



Olive Quarterly

2022 | Issue 1

WELL BEING



Designing empathy into the center
of tomorrow's care experience.

Olive | The automation company creating the Internet of Healthcare.



Contents



ON THE COVER

Healthcare workers deserve better.

Automation frees healthcare professionals from burnout and compassion fatigue, improving emotional and mental well-being, creating greater capacity for empathy and bringing forth a new health experience for humans.

2

Office of the CEO

4

Elevating the human healthcare experience

6

Building with empathy: the path to health assurance

10

Stepping beyond portals and phone calls with automated patient communication

12

Employee spotlight: Ross Moore, strategic account lead

14

See Olive's Panel Management solution in action

16

Reimagine utilization management: the journey to precision UM

18

Why payers should join the Internet of Healthcare

20

Five automation trends for 2022

24

Employee spotlight: Regina Mickley, talent acquisition manager

26

Ready, set, hack

28

Closing the coding gap, one camp at a time

32

Introducing Pi: a flexible way to purchase healthcare tech

34

The Olive Library: Olive's partner ecosystem is here to transform healthcare

38

Olivology

OFFICE OF THE CEO

The Grid, USA

→ The big epiphany that led to Olive's work in automation is what still drives us every day. Healthcare is the No. 1 employer in the country. Over 16 million people work in healthcare. That's more than any other industry like retail, manufacturing and so on. That is a massive amount of human capacity — over 32 billion hours (at least) spent every year by humans. Of that 32 billion, we estimate that 10 billion hours, or almost a third, are being spent (and for the most part wasted) on tasks that could be automated.

So why is automation so important? Imagine if through automation we could free up 10 billion hours of human capacity in the U.S. alone. Imagine what 10 billion hours of capacity could do for the health of humanity. Imagine what 10 billion hours of more capacity could change, could create, could empower. Ten billion hours of human capacity is more than double the entire U.S. military, more than the

entire U.S. tech industry, more than the whole U.S. education system and 20 times more capacity than the entire oil and gas industry in this country. The numbers and the opportunities are staggering.

We believe automation and the liberation of human capacity will be the single biggest change agent in healthcare in our lifetimes. We believe the human capacity generated by automation will do more to

change the health experience for humankind than any single technology or scientific development. We choose to spend our time bringing automation to healthcare because we believe in its extraordinary opportunity for impact beyond the balance sheets and the budgets. We believe automation will touch the lives of every single human and unlock the healthcare industry of our dreams. And because we believe this, and because the amount of human capacity in play is so large and can have such a massive impact on our species, we choose not to do it alone.

We recognize that the only way we will be able to unlock human capacity at the magnitude to make tectonic change will be with an entire economy of automators. Our go-it-alone automation has made an impact, and our calculations show we can generate over 50,000 FTE worth of human capacity a



“We believe automation and the liberation of human capacity will be the single biggest change agent in healthcare in our lifetime.”

— SEAN LANE, CEO AT OLIVE

month — and growing. But that’s a drop in the bucket. Even at hypergrowth, we won’t be able to make a dent in the 10-billion-hour target unless we bring together a coalition of every automation capability we can. The goal is much too big unless we build tools and infrastructure to enable existing automators and encourage a whole new generation of new automators.

That is why Olive is no longer just a digital worker;

Olive is a platform. Olive will work tirelessly to connect healthcare with the most powerful automation solutions on the market and power those solutions with tools and infrastructure to scale fast and have a greater and more meaningful impact.

The stakes for automation are high. We are committed to making the Olive Library the most prolific collection of automation solutions on the planet and giving our

customers a world-class marketplace experience so they can put automations to work and, together, we can make a real impact on the industry by liberating 10 billion hours of human capacity.

Sincerely,

A handwritten signature in purple ink, appearing to read 'SLane'.

Sean Lane
Chairman and CEO

Elevating the **HUMAN** healthcare experience

There's a lot of talk about bending the cost curve in healthcare — after all, healthcare spending reached a stunning \$4.1 trillion in the U.S. in 2020.

But even trillions of dollars don't account for the "cost of caring," the physical and emotional toll caregiving can take on clinicians. Healthcare workers are burned out, experiencing compassion fatigue and even leaving the profession in droves because their work is pushing them to their emotional limit.

The \$4.1 trillion in healthcare spend also doesn't include the time and energy expended by patients, who need to act like savvy consumers to manage their complex care needs.

To bend the industry's true cost curve, we need to improve every human's experience of healthcare — relieving the pressure on clinicians and making achieving health and well-being easier for all.

"There's never been a greater urgency for us to elevate healthcare from the mires of the transactional and impersonal interactions to the promise of the highly personalized experiences that health and care should really be about," says Rasu Shrestha, M.D., executive vice president and chief strategy and transformation officer at Atrium

Health. "It's not about ICD-10 codes, APIs and copays — it's about moments that matter. It's about the human experience."

Upgrading technology

Much of the human experience of healthcare is tied up in technology. Clinical staff use EHRs, fax machines and other workflows to make sure their patients get the care they need.

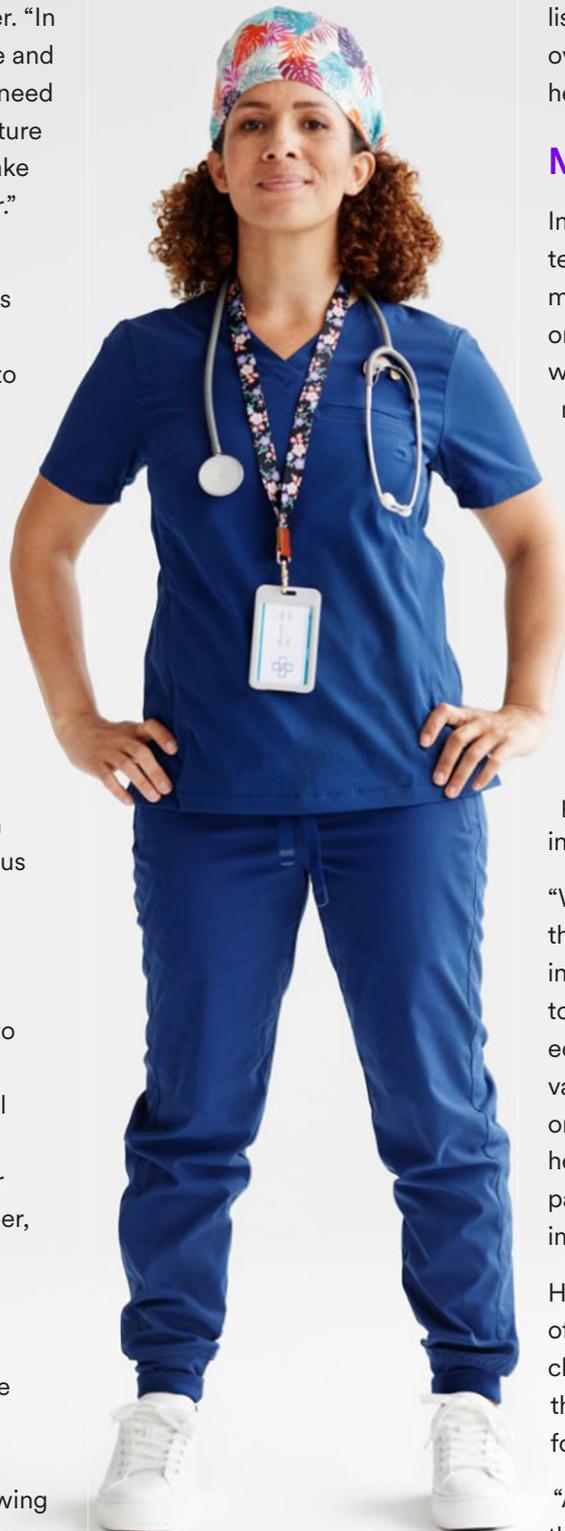
"Healthcare workers are too often forced to use outdated hardware and legacy software systems," says Tjasa Zajc, host of Faces of Digital Health and

business developer at Better. “In order to improve healthcare and the human experience, we need investments in IT infrastructure and technology that will make the work of clinicians easier.”

