



"We're here to save the mamas and babies"

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Our Leadership



Ariana McGee
CEO and Founder

Mother of 4.
11 years in healthcare
commercialization, sales, and
reimbursement leadership for
med device and biotech



Thea James, MHA
COO

11 years of experience in
healthcare operations,
managed care, data analytics
and digital health



Dr. Elicia Harris MD, MBA
CMO – OB/GYN

13 years practicing as a board-
certified OB/GYN with an
executive MBA in healthcare



Board and Advisors



Nada Hanafi
MSC, MPH
Board Member



Leslie Wise
JD
Board Member



Rita Johnson-Mills
MPH
Advisor



Dr. Khadeja Haya
National Medical
Director of
OB/GYN at Team
Health
Advisor



Department of Gynecology
and Obstetrics



Brandon Miller
Co-Founder at
Rebellion
Solutions
Advisor



Rick Stark
Former SVP at
Angiodynamics
Advisor



Advanced Cryoablation Technologies



Leviathan Winn
CFO at Zulily
Advisor

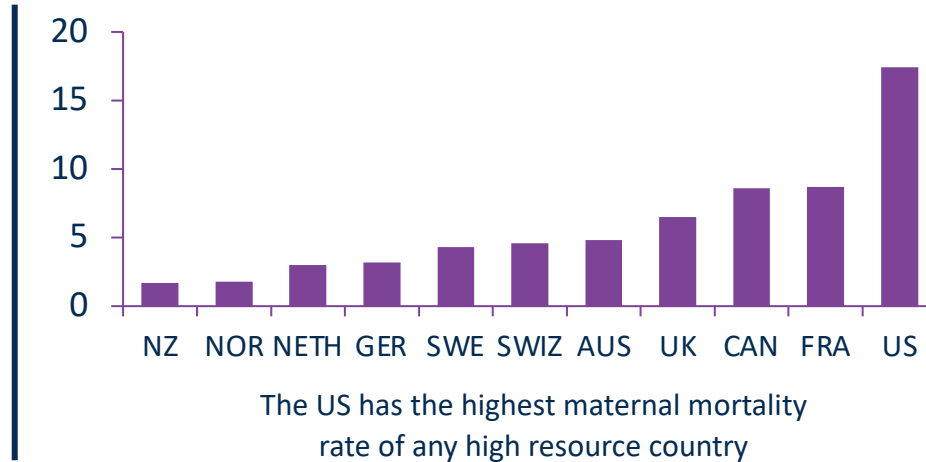


Doug Horner
Co-Founder, CEO
and CTO
Advisor



Mothers are Dying to have a Baby

1 Maternal Mortality Ratio



2 Black women die from childbirth complications 3-4x the national average

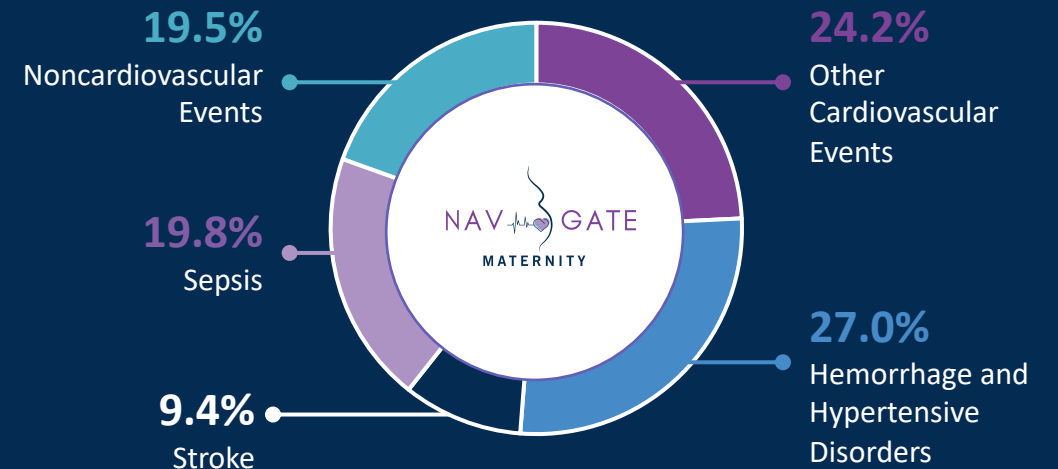


3 Indiana is ranked #3 in the nation for maternal mortality



4

Per the CDC, maternal deaths have doubled since 1986, and more than 80% are preventable





