Breakthrough Technologies to Fight Addiction

BioC
Recovery

BioCorRx Pellet

Team Patient

NSS-2 BRIDGE


BioCorRx®
The BioCorRx® Recovery Program
Non-Addictive Medication-Assisted Treatment

TCQB:BICX

The BioCorRx® Recovery Program – Non-Addictive Medication-Assisted Treatment

Proprietary Naltrexone Implant[1] - <u>cleared for use under state and federal compounding rules</u>

- Implant inserted in fatty tissue of abdomen
- Simple outpatient procedure by licensed medical professional
- Procedure only takes 20-30 minutes and begins to work within hours
- Substantially reduces cravings for drugs and alcohol for several months

Proprietary Cognitive Behavioral Therapy (CBT) Program/Peer Support/Tracking (virtual and in-person)

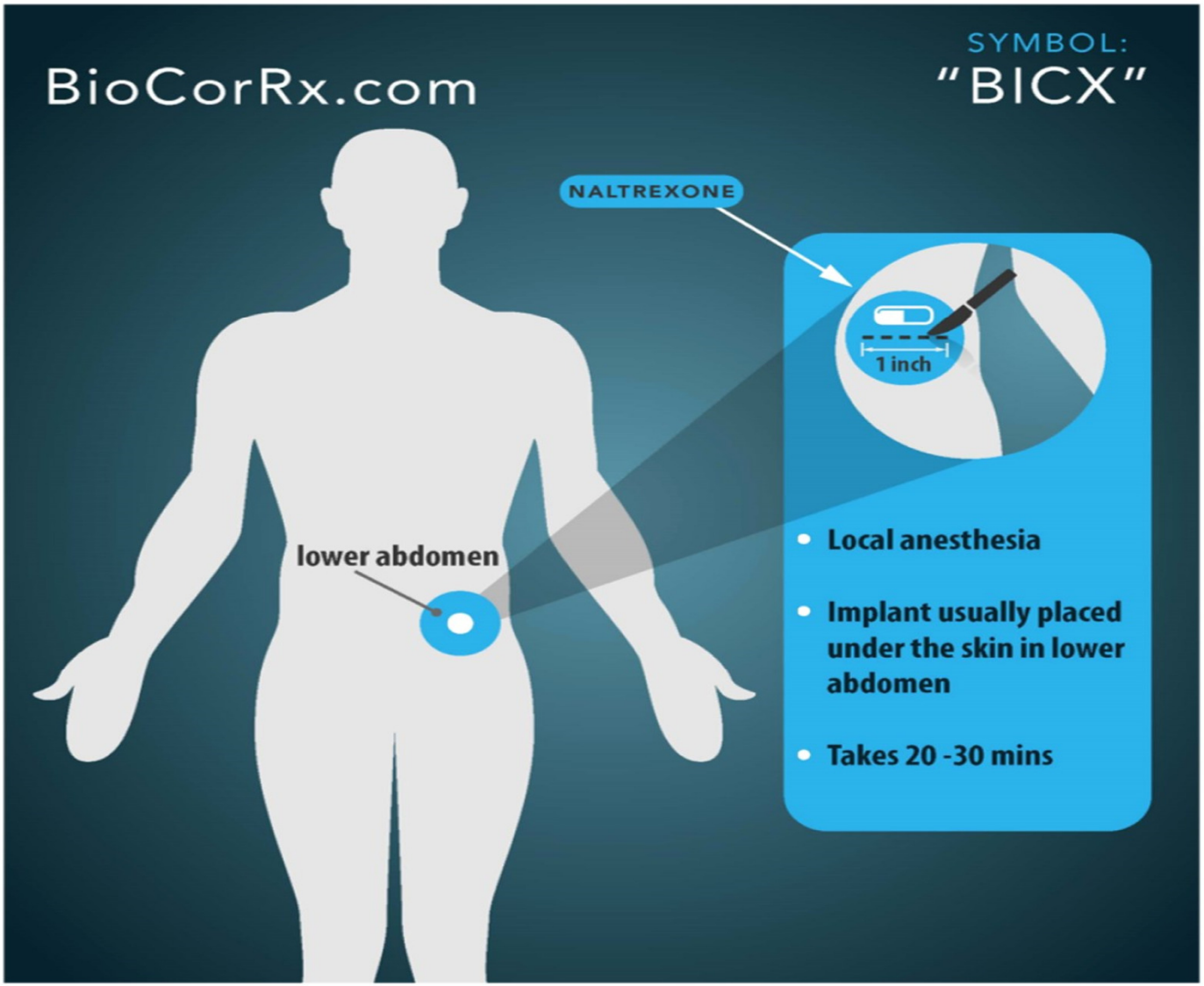
- Patients complete 35 treatment modules during 16 private sessions, typically in under 90 days
- Step-by-step approach for specific addiction and can include family and friend participation
- Therapists readily available
- 12 month peer recovery support in conjunction with, or after counseling
- Beta launch of mobile application completed on September 12, 2017 (includes 35 modules)

