



### ClearBIII

Automized medical bill auditor and summarizer.



## Problem

Healthcare billing is costing billions in errors, patients are frustrated having to call the hospital a multiple times.

What if there was a way to save billions wasted on billing errors while improving patient satisfaction and reducing overall healthcare expenditure?

### Medical Fraud

51.2 billion lost to
Medicare billing errors in
2023 alone

### Errors



4 / 5 itemized bills contain errors



# Key pain points

MOST MEDICAL BILLS AROUND 80% OF THEM CONTAIN
SOME TYPE OF ERROR AND THE ERRORS ARE RARELY IN
FAVOR OF THE PATIENT

#### **Patients**

- Confusing
- Error- ridden bills
- Impact financial health
- Reduce healthcare transparency
- Affect patient experience in turn affecting a facility's perceived image.

#### Hospitals

- DEFECTS COSTLY REWORK AND DELAY REVENUE COLLECTION
- OVERPROCESSING EXCESSIVE
  TIME SPENT MANUALLY DIVERTING
  RESOURCES FROM CORE VALUEADDED ACTIVITES
- WAITING DEAYS -IN BLING REDUCING CASH FLOW
- REWORK STAFF RE-PROCESS
   BILLS INCREASING COSTS AND
   INEFFICIENCY WITHOUT ADDING
   ANY VALUE

#### Government and insurers

- FINANCIAL LOSS SUBSTANTIAL LOSSES THAT COULD BE DIRECTED TO OTHER PUBLIC HEALTHCARE RESOURCES
- OVERSIGHT BURDEN INCREASED OVERSIGHT
- INEFFICIENCY REQUIRES MORE TIME AND COSS MORE, REDUCING OPERATIONAL EFFICIENCY AND INCREASES OVERHEAD
- PUBLIC TRUST AFFECT PERCIEVED RELIABILITY



#### **FEATURES:**

Automated Error detection

Interoperable design

Summarized visit details

Cross references discharge notes

Cost transparency score

## ANTICIPATED FEATURES:

Data insights for Hospitals

Historical Data analysis

Patient Portal that allows patients to review, understand and approve bills easily

Hospital ranking system based on affordable prices and a smaller number of errors

#### **VALUES:**

Advance transparency in billing

Increased operational efficiency for hospitals

Enhanced patient experience

Cost savings and revenue protection



# PRICING STRATEGY

OVERVIEW OF PRICING STRATEGY	TARGET CUST\MER SEGMENTS	KEY PRICING COMPONENTS
CUSTOM LICENCES FOR LARGE HEALTHCARE SYSTEMS AND TIERED PRICING FOR 1 <sup>ST</sup> 2 YEARS	HEALTHCARE NETWORKS, OUTPATIENT CENTERS, CLINICS, HOSPITALS, SPECIALITY PRACTICES	BASE PACKAGE: REAL TIME AUDITS, ERROR DETECTION AND BILLING SUMMRARIES
VALUE BASED PRICING FROM 3 <sup>RD</sup> YEAR	MEDICAL BILLING AND INSURANCE COMPANIES	PREMIUM ADD ONS: ADVANCED ANAALYTICS, FRAUD DETECTION, CUSTOM REPORTING
SCALABILITY AND MULTI-YEAR AGREEMENTS( Offer discounts on multi-year agreements)	U.S. GOVERNMENT ACCOUNTABILITY OFFICE, RECOVERY AUDIT CONTRACTORS	IMPLEMENTATION AND ONBOARDING: INITIAL SET UP FEES AND TRAINING OPTIONS



01/2025 -12/2026 Market research and entry	01/2027- 12/2028  Diversification and market penetration	01/2029 – 12/2030  Further expansion, revenue diversification to market dominance
Objective: Establish market presence, secure partnerships, build initial customer base.	Objective: Increase adoption with expanded offerings, grow partnerships, and launch premium features.	Objective: Expand customer base with an aim to establish ClearBill as a market leader.
- Launch <b>pilot programs</b> with select hospitals and partners to demonstrate benefits.(Ex. RWJUH)	- Roll out 1/2 <b>new premium features</b> like advanced analytics, fraud detection, and benchmarking.	- Begin expansion to other customer segments (Insurance companies, government, medical billing and auditing companies)
- Develop partnerships with hospitals, healthcare consultants, offer incentives for referrals in tri-state area.	- Increase <b>sales efforts</b> for mid-sized and smaller hospitals across the country expanding out of New Jersey.	- Increase sales efforts and expand the customer base for multi-location providers, clinics, specialities, insurance companies, government agencies; explore reseller channels.
- Focus on <b>marketing and brand awareness</b> through referrals, conferences, digital campaigns.	- Implement a <b>Customer Success Program</b> to optimize feature utilization and retention.	- Revenue diversification through customer segment specific features, fraud detection-as-a-service, patient portal(minimal charge or subscription based).
- Create a <b>feedback loop</b> from pilot programs to refine features and support.	- Use data for case studies and ROI demonstrations to aid sales.	- Establish an <b>innovation hub</b> for ongoing R&D, focusing on Al-driven solutions.
- Secure 5-8+ pilot contracts with hospitals.	- Double <b>customer base</b> from 2025.	- Expand ClearBill to government, insurance and medical billing companies.
- Establish/ in talks with partnership with 1 EHR provider.	- 10% YoY revenue growth	- 30% YoY revenue growth.
- Collect data for error reduction and patient satisfaction benchmarks.	- Introduce 1/2 new premium features.	- Develop 2 new revenue-generating services.



## Scale



#### 2025-2026 PILOT Programs

- Partner with at least 5 hospitals for pilots.
- 1 EHR partnership
- Build initial customer base



2027-2028 Expand Customer base

- Sell it to large, small and medium sized hospitals
- Add new features
- Expand customer base out of tri-state area



2029-2030 Revenue diversification

- -Target sales efforts towards different customer segments
- Expand to 1 international country by the end of 2030/mid 2031.

# Impact statement

- With 80% of U.S. medical bills containing errors, we aim to rectify these discrepancies, saving an average of \$1,300 per hospital bill. This translates to an estimated \$125 billion in lost revenue for healthcare providers each year, which we can help reclaim through accurate billing practices.
- Our efforts will not only enhance financial transparency but also alleviate the burden on patients—two-thirds of adults worry about affording unexpected medical bills. By minimizing surprise billing events, which affect 1 in 5 insured adults, we empower patients to make informed decisions about their healthcare.



YOU'RE THE BEST