

## **OmegaX Protocol**

#### (!) TL;DR

- Real-world health improvements become on-chain events that can move capital.
- OmegaX Health is the first oracle; the protocol is open for future oracles via the SDK (in progress).
- Nexus lets institutions configure pools; the protocol settles payouts transparently.

OmegaX is a protocol for turning **real-world health improvements** into onchain economic events.

We start from a simple premise:

Most of healthcare is *payment plumbing wrapped in paperwork*. Outcomes are an afterthought. OmegaX inverts that. The protocol encodes health goals, verifies real behavior, and routes money based on **what actually happened in the real world**.

#### At a high level:

- OmegaX Health is the *health oracle app* that verifies real-world behavior and health improvements.
- **Nexus** (nexus.omegax.health) is the platform where employers, providers, and insurers create and fund on-chain reward and coverage pools.
- The OmegaX Protocol connects the two: it settles incentives, rewards, and eventually coverage logic on-chain, using transparent rules instead of opaque admin processes.

The endgame is not "points for steps."

The endgame is **health capital markets**: programmable pools of capital that price health risk, fund prevention, and pay out based on verified, Al-scored health events.

OmegaX is the coordination layer between:

- People changing their behavior
- Institutions paying for risk reduction
- On-chain capital seeking yield tied to real-world health

OmegaX Health is the **first-party oracle**, and the protocol is designed as **open infrastructure**: through the forthcoming SDK, additional oracles and platforms will be able to emit compatible health events into the same on-chain rails.

### Where to go next

- **Architecture** → protocol/architecture
- How it works (end-to-end) → protocol/how-it-works
- **Health Oracle App** → oracle/health-oracle
- **Tokenomics** → protocol/tokenomics



### **Architecture**

### **○** SNAPSHOT

Health signals → Oracle attestations → Nexus-configured pools → On-chain settlement (Solana).

The OmegaX stack has three main layers:

#### 1. Health Oracle Layer

The OmegaX Health app, running on iOS, Android, macOS, and web, acts as a **health oracle**:

- Ingests wearable data, app interactions, self-reports, GPS, and behavioral signals.
- Uses multi-agent AI systems to build and update personalized health plans.
- Computes health events (e.g. "10% weight loss sustained for 90 days",
   "blood pressure normalized", "adherence streak maintained").
- Produces signed, tamper-resistant health attestations that can be used on-chain.
- OmegaX Health is the first-party oracle; the protocol and SDK are designed so other oracles can emit compatible events in the future (SDK in progress).

#### 2. Nexus Platform (nexus.omegax.health)

Nexus is the **on-chain console for institutions**:

- Employers, providers, and insurers create reward pools and later coverage pools.
- They define eligibility rules, payout conditions, and budget limits.
- They connect their workforces / patient cohorts via invite links and coupons.
- They get aggregated analytics and a clear view of who is getting healthier and what that is costing or saving.



3. **On-Chain OmegaX Protocol** The protocol lives on-chain (starting on **Solana**) and is responsible for:

Capability	What happens	Example
Reward Pools	Hold capital and rules for payouts	"Pay 200 USDC over 6 months if weight loss ≥10% and sustained 90 days."
Health Attestation Integration	Verify oracle attestations, ensure eligibility, dedupe events	Reject duplicate reward attempts for the same event window
Settlement	Update pool state and authorize payouts on-chain	Transfer USDC to member wallet when conditions met

This architecture splits responsibilities cleanly:

- **App:** sense, interpret, and compress the chaos of real-world behavior into machine-verifiable signals.
- Nexus: configure incentives, manage capital, and visualize cohorts.
- Protocol: hold capital, enforce rules, and settle outcomes.

The result is a system where "I went for a walk" is not just a line in a diary, but a verifiable event that can move money on-chain.

### **How It Works**

#### (!) FLOW AT A GLANCE

 Pool configured in Nexus → 2) Members onboard to OmegaX Health (oracle) → 3) Oracle emits attestations → 4) Protocol verifies and settles on Solana → 5) Rewards paid.

This section walks through a full OmegaX flow, end to end:

- 1. An employer creates a reward pool in **Nexus**.
- 2. Employees onboard into the OmegaX Health oracle app.
- 3. The app tracks real-world behavior and computes health events.
- 4. The protocol receives attestations and settles payouts on-chain.
- 5. \$OMEGAX captures protocol-level fee flows on Solana.