BioCorRx Recovery Program is distributed by partner clinics across the US

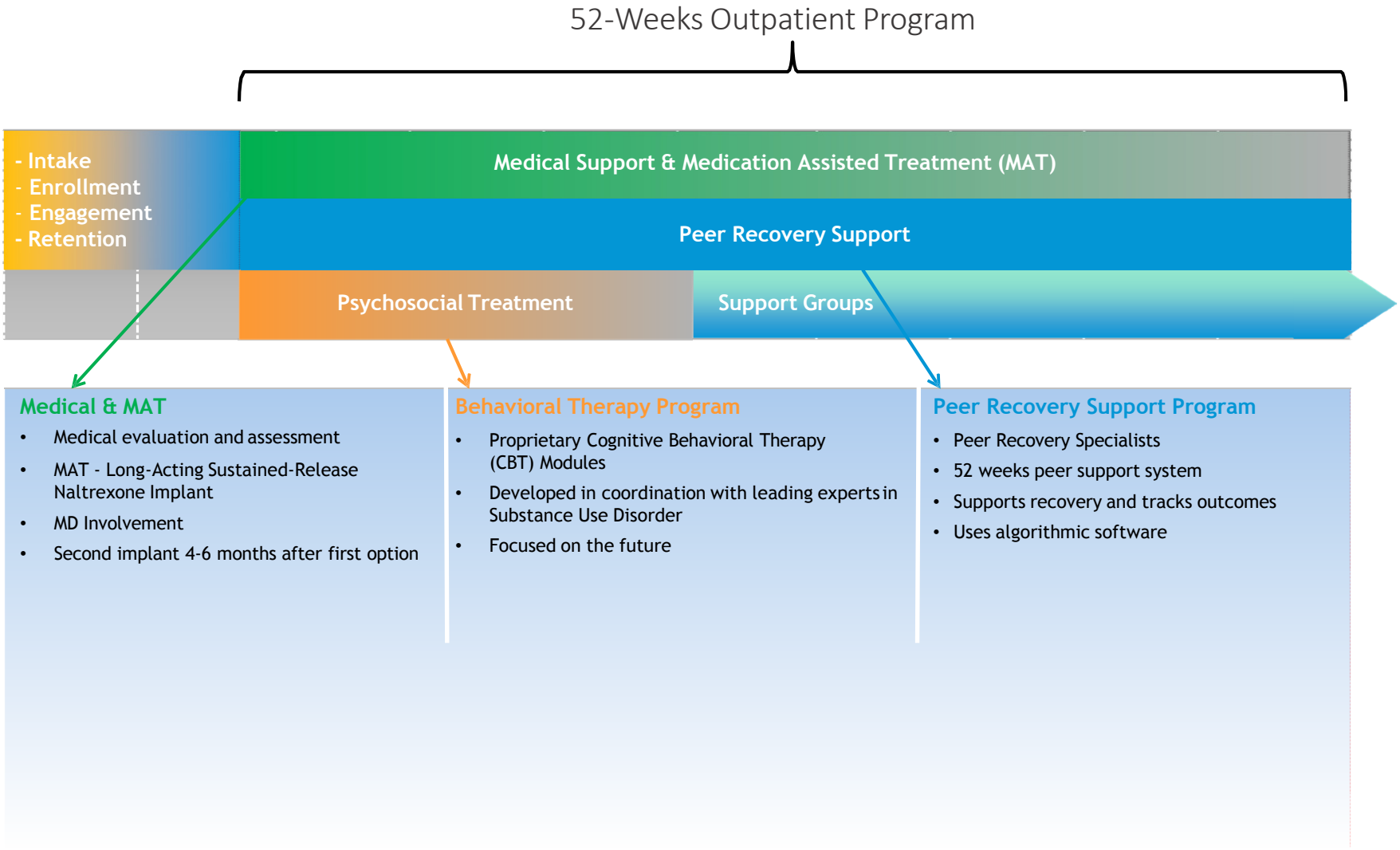
- Fees are paid to BioCorRx® per program sold by independent treatment providers
- Approximately 30+ partner clinics currently and growing
- Discussions being held to incorporate all or portions of the program into traditional residential treatment centers

