

HealthWeave Quick Reference Guide

Elevator Pitches, Talking Points, and Key Messages

Elevator Pitches

30-Second Version

I built an AI tool that synthesizes patient health data with medical research to create doctor-ready reports. I developed it for my own complex conditions - CLL and liver disease - and my physicians love it. Now I want to pilot it at ECMC to help other complex patients have more informed conversations with their doctors.

60-Second Version

Patients with chronic conditions have health data scattered everywhere with no way to understand what it means. I'm an ECMC patient with CLL and advanced liver disease - I built an AI-powered tool that pulls all my data together, correlates it with current medical research, and generates professional reports my doctors actually appreciate. Instead of arriving at appointments uninformed, I come prepared with intelligent questions backed by peer-reviewed literature. I'm proposing a free pilot at ECMC for 100-200 complex patients. Zero cost, minimal IT work, huge potential impact on patient engagement.

2-Minute Version (with demo)

- 1. The Problem: I have CLL and F3 liver fibrosis. My data was scattered - bone marrow biopsy here, FibroScan there, labs somewhere else. I couldn't see the connections.
- 2. What I Built: Tool that pulled everything together, found recent research showing CLL cells depend on lipid metabolism, and my fatty liver creates a perfect environment for them.
- 3. The Output: [Show report] Professional document with proper citations, trends over time, suggested questions for my doctors.
- 4. The Impact: Instead of my doctor spending 20 minutes explaining basics, we had an informed discussion about metabolic interventions.
- 5. The Opportunity: I want to offer this free to ECMC for a pilot with complex patients. Improve engagement, better outcomes, zero cost.

- 6. The Ask: 15-minute meeting to show you how it works and discuss pilot parameters.

Key Talking Points by Audience

For Hospital Executives (CMIO, CIO, COO)

- "This addresses your CMS patient engagement scores - higher portal usage = better reimbursement"
- "Zero cost pilot - we prove value before you spend a dollar"
- "Built by your own patient - authentic story for PR and differentiation"
- "AI-powered patient tools are the future - be an early adopter"
- "Minimal IT burden - integrates with existing FollowMyHealth portal"
- "Measurable ROI: engagement rates, satisfaction scores, physician time savings"

For Physicians

- "Patients arrive more informed - less time explaining basics"
- "Properly cited research - not WebMD or social media"
- "Helps patients prepare intelligent questions"
- "Reports you can actually use - professional format with citations"
- "Reduces burnout by making appointments more efficient"
- "Better patient engagement = better outcomes"
- "You control everything - this is a tool to enhance discussion, not replace your judgment"

For IT/Technical Staff

- "API integration with FollowMyHealth - standard REST APIs"
- "HIPAA-compliant architecture on Microsoft Azure"
- "Minimal ongoing maintenance required"
- "I provide full technical support during pilot"
- "No new systems for you to manage - widget in existing portal"
- "Security reviewed, Business Associate Agreement in place"
- "Estimated 10-20 hours total IT time for integration"

For Patient Advocates

- "Empowers patients to be active partners in their care"
- "Especially valuable for complex patients juggling multiple conditions"
- "Reduces health literacy barriers"
- "Helps patients understand their own data"
- "Makes medical research accessible and personally relevant"
- "Improves patient satisfaction and engagement"

Objection Handling

| Objection | Concern | Response |
|--|------------------------|--|
| "Isn't this just another app patients won't use?" | Adoption concern | No - it's integrated into the portal they already use. No new app to download. Plus, patients with chronic conditions are highly motivated to understand their health. |
| "How do we know the AI is accurate?" | Quality/safety concern | Every clinical claim is backed by peer-reviewed literature with full citations. Physicians can verify everything. It's synthesis, not diagnosis. Always reviewed by physician. |
| "We don't have budget for new technology" | Cost concern | The pilot is completely free. Zero cost to ECMC. After pilot, if you want to continue, we can discuss affordable licensing. But you risk nothing to test it. |
| "Our IT team is too busy" | Resource concern | I estimate 10-20 hours total IT time for the entire pilot. I do the heavy lifting. I provide all technical support. Minimal burden on your team. |
| "What if patients misuse the information?" | Liability concern | Reports clearly state they're for discussion with physician, not self-diagnosis. All content reviewed. Encourages physician consultation, doesn't replace it. Reduces misinformation by providing quality sources. |
| "This sounds too good to be true" | Skepticism | Fair! That's why I'm proposing a pilot. Test it with 100 patients for 6 months. If it doesn't work, you've lost nothing. If it does, you're an early adopter of game-changing technology. |

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| "Why would you do this for free?" | Motivation concern | I'm an ECMC patient - you've taken great care of me. I built this tool for myself and it transformed my care. I want other patients to benefit. Yes, if successful, I hope to build a business. But I need to prove it works first. |
|--|--------------------|---|

Your Success Story (Personal Case Study)

Use this personal example when explaining what the tool does:

The Setup

"I have CLL with a NOTCH1 mutation - that's a blood cancer. I also have F3 liver fibrosis, which is advanced liver disease, one stage before cirrhosis. And I have an MTHFR polymorphism. These are three separate conditions being managed by different specialists."