OmegaX Health is the **first oracle** in this loop. The protocol is built to accept compatible attestations from future oracles via the SDK (in development).

### 1. Employer Sets Up a Pool in Nexus

- 1. The employer logs into **nexus.omegax.health**.
- 2. They create a new **reward pool**, configuring:
  - Target population (for example "full-time employees in Region A").
  - Health goals (for example "10% weight loss sustained 90 days", "normal blood pressure 6 months").
  - Payout rules (for example "up to 400 USDC per person over 1 year").
  - Budget caps and time windows.
- 3. Nexus deploys or connects to a **corresponding on-chain pool** on Solana and funds it with:
  - USDC or other accepted assets, and
  - Optionally \$OMEGAX for boosted incentives.



From the employer perspective, it feels like configuring a benefits program. Under the hood, they are creating a **parametric, on-chain reward structure**.

# 2. Employees Onboard Into OmegaX Health

- 1. The employer shares **invite links or coupons** that are wired to the specific pool.
- 2. Employees:
  - Download the OmegaX Health app.
  - Create an account and connect health data sources (wearables, phone sensors, etc.).
  - Connect or create a wallet for receiving rewards.
- 3. The app personalizes:
  - Baseline health assessment and risk scores.
  - A tailored multi-agent daily and weekly plan across movement, nutrition, sleep, and mental health.

#### At this point:

- The user has a coach that calls them, plans for them, and adapts in real time.
- The protocol has a link between a wallet, a user, and a funded reward pool.

# 3. Health Oracle Observes and Computes Events

#### Over time:

- 1. OmegaX Health continuously ingests:
  - Activity, sleep, and HR patterns.
  - Weight and blood pressure logs.
  - In-app adherence signals and check-ins.



- 2. The multi-agent system:
  - Tracks progress versus personalized plans.
  - Updates **risk scores** based on actual behavior.
  - Detects when specific conditions are met, such as:
    - "10% weight loss sustained at least 90 days"
    - "Blood pressure in controlled range for 6 months"
    - "Adherence to plan above 80% for 12 weeks"
- 3. When a condition tied to an active pool is met, the oracle generates a **health attestation**:
  - Type of event
  - Magnitude and duration
  - Time bounds
  - Pseudonymous user identifier
  - Pool or program identifier
  - Cryptographic signature

The oracle does not leak raw data. It emits **scored, structured, signed events**.

### 4. Relayer Submits Attestations On-Chain

- 1. A relayer service monitors new health attestations produced by the oracle layer.
- 2. It bundles or streams these attestations to the **OmegaX Protocol** on Solana.
- 3. The protocol contract:
  - Verifies the signature and integrity of the attestation.
  - Checks that:
    - The user is enrolled in the relevant pool.
    - The event matches the configured criteria.
    - The event has not already been rewarded.
    - The pool still has budget and is within its active period.



If all checks pass, the protocol authorizes a payout.

### 5. Payout Settlement And Rewards

When a payout is triggered:

- 1. The protocol updates the **state of the reward pool**:
  - · Decrements available budget.
  - Marks the event as settled for that user.
  - Records the payout for analytics.
- 2. Funds are transferred from the pool to the **user wallet**:
  - Typically in USDC or the pool's reward asset.
  - Optionally supplemented by \$OMEGAX if pool-level boosts are enabled.

From the user perspective:

- They did the hard part: changing their behavior and improving their health.
- The rest is automatic: **the money arrives in their wallet when the system confirms the outcome**.

From the employer or sponsor perspective:

- They see concrete metrics:
  - · How many people hit which milestones.
  - Cost per improvement.
  - Aggregate risk movement in the population.

### 6. Protocol Fees And \$OMEGAX

Every on-chain interaction that uses OmegaX infrastructure contributes to **protocol fees**.

Examples of fee events:

- Creating and funding new pools.
- Settling payouts.

• Using advanced risk or analytics modules.

#### On Solana, fees are:

- 1. Collected in the asset used (for example USDC).
- 2. Periodically routed through \$OMEGAX:
  - Swapped into \$OMEGAX via Solana DEXs.
  - Distributed between:
    - Protocol treasury
    - Ecosystem incentives
    - Optional burn or long-term locking

#### This ties real economic throughput:

- Number of active pools
- Volume of rewards
- Breadth of integrations

#### to a single asset:

\$0MEGAX at FTBq3w9gCv27E451DV6w8AbUjBQbyVxxj1ZaYEYepump

### 7. Scaling To Health Capital Markets

Once this basic loop runs reliably at scale:

- 1. Employers and insurers fund bigger and more sophisticated pools.
- 2. Providers integrate cohorts and share upside on risk reduction.
- 3. External capital can:
  - Co-fund pools.
  - Take structured exposure to prevention performance.
  - Participate in coverage-like instruments built on top of verified health events.