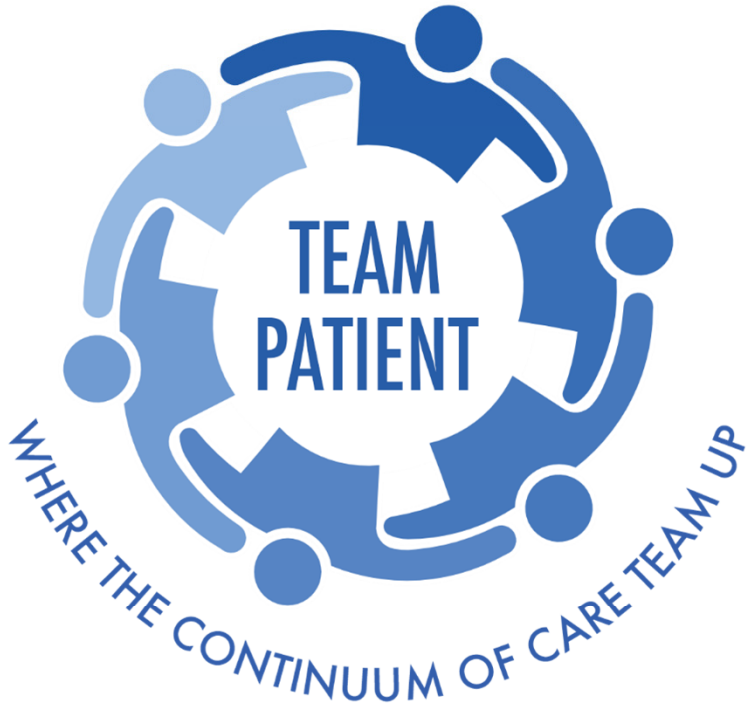
[1]BioCorRx® purchased exclusive worldwide rights to an additional naltrexone implant (except for New Zealand/Australia) from Trinity in 2010. This implant is currently used in the program utilizing long standing compounding laws.

OTCQB:BICX


BioCorRx.com
SYMBOL:
"BICX"
NALTREXONE
1 inch
lower abdomen
• Local anesthesia
• Implant usually placed under the skin in lower abdomen
• Takes 20 -30 mins

BioCorRx® Recovery Program: A Fully Integrated 52-week Program





FOR THE OPIOID EMERGENCY

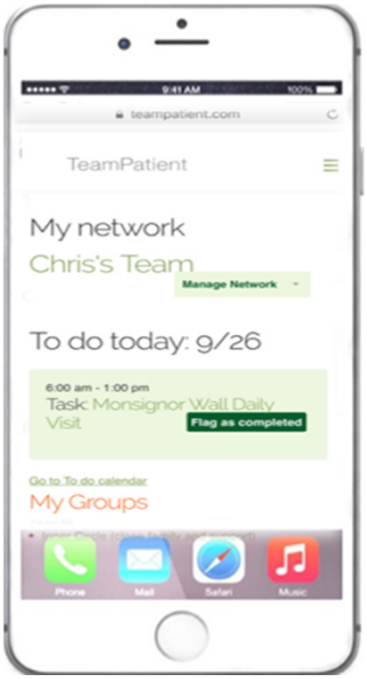
Enabling sustained recovery FOR INDIVIDUALS, and accelerating reentry into society

COLLABORATION, COLLABORATION, COLLABORATION … THE KEY TO CARE

TeamPatient is a real-time collaboration app.

Connecting everyone and everything for sustained recovery around the individual

- Creating a *"connected care community"* for each individual



PRIVATE AND ORGANIZED SHARING

- Each individual – or their approved caregiver - gets a personal and private account
  - Cloud-based, outside of each stakeholder's firewalls
  - Ensuring everyone can participate with no restrictions

- App is organized into private "team rooms" to communicate, share information, conduct telecare, and manage tasks among the teams

EXPERT OPINION

HARVARD | BUSINESS | SCHOOL

"Unlike other coordination solutions, which focus solely on connecting providers to one another, TeamPatient® is centered on the individual.