While hardware upgrades happen regularly so systems continue to function and legacy software continues to make promises, ultimately automation and AI provide the industrywide connectivity and efficiency necessary to make a positive impact on workers’ experiences. According to the 2021 Internet of Healthcare Report, 99% of healthcare executives say artificial intelligence technology can empower employees to focus on more impactful work for patients and members.

“I think that we will have to leverage more technology to free up all of the low-value tasks humans do and upskill those humans so they can spend more time with other humans,” says Bonnie Clipper, DNP, chief clinical officer of Wambi and president of Innovation Advantage.

Because when humans have more time to connect with other humans, everyone’s experience improves. “Allowing humans to interact is how we demonstrate empathy and



listen, which improves the overall experience, especially in healthcare,” she says.

Maximizing value

Implementing AI and other technologies is a good way to make a quick positive impact on the healthcare experience within an organization. To make lasting, industrywide change, stakeholders need to continually pursue an equitable, value-based, personalized healthcare system.

This is especially important — and more possible than ever — because of the effect the pandemic has had on the industry, says Dr. Shrestha.

“We need to understand that in this pivotal moment in time, health systems need to function as conveners of ecosystems that truly maximize value, nurturing trust and orchestrating comprehensive health through meaningful partnerships that create real impact on the ground,” he says.

He emphasizes that time is of the essence to make the changes needed to improve the healthcare experience for all.

“As it turns out, now truly is the moment we’ve all been waiting for.”

Building with empathy: the path to health assurance

→ Healthcare workers are sick and tired. Lack of supplies, long days blotted with traumatic encounters with patients and tone-deaf calls for healthcare workers to be more empathetic have pushed many providers to their wits' end.

To give healthcare professionals better tools and reduce the burdens they encounter every day, technology companies are pairing automation and the principles of health assurance to improve the care experience.

Health assurance is the new goal for healthcare

In “Unhealthcare: A Manifesto for Health Assurance,” Silicon Valley entrepreneur and investor Hemant Taneja and Jefferson Health CEO Stephen Kalsko, along with writer Kevin

Maney, call for a mindset shift to health assurance: “an emerging category of consumer-centric, data-driven healthcare services that are designed to bend the cost curve of care and help us stay well. Built on the principles of open technology standards, these services employ



empathetic user design and responsible AI.”

By innovating with these principles in mind and building tools with empathetic user design, automation can transform the healthcare industry into an equitable system for a healthier society.

Automation improves human health experiences

In pursuing a health assurance system, it’s important to remember the healthcare industry is not easily disrupted. Companies have tried and failed to shake up the industry, resulting in stress and disruption fatigue for the many

healthcare employees in the trenches every day.

Instead, technology companies must partner with healthcare organizations and prioritize the principles of health assurance to design products that better relate to the human experience. In this way, technology will improve the day-to-day lives of healthcare workers and the patients they care for.

Automation takes an empathetic step toward health assurance

In a recent interview, Olive CEO Sean Lane sat down with Chitra Nawbatt, global head of

→ **50%**

of administrative staff have seen an increase in manual data entry in the past 12 months, according to the 2021 Internet of Healthcare Report.

health assurance partnerships at General Catalyst, to discuss Olive’s steps toward health assurance.

Lane explained how Olive’s focus on creating the Internet of Healthcare pairs with the goals of the industry’s top healthcare leaders: improving healthcare by making quality care delivery easier and more affordable.

Enabling workforce transformation

For too long, healthcare workers have been treated as data routers, manually moving data between software systems — and this burden has only continued to increase.

“I’m very excited about the next decade and the promise of the Internet of Healthcare. It will change every single human’s experience with healthcare.”

— SEAN LANE

According to the 2021 Internet of Healthcare Report, 50% of administrative staff have seen an increase in manual data entry in the past 12 months. Extensive data entry and administrative redundancy have directly contributed to high rates of healthcare worker burnout.

Even worse, the COVID-19 pandemic has caused a ripple effect of compassion fatigue among clinical staff, with many physicians and nurses leaving the profession altogether.

To address burnout and compassion fatigue, Olive prioritizes empathetic user design: developing software solutions that relate to and address human needs at every stage of the user experience. For Olive, empathizing with healthcare workers as end users is critical, and cybernetic Loops (think apps in an app store) built on the Olive platform offer a key example.

Using a lightweight desktop application, healthcare workers can easily download helpful Loops. Loops are designed and developed to meet end-user needs — from quickly accessing patient eligibility data to monitoring medical supply levels. Using an unobtrusive interface and subtle, real-time suggestions, Loops leverage empathetic user design to make workflows easier and more efficient for healthcare staff. This reduces the need for complex spreadsheets, online research, clinical document gathering and the many tedious

challenges that have historically plagued healthcare staff.

In addition to working hand-in-hand with healthcare workers on their desktops, Olive also prioritizes end-user satisfaction while working behind the scenes. Olive’s AI workforce automates workflows from coverage discovery to prior authorization approvals to claims management.

Alleviating these notoriously burdensome workflows for healthcare staff saves an estimated 93 minutes per worker every day. By freeing

EVEN WORSE, THE COVID-19 PANDEMIC HAS CAUSED A RIPPLE EFFECT OF COMPASSION FATIGUE AMONG CLINICAL STAFF, WITH MANY PHYSICIANS AND NURSES LEAVING THE PROFESSION ALTOGETHER.

up nearly 20% of an individual's day with automation, healthcare professionals will feel less overwhelmed and have increased mental capacity to relate to, empathize with and better care for their patients.

→ **99%**

of executives say AI can empower employees to focus on more impactful work for patients and members.

The results of building with empathy

In the Internet of Healthcare Report, 99% of executives say AI can empower employees to focus on more impactful work for patients and members. By building empathetic automations for every point of a healthcare interaction that doesn't require a human touch, Olive makes workflows easier for healthcare staff, resulting in greater health assurance for all.

"I'm very excited about the next decade and the promise of the Internet of Healthcare," says Lane. "It will change every single human's experience with healthcare."

[Watch the interview](#)



Stepping beyond portals and phone calls with automated patient communication

→ **41%**

of surveyed Americans reported skipping needed medical care during the early months of the pandemic, according to a study in JAMA Network Open.

At the height of the pandemic, health systems struggled with staff burnout

and retention while facing an overwhelming number of COVID-19 patients. At the same time, 41% of Americans reported skipping needed medical care during the early months of the global health crisis.

