





About Ai

- National leader in "connected care," providing a proven and widely adopted SaaS platform for health information exchange (HIE)
- Pioneer of encounter notification and event-driven clinical data exchange
- Trusted partner to HIOs, Government, Payers, and Providers across twelve US states
- Deep market and policy expertise, derived from strategic advisory and health IT managed service engagements









About Ai

Software

Scalable, customer-driven product solutions



Identify & Access Management



Data Access tool



Actionable Encounter Alerting



Gateway Services



Services

Hands-on operation of statewide HIEs















Strategy

Strategic consulting for national and local agencies



The Office of the National Coordinator for Health Information Technology



Department of Health



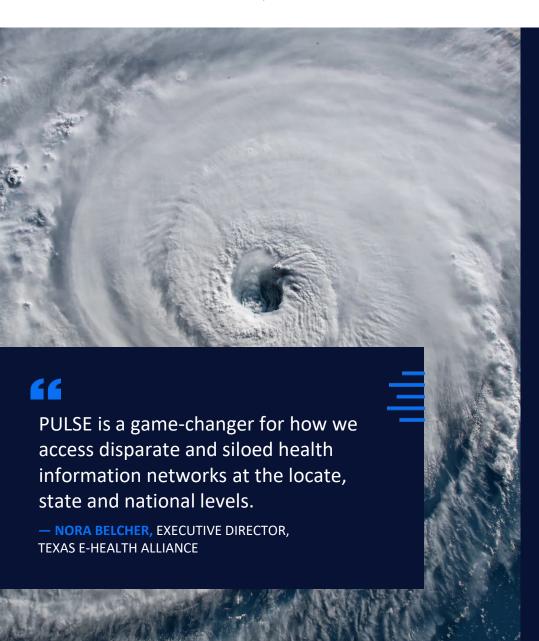


AUDACIOUS INQUIRY

PULSE Enterprise Overview

Introducing PULSE Enterprise

- During emergencies, patients are displaced hundreds of miles away from their routine health providers without access to their health records
- PULSE improves patient care and outcomes by providing access to medication and clinical histories to emergency personnel at shelters and alternate care sites
- Access to these data can prevent avoidable hospitalizations, reduce adverse events, and increase cost savings.



PULSE ENTERPRISE

- Designed to ensure simple and efficient workflows for providers in field environments.
- Can be quickly activated since widespread disasters can occur at a moment's notice.
- Improves patient care and outcomes by providing access to medication and clinical histories, avoids unnecessary patient transfers and admissions.
- Coordinates and streamlines alternate care facility and shelter patient management, eliminating paper records and fax machines.
- Provides access to national health information networks that include clinical data for over 205 million individuals and data from 80% pharmacies in the US.

PULSE MILESTONES



 Audacious first developed PULSE in 2015 with funding from ONC for use in California



 PULSE was first deployed in California during the 2017, 2018, 2019 wildfire seasons



 Broader functionality, Surescripts® integration now available through PULSE Enterprise



PULSE
 activated/pre activated in 2020,
 2021 in California
 and Florida



National <u>Deploymen</u>t



2018 Redding Fire

PULSE was used by emergency responders to pull medication records, including medication name and dose, to support the evacuation of 38,000 people.



2018 Camp Fire

Over 132 Medical Reserve Corps volunteers and members of the National Guard utilized PULSE to query clinical and medication records for evacuated patients.