At that point, OmegaX stops being "a rewards app" and becomes:

• An **infrastructure layer** where health risk is:



- Observed and scored,
- Priced and funded,
- Settled and analyzed, in full view of the chain.

#### The omega state:

Human health states, not just speculation, drive flows of capital.

The protocol, the oracle, and \$OMEGAX are the rails that make that possible.



## **Actors & Incentives**

#### (!) ALIGNMENT AT A GLANCE

Actor	What they want	Why OmegaX helps
Individuals	Health gains + payouts	Personalized plans + verified rewards
Employers	Lower risk/cost, better performance	Outcome-based pools and clear ROI
Providers	Performance-based revenue	Incentive layer above care delivery
Insurers/Capital	Price and fund risk transparently	Verifiable health events + on-chain rails

OmegaX only works if all sides of the table have a reason to show up. The protocol is designed around four primary actors.

### 1. Individuals (Members)

These are employees, patients, or consumers using the OmegaX Health app.

#### They:

- · Connect wearables and data sources.
- Receive personalized, multi-agent health plans (exercise, nutrition, sleep, mental health, etc.).
- Get paid for measurable improvements, not for checking boxes:
  - Losing and maintaining weight
  - Reducing blood pressure or cardiovascular risk
  - Consistently adhering to treatment or prevention plans



For individuals, OmegaX is:

- A coach that calls you, plans for you, and adapts to your life.
- A wallet that fills when your health risk goes down.

### 2. Employers

Employers fund reward pools because health risk is a line item on their P&L:

- Lower cardiometabolic risk and better mental health:
  - Reduce absenteeism
  - Improve performance and retention
  - Lower long-term insurance costs (directly or indirectly)

In Nexus, employers can:

- Spin up on-chain reward pools for specific cohorts or goals:
  - "New hires in Region X"
  - "High-risk employees based on baseline assessments"
- Define payout logic:
  - Monthly bonuses
  - Milestone-based payouts
  - Tiered rewards by risk reduction depth
- Monitor aggregate improvements and capital efficiency:
  - Cost per risk point reduced
  - Budget burn vs realized outcomes

For employers, OmegaX is:

- A control panel for buying health risk reduction, not slogans about wellness.
- A way to turn HR budgets into on-chain, outcome-tied commitments.

### 3. Providers

Providers (clinics, health systems, digital care companies) can integrate with OmegaX by:

- Connecting their patient cohorts to OmegaX Health.
- Using Nexus dashboards to see engagement, risk, and improvements.
- Participating in reward or coverage schemes:
  - Shared upside for risk reduction
  - Bundled outcome deals with employers or insurers

For providers, OmegaX is:

- A data and incentive layer that sits above their care delivery.
- A way to unlock performance-based revenue without building their own protocol.

### 4. Insurers & Risk Capital

Insurers and capital allocators care about **risk, not vibes**. OmegaX gives them:

- A stream of **standardized**, **verifiable health events** from the oracle layer.
- The ability to:
  - Fund **reward pools** as preventive risk spend.
  - Later, participate in coverage pools tied to specific health states or events.
  - Create tokenized exposures to health risk / prevention performance.

In the long run, this is where **health capital markets** emerge:

- Insurance capital, reinsurance capital, and DeFi capital can all price and trade around:
  - Risk scores
  - Adherence profiles
  - Outcome probabilities

For insurers and capital providers, OmegaX is:

• A pipeline from raw behavior → Al understanding → parametric risk → onchain positions.



## **Health Capital Markets**

### **Q** KEY SHIFT

From closed, paper-heavy claims to **programmable pools** backed by verifiable health events.

Today, healthcare finance looks like this:

- Premiums go in.
- Claims come out.
- Most of the value is trapped in:
  - Long PDFs
  - Phone calls
  - Manual approvals
  - · Opaque actuarial models no one outside the building can inspect.

Outcomes live in a different universe from capital.

OmegaX aims to **merge those universes** and create **health capital markets**: markets where capital can directly price, fund, and trade around **verified changes in health risk**.

