

# Mission and Vision

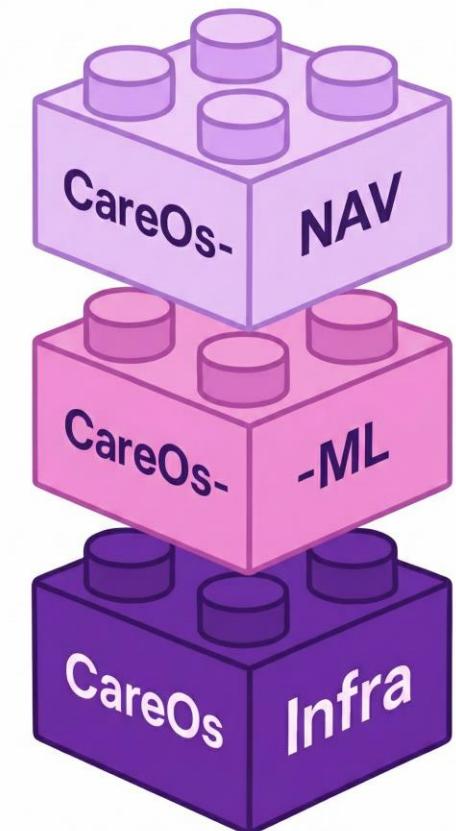
Saffron's mission is to improve women's healthcare everywhere.

Our vision is to partner with healthcare providers, payers, and patients to orchestrate care, using menopause as the front door. We call this vision Saffron's CareOs.

We plan to achieve this vision by:

1. Establishing a low-overhead, scalable data infrastructure that allows us to integrate seamlessly with providers' claims and EHR data (CareOs-Infra).
2. Identifying women who may be missing a diagnosis or appropriate treatment for perimenopause or menopause using clinically-driven machine learning (CareOs-ML).
3. Recommending a clinically-validated care-management plan that providers can implement and help women navigate menopause-related symptoms (CareOs-NAV).
4. Implementing a flexible business model that allows us to serve women managed through both value-based care and fee-for-service clinic (CareOs-Contract).

