
dispatch
HEALTH
Home is Where Your Health is
Transforming the Facility-Based Care Model


OUR VISION
Create the World's Largest
System of Care....in the home.
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Healthcare is Rapidly Moving to the Home

$4 Trillion Healthcare System is Unsustainable

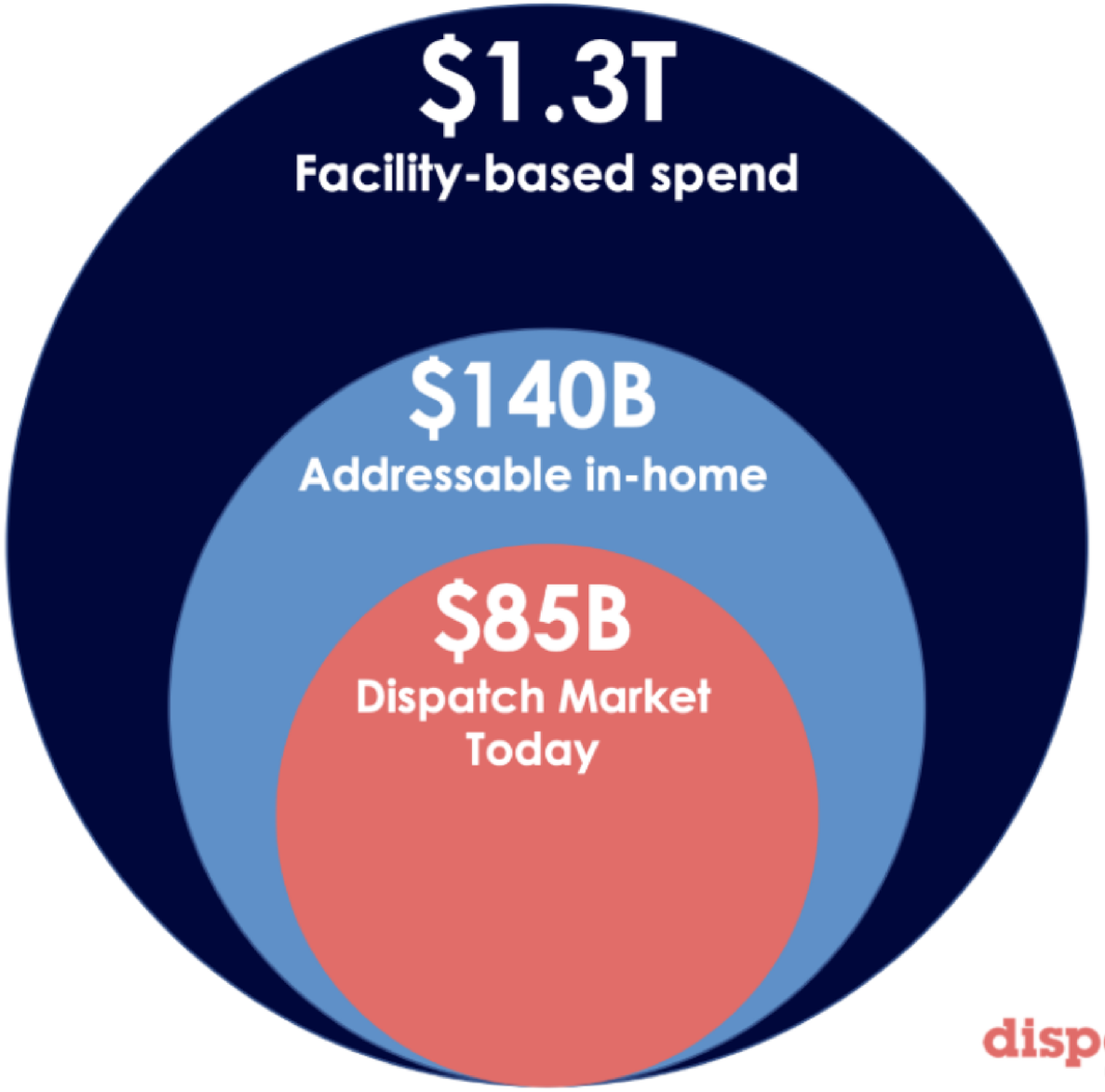
In-home hospitalizations save **$5,000 – $7,000** per episode

Consumers increasingly expecting convenience

Virtual care utilization **increased +4x** during COVID, with **+70%** of users expecting to continue using more convenient care

Opportunity to improve clinical outcomes

A **20%** mortality reduction for in-home hospitalizations



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Enabling At-Home Care at Scale

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Extending beyond the legacy brick and mortar infrastructure to deliver care to patients when, where, and how they need it

Leveraging a purpose-built, flexible platform that optimizes care delivery and enables rapid scaling

Driving improved patient experience and clinical outcomes that create alignment across all stakeholders

31	**Markets** live today
174%	**YE Run-Rate Revenue CAGR** since 2017
96	**Net Promoter Score** (Healthcare average <30)
+$350M	**Total Savings Generated** for Customers to date, with an average savings of +$1,200 per Acute Care Visit

Highest Acuity and *Most Complete* System of Care in the Home

Clinic Without Walls

Virtual Visit Augmentation

- Allows providers to extend practice to home or Senior Communities for lower complexity complaints
- Allows treatment of medically complex patients - hands-on support and tele-presentation.

Acute Care

Emergency Room Alternative

- On-demand high acuity care in the home
- Diagnostics
- CLIA certified lab (Moderate Complexity)
- Procedures
- Medications
- Coordination of ancillary services
- PCP integration

Advanced Care

Hospital Alternative

- Example Conditions: HF, COPD, Respiratory Illness, Pneumonia, Complex UTI, Metabolic Disorders
- Milliman admission criteria
- Up to 30-day post-acute management
- Referral: Dispatch Acute Care Service, Physician Clinics, Partnered Hospital ERs,
- Payment through contractual bundle with payers

Extended Care

Nursing Facility Alternative

- Support for complex medical and post-surgical patients after discharge from the hospital who require additional skilled services.
- Provide 24/7 care with a focus on physical and occupational therapy
- Payment through contractual bundle with payers

Bridge Care

Hospital to Home

- Focused medical intervention – 24 to 72 hours post discharge
- Evidenced-based pathways
- Medication reconciliation and Social Determinant issues addressed result in reduced hospital recidivism

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