

## U.S. healthcare is overburdened and difficult to navigate with patient service levels worsening, despite costs increasing.



## Convoluted system with long wait times and low price transparency.

- Inefficient delivery model, which is rife with wasted time and money.
- Hard to get access to doctors, with wait times of >10 days for most specialties.
- Pricing is opaque, with many costs not covered by insurance.

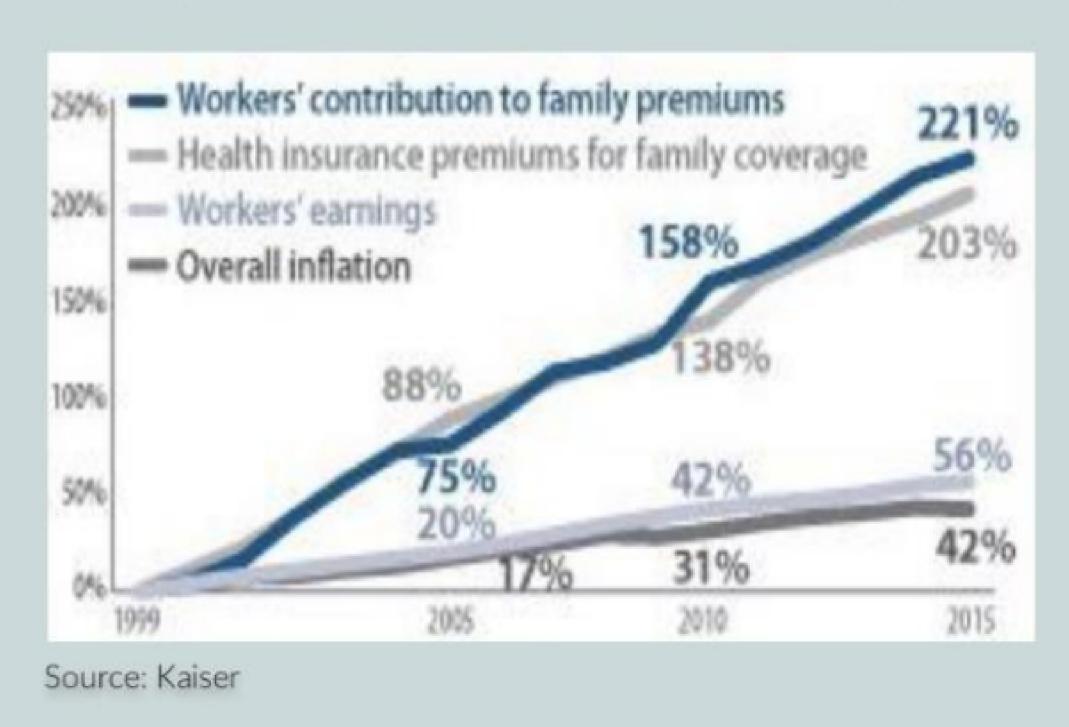
According to Gallup,

71%

of Americans believe
US healthcare is
"in a state of crisis"
or "has major problems."

## Health insurance plans are more expensive and less flexible.

- Patients are not enabled to get the appropriate care suggested by their expert physicians, such as prescribed treatment plans or diagnostic scans.
- Premiums increase every year, while co-pays also increase substantially.



## Covid has accelerated a shift away from traditional care options towards private centers, house call providers & telehealth services.





#### Patients Avoiding Hospitals.

- The pandemic has engendered patients to skip hospitals, both to avoid individual Covid risk and to mitigate unneeded burden on the system.
- ~10% of hospitals closed in last 10 years, and inpatient wings have been converted to outpatient clinics, as patients demand nicer and faster experiences.

RESULT → Patients seeking more private medical centers.



#### Patient Seeking Private Services,

- High-quality healthcare became more necessary and valuable during Covid, leading to an acceleration in the utilization of private medical services such as concierge care or private medical centers.
- This was not a new trend, but reflected an acceleration is existing growth trends,
   RESULT → Continued growth of concierge and private-pay medical care.