## Saffron's CareOs

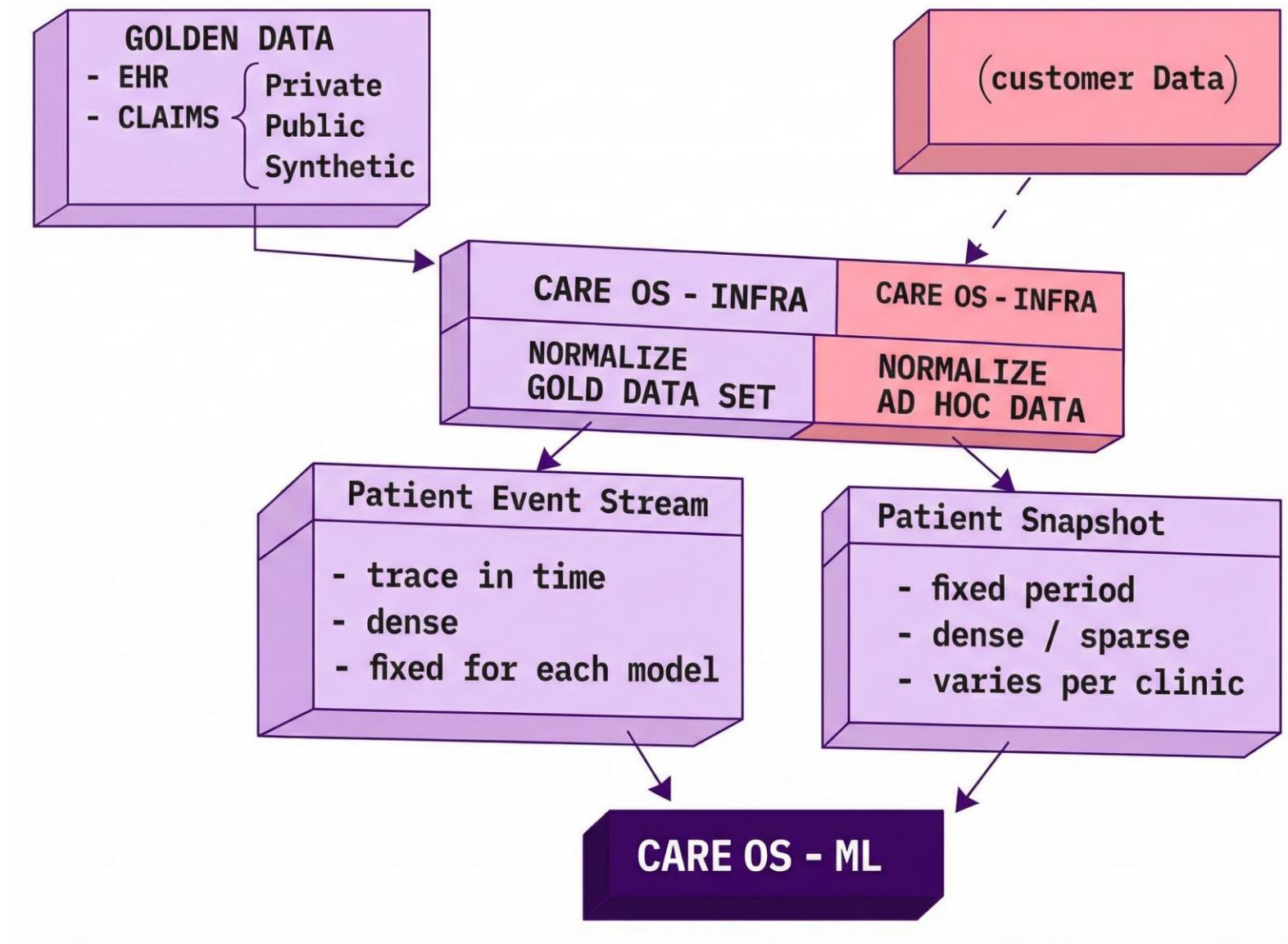


# Benefits

We believe this strategy will:

1. Improve the quality of life for women experiencing severe menopause and perimenopause.
2. Reduce short-term healthcare costs by preventing unnecessary utilization.
3. Reduce long-term healthcare costs by supporting preventive measures for chronic conditions.
4. Decrease administrative burden for providers while enabling more comprehensive care for women in their clinics.

# CareOS-Infra



# CareOS ML/AI

Clinical Guidance Recommended Actions Based on Posterior Distribution

## Patient A Profile

HIGH CONFIDENCE

**80%  $\pm$  5%**

- Clear vasomotor symptom documentation
- Consistent sleep/mood complaint pattern
- Age-appropriate lab values available

### RECOMMENDED ACTIONS

- Prioritize for provider outreach
- Review for HRT candidacy assessment
- Consider formal diagnosis documentation
- Evaluate for guideline-based management

## Patient B Profile

LOW CONFIDENCE

**80%  $\pm$  22.5%**

- Sparse clinical documentation
- Symptoms overlap with other conditions
- Missing confirmatory lab results

### RECOMMENDED ACTIONS

- Defer outreach pending more data
- Flag for symptom tracking at next visit
- Order FSH/estradiol if not recent
- Re-score after records update