Health systems are still making up ground to counteract that missed care and need to find new ways to effectively reconnect patients with their providers — because having patients connected with their providers and actively participating in their care leads to lower-cost, higher-quality care and improved outcomes.

The industry's current tools fall short of patient and clinician needs

Coordinated support of care transitions and proactive clinical quality initiatives currently require significant humanpower. This, compounded with the shift toward capitated payment programs and shared risk models, necessitates the pivot toward improved digital health communication. Health systems and medical groups without a comprehensive patient engagement strategy leave their organization and patients susceptible to the pitfalls of ineffective communication.

While existing EHRs provide patient outreach and communication, only 40% of

→ **40%**

of people in the U.S. accessed their patient portal in 2020, according to the Office of the National Coordinator for Health IT

people in the U.S. accessed their patient portal in 2020, according to the Office of the National Coordinator for Health IT — showing patient portals have limited effectiveness as an outreach tool.

Low portal effectiveness means patient outreach often falls to office staff and providers making old-fashioned phone calls. These outreach attempts are high-friction and often futile, with many calls going directly to voicemail when providers can actually reach a working number. Studies show that as many as 61% of Americans regularly don't answer phone calls from numbers they don't know, and just 18% listen to voicemails from unknown numbers. Fortunately, there's a better way.

Automation streamlines patient outreach and communication

Automation solutions help healthcare organizations reconnect and re-engage with

Automation solutions help healthcare organizations reconnect and re-engage with the right patients, improving patient well-being while giving back time to providers and staff for more impactful work.

the right patients, improving patient well-being while giving back time to providers and staff for more impactful work.

Olive's population health solutions are designed to improve the human experience of healthcare for patients and providers at every point in the journey.

→ **61%**

of Americans regularly don't answer phone calls from numbers they don't know, according to research from Jive Communications.

Using improved panel management to drive sustainable change, Olive reviews a patient's history and connects with them via two-way text conversations. These conversations allow patients to easily update important information while also serving

to re-engage them in their care. Olive's Panel Management capability also assists with the cleanup of provider panels through structured depaneling when necessary, leading to higher quality scores and reimbursement rates.

After cleaning up a provider's panel, Olive facilitates patient engagement through automated and targeted communication focusing on specific improvement opportunities. This intentional outreach allows for improved communication between providers, health systems and patients while also improving clinical documentation.

When used collectively, Olive's suite of automated population health solutions alleviates the existing burden antiquated manual processes place on clinicians. This allows clinicians to get back to the core of what originally drove them to medicine: the patients.

EMPLOYEE SPOTLIGHT:

Illuminating the Journey to Olive



AI as a change agent for health:

Meet Strategic Account Lead Ross Moore

Ross Moore (he/him) grew up watching his mom go to work each day as a nurse. Through her, he witnessed the depth of care and compassion that healthcare workers bring to their jobs — as well as the administrative obstacles they encounter. Ross' mother went into nursing because of her passion for taking care of patients in need, but her time with patients is often cut short.

“Unfortunately, she spends over half of her day documenting the care she delivers, speaking with insurance companies to ensure the care she provided will be reimbursed and speaking with internal auditors about the billing codes she applied to her patients' charts,” says Ross. “Nurses deserve better. They should be spending their time treating patients, not sitting behind computers completing administrative work.”

Ross joined Olive in 2020, drawn in by the direct positive effect Olive provides to healthcare workers.

“Nurses deserve better. They should be spending their time treating patients, not sitting behind computers completing administrative work.”

— ROSS MOORE

“I was intrigued by Olive because it was taking the differentiated approach of bringing automation and AI as a Service to healthcare providers,” Ross says. “Olive is truly making an impact with nurses and physicians who have faced exhausting circumstances these past two years during the pandemic by reducing their administrative work.”

He first started as the general manager of revenue cycle solutions, helping to determine which products Olive should develop internally or obtain from a vendor partner. Then, he took on his current role as strategic account lead to get closer to customers, help them develop their AI transformation roadmap and pivot to a business development mindset.

Ross sees automation and AI as a tool to help solve larger issues in the U.S. healthcare system.

“Despite having the best technology, physicians and clinical research in the world, we are ranked last among developed nations when it comes to healthcare costs and patient outcomes,” says Ross. “This is a tough pill to swallow. At the same time, the United States’ position makes me excited. It presents an opportunity for us to be a change agent in improving our global ranking, helping Americans live a healthier life and reducing the cost of care.”

WHAT’S YOUR FAVORITE THING TO DO WITH YOUR FREE TIME OFF THE GRID?

“Spend time with family. My wife, Meghan, and I have two young boys, Patrick (3.5 years

old) and Johnny (2 years old). We love taking family vacations to the beach.”

WHAT’S YOUR FAVORITE #INTEREST CHANNEL IN OLIVE’S SLACK?

“#interest-olympics. I grew up swimming competitively in international events and also lived in Australia during my teenage years where I competed in national competitions. During this time, I was seen as ‘the American guy,’ which I fully embraced. I have an immense amount of respect for the dedication professional athletes have for their sport and love seeing the best athletes in the world compete against each other. It is fun seeing other Olivians with an appreciation for athletics cheer on American athletes and show their support for our country.”

See Olive's Panel Management solution in action

The relationships built between providers and their patients are what keep people coming in for the screenings and checkups that keep them healthy.

But it's not always easy for clinicians to connect with the right patients in the right way. In mid-2021, as many as 10% of patients on primary care panels hadn't seen their primary care clinicians in the last two years. When those connections are missed, patients can fall through the cracks to the detriment of their overall well-being.

Leaders from Gundersen Health System, a nonprofit system serving areas of Wisconsin, Iowa and Minnesota, knew they couldn't achieve their population health goals unless they kept an up-to-date patient panel and effectively reached out to patients who needed to be seen.

Through collaboratively built automation solutions, they were able to do both.

Finding and connecting with the right humans

It's difficult for healthcare providers to keep up with their ever-changing patient panels. Patients may fall off of a panel because they moved away or needed to switch providers because of a new health plan.

The continuous ebb and flow of patients means it can be complicated to determine who Gundersen cares for, how to engage active patients who are overdue for care and how to report quality-of-care metrics.

And even if the patient panel is completely up to date, it is hard to reach patients who may be overdue for care. Methods used by Gundersen in the past — like letters and messages sent via

their patient portal — had fallen short. They didn't allow for two-way communication and were often ineffective.

An effective automated solution

Rajiv Naik, MD, Gundersen medical director of informatics and CMIO, collaborated with Olive to design, automate and scale Gundersen's panel management and patient engagement solutions. Olive brought the capability and expertise to sort, categorize and connect with patients using conversational text messaging.

Gundersen Health System confirms a patient's status and PCP in this sample of a two-way text exchange.

This is Gundersen Health System. We have a few questions for you to update your records. This information will be used to help us know who we provide care for. Thank you.

Please use the following responses only: Text STOP to unsubscribe. Text "#1" for Yes or "#2" for No

Are you a Gundersen Health System patient, or do you care for or live with someone who is?
RESPOND: 1) for Yes
2) for No

Do you still consider yourself a patient of Dr. Doe?
RESPOND: 1) for Yes
2) for No

Please call us at 608.123.4567 or visit gundersenhealth.org to schedule your next wellness visit.

