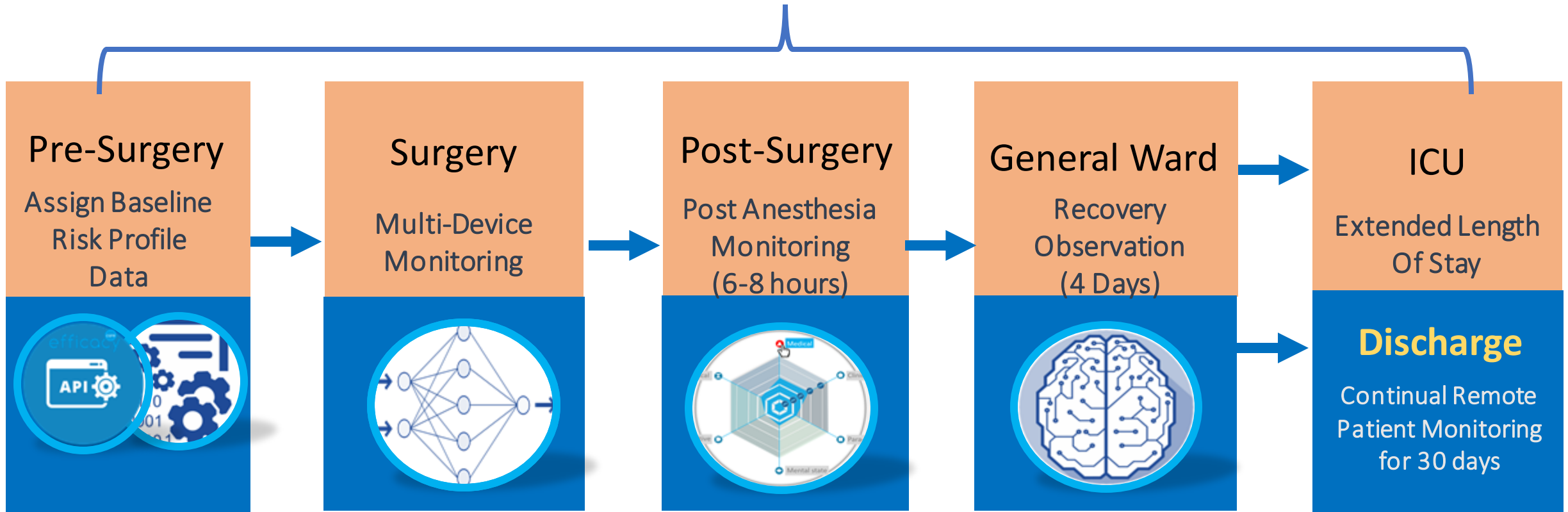
19% of surgeries end with fatalities within  
30 days → **5.7 million patients**

**70%** of complications occur within  
**6-8 hours** after surgery





# Early Detection Leads to Timely Intervention





The preliminary study performed on >**15M randomized observations** (SMART DST2; SMART STU3; MIT, Harvard, Boston Children's Hospital) showed completeness, computability, and accuracy of the raw data sources (Fast Healthcare Interoperability Resources - FHIR).

### RESULTS:

Cross-validated (70/30) **AI-Driven model** demonstrated good discrimination for unplanned ICU Admission - AUC 0.90; 95% CI, 0.76-0.94) and **performed as well, or better than the current models** (C statistic ranges: 0.56– 0.74).

The model calibration across different risk categories showed a **close association of predicted and observed outcomes –**

AHRQ Patient Safety Indicators:

\* PSI 11 - Postoperative Respiratory Failure Rate

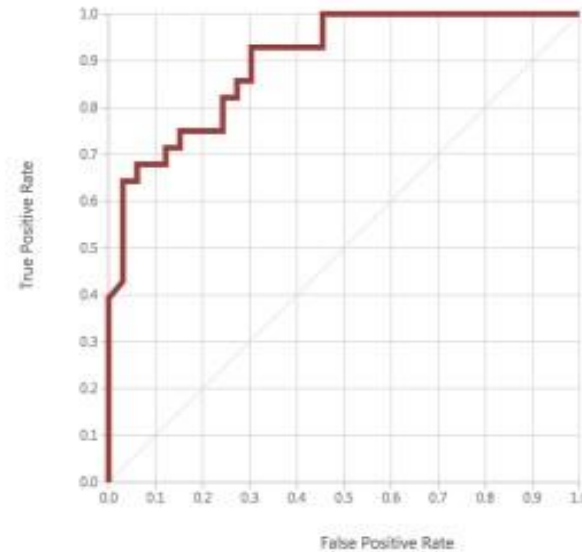
\* PSI 04 - Death Rate among Surgical Inpatients with Serious Treatable Complications

### Data citations:

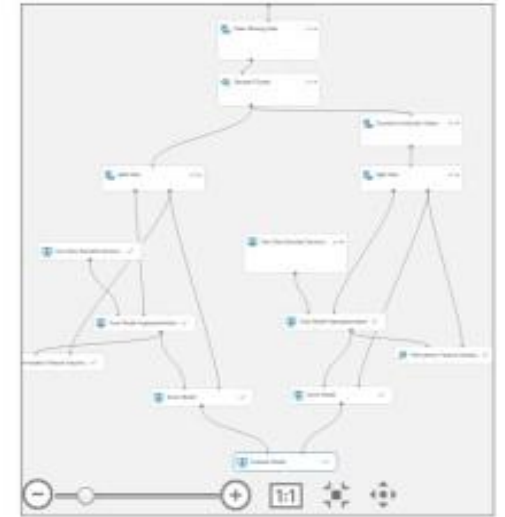
- <http://dx.doi.org/10.13026/C2XW26>
- <http://dx.doi.org/10.1155/2014/781670>

*Pegwin Proprietary and Confidential Information*

# Proof of Principle

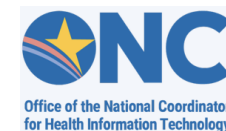


Scored dataset  
Scored dataset to compare



True Positive	False Negative	Accuracy	Precision	Threshold	AUC
18	10	0.820	0.947	0.65	0.900
False Positive	True Negative	Recall	F1 Score		
1	32	0.643	0.766		
Positive Label	Negative Label				
1	0				

Score Bin	Positive Examples	Negative Examples	Fraction Above Threshold	Accuracy	F1 Score	Precision	Recall	Negative Precision	Negative Recall	Cumulative AUC
(0.900,1.000]	14	1	0.246	0.754	0.651	0.933	0.500	0.696	0.970	0.012
(0.800,0.900]	3	0	0.295	0.803	0.739	0.944	0.607	0.744	0.970	0.012
(0.700,0.800]	0	0	0.295	0.803	0.739	0.944	0.607	0.744	0.970	0.012



