

Best Ideas Bowl October 2020

Nasdaq: STRM



# Disclosure Statement

#### SAFE HARBOR STATEMENT: FORWARD-LOOKING DISCLOSURE

This presentation contains "forward-looking statements" within the meaning of the U.S. Private Securities Litigation Reform Act of 1995, based on current management expectations. Because forward-looking statements relate to the future, they are subject to inherent uncertainties, risks and changes in circumstances that are difficult to predict and that can cause Streamline Health's actual results to differ. We caution you therefore to not place undue reliance on such statements.

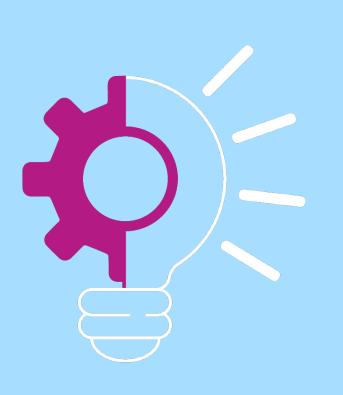
Actual results might differ materially from these statements due to a number of risks and uncertainties. Risks that may contribute to the uncertain nature of these statements are described in Streamline Health's periodic filings made with Securities and Exchange Commission. Special attention is directed to the portions of those documents entitled "Risk Factors" and "Management's Discussion and Analysis of Financial Condition and Results of Operations." Streamline Health undertakes no obligation to update any forward-looking statements or relevant risks, except as may be required by law.

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Transforming hospital mid-revenue cycle management



Paradigm-shifting eValuator™ Revenue Integrity Program

Leading the industry in automated pre-bill coding analysis



Large market opportunity

expected to grow to \$4.5B by 2023

/U/O
Recurring Revenue

**2Q20** 

SaaS & Tech-Enabled Services Model

3-year+ contracts yield reliable, long-term revenue



Positioned for Growth in 2021 and Beyond

Despite COVID-19 impact, recent strategic evolution positions STRM for long-term top-line growth



# Hospital Coding Today is Wildly Inefficient

Hospital billing efficiency is throttled by its coders' ability to navigate the complexities of ICD-10 – a classification system with >130,000 unique codes.

Significant sums are often left on the table as a result of a small coding error, while overbilling results in potential claw-backs and fines



- Coding Complexity>130,000 unique billing codes.
- Regulatory Complexity
  Simple coding errors can result in missed revenue or create regulatory risks.
- Tremendous Urgency
  Hospitals need an army of coders to keep up with demand. Each day a case isn't billed negatively impacts cash flow.
- Minimal Auditing

  Most providers audit only a handful of cases and only after they've been billed.

PROVIDERS ARE FORCED TO SACRIFICE CODING QUALITY FOR EXPEDIENCY

# We Streamline Revenue Cycle Management

Our SaaS-based tools and tech-enabled services relieve the financial pressure on hospitals by transforming clinical data into compliant revenue.

Our flagship eValuator™ Revenue Integrity Program helps improve coding accuracy, resulting in improved cash flow efficiency.



### **Clinical Data**



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00	ПП	Abstracting &
ŏŏ	66	Physician Query





Evaluate
eValuator<sup>TM</sup>
cloud-based
pre-bill coding
analysis



Validate



Coding Audit Services

**Compliant Revenue** 

## How Automated Pre-Bill Coding Analysis Impacts Revenue

	Documentation Confirms	Initial Coding Reflects	Submitted Coding	Reimbursement
Patient A (No Safety Net)	<ul> <li>COVID-19</li> <li>Shortness of breath</li> <li>Congestive heart failure</li> <li>Diabetes with high blood sugar</li> </ul>	<ul> <li>COVID-19</li> <li>Congestive heart failure</li> <li>Diabetes with hyperglycemia</li> </ul>	DRG-179	\$7,504
Patient B (eValuator™ Optimized)	<ul> <li>COVID-19</li> <li>Shortness of breath is due to acute exacerbation of chronic congestive heart failure</li> <li>Diabetes with high blood sugar</li> </ul>	<ul> <li>COVID-19</li> <li>Acute on chronic congestive heart failure (MCC)</li> <li>Diabetes with hyperglycemia</li> </ul>	DRG-177	\$14,355