“Understanding and maintaining accurate patient panels is a foundation upon which we can build automations, patient engagement strategies, care gap campaigns and other creative solutions to improve the health of the communities we serve.”

— RAJIV NAIK, MD, MEDICAL DIRECTOR OF INFORMATICS AND CMIO AT GUNDERSEN HEALTH SYSTEM

Gundersen and Olive worked together on an evidence-based algorithm to group patients by demographics and historical engagement levels. The algorithm classified patients overdue for wellness care so they could be engaged via two-way text messaging.

The text message asked the patients to confirm their patient status with Gundersen and their primary care clinician. If the patient no longer identified as a Gundersen patient, or if they met the historical non-engagement threshold for depanelment, Olive inactivated the patient from the panel through an automated action in the EHR.

It is a major decision to remove a patient from a panel. Once removed, the patient misses out on communications and the streamlined care they receive from Gundersen clinicians. To ensure patients were correctly depanelled, Olive used many data quality checks throughout the automation on both the data provided from Gundersen and

the data returned to the EHR.

If the patient identified themselves as a Gundersen patient, they were encouraged to make an appointment for wellness care.

Through careful collaboration and thoughtful process updates, Gundersen achieved its goal of cleaning up patient panels and contacting and engaging the right patients in the right way. Moving forward, Gundersen leaders see even more ways that automation can improve their population’s health.

“Olive has been a great partner in innovation to help solve problems in the clinical area using creative solutions in artificial intelligence,” says Dr. Naik. “Understanding and maintaining accurate patient panels is a foundation upon which we can build automations, patient engagement strategies, care gap campaigns and other creative solutions to improve the health of the communities we serve.”

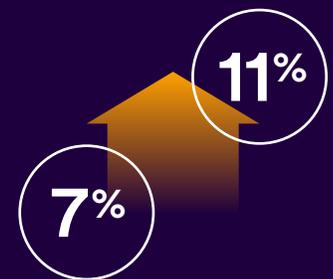
Results at Gundersen

153,000
PATIENTS

managed across 302 primary care clinician panels

15,000 patients contacted in the first 10 weeks with a

40%
RESPONSE RATE

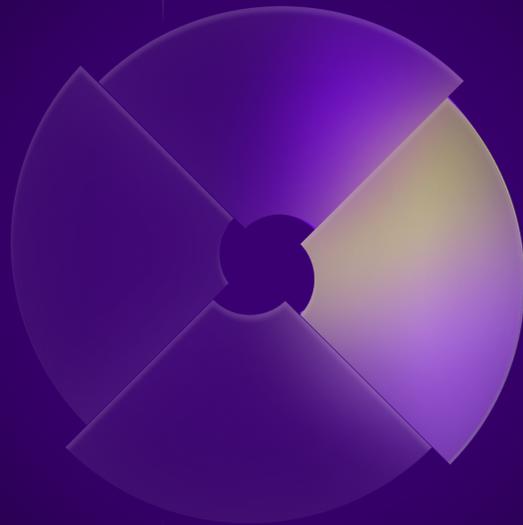


Helped improve diabetes control metrics by 7% and child immunization rates by 11% and increased colorectal cancer screening rates through more accurate panels

CREATED
\$1.5M

in impact for the healthcare system

Reimagining utilization management: the journey to precision UM



Healthcare is never stagnant. Its stakeholders are always working to improve processes in the pursuit of high-value care, providing high-quality, low-cost care with excellent patient outcomes and experiences.

That pursuit was why utilization management (UM) efforts began in the first place, as health plans attempted to align incentives with providers in a fee-for-service world. By reviewing procedures based on medical policy guidelines, health plans could make sure care was appropriate before paying for it.

While prior authorization and managed care techniques play

an important role in helping members access safe and effective care, it's become abundantly clear that current UM procedures cause friction and don't contribute to a positive experience for patients, providers or health plans.

That's because UM is a clinically complex and often manual process. Health plans receive requests from a variety of channels, from portals to phone calls to faxes. They are burdened with the review and approval of increasing numbers of procedures and sometimes receive prior authorization requests for procedures that don't even require one. On the other side of the fax machine, providers have to determine which clinical documents

each health plan requires to approve payment, and those requirements change 8% each month.

At its worst, UM can leave members waiting to access care they desperately need.

It's time to reimagine the whole process. Certainly the industry our lives depend on deserves the most current technology. With Olive, utilization management can evolve from its fax-dependent, friction-ridden current state to one that previously seemed impossible.

[Hear more of the story](#)

“EVERYTHING YOU CAN IMAGINE IS REAL.”

— PABLO PICASSO

Creating new connections

Providers and payers deserve a UM platform that not only improves their communication and cuts down on unnecessary, back-and-forth phone calls and faxes, but truly unleashes data and enables the flexibility needed to support local market strategies — the ability to do more authorizations without increasing costs. Olive’s UM Transformation solution does just that.

Olive automatically reviews incoming electronic authorization requests on behalf of the payer and enables payers to automatically approve authorizations when medical necessity is met.

If the request satisfies all requirements, Olive recommends them for approval — freeing up nurse and physician time for the most complex cases. For reviews that do need a human touch, Olive’s AI assistant guides reviewers with real-time, relevant data so they can work smarter and perform more accurate reviews.

With this level of connection and capabilities, providers are able to do less work to submit prior authorization requests, health plan administrators require less time to approve them and members get needed care more quickly through reduced care delays. That amounts to reduced variability in approvals, improved member satisfaction and lower operating costs.

Health plans can also bring their utilization management efforts in-house — gaining direct access to their UM data to better understand their members and how to care for them.

All of this lays the groundwork for the ultimate utilization management goal: precision UM.

Pursuing precision UM

Once health plans have real-time, comprehensive visibility into their UM data, they can take the next step toward a value-based system by providing precision utilization management.

Precision UM is when health plans use their data and artificial intelligence to ensure members get the right care at the right time, minimizing medically unnecessary care.

They can detect provider spend variation, compare provider alignment with medical necessity guidelines and check member outcomes — and then use that information to build management tools, localized market strategies and smarter networks to incentivize the highest-value care.

It’s outcomes-based utilization management that enables health plans to become the network of choice while unleashing data and insights to continuously improve member and provider satisfaction.

Precision UM represents a movement to a true value-based care system, connecting the systems necessary to align payments to outcomes and evolve beyond prior authorization of yesterday.

It’s possible. It’s proven. It’s Utilization Management Transformation with Olive.

Why payers should join the Internet of Healthcare and start deploying AI at scale

Artificial intelligence isn't new — it's been top of mind for years across a variety of industries, including healthcare. But most healthcare organizations, including payers, have barely scratched the surface of AI's potential.

Payers need transformative AI for their own success and to improve healthcare as a whole. It can provide immediate benefits today and long-term benefits in the future. The transformative benefits of this technology can only be realized if payers join the Internet of Healthcare and move the industry beyond single-purpose AI solutions to an era of increased connectivity, accessibility and collaboration.

What is the Internet of Healthcare?

Right now, healthcare doesn't have the internet. The various back-end systems in use today don't talk with each other within organizations, let alone speak across institutions while actively learning and becoming more efficient.

