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"Health Innovation Tuesdays"

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Interview with Hermine Tranié

President and Co-Founder of ClarityCare AI

Artificial intelligence is often associated with diagnostics, radiology, or drug discovery. Yet it can also transform a far less visible but essential aspect of the healthcare system: access to care. In the United States, prior authorization procedures delay millions of treatments every year. ClarityCare AI's mission is to automate these processes so patients can access care faster. Today we speak with Hermine Tranié, President and Co-Founder of ClarityCare AI.

THE ENTREPRENEURIAL JOURNEY

You have now founded a digital health company in the United States. Yet nothing necessarily destined you for this adventure. What has your journey been?

Nothing destined me for entrepreneurship, it's true, but everything, perhaps, for the problem I ended up choosing. At MIT, and then through a range of experiences, I had the chance to work on almost every aspect of the healthcare industry: drug discovery, hospital scheduling optimization, clinical trials, medical devices. That journey revealed a simple reality: access to care doesn't depend on science alone. Most of the time, it comes down to getting an appointment, having a financial guarantee that the care is covered, or simply being able to pick up your medication at the pharmacy. Prior authorization is precisely the mechanism that provides that financial guarantee to the patient and the physician, and secures the entire process. That's where I decided to act.

How did you come up with the idea?

I didn't have an idea in the usual sense: there was no lightbulb moment. ClarityCare was born from a series of observations that eventually made this work inevitable.

My research at MIT had left me with a frustrating observation: the vast majority of clinical data generated every day is never, or barely, used to help the patient.

Rather than continue my research, I decided to leave campus and confront the field. I joined an incubator, where I met Alex, my co-founder, who came from the insurance world. Together, we went door to door through the medical practices of Lower Manhattan to understand the healthcare system from the inside. Very quickly, the practices' administrative teams were preparing thick files documenting their tasks and their exchanges with insurers, and one topic kept coming up: prior authorization, the approval that links the physician to the insurer before every treatment. In an oncology practice, that means a file for every PET scan, for every round of chemotherapy.

Alex and I then said: let's go see what happens on the other side, at the insurer. That's how ClarityCare was born, out of a quest of questions and incomprehension. A long answer to say that I never have "ideas": I try to solve problems, and to understand why things are the way they are.

Why choose a problem as invisible as prior authorizations, when so many entrepreneurs turn to diagnostics or medical devices?

I've always bet on the unloved: the thankless subjects, the ones nobody wants to look at. That's exactly what drives me. Diagnostics and medical devices naturally attract talent and capital; prior authorizations, meanwhile, waste the time of millions of patients amid near-total indifference. The potential impact is immense, precisely because nobody goes there.

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UNDERSTANDING CLARITYCARE AI

To start simply, if you had one minute to explain ClarityCare AI to a patient, a healthcare professional or a medical or pharmaceutical student, what would you say?

ClarityCare AI deploys artificial intelligence agents that take over the administrative tasks of the care journey: access to care first, support during care, then the administrative and financial follow-up after the procedure.

This type of process exists in France too: the “accord préalable”, used for certain procedures and treatments like sleep apnea, medical transport, medical equipment, laboratory tests. In the United States, the mechanism is extremely widespread because all care is expensive: the practitioner, the patient, and the insurer must agree upfront on the necessity of the care. Every day, millions of prior authorizations are exchanged between these players, and everyone is waiting for an answer. Electra, ClarityCare’s flagship product, handles these authorizations in minutes and responds to the practitioner in near real time.

Concretely, how does your solution fit into the daily life of a physician or a healthcare facility?

For the physician or the facility, only one thing changes: the answer arrives in under five minutes. That may sound small, but the national average is three weeks.

Three weeks is an elderly person waiting for a hip replacement, or a cancer patient waiting for a PET scan to start chemotherapy. Most patients don’t dare start treatment before they have the answer, for fear of a lifetime of debt if the care turns out not to be covered.

How do you go from identifying a need to a tool that answers in five minutes?

By focusing on the most painful problem and solving only that. Then you move forward, problem after problem.

Our first client is the best illustration: our software back then looked nothing like what we do today, but their pain was such that they preferred our beta version to nothing at all. That’s the best signal there is: when someone adopts a still-imperfect product, you know you’re solving a problem that truly matters.

Today, we work with clients of every size, from the American equivalent of the Sécurité sociale, at the federal level, to regional and national insurers. ClarityCare already generates several million dollars in revenue, where there was nothing just months ago. We have also just closed our latest funding round, more on that in a few weeks.

One conviction, finally: innovation is not just software. Behind every answer delivered in five minutes, there are teams of clinicians, engineers, insurance specialists who verify, learn, and improve the system continuously.

What are the main results so far in terms of reduced delays or simplified procedures?

Today, ClarityCare touches more than 2 million lives. And every week, thousands of these patients learn in under five minutes whether their care is covered, where it can otherwise take weeks. That is our most concrete result: time of uncertainty given back to patients and physicians.

Is your client the physician, the hospital, the insurer… or ultimately the patient?

I always look to create win-win-win situations.

My client is the insurer: federal directives require them to decide faster, but given the volume they cannot keep up, they take fines and alienate patients.