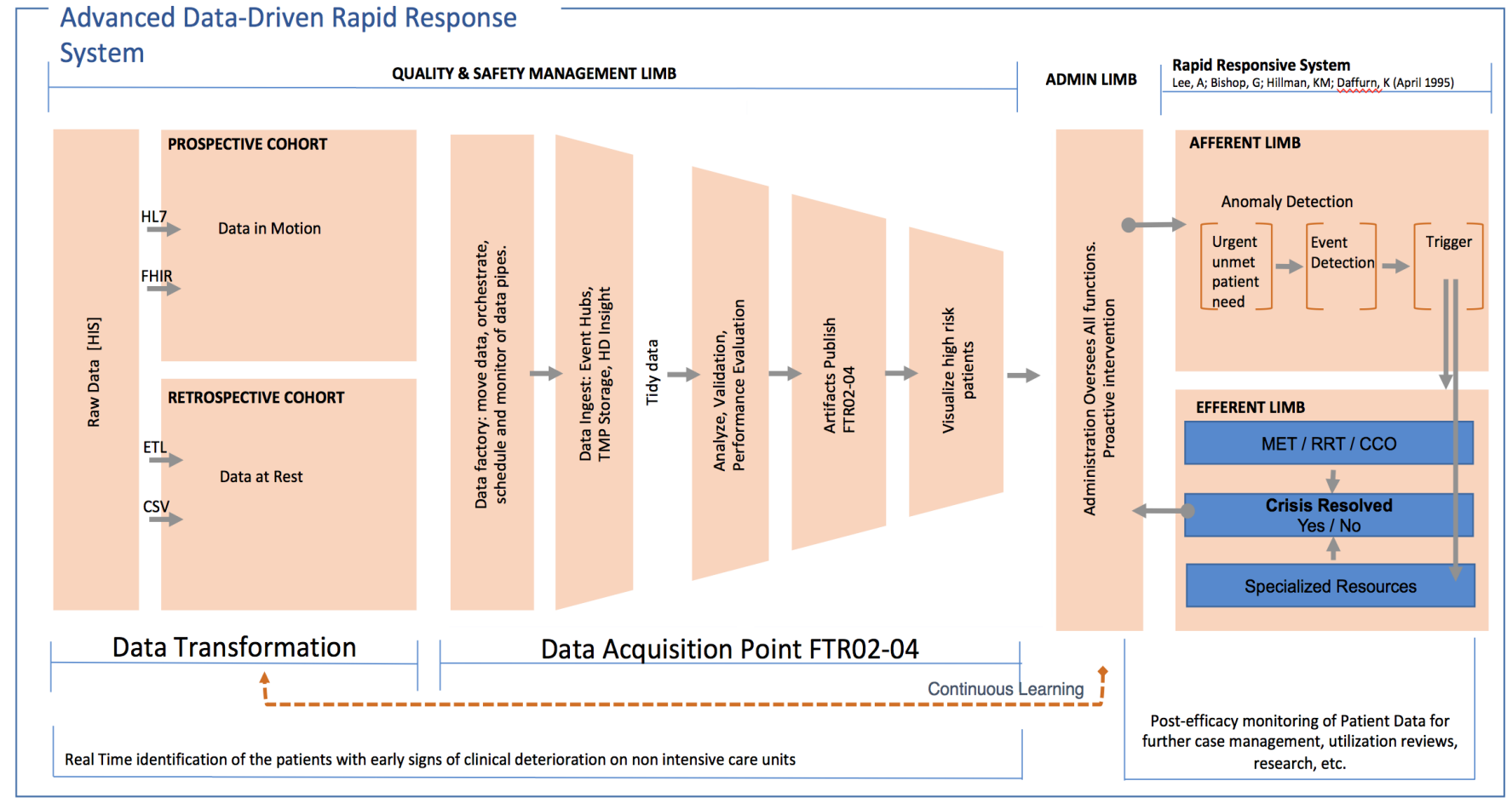


# Continuous Health Data Monitoring in Opioids Induced Respiratory Depression in Post Operative Patients

## Primarily focused on patients:

- All admissions
- In risk meeting OSA criteria
- Likely to result FTR indicators
- Likely to result in a RRT being called
- Likely to be readmitted within 30 days