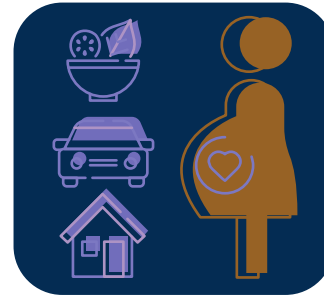
Gaps in Key Clinical Data Lead to Inadequate Maternal Care



No or limited clinical data between prenatal appointments



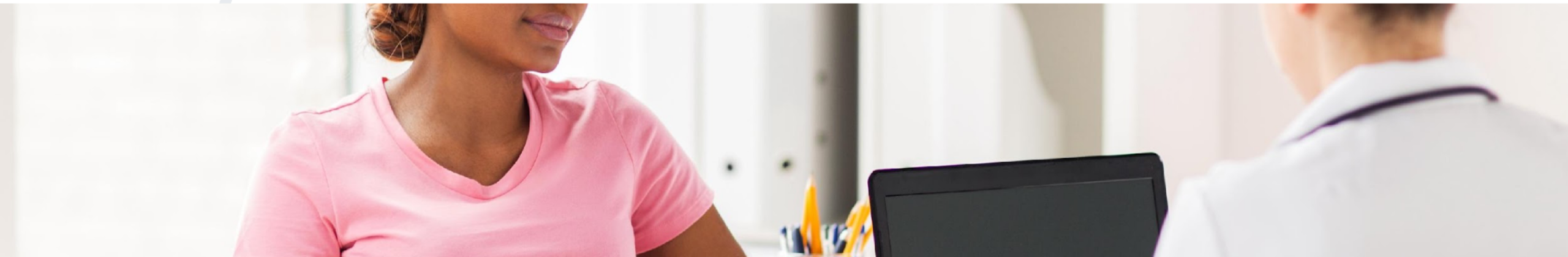
Reactive vs. Proactive patient care



Limited Social Determinants of Health (SDoH) Data



HCP's implicit bias resulting in a lack of patient trust



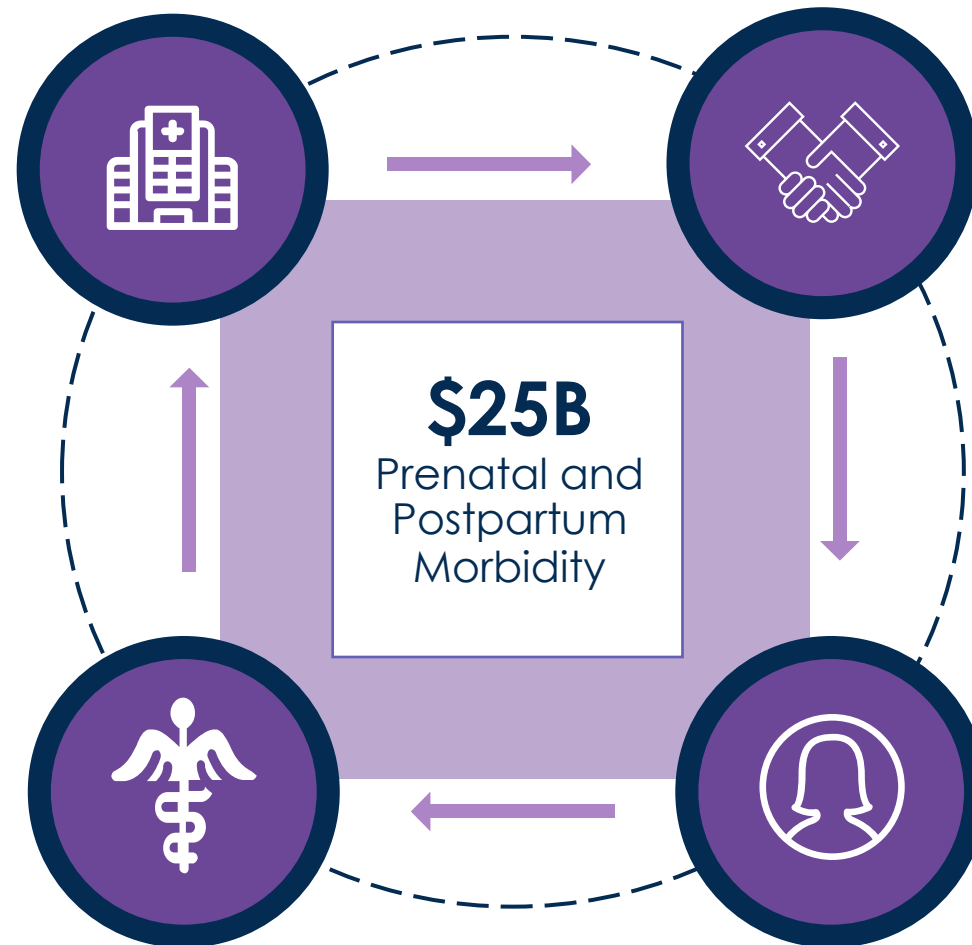
Stakeholder Problem

Hospital
Systems

Payers

Providers

Patients



Source: <https://www.commonwealthfund.org/publications/issue-briefs/2021/nov/high-costs-maternal-morbidity-need-investment-maternal-health>Data: Centers for Disease Control and Prevention, "Severe Maternal Morbidity in the United States," last updated Feb. 2, 2021; Roosa Tikkanen et al., Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries (Commonwealth Fund, Nov. 2020); Jiajia Chen et al., "Assessment of Incidence and Factors Associated with Severe Maternal Morbidity After Delivery Discharge Among Women in the US," JAMA Network Open 4, no. 2 (Feb. 2, 2021): e2036148

Navigate Maternity

A healthcare provider management dashboard and interactive patient app that bridges communication with the care team, collects trends on biometric data, and key alerts to and from their clinician.

Key Features

- FDA-cleared Bluetooth, blood pressure cuff indicated for use in pregnant, preeclamptic and postpartum women (Class II Device)
- Weight
- Depression Score
- Social Determinants of Health (SDoH) Data
- Critical alert system
- EMR/EHR Integration
- SMS Text Alerts
- Telehealth