The hospital wants to perform a medical procedure, but it also needs to get paid: prior authorization guarantees that and getting it in five minutes helps it organize better.

The patient, finally, wants the best possible care, as fast as possible, without it costing their entire life savings. When these three interests align, everyone wins.

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HEALTH INNOVATION

ClarityCare AI illustrates an innovation that is technological but also organizational. Do you think tomorrow's greatest innovations will concern the organization of care more than the technologies themselves?

The two must work hand in hand. To caricature the two extremes: incredible but inaccessible technologies on one side, mediocre but abundant care on the other. What we want is incredible and abundant care. And you only get there by investing time and money in both at once: the technology, and the organization that makes it accessible.

ORGANIZATION OF CARE

How does this experience could be translated to France?

Let's be honest: our direct market is first and foremost the United States. Healthcare administration alone represents more than $1.2 trillion a year there, and that market grows more than 10% every year. We have work to do.

But France is never far away. First because I am French, and it is a source of pride to show that a company founded by a Frenchwoman works with the American federal government on something as sensitive as health data. Second because ClarityCare grows thanks to French engineers of very high caliber, whom we bring over to San Francisco. Finally, because the method is transposable: I am pragmatic. I like to understand the financial flows, who pays for what, where the opacity sits, where the frictions arise. That is where the opportunities reveal themselves, in any healthcare system. The day the question arises in Europe, we will be ready.

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ENTREPRENEURSHIP AND MANAGEMENT

How do you recruit in a startup that brings together physicians, engineers, and AI specialists?

We hire people who are obsessed with solving the problem and uncompromising on details: credentials come second. Getting physicians, engineers, and AI specialists to work together requires a common language: for us, it is the patient journey. Engineers sit in on exchanges with clinicians, and clinicians take part in product reviews. Mutual respect for each other's expertise is not a cultural bonus; it is a condition of survival.

What company culture are you trying to build at ClarityCare AI?

A culture of excellence, innovation, and creativity. Excellence, because we handle health data and cannot afford approximation. Innovation and creativity, because the problem we are attacking has never been solved: there is no manual, it must be written.

That kind of excellence is not decreed: it compounds. Every detail counts; being 1% better, everywhere, every day, is what creates the exceptional through compounding. I would add two convictions that guide me: actions matter infinitely more than words, and how you do one thing is how you do everything.

How do you decide between an ambitious innovation and a simpler solution that is immediately useful to patients?

I generally believe in shipping a first version, however minimal, as fast as possible, and improving along the way. A simple product that saves a patient three weeks today is worth more than a perfect product in two years. One nuance: that reasoning applies to software, not to drugs or medical devices, where the requirements are of an entirely different order.

VISION

Is your ambition to become a major player in prior authorizations, or more broadly a platform for optimizing the care journey?

Our ambition is to turn healthcare online: to be the architecture on which everything in the care journey, outside the direct interaction between patient and clinician, is handled by ClarityCare. A comparison: in the United States, when you buy a can of Coke, you pay 1 dollar, your card shows 1 dollar the same day, and the end-of-month statement says 1 dollar. In healthcare, from personal experience, you go in for an MRI, the front desk asks you for a 100-dollar copay, an amount that is nonetheless fixed in your insurance contract, and at the end of the month you receive an 850-dollar bill. Then, for weeks, the hospital calls you several times a day to claim money, again and again. As long as paying for care is not as simple and transparent as buying a can of Coke, our work will not be done.

CONCLUSION

Which achievement would make you proudest: your company's growth, its impact on patients, or the evolution of the healthcare system?

The impact on patients and four years ago, before coming to the United States, I would have given exactly the same answer. That has not changed. What has changed is the how.

Back then, I would have talked about the greater good, a somewhat abstract ideal. In the United States, I learned, and I see it every day, that hypergrowth is not the enemy of that ideal: it is its engine. Recurring revenue growth, ARR, sets off a virtuous circle: it attracts exceptional talent, which pushes us to serve our clients ever better, which brings in new ones. And thanks to that, we now touch more than 2 million lives, thousands of whom, every week, get their answer in under five minutes. That impact would probably not be possible without that intellectual and financial drive.

But in the end, the measure that matters remains the same: the number of patients who access their care faster.

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Finally, great innovations are often born from encounters, but also from reading. Is there a book, an author, or an idea that has deeply influenced the way you think about innovation and entrepreneurship? Why?

Outliers, by Malcolm Gladwell. Because it dismantles the myth of the solitary genius: success comes from the meeting of relentless work and circumstances you must know how to seize. It taught me to look for opportunities where nobody is looking and to work hard enough to be ready when they come.

Thank you, Hermine, for this fascinating conversation. Your experience in the United States shows that innovation in healthcare is not only about developing new technologies, but also about rethinking organizations and care pathways that we have sometimes come to regard as immutable. Many of the ideas and approaches you are developing could be applied in France: starting from real-world needs, identifying the points of friction that truly matter, and using AI to make healthcare simpler, faster and, ultimately, more human. A powerful source of inspiration as we think about how to transform our own healthcare system.

See you Tuesday, August 18 for the next note

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