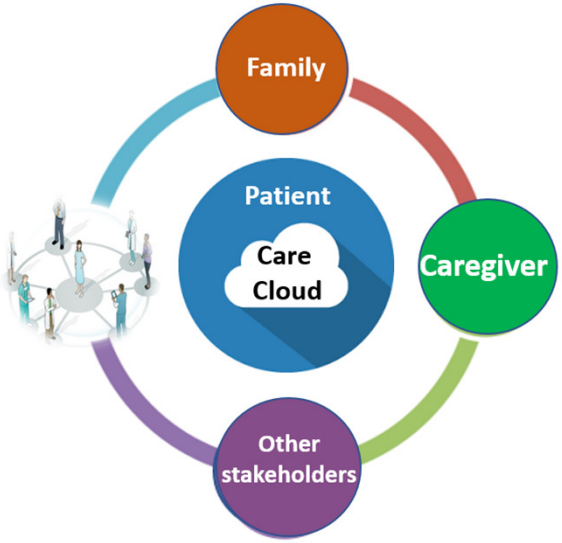
Services that connect the healthcare community and place the individual in the center – and in the driver's seat – stand to have a substantial impact on the disjointed process that exists today."

Source: Emily Boudreau, Research Associate for
Professor John Quelch, CBE,
Charles Edward Wilson Professor of Business Administration,
Professor of Health Policy and Management

SIGNIFICANT TEAM VALUE

- Everyone “by invitation”
- All team members can set tasks and ‘To dos’, send information and communicate with any member(s)
  - Enabling new services e.g., remote training and monitoring
  - Creating a single 360° view of the game plan for each individual
- Email notifications to team members upon any update
  - Providing an early warning system
- 1-click to involve new team members or create new groups
- Individual approves information sharing
  - So no HIPAA issues

Everything and everyone in one private place - Patient Care Cloud



THE CARE VILLAGE CAN BE PERSONALIZED FOR EACH PERSON'S NEEDS

Inviting, for example:

- "case managers" for individual:
  - Recovery specialist
  - Faith-based leader
  - Caregiver
  - Counsellors
  - Discharge team (rehab, jail…)
  - Drug Court contacts
- Family and friends
- Continuum of care teams:
  - Recovery services
  - Reentry services
    - Rehousing
    - Jobs

OUTCOMES FOR INDIVIDUALS

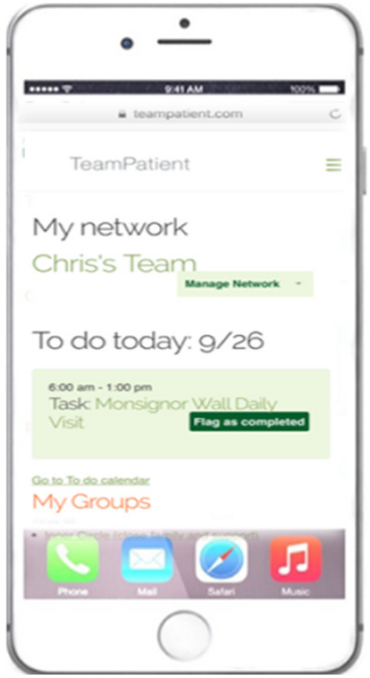
- A personal management tool for empowerment
  - With a complete record of everything accomplished and everything ahead
- Destigmatize substance abuse, by identifying sufferers as patients
- Mitigate risk of relapse through the power of teamwork
- Demonstrate accountability to others
- Support all aspects of recovery and re-entry

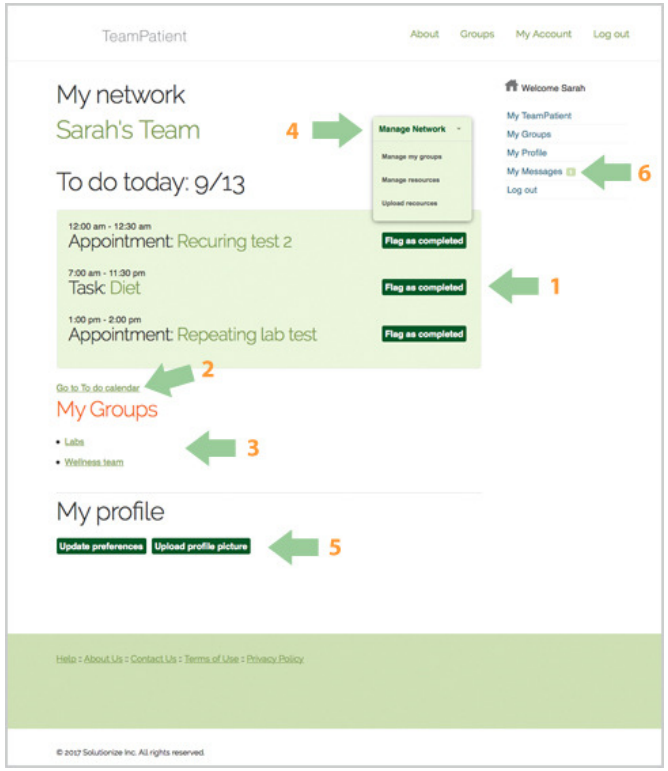
OUTCOME FOR TEAM: EVERYONE CAN PARTICIPATE