To achieve transformation at scale — within an organization and throughout the entire healthcare industry — we need an actual network of intelligence. It's a system that communicates as an ecosystem, sharing data and finding insights across previously disparate applications. With the creation of the Internet of Healthcare comes the ability to automate these processes to create more efficient systems that share

information and transform the healthcare experience for humans.

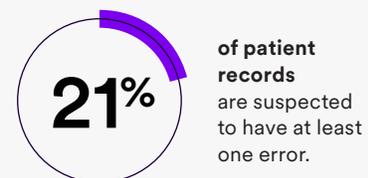
Payers have so much to gain from joining the Internet of Healthcare and deploying AI at scale:

Reduced costs and fewer errors

For one, automation can reduce costs for payers without reducing the quality of care.

The 2021 Internet of Healthcare report found that providers' administrative staff suspect an average of 21% of patient records have at least one error. With payers and providers connected in the Internet of Healthcare, these errors can be reduced dramatically.

INTERNET OF HEALTHCARE REPORT DATA HIGHLIGHT



AI can automate payers' manual, repetitive processes, simultaneously slashing administrative costs and human errors. And cybernetic solutions — or AI assistants that work alongside human employees to provide relevant

MOST HEALTHCARE ORGANIZATIONS, INCLUDING PAYERS, HAVE BARELY SCRATCHED THE SURFACE OF AI'S POTENTIAL.

information at their fingertips — improve the speed and accuracy of work that can't be automated as well. These solutions provide a near-immediate ROI.

When costs are reduced through proven AI solutions, both time and money can be redirected toward other, higher-value work. Artificial intelligence expands a payer's capacity, unleashing the resources and focus to deploy new solutions, improve current processes and optimize their business model. It's a self-fulfilling cycle that allows payers to make continuous improvements, generating more savings, improving the member and provider experience, and making them a leader in a highly competitive industry.

Improved member experience and health outcomes

In general, AI and the Internet of Healthcare will improve care and reduce medical costs over time, which will ultimately impact the patient. But there are also several direct impacts on members, such as fewer

billing errors, faster problem resolution and even fewer care delays. Artificial intelligence can streamline the entire prior authorization process, enabling completely touchless prior authorization approvals and faster access to care for members.

There is also incredible potential to uncover data that improves member health outcomes: 95% of healthcare executives are optimistic that AI will connect data systems to provide better insights and patient outcomes, according to the Internet of Healthcare Report.

Processes that use artificial intelligence reduce errors, misdiagnoses and care delays that can negatively impact health. As more payers and providers join the Internet of Healthcare, the value of the amassed data will grow, allowing advanced AI to uncover insights that will improve individual and population health outcomes.

Becoming providers' plan of choice

Right now, payer-provider relationships are full of friction. Outdated, unconnected

systems and processes on both ends lead to costly errors and a heavy administrative burden. But with AI solutions, payers can become a provider's plan of choice by being the easiest and fastest to work with.

Today, AI can reduce or eliminate administrative barriers that impact care. For example, when a U.S. payer first delivered point-of-care prior authorizations, they reduced their average approval time by a week. The net promoter score of this project was 75 — on par with the scores of Starbucks and Amazon.

Emerging as a leader in healthcare

The benefits of artificial intelligence have been proven time and time again in other industries. In healthcare, we're still at the tip of the iceberg. The Internet of Healthcare will streamline processes, deliver insights and encourage partnerships with providers. Payers that fully embrace this technology will emerge as industry leaders and, most importantly, deliver best-in-class experiences to both members and providers.



HEALTHCARE AUTOMATION TRENDS HAPPENING IN 2022

- With each passing year, automation and artificial intelligence's presence in healthcare grows. Technology's capabilities become more advanced, new ways of thinking about AI in healthcare emerge and improved solutions hit the market.

These are the top trends we're seeing for healthcare automation in 2022.

1

PAYERS ARE EMBRACING AUTOMATION AND AI TO REDUCE ADMINISTRATIVE COSTS

In the data-driven healthcare industry, there is enormous potential for automation and AI. With machine learning and robotic process automation, bots can automate increasingly sophisticated workflows and provide insights into patient care and outcomes that payers can use to reduce their own costs while creating optimized care paths for their members.

The data and processes that live with payers are a crucial piece of the healthcare puzzle. By embracing AI and automation, payers can become a part of the Internet of Healthcare that will push the industry into a new era of connectivity and collaboration.



“We’re going to see partnerships entering the healthcare space that have never been there before, that are going to enhance us and bring us to a new level.”

Patty Grinton, MD
OnDemand Telemedicine,
Medical Director
Atrium Health

2

NEW PARTNERSHIPS ARE AUGMENTING AUTOMATION’S IMPACT

Payers and providers are digitally disconnected, and the connection between patients and healthcare providers often isn’t much better. Government organizations, technology companies, employers — there are so many influencers and stakeholders for healthcare and for health. To materially improve healthcare, we need comprehensive solutions that connect all stakeholders. We need partnerships that solve the root of the problems. Automation and AI will be an important piece of these partnerships and the solutions.

Healthcare leaders and stakeholders, like **Dr. Patty Grinton**, a pediatrician and the on-demand virtual care medical director at Atrium Health, are pushing for this change and expect to see more partnerships evolving in 2022.

“We’re going to see partnerships entering the healthcare space that have never been there before, that are going to enhance us and bring us to a new level,” Dr. Grinton told Olive. “We know how to deliver care, we are great at healing and we’re going to have some incredible partnerships in the future that will elevate us.”

3

THE “HEALTHCARE ECOSYSTEM” MINDSET WILL CONTINUE TO GAIN TRACTION

Connected to the elevated importance of new partnerships is the concept of the “healthcare ecosystem,” an interconnected system in which separate components work together for optimal growth and outcomes. That’s a far cry from how healthcare exists today, but leaders recognize the importance of viewing the industry as an ecosystem — and the industry is moving toward acting like one. Patients need synergy between the various providers, payers and technologies they encounter on their care journey. Plus, by operating as an ecosystem, healthcare will start to unify disparate data sources, which can unlock new insights and improve healthcare delivery.

At Olive, one component of the healthcare ecosystem we’re working on is the technology ecosystem. **The Library is the first healthcare platform with a developer ecosystem**, meaning anyone can build solutions on it and make them available to the industry.



Imagine a world where providers and payers have open and immediate access to the technologies they need to work more efficiently and deliver better care. We call it The Library — a first-of-its-kind, universal marketplace for digital healthcare solutions.



4

INTEREST IN WEARABLES IS INCREASING

A broader healthcare technology trend is the increase in wearable technology. Wearables are becoming more sophisticated, and personal health devices can monitor heart rate, oxygen levels, blood pressure and more. This data can be integrated into EHRs and used to improve care delivery.

When you go one step further and connect these devices to AI, it becomes possible to consistently and remotely monitor patient data, alerting providers to problems more quickly and helping them make more accurate diagnoses. Providers have started to see real applications for these solutions, and patients are ready to trust them — making it a prime area for growth in 2022.

5

AI IS PLAYING A ROLE IN ACHIEVING HEALTH EQUITY

The COVID-19 pandemic has highlighted the health disparities that have long existed in the United States, increasing awareness of the need for health equity. Social determinants of health are now better understood — the next step is to solve for them. Technology and AI can be part of the solution. Health tech can increase and improve access to care. **AI and automation** can make healthcare more affordable. Machine learning programs can ensure equitable, non-biased treatment plans and diagnoses.