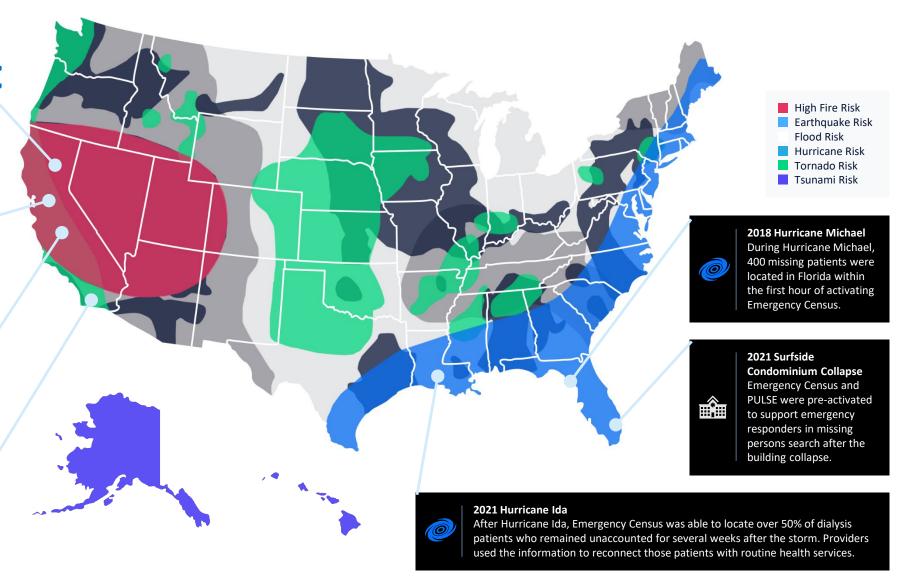


2020 Santa Cruz Fire

PULSE was deployed in 3 fire camps to provide clinical information on medication and allergies that were essential to treating severe poison oak exposure for firefighters.



2020-2021 COVID Antibody Sites
Providers from CAL-MAT and Health
Corps teams utilized PULSE for 2
COVID-19 Monoclonal Antibody
Treatment response sites to
retrieve patient health information.

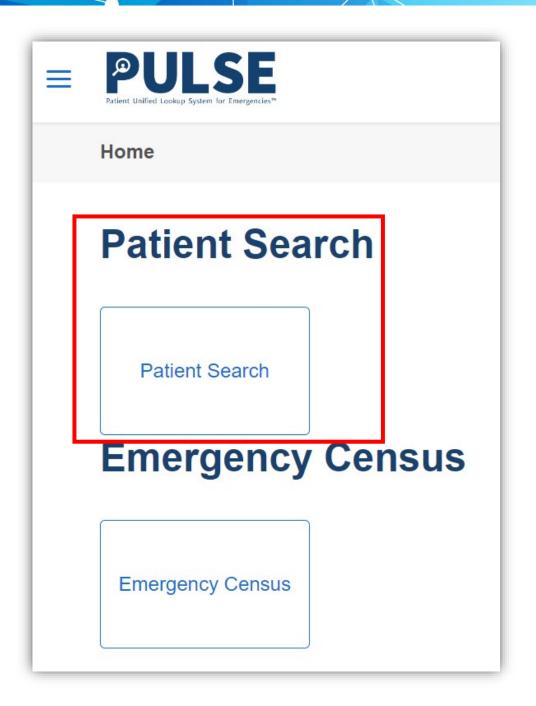


What is PULSE?

- Patient Search
 - Available without HIE services
- Emergency Census
 - Available without HIE services
- Missing Persons
 - Requires HIE services

PULSE: Patient Search

- Available without HIE connectivity
- An easy-to-use web portal that allows authorized users to view patient clinical and medication history without an EHR to provide health care in shelter environments
- Documents include information about patients' medications, allergies, diagnoses, and lab results