Empowerment through sharing

- Collaboration
- Education
- Training
- Monitoring
- Adherence
- Compliance

PRODUCT: HOME PAGE





1. **To do today**
2. **Link to To dos Calendar**
3. **List of all the individual's teams (Groups)**
4. **Manage network**
5. **Profile**
6. **All messages**

CONTACT

Peter.Watts@Solutionize.com

Innovative Health Solutions

NSS-2 | A NEW STANDARD OF CARE

Company Overview

- Innovative Health Solutions Inc. was Established in 2011
- Headquartered in Versailles, Indiana / Second Office in Indianapolis, Indiana
- Pioneering the emerging science of “Non-Surgical Peripheral Neuromodulatio
- IHS™ has developed the first evidence based non-surgical, nonpharmacologic technology in the world to treat pain at the level of the brain and central ner system.

Our Mission:

IHS is committed to providing solutions that create value and provide better patient outcomes. We believe in improving lives and minimizing suffering. Through innovation and research, we are reimagining the future of patient care.

Supportive Facts

- 6,000+ patients treated in 2 years
  - 400+ Providers nationally
  - 200+ Clinics nationally
- New Research
  - New registry data supports outcomes in real world setting, N=104
  - Significant decreases in:
    - Cravings
    - Pain
    - COWS

- NAS Prevention: Study to prevent neonatal abstinence syndrome through early detox during pregnancy
- ED Study: Study for the treatment of opioid withdrawal post-resuscitation in emergency department
- Placebo Controlled Trials (2)
- Cleveland Clinic Study
- Ohio State University Systemwide Approval
- Dr Shawn Ryan
- Value Based Healthcare Program

UNITED STATES
PATENT AND TRADEMARK OFFICE

uspto

IHS Awarded Device and Method Patents

US Patent No:
9,839,577

US Patent No:
9,662,269

FDA Press Release November 15, 2017

FDA grants marketing authorization of the first device for use in helping to reduce the symptoms of opioid withdra

Today, the U.S. Food and Drug Administration granted a new indication to an electric stimulation device for use in helping to reduce the symptoms of opioid withdrawal.

"Given the scope of the epidemic of opioid addiction, we need to find innovative new ways to help those currently addicted live lives of sobriety with the assistance of medically assisted treatment. There are three approved drugs for helping treat opioid addiction. While we continue to pursue better medicines for the treatment of opioid use disorder, we also need to look to devices that can assist in this therapy," said FDA Commissioner Scott Gottlieb, M.D. "The FDA is committed to supporting the development of novel treatments, both drugs and devices, that can be used to address opioid dependence or addiction, as well as new, non-addictive treatments for pain that can serve as alternatives to opioids."

The NSS-2 Bridge device is a small electrical nerve stimulator placed behind the patient's ear. It contains a battery-powered chip that emits electrical pulses to stimulate branches of certain cranial nerves. Such stimulations may provide relief from opioid withdrawal symptoms. Patients can use the device for up to five days during the acute physical withdrawal phase. Opioid withdrawal causes acute physical withdrawal symptoms including sweating, gastrointestinal upset, agitation, insomnia and joint pain.

To permit marketing of this device for this use, the FDA reviewed data from a single-arm clinical study of 73 patients undergoing opioid physical withdrawal. The study evaluated patients' clinical opiate withdrawal scale (COWS) score, which is a clinical assessment conducted by a health care professional that measures opioid withdrawal symptoms such as resting pulse rate, sweating, pup gastrointestinal issues, bone and joint aches, tremors and anxi COWS scores range from 0 to more than 36 — the higher the n the more severe the withdrawal symptoms are to a patient.

