



## ***2020 Annual Forum***

### **Innovator Showcase**

**Tuesday, November 10, 2020 | 2:00 PM- 3:00 PM ET**



**Gary Donlin**  
Director  
Employer  
Partnerships  
Thrive Earlier  
Detection



**Jeff Daniels**  
Sr. Director  
Thrive Earlier  
Detection



**Thomas Stambaugh**  
Chief Pharmacy  
Officer  
FLIPT, LLC



**Janet Poppe**  
Vice President  
Payer & Employer Relations  
Pacira BioSciences, Inc.



**#NatAllForum**

# Earlier Detection of Cancer with CancerSEEK

Gary Donlin

Director, Employer Partnerships

Thrive Earlier Detection



**Thrive.**  
Earlier Detection



# Who is Thrive Earlier Detection?

Thrive Earlier Detection is a new healthcare company grounded in 25 years of cancer research from Johns Hopkins University.



**Mission: Save lives by making earlier detection of cancer a part of routine medical care.**

- Series A: \$110 Million (May 2019)
- Series B: \$257 Million (July 2020)
- 125+ Employees and growing
- Cambridge, MA and Baltimore, MD



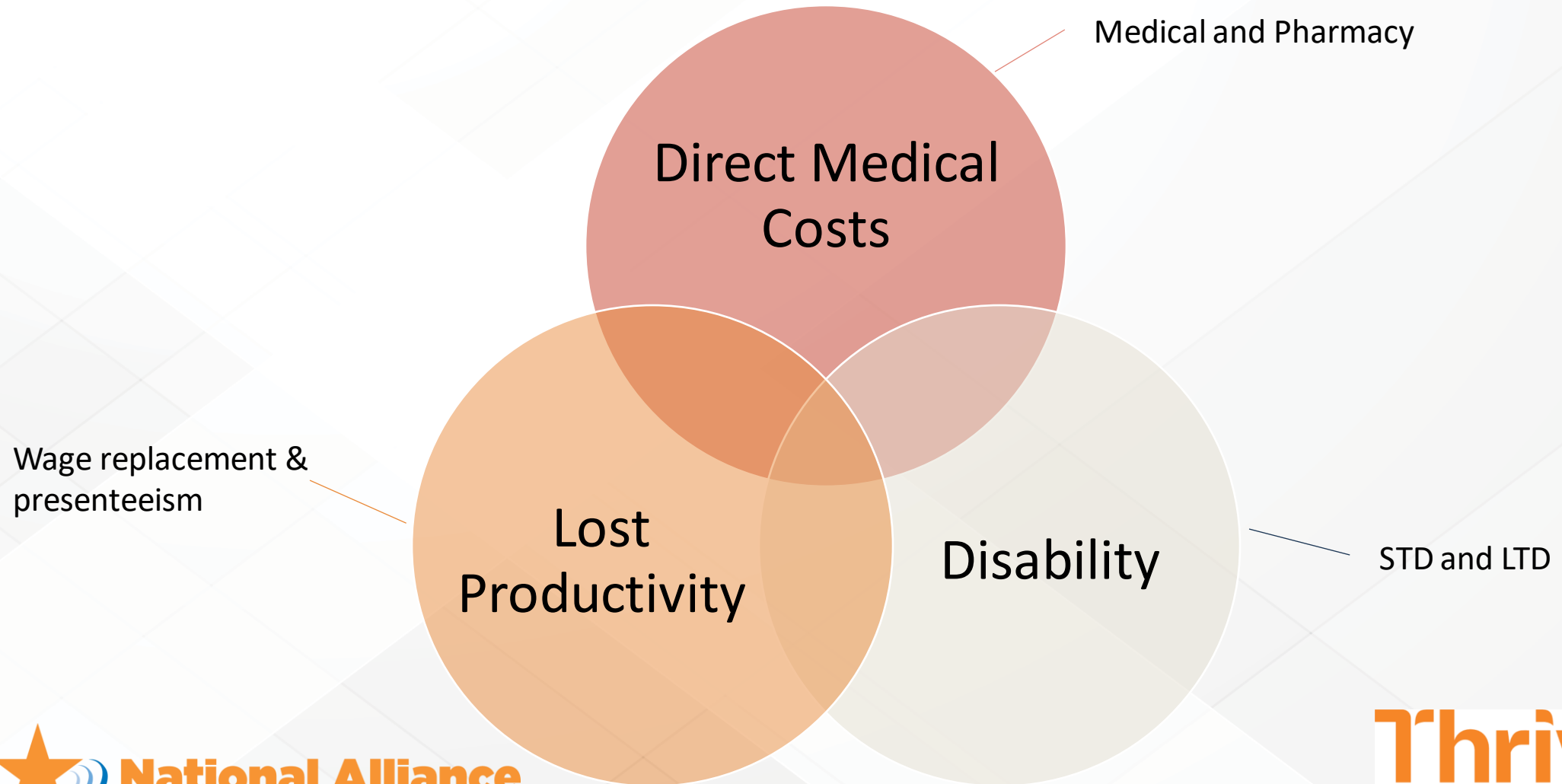
# Cancer is the Second Leading Cause of Mortality in the US



In the US, 1 in 3 women and 1 in 2 men will be diagnosed with cancer during their lifetime.

Source: <https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2020.html>

# The Burden of Cancer on Employers





# The Burden of Cancer on Employees



**National Alliance**  
of Healthcare Purchaser Coalitions  
Driving Innovation, Health and Value

Source: American Cancer Society

**Thrive.**  
Earlier Detection

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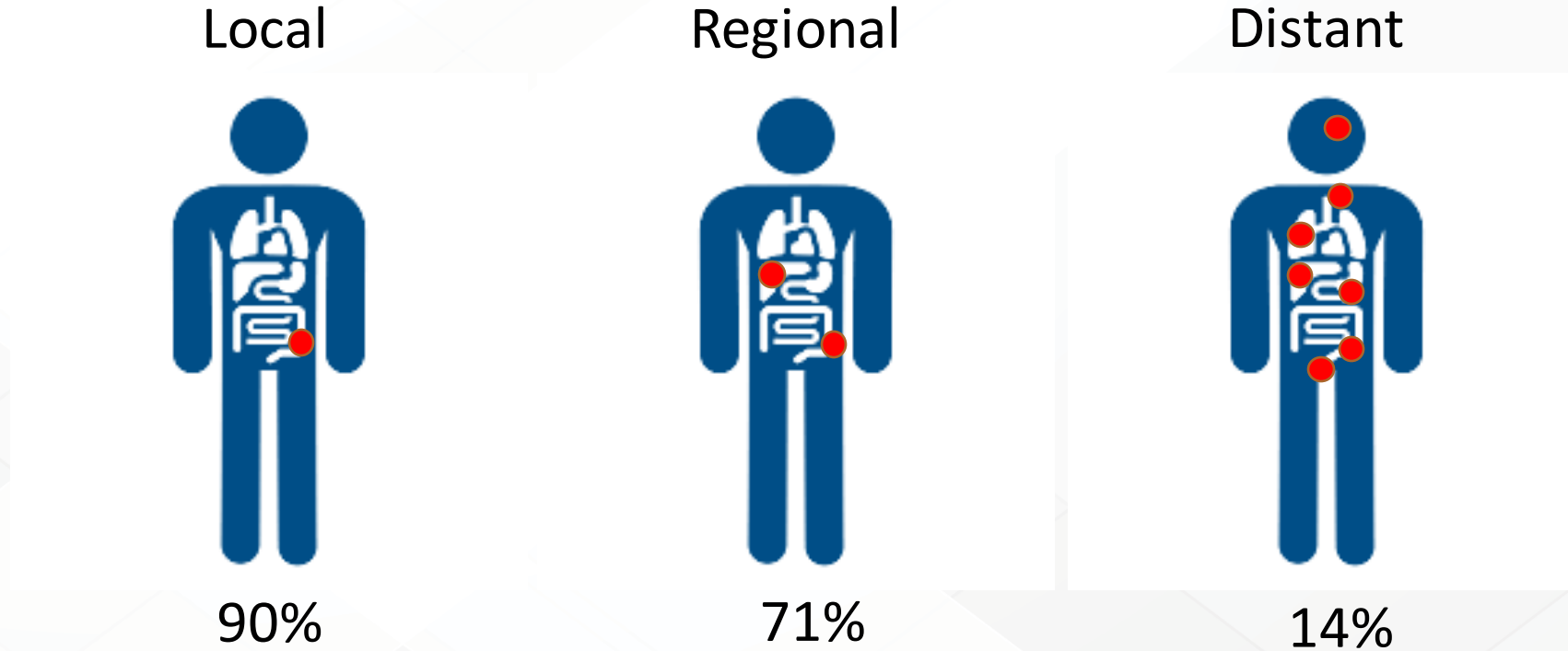
# The Cancer Screening Gap is Massive