# From Premiums to Programmable Pools

In the OmegaX worldview:

- Employer and insurer budgets become **on-chain pools**:
  - Reward pools for prevention and behavior change.
  - Coverage pools for well-defined health events and trajectories.
- These pools are parameterized:
  - Who is eligible.
  - What health events count.



- How much they pay and when.
- What happens if targets are missed.

Because the conditions are expressed as protocol logic, **settlement becomes rule-based**, not opinion-based.

### The Role of Verifiable Health

This only works if the source of truth is strong.

That is the job of the **health oracle app**:

- 1. Observe behavior and outcomes.
- 2. Compress them into **standardized health events**.
- 3. Produce signed attestations.
- 4. Allow the protocol to connect capital to events.

When the oracle can reliably state:

"This cohort reduced their cardiometabolic risk by 20% over 12 months."

That statement becomes an input to:

- Pricing (how much capital is needed).
- Payouts (who gets what, when).
- Instruments (what can be created on top).

### **Towards Tradeable Health Risk**

Over time, the protocol enables capital market primitives such as:

- Tranches of prevention performance:
  - Pools where senior capital gets stable yield if minimum improvement targets are hit.
  - Junior capital absorbs variance and shares upside on high performance.
- Tokenized exposure to specific cohorts:



 "Desk workers in Region X with baseline high BMI and hypertension risk."

#### • Reinsurance-like structures:

Pools that backstop extreme events or systemic underperformance.

#### The key shift:

- Today: health risk is buried inside insurance books and HR spreadsheets.
- Tomorrow: health risk and health improvement can be modeled, funded,
   and traded on open infrastructure.

### **Why This Matters**

#### If we succeed:

- Individuals are **paid for getting healthier**, not punished for getting sick.
- Employers and insurers can buy prevention instead of overpaying for avoidable disease.
- Capital can earn yield from real-world risk reduction, not just speculation detached from reality.

Health capital markets are not about gamifying steps.

They are about turning:

"Prove to me that my population is healthier, and I will move real money."

into a programmable, auditable, and permissionless reality.

## **\$OMEGAX on Solana**

#### AT A GLANCE

• Chain: Solana

• Ticker: OMEGAX

Contract: FTBq3w9gCv27E451DV6w8AbUjBQbyVxxj1ZaYEYepump

• Status: **Utility token** for fees, incentives, and future governance.

\$OMEGAX is the native utility token of the OmegaX Protocol on **Solana**.

It started as a pump.fun launch and evolved into the coordination asset for **onchain health incentives, protocol fees, and governance over time**.

• Chain: Solana

Ticker: OMEGAX

Contract Address (CA): FTBq3w9gCv27E451DV6w8AbUjBQbyVxxj1ZaYEYepump

The purpose of \$OMEGAX is not to be a random meme. It is the asset that:

- Sits at the center of **protocol fee flows** on Solana.
- Aligns users, employers, providers, and external capital with the success of the health economy.
- Becomes the primary **liquidity and governance surface** for the protocol.

### 1. Core Utilities

#### 1.1 Protocol Fee Asset

On Solana, OmegaX aims to have **protocol fees settled in or routed through \$OMEGAX**:

 Reward and coverage pools are typically denominated in stable assets (for example USDC).



- A configurable portion of protocol-level fees is:
  - Collected in USDC or other assets.
  - Swapped on Solana DEX infrastructure into \$OMEGAX under the hood.
  - Routed to the protocol-controlled destinations (see below).

This creates a structural link between:

- Growth of real health-related flows through OmegaX, and
- Demand and utilization of **\$OMEGAX**.

### 1.2 Pool Incentive Layer

\$OMEGAX can be used by employers, insurers, and other sponsors to:

- Boost the attractiveness of their **reward pools**.
- Qualify for reduced protocol fees or better discovery in the Nexus interface.
- Signal long-term alignment with the OmegaX ecosystem.

Pools can optionally:

- Pay a portion of incentives in \$OMEGAX.
- Receive additional matching rewards from protocol-level incentive programs funded in \$OMEGAX.

#### 1.3 Future Governance Surface

As the protocol matures, \$OMEGAX is intended to become the **governance** surface for:

- Fee parameters and routing percentages.
- Supported health event types for on-chain settlement.
- Risk and eligibility frameworks for new pool templates.
- Allocation of protocol treasuries and incentive programs.

