

Accelerating HealthCare Insights Rapidly Unlocking Value from Data

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HealthCare Problems



Clinical Problems



Medication Errors

- Antibiotics Resistance
- Overuse / Misuse
- Cross interactions



Public Health Problems

- Surveillance / Communicable disease management
- Chronic Disease Monitoring
- Disconnected Social Care vs Medical care



Re-admissions

- 30 day InPatient Readmission
- Re-Operate within 48 hrs



Patient Condition Management



Newly diagnosed Hypertension Reduce rate of hypotensive episodes and hospitalization

- Reminder for Rx, blood pressure check daily
- Education for weight management and exercise plus monitoring
- Triggers when hypotensive / hypertensive for follow up appointment



Minimize complications, decrease C-Section chances

- Patient education and exercise monitoring (including diet)
- Medication reminder and warning for cross interactions
- regular self check for symptoms (headaches, dizziness)
- Triggers for consultation



Post Surgery Care Avoid post surgical infections and readmissions

- wound management check and reminders
- fever, swelling, redness check
- ambulation and preventative medication reminder
- Triggers for consultation



Chronic Disease Management Diabetes



Risk Identification

- Al to predict new diagnosis risk for healthy individuals
- Cohort of diabetics with risk score of mis management



Care Planning

- Universal plan for home monitoring, diet monitoring
- Reminder for follow up, regular blood checks, retina examination
- Personal quarterly self check for signs of neuropathy, vessel disease or retina problems
- Triggers to escalate or request adhoc testing according to overall well being



Data Utilization



Resources Utilization cost reduction

- Messaging portal between patient / clinician
- Identify missed care
- Identify duplicate care (xrays, blood tests)
- Frequent visits to same specialty





Research data Improve quality Decrease negative impact

- Monitor and compare treatment plan vs outcome for better recommendation or plan inclusions / exclusions
- Background surveillance to identify elevated symptoms trends and early detection of epidemic / pandemic



Successful Use Cases





Largest public health information network in the US



2,197

HEALTHIX CORE TRAINING COMPLETIONS

3.27 (NEW TRAINING LMS LAUNCHES)

2020

2019

CUSTOMERS 28,284 22,764 22,316 CONTRIBUTING DATA 12,291 CONTRIBUTING DATA 2019 2020 2019 2020 Hospitals 65 81 731 OREs 448 Physicians 22,065 27,246 CBOs/BHOs 128 159

19

15

33

16

15

27

22,764 28,284

STATE RESIDENCY	TOTAL NUMBER
New York	29,490,323
New Jersey	1,912,045
Florida	471,941
Connecticut	386,511
Texas	324,887
California	318,727
Pennsylvania	199,932
Ohio	86,713
Nevada	79,254
Massachusetts	69,951

*Data for top 10 states collected 2019-2020

3,912

+78%

TRAINING GROWTH



Predictive Analytics to Inform Care





PATIENT RISK

Inpatient Admission3Emergency Visit47Diabetes32AMI0

Elevated risk are indicated in red

- 47% likelihood of ED visit in next 12 months
- 32% likelihood developing diabetes in next 12 months

MERIT: a high-profile murder involving a patient with mental health problems highlighted the need for information sharing between health and social care stakeholders as a top priority

EMAS (East Midlands Ambulance Service): Sharing comprehensive health and care records in real time for patients in emergencies

> CARE TOOL: Expanding care coordination and increasing efficiency in resource allocation.

> INTEGRATED OBSTETRIC CARE: over 100 providers involved in information sharing.



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ONCOLOGY PATIENT CARE RECORD:

need to coordinate the care of oncology patients between the University Hospital of Toulouse and the Toulouse Cancer Institute.

FASCICOLO SANITARIO ELETTRONICO: creation of the regional health file for Veneto as part of the Italian national health file (similar to the ePA in Germany).