2 million cancer  
diagnoses in the  
U.S. annually

70% of cancers  
have no  
screening tests

90% survival  
if detected  
early

# Survival Improves if Cancer is Detected Early

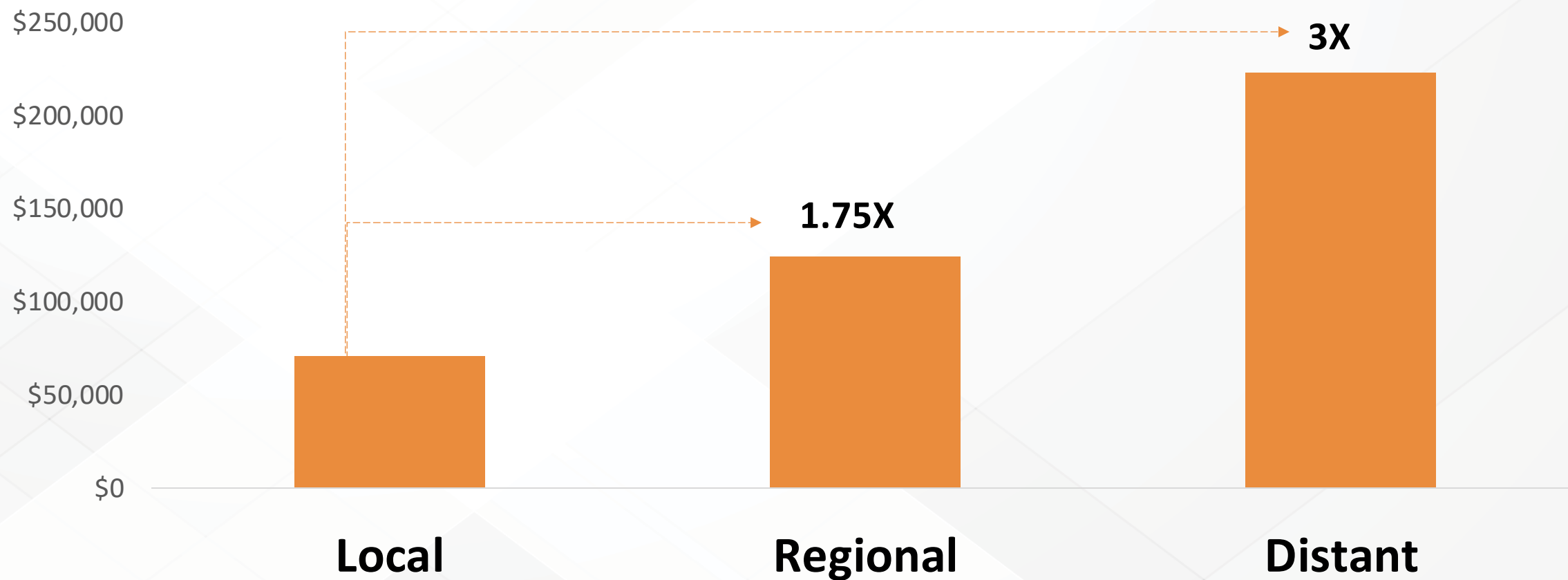


% individuals alive 5 years after diagnosis with colorectal cancer by stage

Sources: <https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2020.html>; <https://seer.cancer.gov/>; <https://acsjournals.onlinelibrary.wiley.com/doi/pdf/10.3322/caac.21551>; <https://www.cancer.net/cancer-types/sarcoma-soft-tissue/statistics>; <https://www.cancer.net/cancer-types/lymphoma-non-hodgkin/statistics>



# The Financial Burden Increases when Cancer is Detected Late



Mariotto et al, Cancer Epidemiol Biomarkers Prev 2020;29:1304-12; reflects avg medical and prescription costs in 2019 US dollars

# Shifting the Paradigm with a Blood Test

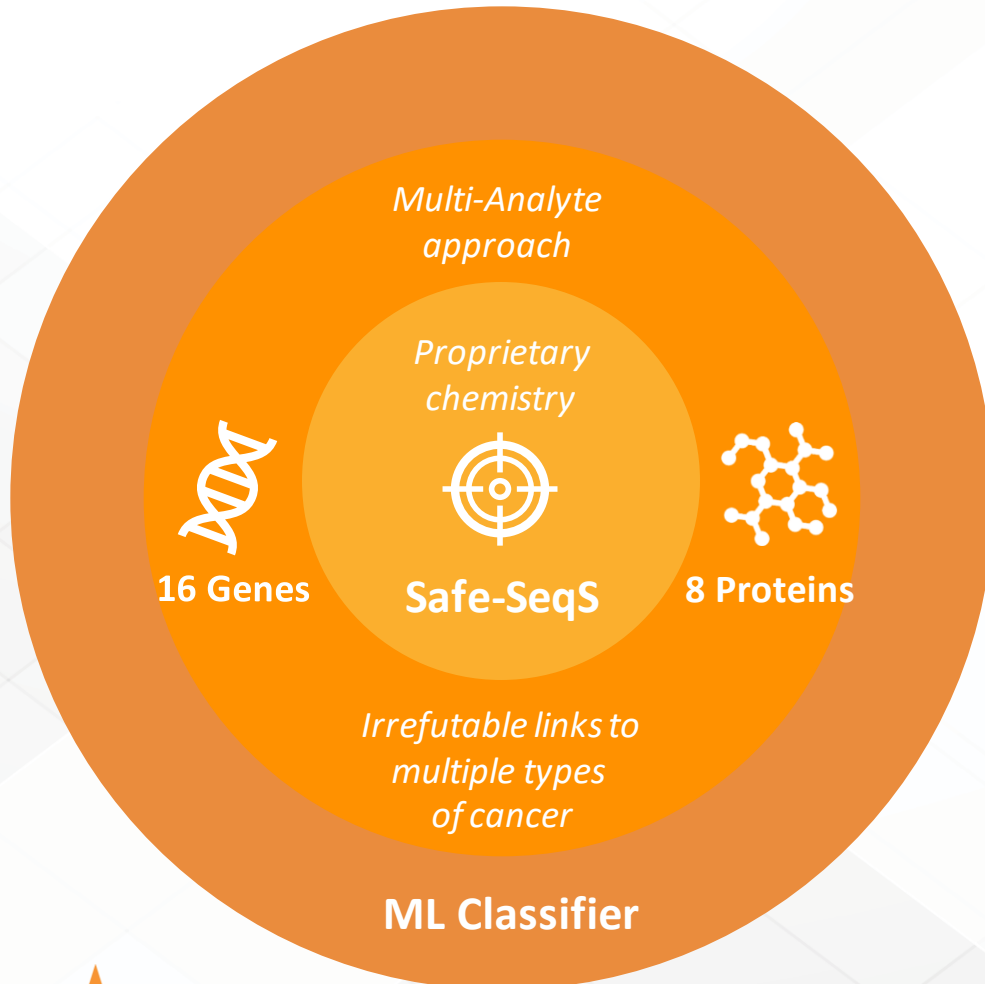
Guiding principles for Product Development