#### Patients Seeking Virtual and In-Home Care.

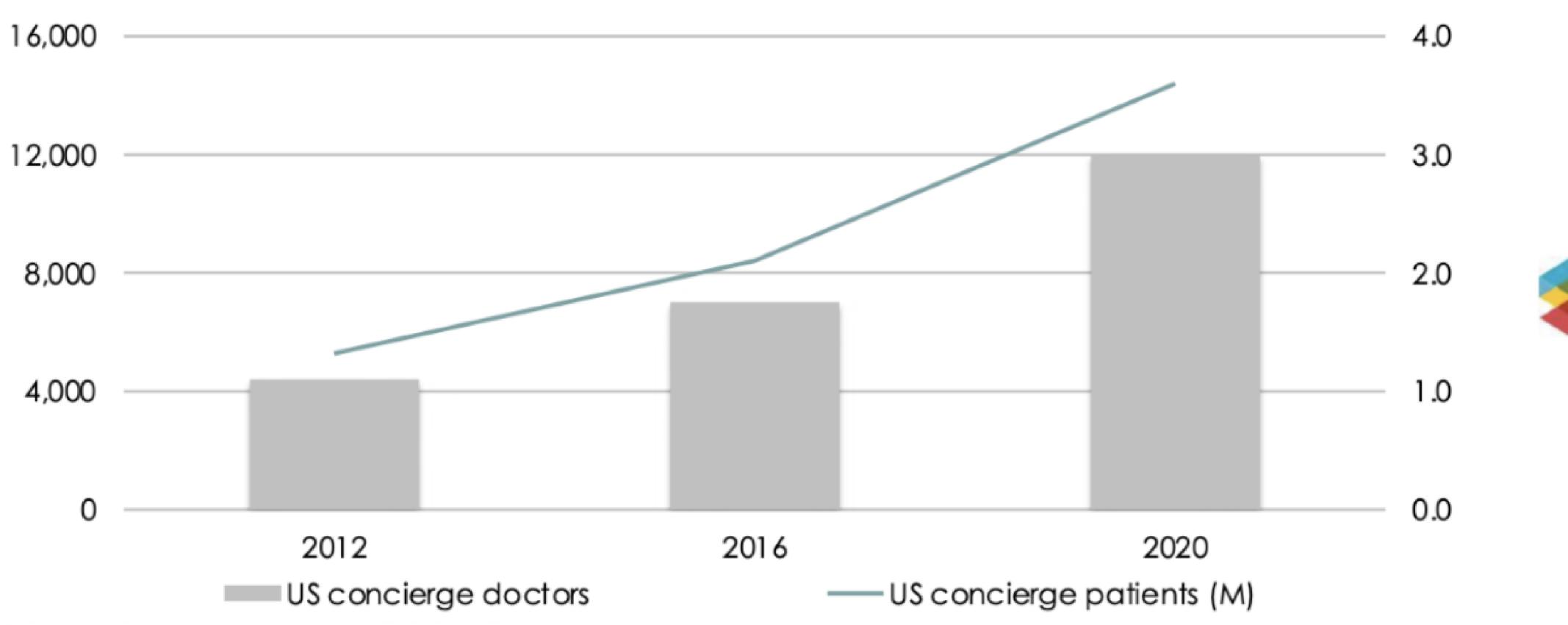
- Patients are now seeking optimal convenience and care without leaving home, often receiving care through telemedicine or house calls with convenience and risk mitigation the driving forces.
- These are services that have been growing already. However, with this increased demand, providers are looking to handle more cases and complexity.

RESULT  $\rightarrow$  More demand for telemedicine and house calls.

# Americans have shown a willingness to pay for better medical care and service by engaging concierge doctors in primary care.



#### U.S. concierge practices and patients grown on a 20% CAGR from 2012-2020





Source: Castle Connolly, Concierge Medicine Today

#### Concierge Medicine: >\$10B market.

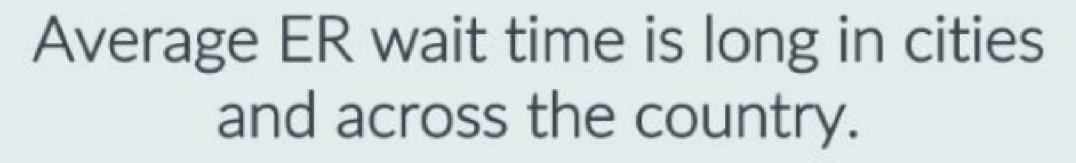
What is Concierge? Patients pay an out-of-pocket membership fee to gain priority access to their family doctor, limiting the number of patients in the practice for shorter wait times and better service.

Fee – Annual dues range from \$2,000-20,000 at an average of \$2,500-3,000. The membership includes an annual physical, sick visits, blood work and some level of care coordination.

Update – Current market estimated at 12K concierge doctors, 3M patients and >\$10B industry size.

## We identified ERs as other major pain points in the system, with long wait times, high prices and unpleasant environments.





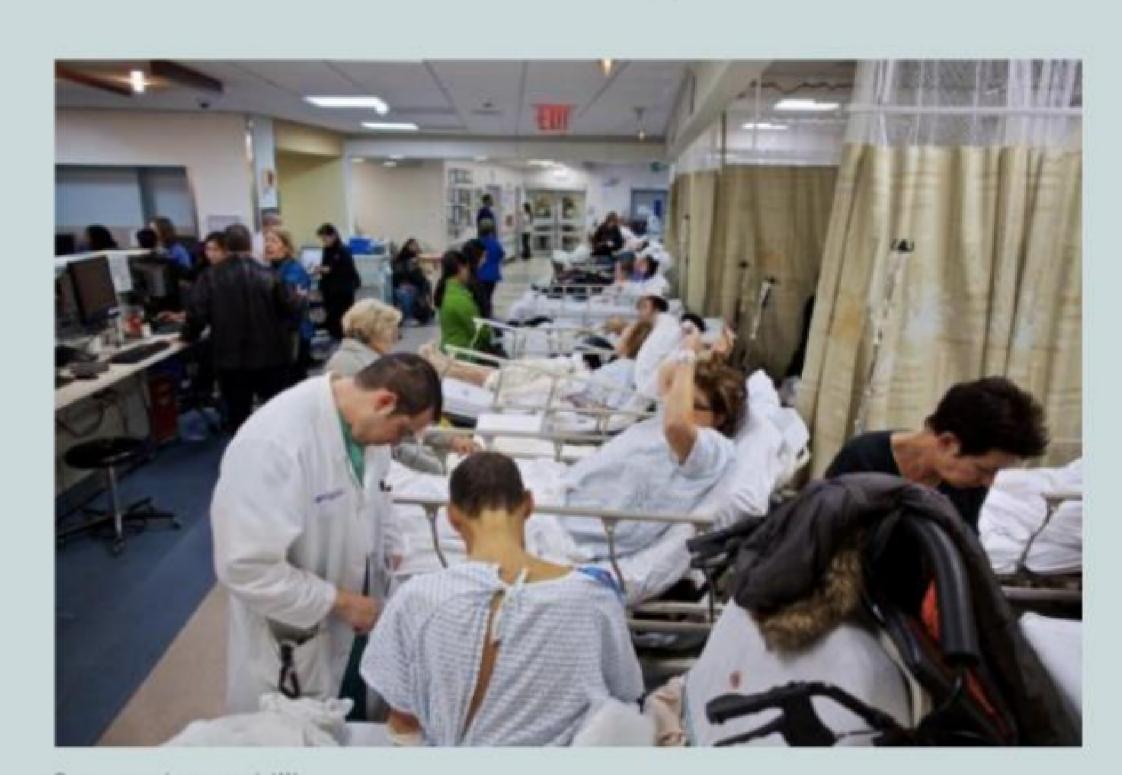


Source: Pulse Report

According to the National Institute of Health, the average out-of-pocket cost for an outpatient ER visit is:

\$1,957 with no insurance. \$637 with insurance.