# CareOS ML/AI: How does it work ?

## 1. Foundation models

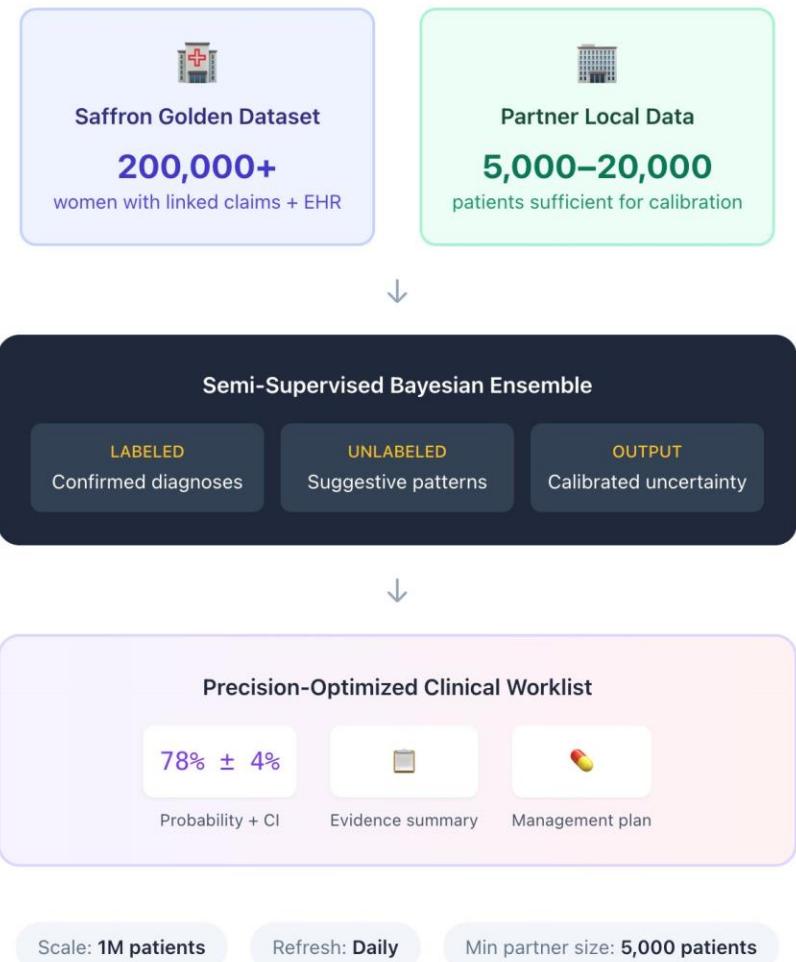
We train our models on Saffron's Golden Data Set ( $\geq 200,000$  women with linked claims and EHR data), learning generalizable patterns for perimenopause and menopause detection across diverse populations and care settings. We then incorporate each partner's local data (<20,000 women is sufficient) to adjust for site-specific documentation practices, coding conventions, patient demographics, and care patterns.

## 2. Learning from incomplete labels.

Traditional models require confirmed diagnoses for training. In perimenopause, this creates circularity—the undocumented cases are excluded from model development. Our approach learns jointly from patients with confirmed diagnoses and patients with suggestive patterns but no formal documentation, identifying which combinations of symptoms, medications, labs, and utilization patterns predict the condition regardless of whether it was coded.

## CareOS-ML: Adaptive Detection Architecture

Base model learning + local calibration enables deployment across partner populations of any size



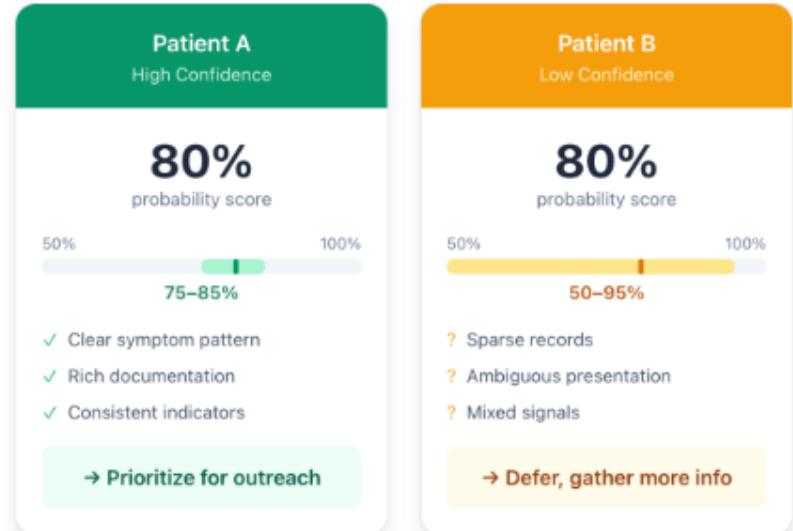
# CareOS ML/AI: How does it work ?

## 3. Quantifying uncertainty.

Most models produce single-number predictions: "78% probability of undiagnosed perimenopause." But clinical utility depends on knowing whether that estimate is reliable. Two patients scored at 78% may have very different underlying certainty—one with rich documentation and clear symptom patterns, another with sparse records and ambiguous presentation. Our model distinguishes these cases, providing uncertainty ranges that inform clinical prioritization.