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InterSystems Population Health Management Diabetes Use Case



Unified Clinical Viewer

VIEWER													Patient Sel	ection ~	🕀 English ((US)	hs_clinician							
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Decision Support & Care Plan

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Chartbook «	Critical (0)								<u>^</u>						
Clinical Summary	Warning (1)								^						
Care Community		0												•	
Conditions	High Risk or Early Diabetic	U VIEW	WER										Patient Selection \vee	English (U	JS)
Allergies		E	BLIS	SS, Layal	107- 100091079										
Medications	Source		NOT K	nown 35y 10/10/1987 M	P1: 100081078										
Documents	Patient is at high risk to develop diabetes , or is early diabetic	1	Back	k to: Chart											2
Immunizations	Suggestions	\otimes	Cha	artbook «	Care Plans	Care Teams	Task	(5							
Vital Signs	Please start the patient on a diabetic care plan (recommended)	\$	CD	DS-Hook										_	
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Diagnostic Studies			Ca	are Community	Care Plan Nam	ne	Created On	Created By	Last Modified	 Last Modified By 	Version	n Status	Patient Contribution	Publish	Actions
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Encounters			Me	edications									•		
Appointments			Doc	ocuments	> Finalized Care Pla	ans									
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Cohorts			Vit	tal Signs											
Claims			La	b Results											
Demographics			Dia	agnostic Studies											
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Patient Access



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Lab Results								
FBC - (FULL BLOOD COUNT) Performed on July 26, 2023 Ordered by Dr Helen Martin								
Basophils								
Your test result	0.001 KUL (Normal)							
Reference range	0.000-1.000 KUL							
0								
Eosinophils								
Your test result	0.020 KUL (Normal)							
Reference range	0.020-0.500 KUL							
0								
Haemoglobin								
Your test result	11.0 G/DL (Low)							
Reference range	11.5-16.0 G/DL							
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View more results fro	om this test							
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Have yo pressure Yes No	u ever taken medic e on regular basis?	ation for high blo	ood
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HealthCare AI AIaaS value based rapid delivery





ML Model Development Process





No Show Rate Reduction

Machine Learning Use Case

Clinic No-Show Rate Reduction



Goal

Improve quality of care and optimize allocation of time, clinical and financial resources

Highlights

- Implemented and already in live operation in KSA
- Predict the probability that an appointment will not be kept, directly in the appointment booking process
 - Currently 18% of appointments are not kept
- Integration of the "no-show" risk score into the user interface of the appointment information system
- No third-party involvement, InterSystems is the sole owner of the rights to the solution
- Easily applied to additional use cases, such as
 - Reduce no-show rates for surgical procedures, radiology sessions, chemotherapy sessions, etc.

Clinic No-Show Reduction: Results



End User Example

Embedding AI in daily workflows

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	Marcus Bliss URN: : 0072900	Gender: Male Full Age: 73Y 5M 20D,	DOB: 08/06/1950		e	∽ ⊞ € 🧟 🗟	
Book Appointment							
BOOK APPOINTMENT							
Location	CARDIOLOGY						
Resource	Doctor Helen Martin						
Service	SPECIALIST CONSULTATION		Q				
Notes							
Payor	NEURON		This patient has a 32% chan appointment	nce of not showing up for his			
Plan	NEURON - ZURICH INSURANCE (CIG	IA) - COMPREHENSIVE	Do you want to proceed?				
Arrive Patient				Cancel OK			
Overbook Reason							
Print Patient Letter							
			TrakCare Assista	ant Q	.)		Admin OPD (?)
OP Worklist							Preferences
Hospital Clinic	Care Provider Day	Date	DT Meeting Room ORT	ntments Booked Over	bookings	Vacant Max Attended	d To Mossage
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CARDIOLOGT	Doctor Helen Martin Tues	Jay 20/11/2023 14	4.00 16.00	0	14.00	0 0 0	
Appointment Sessions For -	Doctor Helen Martin					Edit Se	ession Message 📮 🔋
Location CARDIOLOGY		Date 21	/11/2023 🗰 Tuese	day	Search For URN		
Appointment Summary by Appoint	ntment: 3 CONSULTATION	<< [Day >> << Ses	sion >>			
Book Time 🗘 U	JRN Patient Service	Status \$	Episode Arrive 🗘 f Payor (Ready for 🗘 Seen 🗘 Departed 🗘 Doctor	Appt Waiting Room Arr Wine No Overbook Time No	Not LabOrders RadiologyC	Orders
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10:00					ľ	<i>i</i>	



