



JOIN THE LIVE POLL
menti.com

POWERED BY



• CONNECTED CARE. SCALABLE SERVICE.

Care insights into clinical clarity.

The missing data layer for modern geriatric care across
Asia-Pacific.

THE SIGNAL WE DON'T SEE

Most conditions in older adults go **unassessed**.

Years of family observation. None of it ever reaches the chart.

2030

MISSED CONDITIONS

40%

Of adults 65+ in Asia live with 3 or more conditions. Fewer than half ever receive a structured assessment.

ASIA

60%

Of the world's elderly population will live in Asia.

SINGAPORE

1 in 4

Singaporeans will be elderly.

Systems can't keep up. The bottleneck is in the workflow execution layer.

CGA



ONE EXAMPLE OF THE GOLD STANDARD

Comprehensive Geriatric Assessment — the gold-standard multi-domain assessment. The bottlenecks below are about delivering it at scale.

90 minutes per elder

Clinicians juggle forms, re-key the same answers, and chase missing history while the families wait.

1 seen. 5 still waiting.

GOOD  1
WAITING  5

Signal never reaches the chart

Family observations, recent falls, subtle signs of change stay invisible to the system.

OUR ANSWER

What families see at home, geriatricians can act on.



FOR CAREGIVERS

Seamless experience that captures signals.



FOR CLINICIANS

Validated CGA summaries, delivered to the EMR.



FOR HEALTH SYSTEMS

Scalable geriatric care without hiring more geriatricians.

The platform, built on the gold standard.



01 · CAPTURE

Secure link to web, app or messenger

Caregivers complete the assessment at home, in any language, at their own comfort.



02 · STRUCTURE

Agentic Data Pipeline to cater to existing SoP

Adaptive, one compliant synthesis per audience.



03 · DELIVER

Clinician portal & EMR

Write-back via FHIR/HL7 — act in minutes.

Decades of peer-reviewed research show what well-delivered CGA does for older adults.

These figures come from published CGA literature, not from Elderwise. Our role is to make this evidence base deliverable at the volume Asia is about to need.

READMISSIONS

51%

Up to 51% fewer 6-month hospital readmissions when CGA is used.

SOURCE

Meta-analysis of 23 RCTs (n=9,477). Geriatric Nursing, 2025.

MORTALITY BENEFIT

57%

Up to 57% 6-month mortality benefit in acutely hospitalized older adults.

SOURCE

Systematic reviews of CGA in acute geriatric inpatient settings, 2024–2025.

FUNCTIONAL GAINS

3x

Roughly threefold improvement in activities of daily living for elders enrolled in CGA.

SOURCE

Aggregated CGA outcomes literature, 2010–2023.

We turn home observations into structured clinician-ready reports.

WITH ELDERWISE

Home observations arrive in the systems clinicians already use — structured, validated, ready to act on.



Continuous capture

Signals collected in the rhythm of daily life, not just clinic visits.



Structured report

Every elder gets a complete, EMR-ready Comprehensive Geriatric Assessment.



Clinically grounded

Geriatric AI mapped to validated instruments clinicians already trust.

WHERE WE ARE, WHERE WE GO

Live in market, scaling on signal.

CLINICAL PARTNERS

SingHealth · NHG Health

Co-design and pilot conversations with Singapore's leading public health clusters.

RECOGNITION

Harvard · NUS · MIT

Selected for global health and innovation programs in 2024–2026.

MATURITY

TRL 7 · Class A Exempt (HSA)

Live in App Store and Google Play. 40+ clinicians consulted on the assessment design.

NOW · 2026 →

Singapore

Beachhead deployments across SingHealth, NHG Health and active aging centres.

NEXT · 2027 →

Australia

Aged-care provider partnerships and integration with regional EMR ecosystems.

THEN · 2028+

Multi-market expansion

Scale into mature value-based care markets with reimbursement-ready CGA pilots.

HOW WE EARN

Three revenue streams. One buyer: **the health system.**

Aligned to one buyer — the health system that wants more elders assessed.

01 · ONE-TIME

Implementation package

EMR integration, security review, clinician onboarding and protocol configuration per institution.

02 · RECURRING

Platform subscription

Monthly platform fee per care team or department, scaling with the number of seats and connected sites.

03 · USAGE

Per assessment

A per-completed-assessment fee that ties our growth directly to the volume of elders the system can reach.

OPERATORS & CLINICIANS

A team that has shipped digital health, run elder care, and built the platforms behind it.

Jefri Chua

CHIEF PRODUCT OFFICER

10+ years global experience across USA & APAC. Scaled products from 0 to \$1B+.

Loh Pei Yi

CLINICAL LEAD

LKC Medicine scholar. 5-year groundup movement founder in elder care.

Volodymyr Iermolaiev

CEO & CO-FOUNDER

2x founder. 15 years in digital transformation at UBS, Accenture, GSK. MIT Sloan.

CLINICAL & AI ADVISORS

Geriatric consultants from TTSH, KTPH and Woodlands Health.

THE ASK

Back the seed round.

RAISE

S\$3M seed

RUNWAY

18 months

USE OF FUNDS

Series A milestones — clinical evidence work and GTM across Singapore and the rest of APAC.

We are looking for a healthcare-native fund lead and strategic angels. We have reserved S\$500k of the round for clinical advisors and operators.

LET'S TALK

Let's turn observations into clinical clarity, together.

WEB

elderwise.ai

EMAIL

hello@elderwise.ai

APP

[App Store](#) · [Google Play](#)

IN PERSON

Booth pickup all week

A US\$7.07B global market, narrowed to a defensible Singapore-led wedge.