Multiple  
Cancers

Trusted  
Result

Seamless  
Experience

# THRIVE EARLIER DETECTION'S SOLUTION: CancerSEEK



- ✓ Detects multiple cancer types with a single blood draw
- ✓ Targets biomarkers irrefutably associated with cancer (>25 years of research at JHU)
- ✓ "Rule-in" approach designed to minimize false positive tests (< 1%)
- ✓ Includes up front and ongoing medical and navigation support



Cohen et al., Science 23 Feb 2018: Vol. 359, Issue 6378, pp. 926-930  
**National Alliance**  
of Healthcare Purchaser Coalitions  
Driving Innovation, Health and Value

**Thrive.**  
Earlier Detection

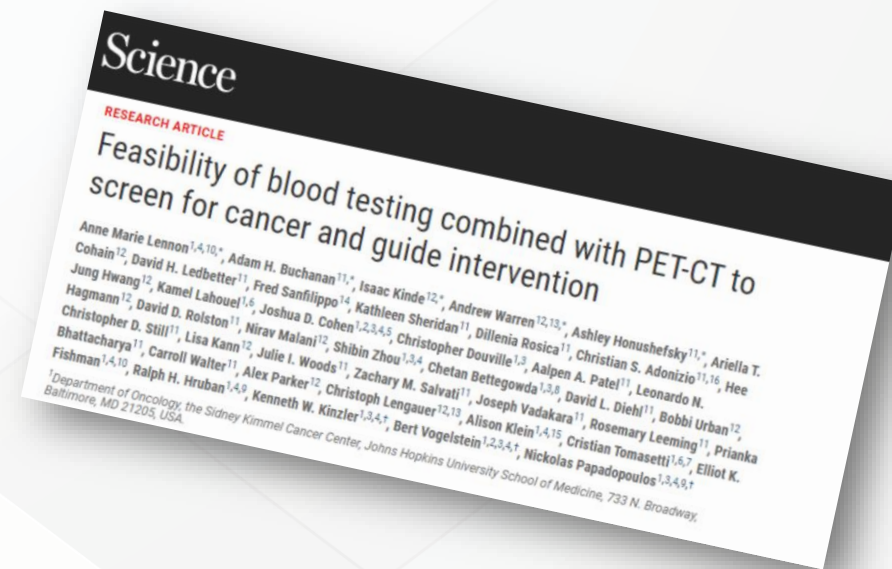
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# 2020 Landmark Study: DETECT-A

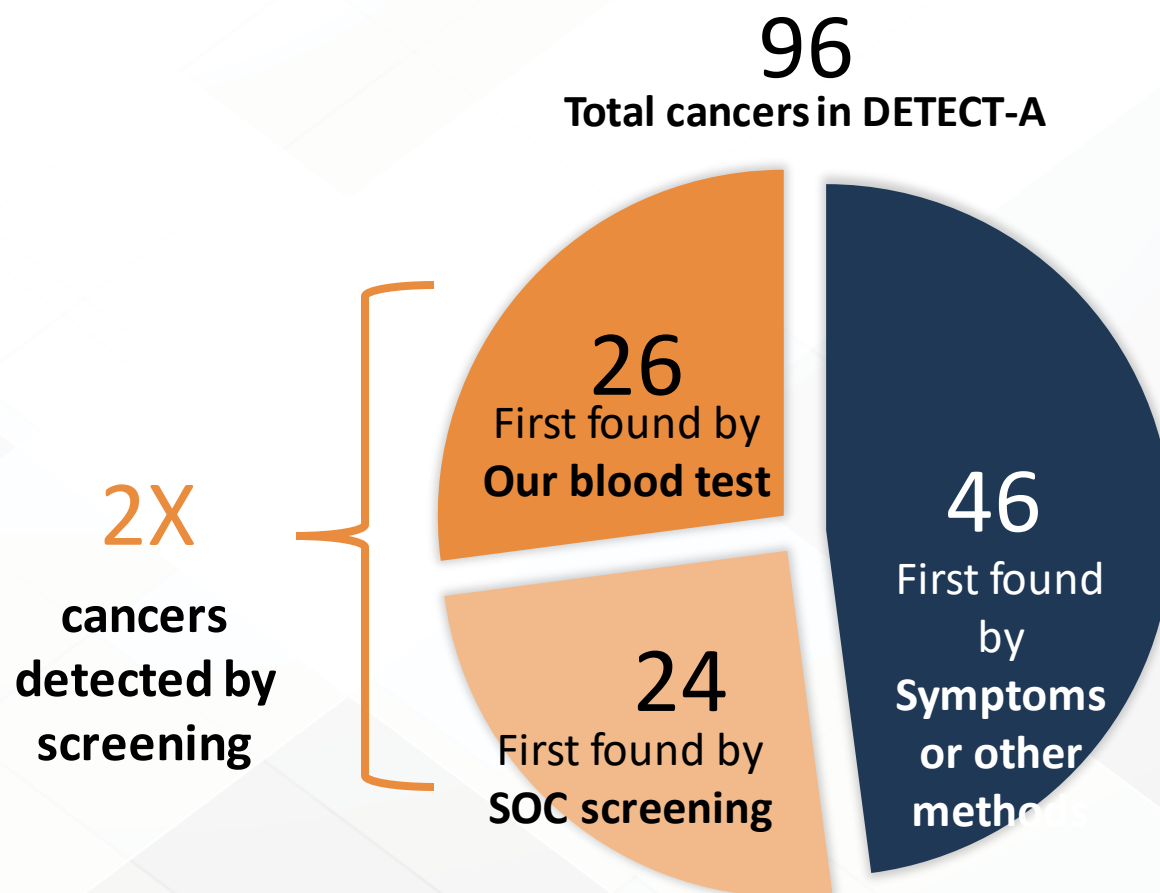
DETECT-A is the first prospective, interventional multi-cancer study of its kind.

## ENROLLMENT:

- September 2017 – May 2019
- 10,006 women enrolled (9,911 screened)
- Aged between 65-75
- Only exclusion criteria: *No prior history of cancer*

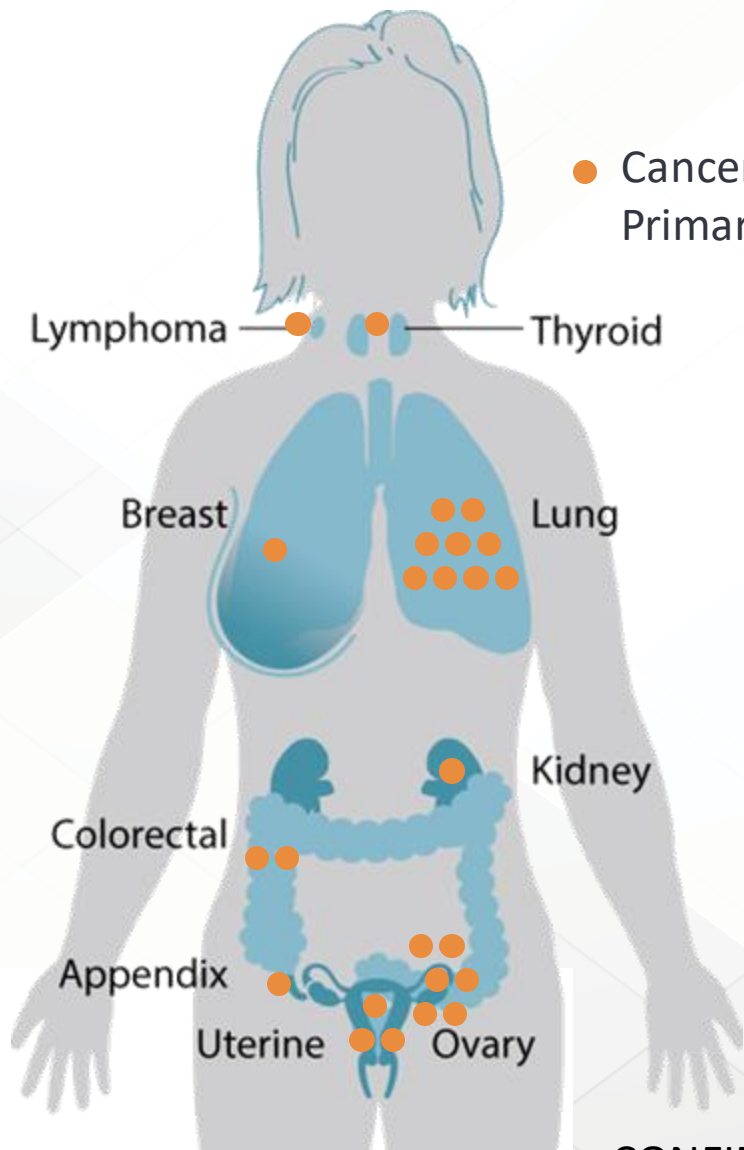


# CancerSEEK Doubled the Number of Screen-Detected Cancers





# Cancer Detected in 10 Organs, 7 Have No Other Screening Option



● Cancer of Unknown Primary (CUP)