ER environments are crowded with risks of healthcare-acquired infections.



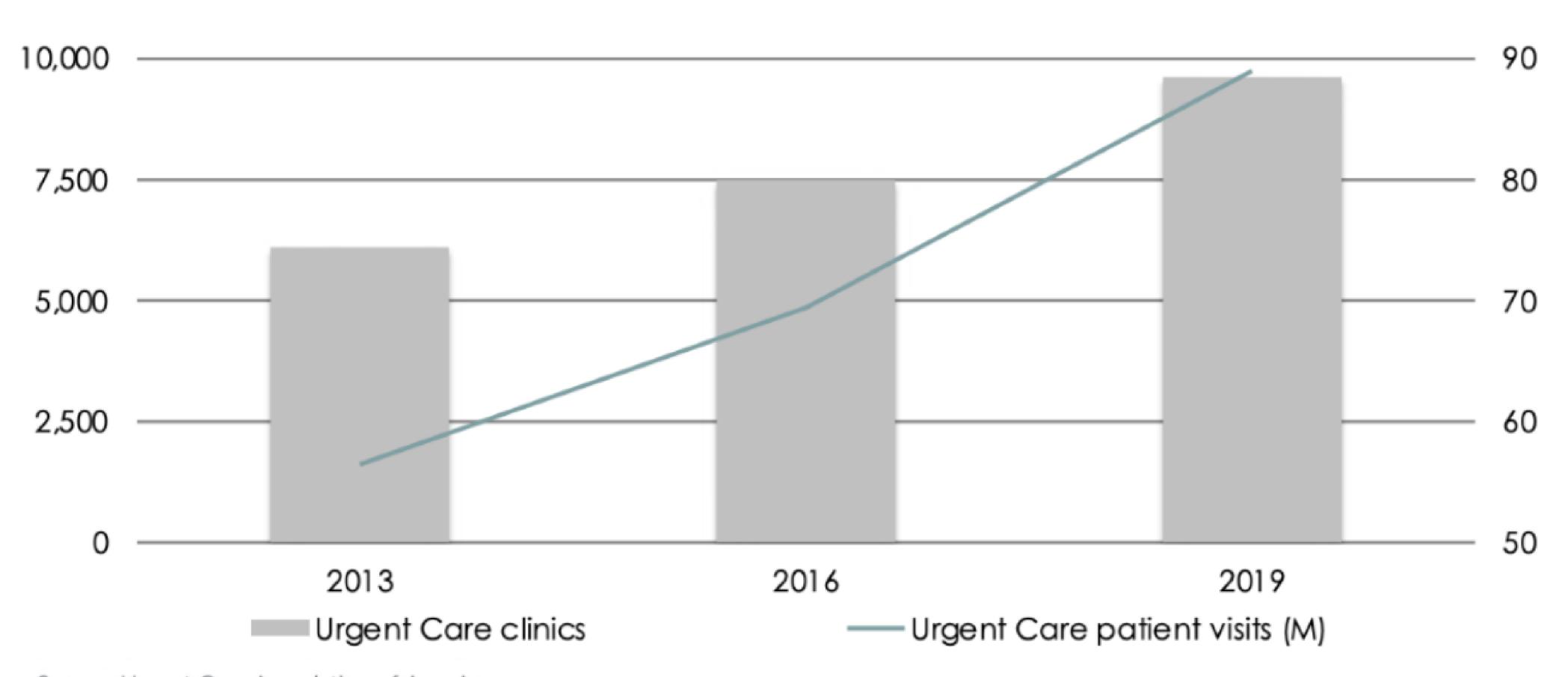
Source: Lenox Hill

Lenox Hill's ER (above) services the Upper East Side of Manhattan, one of the wealthiest areas in the country. However, it still suffers from long wait times and no barriers between patients who are cramped together.

## Urgent care centers have grown rapidly, demonstrating Americans are willing to visit non-traditional points of care for convenience.



Urgent care clinics and visits have grown 10% annually over last decade.





Source: Urgent Care Association of America

#### Urgent Care: >\$25B market

What are Urgent Care centers? These are walk-in clinics where patients can be seen with limited wait times for basic injuries and illnesses. They are typically open 5-7 days a week, 8-14 hours per day.

Fee - These centers take insurance, with an average visit costing \$200.

Update – There are close to 10,000 urgent care facilities and 89M visits across the country, with an estimated industry size of >\$25B.

# Our team provides best-in-class emergency and urgent care, with care navigation to specialists & hospitals when needed.



#### No wait 24/7 care by expert ER doctors.

- Our physicians are ER-boarded with decades of experience to handle a range of simple and complex medical issues.
- They hail from leading institutions, like Mount Sinai, Cornell, Cedars & UM, so you see the best doctors but with no wait times.

#### Advanced diagnostic imaging on-site.

- MRI, CT, Ultrasound and Xray on site with real time radiology reads.
- Our diagnostic capability enables us to handle 80-90% of ER acute cases (vs Urgent Cares at 20-30%).

#### VIP access to specialists and hospitals.

- Expedited appointments with Sollis' expert network of specialists, who normally take weeks or months to see.
- Relationships with leading hospitals to facilitate direct admission inclusive of bypassing the ER, securing private rooms and obtaining faster OR times.

