Pare: a summary for value analysis and new-product review

A camera over the operating room's back table. It logs every supply a case opens, sends unbilled implants to billing review, and shows what was opened and never used. For hospitals and surgery centers. Each case leaves one record of what was opened and used, by surgeon and procedure, with unit cost.

WHAT IT IS	ASKED OF NURSES	REGULATORY STATUS	TO START
A camera over the OR back table	Nothing. Nobody scans or types	Not a medical device	A call, a BAA, one camera for one week

01 What it does	**Watch**	A camera above the back table sees every supply set out for the case.
	Identify	Each package is matched to your catalog by its barcode, label or look. An unsure read goes to a reviewer, never a nurse.
	Open	When a package opens, Pare logs it to the case with the time and the frame.
	Bill	Every implant used is listed on the case, ready for billing review. Your biller posts it, the same way they do today.
	Teardown	At teardown, the camera sees what was opened and never used. Every case's waste, counted with nobody typing.
	Learn	Across cases, Pare learns what each card pulls and never uses, and drafts the new card. Its owner accepts it in one tap.
02 What each team gets	**Revenue**	**Every implant billed.** Used but never charged, found. Frame-level proof for every implant. One record per case.
	Waste	**Less thrown away.** Cards that follow real usage. Fewer items opened and unused. Fewer rush orders.
	Nurses	**Nothing new to do.** No scanning, no typing. Cameras on supplies, not patients. No EMR project.
03 What it asks	**Of your staff**	Nurses do not scan or type anything. The camera does the recognizing, and nothing is added to anyone's day. An unsure read goes to a reviewer, never a nurse.
	Of the facility	A schedule export, a catalog built from your order history, and one camera. There is no EMR project. The record comes out as CSV today; HL7 to your EHR and ERP is next.
	Who approves what	Pare does not change charges or preference cards by itself. It drafts each fix and names who approves it. Billing posts charges, and surgeons sign card changes.

04 The practical questions

Regulatory status	Pare is not a medical device. It does not diagnose, treat or monitor a patient, has no contact with the patient or the sterile field, and informs no clinical decision. It records supplies for billing and inventory.
Training	No training for nurses or surgical techs: nothing changes in the room. About an hour with materials management to review the catalog, and about an hour with IT for network setup. During the first week, staff hand-count a sample of cases alongside the camera.
Mounting and the room	One camera on a ceiling or boom mount over the back table, outside the sterile field. It needs one power outlet and a network connection. The camera does not connect to the EHR or any clinical system.
Cleaning	The camera housing is wiped with the facility's standard hospital-grade disinfectant wipes during room turnover, by environmental services, like any overhead fixture. It is not sterilised and never enters the sterile field.
Images and retention	Package images are kept for 90 days, so a disputed charge can be checked against the frame, then deleted. The case record is kept for the life of the agreement. At the end of an agreement, everything is deleted or returned within 30 days, on request.
Who views images	An unsure read goes to a trained Pare reviewer, never to a nurse. Reviewers see the package image and the catalog match, nothing else. Access is limited to named Pare staff, logged, and covered by the BAA.

05 Security

- A Business Associate Agreement before any data is handled.
- Amazon Web Services, US West (Oregon), on HIPAA-eligible services.
- Encrypted in transit and at rest.
- No field for a patient in the database.
- Accounts by invitation from your own site manager.
- No SOC 2 audit yet, and no compliance seal displayed.

A security overview and answers to a security questionnaire are available on request at abhi@pare.health. Detail: www.pare.health/security, www.pare.health/camera

06 The business case

What can be recovered	Separately billable items: implants carved out in payer contracts, pass-through devices, and chargeable supplies at hospitals. Most supplies are bundled into the procedure payment, so for those Pare lowers cost by fixing the preference card, not by adding revenue.
How it is measured	Pare reports accuracy only from tests at your site. During a start, staff hand-count a sample of cases so you can compare Pare's record with your own count.

An estimate from your own case volume: www.pare.health/impact

07 How a start runs

1. A call	Fifteen minutes with a founder. Nothing is installed and no patient data changes hands.
2. A BAA	A Business Associate Agreement, before any work.
3. One week	One camera for one week. The first 30 cases are counted by hand next to the camera, so you see your own numbers before you decide.
4. Your numbers	You see them before you decide.

08 Who to ask

A founder	cal.com/parehealth/intro (a 15-minute call)
Email	abhi@pare.health
A page for each reader	www.pare.health/for/finance, www.pare.health/for/it, www.pare.health/for/surgeons