But AI also could create its own biases if they're not properly considered. For example, if the datasets are limited and not diverse enough, the learnings could be inaccurate for other groups. Or historical datasets that fail to account for demographic information could exacerbate biases.

Researchers, developers, providers and government agencies continue these important conversations to ensure that AI helps, not harms, the progress toward health equity.



Health tech can increase and improve access to care. AI and automation can make healthcare more affordable. Machine learning programs can ensure equitable, non-biased treatment plans and diagnoses.

6

THE FUTURE OF HEALTHCARE AUTOMATION AND ARTIFICIAL INTELLIGENCE

Without a doubt, 2022 will see a continuation and evolution of automation and AI in the healthcare sector. With the COVID-19 pandemic continuing to push the industry to its limits, healthcare needs innovation now more than ever. Healthcare can use AI at all levels — from processing claims to influencing population health and everything in between.

We believe that these evolving and new technologies have the potential to transform care, making people healthier and making healthcare more sustainable.

EMPLOYEE SPOTLIGHT:

Illuminating the Journey to Olive



Increasing compassion in healthcare administration:

Meet Talent Acquisition Manager Regina Mickley

Regina Mickley (she/her) knows all too well how the current, flawed healthcare system negatively impacts patients and their loved ones. She recalls the stress of dealing with the system when her mother was in a terrible car accident during Regina's senior year of college.

"She was in a coma for two months and then spent the next year in various rehab and long-term care facilities before she finally was able to come home," says Regina. "I distinctly remember my dad getting double billed for the helicopter ride while my mom was still in the ICU. My dad shouldn't have had to worry about meticulously reviewing every medical bill he received. I never want any family to experience something like that while their loved one is fighting for their life."

Regina has been working in talent acquisition her entire career, but after spending the first few years at two recruiting

“For far too long, patients have become accustomed to expecting healthcare to be inefficient, inconsistent and expensive. To be part of an organization that is challenging the status quo and doing something that impacts everyone is incredibly rewarding.”

— REGINA MICKLEY

agencies, she felt called to look for a mission-driven organization where she could be part of something bigger than herself.

“I really wanted to join an innovative organization where I could make a larger impact,” she says.

In 2018, when she found Olive — then just 60 employees strong — through a former colleague, she felt she found the right place for her.

“As I started learning more about the company, it was evident there was something really special here,” says Regina.

She joined as Olive’s first recruiter, and after almost

four years, Regina is still passionate about the work she’s doing as a talent acquisition manager — playing an important role in growing Olive’s talent to more than 1,300 employees spread across The Grid.

“I continue to be amazed by how intelligent, innovative, passionate and thoughtful Olivians are,” says Regina. “For far too long, patients have become accustomed to expecting healthcare to be inefficient, inconsistent and expensive. To be part of an organization that is challenging the status quo and doing something that impacts everyone is incredibly rewarding.”

WHAT DO YOU DO WITH YOUR FREE TIME OFF THE GRID?

“During the pandemic, I got married and purchased my first home, so the DIY projects have been endless. We got engaged in Ireland and decided to go with an Irish pub theme for our basement, which has kept us busy until spring comes around when we can build a large garden in our backyard. When I’m not busy being a homeowner, I love to play sand volleyball and smoke something new on my Traeger grill.”

WHAT’S YOUR FAVORITE #INTEREST CHANNEL IN OLIVE’S SLACK?

“#personal-pets, because who doesn’t love looking at adorable animals throughout the day?”

READY, SET, HACK



→ As the first universal platform for healthcare, Olive is always looking for new ways to support partners and third parties in the development of new solutions for the industry.

“To gain the scale we need to generate the magnitude of change required to transform global healthcare, we must enlist the developers of today and tomorrow,” says Olive CEO Sean Lane. “We must commit fully to the idea that a coalition of thousands or even millions of developers will build a new economy on top of healthcare’s new internet.”

Developers building on Olive can bring new ideas and expertise to the industry, gaining full access to Olive’s growing payer-provider network — without the typical development hurdles of security compliance and market access. To bring developers together to build on healthcare’s first true platform, Olive launched the Hack for

Health hackathon with Rotera, a member of Olive’s Develop partner program.

“We wanted to create an event that encouraged a wide range of developers to come build on Olive to grow our ecosystem of people working together to transform healthcare,” said Patrick Jones, executive vice president of partnerships at Olive.

Hack for Health tasked developers with building Loops (think apps in an app store). Loops are designed to change the way healthcare professionals work in real time, reducing the scope for errors and burnout, improving efficiency, enhancing productivity and ultimately optimizing the patient experience. The developer community rose to the challenge with registrants from a broad spectrum of backgrounds, including Fortune 100 companies, early-stage startups and individual developers.

Winning Loops are changing lives with every line of code

The Loops submitted to Hack for Health spanned healthcare categories across supply chain, clinical care, financial services, research, reference tools and more. Olive selected five grand prize-winning Loops based on functionality, innovation, outcomes improvement and the bettering of diversity, equity and inclusion among healthcare workers and patients.

Grand prize winners received tiered cash prizes up to \$10,000 and a choice of prize packages, including industry speaking engagements as a badged

Olive partner or a 60-minute pitch meeting with the Olive Ventures team.

Developers from CMEfy won one of the grand prizes, submitting the Instant Rounds by CMEfy Loop. This Loop allows busy clinicians to earn turnkey CME credits for the educational conversations they have throughout the day. Using the Loop, practice leaders who want to drive value for their clinician populations can prompt providers to make 30-second reflections on colearning moments, instant rounds, case discussions and more while seamlessly earning credits.

In addition to CMEfy, the other winning Loops included:

[AESOP Technologies with the RxPrime Loop and DxPrime Loop to prevent missing and incorrect diagnosis codes](#)

[Grief Coach with the Grief Coach Loop to provide clinicians with practical guidance on how to speak with grieving family members of a deceased patient](#)

[Medecipher with the Predictive Staffing Flexing Tool Loop for actionable staff scheduling decision insights](#)

[Amit S. with the Supply Chain Rx Inventory Loop to manage supply chain Rx inventory with predictive analytics and the Clinical Trials REST API Loop to help users make informed decisions with an AI assistant when searching for active studies on ClinicalTrial.gov API](#)

Hack for Health made it easier than ever for developers to build and launch live Loops for the industry. “Medecipher has been eager to develop on Olive’s platform, and Hack for Health provided us with a unique collaborative opportunity to do so,” said Stephanie Gravenor, co-founder and CEO at Medecipher. “By leveraging Olive’s platform, we were able to quickly implement a clinician-facing decision support tool (our Loop) that provides critical operational insights from our models and algorithms. We’re honored to be named a winner of Olive’s first-ever Hack for Health contest with our Predictive Staffing Loop.”

The winning Hack for Health Loops offer many new ways to improve the day-to-day experience for healthcare providers. All partner Loops are available in The Library, Olive’s marketplace for digital health solutions.

CLOSING

THE

< CODING >

GAP,

ONE

CAMP

AT

A

TIME



Meet Mihir Amin

→ Mihir Amin (he/him) pays forward mentorship he got early on to help kids get into programming. His own love for programming began at a young age, thanks to a high-school computer science class led by a teacher who fostered his passion for code.