#### Plus house calls, telehealth and more.

- Our members receive a range of general health services at their convenience:
  - House calls;
  - Telemedicine;
  - Travel medicine; and
  - Wellness (IV infusions, vitamin injections, pain management and blood work).

Sollis offer a single access point to concierge medical care on a 24/7 basis, across multiple settings and with unmatched quality.



Telemedicine

House Calls

In-Clinic Care & Imaging

Care Navigation

#### Initial Contact.

When a medical issue arises, Sollis members call or text our 24/7 hotline in order to begin a telehealth encounter with a provider.

#### Triage.

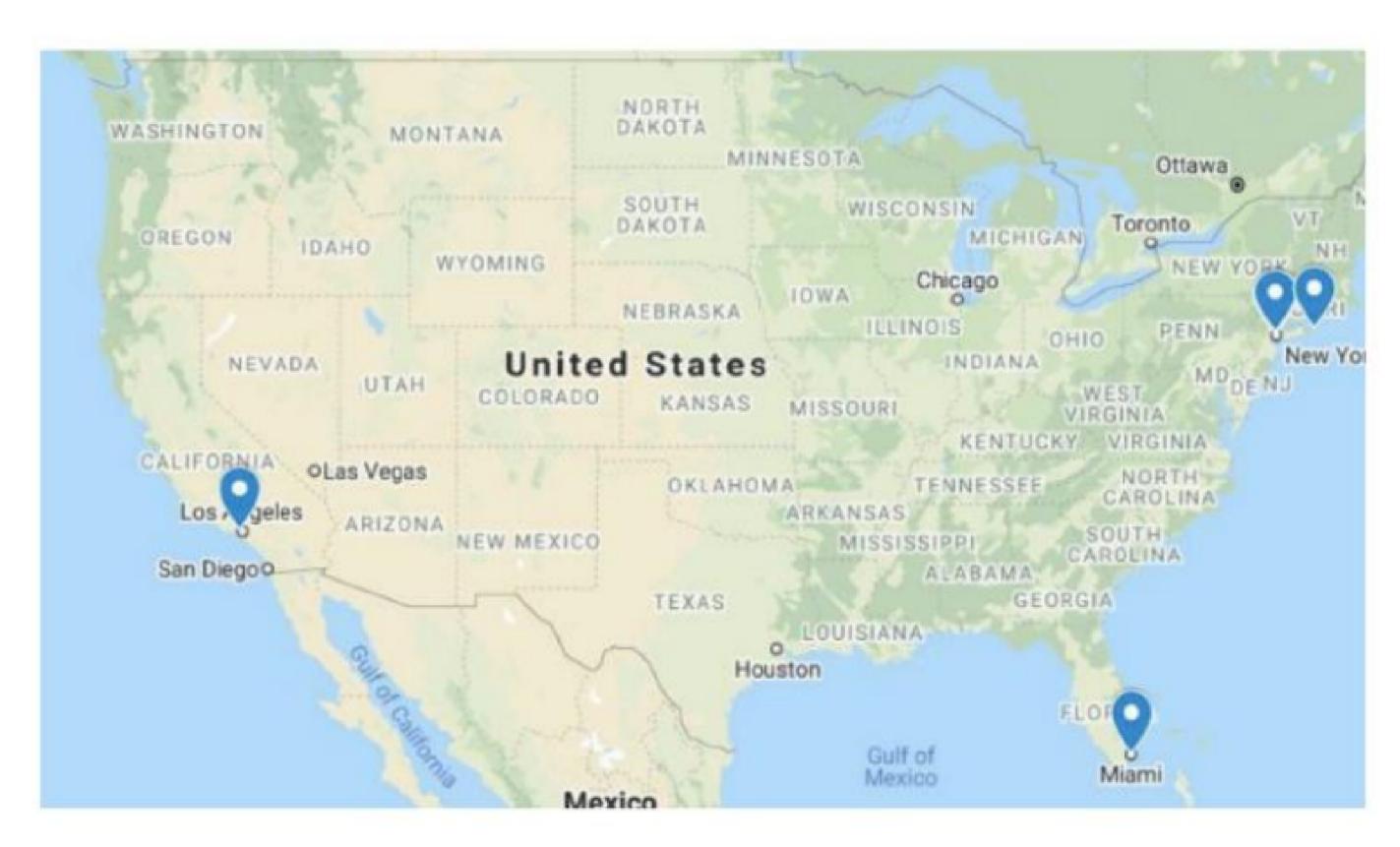
It is then decided if the issue can be handled strictly through telemedicine or if a house call, in-clinic visit, or referral is required – based on best medical practice and patient preference.

#### Escalation.

In the event that a patient is seen and the condition requires a more acute setting, we direct the patient into the Sollis medical center or directly to a hospital if needed.

#### Care Coordination.

In all cases, we continually track the patient throughout the care experience until issue resolution is achieved.