Transforming hospital mid-revenue cycle management

## Large Market Opportunity

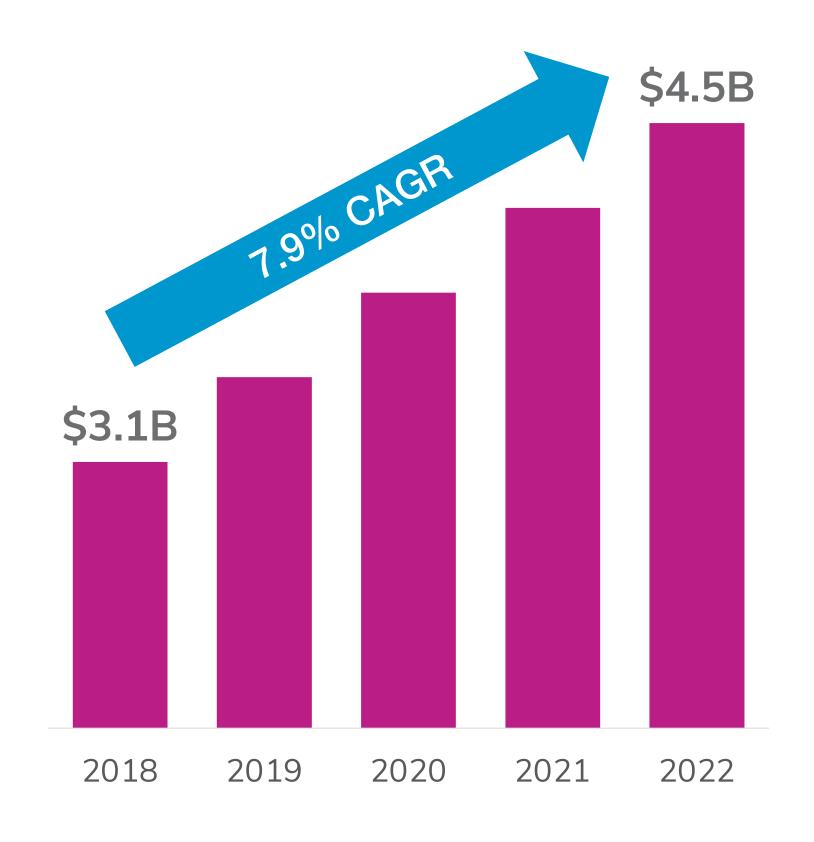
eValuator™ Revenue Integrity Program

Positioned for Revenue Growth



## A Unique Offering in a Growing Industry

## Mid-Revenue Cycle Management Market Size\*



- Significant greenfield opportunity for flagship eValuator™ automated, pre-bill coding analysis platform
- Anticipate revenue growth from two sources:
  Direct Sales to Large Healthcare Providers and an expanding set of Resellers with large existing customer base
- Growing from installed base of \$11.2M recurring annual revenue



\*Source: Research & Markets

Transforming hospital mid-revenue cycle management

## Large Market Opportunity

eValuator™ Revenue Integrity Program

Positioned for Revenue Growth



## The eValuator™ Revenue Integrity Program

Pre-Bill Revenue Integrity as a Service (PBRIaaS)

- Combines eValuator's automated pre-bill analysis with our expert audit services
- Enables providers to evolve their billing practice with a backbone of world-class auditing expertise
- Improves hospital coding staff performance through automated coaching and real-time feedback

## **Current Practice**

Post-bill audits of 1-2% of all records

# selected casesLimited window to resubmit for

Randomly

Minimal coder development

missed revenue

## **New Practice**

Analyze 100% of records before billing

- Increases coding accuracy
- Aids coder development

AND DESCRIPTION OF THE PARTY.