### The Calibrated Uncertainty Advantage

Same probability score, different clinical decisions



### Why This Matters

#### Without Uncertainty

- Both patients appear identical
- Resources wasted on low-yield cases
- Provider trust erodes over time
- No basis for prioritization

#### With CareOS-ML

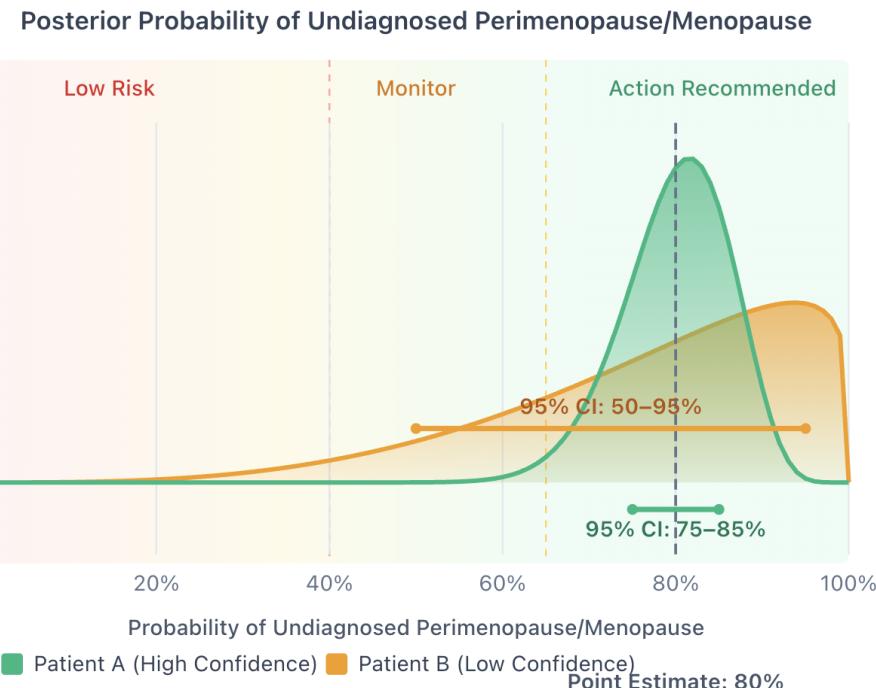
- Confidence maps to real-world accuracy
- Clinical resources allocated appropriately
- Provider trust preserved
- Actionable decision thresholds

Key differentiator: When the model expresses high confidence, chart review confirms predictions at correspondingly high rates.

# CareOS ML/AI: Quantifying uncertainty

## Understanding Prediction Confidence

Posterior probability distributions for perimenopause/menopause detection



**Clinical Guidance** Recommended Actions Based on Posterior Distribution

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**Patient B Profile** LOW CONFIDENCE