HIPAA-
compliant data
storage

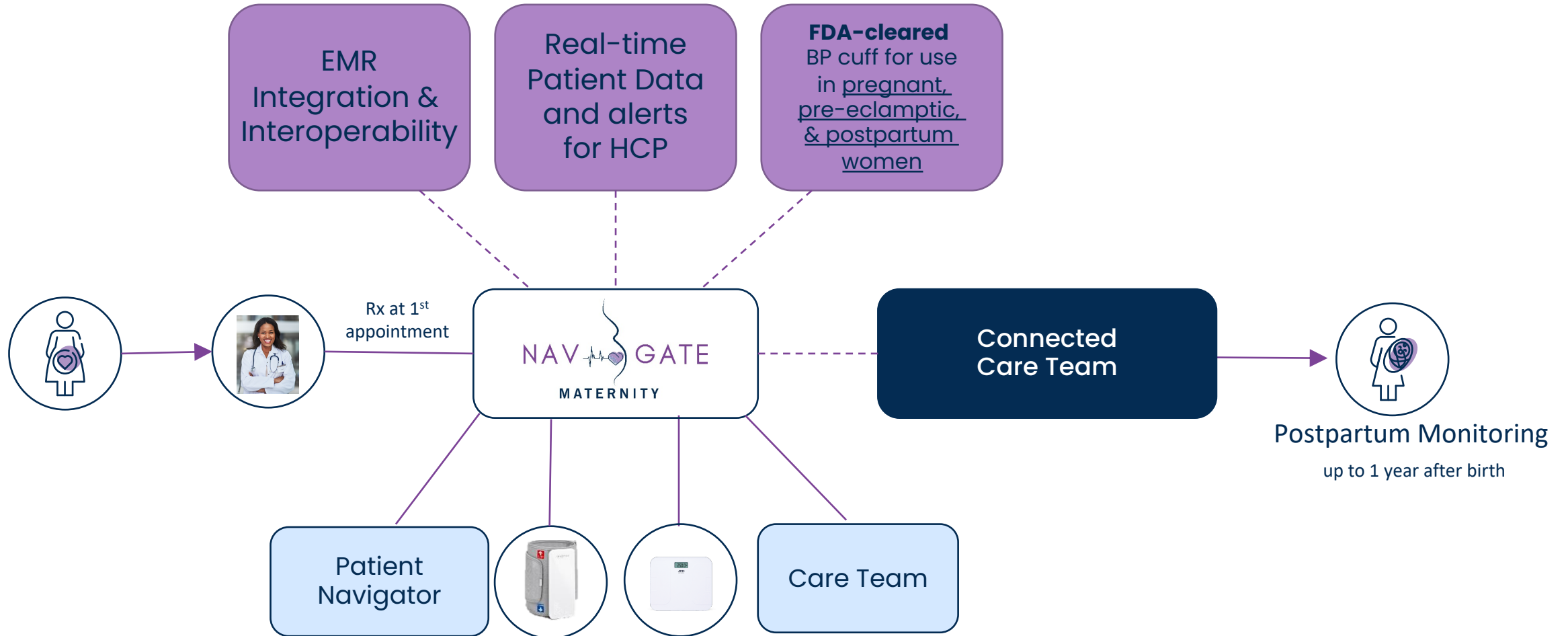


FDA-cleared
hardware integration
for continuous
monitoring



Intuitive desktop,
responsive web,
iOS / Android
apps

How does Navigate Maternity Work?



*HCP: Healthcare provide

Competitive Advantage



- **FDA cleared Bluetooth, blood pressure cuff indicated for use in pregnant, preeclamptic and postpartum women**
 - 1 of 2 validated BP cuffs on market in pregnant, preeclamptic, postpartum women (AHA, 2018, Systematic Review)
 - Exclusive contract in the U.S. with contract manufacturer for perinatal market
 - Once cleared, NM would be the 1st FDA cleared remote patient monitoring system for prenatal and postpartum women. (Ref: ISO Standards)



- **Remote patient monitoring codes** could be billed for medically necessary and appropriate patients on covered state Medicaid, Managed Medicaid, and commercial plans.