- Improves cash flow
- Reduces regulatory risk

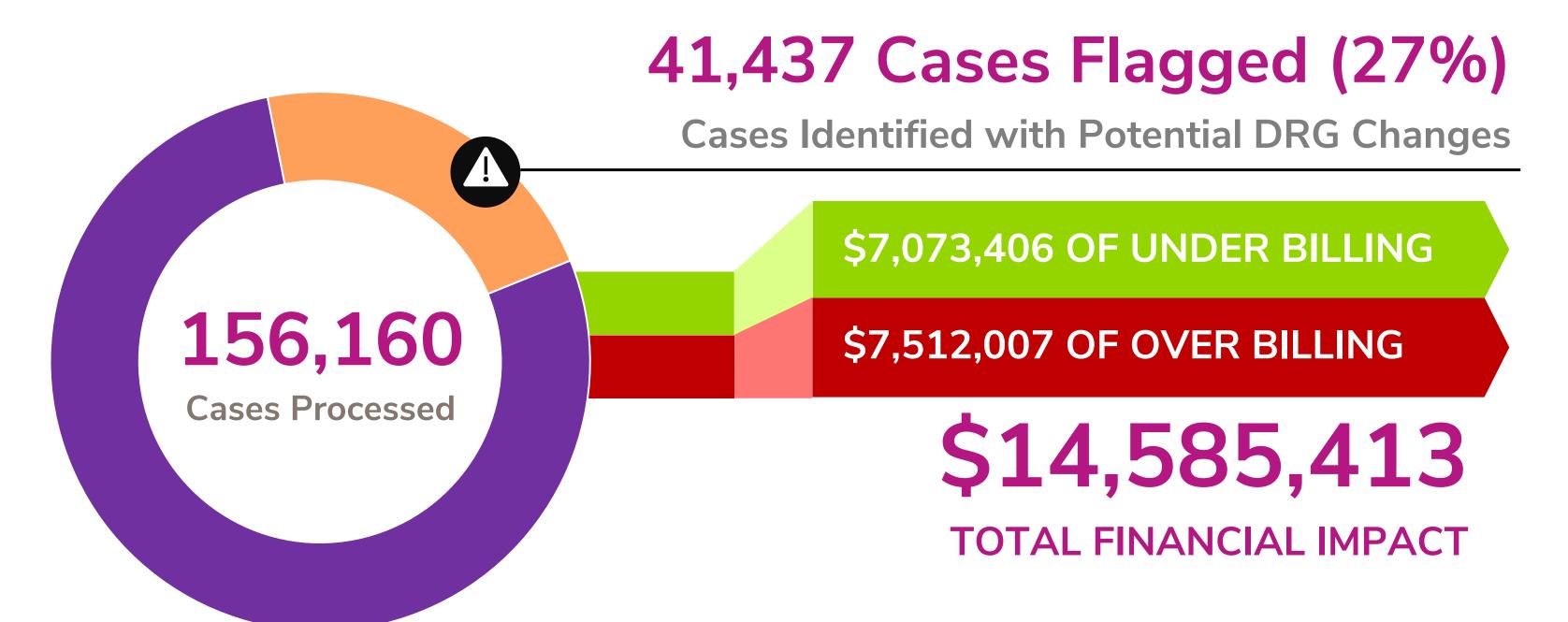


## The Impact of eValuator™

#### **CASE STUDY**

- Large not-for-profit health system in Texas
- 17 hospitals with a total
   4,242 beds