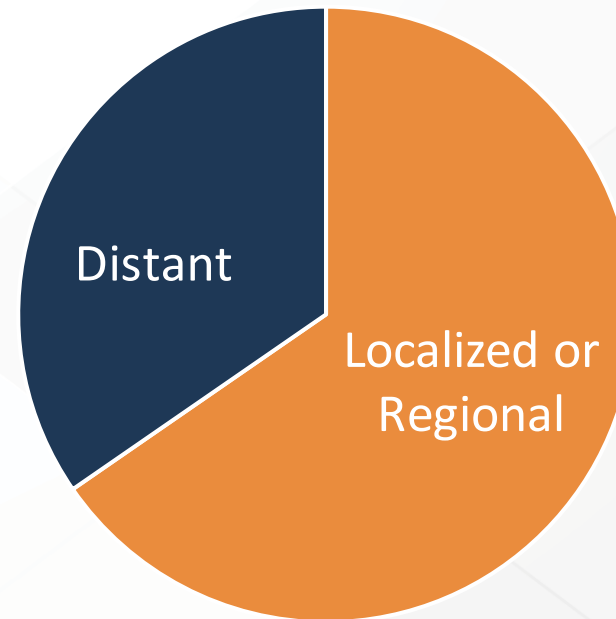
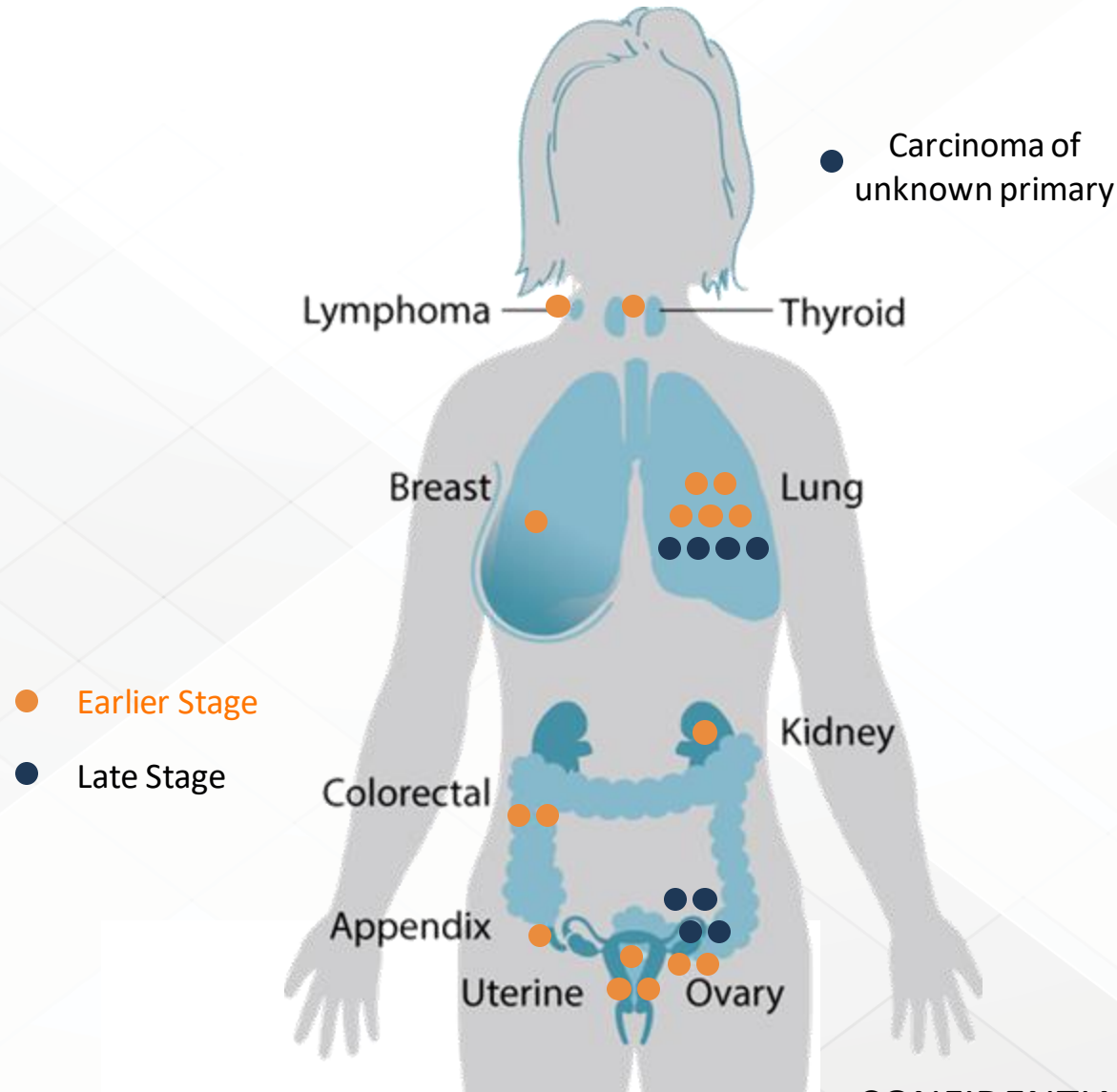
10 ORGANS

7 ORGANS WITH NO SOC SCREENING

	Our Blood Test	SOC Screening
Ovary	✓	No screening tests available
Thyroid	✓	
Lymphoma	✓	
Uterine	✓	
Appendix	✓	
Kidney	✓	
CUP	✓	
Breast	✓	✓
Colorectal	✓	✓
Lung	✓	✓*

\*LDCT only indicated for high risk populations

# 2/3 of Cancers Detected by CancerSEEK were Earlier Stage



**65%**  
of detected cancers

**Thrive.**  
Earlier Detection

# We are Already Impacting Patient Lives in a Meaningful Way



Rosemary had a Stage I ovarian cancer that was detected and surgically removed.

*"I never thought I would be the one. I have had no side effects from the surgery and am back to doing everything I did before."*

95%

agreed participating in the study was the right decision

96%

would participate again

- Very high patient satisfaction
- Adherence with other screening tests remained high

# Why Adopt Thrive Earlier Detection's CancerSEEK

Catching cancer earlier **improves survival and lowers healthcare costs**

Blood-based format **minimizes barriers to screening** participation

Complements and **reinforces employee health and wellness** programs

Provides an **attractive new option** for employers in a target population

# Thank You

Please visit our virtual exhibit from 5-6 p.m.



# Join the Revolution in Pharmacy Benefits

High Tech. High Touch. Transparent.