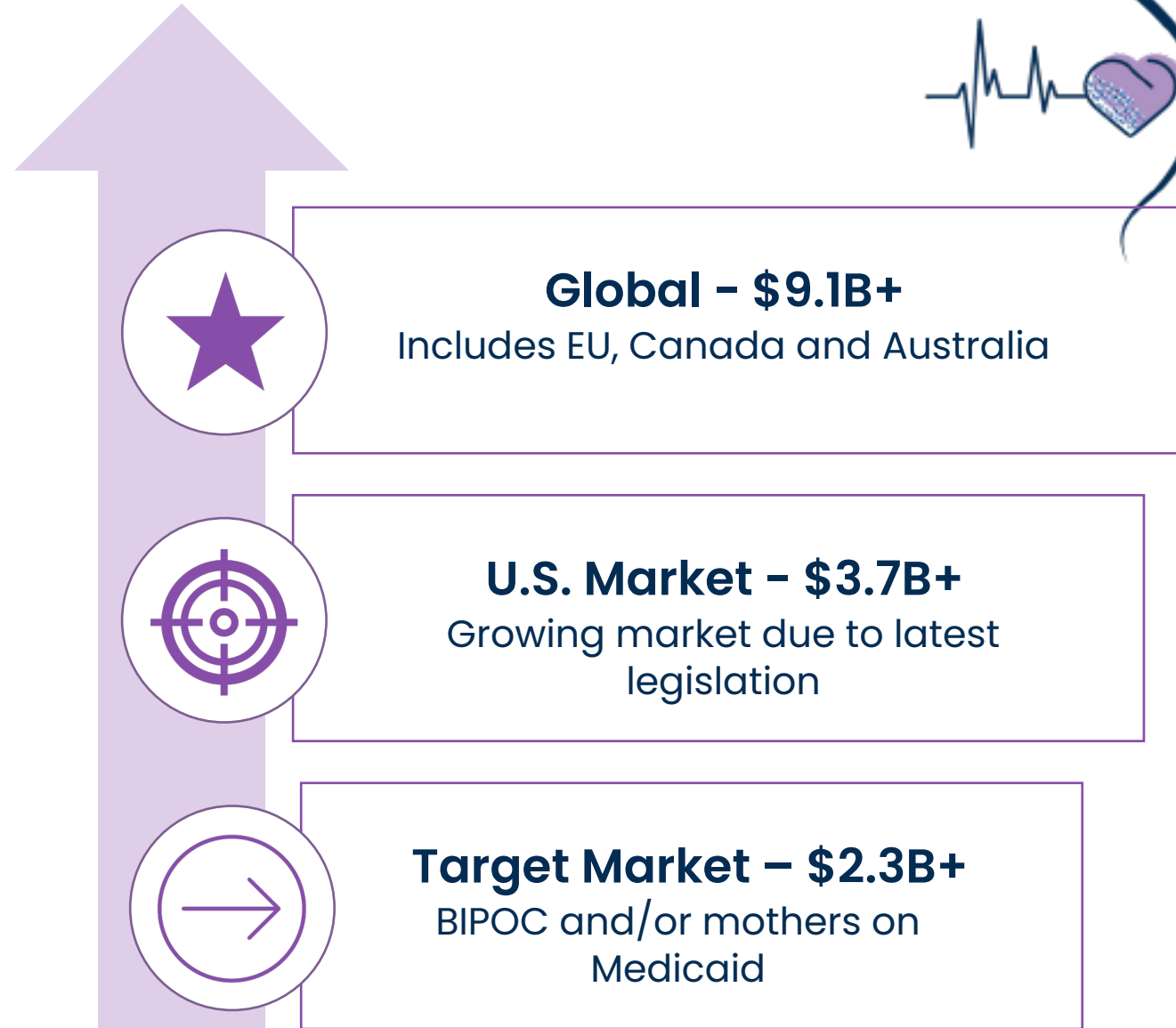
- **EMR integration and Interoperability**
 - Backend software partner is a certified EHR company that manages 100M+ patient charts in over 50 countries
 - HL7 and Direct Trust



- **IP Filed**
 - Title: PREPARTUM AND POSTPARTUM MONITORING RELATED RECOMMENDED MEDICAL TREATMENTS filed on November 30, 2022
 - Focuses on methodology, data collection cadence, and electronic communication to provider and patient.

Total Addressable Market

- Roe v. Wade being overturned is expected to exacerbate maternal morbidity and mortality in the U.S.
- Live births are expected to grow in the U.S.
- Near term we are focused on state Medicaid and managed Medicaid patients.
- Long term we are focused on commercial payers and international regulatory bodies such as NICE (UK).



B2B Business Model

Health Systems (Buyer)

Health systems pay a per patient per kit fee onboarding fee. Monthly fee to use system