“He showed me how fun programming can be. It is what sparked my passion about building things,” says Mihir.

Mihir’s teacher simplified the fundamentals of code by making them interactive.

“[To learn] some of the data structures, he would put us physically inside the structures,” says Mihir. “[To learn] about queues, stacks, arrays and the operations you can do on them, he set up a line of chairs and had us act like the items in those structures. For logical thinking, we played a

robotic game where you had to move up, down, left and right.”

With an encouraging teacher in his corner, Mihir’s excitement led him to pursue a programming career in healthcare. He is now an engineering team captain on Olive’s Software Engineering team and Shiftwork Experience.

Mihir is determined to pay it forward and inspire the next generation of engineers through his work with HERO Code Camp — an event for girls in grades 3-12 designed to give beginner students an

“I want to help show these kids that they can build anything and hope to get them interested in programming.”

— MIHIR AMIN

introduction to STEM and more advanced students the opportunity to grow their skills.

“I want to help show these kids that they can build anything and hope to get them interested in programming,” says Mihir.

Closing the coding gap

Though tech maintains a healthy annual growth rate, the industry still struggles with representation and diversity. STEM fields in the United States are predominantly male, with women only making up 28% of the field’s workforce.

The American Association of University Women (AAUW) reports that girls are often discouraged at a young age from learning about and joining STEM-related fields because they are categorized as masculine. With a lack of female role models and little

exposure to STEM in school, the gender disparity in the field endures.

Enter HER Academy, an organization striving to educate young girls in technology and computer science in an effort to close the gender gap in STEM. One of HER Academy’s most popular educational resources is HERO Code Camp, a collaboration powered by Olivian volunteers, like Mihir, who are determined to share their love of programming with the next generation.

This group of volunteers works hard to make HERO Code Camp a reality each year. Mihir is one of seven Olivians on the committee organizing Code

Camp, driving the planning meetings to help set the event up for success. There were six total courses offered this year, one of which was taught by the HER Academy team and five that were taught by Olive volunteers.

Olive and HER Academy joined forces through mutual board member Chris Olsen of Drive Capital. Chris connected HER Academy’s Dr. Lena Furci with Olive’s Joel Chakra for a 2019 all-staff presentation. Following that presentation, a group of interested employees toured the HER Academy facility in Columbus and put on the first

in-person code camp just a few months later.

The program’s core tenet is to get more girls interested in coding, and it provides courses for all experience levels. The only thing expected of students during their time with Code Camp is that they build something.

HERO Code Camp’s courses are geared toward different experience levels based on the students’ current understanding of coding principles.

Success in Code Camp does not depend on whether or not a student’s program runs, who





“If students leave the camp excited about what they have built and eager to learn more, it will be a successful camp for us.”

— MIHIR AMIN

can build the fastest or who learns the most programming languages. HERO Code Camp simply wants to get more girls interested in coding.

“If students leave the camp excited about what they have built and eager to learn more, it will be a successful camp for us,” says Mihir.

Success in all grade levels

HERO Code Camp is learning and changing right alongside its students. Last year’s camp was technically aimed at students in grades 5-12, but a second-grade student was able to join one of the beginner courses.



“This student did a great job!” says Mihir. “She was able to follow along with everything the other students were doing and was engaged in the class. Because of how well this student did, this year we opened that specific course to third- and fourth-graders as well.”

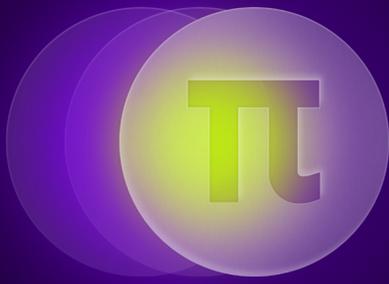
What’s next for HERO Code Camp?

Over the past year, Code Camp grew from 56 students spread across four courses to 156 students across six courses. In the coming years, Code Camp leaders hope to continue the program’s growth.

“I think [we] would like the program to continue to increase in students registered, but also have some corporate sponsors,” says Mihir.

HERO Code Camp is always looking for support. To simplify things, volunteers are restricted to internal staff at Olive and HER Academy. Spreading the word is crucial to Code Camp’s growth. Girls in grades 3-12 across the United States can join.

HERO Code Camp is also always looking for corporate sponsors. Interested parties can reach out directly to Mihir at mihir.amin@oliveai.com.



Introducing Pi: a flexible way to purchase healthcare tech



Gain economies of scale

Purchase Pi at an exchange rate with greater discounts for large investments to gain economies of scale.



Spend strategically

With streamlined contracting, quickly use Pi with Olive or third parties in The Library — Olive's curated marketplace of healthcare solutions.

- Designing a technology strategy can be difficult. Healthcare leaders must strike a balance between avoiding vendor lock-in, securing discounts for large purchases and not implementing technology that will be outdated in a few years.

The answer is Pi, offering universal transactions on the Olive platform.



Transacting in Pi is your commitment to automation. It gives you the oversight, flexibility and speed necessary to scale automation initiatives across your entire enterprise.

Be more adaptable with Pi.
Learn more at oliveai.com/Pi.



Monitor automation budgets

Gain holistic oversight into your organization's Pi use to remain on track with your automation strategy.



Avoid vendor lock-in

Get access to the newest solutions and adapt to challenges in real time due to changing needs or evolving technology.

The Olive Library: Olive's partner ecosystem is here to transform healthcare

→ Healthcare is one of the most complex industries in the world. These complexities can contribute to a multitude of problems — ever-increasing clinician burnout, disparate systems, lack of organizational agility and manual errors, to name a few.

 Olive is constantly innovating to deliver scalable solutions that address healthcare's most pressing needs. We take this responsibility seriously and have mobilized our teams to listen, understand and advance our solutions and capabilities. Olive's work continues to drive our mission to unleash a

trillion dollars by connecting healthcare, while making healthcare more human with automation. But we cannot do this alone. That's why Olive is partnering with leading healthcare industry players to transform healthcare through a collaborative ecosystem and our transformative marketplace, the Olive Library.

Partner highlights



Syllable: Syllable brings empathy, transparency and intelligence to every patient touchpoint outside the hospital and is relentless in its pursuit of a better experience for healthcare consumers. Through the Olive Library, Syllable offers conversational artificial intelligence in their “Patient Assistant” offering, which is made of focused areas by “skill”:

1

Patient Assistant – Transfer Skill:

A conversational AI solution for hospitals and provider groups that automates main line routing (for example, Switchboard/PBX) and department assistants.

BENEFITS:

Reduce wait times, the number of dropped calls and call length

Achieve a 57% automation rate for main line routing

Achieve a 45% automation rate for department assistants (for example, radiology, gastroenterology)

2

Patient Assistant – Scheduling Skill:

A conversational AI solution for hospitals and provider groups that automates appointment scheduling, rescheduling and access center productivity.

BENEFITS:

Reduce wait times, the number of dropped calls and call length

Increase appointment volumes and revenue

Achieve a 35% automation rate in scheduling and access center productivity

3

Patient Assistant – Prescription Renewal Skill:

A conversational AI solution for hospitals and provider groups that automates the prescription refill process for patients and providers.