Governance design is expected to evolve, and the exact models and thresholds will be documented in separate proposals. The principle is simple:

Those who hold and commit \$OMEGAX should have a voice in how the health capital markets evolve.

### 2. Fee Routing

OmegaX fee routing on Solana follows a simple pattern. A portion of all protocol fees is:

- 1. **Collected** in the asset used for the pool (mostly USDC at first).
- 2. **Swapped** to \$OMEGAX through on-chain liquidity (for example Solana DEXs).
- 3. **Distributed** across three main sinks (percentages configurable by governance):
  - Protocol Treasury
    - Used for:
      - Development
      - Security reviews
      - Long-term sustainability
  - Ecosystem Incentives
    - Used for:
      - Reward boosts for early adopters
      - Strategic integrations and partnerships
      - Liquidity incentives if needed
  - Deflationary Pressure (optional)
    - Part of the acquired \$OMEGAX can be:
      - Burned, or
      - Locked long-term in protocol-controlled positions

Exact splits, schedules, and mechanisms are intentionally kept configurable to avoid locking the protocol into rigid parameters early in its lifecycle.

### 3. Supply and Distribution

\$OMEGAX was created on **pump.fun** on Solana. The token has:

- A **fixed total supply** as defined on-chain.
- A live market on Solana where price and distribution are determined by participants.

The protocol treats \$OMEGAX as an external market asset with internal utility:

- No off-chain promises of fixed yields.
- No hidden emission schedule.
- No internal minting beyond what exists on-chain.

Long term, the protocol aims to accumulate \$OMEGAX in:

- Protocol treasuries
- Time-locked contracts
- Governance-related staking positions

This gives the protocol a stake in its own asset without resorting to artificial inflation.

# 4. Alignment With Health Capital Markets

\$OMEGAX is designed to mirror the **trajectory of the health economy** OmegaX is building:

- As more reward pools and later coverage pools are created, protocol volumes grow.
- As more verified health events are settled on-chain, fee flows increase.
- As more institutions commit long term, demand for protocol alignment grows.

The goal is simple:

If OmegaX becomes the infrastructure where health risk is priced, funded, and settled, \$OMEGAX should be the main asset tied to that reality.

The token should not live from narrative alone. It should live from **capital flowing through real, verified human health improvements**.



## **Health Oracle App**

#### (!) STATUS

OmegaX Health is the **first oracle**; future compatible oracles will be enabled via the SDK (in development).

The OmegaX Health app is not just a "front-end." It is the **health oracle** for the protocol.

Download the OmegaX Health app: get.omegax.health.

### **Core Responsibilities**

#### 1. Data Ingestion

The app continuously ingests:

- Wearable and phone sensor data (steps, HR, sleep, GPS, activity).
- Biometrics and lab results when available (weight, blood pressure, lab values).
- In-app behaviors (completed tasks, check-ins, adherence to plans).
- Structured self-reports and validated questionnaires.

#### 2. Multi-Agent Health Brain

Under the hood, OmegaX Health runs a multi-agent Al system:

- One set of agents focuses on planning:
  - Building daily and weekly plans across movement, nutrition, recovery, and mindset.
- Another set focuses on observation:
  - Tracking what actually happened vs plan.
- A third focuses on *interpretation*:
  - Translating messy data into coherent risk changes and events.

The user experience:

The app calls you, nudges you, and adapts your plan, instead of waiting for you to type into a chatbot.

#### 3. Health Events & Attestations

The main output of the oracle layer is not text, but events such as:

- WEIGHT\_LOSS\_10PCT\_SUSTAINED\_90D
- BP\_CONTROLLED\_6M
- ADHERENCE\_85PCT\_12W
- CV\_RISK\_REDUCTION\_15PCT

For each event, the system produces a **health attestation** that includes:

- The user identifier (pseudonymous where applicable).
- The event type and parameters (magnitude, duration, thresholds).
- Timestamps and necessary context.
- A cryptographic signature proving it came from the OmegaX oracle.

These attestations are **relayed to the OmegaX Protocol** for on-chain evaluation. The OmegaX Health app is the **first oracle** to emit these events; the protocol and upcoming SDK are intended to let **other qualified oracles** produce compatible attestations over time.

#### 4. Privacy & Separation of Concerns

The oracle layer is designed with **strict separation** between:

- Raw personal data (stored and processed in a privacy-preserving way).
- Abstracted, protocol-facing events that do not need to expose intimate details.

