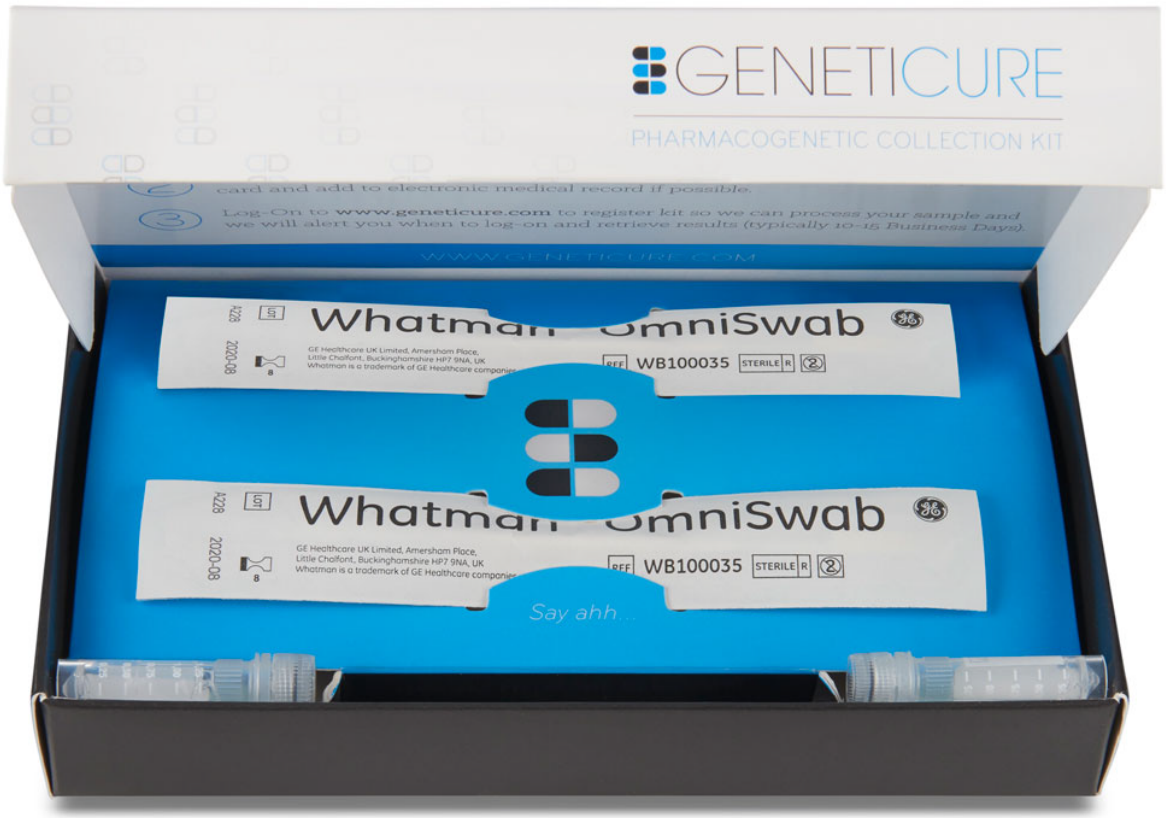
GENETICURE®

HYPERTENSION PHARMACOGENOMICS PANEL

Disease-specific personalized medicine solutions supported by clinical evidence



Treating hypertension with trial-and-error is inefficient and leads to poor outcomes. High blood pressure is the leading preventable cause of death in the world, and 76% of patients do not have it under control.[1] **WE CAN DO BETTER.**

PROBLEMS WITH THE STATUS QUO:

FOR PATIENTS

1. Without symptoms, there is little incentive to try multiple medications which are often layered even if ineffective.[2]
2. Each patient responds to medications differently, with only 40-50% response rate for each medication.[3]
3. Of the patients that do respond to a medication, the average response rate is 7-8mmHg over placebo for each medication.[4]
4. 20% of patients show an increase in blood pressure for a given medication.[5]

FOR PROVIDERS

1. Layering of medications increases non-adherence by 70% per new medication.[6]
2. Each medication can have harmful side-effects.
3. Requires multiple low-value visits that strain schedules and staff.

