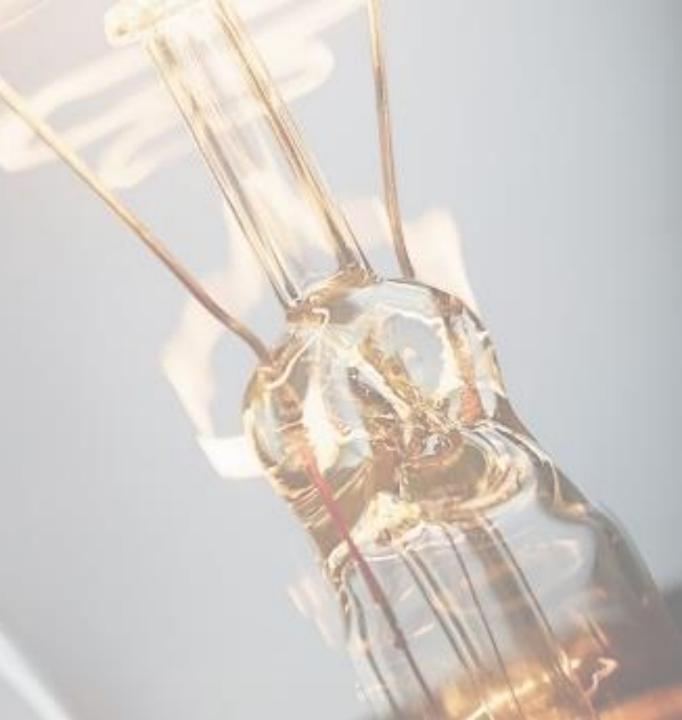


## Slide Deck Outline

- 1 Business Context
- 2 Current State
- 3 Solution Approach
- 4 Implementation Plan
- 5 Financial Impact
- 6 Benchmarking & Recommendation
- 7 Next Steps



# Al Adoption in Healthcare Today

Maximum Output



70% of payers and providers are actively implementing generative AI



of hospitals are already using AI to improve patient care and operational efficiency



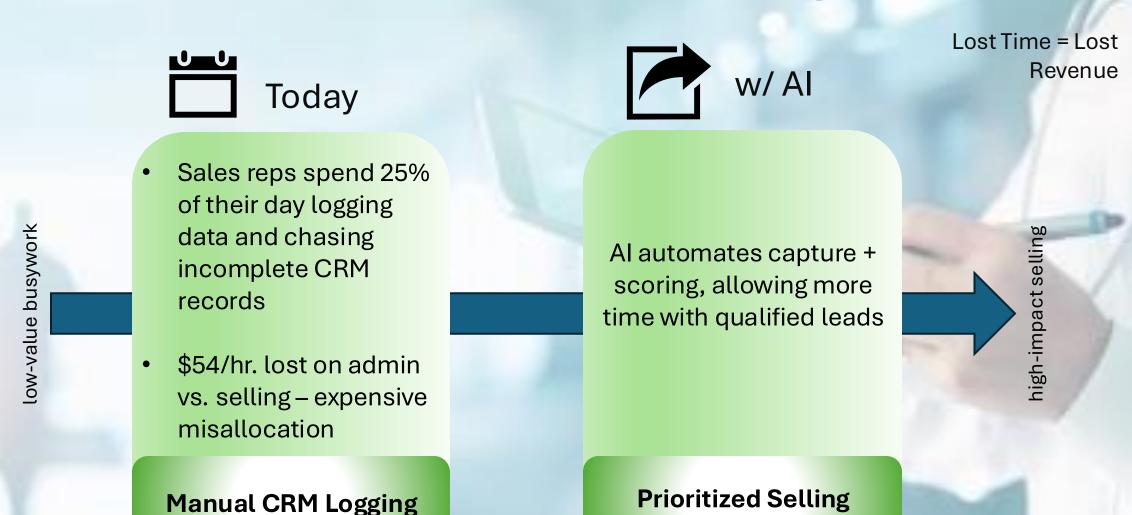
of healthcare organizations are using AI extensively