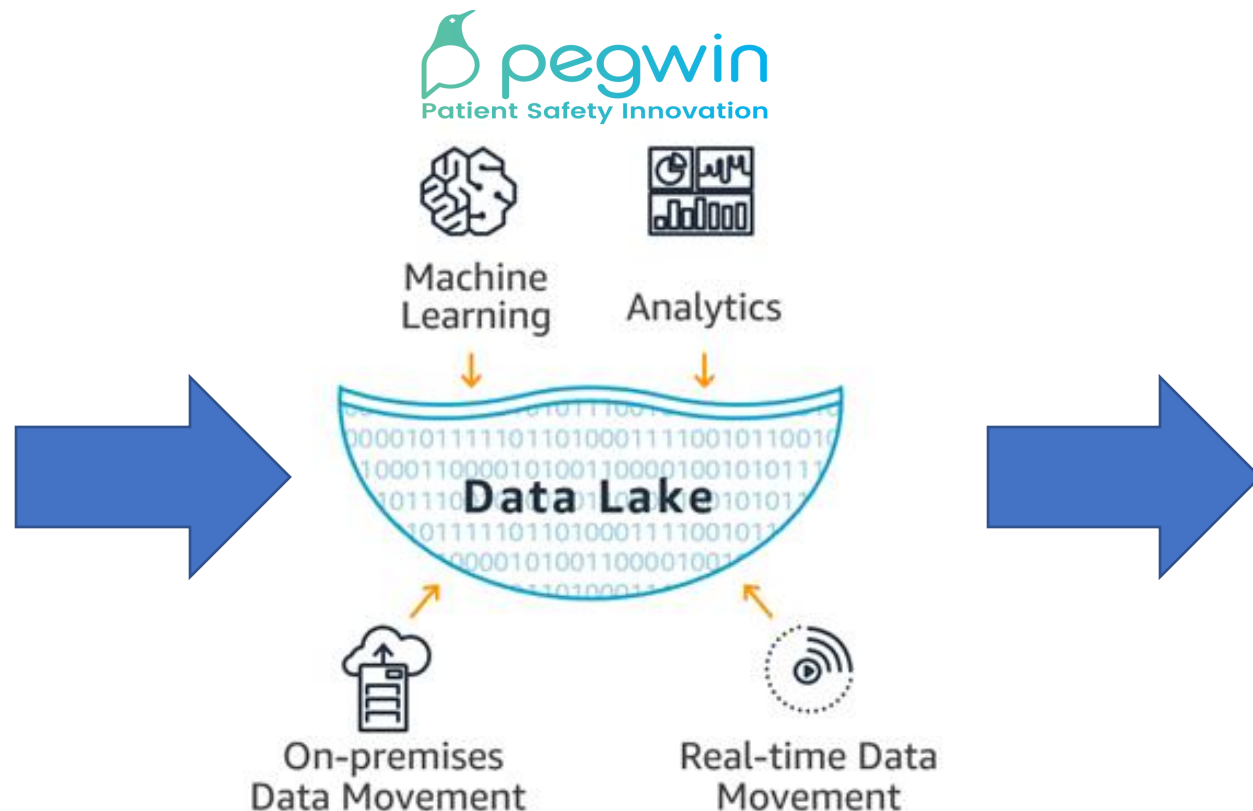
- Pneumonia
- Sepsis
- Cardiac Arrest
- Respiratory Distress
- Pulmonary embolism
- DVT



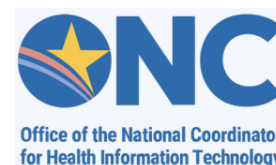


# Billions of Data Points & Thousands of Patient Records Power Pegwin's Engine

- Radiology
- Pharmacy
- Laboratory
- Observations
- Vital Signs
- Telemetry



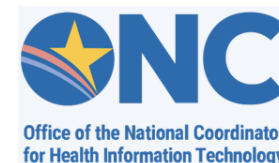
Augmented Intelligence  
Predictive Models of Patient Deterioration  
to  
**Intervene and Prevent**  
Complications  
After Surgery





