



Radically Transforming Mental Health, Starting With Our Veterans

We are **not** looking for a quick grant. We are building something that meets veterans **where they are**, not where they're expected to be — a proven, privacy-first, AI-driven screener that closes the **6.84 million-veteran gap** and becomes a **budget line in the DMVA and beyond**. This playbook shows how we get it there.

01

PHASE ONE

Clinical & Scientific Validation

Put ROOTS in front of **senior clinical and research leadership** — PhDs, PsyDs, and MDs — and invite them to poke holes, stress-test assumptions, and rally around the methodology.

WHAT HAPPENS

- › Walk-throughs of the doctoral research & results
- › Challenge core assumptions and methodology
- › Capture critical gaps; amend the science
- › Secure endorsements as co-architects

TARGET REVIEWERS

JED Foundation · **AFSP** · **NAMI** · senior clinicians and academic advisors (PhD / PsyD / MD)

02

PHASE TWO

Embed & Co-Design With Operators

Our firm **embeds with customers**. We build the UI, workflow, and outputs to whatever shape the operator needs for **operational success**.

WHAT HAPPENS

- › Sit side-by-side with frontline intake staff
- › Map processes; identify friction points
- › Tailor UI, reports & counselor views to workflow
- › Pilot at a single site; iterate & harden

PRIORITY PARTNERS

DMVA / Dusty, Ft. Indiantown Gap · VA Service Officers · 988 centers · county veteran offices · shelters & food banks

03

PHASE THREE

PA Legislative Pathway

Move from pilot to a **recurring state budget line**. ROOTS becomes a funded item within the DMVA or adjacent bureau — **ratified by the PA legislature**.

WHAT HAPPENS

- › Present methodology & pilot outcomes to staff
- › Draft language tying funding to universal screening
- › Coordinate cross-aisle support via Vets Affairs Cmte.
- › Track appropriations calendar; secure the line

ENGAGED & PLANNED

Michael J. Hillman (Exec. Dir., Vets Affairs Cmte., Rep. Solomon, Chair) · **Connor Corpora** (PA Gov's Office) · **Michael Pipe** · **Meghna Patel** (Dep. Sec., HHS Policy & Planning — Gov's Policy Office) · additional PA House members & legislative staff

04

PHASE FOUR

National Scale & Generalization

PA becomes the **proof case**. The architecture scales to **every state, federal agencies, schools & general public** — ratified at the Congressional level.

WHAT HAPPENS

- › Package the PA playbook for sister states
- › DOD point-of-discharge integration for 100% catch
- › Adapt RAG corpus for schools & civilians
- › Federal line item; partner amplification

NATIONAL AMPLIFIERS

DOD (point of discharge) · VA Suicide Prevention · all 50 State Veteran Affairs Depts · **JED** · **AFSP** · **NAMI** · school districts · community NGOs

“We are looking to save lives using a powerful, proven program that makes sense. We are not chasing a grant — we are building something to **radically transform the landscape of mental health in our nation** by meeting veterans where they are, rather than where they are expected to be.

— **NICHOLAS C. BIROSIK, D.ENG.** · FOUNDER, NMHN

CURRENT STATUS · WHO WE'RE MEETING

<p>ENGAGED Hillman (Vets Affairs Cmte), Corpora (PA Gov's Office), JED / AFSP / NAMI POCs</p> <p>ACTIVELY SEEKING Dusty (DMVA / Ft. Indiantown Gap) & additional PA House members</p>	<p>SCHEDULED Michael Pipe, Meghna Patel (Dep. Sec., HHS Policy & Planning)</p> <p>THE ASK Introductions to clinicians & decision-makers who can green-light a pilot</p>
---	---



A **veteran walks in** to a county office, a food bank, a shelter, a 988 call center, or a DMVA desk. Instead of a generic SSA, VA, or benefits pamphlet, they receive a **tailored set of local recommendations** — built from their interests, military service, social and economic reality, and (if they choose) a full depression & anxiety screen — all in **under two minutes**.

IN THE FIELD

The Veteran's Experience

A credentialed staff member — counselor, social worker, volunteer, 988 operator — opens ROOTS on any tablet or phone. The veteran is asked up to **three optional questions**:

THE THREE OPTIONAL PROMPTS

1. A short depression & anxiety screener (declinable)
2. Current or former interests & hobbies
3. Context of their military service

No name. No SSN. No DOB. No PII. Just a zip code to find local help. The system produces a synthesized report of nearby nonprofits that match the individual's needs *and* interests — with **plain-language explanations** for every recommendation, so counselors can verify the logic on the spot.

<2m

PER RESPONDENT

0

PII COLLECTED

100%

OPTIONAL

INSIDE THE SYSTEM

The ROOTS Critical Pathway

- 1 Universal Screen at Point of Contact**
Deployable at DOD discharge, VA, NGO, shelter, or 988 line — closing the gap on the **~38% of veterans never reached by VA Risk ID** (~6.84M people).
- 2 AI-Powered Root-Cause Detection**
XGBoost (depression, **AUC-ROC .942**) and LightGBM (anxiety, **.948**) flag conditions; SHAP values pinpoint the specific drivers behind *this* individual's distress.
- 3 Personalized, Not Population-Level**
Not "veterans often struggle with sleep" — but "**this veteran is anxious because of financial pressure on their family.**"
- 4 Life Context & Interest Matching**
Pre-service hobbies, branch, and service context inform **which resources will actually resonate** with this specific person.
- 5 Local NGO Referral Engine (RAG + LLM)**
Retrieval Augmented Generation searches **any US zip code**, filters IRS-validated nonprofits by NTEE code and size, and matches them to the individual's profile.
- 6 LLM-as-a-Judge Self-Evaluation**
Every output is scored by a second AI against standards co-developed with clinicians. **The system judges itself** and surfaces low-scoring runs for continuous improvement.

WHY IT'S DIFFERENT

Core Differentiators

Privacy First, By Design

Anonymous, no PII — removes stigma, security-clearance fear, and institutional distrust that block veterans from seeking help.

Fully Explainable AI

Every AI step shows its reasoning. Counselors and clinicians verify each recommendation before handing it to the veteran.

Rallies Around the Veteran

Brings help to *where they are* — food banks, shelters, county offices, 988 lines — not where we assume they'll go.

Reduces Counselor Burden

Cross-referenced, high-quality referrals in seconds. Lets MH professionals focus on **care**, not on hunting for resources.

UI Built to Stakeholder Need

We embed with each deployment and build the interface around their operational reality — not the other way around.

SAME ENGINE · NEW AUDIENCES

**Built for Veterans.
Generalizable to Anyone.**

VETERANS

Point-of-discharge & community

SCHOOLS

K–12 & higher-ed screening

PENNSYLVANIANS

County & state wellness

ALL 50 STATES

State DMVA equivalents

FEDERAL

DOD · VA · congressional line

Disclaimer: ROOTS is a screening and resource-referral tool designed to support — not replace — the professional judgment of licensed mental health professionals, counselors, and medical providers. ROOTS does not diagnose, treat, or provide clinical care. In an emergency, dial **911** or the **988 Suicide & Crisis Lifeline** (press 1 for Veterans Crisis Line). Based on *Finding the Forgotten*, doctoral praxis defended at The George Washington University. **ROOTS** · Patent Pending · IP held by Nicholas C. Birosik, D.Eng. · © 2025 NMHN, 501(c)(3) under NicNac Charities Inc.