# Mapping Inefficient Workflows

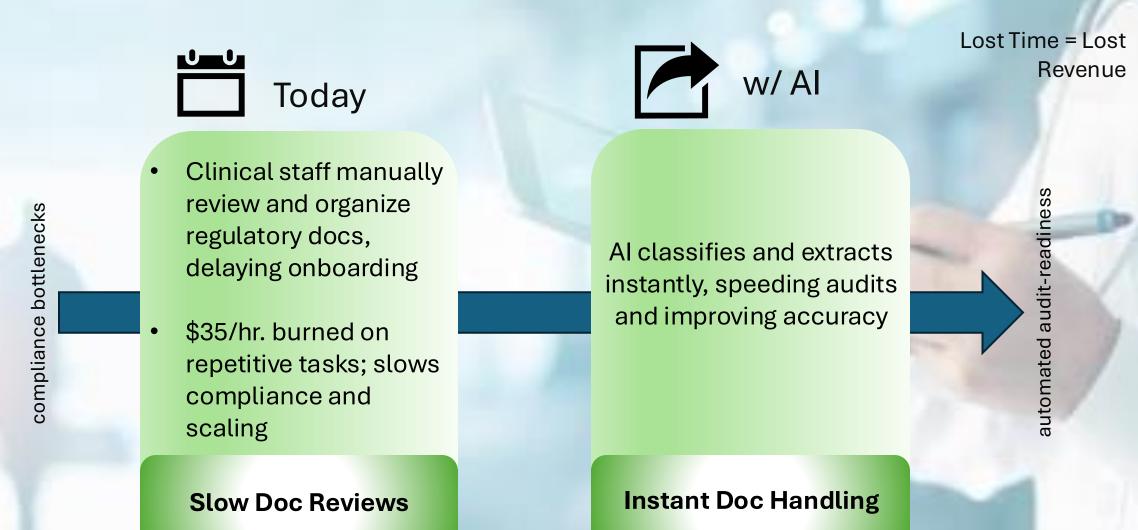


Time Wasted On Low-Value Tasks

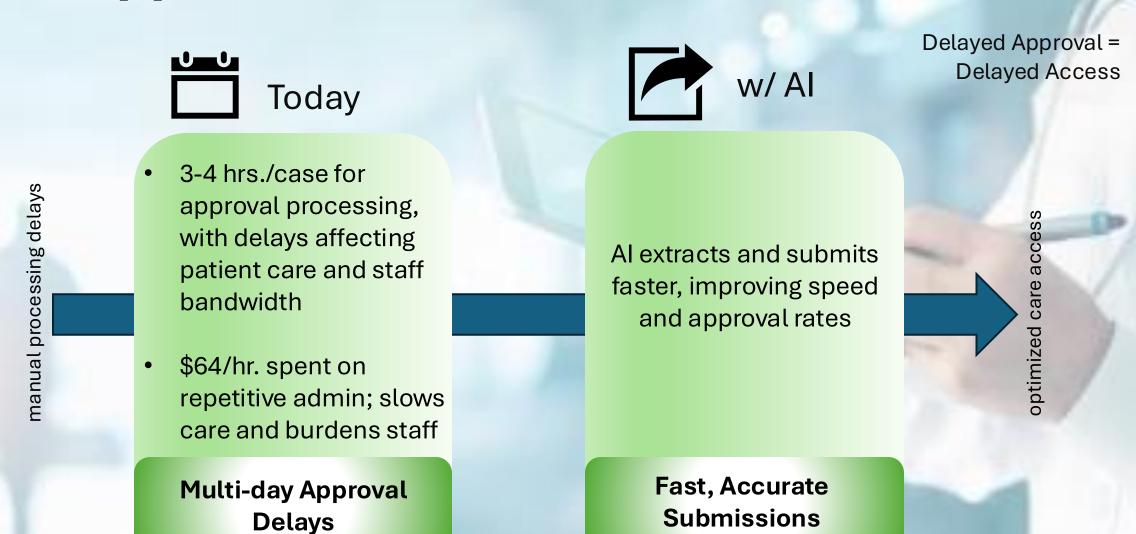
# **CRM Data Entry & Lead Management**



# Reg. Documentation & Clinical Data Mgt.



# Ins. Approvals & Prior Authorization WF



# **Al Value Proposition**

Smarter Processes
Better Data
Faster Decisions



\$670,800 \$561,600

\$280,000

- CRM Data Entry & Lead Management
- Regulatory & Clinical Documentation
   Insurance & Authorization Workflows

# Al Selection Rationale

Workflow Option	Risk Level	Regulatory Requirements	Time-to-Value	Implementation Complexity	Workflow Simplicity	Patient Impact Risk
CRM Data/Lead	Low risk & low patient safety impact	Minimum regulatory/complian ce requirements	Measurable results within months	Low implementation complexity	Straightforward workflow for easier adoption	Zero direct patient safety impact
Reg/Clin Workflows	High FDA compliance stakes	Extensive FDA validation needed	6-12 month validation cycles	High compliance validation requirements	Complex document classification requirements	Audit risk if errors occur
Ins/Auth Workflows	Complex multi- payer integrations	Multi-payer compliance complexity	6-12 month API integration cycles	Complex payer API integrations	Multi-system data alignment needed	Patient care delays if system fails