# Current PBMs Burden The Healthcare System With Massive Spreads

**\$96 PMPM**

**Retail and Wholesale**

Gross margin retained by  
pharmacies  
and wholesalers

22%

**PBMs**

Net revenue retained by PBMs

26%

**Manufacturers**

Net revenue to drug  
companies

52%

Total

Extra cost to the system estimated at  
**>\$100 Billion annually**

# Flipt: a Full PBM Replacement

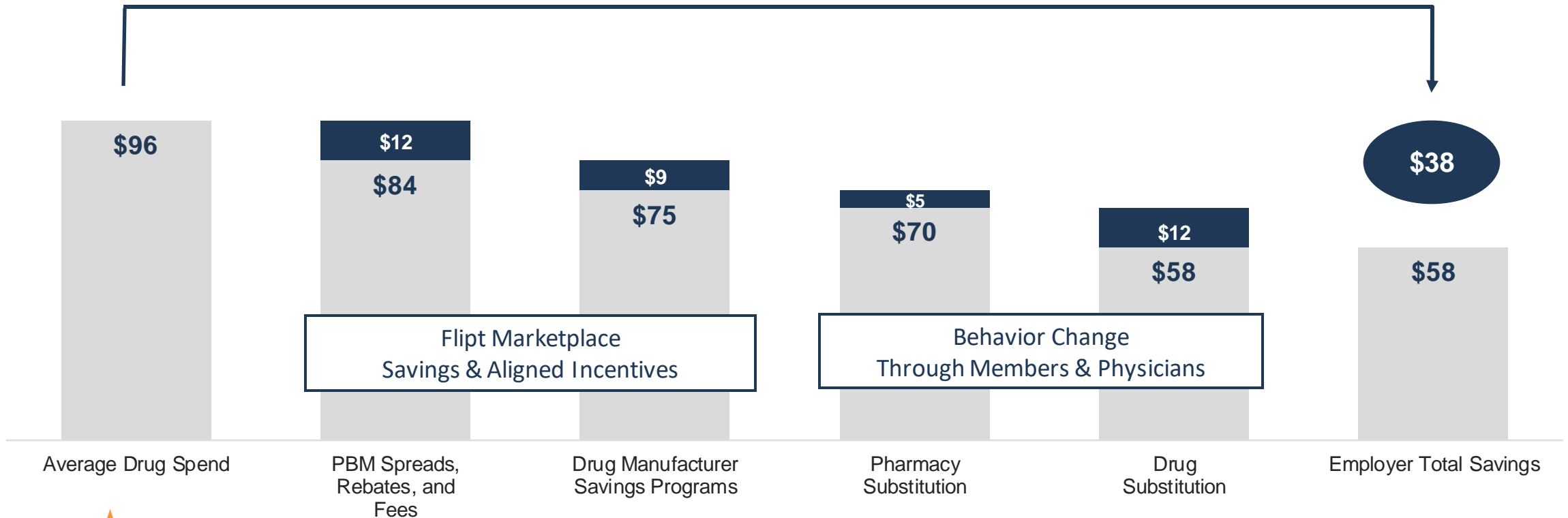
Why is Flipt better than other new PBMs?

- Helps members be more informed purchasers of pharmaceuticals
- Creates a marketplace for pharmacies and pharmaceutical companies to compete
- Provides a better experience for members to manage their pharmacy benefit

More choice, engaged members, and up to  
**40% lower pharmacy spend**

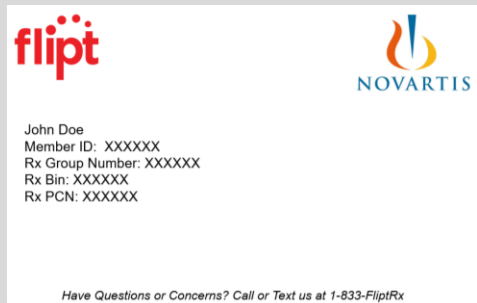
# Flipt Delivers Addressable Savings up to 40%

Flipt PMPM for an average corporate plan administered by a large PBM

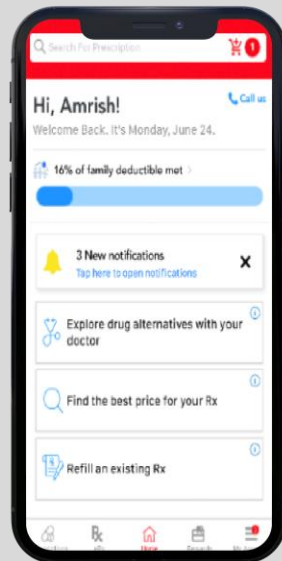


# The Flipt Member Touchpoints

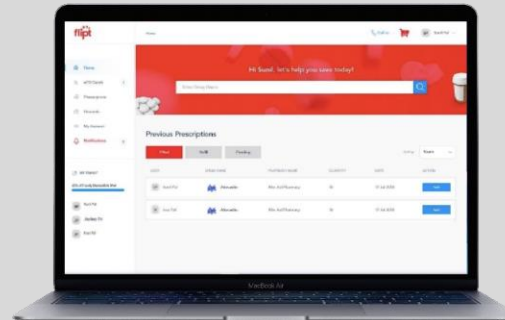
We intersect the member in their natural journey



