

Your LTSS risk model is missing the signal caregivers already see.

Paid caregivers notice changes in mobility, meals, pain, mood, falls, confusion, medication issues, and caregiver strain before they show up in claims. Einra captures those observations in real time, routes them to the care team, and **creates the pre-claims data layer for predictive HCBS risk.**

7-day

ER-visit prediction

A peer-reviewed study of **301 community-dwelling adults age 75+** found that aide-logged observations predicted ER visits with strong statistical accuracy.

Veyron et al., 2019 · peer-reviewed

HOW THE SIGNAL REACHES YOUR TEAM

1 · Signal

The caregiver taps what they saw — under 15 seconds. No app, no new login.

2 · Route

Einra reads it for early risk and routes it in real time to the right coordinator.

3 · Act

The team intervenes early — before the ER visit, before the admission.

40%

fewer admissions

\$1.3M

saved · 500 members

82%

aide submission rate

4.9/5

aide ease-of-use

Founder's hands-on model across ~500 high-risk members · 6-week workflow validation with aides, agency nurses & MCO coordinators.

THE NEXT PHASE · PREDICTIVE HCBS RISK

Claims show what happened. Caregivers see what is changing.

The same observations build a structured, real-time data layer most plans don't have — the foundation for a predictive HCBS risk model that flags members at rising risk for avoidable ED use, hospitalization, nursing-facility placement, and caregiver breakdown.

See it on your own panel — in 90 days.

Low-lift · no EHR integration · reversible

DAY 0

Define a cohort, name a lead. Signal flow goes live.

DAY 45

Mid-pilot readout: adoption, routed flags, time-to-action.

DAY 90

Full readout and a clear go or no-go decision.

[Book a 90-day pilot scoping call →](#)

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