# Compelling Value Proposition

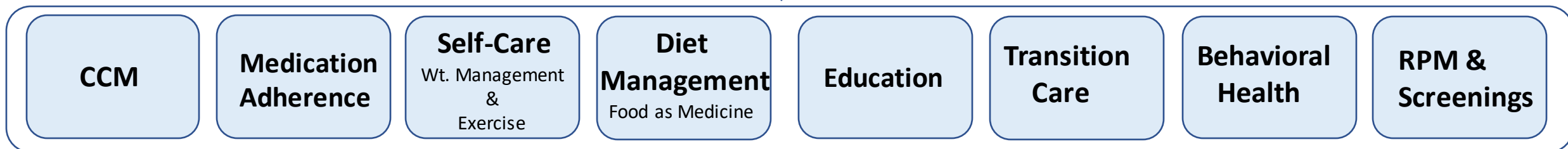
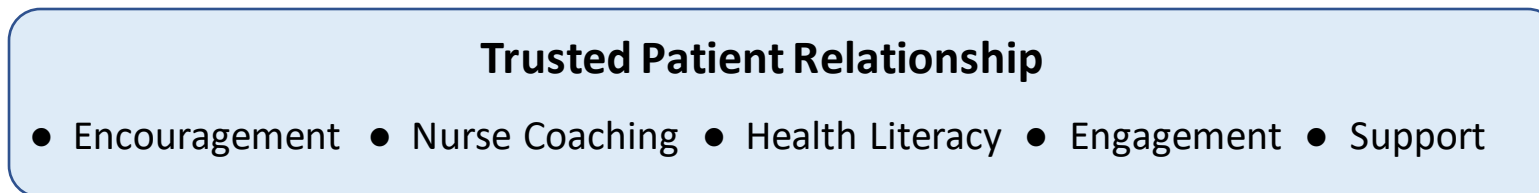
- **Prevent Medical Complications** Through Early Detection
  - Significant **Hospital Revenue** Source - With High Gross Margins
  - Substantial **Cost Reduction** - Improves Hospital's Bottom Line
  - **Better Patient Outcome** - Through **Improved Safety**
  - Addresses **Potential Racial Bias** - From Clinical Prognosis
- **Huge Market Opportunity**
  - Today: Improving Hospital Financial Performance and Patient Outcomes
  - **Future**: Total Care Management, Ambulatory Surgical Centers (ASCs), Long Term Care (LTAC) Facilities, Remote Patient Monitoring (RPM), Chronic Care Management (CCM), Behavioral Health







# Our Comprehensive Approach to Care



TVP-Care provides “In-Home” primary care for patients without providers

The focus is on patients requiring that extra touch at home!!



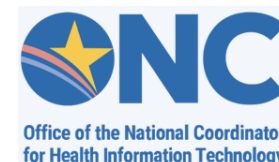
Community-based care by training lay caregivers to become paid “clinical staff”

Fewer Hospital Admissions and Lower Patient Costs



# Reducing Costs Through Better Patient Outcomes

- **Reduced Hospital Costs**
  - Reduce Length of Stay
  - Reduce Admissions to the ICU
  - Reduced Procedural Costs
- **Reduced Payor Costs**
  - Patient, CMS, Insurance
  - Reduced Patient Length of Stay
  - Reduced Admissions to the ICU
  - Reduced Surgical Costs
- **Lower Overall Healthcare Costs**
- **Increase Hospital Bottom Line**
  - Increase Surgical Procedural Profit in Fixed Cost Payment Model
  - Preserves Hospital Revenues Though Improved Quality Scores
  - Reduce Penalties For Patient Harm
  - Reduce Caregiver Burnout/Turnover
- **Patient**
  - Better Outcomes
  - Increased Patient Satisfaction





# Pegwin Overview

- **What:**

- Digital Health IT Company

- **How:**

- Using AI To Establish Custom Patient Baselines Through Analysis Of Specific Patient Demographics And Records With A Cross Referenced Data Lake

- **Use:** Detect Early Deterioration Prior To A Complication In A Patient's Condition To Minimize The Treatment Costs Of The Patient

- **Result:**

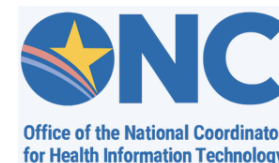
- Improve Bottom Line Through Better Patient Outcomes

- **Technology:**

- Machine Learning and Medical AI
  - Retrospective Study to Validate AI Engine
  - Two ONC Awards
  - Large Cancer Hospital Study to Validate AI
  - Provisional Patent Filed

- **Why Pegwin**

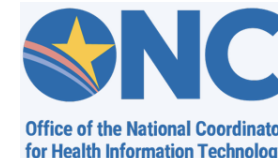
- *The Premiere Cancer Research Hospital Validating Pegwin Technology.*
- Active Customer Deal Flow
- Low Cash Requirement