Prior to using the device, the average COWS score for all patier 20.1. Study results showed that all patients had a reduction in of at least 31 percent within 30 minutes of using the device. O 64 of the 73 patients (88 percent) transitioned to medication a therapy after five days using the device, along with any medica needed for persistent symptoms, such as nausea and vomiting

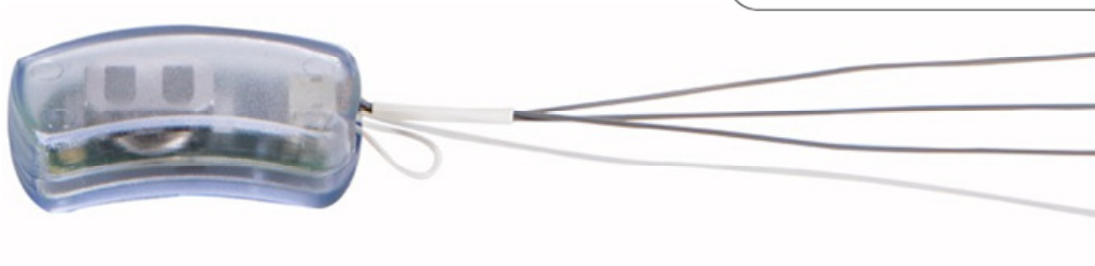
The FDA cleared the EAD (electro auricular device, now called Neurostimulation System) in 2014 for use in acupuncture. FDA granting of the current request for the NSS-2 Bridge expands th of the device as an aid to reduce the symptoms of opioid withd It is available only by prescription. The device is contraindicate patients with hemophilia, patients with cardiac pacemakers or diagnosed with psoriasis vulgaris.

The FDA reviewed the NSS-2 Bridge device through the de nov premarket review pathway, a regulatory pathway for some low moderate-risk devices that are novel and for which there is no marketed predicate device to which the device can claim subst equivalence.

The FDA permitted marketing of the NSS-2 Bridge device to Inn Health Solutions, Inc.

FDA Classification details for the BRIDGE

Trade/Device Name: NSS-2 BRIDGE
Regulation Number: 21 CFR 882.5896
Regulation Name: Percutaneous Nerve Stimulator for Substance Use Disorders
FDA Regulatory Class: Neurology, Class II
Product Code: PZR
Global Medical Device Nomenclature (GMDN): 63321
Opioid Withdrawal electrical stimulator



Indications for use:

The NSS-2 Bridge (DEN170018)(CFR Title 21, Subpart F, 882.5896; Class II; PZR) is a Neurology product. It a percutaneous nerve field stimulator (PNFS) system, that can be used as an aid to reduce the symptoms of opioid withdrawal.

FDA identifies this device as:

A **Percutaneous Nerve Stimulator for Substance Use Disorders** percutaneous nerve stimulator for substance use disorders is a device that stimulates nerves percutaneously to aid in the reduction of withdrawal symptoms associated with substance use disorders.

Federal Supply Schedule Contracts (FSS)
Distribution and Pricing Agreements(DAPA)

IHS FSS Award on August 15, 2015
V797D-50453

DLA & DAPA was awarded NSS/MFS & Brid
SP0200-16-H-0011

IHS
Innovative Health Solutions

Our Research Partners

Cleveland Clinic

Duke University School of Medicin

Children's Hospital of Wisconsin

NIH
National Institutes of Health

Froedtert & Medica College Wiscons

VA | U.S. Department of Veterans Affairs

JFK Medical Center

JOHNSON MEMORIAL Hospital

THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER

THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

NeuroStim Systems Auricular Stimulator™ Mechanism of Action

ous, Auricular Stimulation ial Nerves X, X (Vagal) ject to the tem (NTS)

imulation of rons directly s the Limbic (Amygdala), nected brain ures, spinal d associated ial nerves