Traditional  
Approach



Mobile  
App



Website



Text  
Messaging

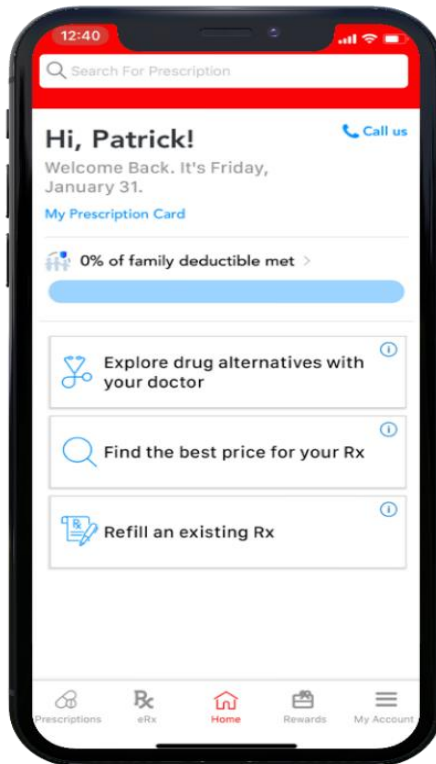


Call or  
Email

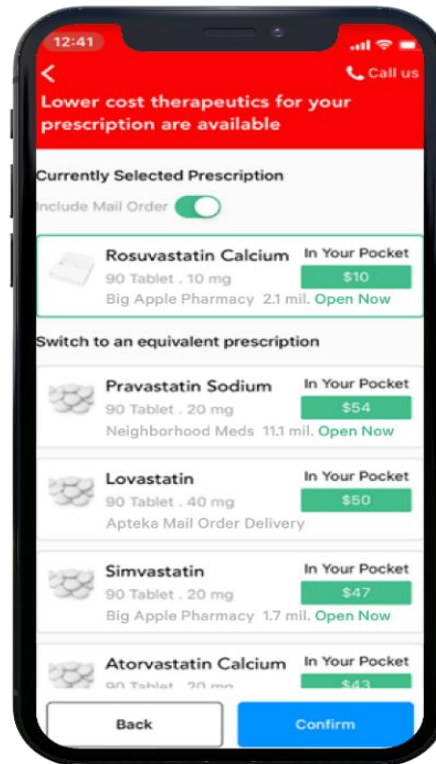


# Pharmacy Benefits Made Easy

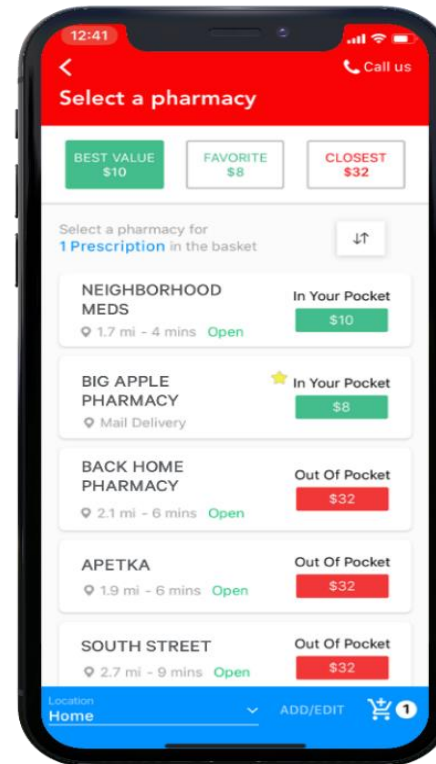
KNOW  
YOUR  
BENEFITS



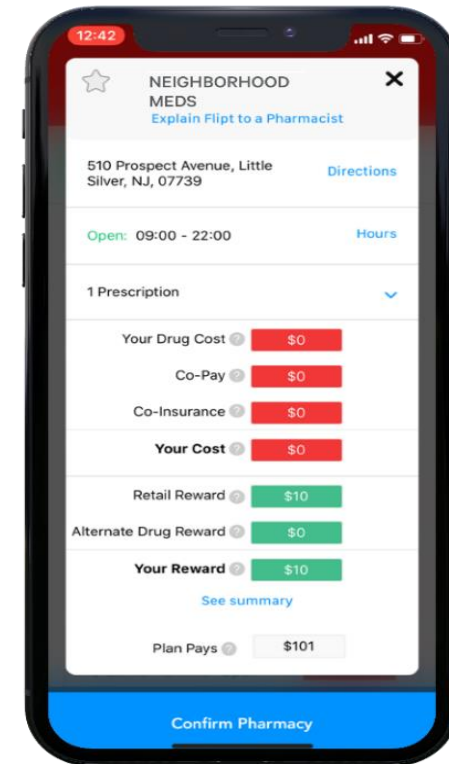
KNOW  
YOUR  
CHOICES



KNOW  
YOUR  
COSTS

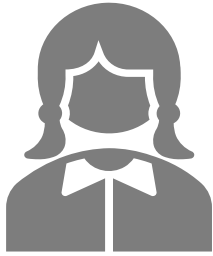


EARN  
REWARDS



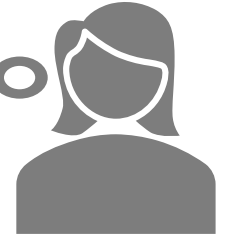
# What Our Clients and Their Members Are Saying

*"I appreciate the follow-up for my \_\_\_\_, thank you so much for getting back to me."*



*"In this world it's hard to find people that go above and beyond."*

*"So you're going to call my Dr.? This is a great service thank you."*



*"Thank you for making the process so simple."*

*"Thank you I love talking to a human and not an automated system."*

*"This app is great!"*

*"That would be great if you could call the pharmacy for me. This is perfect, I appreciate the follow-up."*



**National Alliance**  
of Healthcare Purchaser Coalitions  
Driving Innovation, Health and Value



# Why Flipt

A strategic and aligned partner for employers

- Leverage modern technology to drive a seamless member experience
- Provide white glove concierge service
- Marketplace savings from pharmacies and pharmaceutical companies
- Simple and transparent fee
- Member and physician behavior change with pharmacy benefits



FOR TKA AND OA KNEE PAIN

# THE POWER TO STOP PAIN COLD

**iovera<sup>o</sup>**  
Stop pain cold.

**PACIRA**  
BIOSCIENCES, INC.

Please see Indication for Use and Important Safety Information at the end of this presentation. For more information, please visit [www.iovera.com](http://www.iovera.com).



## **MISSION**

Provide an opioid alternative to as many patients as possible



## **VISION**

Become a global leader in delivering innovative non-opioid pain management and regenerative health solutions



## **CORE VALUES**

Patient-centered, determined, passionate, innovative thinkers, trust builders, team driven



iovera°  
Stop pain cold.



# The Prevalence of Symptomatic Knee Osteoarthritis (OA) Has Been Increasing in the United States Over the Last Several Decades

In patients with symptomatic knee OA



**51%**

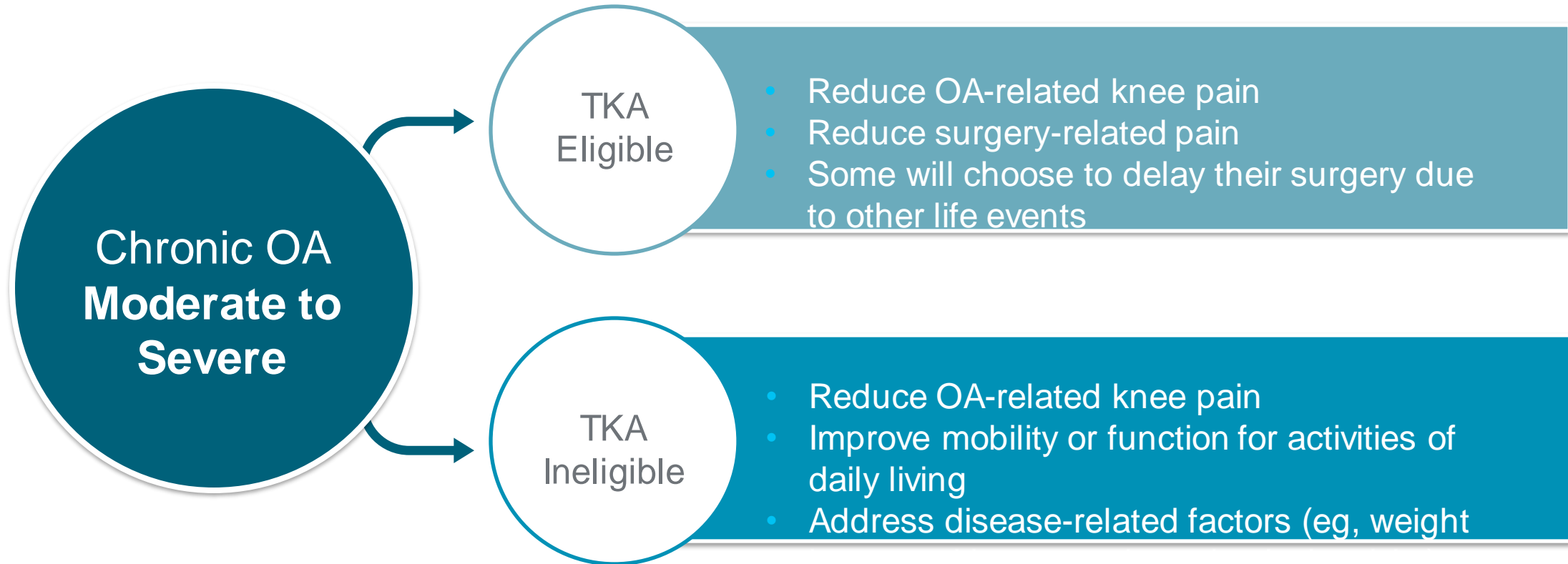
of those **45 to 64 years** of age  
have advanced knee OA

**67%**

of those **≥65 years** of age have  
advanced knee OA



# American Academy of Orthopaedic Surgeons Guidelines for OA and TKA



# Opioid Use for Pain Control Can Come With Many Costs Costly to Payers and Employers

Opioid abuse  
and  
dependence  
**treatment  
costs  
increased<sup>1</sup>**

**1000%  
\$19,333**

**is the average  
annual cost to treat  
opioid**

Workers'  
compensation  
claimants on  
long-term opioids  
(>90 days typically)

**DO NOT  
return to work<sup>3</sup>**

**Up to 85%**  
of workers'  
compensation claims  
with pain  
medication prescriptions  
include opioids<sup>2</sup>  
Total workers'  
compensation claim  
costs are up to  
**8x higher**  
for patients prescribed



1. Counting the cost of opioid abuse. Optum website <https://www.optum.com/resources/library/counting-cost-of-opioid-abuse.html>. Accessed August 12, 2019; 2. Thumula V, et al. Interstate variations in use of opioids, 4th edition. Workers Compensation Research Institute. <https://www.wcrinet.org/images/uploads/files/wcri287.pdf>. Accessed August 12, 2019; 3. Rosenblum KE. Opioids wreak havoc on workers' compensation costs. Lockton, Inc. website. [http://www.lockton.com/whitepapers/Opioids\\_Wreak\\_Havoc\\_on\\_Workers\\_Compensation\\_Costs.pdf](http://www.lockton.com/whitepapers/Opioids_Wreak_Havoc_on_Workers_Compensation_Costs.pdf). Accessed August 12, 2019.



