

The expanding healthcare cost burden is increasingly transferred to consumers

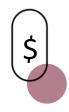
INSURED



The continuing rise of healthcare costs is unsustainable for all parts of the health care ecosystem.



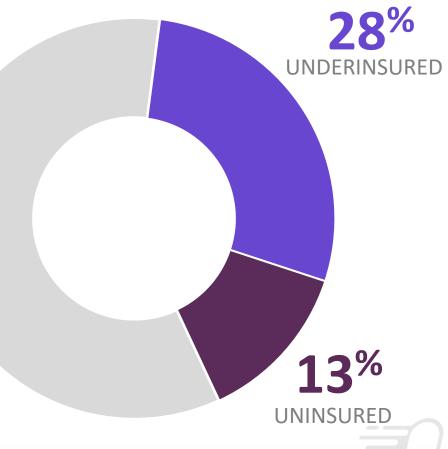
As costs rise unsustainably, payers and employers are increasingly passing on costs to the beneficiaries.



Most existing system participants predominantly cater to the sufficiently insured who can manage their out-of-pocket costs.

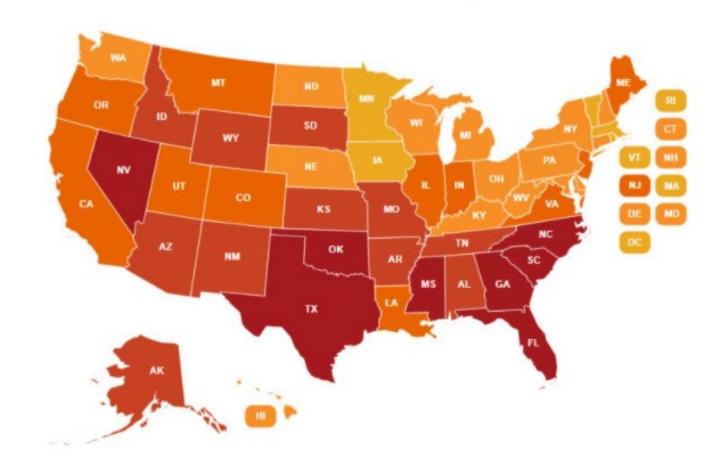


However, at the end of 2020, **41**% of the US population was underserved by the health insurance framework.



The Uninsured % Of the Population Continues to Expand

Uninsured Adults: May 2020





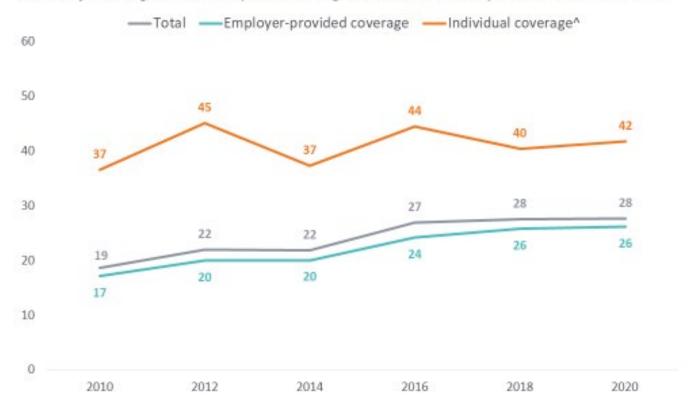


20%+

...and so is the Underinsured %

One-Quarter of Adults in Employer Plans Are Underinsured

Percent of adults ages 19-64 with private coverage who were insured all year and were underinsured