Summary of Inpatient Results from Nov. 2019 to Aug. 2020





## The eValuator™ Revenue Integrity Program Top Tier Customer Base







































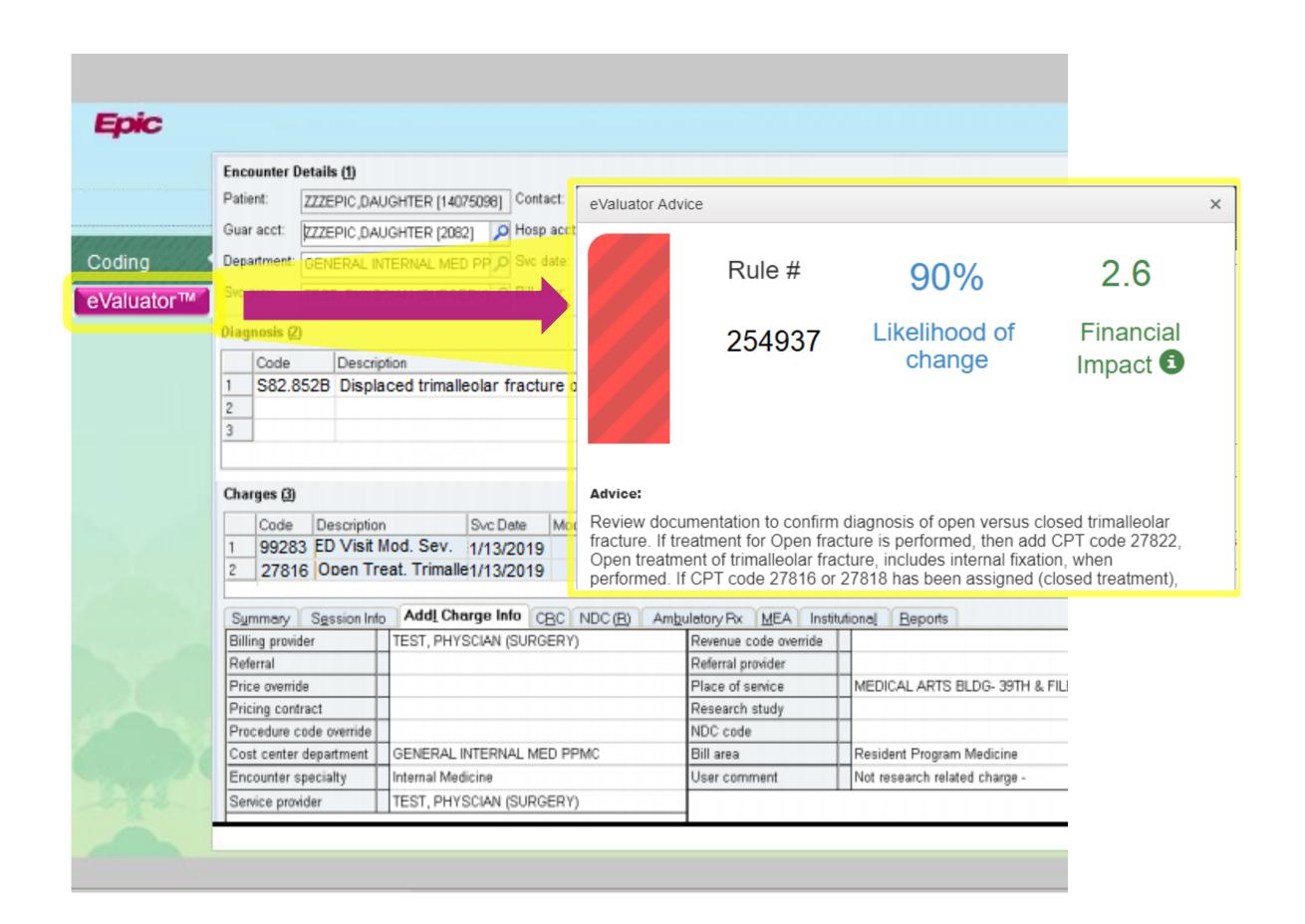






## Interoperability with Epic

### Strong integration with leading EHR



- Direct integration within existing Epic workflows
- Coders will receive real-time notifications of any opportunities and risks, along with narrative advice to review/correct
- Available as real-time HL7 & FHIR API via Epic App Orchard



