

MyndYou™

Artificial Intelligence, Real Results

The latest AI technology from MyndYou produces measurable benefits for payers, providers and patients



The U.S. healthcare system faces a myriad of challenges. One of the most serious occurs at the convergence of two troubling trends:

- **More people need care:** A lot of Americans [live with chronic disease](#) – 42% have 2 or more, and 12% have at least 5.
- **Fewer people enter or stay in healthcare professions:** Staff shortages continue across the board and are especially acute among [nurses](#) and [primary care physicians](#).

This staffing gap makes it harder to keep people healthy and treat patients who need care. Harmful social determinants of health (SDOH) create barriers to well-being. Attempts to address shortages and drivers have been met with some success, but progress is slow and good health can't wait.

Urgency has given rise to innovations that ease administrative burden, improve communication and engagement, and support patient's participation in their care. Technologies like remote patient monitoring, mobile apps and virtual care are making inroads but there is a long way to go.

Expanded use of artificial intelligence is our next opportunity to make meaningful progress.

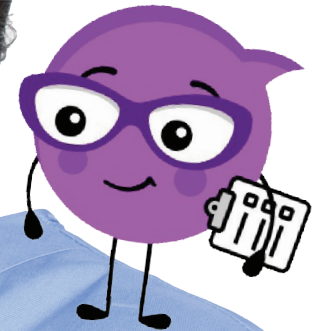
The hype about healthcare AI vs. the reality

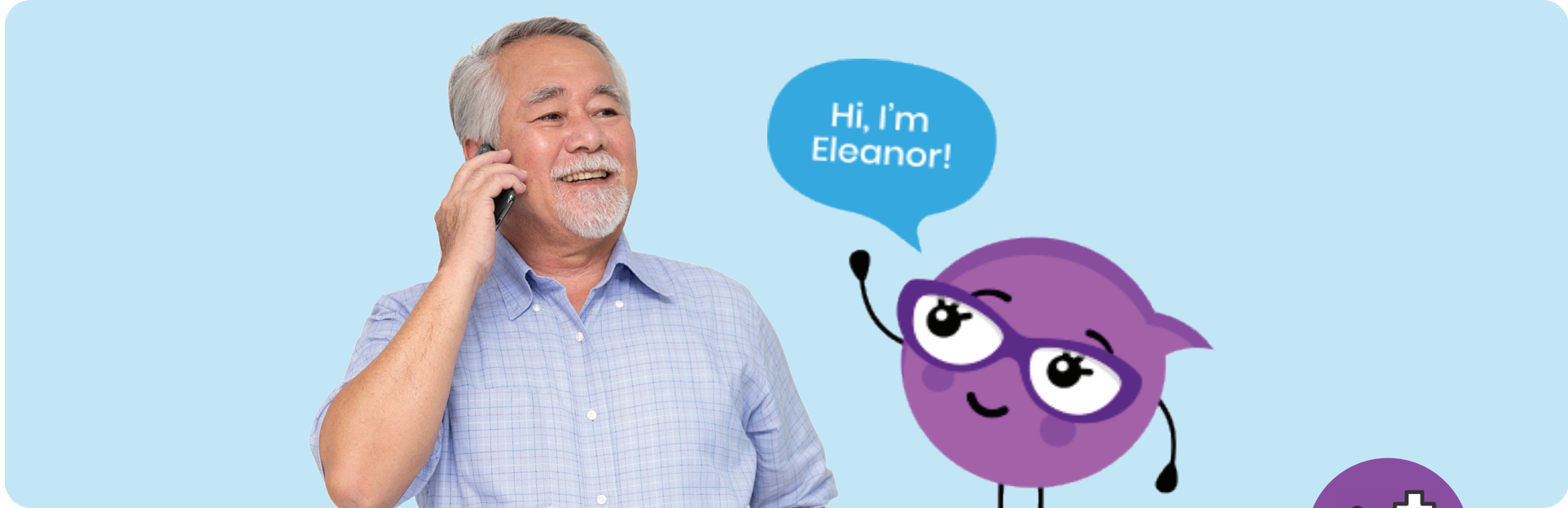
There's a lot of hype about healthcare AI. But beyond the buzz, some advancements have already yielded measurable results in:

- **Medical imaging:** Radiologists use algorithms to analyze huge amounts of medical imaging and data to highlight abnormalities and triage cases.
- **Patient care:** Researchers make virtual models of patients using digital twin technology – a combination of real-time data, advanced analytics and virtual simulations – to simulate treatment plans, anticipate adverse events and create immersive training.
- **Administration:** Healthcare organizations have accessed automation and natural language processing to reduce the burden of administrative tasks like EHR data entry, appointment reminders and clinical notes.