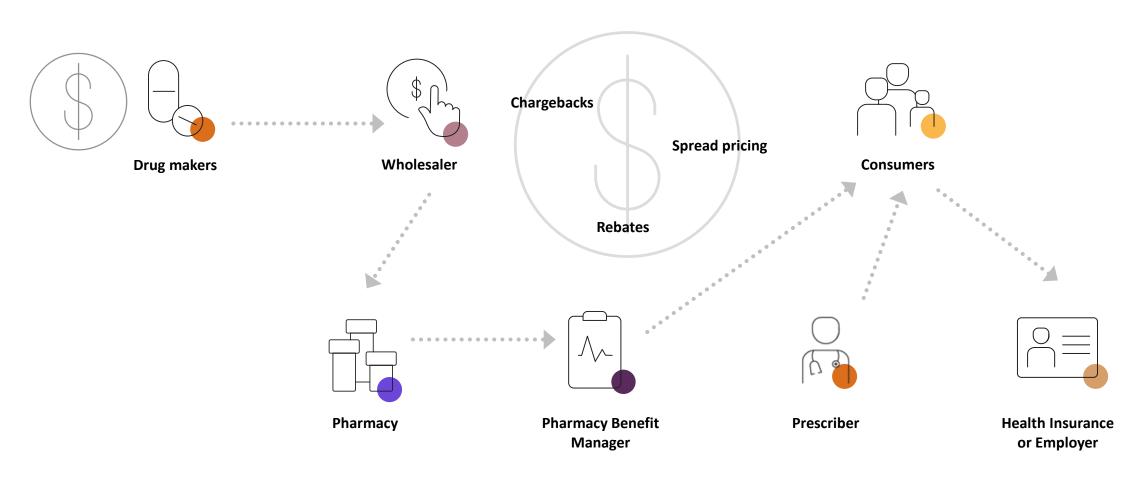
Notes: "Underinsured" refers to adults who were insured all year but experienced one of the following: out-of-pocket costs, excluding premiums, equaled 10% or more of income; out-of-pocket costs, excluding premiums, equaled 5% or more of income if low-income (<200% of poverty); or deductibles equaled 5% or more of income. Respondents may have had another type of coverage at some point during the year but had coverage for the entire previous 12 months. *For 2014-2020, Individual coverage includes adults who got coverage in the individual market and the market places.

Data: Commonwealth Fund Biennial Health Insurance Surveys (2010, 2012, 2014, 2016, 2018, 2020).



A complex pharma distribution system

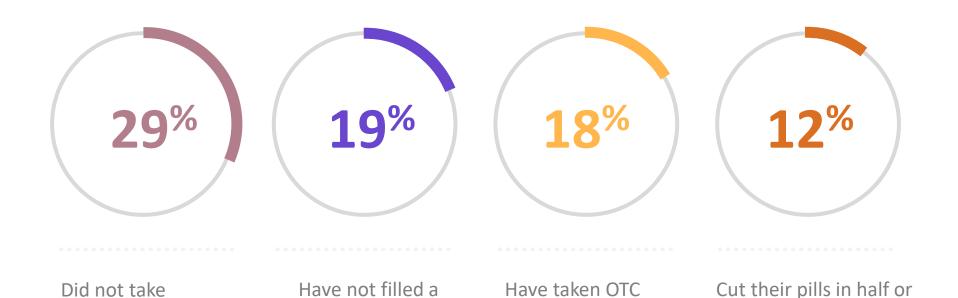
and disintermediated reimbursement system and supply chain control result in cost inflation



While a majority of adults have Rx prescriptions, 29% do not take Rx medicine as directed due to cost

drugs instead

skipped doses



prescription

adulte have

Most adults have prescription medicines, with over half of 65+ taking 4 or more

prescription medicine

as directed because

of cost

^{**} Kaiser Family Foundation, Health Tracking Poll

65% of patient out-of-pocket Rx costs are spent on generics

PATIENT OUT-OF-POCKET COSTS AND AFFORDABILITY Generics and branded generics account for 19% of invoice-level spending but represent 65% of patient out-of-pocket costs Exhibit 42: Share of Spending, Prescriptions and Patient Out-of-Pocket Costs by Product Type, 2016–2020 Patient Final Out-of-Pocket Costs Invoice Dollars (%) Adjusted Prescriptions (%) 8.4% 9.7% 8.8% 10.1% 10.3% 10.2% 56.1% 59.5% 62.5% 64.5% 65.9% 84.8% 86.2% 86.6% 87.4% 88.5% 0.6% 76.9% 78.7% 80.1% 0.6% 80.9% 73.8% 74.8% 0.6% 0.6% 0.6% 43.2% 39.9% 36.9% 34.9% 33.6% 4.8% 4.4% 4.1% 3.6% 3.5% 2015 2016 2017 2018 2019 2020 2015 2016 2017 2018 2019 2020 2015 2016 2017 2018 2019 2020 Unbranded generics Brands Branded generics Source: IQVIA National Sales Perspectives; IQVIA National Prescription Audit, Dec 2020; IQVIA LAAD Sample Claims Data, Dec 2020

The DiRx value proposition: Affordable Medicine For All

Direct access to generic medicine, increased affordability and adherence, to improve health and quality of life



DIRECT ACCESS to most prescribed generic Rx medications through an e-commerce platform

TRANSPARENT, affordable pricing for generic Rx medications through a cash-based, auto-refill program starting at \$3/month, >100 products at \$5/month

FOR B2B PARTNERS/EMPLOYERS: Custom formulary, low-cost options.