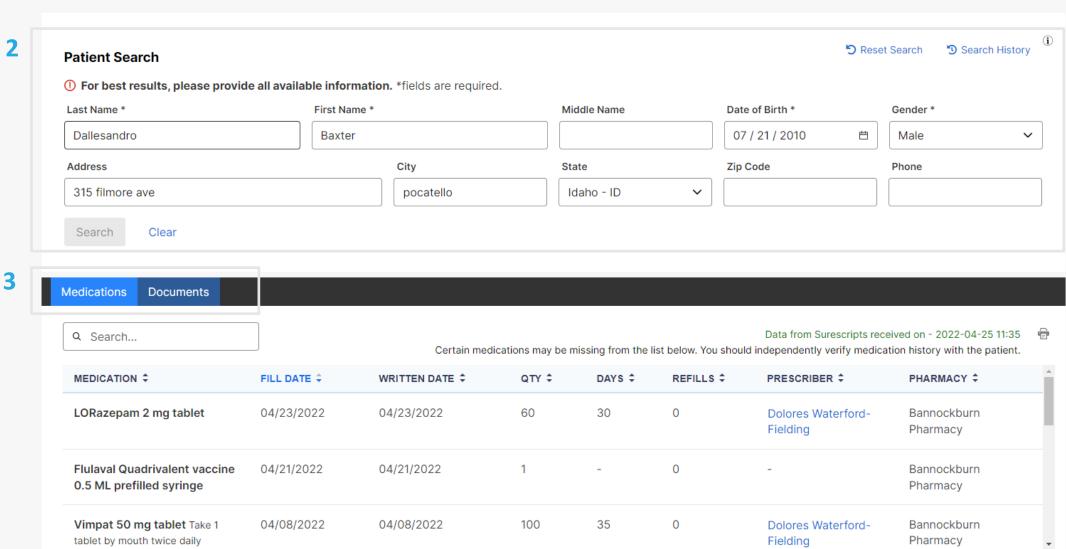
Benefits of Patient Search

- Keeping people out of the hospital during a disaster by equipping shelters with better tools to provide low acuity patient care
- Reduce time spent searching for information on patients during a disaster
- Hospital can use patient search during a disaster to find patient clinical information if otherwise unavailable



Patient Search

9



BAXTER DALLESANDRO

Community Health and Hospitals: Health Summary Generated on Jun 13, 2019, 11:38:53

▼ Demographics

Return to top



Male, DOB: Jul 21, 2010

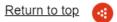
Communication Race / Ethnicity Patient Address Language

Primary Home: 315 Filmore Ave Pocatello, ID 83201, US Unknown

Unknown

Asian / Not Hispanic or Latino

▼ Allergies, Adverse Reactions & Alerts





					_		
Group Description	Code System	Code	Code Description	Severity	Susceptibility	Date and Time	Status
Allergy to Eggs	UNII	291P45F896	Eggs	Mild	Very susceptible	03-31-2010 10:00:00	Active
	ICD-9-CM	V15.03	Allergy to eggs				
Amikacin	RxNorm	905148	Amikacin Sulfate 50 MG/ML Injectable Solution	Mild to moderate	Very susceptible	03-31-2010 10:00:00	Active
Penicillin V	NDF-RT	N0000011298	Penicillin V	Mild to moderate	Very susceptible	03-31-2010 10:00:00	Active

▼ Encounters

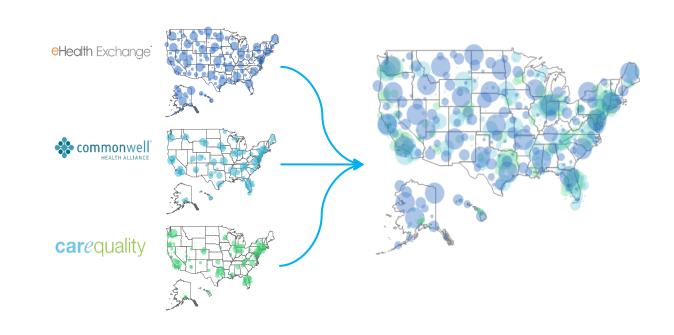
Return to top



Group Description	Code System	Code	Code Description	Date and Time	Status
Encounter Office Visit	CPT	99212	Office/outpatient visit, est	03-31-2010 10:00:00	Performed
Encounter Outpatient	CPT	99213	Office/outpatient visit, est	06-06-2010 10:00:00	Performed
	ICD-9-CM	V70.0	Routine general medical examination at a health care facility		