Diabetes Risk Prediction

Machine Learning Use Case

Diabetes Risk Prediction

Highlights

Uses Survival analyses and modelling time-to-event data

Incorporated as part of a preventative care model within the community

Extended with a full Diabetes care solution to conduct a total care cycle for at risk patients

Goal

Identify patients at higher risk to develop Diabetes



Diabetes Risk Prediction



Survival Analysis by entire population

Survival Analysis by single patient







Administrative



RCM



Generative AI

Clinical

Antibiotic Resistance Chronic Disease Package Eligibility (Diabetes, COPD, Cardiac Myopathy, Essential Hypertension, Hyperlipidemia) **Diabetes Risk Prediction MI Prediction Osteoporosis Predication COPD** Exacerbation Asthma Attack Predication Early Microbiology Pathogen Detection **Early Sepsis Detection Breast Cancer Prediction**

Clinic No-Show Prediction Prediction of Surgical Procedure Time Prediction of Emergency Waiting Time Predication of Lab Sample Rejection Predict the Resources Needed **Predict Waiting List Acceptance** Time **Predict OPD Pharmacy Waiting** Time **Inpatient LOS Prediction**

DRG Discrepancy Inpatient Readmission Prediction Predict Expensive Stock Utilization Service Approval / Denial by Insurance Claims Approvals / Denials



Identify Gaps in Patient Record **Create Claims Report Generate Handover Lists & Notes** Create Operative Reports Suggest Evidence-based Protocols Utilize Dictation Tools to **Generate Structured Data Enhance Medication Compliance** Identify Best Stock to Utilize Identify Area of Revenue Growth Identify Time for HW Upgrade Identify Risk for Security Breach Issue Recording and Identifying

∃ A Back to:	Floor	plan 🕻						TrakCare	e Assistant	Q U Al Assistant	\bowtie	👤 Rami Riman
FRASER, Diar URN: RN00000	n na 0155			DOB: (Full Age	03/28/1969 e: 54Y 7M 4D - Sex : Female	Ca Lo	re Provider: cation: Gene	Dr CHELSE/ ral Surgery	A ZUBIK	🗱 🚭 🛒 😫	• L	•••
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Problems					Nausea and vomiting - 2 years ago ,(09/05/2021)	Active			k.	Ì		
EPR					Breast tumour - 1 year ago ,(10/08/2022)	Active						
Encounters					Transient ischemic attack - 2 years ago ,(06/22/2021)	Active						
Clinical Summaries					Endogenous hyperlipidaemia - 2 years ago ,(03/14/2021)	Active						
Q Search				Page	e 1 Next >							
		~	Activ	e Diagnosi	s		H New	 ✓ Alle 	ergies and Sensitivities			+ New
				Agranul Principal	ocytosis secondary to cancer chemotherapy - Diagnosis: Yes,	Main 🗸			Allergy: Codeine - Modera Nature of Reaction: Allergic	te ,(09/25/2023) headache		
			Ø	Maligna Main	nt neoplasm of unsp site of unspecified female	e breast -			Allergy: Meperidine - Mild Nature of Reaction: Allergic	urticaria		
				Principal	Diagnosis: No,				Allergy: Clarithromycin - S Nature of Reaction: Anaphyl	Severe lactic urticaria		



Derive Value Achieve Success





In Summary:

By utilizing EMRs, HIEs, AI & Analytics Healthcare providers can:



Improve patient outcomes

Reduce costs

Improve Healthcare Delivery

Thank you