# **Al Implementation Overview**

**Smarter Systems Faster Care** Real Impact

- Months 7-12
- Document

#### Regulatory Rollout

- Months 13-18
- Full-scale regulatory automation

#### Rollout Insurance Pilot

Months 19-24

data extraction

Prior authorization +

• Months 25-30+

Insurance

Enterprise-wide insurance workflow automation

#### **Regulatory Pilot**

**CRM Sales** 

• Months 3-6 • Full sales team

Rollout

classification + extraction

#### **CRM Pilot**

- Weeks 1-9
- 5 sales reps

# **CRM Tool Overview**



Tool	Integration	Price Point	Strengths
selectories GPT	Deep Salesforce- native integration	\$\$\$	Predictive insights across the platform
Copilot	Strong within Microsoft ecosystem	\$\$-\$\$\$	Broad productivity + cross-app Al
HubSpot	Seamless for HubSpot users only	\$\$	Easy, bundled Al for SMBs



Native to
Salesforce
seamless integration



Ideal for Pilot fast, low-risk start



Strong Projected Impact

10+ hrs. saved per week

# **CRM Implementation Overview**

From Discovery to Decision

# covery & Design

#### **Key Activities**

- Audit current CRM data quality & processes
- Secure necessary licenses and permissions
- Identify integration requirements

#### Milestones/Success Metrics

- % records audited
- # of reps confirmed & received feedback
- Licenses acquired

# cal Integration

#### **Key Activities**

- Configure features, user permissions, custom fields & page layouts
- Conduct initial systems integration testing

#### Milestones/Success Metrics

- % features configured
- # of automation rules successfully triggered
- Successful initial integration testing with documented outcomes

# Execution

Pilot

#### - User training and launch

- Issue tracking and resolution

**Key Activities** 

- Feedback & data collection

#### Milestones/Success Metrics

- # of users completed training
- Daily active users
- Key learnings documented and implemented

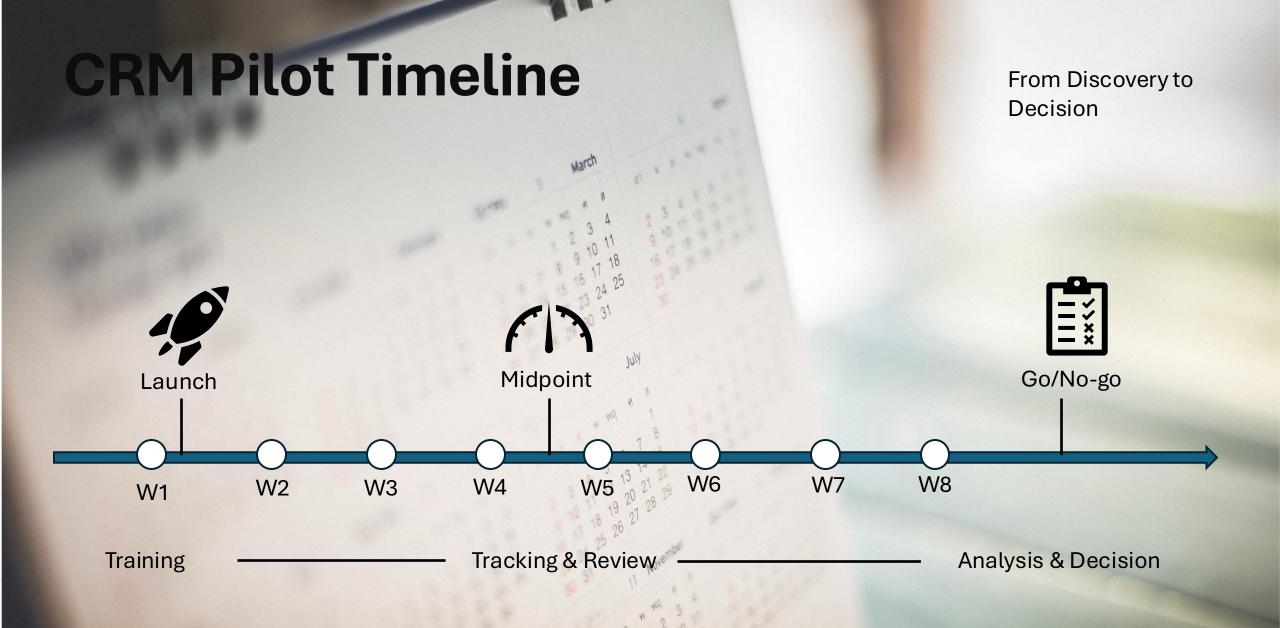
# alysis & Decision

#### **Key Activities**

- Compile and analyze pilot feedback & results
- Calculate ROI
- Present findings to stakeholders