Clinical Documents and Medications

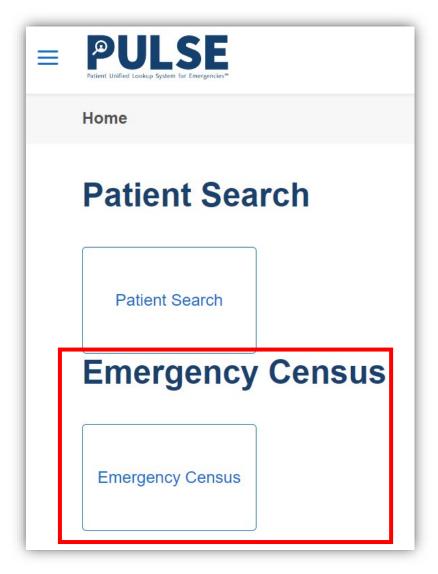
- PULSE Enterprise leverages national networks that include clinical data for over 205 million individuals
- Agreement with Surescripts to access
 Medication History Service for outpatient
 medication histories covering 80% of U.S.
 pharmacies and 324 million patients
 (95% of the U.S. population)
- Access to information from USVI health care facilities requires those facilities to participate in the National Networks

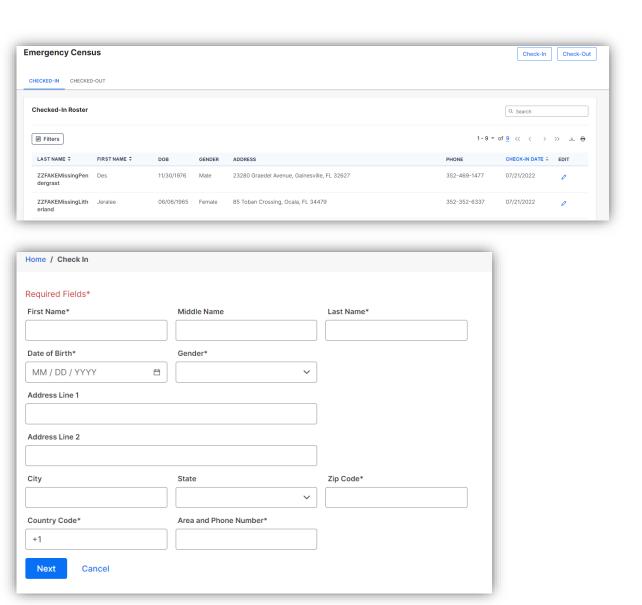


PULSE: Emergency Census (Check-in/Check-out)

- Available without HIE connectivity
- Allows shelter managers to record individuals who have checked in and out of a facility
- Allows family reunification specialists to search for individuals who have checked in or out of a shelter
- Can be performed offline and bulk uploaded when internet connectivity is restored

PULSE: Emergency Census





Benefits of Emergency Census

- Awareness of who is entering and exiting shelters
 - Ability to search across shelters
- Discharges indicate to where people are discharged
- Future functionality groups people discharged by location
- Potential future functionality: package clinical documents for discharged people by discharge location
- Admit and discharge metrics that can be used for funding

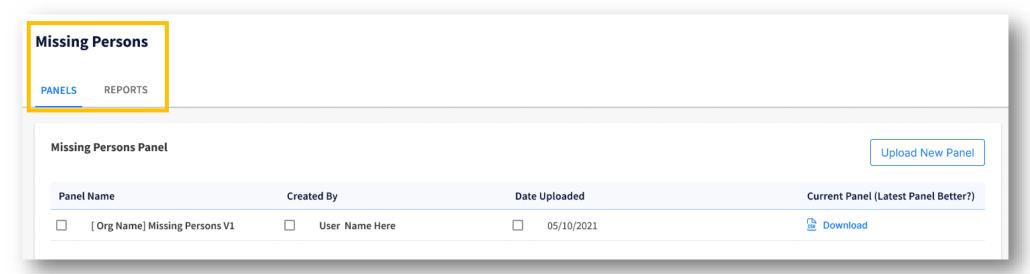
PULSE: Missing Persons

- Requires HIE connectivity
 - HIE must be able and agree to share data with PULSE
- Allows family reunification specialists and health care providers to search for individuals who have checked in or out of a shelter, hospital, or emergency department
- Use case: locating dialysis patients after a disaster

