Jim St. Clair

CEO/Co-Founder

One-Liner

- Secure, portable, verifiable health identity that links records across payers, providers, HIEs, and apps

PROBLEM

Hospitals are facing a fundamental problem identifying patients and matching their health data which causes errors, patient safety issues and compliance burden
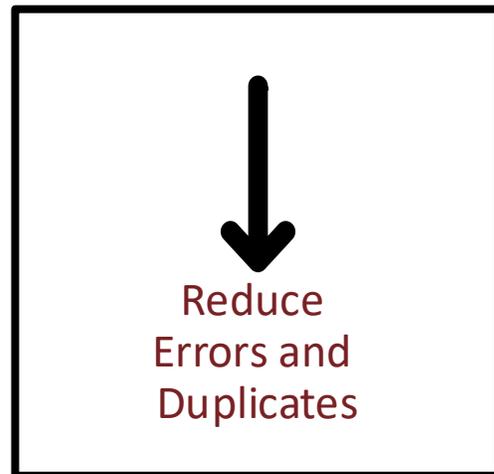
78%
report inconsistent identity data

71%
report duplicate patient records

$1.3M
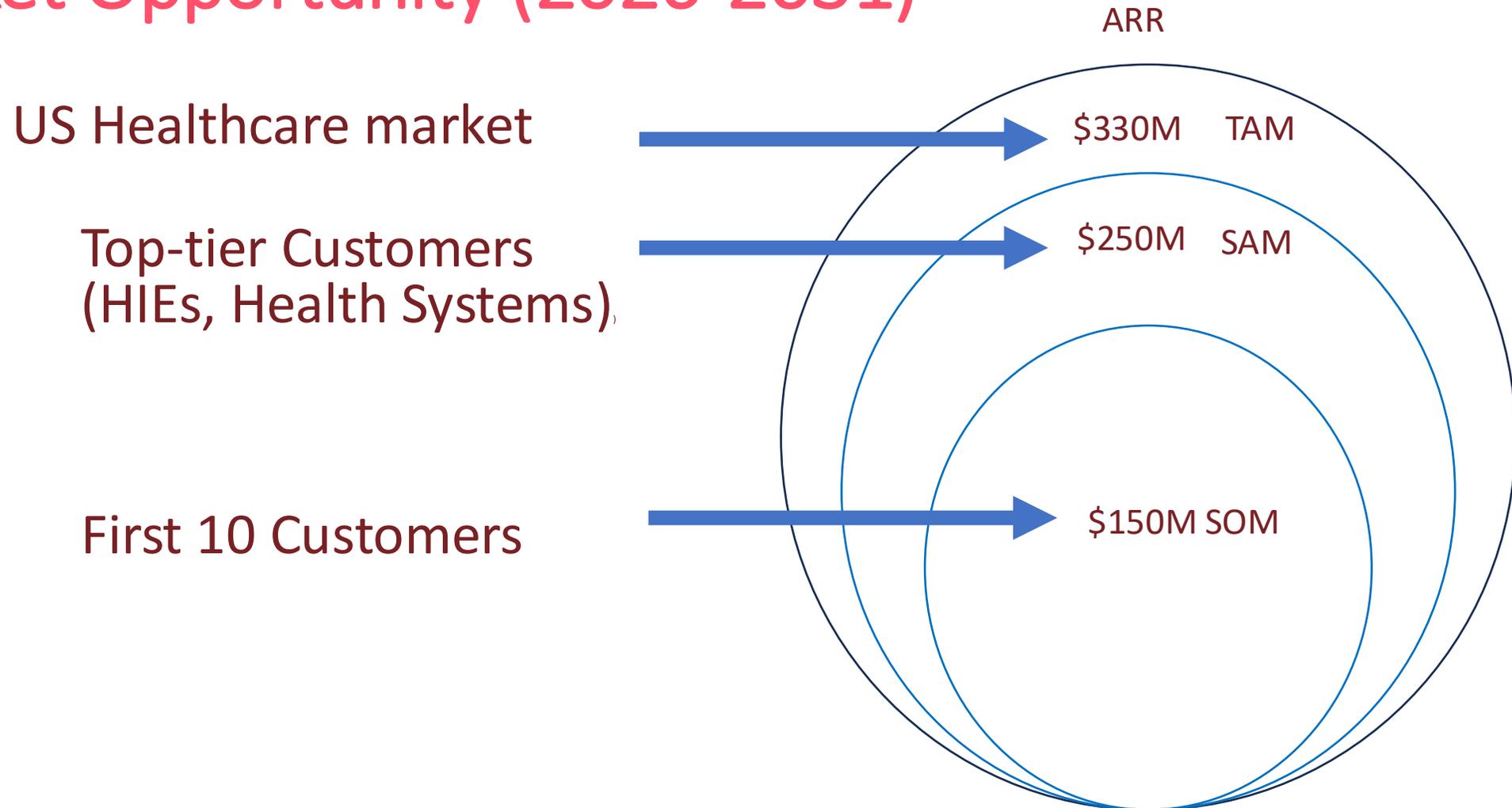Annually Resolving Identity Issues

Solution

MyLigo gives each patient a portable, secure health identity that can connect with digital health systems, and bridge into national ID systems (like MOSIP and Mobile Drivers License (mDL))

↓ Reduce Errors and Duplicates

$$$ Reduce Wasted Expenses

↑ Increase Access and Services

Addresses Health Equity and UN SDG 16.9

Market Opportunity (2026-2031)

ARR

US Healthcare market → $330M TAM

Top-tier Customers
(HIEs, Health Systems) → $250M SAM

First 10 Customers → $150M SOM

Product Uniqueness / Competitive

- Identity-first, not just matching
- Standards-aligned & plug-in ready.
- Global from day one

|	MyLigo	ID.me	CLEAR
User Controlled	✔	✖	✖
TCO	$	$$$	$$
Meets National Standards	✔	✔	✔
Supports Caregivers/Guardians	✔	✖	✖
Interoperable	✔	✖	✖

GTM STRATEGY

- Phase 1 (2025–26): Convert 3–4 pilots (DR, C3HIE, Tech5/Honduras) into paid implementations with clear identity-match KPIs.

- Phase 2: Land-and-expand into additional HIEs and health systems using those pilots as references; begin LATAM and EU outreach with existing partners.

- Phase 3: Scale via channel partners (EHRs/digital health vendors) plus non-dilutive funding (NIH/DoD/EU) to underwrite new deployments.

- Phase 4 (optionality): Launch a targeted D2C layer once B2B rails are established and payer/provider distribution is in place.

Traction and Business Model

- **Product status**: MVP built and ready to deploy with pilots in US and LATAM.

- **Pilots & pipeline**: 2–3 pilots (DR, C3HIE, Tech5/Honduras) designed to prove identity-match KPIs and convert into paying deployments.

- **Business model**: B2B2C platform sold to health systems/HIEs (enterprise ACV ~$150–250k) with long-term upside to add a D2C layer once rails are in place.