#### Milestones/Success Metrics

- # of improvements identified
- Stakeholder confidence in ROI and success metrics



# CRM Pilot Expected Outcomes

Long-Term Value Strategic Impact











### Al Governance & Leadership

- Clear standards and practices for safe AI use across teams
- Change management methods ready for scaling
- Risk protocols for regulated work

#### Strategic Alignment

- Competitive research shows real automation value
- Tech stack is ready to support expansion
- Strong leadership backing for future investment

### Adoption & Integration

- Al works smoothly with Salesforce
- Teams onboard quickly and give feedback
- Human-Al collaboration supports compliance needs

#### Culture & Mindset Shift

- Pilot teams shifted from skepticism to support
- Other groups now asking to join
- More decisions based on data and experimentation

#### Risk & Compliance

- Al helps people do their jobs better, not replace them
- Org is ready for the next regulatory automation phase

# Success, Failure, & Go/No-Go

Measurable Goals & Outcomes

#### **Current State Baselines**



2.5 hrs
Avg daily data
entry per rep



4.2 hrs
Lead
response time

#### **Pilot Success Metrics**

10 hrs.

50% logged

70% user

90% DAU

#### Failure Criteria

- <60% daily active usage after 6 weeks</p>
- User satisfaction <5.0 after initial training period</p>
- Any decrease in data accuracy below current
- Technical downtime >5% of business hours
- Negative impact on customer response times