# Compelling Hospital Financial Proposition

Single Texas Hospital Example					
<b>Pricing / Pegwin and Hospital</b>					
Pegwin Revenue Per Surgery (Hospital Cost)			\$150		
Pegwin One-Time Installation Fee			\$250,000		
Hospital Revenue Per Surgery for Pegwin Service (paid by payor)			\$250		
<b>Complication Cost Assumptions and Calculations</b>					
Hospital Complication Rate <sup>1</sup>			18.05%		
Average Cost per Complication <sup>1</sup>			\$ 13,298		
Texas Hospital Average Monthly Surgeries			1,000		
Average Number of Monthly Complications			181		
Average Total Cost of Complications			\$ 2,400,668		
<b>Complication Cost Reduction Assumptions / Calculation</b>					
Projected Pegwin Complication Reduction Rate			20%		
Average Number of Monthly Prevented Complications			36		
Average Monthly Savings due to Reduced Complications			\$ 478,743		
<sup>1</sup> Costs and complication frequency based 6,387 patients across 14 different complication categories.					
<b>Month</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>...</b>	<b>Year 1</b>
<b>Cash Outflow</b>					
Pegwin Cost to Hospital	\$400,000	\$150,000	\$150,000		\$2,050,000
<b>Cash Inflow</b>					
Hospital Revenue (Charge for Pegwin)	\$250,000	\$250,000	\$250,000		\$3,000,000
Hospital Savings (Reduced Complications)	\$ 480,134	\$ 480,134	\$ 480,134		\$5,761,604
	\$ 730,134	\$ 730,134	\$ 730,134		
<b>Bottom Line Impact to Hospital</b>	<b>\$ 330,134</b>	<b>\$ 580,134</b>	<b>\$ 580,134</b>		<b>\$6,711,604</b>