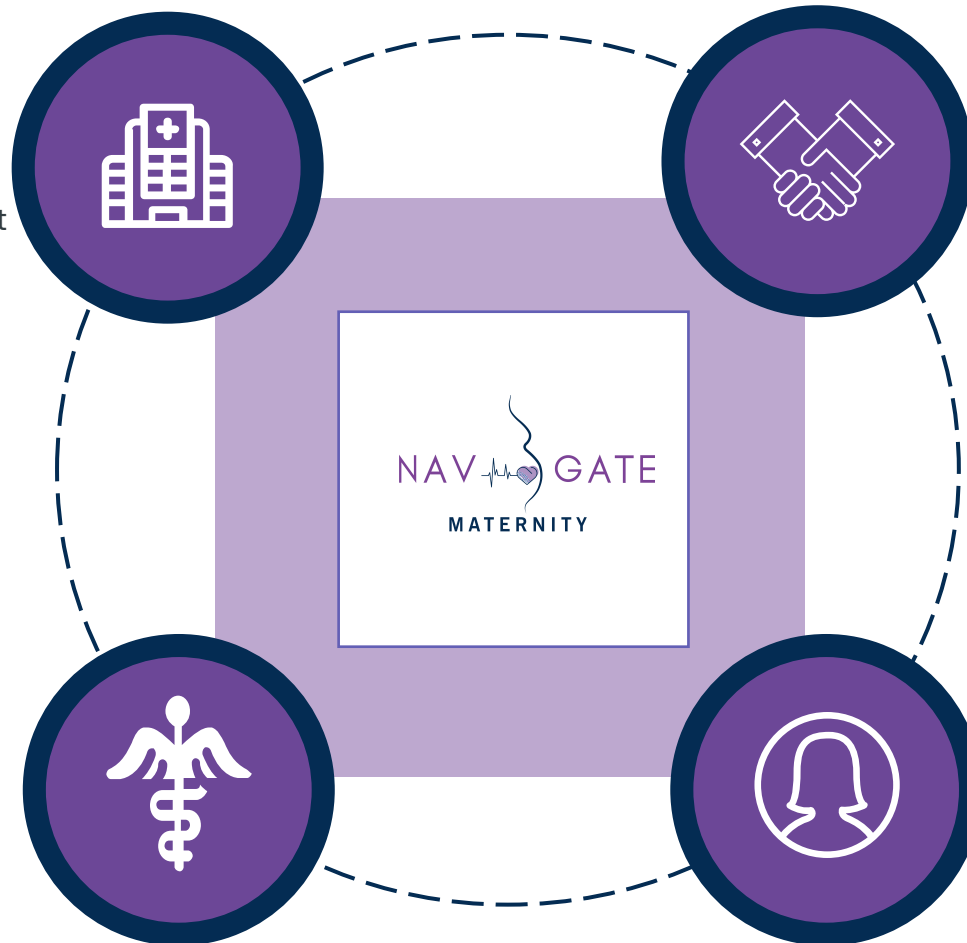
\$250 Onboarding Fee Per Kit

\$60 per patient per month

Pilot Pricing*

Providers (User)

HCPs utilize the platform. They can be reimbursed for monitoring their patients through the RPM codes.



Payers (Buyer)

Payers will pay a per member per month (PMP) fee for patient/provider access to Navigate's system.

Patients (User)

Patients utilize the platform with no or little direct cost.

B2B Model and Market

US Economic Value



		PATIENTS (per year)	REVENUE POTENTIAL* (average \$ per kit)	NM Opp (10-25% of market)
Phase 1: 2023-2025	Hypertensive	740k – 1.5M	\$740M – \$1.5B	\$ 74M – \$185M \$150M – \$375M
Phase 2: 2025-2027	1st Time Mothers	1.2M – 1.3M	\$1.2B – \$1.3B	\$120M – \$300M \$130M – \$325M
Phase 3: 2027	Total Market	2.3M – 3.7M	\$2.3B – 3.7B	\$230M – \$575M \$370M – \$925M

\$250 per kit and \$60 per month per patient.
B2B: Health systems, FQHCs, Private Practices, and Payers

Traction to Date

Competitions



Innovation Challenge
Semifinalist
Pilot with CA Medicaid payer



Maternal Health
Challenge - \$100k
Pilot with state of Kentucky,
U of Louisville, & Humana



Startup Grand Prize
1ST Place - \$25k



Impact! Maternal
Health Competition
2nd Place - \$15k



3rd Place - \$25k



Inaugural Pioneer
of the Year



Innovation Grant



2022 Pitch
Competition Winner

Accelerators



AHA's Empowered to Serve Business Accelerator
Finalist



Texas Medical Center's Health Tech Cohort



Inaugural Women's Health Cohort



Finalist Accelerator



Forward for Good Health
Equity Accelerator \$50k

Features





Join Navigate Maternity in the fight to end the maternal health crisis

For partnerships and investment:
amcgee@navigatematernity.com

Follow us

Instagram: [@navigatematernity](https://www.instagram.com/navigatematernity)
Facebook: [Navigate Maternity](https://www.facebook.com/NavigateMaternity)