Employers, providers, and capital never need to see "every step and every heartbeat."

They only interact with **scored, attested outcomes** that are sufficient for payouts and risk modeling.



### Why an Oracle App, Not Just an API?

Health is not a neat sensor feed. It is:

- Messy
- Contextual
- Behavioral

A pure "data feed" is not enough. The app needs to **own the relationship** with the individual:

- It orchestrates plans, conversations, and nudges.
- It interprets context (travel, illness, stress, shift work).
- It negotiates between what is ideal and what is realistic.

The protocol depends on this:

If the oracle is naive, the markets built on top of it will be naive.

If the oracle is intelligent and adaptive, the markets can become **deep, liquid,** and actually aligned with human health.

## **Coming Soon**

SDK endpoints and packages are in development. Use this page as a preview of the planned surfaces; production access is not live yet.

### **Quick facts**

- First language: TypeScript/Node
- Surfaces: HTTPS APIs, health event schemas, on-chain Solana interfaces
- Goal: let external oracles, apps, and capital plug into OmegaX

### **OmegaX SDK**

The OmegaX Protocol is designed as **open infrastructure**: anyone should be able to plug into the health oracle layer and the on-chain health capital markets. The SDK exists to make that practical.

It gives external builders a way to:

- Create and manage **reward pools** and future coverage structures.
- Connect their own apps, devices, or platforms as health data sources or oracles.
- Read pool state, payouts, and health events in a normalized way.
- Integrate with the protocol as:
  - Employers / HR platforms
  - Digital health apps and device makers
  - Insurers and TPAs
  - DeFi / capital providers

The SDK is **not** a walled garden. It wraps:

- Standard HTTPS APIs
- Standardized health event schemas
- On-chain contract interfaces on Solana

into a developer-friendly surface.

Support will roll out gradually, starting with:

TypeScript/Node

### What You Can Build

With the OmegaX SDK, third parties will be able to:

#### • Sponsor & manage pools

- Create reward pools for their users, employees, or patients.
- Define health event conditions and payout logic.
- Fund pools and track utilization over time.

#### Act as a health oracle

- Emit health attestations for your own users, if you run your own health logic.
- Use OmegaX's scoring endpoints to convert raw data into standardized events.

#### · Build capital & analytics products

- Read pool states, event aggregates, and payout flows.
- Build dashboards, structured products, or risk views on top of OmegaX data.

OmegaX is opinionated about **what** should exist (verifiable health events driving capital), but flexible in **who** plugs in and **how**.

### **SDK Surfaces**

The SDK is organized into several modules:

1. **Admin / Sponsor Module** (employers, providers, insurers, HR / benefits platforms)



- Create & configure reward pools.
- · Manage cohorts, enrollment, and eligibility.
- Read pool performance and health outcome aggregates.
- 2. **Oracle Module** (digital health apps, device makers, platforms acting as oracles)
  - Register your platform as a **trusted data source**.
  - Submit health attestations for your users.
  - Optionally use OmegaX scoring APIs for risk & outcome computation.
- 3. **Analytics & Markets Module** (capital providers and analytics platforms)
  - Read pool state and payout history.
  - Query event aggregates and health improvement statistics.
  - Plug OmegaX into internal risk and pricing models.

#### 4. Core Models

- Pool
- Member
- HealthEvent
- Attestation
- Payout
- FeeEvent

These models mirror the protocol's internal objects so you can speak the same language as the chain and the oracle.

### **Integration Modes**

Choose one or more modes:

- Off-Chain First (SDK + API)
  - Use SDK methods that call OmegaX HTTPS APIs.



• Ideal for HR platforms, SaaS providers, or digital health apps.

#### • Hybrid (SDK + On-Chain)

- Use the SDK for pool and event management.
- Interact directly with Solana contracts when you need more control.

#### On-Chain First

- For teams already on Solana:
  - Interact with OmegaX contracts directly.
  - Use the SDK for event schema helpers and attestation tooling.

### **Coming Soon**

The protocol and SDK are being developed in parallel with:

- Documentation for Solana contracts and ABI-style interfaces.
- A stable health event schema registry.
- Sandbox and test environments for integration.

The goal is to make integrating with OmegaX feel less like "healthcare" and more like any serious DeFi or infra protocol:

- Clean primitives
- Clear contracts
- No hidden manual processes behind the scenes

## Changelog

Coming Soon.