**CRM Pilot Budget & Resources** 

Small Bet Big Win

Estimated Total Investment \$42,700-48,450+



Software Licensing \$500-1,250

Training & Vendor Support \$5,000-10,000

Personnel Allocation \$37,200+

# **CRM 3-Year Progression**

From Investment To Impact

#### **Rollout**

- Investment: \$156K
- Savings: \$405K
  - ROI: 260%

Year 1

#### **Optimized Ops**

- Investment: \$80K
- Savings: \$650K
- ROI: 713%

Year 2

#### **Full Maturity**

- Investment: \$85K
- Savings: \$750K
  - ROI: 782%

Year 3

From Investment To Impact

### **CRM Automation Benefits**



-75% manual tasks

+10% conversion rate

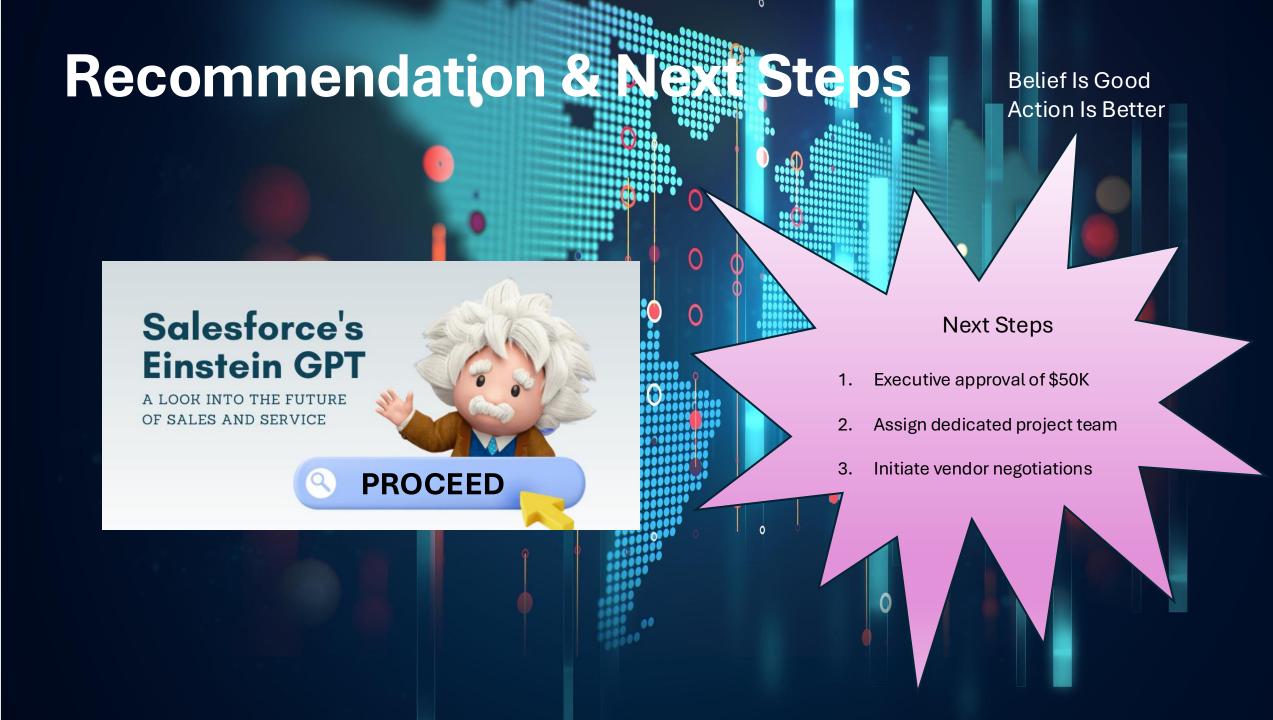
# T Mobile

\$2.1M annual savings



+43% lead qual time

+22% conversion rate



# **Future State and Q&A**

Al voice
Me - Paige

Success is every team focused on their highest-value activities. This directly supports

**IIElevenLabs** 

Dubbed with





Year	Investment	Savings	Net Benefit	ROI (calc)
Year 1 – Pilot → Rollout	\$156,000	\$561,000	\$405,000	<b>260</b> % = 405,000 ÷ 156,000
Year 2 – Optimized CRM Ops	\$80,000	\$650,000	\$570,000	<b>713</b> % = 570,000 ÷ 80,000
Year 3 – Full Maturity	\$85,000	\$750,000	\$665,000	<b>782</b> % = 665,000 ÷ 85,000

# 1) Financial Model & ROI (With Calculations)

- 1.1 Year 1-3 ROI Progression (roll-up)
- How the ROI numbers are derived (example: Year 3 = 782%)
- Investment (Year 3): \$85,000
- Savings (Year 3): \$750,000
- Net Benefit: \$750,000 \$85,000 = \$665,000
- ROI:  $$665,000 \div $85,000 = 7.8235 \rightarrow 782\%$
- (The same approach yields Year 2 ROI = 570,000 ÷ 80,000 = 713%; Year 1 ROI = 405,000 ÷ 156,000 = 260%.)

Adoption Scenario	Break-Even Month	Year-1 ROI
Best Case (95% adoption)	Month 3	950%
Expected (85%)	Month 4	847%
Conservative (70%)	Month 6	<b>650</b> %
Minimum Viable (60%)	Month 8	<b>450</b> %

#### 1.2 Year-1 Adoption Scenarios & Break-even

• Narrative: Even at 60% adoption, FY1 ROI is 450% and still breaks even in Month 8.

- 1.3 Cash-Flow by Phase (Year 1)
- Months 1–2 (Pilot/Training):
  - Pilot Investment: \$45,000
  - Temporary Productivity Dip: ~10%
  - **Net impact: –\$65,000** (includes training productivity loss)
- Months 3–6 (Ramp-Up):
  - Monthly Savings: \$25,000
  - Ongoing Costs: \$3,500 / month
  - Net Monthly Benefit: \$21,500
  - Cumulative break-even: Month 4
- Months 7–12 (Full Realization):
  - Monthly Savings: \$46,800
  - Ongoing Costs: \$3,500 / month
  - Net Monthly Benefit: \$43,300
  - Year-1 ROI (expected): 847%
- Years 2–3 monthly net benefit (for context):
- Year 2: \$53,700 / month
- Year 3: \$105,700 / month

- 1.4 Payback Period (Pilot → Full)
- Pilot Phase (5 reps, 9 weeks):
  - Annualized savings for 5 reps: \$561,600 × (5/20) = **\$140,400**
  - 9-week period savings: \$140,400 × (9/52) = **\$24,300**
  - Pilot investment: **\$45,000**
  - Net during pilot: -\$20,700
- Post-Pilot Recovery:
  - Remaining Year-1 investment after pilot: \$156,000 \$45,000 = **\$111,000**
  - Monthly full savings: \$561,600 ÷ 12 = **\$46,800**
  - Months to recover \$111,000: \$111,000 ÷ \$46,800 ≈
     2.4 months
- Total Payback: ~4.7 months (2.25 months pilot + 2.4 months recovery)

# 2) Phased Enterprise Rollout (with targets)

Phase	Timeline	Scope	Target Metrics	Impact
1 – CRM Pilot	Weeks 1–9	5 sales reps	10 hrs/wk saved/rep; 90% DAU; 70+ satisfaction	Early proof of value & adoption
2 – CRM Rollout	Months 3–6	Full sales team	50% activities auto-logged; +15% conversion; \$561K/yr savings	Productivity + revenue lift
3 – Regulatory Pilot	Months 7–12	Doc classification + extraction	<b>–50% doc errors</b> ; faster onboarding	Compliance- ready automation
4 – Regulatory Rollout	Months 13–18	Full-scale regulatory automation	90%+ automation; standardized audits	Faster onboarding; FDA readiness
5 – Insurance Pilot	Months 19–24	Prior auth + data extraction	-30% submission time; +15% approvals	EHR integration validated
6 – Insurance Rollout	Months 25–30+	Enterprise-wide	\$1.5M+ annual savings; fewer denials	Faster patient access; lower admin cost

