

HEALTHCARE WORKFORCE READINESS

# Healthcare still runs compliant workforce readiness by *inbox and spreadsheet.*

*Roṽn is the AI operator that turns source evidence into human-owned decisions.*

Credentialing • privileging • payer readiness • monitoring • audit – operated manually across disconnected systems

# Same worker. Many regulated workflows. *No shared evidence memory.*

## One worker

the same evidence, requested again and again

### Credentialing

license DEA NPDB  
sanctions

### Privileging

board cert competency  
references

### Committee review

packet MEC Board

### Payer enrollment

CAQH PECOS payer status

### Monitoring

OPPE / FPPE expirables

### Reappointment

re-verification  
3-year cycle

### Audit & survey export

receipts work history  
malpractice

*Every workflow asks for overlapping evidence — but the evidence does not compound.*

# One evidence-backed Passport, *operated by AI, approved by humans.*

## Worker Passport

PSPRT · evidence record

License  
source name · timestamp · tier

SOURCE-VERIFIED

Source receipt  
artifact / hash · validity window

RECEIPTED

Credentialing decision  
named reviewer · date · typed reason

APPROVED

AI operates the workflow · source systems prove facts · humans own decisions

## Passport

Worker-owned, reusable evidence record — not a profile.

## Source receipts

Source, timestamp, artifact/hash, tier, and validity window.

## Human gates

Named reviewer, date, typed reason, persistent decision.

# Intake → source evidence → gap routing → *human gate* → *proof*.



# The rails are live. *The coverage map is national.*

passport.rovn.to

PRODUCTION API HOST

43 / 51

ROLES / JURISDICTIONS · 50 STATES + DC

2,193

COVERAGE CELLS · 0 UNSUPPORTED

354+

TESTS PASSED IN DEPLOY PROOF

● LIVE

- May 17 provider lifecycle & facility operator proof set
- National coverage map
- Source receipts where live

● PARTIAL / SOURCE-GATED

- Manual PSV where automation is not live
- Persona identity verification not claimed
- Source access items remain

● BUILD / ROADMAP

- SOC 2 trajectory — not certified
- NCQA CVO alignment path — not certified
- Payer automation — expansion, not fully live

# The wedge expands from readiness into *medical staff, monitoring, payer, and audit.*

## PHASE 1

### Readiness workflow

Intake, screening, gates, roster, nudges, proof packets. The first sale.

## PHASE 2 · BUILD

### Medical staff

Privilege delineation, credentialing-for-privileging pack, committee / MEC / Board workflow.

## PHASE 3 · BUILD

### Monitoring & review

OPPE / FPPE, proctoring, chart review, JC ≤ 3-year reappointment, APP scope.

## PHASE 4 · BUILD

### Payer readiness

CAQH, NPI/NPPES, PECOS, Medicaid, commercial payer, billability forecasting.

## PHASE 5 · BUILD

### Enterprise audit

Document vault, survey export, RBAC, multi-facility, continuous monitoring.



# AI runs the workflow. Evidence compounds. *Humans stay in control.*

## REUSABLE EVIDENCE

### Worker-owned Passport

The worker carries source-backed evidence; facilities read it with consent instead of restarting.

## DEFENSIBLE PROOF

### Source receipts

Source, timestamp, artifact/hash, tier, and validity window make every claim auditable.

## SAFE AUTHORITY

### Human gates

Named reviewer, typed reason, and persistent decision keep regulated authority with people.

## OWNS THE WORKFLOW

### AI operator

Integrations are pipes. Rōvn owns workflow, decisions, proof, and audit — a different primitive than symplr.

*Not a smaller symplr — the AI operator and evidence layer underneath the workflows symplr proved hospitals care about.*

THE ASK

# \$2.25M

## *\$15M post-money SAFE*

*Roṽn turns source evidence into compliant, billable work.*

15-18 month runway

Complete Phase 1 pilot workflow

Launch paid design-partner pilots

Harden compliance, security & source access

Build first repeatable GTM motion

Prepare regulated expansion