

Closing Care Gaps Is Impossible

Healthcare Systems and Payors only close 20% of care gaps per year

- This is costing the US healthcare ecosystem \$200-\$400 billion per year
- 100,000 preventable Americans deaths each year from lack of care gap closure
- Why is this happening:
 - Massive healthcare workforce shortage of **3.2M** workers
 - The cost to close gaps is too high for current economic models
 - The processes and approaches are not intuitive and many do not know how

An Innovative Workforce Is The Solution

Over 1 million US clinical students—from nursing, social work, pharmacy, and more—form a scalable, remote workforce that closes care gaps at half the cost, twice the speed, and with industry-leading quality.

The Infrastructure That Enables The Work

The only solution for clinical students to work remotely for healthcare organizations — safely and on their schedule through Grapefruit Health We are B2B tech-enabled healthcare services

We are *NOT* staffing, a marketplace, or outsourcing

Tasks

Hundreds of failed experiments to land on the final design of high-value work that must be

- 100% remote
- Does not require a clinical license
- High-volume with margin
- Repeatable
- High ROI for client AND student

Systems

Built and integrated everything needed to make this company work

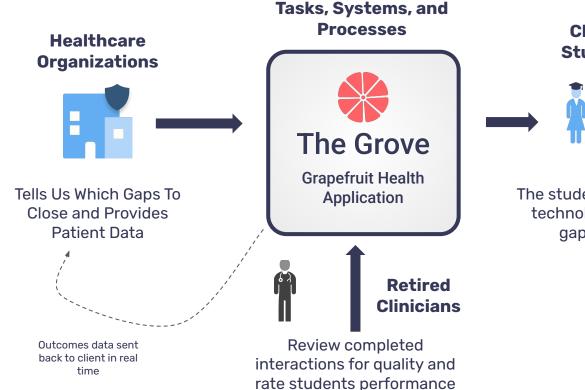
- 100% proprietary web-based application where all the work takes place
- Security and compliance vendor integration
- HR vendor integration
- Proprietary QA system on patient interactions
- Data analytics

Processes

Perfected and automated the steps needed to be successful in delivery and scale

- Automated student recruitment 12k+ applicants
- Automated student onboarding
- Self-guided and live training mix
- Semi-automated student management

How Does It Work





The students utilize the technology to close gaps in care

Perform Interactions Remotely



Patients get the care they need and their care gaps are closed

How We Can Help

We can deploy our solution to close any care gap that is high in volume and repeatable



Why Clients Love Us

1. Perfect Workforce For Gap Closure

- Half the cost of full-time staff
- Bridge the gap between a team's capacity and variable increases in task volume
- Seasonal and adhoc needs do not impact cost like it would traditionally
- Turns a fixed staff cost into a per gap/variable cost that is tied to additional cost savings or revenue

2. Novel Talent Pipeline

- Create strong relationships with our students
- Students learn Client organization's culture, how they operate and the patient population
- Opportunity to recruit the very best students as they graduate

3. No Integration Needed

- We use all of our own technology
- Take in data via simple file transfers
- Can integrate or use one of our innovative solutions such as direct messages or transcription
- Escalate via warm transfer or EMR secure messaging

How We Charge

Innovative Pricing



Hyper flexible, only pay for actual value created

Per outreach attempt: \$2.50

Every call attempt regardless of outcome

Per successful interaction: \$5 - \$25

When patient answers and there is a valuable outcome, defined in contracting

Healthcare Worker Costs - For Example

Total Cost Calculation

- Salary: \$40,000 (Pharm Tech, Medical Assistant, etc)
- Benefits (health insurance, retirement, etc.): \$8,000 to \$12,000
- Payroll Taxes: \$4,000 to \$6,000
- Training & Certification: \$500 to \$1,000
- Management/Supervision: Estimate 10% of a pharmacist's time (varies widely)
- Overhead/Equipment: \$500 to \$1,500

Total Cost: at least \$60k per year (does not include management time, recruiting, onboarding, retention, and other which are signicant)

Total Working Hours Calculation

- Standard work hours: 2,080 hours/year
- Minus PTO (vacation, sick days, holidays): 184 hours/year
- Minus Breaks: 130 hours/year

Actual working hours: 1,766 hours/year

Cost Per Attempt Calculation

- Number of Attempts per hour, all outcomes = 10
- Working hours per year X avg hourly attempts = 17,660

Cost per attempt = \$3.40

Pricing Example

Scenario

Medication Adherence Program Example

# of Patients	Total Attempts (3 avg per patient)	# of Successful Interactions (25% of patients)	
10,000	30,000	2,500	
Cost Per	\$2.50	\$5	
Total	\$75,000	\$12,500	

Value

Healthcare Worker = \$3.40/attempt (2-3x this if RN or higher)

Grapefruit Health = \$2.90/attempt

15-30% Lower Cost

Healthcare Worker = 52 weeks Grapefruit Health = 12 weeks

85% Faster*



*Detailed summary in data room



Thank You!

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RN Costs

Total Working Hours Calculation:

- Standard work hours: 2,080 hours/year
- Minus PTO (vacation, sick days, holidays): 184 hours/year
- Minus Breaks: 130 hours/year

Actual working hours: 1,766 hours/year

Number of Attempts per hour = 10

Working hours per year X avg hourly attempts = 17,660

Cost per attempt = \$6.00

Total Cost Calculation

- Salary: \$80,000
- Benefits (health insurance, retirement, etc.): \$15,000
- Payroll Taxes: \$9,600
- Training & Certification: \$500 to \$1,000
- Management/Supervision: Estimate 10% of a pharmacist's time (varies widely)
- Overhead/Equipment: \$500 to \$1,500

Total Cost: at least \$106k per year (does not include management time, recruiting, onboarding, retention, and other)

When Using Our Technology Only

Entire process takes less than 6 weeks post contracting and 90% of the work is done by Grapefruit Health!