# 3) Workflow & Operational Detail (expanded beyond \$1-20)

- 3.1 Cross-Functional Drag
- Adds **internal "tribal knowledge" requests** as a measurable time sink (not just CRM/regulatory/insurance tasks).
- 3.2 Sales Current State vs AI
- Current State (expanded): manual CRM entry 2–3 hrs/day, incomplete activity tracking, missed follow-ups, instinct-driven prioritization.
- Al Solutions (expanded): automated email/calendar capture, Al lead scoring, predictive analytics for conversion likelihood, focus on high-potential prospects.
- 3.3 Regulatory & Clinical Current State vs AI
- Current State (expanded): hundreds of docs/month; time-intensive categorization/filing; error-prone bottlenecks; onboarding delays.
- Al Solutions (expanded): intelligent doc processing enabling straightthrough automation; pre-trained models ~90% initial accuracy; automatic classification & data extraction; HIPAA-aligned processing.

#### 3.4 Insurance – Current State vs Al

Current State (expanded): 3–4 hrs per case; 5–7 business day delays; high denials; labor-intensive appeals.

**Al Solutions (expanded):** automated **EHR extraction** + form population; **real-time authorization tracking**; ML-optimized submissions by payer pattern; HIPAA-compliant data handling.

Stream	Staffing & Rate	Time Lost	Annual Labor
Sales (CRM)	20 reps @ <b>\$54/hr</b>	10 hrs/wk	\$561,600/yr
Reg/Clinical	5 staff @ <b>\$54/hr</b>	20 hrs/wk	\$280,800/yr
Insurance	10 specialists @ <b>\$43/hr</b>	30 hrs/wk	\$670,800/yr

- 4.2 Long-Term Impact (beyond labor)
- Sales: higher lead conversion; revenue growth.
- Regulatory: faster onboarding; improved relationships; audit readiness.
- Insurance: fewer denials; faster reimbursement; faster patient access.
- People: higher morale; patient satisfaction increases.

## 4) Labor Model & Downstream Impact 4.1 Role-Based Labor (52 weeks)

# 5) CRM Pilot (full framework beyond S1–20)

- 5.1 Phased Activities & Milestones
- **Discovery & Design:** audit data/process; select reps; licenses/permissions; integration requirements.
- **Technical Integration:** features/config; roles & permissions; validation rules; early integration test.
- Pilot Execution: user training; launch; issue tracking/resolution; feedback collection.
- Analysis & Decision: ROI calc; learnings; go/no-go.
- 5.2 Week-by-Week Rhythm (9 weeks total)
- W1-2: finalize training; confirm scope.
- **W2–3:** training sessions; access provisioned; go-live.
- W3–8: issues triaged; surveys & 1:1s; midpoint review @W5.
- W8-9: consolidate insights; ROI & go/no-go.
- 5.3 Success Framework (baselines, targets, failure)
- Baselines: 2.5 hrs/day data entry; 4.2 hr lead response; 87% accuracy; 6.2/10 tool satisfaction.
- Targets: 10 hrs/wk saved per rep; 50% of activities auto-logged; CSAT/NPS/CES ≥ 70; DAU ≥ 90%.
- Failure: DAU <60% @ 6 weeks; user sat <5.0; data accuracy falls below baseline; >5% downtime; slower customer response.
- 5.4 Budget & Resources (pilot)
- Total: \$42,700–\$48,450
  - **Licensing:** \$500–\$1,250 (5 users × \$50–125/user/mo × ~2 months)
  - Vendor support: \$5,000-\$10,000
  - Personnel (~\$37,200):
    - PM: 0.4 FTE × 12 wks × \$75/hr = \$14.400
    - IT Admin: 0.4 FTE × 12 wks × \$75/hr = \$14,400
    - Sales Mgr: 12 wks × \$60/hr = **\$7,200**
- (Payback math is in Section 1.4.)