The next big opportunity? Combining multiple aspects of AI and automation to expand capacity, reduce costs and improve quality of care. That's why MyndYou created Eleanor, an AI-enabled virtual assistant – artificial intelligence that gets real results.

64% of nurses surveyed by the [American Nurses Foundation](#) said they'd like to see more AI tools incorporated into their work.





Deploying AI to get meaningful results

Named after the groundbreaking occupational therapist Eleanor Clarke Slagle, MyndYou's conversational AI tool "Eleanor" talks to patients over the phone, identifies patient needs and summarizes them, reporting back to the care team.

Trained on tens of thousands of clinical conversations between patients and healthcare providers, Eleanor has a deep well of medical data and understands the structure of dynamic, human-like communications. She's built to be empathetic – listening to what people say and how they say it – so she engages in conversations that people enjoy.

On her calls, Eleanor collects vital insights and uses AI to recognize important elements within spoken language to identify needs and prioritize interventions. She summarizes this information and provides it back to care teams by API, SFTP or EHR integration. Clinicians can focus on organizing their caseloads and delivering appropriate and top-of-license care. With this hybrid workflow, a real or virtual team member can be with patients every step of the way.

Crucially, given the sensitivity of the patient information Eleanor handles, MyndYou has built and refined our Eleanor Language Model using Google AI PaLM 2, which is fully HIPAA-compliant. Patient information is not used to train Google AI PaLM further.

Let's take a look at how MyndYou's Eleanor is already helping providers and plans.



Adding Eleanor to your team generates real results

2+ million calls and counting

\$5.9 million saved annually from readmission and ED avoidance

89% of clinical assessments completed with no human intervention

33% reduction in hospitalizations

33% of calls made in Spanish

22% decrease in 30-day readmissions

Eleanor is a workforce multiplier

Healthcare staffing shortages and burnout persist. When [researchers](#) asked clinicians which interventions would improve their well-being and burnout, physicians (45%) and nurses (87%) rated “improving nurse staffing levels” as the most important. And research indicates that performing more meaningful work influences job satisfaction and retention – critical in mitigating the staffing gap.

Optimize clinician time

Eleanor eases clinicians’ administrative burden so they have more time to focus on high-value work. By handling routine calls and flagging issues that require urgent attention or indicate rising risk, Eleanor empowers clinicians to focus on high-impact activities at the top of their license. One nurse said after her employer implemented Eleanor, “Now I feel like I can just focus on nursing.”

Impact of adding Eleanor	
BEFORE	AFTER
Rescheduling backlog	Contact made within 1 week
Expired prescriptions	Medication reminder calls avoided issues
Patients unprepared for their procedures	Reminder calls gave preparation information and improved preparation compliance
Lack of insight into barriers to care	Survey informed providers of barriers
Patient uncertainty about where to go for information or questions	Transferred to care team when patient has questions

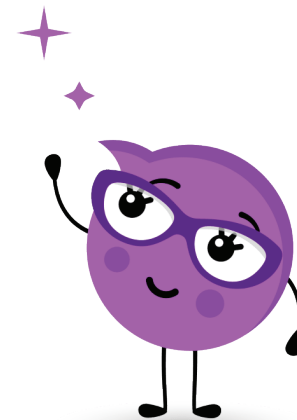
Reach more people without increasing staff

Eleanor reaches more people at the right time. She’s already made more than two million calls with an average duration of almost 3.5 minutes. And a third of them were in Spanish. MyndYou’s large-scale analytics assess data and identify the best time to call based on age, gender and geography – so Eleanor can reach out any time of day regardless of your staffing levels.

Streamlined workflows. Montefiore Einstein Comprehensive Cancer Center transformed care management with Eleanor. The colorectal cancer screening team implemented a series of Eleanor interventions to help address backlogs, no-shows, and insufficient preparation. As a result, 100% of participating patient navigators said Eleanor was helpful in rescheduling no-shows, and 83% felt that Eleanor helped reduce administrative burden.

