



THE **ROI** DEBATE
IS OVER.

HERE'S WHAT
ACTUALLY **PAYS**
BACK.

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HEALTH SYSTEMS, REAL NUMBERS, NO RIP-&-REPLACE

Between 2016 & 2022, Healthcare process mining was a slow-growth category.

Celonis raised **\$290M, \$1B, \$400M** & then stopped. Healthcare was a line item in a deck, not a go-to-market.

Then, for three years we all asked the question...

Can AI work in healthcare?

**THAT QUESTION IS NOW
SETTLED...**

**...HERE ARE 3 PROOF POINTS
ACROSS 4 STUDIES THAT
ANSWER THE QUESTION!**

*KLAS reports the Middle East has moved past implementation. The conversation is now about outcomes, governance, interoperability, experience, & ROI.



1 The First Touch: When AI handles the patient experience, conversion compounds

Northfield Hospital & Rush University System for Health rolled out an AI-enabled patient access system.



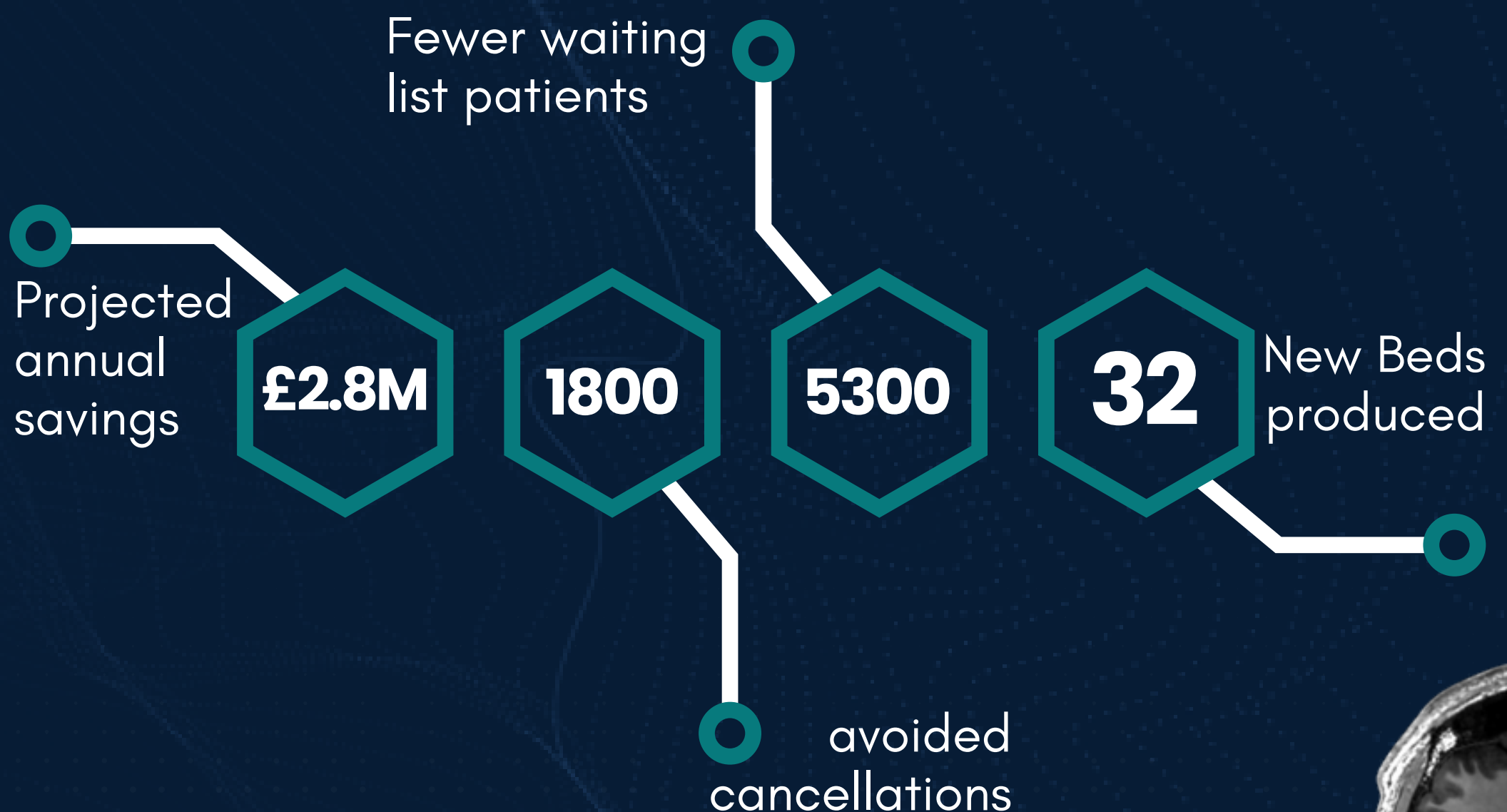
Every **minute** reclaimed at reception is a minute **reduced** to admin.



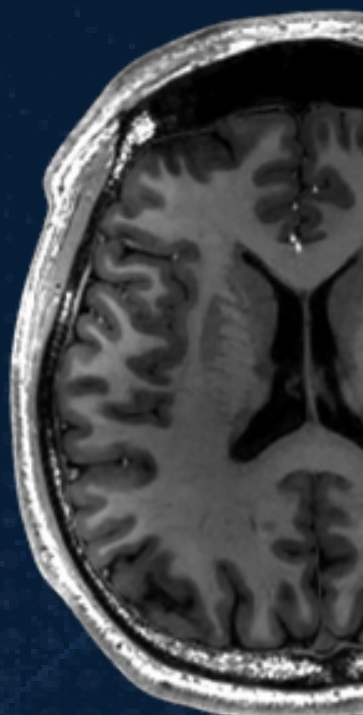
Capacity without CAPEX

2

UHCW NHS Trust & Baptist Health applied AI process intelligence to patient journey operations. **Over 8 weeks** the efficiency results were outstanding...



AI patient flow is a capacity play, not a software purchase



3 The GCC plays by its OWN RULES

The constraint is **interoperability**.

Dubai's DHA requires HL7 v2 & FHIR.

Abu Dhabi's Malaffi holds 3.5 billion clinical records across 12.7 million patient profiles & 3,072 connected facilities.

Burjeel's digital ecosystem outlines where money already goes: patient access, reminders, no-show reduction & discharge planning, capacity.

Rip-and-replace is off the table.

Operational Layers are the architecture needed in the GCC, not another system.



ATELIC
MEDVIEW

THE LAYER, **NOT** the **REPLACEMENT**

1

Smarter **acquisition**
interoperable with
existing systems

**AI-enabled operational
layer** for patient access &
flow.

2

Process
intelligence

3

Workflow
design

4

Inter-operable
Automation

Screening-
to-booking

Automated
follow up

Retention &
Engagement

4

Stages

1 layer

0 rip-&-replace

All done on top of
DHA, Malaffi, &
existing HIS/EMR



The real question is not “Does **AI pay back?**”
It's **where, how fast, & on top of what.**



“
**Speed-to-Market is
the difference
between you & your
competitors winning
the customer journey**”



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