Transforming hospital mid-revenue cycle management

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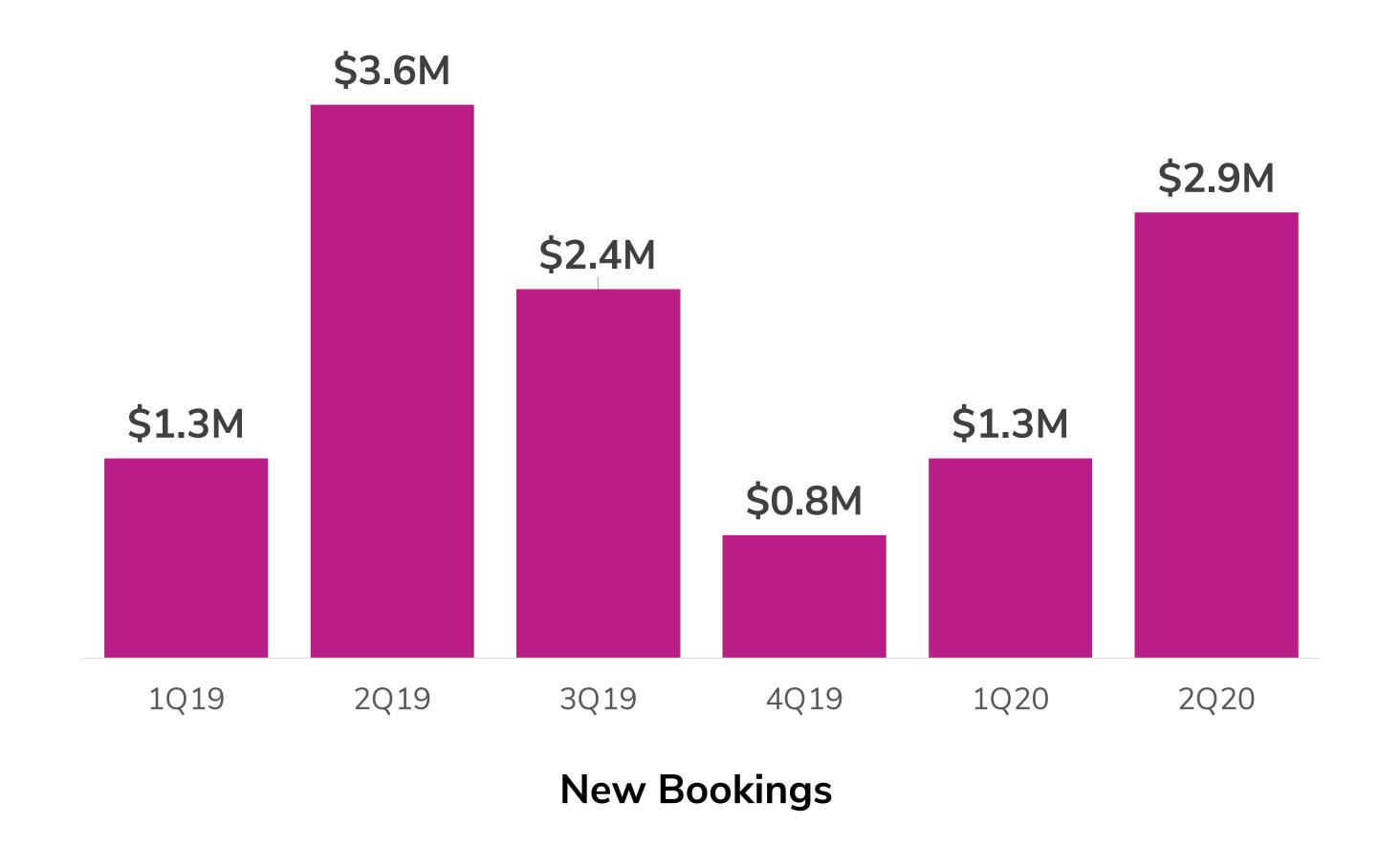
eValuator™ Revenue Integrity Program

Positioned for Revenue Growth



## **Bookings & Pipeline**

- Consistent quarterly bookings goal of \$2-\$3M
- First Half 2020 negatively impacted by COVID-19, anticipate bookings improvement through remainder of 2020/2021
- Pipeline contains \$62M of opportunity among 68 prospects



Streamline

Health®

## Line of Sight to Free Cash Flow

- Our monthly break-even cash requirements (revenue requirements) averages \$1.2M in Fiscal 2020; \$1.5M in Fiscal 2021;
- eValuator reaches 'scale' at \$1.6M revenue per month in FY 2023
- Based on our projections we will reach cash generation in Q3/Q4 2021;
- Recent sale of legacy ECM business provides sufficient cash to operate without additional financing



## Clean Capital Structure

As of 7/31/20

Cash & cash equivalents	\$5.7M – sufficient through 2021
Debt	No bank debt
Common Stock	30.4M shares outstanding





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