BENEFITS:

Reduce wait times, the number of dropped calls, and call length

Optimize physician time

Achieve a 55% automation rate for prescription refills

4

Patient Assistant – Nurse Triage Line Skill:

A conversational AI solution for hospitals and provider groups to help qualify and navigate patients to a nurse line based on spoken intent.

BENEFITS:

Reduce wait times, the number of dropped calls and call length

Increase appointment volumes, ED avoidance and revenue

Improve clinical quality

5

Patient Assistant – IT Help Desk:

A conversational AI solution for health system IT help desks focused on internal employees and patients that covers a wide range of IT help desk use cases.

BENEFITS:

Achieve a 35% automation rate for password resets

Achieve a 55% automation rate for username retrievals

Achieve a 60% automation rate for EHR portal FAQs



Advocatia: Advocatia simplifies how uninsured patients identify financial assistance programs and enroll in coverage. Through the Olive Library, Advocatia has commercialized two key offerings:

1

Benefit Identification & Enrollment: Simplify the screening and enrollment process for benefit programs like Medicaid, charity care and social determinants of health.

BENEFITS:

Drive 9.6% more revenue annually through reimbursement increases

Reduce second placement services by 23.58%, saving nearly \$60,000 in fees each month

Decrease bad debt by properly assigning 37.63% more patients to appropriate programs

2

Benefit Screening Loop, powered by Advocatia: Easily obtain patient health benefit information and access financial assistance options for patients without health coverage using simple prompts. The Benefit Screening Loop is built on Olive Helps.

BENEFITS:

Enable quick screening and determination of benefit programs

Update team members on which patients are engaged and what their program eligibility is



Atlas Health: Atlas Health helps hospitals and health systems save and improve lives by ensuring every patient can access and afford the care they deserve. Through the Olive Library, Atlas Health has brought to market the Atlas Navigator, which optimizes \$30B in annual philanthropic medical financial aid for vulnerable populations on high-cost therapies. It optimizes patient assistance end-to-end — matching, enrolling and collecting data through its proprietary program database, AI automation and expert advocates.

BENEFITS:

Expand affordable care for all patients

Grow hospital and health system revenue

Reduce drug spend



PatientBond: PatientBond revolutionizes patient engagement using a proprietary psychographic segmentation model and digital communications, proven to motivate desired healthcare consumer behaviors. Patient Bond is available as an offering in the Olive Library and uses psychographic insights to create personalized messaging that will appeal to healthcare consumers based on their psychographic profiles.

BENEFITS:

Drive a 3x increase in PCP appointments after an ER visit

Achieve a 7x increase in telehealth registrations

Reduce CHF readmissions by 85% and COPD readmissions by 75%



SmarterDx: SmarterDx is a physician- and data scientist-led company that helps hospitals realize revenue integrity. Through The Library, SmarterDX commercialized the SmarterIntegrity CDI. SmarterDx integrates with prebill and second-level review to ensure complete capture of diagnoses (CDI and coding) that

impact revenue (MS and APR) and quality (including HCC, Elixhauser and ROM).

BENEFITS:

Achieve a contractually guaranteed 900% ROI (10:1 returns) in attributable pre-bill findings

Find quality-impacting diagnoses (HCC, Elixhauser, ROM) at no additional cost

Expect \$5M+ in marginal revenue and 2,000 quality-impacting diagnoses at a 400-bed hospital

Ecosystems work

Olive's mission of unleashing a trillion dollars by connecting healthcare is ambitious, but we are ready for the challenge. By working together with the movers and shakers of the healthcare industry in this new and exciting ecosystem, we are making this a reality. Olive is collaborating with more than 50 partners who are commercializing their solutions through the Olive Library, our online marketplace.

The Olive Library

The Olive Library enables healthcare organizations to be deliberate in their commitment to and adoption of automation. It houses both Olive and third-party applications and services in one place to empower healthcare systems to drive

and control the adoption of automation across their organizations.

Applications or services on the Olive Library can be purchased using Pi. Pi is the transaction method for purchasing health tech that helps healthcare organizations be nimbler and on-strategy.

Pi enables healthcare organizations to avoid vendor lock-in by empowering them to commit to automation, not a vendor. It lets them purchase new solutions in the Olive Library quickly and with flexibility. It also helps healthcare organizations gain economies of scale. Transacting with Pi enables them to receive discounts and leverage greater purchasing power from large investments: The more Pi they buy, the more they get to allocate.

The Olive Library streamlines contracting and implementation processes. All partner applications and services in the Olive Library use standard legal terms and can be implemented using your existing governance structure with Olive.

PRODUCT OFFERINGS

The applications and services in the Olive Library are divided into **Standard offerings** that are available now and **On the Horizon offerings** that will be available in the future.

These innovative offerings redefine what the future of

healthcare will be for patients, providers and payers. Learn more about the standard offerings currently available by visiting library.oliveai.com.

Standard offerings each have corresponding *Pi prices* and *estimated implementation* times listed.

- *Pi prices* are in annual terms. The Pi price reflects the value for an organization with net patient revenue of \$1 billion. It is adjusted to align with the size of your organization based on a sliding scale and Olive's anticipated impact, along with applicable implementation factors.
- *Estimated implementation* times represent the anticipated timeline from point of purchase to live automation. Specific customer dependencies, such as data/security requirements and user acceptance testing, can drive variability in this timeline.

Here at Olive, we work hard every day innovating and developing new products and services that will revolutionize the healthcare industry and tackle the quadruple aim of healthcare. You can see what's in store by checking out our On the Horizon offerings in the Olive Library and maybe even get inspired to partner with Olive to create your own!

Visit <https://library.oliveai.com/> to learn more!

O·LIV·OL·O·GY

Your buzzword-busting guide to some of Olive's most important (and often confusing) terms.

As we travel Olive's journey to creating the Internet of Healthcare, you may encounter some unfamiliar parlance. To help you steer clear of confusion, we've provided definitions to names and words we often rely on. Consider this our lexicon to uncharted territory.

Humanpower

DEFINITION: A way to measure the peak work output of a software robot compared to that of a human.

Like horsepower, humanpower (Hp) creates a universal measure of power on a relative scale. However, 1 humanpower does not equal 1 human the same way 1 horsepower does not equal 1 horse. Both horses and humans cannot sustain peak performance nonstop. They need rest, food and sleep. 1Hp = 2.85 FTE.

Workflow Automation

DEFINITION: The process of using rule-based logic to launch a series of tasks that run on their own without any human intervention.

In healthcare, patient scheduling, revenue cycle management, billing, supply chain, inventory management and human resources are just a few of the areas that are already benefiting from artificial intelligence and workflow automation technology. More candidate processes for automation are being identified every day.

Health Assurance

DEFINITION: An emerging category of consumer-centric data-driven healthcare services that are designed to bend the cost curve of care and help us stay well.

Health assurance combines data, technologies and talent to commit to providing individuals and populations a path to living their healthiest lives. The five core principles are:

Create sustainable partnerships between technologists and providers.

Apply data and technological advances to deliver the best care possible.

Recenter the healthcare experience to focus on the relationship between people and their care providers.

Evolve the payer-patient-provider system to one where incentives are fully aligned.

Scale a dynamic model that can accommodate changes in scope and demand.