3

65% Decrease of amygdala which mod the autonomi system, im visceral/s pain & na

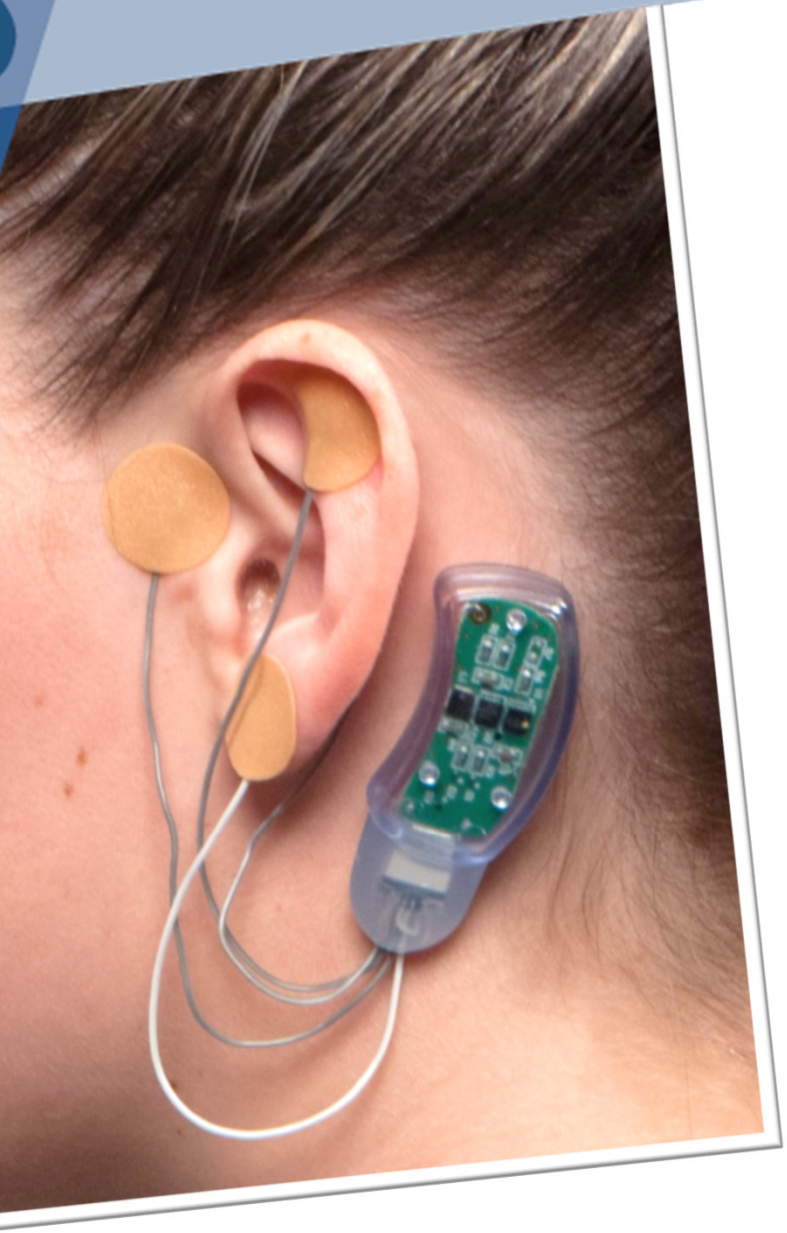
4

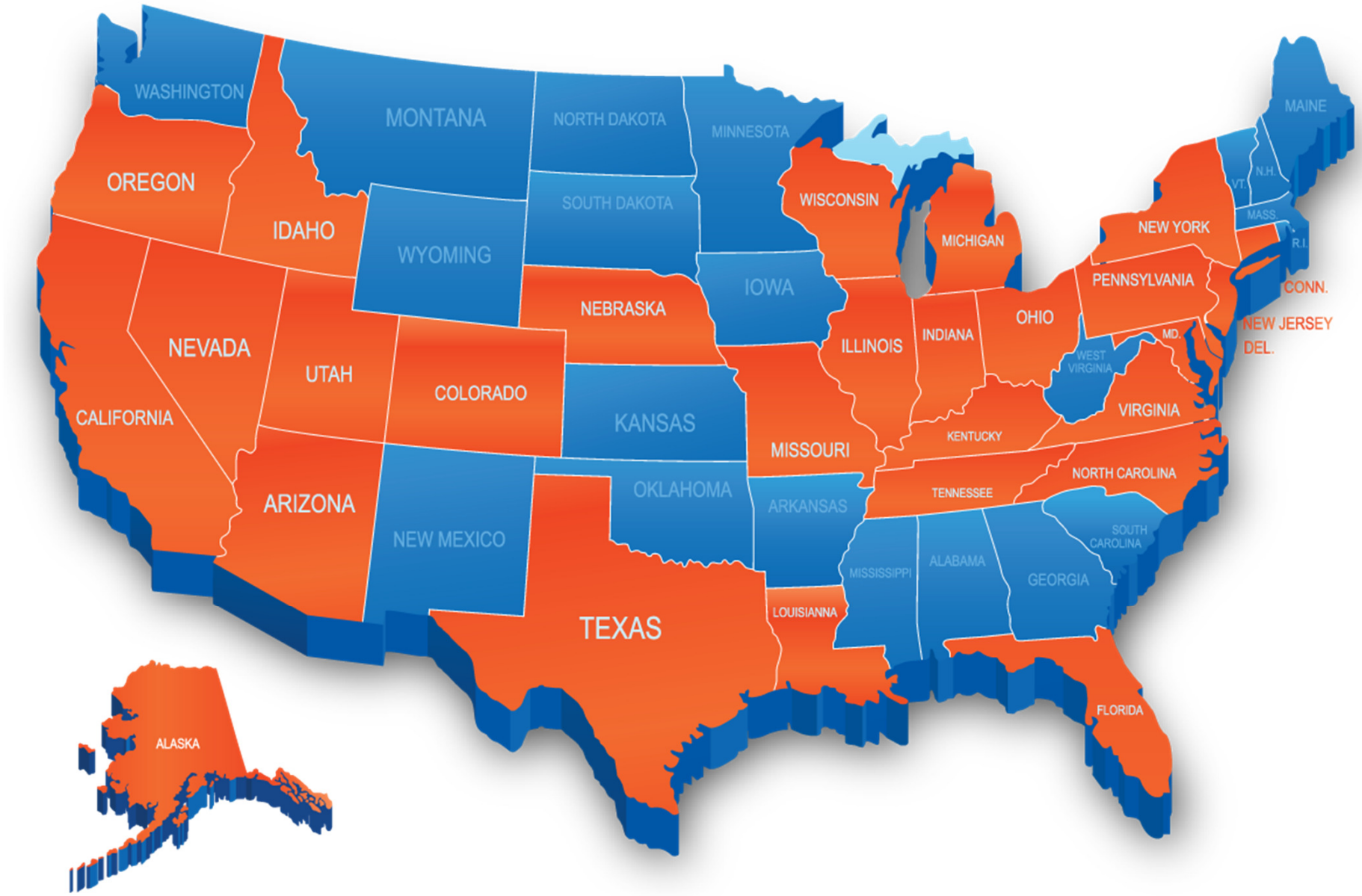
Neuromod decreases a spinal cord n at the Dors