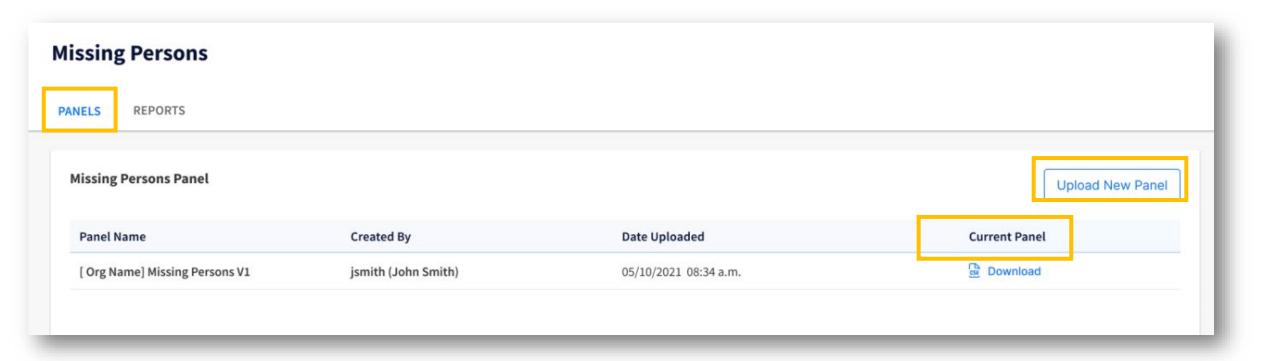


Redesigned Missing Persons Workflow

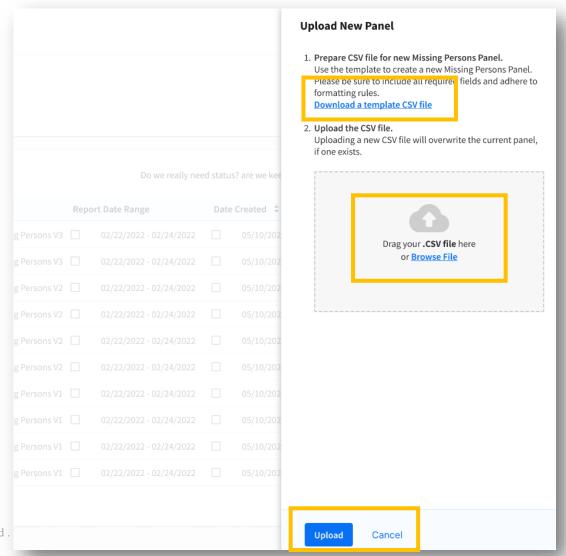
- Slated for August 2022 production release; in active development based on customer feedback
- Provision Missing Persons Coordinator user role to conduct all steps of workflow in single application:
 - Submit Missing Persons Panel
 - Run and Download Missing Persons Report
 - View prior Panels and Reports
- Unique Missing Persons Panel and Reports can be managed at Organization level, improving system flexibility while managing data privacy