Extended reach. When a northeast-based health system aimed to improve annual wellness visit attendance, they turned to Eleanor to increase program support without adding headcount. Within two weeks, Eleanor achieved the system’s monthly goal for outreach.

Onboarding efficiency. New England Life Care used Eleanor to reach out to patients new to total parenteral nutrition infusion therapy and assess their needs. Eighty-nine percent of patients completed the pre-visit assessment solely with Eleanor; only 11% were transferred to a nurse.



Eleanor boosts chronic care management

When people are living with chronic conditions, they have higher needs for care and a greater risk of complications — but it can be hard to stay in touch with them between office visits.

Address issues in real time

Using Eleanor for chronic care management increases the frequency of patient engagement and education. Eleanor notes status changes that require clinical intervention so staff can respond immediately with necessary care and support.

Intervene early

To catch issues, address side effects and reduce complications, a New York-based healthcare system increased ongoing patient monitoring. Eleanor made personalized calls to:

- Manage chronic conditions
- Identify potential complications
- Screen for social determinants of health
- Assess medication adherence
- Reveal behavioral health needs
- Support oncology care

Most (85%) of the calls were routine and required no clinician follow-up. The remaining 15% were flagged and routed for intervention by the care manager. As a result of the outreach, hospitalizations decreased by 33% over those Eleanor didn't contact.

Female, 47 years	Male, 55 years
Eleanor called for a regular check-in.	Eleanor called for a regular check-in.
Patient shared she was not good. "I keep crying."	Patient shared he was not feeling well.
Eleanor asked for additional details.	Eleanor asked for additional details.
She explained she was sad that her husband died, and that she wanted to talk to a therapist.	"I have a bad cold and got bronchitis."
Eleanor transferred her to the care team.	Eleanor transferred him to the care team.
Care team member initiated a video call and set up a follow-up call with her PCP.	Care team member documented patient had symptoms for 1.5 weeks including throat pain, cough, congestion, headache, fever and cold sores and scheduled him for an on-demand virtual visit with his physician.

"Staff fielding the monitoring calls liked that they got to talk to patients who had actual needs rather than a check-in call that resulted in chit chat versus discussing health needs."

Team lead, Northeast-based health system

Eleanor improves patient engagement

Engagement is a powerful lever on key clinical measures like patient satisfaction and outcomes that influence quality measures including Stars and HEDIS. Unlike outreach, which is one-way, engagement is a two-way conversation that supports facilitation, motivation, empowerment and access to care. But with staff already stretched to the limit, providing this level of service hasn't been practical – until now.

Increase medication adherence and reduce errors

Patients face a phalanx of barriers to adherence, ranging from price to confusion about dosing to side effects, and on and on. These difficulties negatively impact patient experience, quality of life and outcomes – and drive up ED utilization and hospital admissions. [CDC data](#) show that more than 1.5 million Americans seek emergency care for adverse drug events (ADEs) annually, and almost half a million require hospitalization. Insulin-related ADEs are the second-most common catalyst for ED trips (only anti-coagulants produce more).

Identifying non-adherence and the factors that contribute to it is vital to helping patients maintain glycemic control and avoid microvascular complications. A northeast-based health system used Eleanor to engage patients with diabetes and improve adherence. She inquired about and noted adherence, transferring patients who needed urgent attention before their condition or circumstances worsened. Example at right.

Reduce no-shows

Missed appointments reduce provider availability overall and disrupt the continuity of care for all patients. They're also expensive. [Research estimates](#) that these unplanned openings cost an average of \$200 each in unused physician time; the yearly total cost to the U.S. healthcare system is \$150 billion. AI and automation can help reduce the impact of last-minute changes, ensuring better resource utilization and more efficient workflows.

Montefiore Einstein Comprehensive Cancer Center tasked Eleanor with connecting to colonoscopy no-shows. After her calls, completion rates nearly doubled from 10% to 19%, with an overall 36% increase in patient volume. And it freed up time for patient navigators to schedule new patients or manage other tasks.

Medication Need Identified

1

Chronic Care Management

66-year-old male with diabetes

"I need my insulin, I have nothing to take."

Patient

2

Detection & Education

Eleanor picked up and flagged a significant health change.

Time sensitive alert sent to the TCM monitoring team.

"Significant health change, ED risk."

