

Healthy Reentry

1-833-PAT1ENT

Most people re-entering society from prison carry new chronic conditions developed during incarceration.



Intake Healthcare Assessment

"No current Health Problems"

Discharge

Asthma
Pre-Diabetes
Chronic Low-Back Pain
Dermatitis
15 Prescription Meds



The Problem

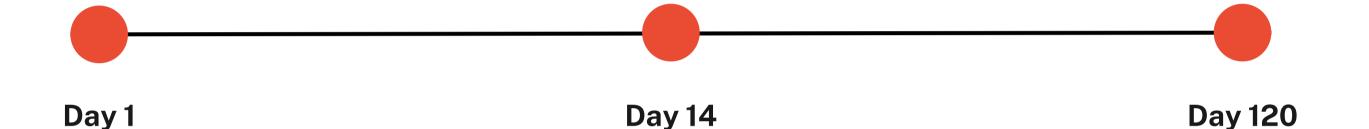
Formerly incarcerated members of our community do not have access to healthcare upon release.

The emergency room is the only option to receive any type of treatment for ongoing healthcare needs

These visits **cost insurance companies billions** per year.

Example - Post-Release Timeline

Navigating healthcare is hard for returning citizens to juggle upon release in addition to housing, employment and other parole requirements.



Leave prison with 30 days medication, usually 2+ Rx (health record rarely provided).

IF enrolled, insurance coverage kicks in. Coverage is needed to schedule medical appointment.

First available doctor's appointment, typically, if patient isn't refused. Doctors can (and often do) legally refuse formerly incarcerated, citing safety risk.

Consequence of failing to schedule a doctor's appointment or missing an Rx script:

by parole officer, potentially more prison time

Patient Sortal is turn-key healthcare with hope for the formerly incarcerated.







Enroll

6-12 Months Pre-release

Our reentry team works with Reentry Staff, Probation and Parole to identify returning citizens with ongoing healthcare needs to enroll them into our healthcare services.

Plan & Schedule

Release

- We aggregate previous health records
- Perform risk assessments
- Determine SDOH & Self-Sufficency
- Identify ongoing medical needs
- Develop an individualized, preventative, data-driven plan of care
- Schedule all appointments with compassionate healthcare providers

Continuous Care

24 Months Post-release

Our clinical team provides primary care and care management services monthly for up to 24 months post release with a goal for members become self-sufficient and avoid the ER

Current Traction





Contracted with Payors in: PA, DE, NJ, MD, AZ, and D.C.





28 Signed Contracts

(every state prison is calling us to get started, we need investment to staff and execute)

Contract Value: \$130M Revenue / year

With Current 510 enrolled patients: Expect to hit \$300K+ monthly revenue by end of year.

Opportunity



630,000Returning Citizens / Year



\$4B Revenue Unclaimed / Year



\$12B
Cost Savings / Year for
Insurance Payors

\$50B TAM

Business Model

We make money 3 ways from Medicaid and Medicare insurance payors

\$2,506

/patient/year

Healthcare Services

- New Patient History & Plan
- Lab and Rx Review
- Preventative Care Plan
- Monthly Established patient appointments for Rx refill and chronic care management

\$300-800

/patient/mo

Care Management

- SDOH Assessment
- Self-Sufficiency Matrix
- Chronic Disease Education
- Medication Management
- Care Coordination & Referrals

\$18k-\$20k

/patient/quarter

Value-Based Contracts

- Improved Clinical Outcomes
- Reduced
 unnecessary
 Emergency Dept.
 visits
- Meeting Performance measures (HEDIS Measures)

Patient Sortal Leadership



Kenny Eck MS, MS Founder & CEO

Clinician, serial founder, farmer's grit



Saad Soliman
Chief Growth Officer

First formerly incarcerated leader hired by US Department of Justice



Jennifer Frangos, DO

Medical Director

Licensed in 50 states & D.C. 18 years as Physician



John Chomeau, MPH
Chief Operating Officer

President/COO of Fortune 50 National Medicare Division



Tommy Stretch BSNCo-Founder & CTO

Registered Nurse for 10 years Health IT Developer



Cam BriedenChief Finance Officer

Fractional CFO for impact driven companies, Founder, and Operator

We're raising \$3M to get to \$3M MRR by 2025.

We need growth capital to hire and execute on our contracts

Looking for partners who:

Operators
Understand healthcare
Access to Growth Capital
Passion for our cause



Thank you!

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