RAICO·HEALTH

CLINICAL AI PLATFORM

Clinical AI that meets your EHR *where it lives.*

It captures the visit you actually had, reads the chart at the point of care, and answers the phone when patients call — across every major EHR, with no vendor lock-in.

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01 / CAPTURE

Ambient note generation

02 / CONNECT

EHR-agnostic FHIR integration

03 / CONVERSE

Patient-facing voice AI

ONE PLATFORM · THREE SURFACES

HIPAA-ALIGNED · BAA-BACKED

Care delivery is buried under the work of *documenting it.*

Clinicians spend more time documenting care than delivering it. EHR integrations are bespoke, brittle, and locked behind vendor walls. And patients still wait on hold for answers a well-designed agent could give in seconds.

RAICO Health closes all three gaps with a single platform.

GAP 01

The documentation burden

Notes are written after the fact, from memory and dictation — slow to produce and disconnected from the conversation that actually happened in the room.

GAP 02

Walled-off integrations

Every EHR ships its own dialect. Custom, one-off integrations are fragile, expensive to maintain, and break at go-live.

GAP 03

The front-door bottleneck

The phone is still the front door to healthcare, and most of that volume is routine — yet it consumes staff who are needed elsewhere.

Three surfaces — *visit capture, patient voice, and a chart-grounded clinical agent* — sharing one knowledge layer and one integration spine.

SURFACE 01 — VISIT CAPTURE

Ambient Note Generation

Walk into the room. Talk to your patient. Walk out with a draft note.

RAICO Health listens to the visit in the background, transcribes both speakers with diarization, and produces a structured clinical note in the format your specialty uses — grounded entirely in what was actually said.

Conversation-grounded, not dictation

Multi-speaker diarization separates clinician from patient automatically. No headset, no "begin dictation" command, no robotic phrasing.

Native clinical formats

Consult (HPI / PMH / SH / FH / PE / A / P) and SOAP today, with specialty-tailored templates on the roadmap.

PHI-safe by design

Diarization runs under a HIPAA BAA. Raw audio is never persisted; transcripts and drafts age out on a 90-day retention clock.

Strictly transcript-derived

The drafter only writes what was said aloud. No hallucinated histories, no invented exam findings — if it wasn't spoken, it isn't in the note.

Built-in consent workflow

Every recording is gated by explicit, verbal in-app patient consent captured before the mic opens — versioned, timestamped, auditable.

Email-out for any care team

Finished notes deliver to any clinician inbox — built for consults, referrals, and shared-care models where the listener isn't the writer.

WHY CLINICIANS KEEP USING IT

- *The note sounds like you — because it came from your words.*
- *Editing a draft is faster than dictating from scratch.*
- *The patient-facing half of the visit is finally captured.*

SURFACE 02 — CONNECT

EHR-Agnostic Integration

One platform. Every major EHR. No vendor lock-in.

RAICO Health speaks fluent FHIR to whichever EHR your system runs on. A vendor-neutral integration layer lets a single AI workflow run identically against Cerner, Epic, Meditech, and Athena — and any future FHIR-conformant vendor.

Live EHR context at the point of care

The agent reads encounters, conditions, observations, medications, and recent notes directly via SMART on FHIR. No export, no nightly ETL, no staging database.

Writes only where it's safe to write

Clinical contributions land as DocumentReference resources — the EHR's native draft-and-sign artifact — under the clinician's own identity. The AI never authors as itself.

Per-vendor quirks already absorbed

Every EHR ships its own FHIR dialect. We've catalogued vendor-specific behaviors so your integration team doesn't discover them at go-live.

Decision support, not determination

For high-stakes work like DRG capture, the agent surfaces ranked candidates with UHDDS-grounded rationales, verbatim chart quotes, and confidence bands. People reconcile.

Audit-grade by default

Every tool invocation writes a row to a tamper-evident log: who, when, what, against which patient, with what evidence. Compliance gets the call tree, not a black box.