FOR PAYERS

1. 45% of adults in the US have hypertension.[7]
2. Adversely impacts underserved populations with less access to care.
3. Leads to adverse events when unmanaged.
4. Uncontrolled hypertension leads to an incremental $131B annual cost.[8]

INTRODUCING GENETICURE FOR HYPERTENSION

GENETICURE'S NON-INVASIVE TEST

- **Low-cost cheek swab test that recommends appropriate high blood pressure medications, based on each patient's genetics.**
- Can be delivered directly to home for virtual care.
- Guides clinicians to which medicines are most likely to work for each patient.
- Examines 17 sites in DNA that indicate which blood pressure medications work best for the patient.

Heart

Genes in the heart control how hard your heart beats and heart rate

Kidneys

Genes in the kidneys control sodium and water reabsorption

Vessels

Genes in the blood vessels control tightening (constriction)

HOW IS IT DIFFERENT?

More complex, disease-specific approach.
Other pharmacogenomics tests focus on drug metabolization, which alone is insufficient for outcomes in complex diseases like hypertension. Our patented genetic panels and clinical decision support focus entirely on the integrative physiology in hypertension.

Evidence first.
We have three clinical trials and six published peer-reviewed articles. See next page for more information.

GENETICURE IMPROVES OUTCOMES AT A LOWER COST THAN STANDARD OF CARE:

SPEED TO CONTROL

Less time and clinical visits to titrate or switch medications.

THERAPY COMPLIANCE

Personalizing prescriptions means engaged patients seeing blood pressure results faster, with fewer medications. This improves treatment compliance.

LOWER BLOOD PRESSURE LONGER

Optimal medications for each patient. Eliminating unnecessary medications with adverse responses and side-effects.

LOWER COST

Fewer doctor visits, prescriptions, strokes, heart attacks, and deaths.

THE STRONGEST CLINICAL AND ECONOMIC EVIDENCE IN PHARMACOGENOMICS OF HYPERTENSION

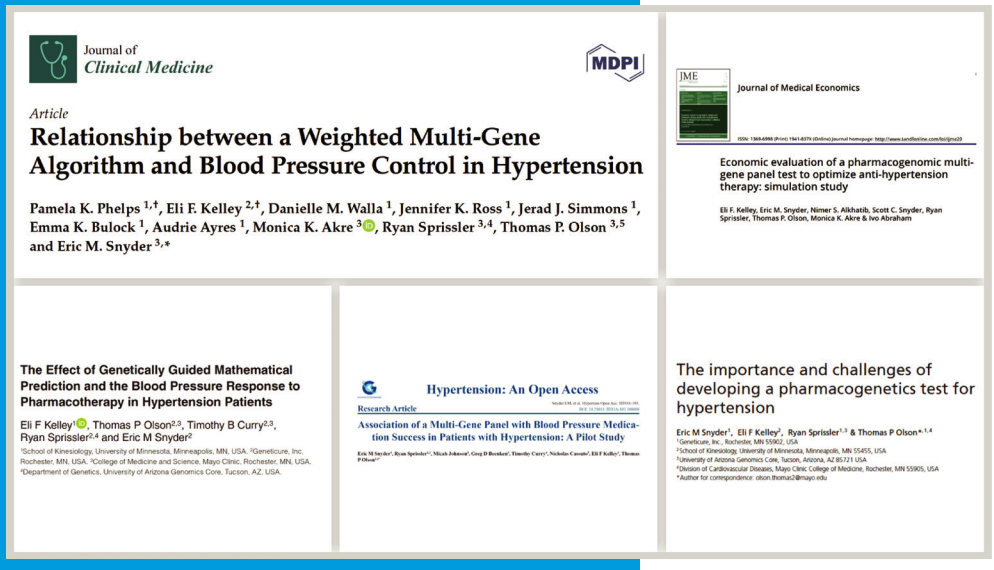
3 Completed Trials | 684 Subjects | 5 Peer-Reviewed Publications