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# The iovera° System: a Cryoanalgesia Platform



## SIMPLE PERCUTANEOUS TREATMENT USING **PROVEN COLD THERAPY** **DESIGNED TO RELIEVE PAIN**

- Immediate, safe, effective<sup>1,2</sup>
- Nonsystemic<sup>3</sup>
- Long-lasting nerve block<sup>1</sup>
- FDA-cleared to treat the pain and symptoms of osteoarthritis
- Established billing codes



1. Radnovich R, et al. *Osteoarthritis Cartilage*. 2017;25(8):1247-1256; 2. Dasa V, et al. *Knee*. 2016;23(3):523-528; 3. Ilfeld BM, et al. *Expert Rev Med Devices*. 2016;13(8):713-725.





# Nerve Anatomy

A nerve is an enclosed, cable-like bundle of axons (the long, slender projections of neurons) in the peripheral nervous system<sup>1</sup>

## Endoneurium<sup>2</sup>:

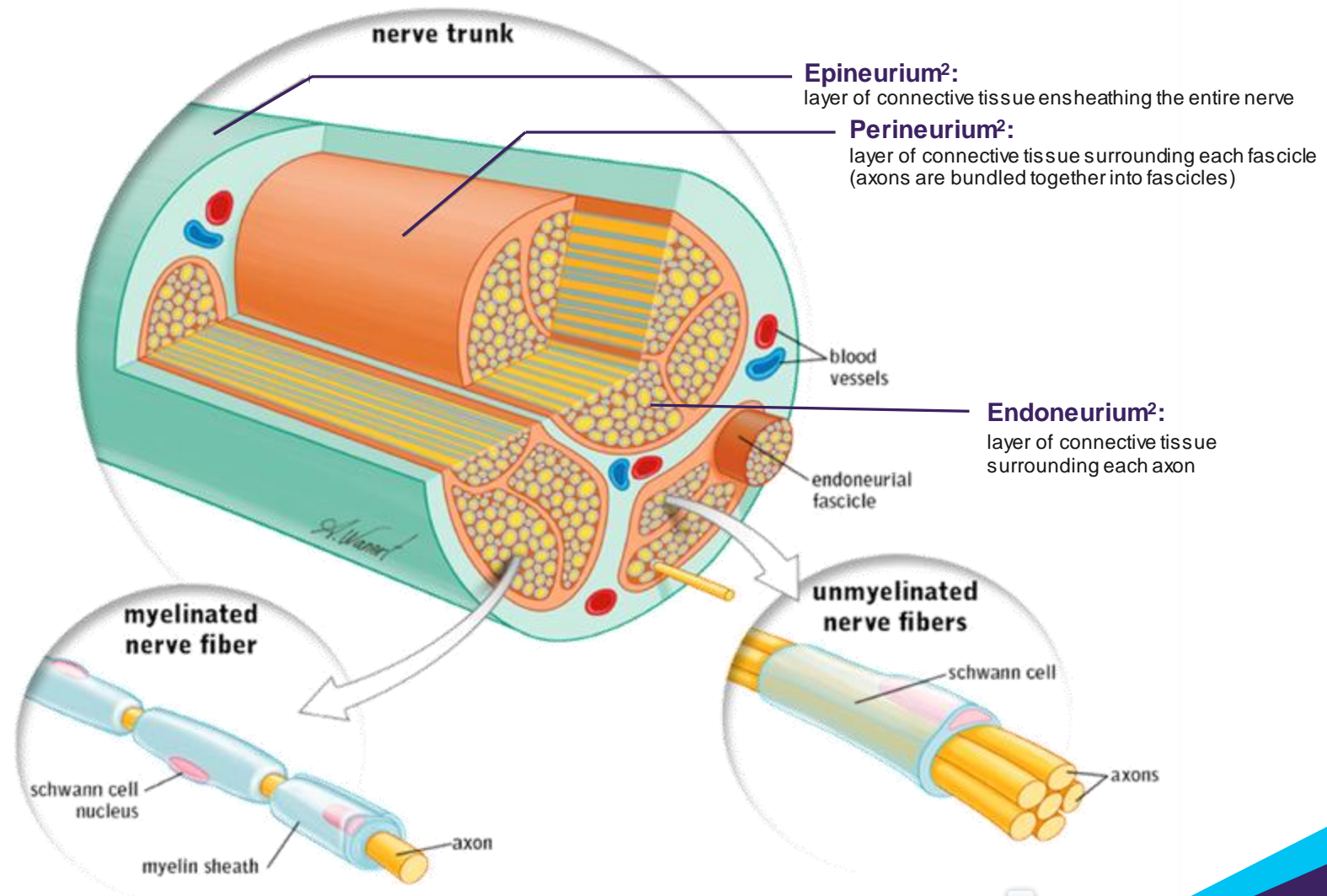
layer of connective tissue surrounding each axon

## Perineurium<sup>2</sup>:

layer of connective tissue surrounding each fascicle (axons are bundled together into fascicles)

## Epineurium<sup>2</sup>:

layer of connective tissue ensheathing the entire nerve



1. O'Toole MT, ed. *Miller-Keane Encyclopedia and Dictionary of Medicine, Nursing, and Allied Health*. 7th ed. Philadelphia, PA: W.B. Saunders; 2003;  
2. Gray H. *Anatomy of the Human Body*. Philadelphia: Lea & Febiger; 1918; Published online 2000; <https://www.bartleby.com/107/illus636.html>. Accessed March 10, 2020.

# How iovera° Works



Liquid N<sub>2</sub>O  
Cartridge  
>850 psi  
Boiling point  
(-88° C)

Flow  
control  
valve

Gas exits into  
Handpiece -  
nothing is  
injected  
into the  
body

Skin  
warmer

Micro-  
needles

Cold zone  
forms

Liquid  
refrigerant  
expands to  
gas  
cooling  
tissue at tip  
forming  
precise  
cold zone