Eleanor

3

Same Day Care Path

Nurse spoke with patient, who shared he could not afford insulin (= \$5K) following an insurance coverage change.

Nurse scheduled same-day telehealth appointment with PCP, who prescribed affordable medication.

"There are no further concerns related to this matter."

Director, Care Management

Using AI to identify and overcome harmful SDOH

We know treating the whole person is essential for sustaining well-being and achieving good outcomes. But getting visibility into outside forces that affect people can be challenging. Eleanor's conversations consistently identify SDOH so clinicians can address specific needs and remove barriers. Here's an example.

Montefiore Einstein Comprehensive Cancer Center is based in the Bronx, a community that ranks last in health factors among New York counties. One-third of the borough's 1.4 million residents live in poverty. Most residents are Hispanic (57%) or Black (44%), and 56% report a non-English primary language. This is a community at risk.

[Research has documented](#) that Black Americans have an earlier onset of colon cancer and worse outcomes, and they chart the highest incidence and highest mortality among major U.S. racial and ethnic groups. At the same time, early onset is increasing within the Hispanic/Latino community; the rate among men is the fastest growing. Initial screenings, regular follow-up colonoscopies and ongoing patient support are crucial. But Montefiore, like many organizations, had a hard time getting people in the door. Its colonoscopy cancellation/no-show rate was 59%.

It's also well-documented that significant structural and societal obstacles keep people from engaging with the healthcare system, including:

- **Limited access** to affordable, quality care
- **Lack of insurance** prevents people from getting cancer screenings
- **Work and family caregiver obligations** that make it hard to keep appointments
- **Language and cultural barriers** that impede understanding
- **Reluctance and mistrust** based on past history and current events
- **Insufficient financial resources** to purchase medication, miss work, etc.

What's less obvious are the specific factors that prevent each patient from following through -- and uncovering them is time-consuming and inefficient. To combat those obstacles, Montefiore launched a patient engagement quality improvement project to re-engage 2,400 English- and Spanish-speaking no-show colonoscopy patients. They used Eleanor to extend reach, complement the human navigators and pinpoint barriers to care. Crucially, Eleanor doesn't rely on digital tools that can increase disparities. She reaches people by phone -- whether that's a landline or a mobile.

Eleanor found the most common barriers to screening were:

- Transportation and time
- Perceived need
- Lack of encouragement by their physician
- Fear and embarrassment
- Insurance coverage or cost

The calls also showed that Spanish-dominant patients and those declining to identify their race reported nearly twice the number of barriers. Patients who were out of work or living with disabilities accepted transfer to a navigator more often (49%) than those who were employed/retired (41%).

Equipped with Eleanor's insights, the navigators are better able to address barriers to screening. One-quarter of the patients working with a navigator completed their screenings, almost doubling completions from the initial no-show cohort. Additionally, 100% of staff felt Eleanor was helpful in rescheduling no-shows and 85% said she reduced the administrative burden.

Montefiore's experience illustrates how AI makes it possible to identify and intervene to reduce harmful SDOH, improve access to appropriate care and support better health and quality of life.

Eleanor streamlines transitions of care

During and after discharge, patients and family caregivers are often overwhelmed, confused and stressed, which hampers their ability to understand and remember crucial insights and instructions. [Augmenting pre-discharge interventions](#) with post-discharge follow-up phone calls has been shown to limit adverse events and enhance patient safety, which lowers unnecessary utilization.

Reduce readmissions and ED visits

To help patients and family caregivers be more successful, a New York-based health system deployed Eleanor to point patients to the appropriate site of care.

Lower readmissions. Instead of relying on staff for routine discharge monitoring, Eleanor made the initial contact. She confirmed appointment schedules, completed barriers to care/SDOH screenings and delivered insights to the care team. Because of the increased intervention:

- 75% of patients were reached within 2 days
- 90% agreed to 30-day post-discharge monitoring
- 22% reduction in 30-day readmissions
- \$3.9 million was saved from readmission avoidance

Decrease ED utilization. The system also used Eleanor to direct patients within value-based care and ACO arrangements to the right level of care. With the additional support:

- 38% of patients were routed to urgent care facilities instead of the ED; high-risk patients were flagged for support from the care team
- \$2 million was saved from using urgent care instead of the ED