Code lookup without leaking PHI

Reference servers (ICD-10, CMS Coverage Determinations) run self-hosted inside the same network boundary. No clinical query ever leaves the perimeter.

THE INTEGRATIONS LIVE TODAY — CONNECT ONCE, WORK ANYWHERE

Cerner

Oracle Health Millennium

`Production · FHIR R4 · signed-JWT`

Epic

App Orchard

`Sandbox-validated client`

Meditech

Expanse

`FHIR R4 · backend auth`

Athena

athenahealth

`SMART v2 (CRUDS)`

SURFACE 03 — CONVERSE

Patient-Facing Voice AI

Your front desk, at 2 a.m.

A realtime voice agent that takes inbound calls, holds a natural conversation, and routes, schedules, or answers — without the patient ever knowing they didn't reach a human.

Inbound calls via SIP trunking

Connect your existing phone number and the agent picks up. No new hardware, no number migration.

Sub-second realtime conversation

Streamed audio both directions over WebRTC, low-latency speech recognition, naturalistic ElevenLabs voices. No hold music, no "could you repeat that" loop.

Knowledge-grounded answers

The agent shares the platform's retrieval pipeline, so answers come from your actual policies, hours, intake forms, and FAQs — not a generic guess.

Workflow-aware

Schedules, takes messages, captures referrals, escalates to a human on triggers your team defines, and hands transcripts off to the clinical chart.

Web and mobile too

The same agent runs inside your patient-facing app for in-product help, intake interviews, and post-visit follow-up.

Frees staff for what matters

Most call volume is routine — hours, directions, refills, "is my appointment still on?" Handle it reliably and free your team for the calls that need a human.

WHY THIS MATTERS

- *The phone is still the front door to healthcare.*
- *Most call volume isn't clinically urgent.*
- *Reliable triage gives staff their time back.*

HOW IT ALL FITS TOGETHER

Three surfaces. One spine.
Every major EHR underneath.

PATIENT

WEB · APP · SIP

Voice AI Agent

Realtime conversation over WebRTC across web, app, and phone.

CLINICIAN

CONSENT-GATED

Ambient Capture

Diarized, transcript-grounded clinical note generation.

CODER / BILLING

EVIDENCE TRAIL

DRG Decision Support

Ranked candidates with verbatim rationale for human review.

SHARED RETRIEVAL

Knowledge Layer

Your policies, protocols, intake forms, and FAQs — one grounding source feeding voice, capture, and the clinical agent alike.

SMART ON FHIR

EHR-Agnostic Integration

Vendor-neutral FHIR spine across Cerner, Epic, Meditech, and Athena — read context, write clinician-signed drafts.

One platform. *Three surfaces. Every major EHR underneath.*

COMPLIANCE & TRUST

The AI proposes. The clinician *signs.*

HIPAA-aligned end to end
PHI stays inside the security boundary; reference-data lookup runs self-hosted within the same perimeter.

BAA on every component
Business Associate Agreement coverage on every component that touches patient audio or text.

Consent-first ambient capture
The microphone never opens without explicit, versioned, timestamped patient consent.

Audit-grade logging
Every clinical AI action logged — what was read, suggested, and written, by whom, against which patient.

Clinician-authored writes only
The AI proposes; the clinician signs. No synthetic authors ever appear in the chart.

Per-clinician identity required
Drafts write only under a real, named, EHR-known clinician. There is no "system" or service-account author path.

See it run against *your* EHR.

HEALTH SYSTEMS

Schedule a 30-minute walkthrough against your current EHR — ambient capture plus chart-grounded review on your actual workflow.

CLINICS & SPECIALTY

Pilot ambient note generation in a single department. Measure time-saved-per-visit and clinician satisfaction.

DIGITAL-HEALTH BUILDERS

Embed our voice agent and FHIR integration as the platform layer beneath your own product.

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