Upload Missing Persons Panel

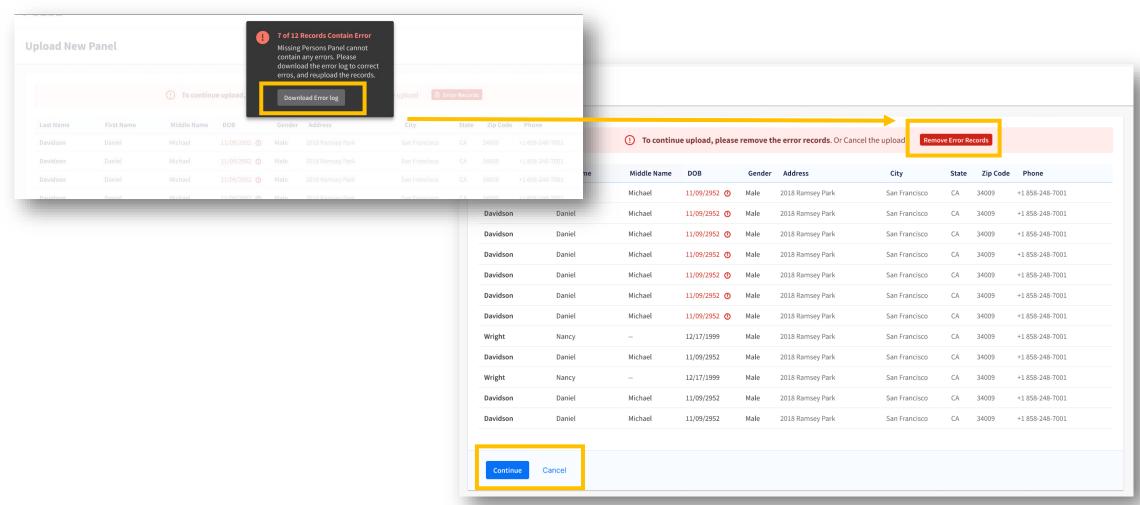


Upload Missing Persons Panel

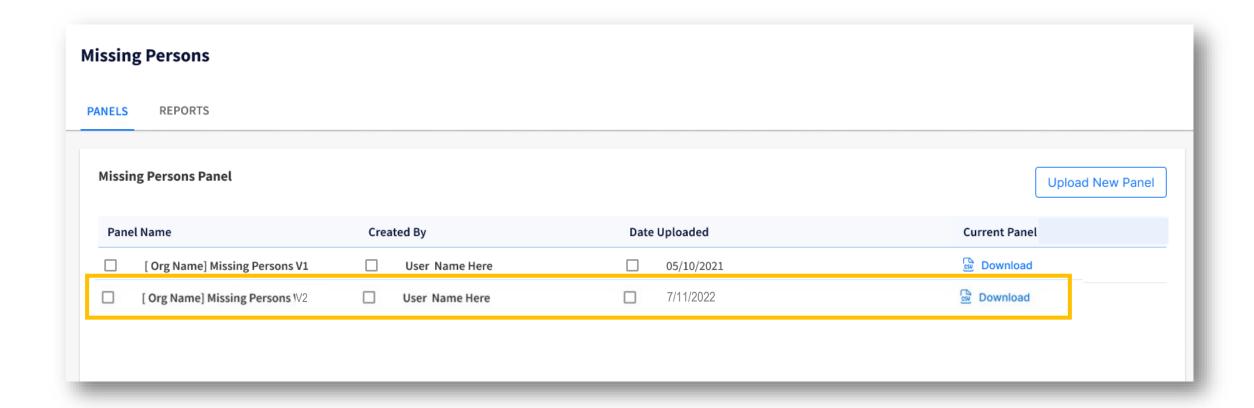




Missing Persons Panel Error Handling

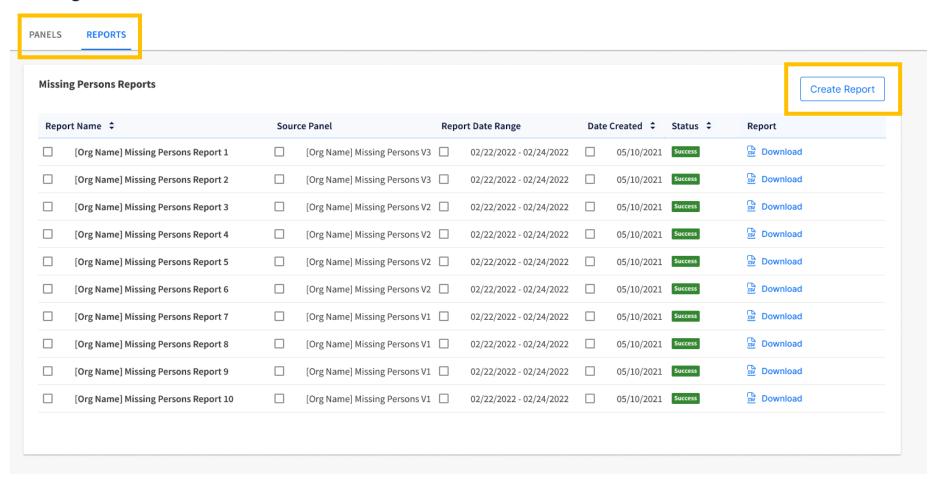