97% OF PATIENTS
UNDER CONTROL
WITHIN 3 MONTHS

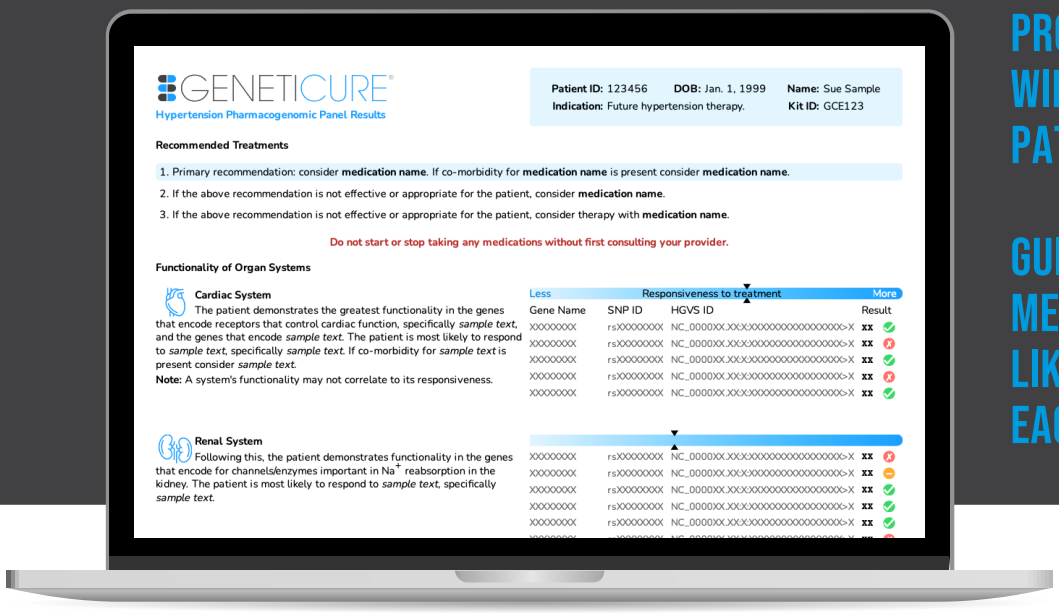
36% GREATER
BLOOD PRESSURE REDUCTION
THAN STANDARD OF CARE [9]

43% LESS
ADVERSE EVENTS VS.
STANDARD OF CARE [10]

47% LESS
COST VS.
STANDARD OF CARE



CONCISE AND ACTIONABLE REPORTING WITH RANKED RECOMMENDATIONS AND GENOTYPE DETAILS



PROVIDES GENETIC WINDOW TO EACH UNIQUE PATIENT PHYSIOLOGY

GUIDES DOCTORS TO MEDICINE THAT IS MOST LIKELY TO WORK FOR EACH PATIENT

HOW CAN WE HELP YOU START IMPROVING PATIENT CARE AND REDUCING COSTS?

We're extremely passionate about this technology and the difference it can make. We'd love to discuss with you how it can benefit your practice and patients.

Reach out to us and we'll gladly take time to:

- Offer complimentary tests to demonstrate the value and ease of use.
- Create a customized cost savings calculator based on your organization's population.
- Walk through sample reports.
- Do a deeper dive on our peer-reviewed evidence.

HEALTH ECONOMICS

- Geneticure test: $249 retail.
- 16x return on investments for payers, <3 years. [11]
- $1,331 savings per patient per year – direct costs only. [11]
- Potential $40B 3-year savings per 10 million patients. [11]
- Annual medication costs are $429 greater for patients with high vs. low adherence, but are associated with $3,908 lower annual clinical expenditures. [11]

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