NSS-2 BRIDGE

The NeuroStim System

For the Symptoms of Opioid Withdrawal

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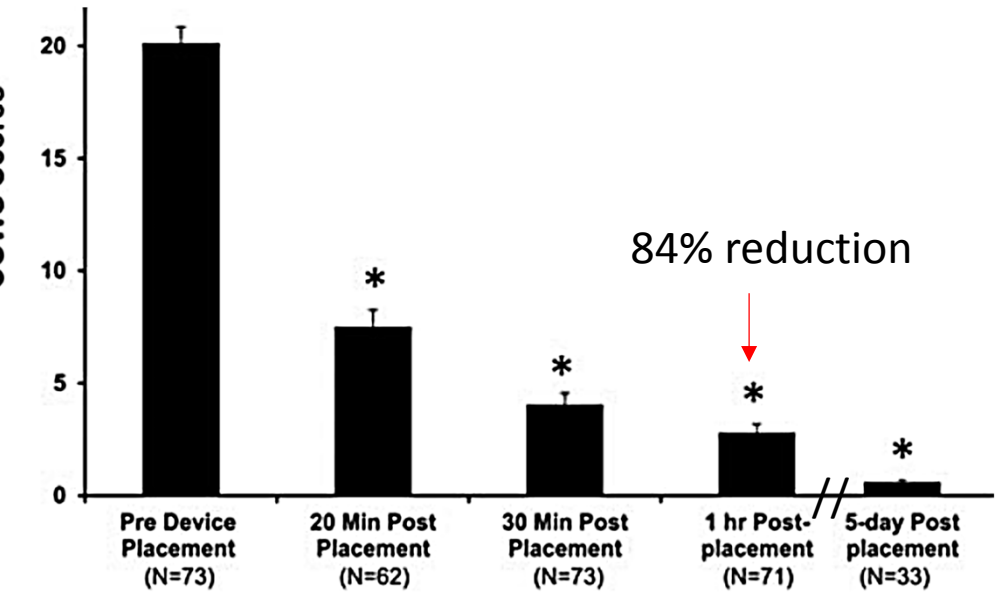
MISSISSIPPI
ALABAMA
GEORGIA
FLORIDA
SOUTH CAROLINA
NORTH CAROLINA
VIRGINIA
WEST VIRGINIA
PENNSYLVANIA
NEW YORK
MD.
DEL.
NEW JERSEY
CONN.
R.I.
MASS.
VT.
N.H.
MAINE
ALASKA

The NSS-2 BRIDGE published study results:

Neuromodulation with percutaneous electrical nerve field stimulatio associated with reduction in signs and *symptoms of opioid withdraw* a multisite, retrospective assessment.



- Observational study in "real-world" setting, 7 clinics the country.
- This study is the first to demonstrate that the signs symptoms of opioid withdrawal can be rapidly and effectively attenuated without the use of pharmacc
- No rescue medications were used
- No side-effects were reported with the BRIDGE
- Overall, 88.8% of patients in the entire cohort succe transitioned to long-acting naltrexone