# 6) Technology Options (unique tables retained) 6.1 CRM AI Platforms

Tool	Complexity	Key Differentiators	Integrations	Pricing	Best For
Salesforce Einstein	Low	Predictive lead scoring; automated activity capture; deal health	Salesforce native + APIs	\$50– 125/user/mo	SF orgs with defined sales process
HubSpot Al	Med	Email automation; nurturing; A/B testing	500+ apps	\$45– 120/user/mo	Sales + marketing alignment
Microsoft Dynamics 365 Al	Med	LinkedIn Sales Navigator; relationship mapping	O365, Power BI, Azure AI	\$65– 135/user/mo	Microsoft- centric enterprises

# 6.2 Regulatory Automation

Tool	Complexity	Differentiators	Integrations	Pricing	Best For
Microsoft Syntex	Med	Healthcare templates; metadata tagging	SharePoint/Teams/Power Automate	~\$0.05/page	M365 orgs
ABBYY Vantage	High	150+ doc types; advanced OCR; confidence scoring	EMR; APIs; RPA	Contact	High-volume + complex layouts
AWS Textract + Comprehend Medical	High	Medical entity recognition; HIPAA infra	AWS ecosystem; APIs	Usage-based	Highly scalable/custom builds

# 6.3 Insurance Workflow Automation

Tool	Complexity	Differentiators	Integrations	Pricing	Best For
UiPath + Al Center	High	Robust exception handling; analytics	Broad connectors; EMR/portals	Contact	Complex, high- volume flows
Microsoft Power Automate	Low–Med	Insurance templates; Teams approvals	400+ connectors	\$15/user + \$251/bot/mo	M365 orgs
Automation Anywhere	High	Intelligent doc processing; audit trails	Cloud + on- prem	Contact	Large orgs needing governance

## 7) Compliance, Security & Internal Processes

- 7.1 CRM Compliance
- GDPR/CCPA consent tracking; role-based permissions; **field-level encryption**; **TLS 1.3** in transit; retention policies; right-to-be-forgotten.
- 7.2 Regulatory Compliance
- HIPAA safeguards; audit trails retained ≥6 years; data minimization; FDA 21 CFR Part 11 validation; rigorous version control with approvals; unique, verifiable e-signatures.
- 7.3 Insurance Compliance
- Encrypted payer API traffic + audit logs (with auto-purge after processing); state-specific priorauth rules; payer-specific forms/protocols; evidence-based clinical guidelines; licensed clinical staff retain final authority.
- 7.4 Internal Architecture & Ops
- Real-time CRM↔EHR synchronization; API management for payer integrations; cloud scaling for automation workloads; continuous compliance monitoring with automated audit trails.

## 8) Governance, Risks & Mitigations

- 8.1 Governance Outcomes Targeted by Pilot
- Standards for **safe Al use**, change-management patterns, risk protocols, leadership buy-in, increased cross-team demand.
- 8.2 Organizational Risks & Mitigations
- Tool fatigue: staged rollouts; user-led feedback loops; satisfaction surveys.
- System dependencies: performance monitoring; contingency playbooks.
- Skills gap: ongoing training; champions/peer coaching.
- Cultural resistance: ROI storytelling; celebrate early wins.
- Change saturation: align timing with other initiatives; clear "why now."
- Misaligned KPIs: validate metrics per stakeholder; outcome-based reporting.
- Sustainability: post-rollout governance; budget for enhancement cycles.

## 9) Einstein Feature Rollouts & Scaling

- 9.1 Feature Rollouts (CRM)
- Einstein Opportunity Insights: deal health & closure probability.
- Einstein Discovery: automated analyses and insights.
- **Einstein Prediction Builder:** no-code predictive models (e.g., provider engagement likelihood).
- Einstein Lead Scoring (enhanced): territory-aware prioritization.
- Einstein Activity Capture (expansion): email/calendar auto-logging.
- **Einstein Forecasting:** pipeline forecasting for revenue planning.
- 9.2 Scaling Plan (post-pilot)
- Standardize data entry workflows, **quarterly model retraining**, performance monitoring & feedback loops, scale to **20+ reps** across territories.

## 10) Real-World Salesforce Einstein Examples

- Kendo Brands Einstein Commerce Insights
- **Use case:** product recommendations & merchandising automation
- **Results: –75**% manual merchandising; **+10**% conversion
- Notes: predictive recommendations in cart; automated merchandising
- Icebreaker Product Recommendations
- Results: +28% revenue from recommended products; +11% AOV
- Fortune 500 Tech Co. Lead Scoring & Opportunity Insights
- Results: -35% time spent on lead qualification; +22% conversion; +40% forecast accuracy; ~15
   hrs/week saved per rep
- T-Mobile Case Classification & Article Recommendations
- **Results: –30**% case resolution time; **–25**% manual routing; **+18**% first-call resolution; **\$2.1M** annual savings

# 11) Supporting Metrics & Definitions (CSAT / NPS / CES)

- CSAT: "How satisfied were you with X?" (Very Dissatisfied → Very Satisfied).
- Best used for early impressions.
- **NPS:** "How likely are you to recommend X?" (0–10).
- Best used for loyalty signal.
- **CES:** "How easy was it to get started with X?" (1–10).
- Best for **usability refinement**.