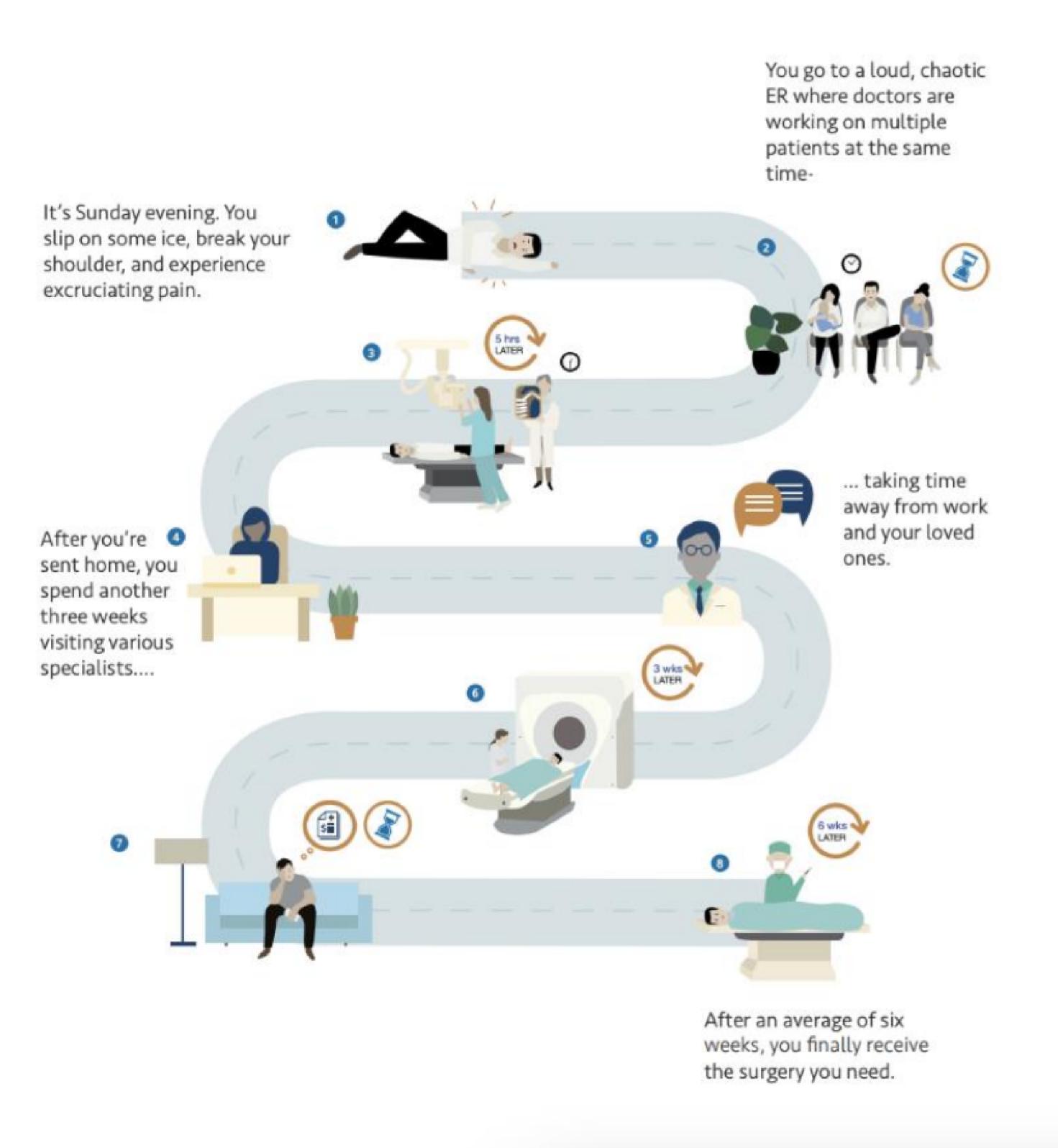


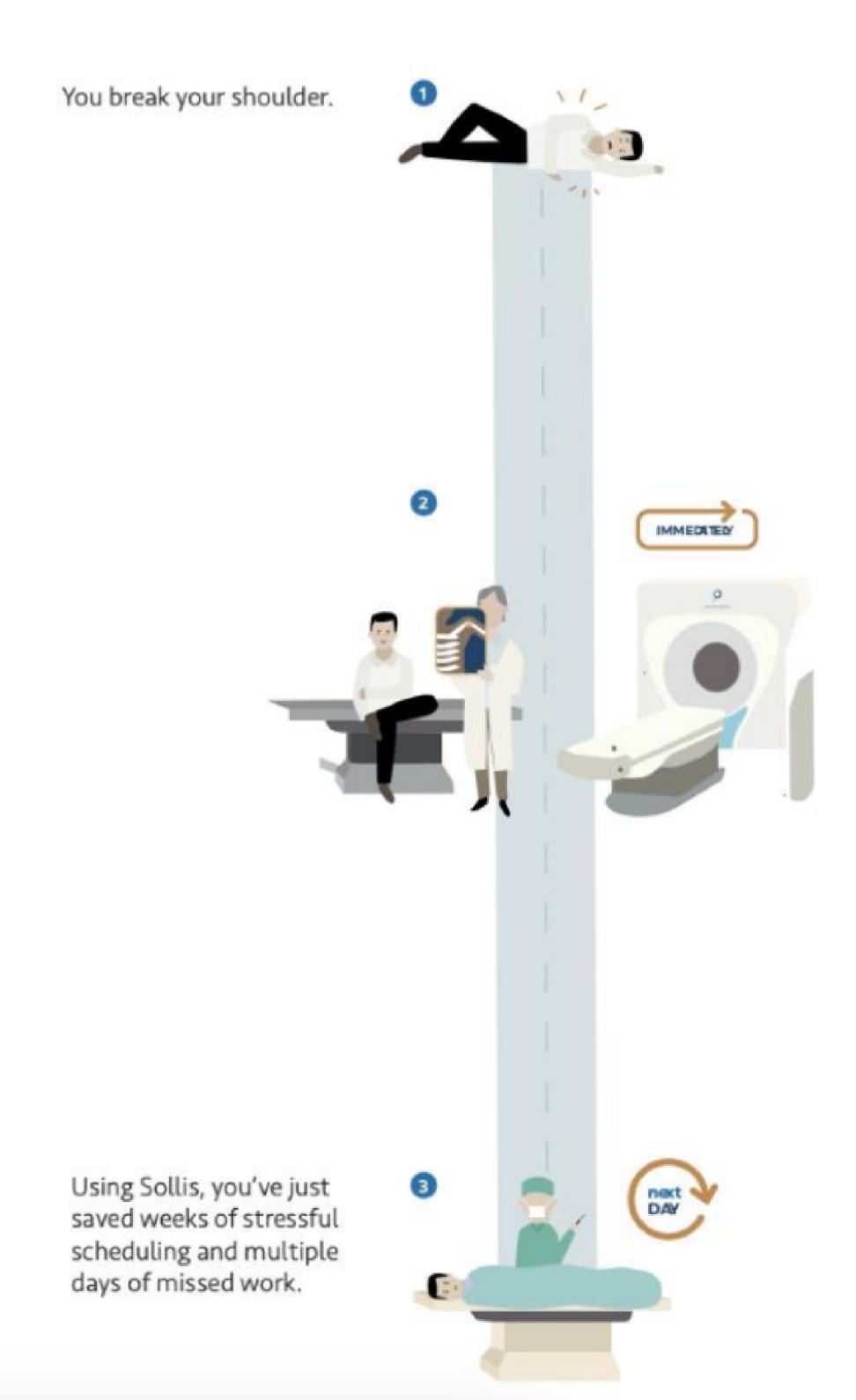
# We streamline an inefficient healthcare delivery model, so our patients get treated faster and by the best physicians.