Engage high utilizers

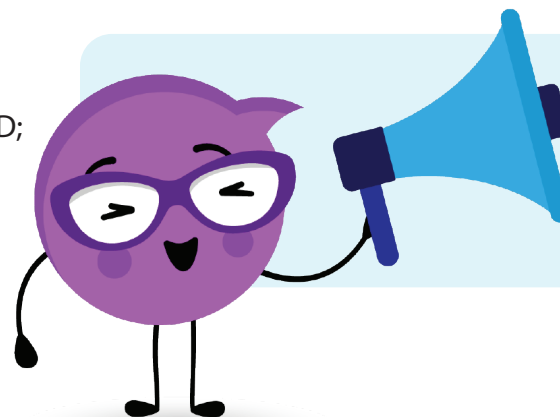
To understand why patients chose the ED over other sites of care, a Northeast value-based care organization tasked Eleanor with calling patients who visited the ED three or more times in 180 days to:

- Explore the reasons patients went to the ED
- Solicit SDOH information
- Ask if issues have been resolved
- Confirm scheduled follow-up appointments

Eleanor reached 75% of patients within 2 days, half the time it usually took staff, and identified decision drivers including:

- No after-hours support offered by physician
- Lack of knowledge that an after-hours call center was available
- Financial issues, including outstanding balances with their providers

Knowing the primary reasons for choosing the ED, the staff was able to educate patients on how and where to access more appropriate care that made sense for their situations. The combined efforts of Eleanor's outreach and staff's intervention drove avoidable ED visits down by 8%, and gave staff members the satisfaction of providing meaningful care.



Working together, the care team and Eleanor shrank avoidable ED visits by 8%.

Eleanor is AI that works with you

Eleanor is so much more than an automated calling system. MyndYou works with customers to define the objective for each call and the overall program, implementing a dynamic solution that ensures the flow of each patient interaction leads to a clinical, financial and/or administrative goal achieved.

Empathetic, friendly and clinically trained, Eleanor goes beyond the transactional to support complex needs with conversational listening. That's why patients like her – one person has spoken with Eleanor regularly for two years.

Combining the best of AI, including natural language understanding and large language models, Eleanor listens, processes, prioritizes and provides insights to clinicians so they can evaluate and follow up as appropriate. She even delivers summarized data and integrates it into electronic health records.

And Eleanor is always learning. We continually refine Eleanor to improve user interactions and deliver better outcomes for patients, providers and plans. For example, we analyze calls to evaluate how effective the questions are, where patients drop off, and how conversations could be improved. We feed data from our daily calls into our Eleanor Language Model to generate new natural language responses and summarize user pain points in order to see how Eleanor can improve.

From data management to data science to data delivered, our research and development team has created a solution that's sophisticated behind the scenes and easy and elegant for users.



“It was important to us to develop our solutions responsibly, leveraging the power of AI while putting up significant guardrails to ensure patient safety and accuracy. Eleanor doesn’t diagnose or deliver care. She’s optimized to get the information that clinicians need to be able to provide care. Eleanor helps clinicians reach more patients and identify needs so they can treat them proactively and effectively.”

MyndYou CTO and Co-Founder
Itay Baruchi, PhD

Delivering help, not hype

Results that count

After implementing 50 discrete programs with health systems, plans and partners, MyndYou has refined its approach to customer-centered implementation. Our success begins with understanding both the business and clinical needs, defining key performance indicators, and then creating a program roadmap to deliver. We focus on speed to value – which may mean a different approach, such as:

- **Enabling secure file transfers** to jumpstart a program while beginning an EHR integration.
- **Reducing gaps** by “hiring” Eleanor to address backlogs and take on routine follow-ups while making the longer-term case for hospital readmission reduction.
- **Launching a straightforward program** like post-discharge outreach while planning for chronic care management support that may require more complex inputs and workflows.

Our customers – from front-line staff to clinical and administrative leaders – tell us that Eleanor is a valued addition to their team.

“Interest in AI solutions has been accelerating and we have heard from our customers that having a true, experienced partner is key to our joint success. We know how health systems work. We know how health plans operate. We know what it takes to deliver a successful customer program. We also have a deep understanding of AI and how to apply it responsibly and effectively. We’re ready to help accelerate value delivery for innovative systems, plans and partners.”

MyndYou CEO and Co-Founder Ruth Poliakine Baruchi

Let’s discuss how Eleanor can deliver results for your organization. Connect with us at info@myndyou.com to schedule a first conversation.