#### 12) Talk-Track Additions

- **Urgency framing:** All adoption is not "if" but "when"; competitive movement is already underway.
- **Patient impact emphasis:** prior-auth delays = delayed access to care (especially salient for **RLS** patients).
- Rationale for starting with CRM: minimal patient/regulatory risk; fast time-to-value vs. higher-complexity insurance/regulatory.
- Immediate next steps cadence: aim to approve budget within ~2 weeks, assign team immediately, and begin vendor negotiations by Week 3 to secure the implementation window.

## 13) Budget, Math & Financial Consistency

- Approval: standardize to \$50K (covers pilot range \$42.7K-\$48.45K).
- Year 1–3 ROI math:
  - Year 1:  $(561,000 156,000) \div 156,000 = 260\%$
  - Year 2:  $(650,000 80,000) \div 80,000 = 713\%$
  - Year 3:  $(750,000 85,000) \div 85,000 = 782\%$
- Payback: ~4.7 months total (pilot net –\$20.7K; recovery 2.4 months at \$46.8K/mo).
- Adoption scenarios and break-even: 95% M3 / 950%, 85% M4 / 847%, 70% M6 / 650%, 60% M8 / 450%.
- Labor savings calculations (unit assumptions):
  - Sales/CRM: 20 × \$54 × 10h/wk × 52 = \$561,600/yr
  - Regulatory/Clinical: 5 × \$54 × 20h/wk × 52 = \$280,800/yr
  - Insurance: 10 × \$43 × 30h/wk × 52 = \$670,800/yr

#### 14) Roles, Governance & Cadence

- Roles: Executive Sponsor, Project Manager, IT Administrator, Sales Manager, Pilot Reps.
- Pilot cadence: W1–2 training & launch planning; W2 training sessions begin; W3 launch; W3–8 issues + feedback; W5 midpoint; W8 final feedback & improvements; W9 ROI + go/no-go.
- Phase activity success metrics: Discovery/Design (% records audited, reps confirmed, licenses acquired, integration requirements approved), Technical Integration (% features configured, rules triggered, initial integration test documented), Pilot Execution (users trained, DAU, learnings implemented), Analysis/Decision (improvements identified, stakeholder confidence).

#### 15) Architecture, Security & Compliance

- Architecture: data quality management, technical architecture, **real-time CRM↔EHR sync**, **API management** for payers, **cloud scaling** for automation workloads.
- Security & privacy: role-based access; **field-level encryption** for PHI/PII (e.g., SSN, DOB, payer IDs, financials); **TLS 1.3** in transit; retention policies; right-to-be-forgotten.
- Compliance: **HIPAA** safeguards; doc audit trails retained ≥6 **years**; platform audit logs **7 years**; **data minimization**; **FDA 21 CFR Part 11** validation; version control with **unique, verifiable e-signatures**.
- Vendor obligations: **HIPAA BAAs** with all AI/automation vendors handling PHI.

#### 16) Insurance Workflow Guardrails

- Data handling: encrypted payer submissions with audit logging and **automatic data purge** post-processing.
- Rules: **state-specific prior-auth** requirements and **payer-specific** forms/data elements applied at submission.
- Clinical governance: Al outputs align with evidence-based guidelines; include confidence/source context; licensed clinician oversight on patient-critical decisions.

## 17) Feature Rollout & Scaling

- Einstein features: Opportunity Insights, Discovery, Prediction Builder, **Lead Scoring enhancements**, **Activity Capture expansion**, Forecasting.
- Scaling: standardized data entry; **quarterly model retraining**; performance monitoring and feedback loops; expand from 5 pilot users to **20+ reps** across territories.

#### 18) Strategic Urgency & Patient Impact

- Urgency: adoption is underway across the industry; first-mover window is narrowing.
- Timing: approve budget in ~2 weeks, assign team immediately, begin vendor negotiations by Week 3.
- Patient impact: prior-auth delays slow access to care; for **RLS**, each week waiting is another week of symptoms and sleepless nights.

#### 19) Industry Validation

Success rate context: ~78% success in comparable medical-device automation initiatives.

Real-world Einstein examples: Kendo Brands (–75% manual merchandising, +10% conversion), Icebreaker (+28% revenue from recommendations, +11% AOV), Fortune 500 Tech Co. (–35% lead-qual time, +22% conversion, +40% forecast accuracy, ~15h/week saved/rep), T-Mobile (–30% case resolution time, –25% manual routing, +18% first-call resolution, **\$2.1M** annual savings).

## 20) Definition Anchor

Operational efficiency: maximize output while minimizing waste and costs by optimizing processes, streamlining workflows, and reducing unnecessary expenses.

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