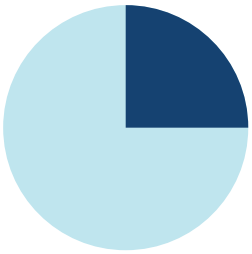
KODAHEALTH

Advance Care Planning (ACP) for Medicare Advantage Plans

Traditional ACP is Broken.

- **80% of members** want to have proactive discussions about end-of-life care
  - Only **7% of members** are being engaged in ACP by their providers
- Under-represented minorities are 1/2 as likely to complete ACP



25%

of Medicare Dollars are spent in the **last year of life**

Better Outcomes, Greater Savings

Koda offers the most comprehensive and scaleable solution on the market

- Increase ACP Completion for your Members
- Drive ~$10-15K Savings per Member
- Deploy at Scale within a Few Short Weeks
- Increase Member Satsifaction
- Increase Palliative and Hospice Utilization

An Experience Validated through Data + Research

91%
ACP Completion Rate
for engaged patients

88
NPS Score
Highly valued service for patients and loved ones

79%
of Koda patients prefer Palliative Care
when QOL is unacceptable

Equitable Delivery of Care
Similar completion rates across gender, race, and socioeconomic class

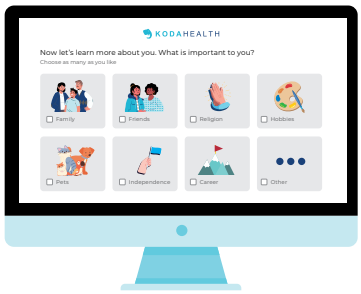
Koda's Partners in ACP Research + Innovation

NSF · Houston Methodist Leading Medicine · Atrium Health Wake Forest Baptist · Henry Ford Health · NIH National Institute of Mental Health · Penn University of Pennsylvania

AICPA SOC 2

Koda Health is SOC 2 Type II compliant, a rigorous industry standard of securing customer data. This compliance demonstrates our commitment to protecting our partners and their patient data through enterprise-level security protocol and standards.

The Elements of our ACP Experience



Member Web Application

High Touch Navigation

Digital Engagement Engine

How does our ACP Experience Work?

Simplified Referral

Send us all of your eligible patients.

We work with you to identify the highest-risk patients to recieve additional support.

Comprehensive Support

Patients will always able to update plans.

Koda Navigators provide ongoing support to high-risk patients for 1-2 years post-ACP completion.

Engagement for All

Low risk patients are engaged by Koda's digital engagement tools.

High-risk members receive additional outreach from Koda's ACP navigators.

Easy Integration and Value

ACP plans are completed, shared, and integrated with your systems.

Koda provides reporting at defined intervals.

High-Touch Care Navigators at Your Service

For your Highest Risk Patients, Our Team Provides:

- A Personalized ACP Guidance Program to Drive Engagement and Plan Completion
- Streamlined Integration and ACP Plan Sharing with Loved Ones and Care Teams
- Ongoing Check-Ins and Support Post-ACP Completion for 12-24 months to Drive Goal-Concordant Care
- Screening for Palliative Care Needs and Identification for Palliative Referral when Appropriate

Streamline your ACP offering with a free strategy call today.

As a practicing hospitalist and Chief Medical Officer at Koda Health, I strongly believe that a robust Advance Care Planning Strategy is essential to provide the best possible care for patients, without adding additional hurdles on your clinicans.

If you're interested, send us an email at **info@kodahealthcare.com** to book a meeting with my team. We'll discuss your ACP needs and we'll show you how Koda's experience can support these goals.

Best regards,

Desh Mohan, MD
Chief Medical Officer, Koda Health