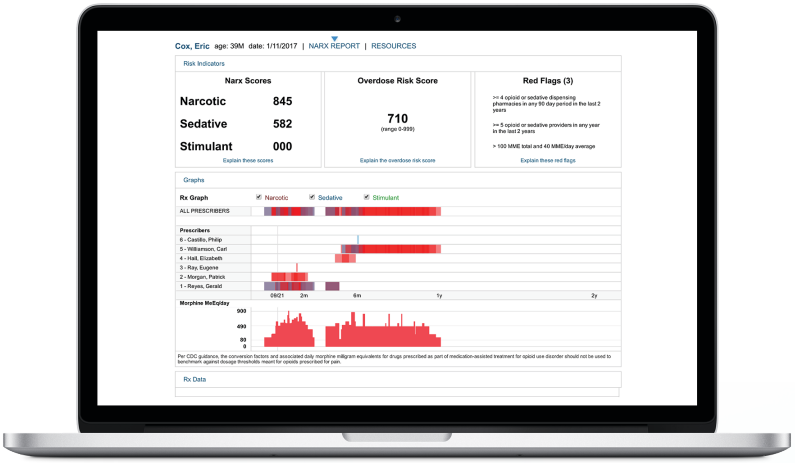
NarxCare

Analytics, tools and technology to help care teams address substance use disorder and improve patient outcomes

Appriss Health developed the NarxCare platform to provide a more comprehensive approach to addressing substance use disorder. NarxCare aids care teams in clinical decision-making, provides support to help prevent or manage substance use disorder, and empowers states with the comprehensive platform they need to take the next step in the battle against opioid addiction.



* Image 1.0: The Narx Report

The Benefit

Care Teams Make Informed Decisions Quickly and Confidently to Help Patients

NarxCare

NarxCare is a comprehensive platform to identify, prevent, and manage substance use disorder (SUD). NarxCare is the definitive source for controlled substance data, the critical component to any SUD strategy, through its access to multi-state Prescription Drug Monitoring Program (PDMP) data. NarxCare aggregates two years of historical prescription data from providers and pharmacies including quantities and active prescriptions and presents interactive, visual representations of the data, as well as complex risk scores based on the data. The platform then provides tools and resources to enable prescribers, dispensers and care teams to help patients and connect them to treatment if necessary.

This data, insight and functionality is all accessed through existing electronic health records (EHR) or pharmacy management systems, so there is no logging in or out of secondary websites or trying to manage user names or passwords. This solution is presented in two main modules: The Narx Report and Resources.

For more information, please visit **www.apprisshealth.com**

Appriss® Health

The Narx Report

The Narx Report includes a patient's NarxScores, Predictive Risk Scores, Red Flags, Rx Graph and access to Resources all in a single, easy-to-use interface. See Image 1.0.

The NarxScores

Every NarxCare report includes type-specific use scores for narcotics, sedatives, and stimulants. These scores are based on a complex algorithm factoring in numbers of prescribers, morphine milligram equivalents (MME), pharmacies, and overlapping prescriptions. Scores are quantified representations of the data in PDMP and range from 000-999 with higher scores equating to higher risk and misuse, and the last digit always represents the number of active prescriptions.

The Predictive Risk Scores

These composite risk scores incorporate relevant data (PDMP and non-PDMP) into advanced and customized predictive models to calculate a patient's risk of overdose, addiction, and cost. Non-PDMP data sets may include medical claims data, electronic health records, EMS data and criminal justice data. The Overdose Risk Score is featured in Image 1.0.

The Red Flags

There are multiple, fully configurable and customizable PDMP- and non-PDMP-based red flags that can include the following, and more:

- More than 5 providers in any year (365 days)
- More than 4 pharmacies in any given 90-day period
- More than 40 morphine milligram equivalent (MME) per day and 100 MME total
- History of overdose
- History of sleep apnea

When present, a red flag, or a combination of red flags, may contribute to the risk of unintentional overdose or other adverse events.

The Rx Graph

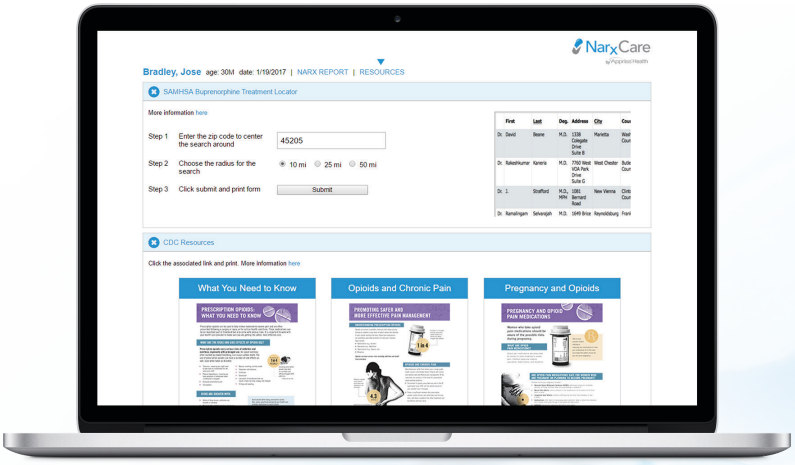
The Rx Graph is simple, clear, and comparative. The interactive display allows you to view all the information you need, compare data, and click into specific data points to see more detail. You can easily visualize and understand patterns in prescribing and usage behaviors, as well as identify overlapping prescriptions.

The Resources

The NarxCare Resources module provides Medication Assisted Treatment (MAT) locators, patient information handouts, and more. All features are accessible with a single click and automatically contextualized to an individual patient's demographics. See Image 2.0.

The Value

Appriss Health knows that the delivery of NarxCare, a comprehensive substance use disorder platform, is the best way to ensure that prescribers, dispensers, and states support the health of their patient populations.



* Image 2.0: Resources

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