- **Revenue path**: Goal is to convert initial pilots into ~$150–300k ARR within 18–24 months, then expand those accounts and add 2–3 more to reach $1M+ ARR.
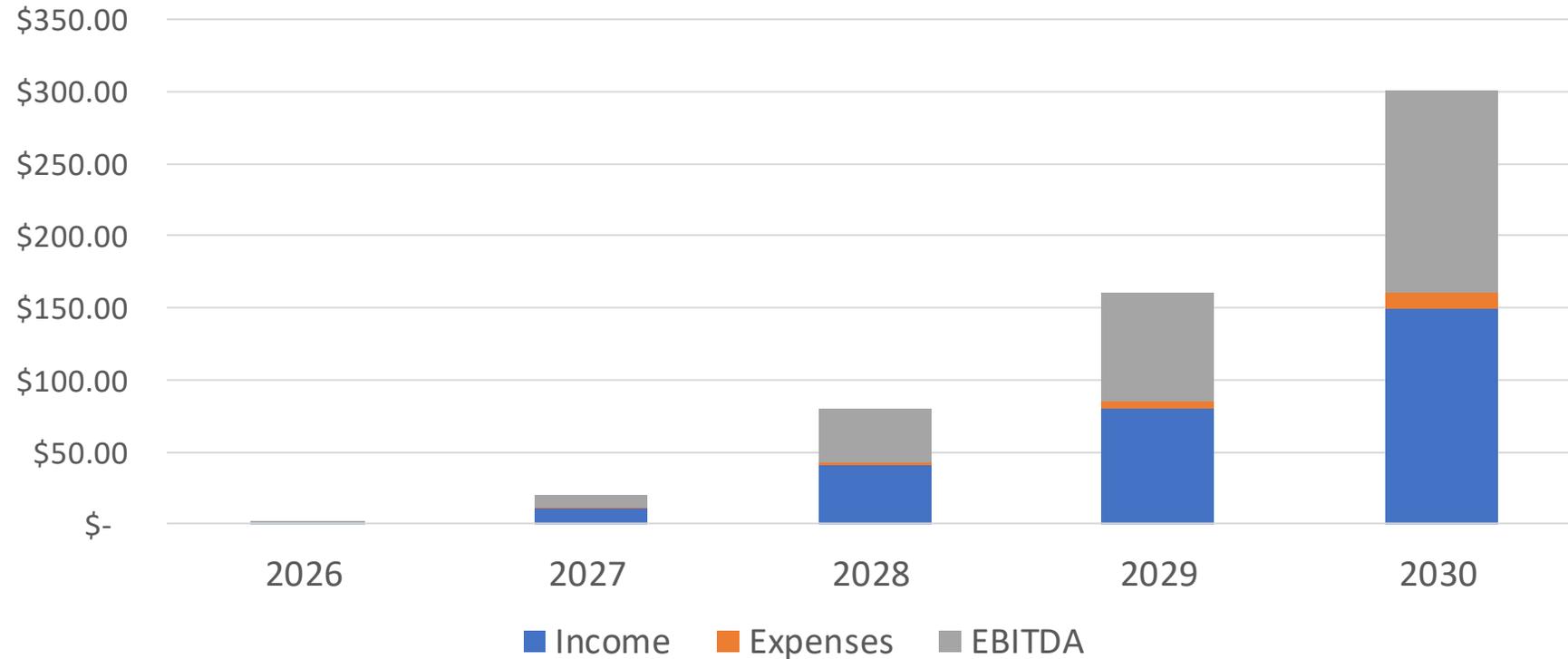
Team

Jim St.Clair
CEO
**25 years of experience in health IT, security, and digital identity**

Ladd Hanson
CTO
20 years of experience in software, cloud, and AI

OUR ASK

Raising a **$250k pre-seed bridge** on a **$3.5M post-money SAFE or Convertible Note (20% discount/7%/24 mos**), as the **first tranche of a planned $1M raise**.

- Use of funds:
  - 60k product/infrastructure
  - 45k GTM/pilots
  - 25k legal/IP (clean assignments + privacy/terms + 1 targeted filing),
  - 20k ops/founder buffer

- Marketing
- Production
- Operations
- Reserve
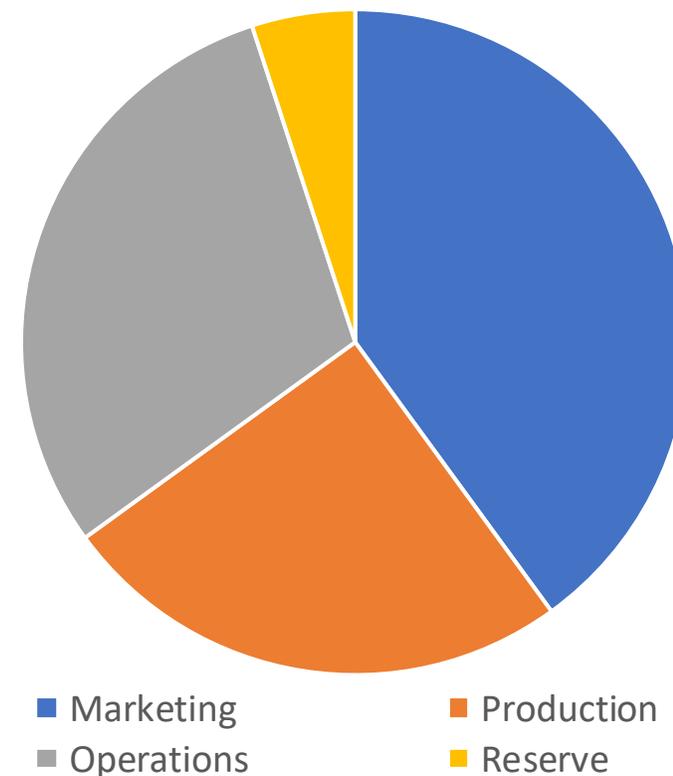
Thank you.

Let's discuss.

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