#### LIFE WITHOUT SOLLIS HEALTH

#### LIFE AS A SOLLIS MEMBER



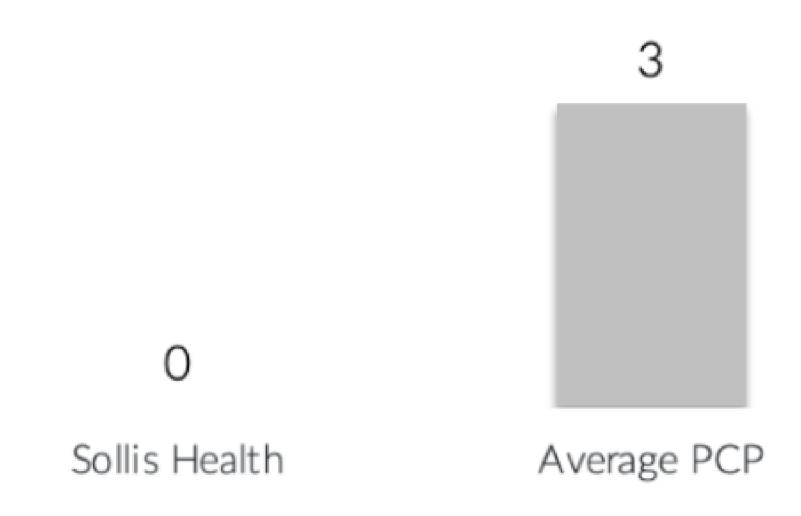


You come to Sollis, to one of our private facilities in LA or NYC with 24/7 advanced diagnostic imaging onsite, and are seen by a physician immediately. After only 90 minutes in our center, you leave with all the imaging information you need for your next-day surgery (when available).