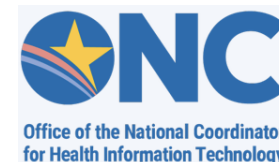




# Financial Projections

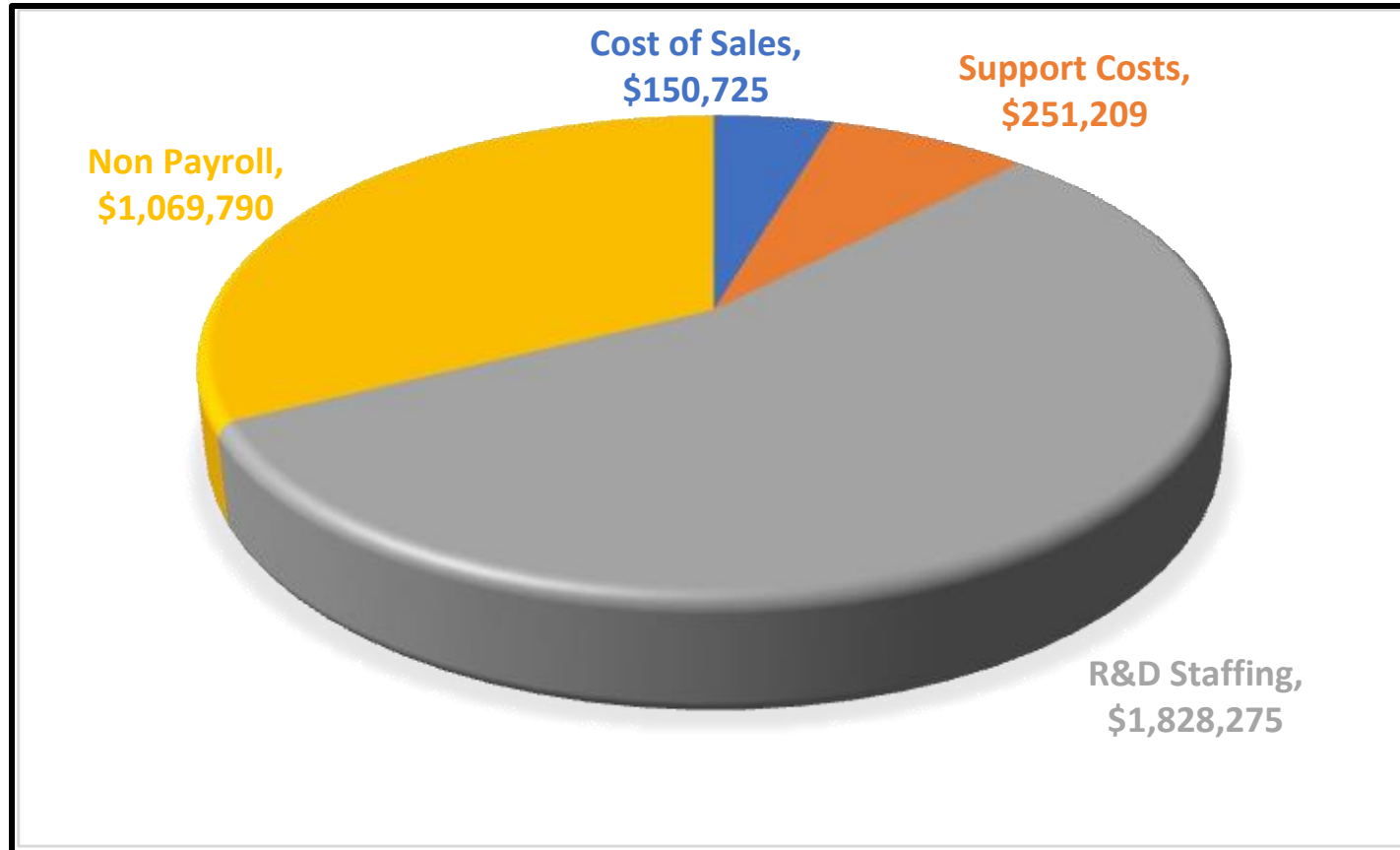
	2024	2025	2026	2027
<b>Revenue</b>				
<i>Hospitals</i>	1	8	32	56
Recurring Hospital Revenue	\$ 272,500	\$ 4,547,500	\$ 21,390,000	\$ 45,150,000
Ambulatory Surgery Centers	\$ -	\$ -	\$ -	\$ -
Long Term Acute Care	\$ -	\$ -	\$ -	\$ -
Remote Patient Monitoring	\$ -	\$ -	\$ -	\$ -
Total Care Management	\$ -	\$ -	\$ -	\$ -
<b>Total Revenue</b>	<b>\$ 272,500</b>	<b>\$ 4,547,500</b>	<b>\$ 21,390,000</b>	<b>\$ 45,150,000</b>
<b>Cost of Goods Sold (Support, Sales, Installation)</b>	<b>\$ 78,460</b>	<b>\$ 1,119,460</b>	<b>\$ 5,090,640</b>	<b>\$ 10,222,800</b>
<b>Operating Expenses</b>				
Personnel Expense	\$ 785,417	\$ 2,278,333	\$ 3,036,667	\$ 3,315,000
Non Payroll Operating Expenses	\$ 596,244	\$ 903,868	\$ 1,454,598	\$ 1,007,850
<b>Total Operating Expenses</b>	<b>\$ 1,381,661</b>	<b>\$ 3,182,201</b>	<b>\$ 4,491,264</b>	<b>\$ 4,322,850</b>
<b>Net Cash Flow</b>	<b>(\$1,187,621)</b>	<b>\$ 245,839</b>	<b>\$ 11,808,096</b>	<b>\$ 30,604,350</b>

Revenue Opportunities Not in Finance Model





# Use of Funds



## Funding Request

- Convertible Note of Equity
- Funding Required
  - \$3.3.M



# MANAGEMENT TEAM



**Chris Melson**  
MBA  
CEO



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MA, CQIA, Maj. (Ret.)  
Founder, President



**Richard W. Walker, Jr.**  
MD, MBA, IFMCP  
Chief Clinical Officer



**Paul Barach**  
MD, MPH, Maj. (Ret.)  
Chief Medical Officer



**Nadav Lankin**  
MCA  
Chief Data Scientist

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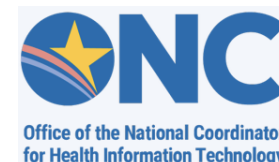
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**Denis DeBakey**  
Principal, DeBakey Financial Resources.

**Frank D. Perez**  
CEO Sfile, Inc.

**Stanley S. Labovitz, JD**  
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