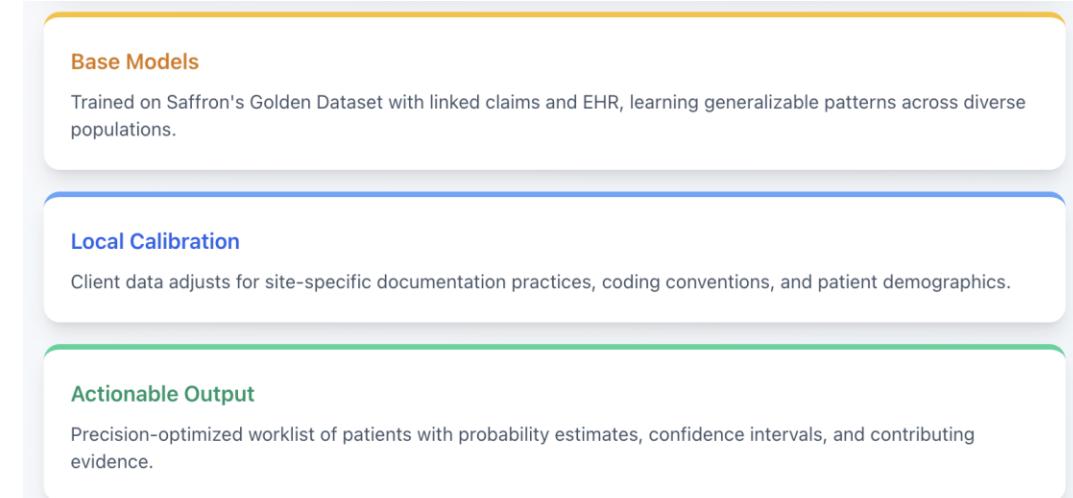
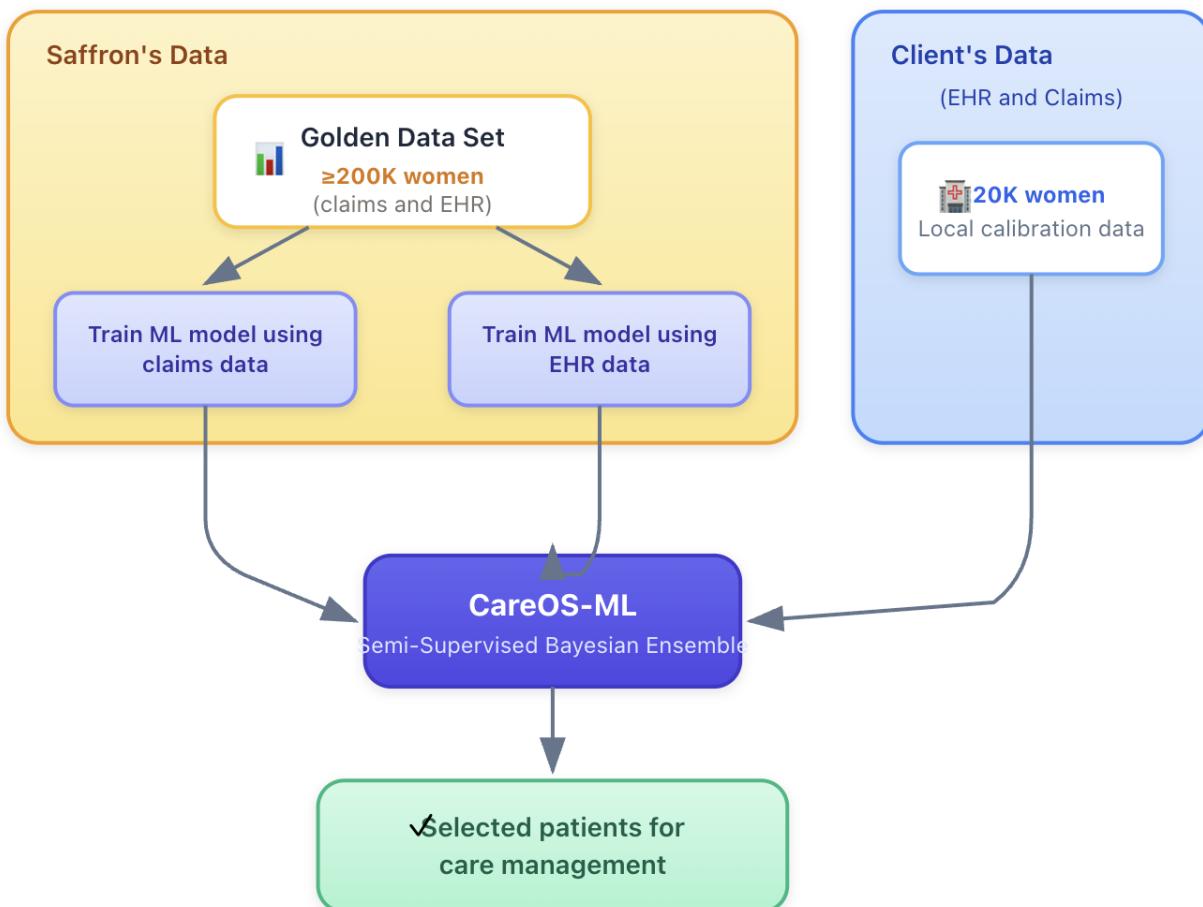
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# CareOS ML/AI: architecture



200K+ base training set

<20K min. client data

Claims + EHR fusion

Calibrated uncertainty

# CareOS-ML

CareOS-ML combines a base model trained on large datasets with client-specific calibration, producing predictions tuned to the characteristics of each clinic or health system.

Our approach enables partnerships with organizations that would otherwise lack sufficient data for standalone model development. A regional clinic with 5,000 eligible patients benefits from patterns learned across 200,000+ patients while still receiving predictions calibrated to their specific context.

# CareOS-Nav

# Execution Plan: Prove outcomes in 6 months; ship v1, scale to 2k members by M12 to support Series A