## We deliver care in our centers meaningfully faster than PCPs, urgent care centers and hospital emergency rooms.





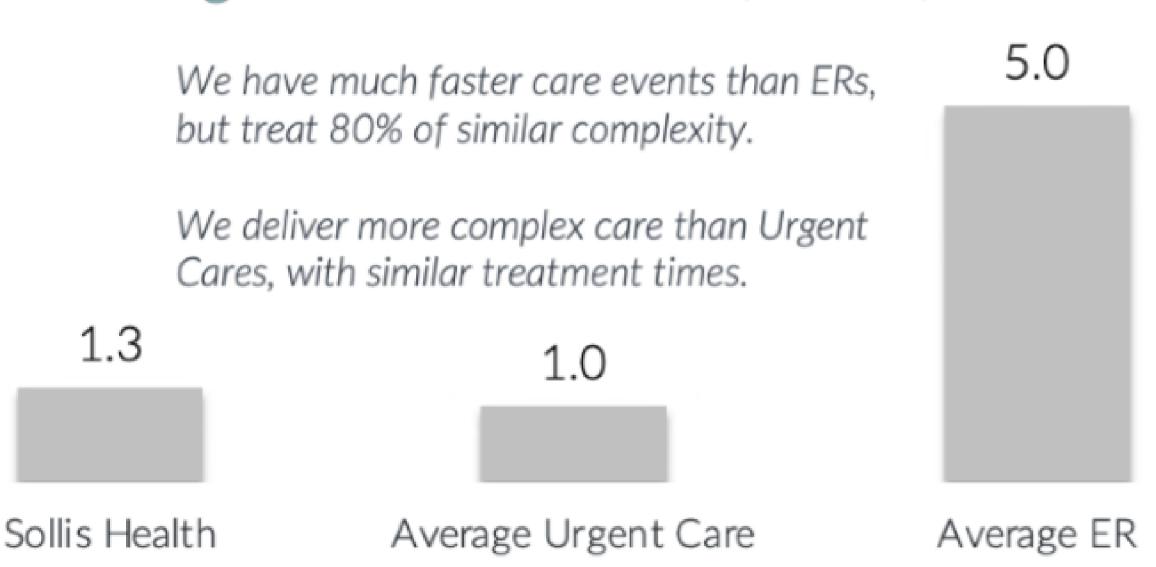


Source: Sollis Health, Merritt Hawkin, \*PCP = primary care physician

# In-Office Wait Time to See Physicians (Minutes) 300 Sollis Health Average Urgent Care Average ER

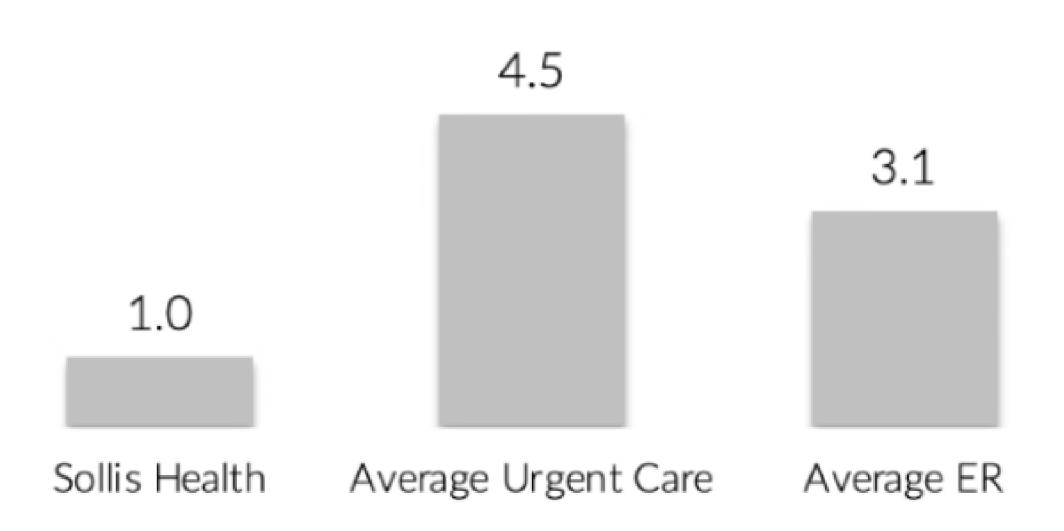
Source: Sollis Health, UCAOA, Hospital Stats