Recruit, On Board, and Train During Contracting

We save time by getting work done during the contracting period and, because we are tech-light, we speed through the security review.

Data Exchange - No Integration Required

IT teams love us because we do not require heavy integrations - we can start with just a simple secure file exchange. For data back in, we offer manual transcription or secure messaging into EMR Inbox

Go Live and Measure! Add New Use Cases

The students log in for the first time and begin generating interactions. We instantly begin to measure and iterate with our client. To add a new use case just requires a new patient file.

Our Workforce

1	2	3	4	5
Apply	Evaluate	Onboard	Training	Quality
We see almost 50 applicants per hire, 2.1% acceptance rate!	Must be enrolled into a clinical program, high GPA, strong communication skills, and must have some patient experience	Background checks, reference checks, access to systems, orientation	10 to 40 hours of training, both packaged as well as custom created in tandem with client	We match retired clinicians to students as mentors and who regularly assess their recorded interactions













Schools We Work With So Far



Efficient, Cost-Effective, and Fast!



Overall call answer rate

Task completion rate (success rate)



Less costly than staff



Up to 10x faster to complete campaign

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Testimonials

90% of students would recommend Grapefruit Health to other students!!!

Students

"Participating in the Grapefruit Health Program gave me the opportunity to communicate with real life clients. This program not only gave me the experience I was missing but also the communication skills that I will carry with me into my career as a nurse"

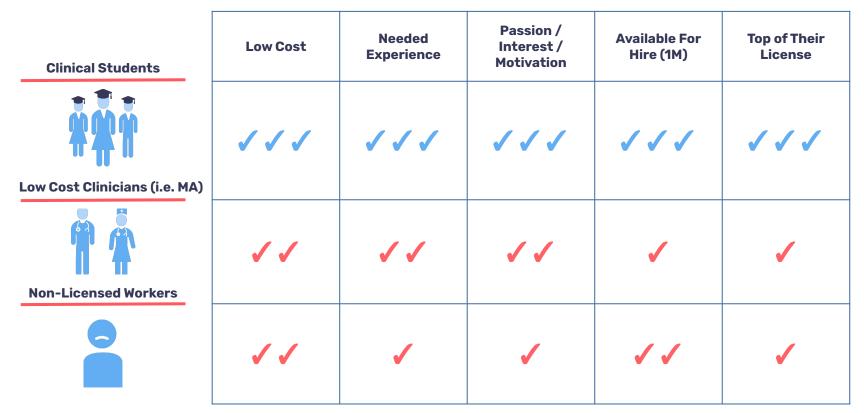
-Elizabeth, BSN Student

Clients

"We were struggling with a lack of resources and could not get the volume of patients we needed to be enrolled into our Diabetes Prevention Program by ourselves. We heard about Grapefruit Health and were interested because of the super low cost, quality talent, and the ability to recruit students afterward. We are now achieving our goals and are on budget!"

-Sinai Urban Health Institute

Why Clinical Students?





Overview (complete)

In order to confirm that our care model could work, we needed to test it. We decided to recruit a handful of students to perform interactions with a handful of patients over a set period of time. The students were matched to specific patients based on several criteria and then met with their assigned patients weekly via telephone. We were able to test everything from student recruitment to software functionality, and what a success!

Problem

Needed to test out our model, but did not yet have a client

Solution

Create our own pilot and did it successfully

Impact

Duration = 12 weeks

Number of students = 12 *Self funded so limited to 12, but 75%+ would have been admitted

Number of patients = 39



Problem

NEIS was experiencing slight increases in readmission rates but was unable to engage with patients after discharge. The organization was also unable to consistently capture patient satisfaction data for MIPS

Solution

stay.

Overview (ongoing, launched Sept 2024)

<u>NEIS</u> is a hospitalist group operating in multiple health systems in the Northeast. They partnered with Grapefruit Health at BILH's Winchester

readmission rates, and measure patient satisfaction with their inpatient

Hospital to address patients' gaps in care after discharge, reduce

We stood up a workforce to engage with patients 48 hours after discharge to close care gaps in 3 areas, refer specific cases back to the discharging provider, and capture patient satisfaction data

Impact

- Duration: ongoing
- Readmission rate reduction: 12% (Medicare lives)
- Total conversion rate: 58%
- **Cost savings:** \$51K annually (compared to hiring an RN)
- Satisfaction: 4.8 out of 5 (avg across 3 categories)

SINAI Sinai Health System

Volume

Total of 3773 calls attempted

An average of 251.5 call attempts per week

Overview (went live Oct 2022)

Largest safety net health system in Chicago was seeking a solution to help them enroll patients into their diabetes prevention program. The goal is to increase the number of pre-diabetic patients into their program while saving money on the labor.

Efficiency

33.2% of calls attempted resulted in an interaction with a patient

65.3% of we interacted with completed the assessment

27.3% of the patients we interacted with wanted to sign up for the program

Impact

More patient enrollment for less

237 patient enrolled

Saved team time and increased class capacity



Overview (Live June 2023)

Client is an integrated community health improvement organization serving 29 counties of the Appalachian Highlands in Northeast Tennessee, Southwest Virginia, Northwest North Carolina and Southeast Kentucky. They're dedicated to improving the health of the people we serve.

Problem

Lack of resources: staff and budget

Are not hitting their medication adherence STAR ratings

Solution

Low-cost, high-volume outreach for medication adherence

Impact

Goals are to increase patient compliance and achieve better STAR ratings