The Problem

"I had bone marrow biopsy results, a liver FibroScan showing F3 fibrosis with 67% fat in my liver, ultrasound reports, and dozens of lab results. No way to see how these conditions might interact. My oncologist focuses on CLL, my hepatologist on liver disease. Nobody was looking at the whole picture."

What the Tool Did

"I uploaded all my documents. The AI pulled data from each one, then searched recent medical literature. It found 2024 research showing CLL cells uniquely depend on lipid metabolism - they literally feed on fats. Then it connected that to my liver disease: my fatty liver is providing the exact fuel CLL cells need. This is a metabolic interaction my doctors hadn't discussed because it's cutting-edge research."

The Output

"It generated a professional report with 8 peer-reviewed citations, explained the metabolic connections, and gave me specific questions to ask: Should we treat my CLL earlier because of my liver disease? Could my liver disease be partly caused by CLL infiltration? Should my treatments target both conditions simultaneously?"

The Impact

"I'm bringing this report to my hepatologist this week. Instead of a routine appointment where they tell me my liver is getting worse, we're going to have an informed discussion about whether my CLL and liver disease are metabolically connected. That's the kind of empowered care I want every ECMC patient to have."

5-Minute Demo Script

When showing the tool:

- 1. Show Problem (30 sec):** *Display scattered documents: "Here's my bone marrow biopsy, my FibroScan, my ultrasound. As a patient, how do I make sense of all this?"*
- 2. Upload Data (30 sec):** *Show upload interface: "I upload these documents. The system uses OCR to extract the data."*
- 3. Show Analysis (1 min):** *Show the AI analyzing: "It's looking for trends, correlations, anomalies. It's searching medical research databases for relevant studies."*
- 4. Show Dashboard (1 min):** *Display results dashboard: "Here's my data over time. Here are the correlations it found. Here are the key findings."*
- 5. Show Report (1.5 min):** *Open the PDF report: "This is what gets generated. Professional format, proper citations, written for my doctor. Here's the metabolic connection it found between my CLL and liver disease. Here are the 2024 studies it's citing."*
- 6. Show Questions (30 sec):** *Point to suggested questions: "It even suggests what I should ask my doctor. These are informed, research-backed questions."*
- 7. Close (30 sec):** *Summary: "This is what I want to offer ECMC patients. Transform scattered data into actionable insights. Help patients be informed partners in their care."*

Key Statistics & Facts

Market Stats

- 133 million Americans have chronic conditions
- 60 million have multiple chronic conditions
- Patient engagement market: \$4.2B, growing 18% annually
- Healthcare AI market: \$20.9B, growing 38% annually
- Medication non-adherence costs healthcare system \$290B annually

Patient Engagement Stats

- 80%+ of patients have access to patient portals
- Only 30-40% actively use them (low engagement)
- Engaged patients have 8% lower healthcare costs
- Better engagement = fewer ER visits and readmissions
- CMS scores hospitals on patient engagement (financial impact)

Physician Burnout Stats

- 50% of physicians report burnout
- Average 15-20 minutes spent per appointment
- Significant time spent on patient education and explaining results
- Informed patients = more efficient appointments
- Physician satisfaction improves with engaged patients

Memorable One-Liners

Use these for impact:

"We turn health data into health understanding."

"Patients don't need more data - they need insights."

"Built by a patient, for patients."

"Properly cited AI beats Dr. Google every time."

"From passive patient to informed partner."

"The doctor's appointment starts before you walk in the door."

"We make medical research personally relevant."

"Your health data tells a story - we help you read it."

"AI-powered, physician-approved, patient-centered."

"Free pilot, infinite potential."

Meeting Preparation Checklist

Before Any Meeting

- Research the person you're meeting (LinkedIn, hospital bio)
- Understand their priorities (clinical? operational? financial?)
- Prepare tailored talking points for their role
- Have demo loaded and ready
- Bring printed one-pager summary
- Have your personal medical reports as examples
- Know your ask (15-min follow-up? Pilot approval? Introduction to IT?)
- Prepare 2-3 smart questions to ask them
- Have business cards or contact info ready
- Dress professionally but not overly formal

Meeting Structure

- **Minutes 0-2:** Build rapport, thank them for time, establish credibility as ECMC patient
- **Minutes 2-4:** State problem clearly, use your personal story
- **Minutes 4-9:** Demo the tool, show actual output
- **Minutes 9-12:** Explain pilot proposal, emphasize zero cost
- **Minutes 12-14:** Handle objections, answer questions
- **Minutes 14-15:** Clear call to action and next steps

After Every Meeting

- Send thank-you email within 24 hours
- Recap key points discussed
- Provide any materials promised
- Restate next steps and timeline
- Add to CRM/tracking system

- Set reminder for follow-up if no response
- Update proposal based on feedback received

Remember

You're not just selling a product. You're sharing a solution to a problem you personally experienced. You built this because you needed it. That authenticity is your superpower.

You're not asking for money. You're offering a free pilot that could genuinely help ECMC patients. That's a generous offer, not a sales pitch.

You have the technical skills, the healthcare knowledge, and the personal experience. You belong in these conversations.

Be confident. Be authentic. Be helpful.

This is how you build something that matters.

Now go make it happen.