ARIANA MCGEE

Founder & CEO

Ariana McGee is the Founder and CEO of Navigate Maternity (NM). NM has created a remote patient monitoring system for prenatal and postpartum patients. Mothers are dying and specifically, Black women are dying 3-4x the national average during childbirth and postpartum due to reactive care, data gaps, and bias. Ariana experienced the inequity in perinatal care after almost dying during childbirth with her fourth child. As a healthcare leader in the medical device and biopharmaceutical industries (BD, Biogen, Genzyme, etc.) for the last 11 years, Ariana brings a wealth of knowledge and is uniquely positioned as a mother and healthcare leader to commercialize NM. In her free time, she enjoys spending time with her husband, AJ, and their four little ones – Jade (5), Trey (4), Naomi (2), and Aliya (1). “We’re here to save the mamas and the babies.”



THEA JAMES, MHA

COO

Thea James is the Chief Operating Officer (COO) of Navigate Maternity. As a leader in project management and processes improvement for over 11 years at managed care organizations and large hospital systems (The VA Hospital System, Novant, and Centene) Thea brings a deep expertise in healthcare operations. Thea’s passion for healthcare stems from her experience growing up in her hometown, Gary Indiana. She witnessed many health disparities and inequities in midwestern, BIPOC communities. This inequity drove Thea to dedicate her life to help solve this injustice. Thea graduated from Indiana University with a B.S. in Healthcare Administration and a business foundations certificate from Kelley School of Business. She earned her Masters of Health Administration from Franklin University and a Data Analytics Certificate from Georgia Institute of Technology.



DR. ELICIA HARRIS MD, MBA, FACOG

CMO

Elicia Harris MD, MBA is the Chief Medical Officer (CMO) of Navigate Maternity. Dr. Harris is a board-certified OB/GYN who currently practices as an OB/GYN Hospitalist in Indianapolis, IN. During her 13 years of practice, she spent over 10 years in private practice in Fort Wayne, IN. Dr. Elicia Harris has always been a passionate advocate for her patients and a warrior of healthcare disparities. In addition to providing excellent care to her patients, she also works as an advocate for healthcare policy and reform as the Treasurer of the American College of Obstetrics and Gynecology (ACOG) District V. She completed her undergraduate studies at Purdue University and her medical school training and OBGYN residency at Indiana University School of Medicine. She recently completed a Physician Executive Masters of Business Administration (EMBA) at IU Kelley School of Business.

OVERVIEW		Standard Blood Pressure Cuffs	Significance
<p>FDA cleared Class II* Device <u>indicated for use</u> in pregnant, preeclamptic, and postpartum women in home care setting</p> <p><i>*Class II: devices for which special controls, combined with general controls, are necessary to provide reasonable assurance of safety and effectiveness</i></p>	<p>✓</p> <p>Our BP cuff is FDA cleared and indicated for use in the prenatal, pre-eclamptic, and postpartum patient population in the home care setting.</p>	<p>✗</p> <p>Many BP cuffs on Amazon or big box stores are NOT FDA cleared or indicated for use in pregnant, preeclamptic, and postpartum patients.</p>	<p>Not a clinical device</p>
<p><u>Validated BP cuff</u> in pregnant, pre-eclamptic, and postpartum mothers for home care setting</p>	<p>✓</p> <p>(2018) Systematic Review published by American Heart Association - <u>Our cuff is 1 of 2 home cuffs validated and cleared</u> for pregnant, preeclamptic, and postpartum women in home</p> <p>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5764819/</p>	<p>✗</p> <p>Most FDA cleared cuffs are NOT studied and/or validated for use in <u>pregnant, pre-eclamptic or postpartum patients</u> in the home care setting.</p>	<p>Delayed or incorrect diagnosis</p>
<p>Full Kit: Scale, Patient Reported Outcomes, Mental Health Screening, Social Determinant of Health Screening, and Patient Satisfaction</p>	<p>✓</p>	<p>✗</p>	<p>Key data points needed to improve outcomes</p>
<p>Reimbursement</p>	<p>✓</p>	<p>✗</p>	<p>Scalable</p>
<p>EHR Integration</p>	<p>✓</p>	<p>✗</p>	<p>Ease of use</p>
<p>Automatic capture of blood pressure into software</p>	<p>✓</p>	<p>✗</p>	<p>Compliance</p>