CAC for Digital/Mail Order Pharmacies

Higher than previously anticipated due to overall competitive mix

DiRx has a compelling value proposition due to direct sourcing

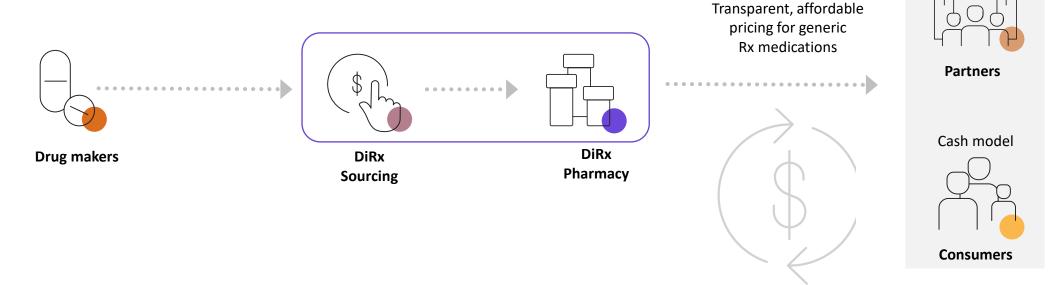


DiRx is the first cash-based digital pharmacy founded by generic industry experts.

This has helped create meaningful and transparent contracts without the usual pain points and without stepping on the toes of existing channel terms.

Besides, our target market (the 41% uninsured/underinsured) is different

from the traditional models.



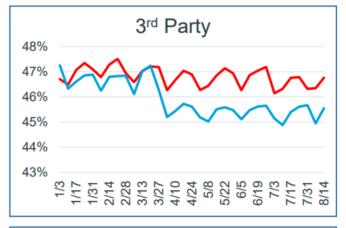
DiRx's Model Simplifies the distribution system

and shares the savings with consumers yielding beneficial results

- Everyone claims X% Off (from high "retail" reference prices); Ours is 95%+ Off the same reference prices.
- Specific case studies showed our pricing to be 15%-40% lower than benchmark pricing across product portfolios.
- Our cash pricing has been benchmarked to be at or below GoodRx pricing in most cases.
- Pricing on GoodRx and other platforms fluctuate over time whereas, as another first in this industry, we provide a 12-month price guarantee to consumers who sign up for our auto-refill program.

Market Data Provides Limited Data on "Discount Cards" and "Mail order" As Defined By The Reimbursement Framework

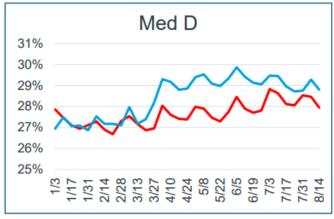
Multiple cash-based digital pharmacies have reached unicorn status though there's no market data tracking their TRxs, validating the choices the 41%+ are making.

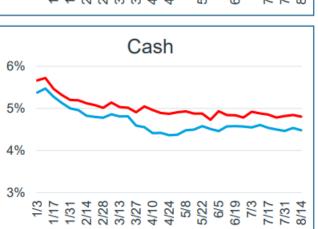


Medicaid

17%

15%







	%
Commercial Insurance	45.500%
Medicare	28.750%
Medicaid	15.750%
Cash	<mark>4.625%</mark>
Other/Discount Card	<mark>5.375%</mark>
	100.000%
	 2019
	 2020

Amazon will eventually figure its way around

But will continue to provide strong tailwinds for all digital pharmacies, accelerating consumer shift away from brick-and-mortar models





Thank you for your time and attention.

Satish Srinivasan
CEO

Satish.Srinivasan@DiRxHealth.com