Upload Missing Persons Panel

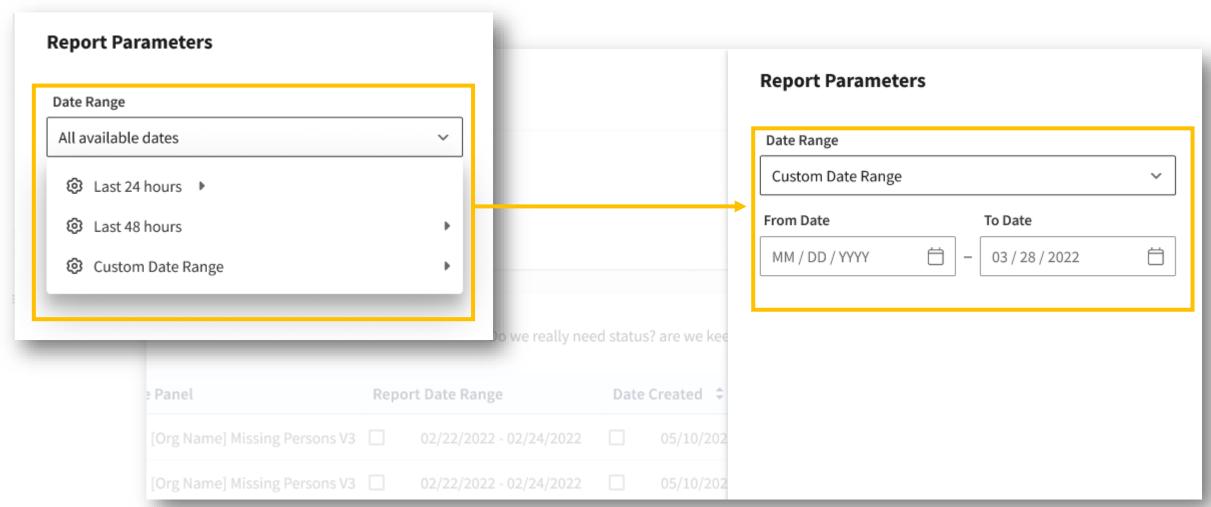


Run Missing Persons Report

Missing Persons



Run Missing Persons Report



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Download Missing Persons Report