#### Length of Care Events (Hours)\*



\*These are ex Covid testing visits, which take 3 minutes

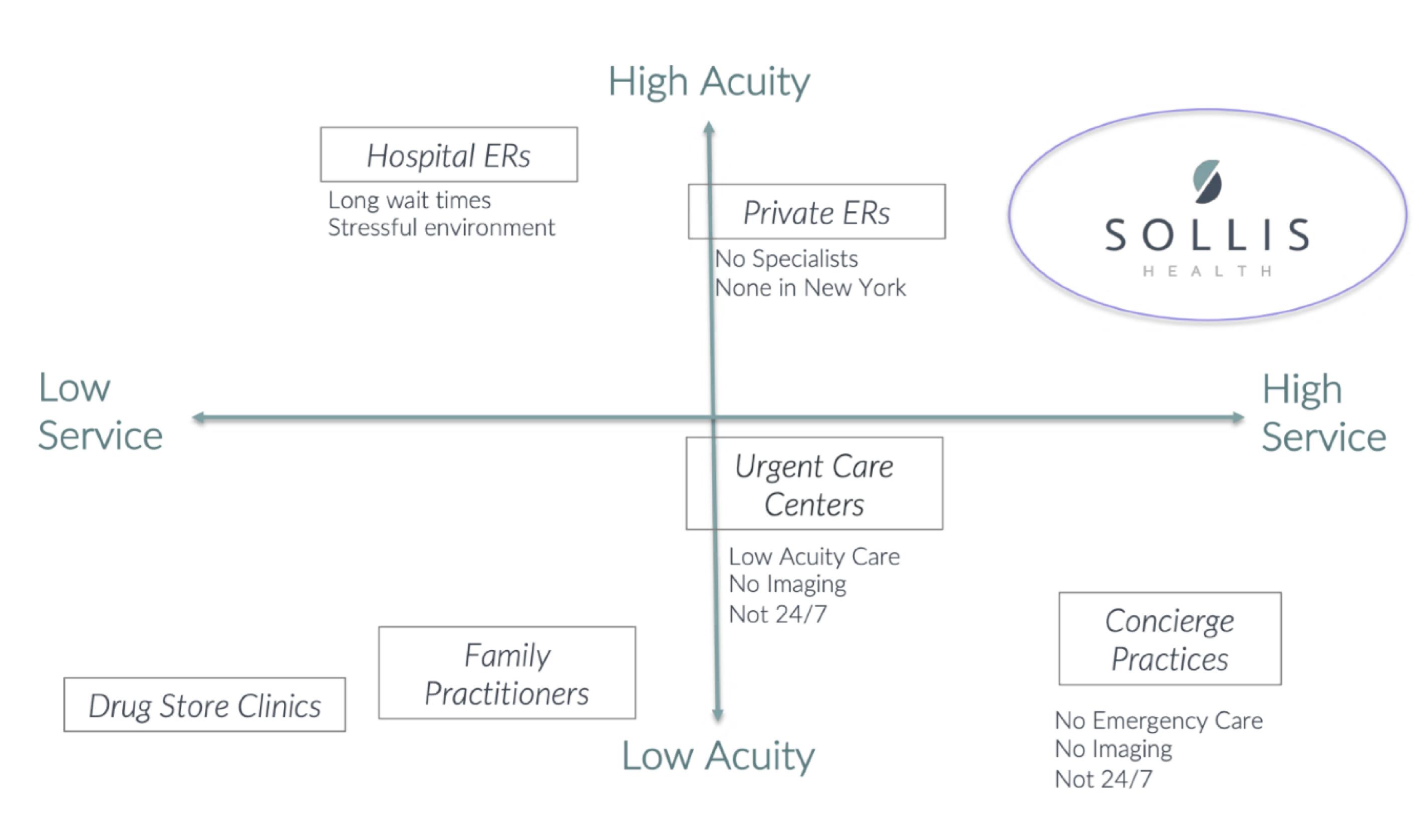
#### Patients per Physician per Hour



Source: Sollis Health, ACEP, AAUCM

# Our unique capabilities around acuity and service levels address an un-served niche that is highly attractive.



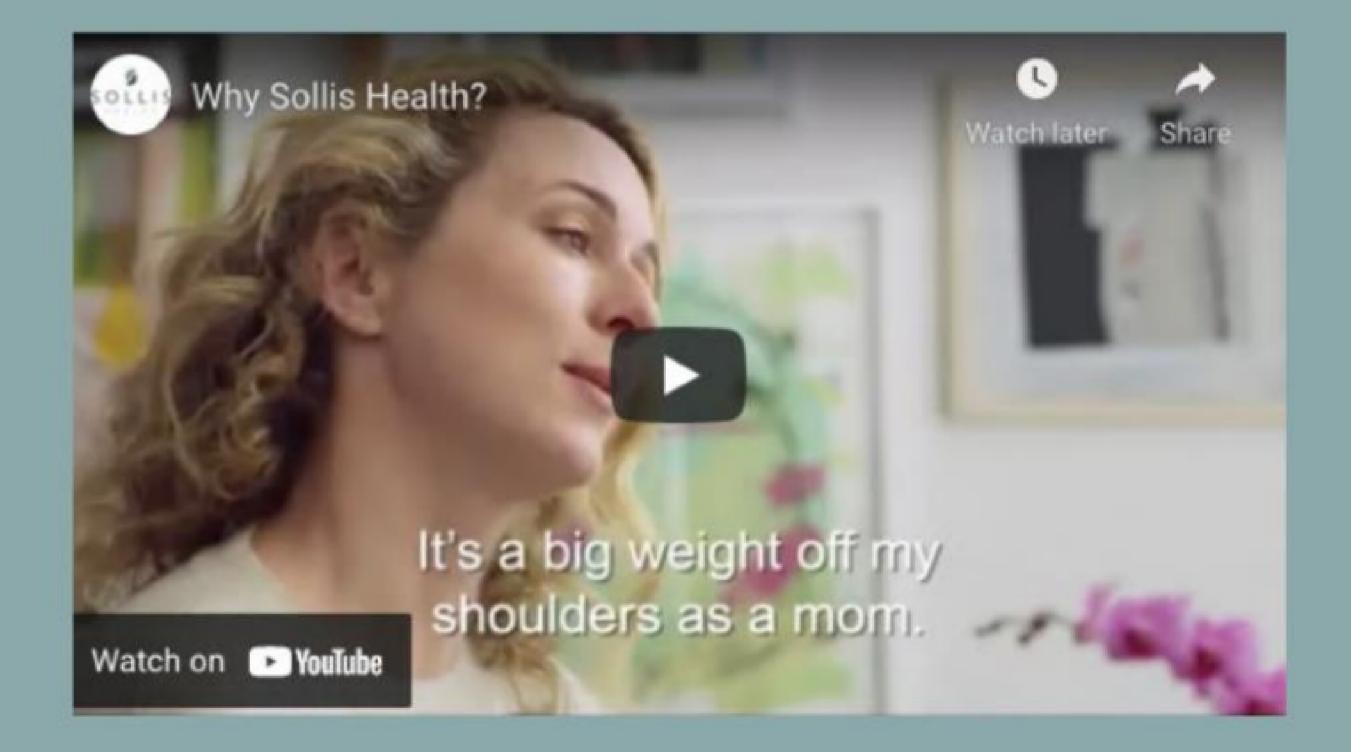


# Our teams and services have generated extraordinarily high customer satisfaction and industry recognition.





#### Testimonials



## Our management team has comprehensive experience across healthcare, start-ups and membership businesses.





Andrew Olanow Co-Founder / CEO

- 10 years as Healthcare Investor and analyst (Generation IM, Morgan Stanley, Merrill Lynch)
- Led sales & marketing and was Founding Partner at technology (ASP) start-up before sale



Sabine Heller Chief Commercial Officer

- President of NeueHouse, a membership-based coworking space, where she focused on growth and brand
- CEO and President of members-only social network ASMALLWORLD



Ben Kruger Co-Founder / President

- Former SVP acquisitions for NY family office Vandewater Capital in charge of healthcare and media investments
- Co-Creator and Head of Business Development for start-up media product



Hemik Patel EVP, Operations

- VP of Operations at Contessa (hospital-at-home startup), leading partnership with Mount Sinai in Northeast
- Executive Director at Medstar Medical, scaling from 10 to 35 locations under his leadership



lan Leber, MD Chief Medical Officer

- Former CMO of Optum-owned multispecialty chain ProHealth with >200 location s
- Board-certified in Emergency Medicine, having served as Emergency Chair and CMO at many hospital systems

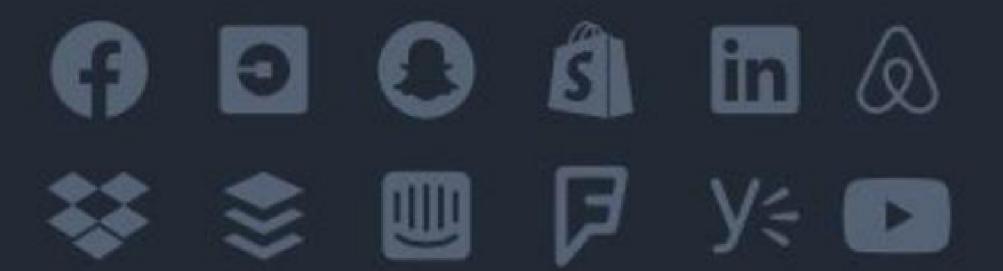


Joe Han VP, People & Culture

- Multi-industry and international HR professional at Procter & Gamble, AB Inbev, and Splice
- Former entrepreneur and business owner in manufacturing and wholesale distribution

### THANK YOU





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