



The AI-native trust layer for healthcare work.

Pre-seed · \$2.25M target / \$2.75M hard cap · \$15M post-money cap · 2026-05-14

TL;DR

Rovn is building the worker-owned, network-effect credential rail healthcare work runs on. One verified record per worker — the **Passport** — read by every facility, every renewal, every payer, every healthcare app. We turn credentialing from a repeated cost into a reusable network asset.

The Problem

Same nurse, seven facilities, forty-seven redundant NPDB/DEA/ABMS/state-board lookups. 78-day average direct-hire RN credentialing cycle (NSI 2026). Healthcare wastes **\$5–15B/yr** re-verifying the same workers. Regulatory window (NCQA Ideal Credentialing 2024, JCAHO PSV enforcement, CMS recoupment risk) is forcing the gap closed.

The Product · three surfaces, one network

- **Passport** (worker · free) — verified credential record, owned by the worker, depth-labeled, source-receipted, portable across facilities.
- **facility workflow layer** (facility · \$12K Pilot → \$10K/mo Core → \$20K/mo Operator → \$1M+/yr Platform) — operations cockpit for hiring → credentialing → privileging → monitoring → recredentialing.
- **Verified API** (developer · usage-based) — read-only rail other healthcare apps trust. Cached-replay margin compounds.

The Moat · four unfalsifiable layers

- **Cached-replay inventory** — every NPDB/DEA/ABMS query cached. Fresh \$7.50 → cached \$0.50 = 15x margin. Customer N+1 makes higher margin than N.
- **Structural inversion** — worker-owned record in shared network. Incumbents (symplr, Modio) are facility-owned silos and can't unwind their existing book.
- **Partnership lock (Bitsol)** — 10-year healthcare SaaS partner, 50+ live products, 0 HIPAA violations. From-scratch competitor is 18–24 months behind on compliance posture.
- **Regulatory window** — built native for 2026-era NCQA + JCAHO. Incumbents retrofit 2018-era assumptions.

Traction

- Live in production: Passport · facility workflow layer Command Center · AI Trust Layer · MCP server · Advisor tool (passport.rovn.to, rovn.to)
- HIPAA-aligned chassis · BAA available · ZDR-eligible AI model usage · hash-chain audit running
- National design-partner pipeline open · strategic partnership with Bitsol Technologies live
- *PLACEHOLDER: design-partner LOIs, advisor confirmations, pipeline \$-value*

Team

- **Giles-Evan Mboumi** · CEO — product, GTM, capital, customer · Atlanta · linkedin.com/in/gilesevanmboumi
- **Christian Montgomery** · CTO — engineering, architecture, AI doctrine, compliance posture
- **Doutche Mpindu** · CPO — product, design, workflow, customer experience
- **Bitsol Technologies** · strategic partner — HIPAA-aligned chassis + implementation muscle
- Clinical Advisory Board — disclosed under NDA (CNO · CNO · healthcare-tech CEO; referenced in DD packet under NDA per advisor preference)

Comparable exits

Comp	Outcome	Pattern
Verifiable	Independent · \$27M Series B (2023)	Healthcare credential API rail
Modio	CHG Healthcare (2019, undisclosed)	Credentialing SaaS exit
Symplr	\$1.5B valuation	Credentialing platform scale
Persona	\$1.5B valuation	Identity verification rail
Plaid	\$13.4B valuation	Financial verification rail

The Ask

Single-target pre-seed · \$15M post-money cap · same 18-month runway either way.

- **Lean target: \$1.5M** — 18-month runway, single-track execution, national design-partner motion + Verified API public launch + clinical-advisor disclosure.
- **Hard cap: \$2.75M** — only with strong demand; de-risks source depth, compliance/security, pilot implementation, and GTM timing.

Cap defense: \$244M Base PV per DCF → \$15M cap is ~6% of Base PV. \$40M Bear PV → \$15M cap is 37.5% of Bear PV. Funds 10–15 paying Atlanta design partners, Verified API public launch + first 5 API customers, 2–3 facility workflow layer Ops-tier upgrades, hash-chain audit hardening, clinical advisory board. Series A trigger: \$1M+ ARR run-rate, 100+ logos pipeline, 1 Platform deal in late-stage diligence by Q4 2027.

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