Missing Persons

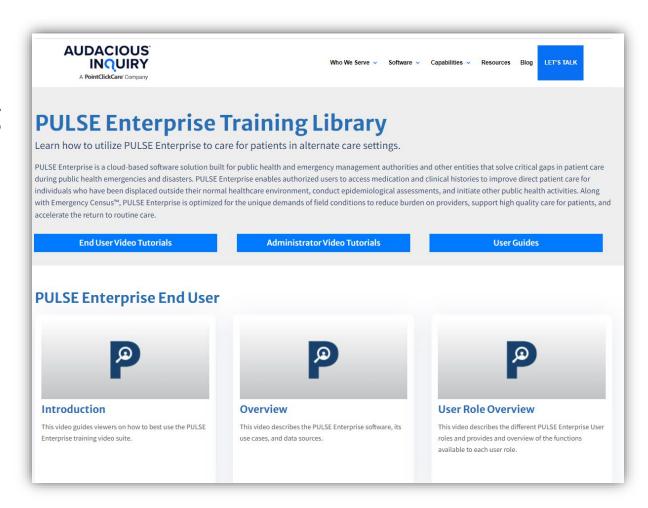
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Report Name 💠		Sour	Source Panel		Report Date Range		Created \$	Status ‡	Report	
	[Org Name] Missing Persons Report 1		[Org Name] Missing Persons V3		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 2		[Org Name] Missing Persons V3		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 3		[Org Name] Missing Persons V2		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 4		[Org Name] Missing Persons V2		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 5		[Org Name] Missing Persons V2		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 6		[Org Name] Missing Persons V2		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 7		[Org Name] Missing Persons V1		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 8		[Org Name] Missing Persons V1		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 9		[Org Name] Missing Persons V1		02/22/2022 - 02/24/2022		05/10/2021	Success	Download	
	[Org Name] Missing Persons Report 10		[Org Name] Missing Persons V1		02/22/2022 - 02/24/2022		05/10/2021	Success	© Download	

Benefits of Missing Persons

- Facilitate family reunification by tapping into the HIE network including admit and discharge information for a variety of facilities
- Facilitate patient follow-up by allowing providers to search for unaccounted for patients (e.g. dialysis providers)
- Allows for providers and facilities to continue using their routine workflow without logging into another system
- Using the HIE for patient tracking allows for better patient matching by layering in Master Patient Index (MPI)

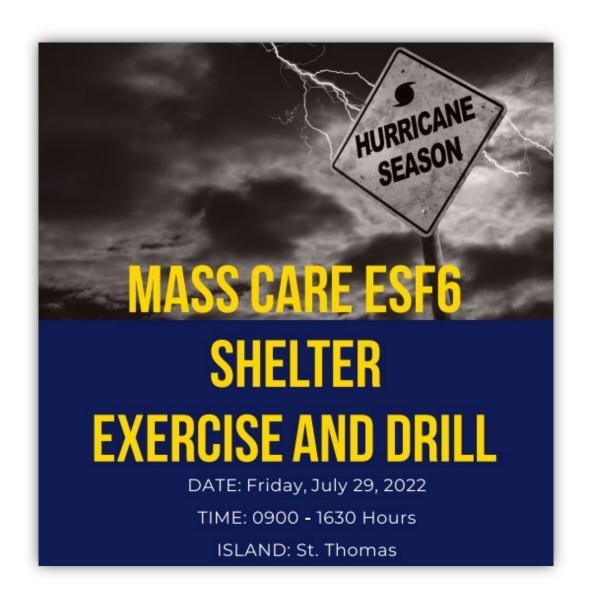
Training & Resources

- Full-time dedicated engagement manager
- Suite of training materials, including just-in-time training
- On-site administrator and end-user training
- Monthly Community of Practice meetings
- 24/7 Service Desk



Shelter Training & Exercise

- PULSE will attend Mass Care ESF-6
 Shelter Exercise & Drill on Friday,
 July 29
- Training on implementation at shelter intake



Questions

- Would PULSE be used in all shelters or just those that accommodate special medical needs?
- Who staffs those shelters?
 - Do you work with a shelter staffing service (e.g. BCFS, Red Cross)
- How are patients with clinical needs handled?
 - Referred to a hospital or provided with on-site care?
- Would you benefit from on-site Audacious staff assistance during a response?
- As you consider capabilities you want in a shelter, is it important to document the care provided and share with other care providers?
- Are there other desired functionalities that your current tools do not provide?



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