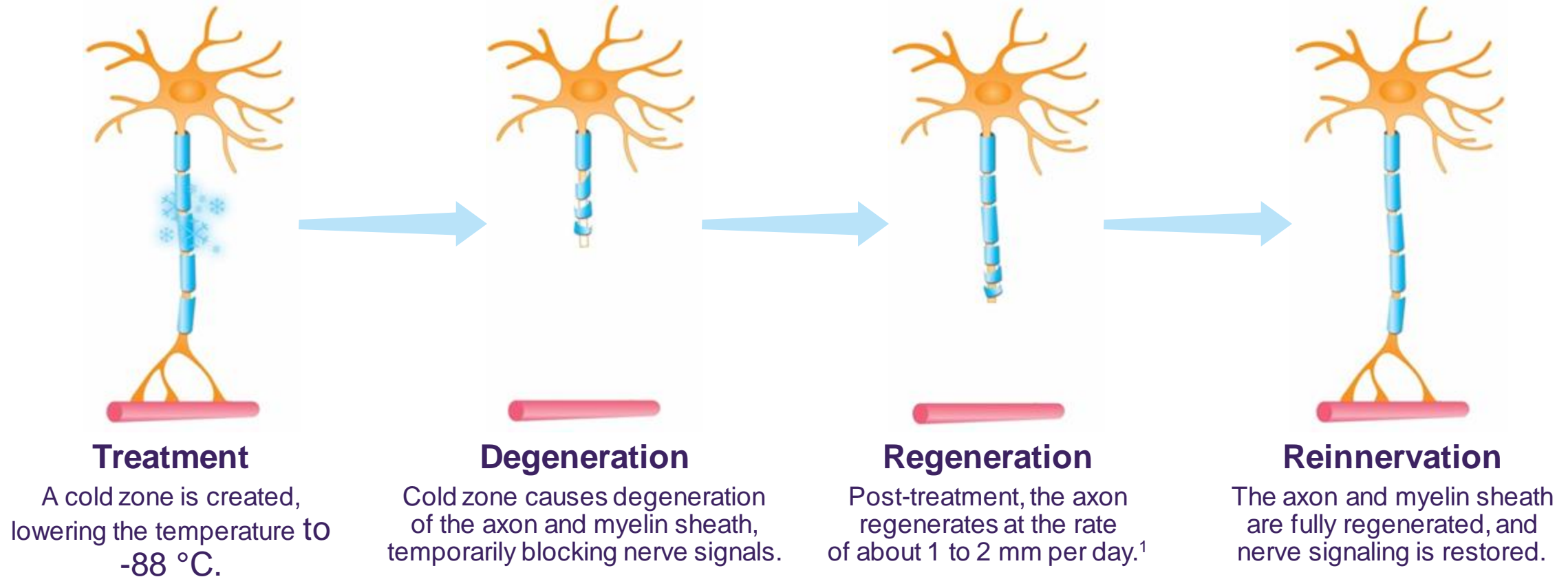
Closed-  
end tips

Drawings not to scale. For illustrative purposes only.



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# The iovera<sup>o</sup> System: Mechanism of Action\*



\*Motor nerve depicted; same mechanism of action for sensory nerves.

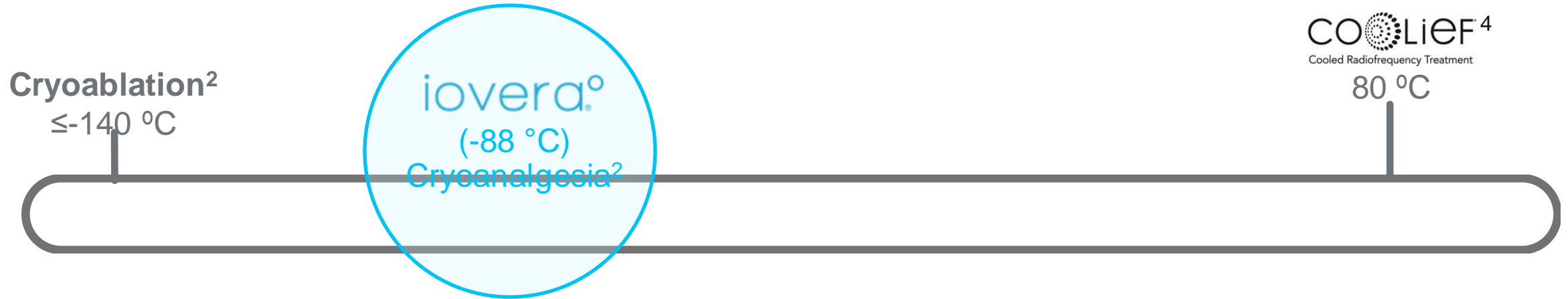
Evans PJ, et al. *Br J Anaesth*. 1981;53(11):1121-1127.



iovera<sup>o</sup>  
Stop pain cold.



# Comparison of Thermal Neurolytic Agents<sup>1,2</sup>



	Cryoablation <sup>4</sup>	iovera° Cryoneurolysis <sup>5</sup>	Cooled/Conventional RF <sup>3</sup>
<b>Conversational synonyms</b>	Cryosurgery	Cryoanalgesia	RF ablation
<b>Clinical Application</b>	Tumor destruction	Pain relief	Pain relief
<b>Mechanism of action</b>	Process that uses extreme cold to permanently destroy nerves or abnormal tissues	Treatment that temporarily blocks nerve conduction along peripheral nerve pathways	Heat-based ablation
<b>Duration of effect</b>	Permanent	Temporary	Temporary
<b>Temperature</b>	≤-140 °C patient history	-88 °C	80 °C
<b>Safety</b>	Complete destruction of nearby tissues	Risk of local bruising; no effect on nearby tissues	Potential damage to nearby tissues and blood vessels

Abbreviation: RF, radiofrequency.

1. Zhou L, et al. *Journal of the Analgesics*. 2014;2:16-22; 2. Ilfeld BM, et al. *Expert Rev Med Devices*. 2016;13(8):713-725; 3. Chen AF, et al. *BMC Musculoskelet Discord*. 2020;21(1):363;
4. Erinjeri, JP, et al. *J Vasc Interv Radiol*. 2010;21(8 suppl):S187-S191; 5. Dasa V, et al. *Knee*. 2016;23(3):523-528.

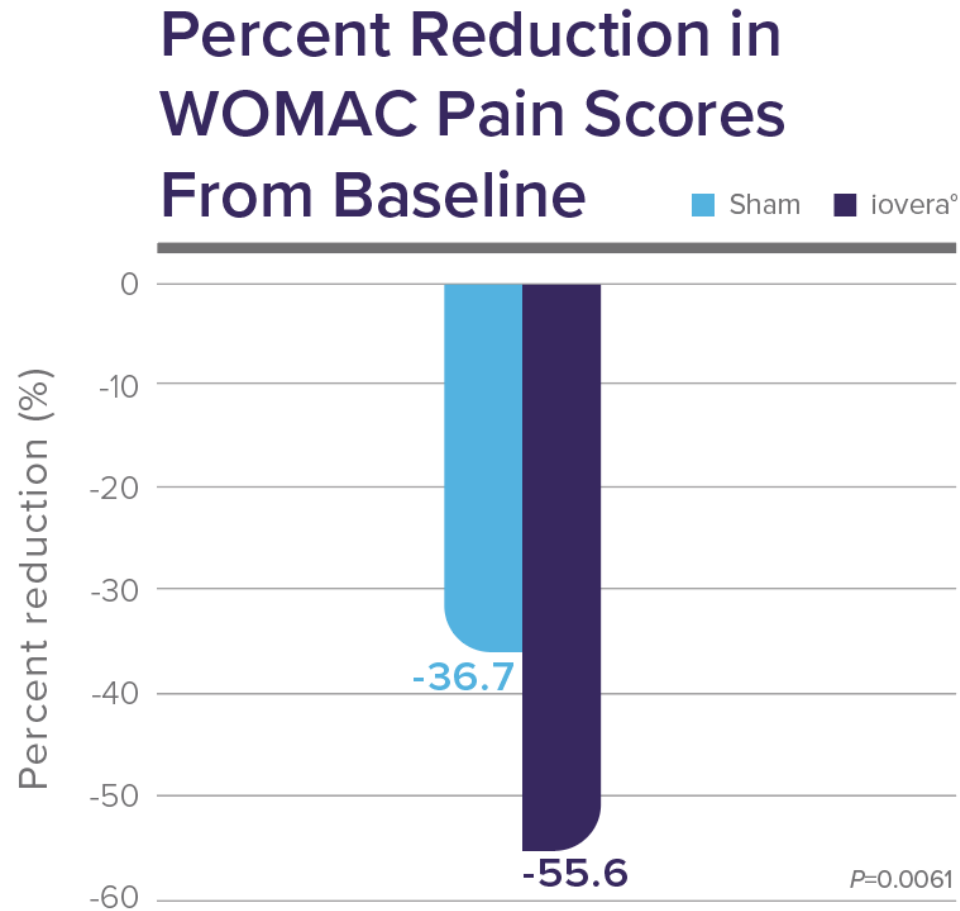


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# Patients Who Received iovera<sup>o</sup> Treatment Continued to Experience Pain Relief at 90 days

The Western Ontario and McMaster Universities Arthritis Index (WOMAC) is widely used in the evaluation of hip and knee osteoarthritis. It is a self-administered questionnaire consisting of 24 items divided into 3 subscales: pain, stiffness, and physical function.

Radnovich R, et al. *Osteoarthritis Cartilage*. 2017;25(8):1247-1256.



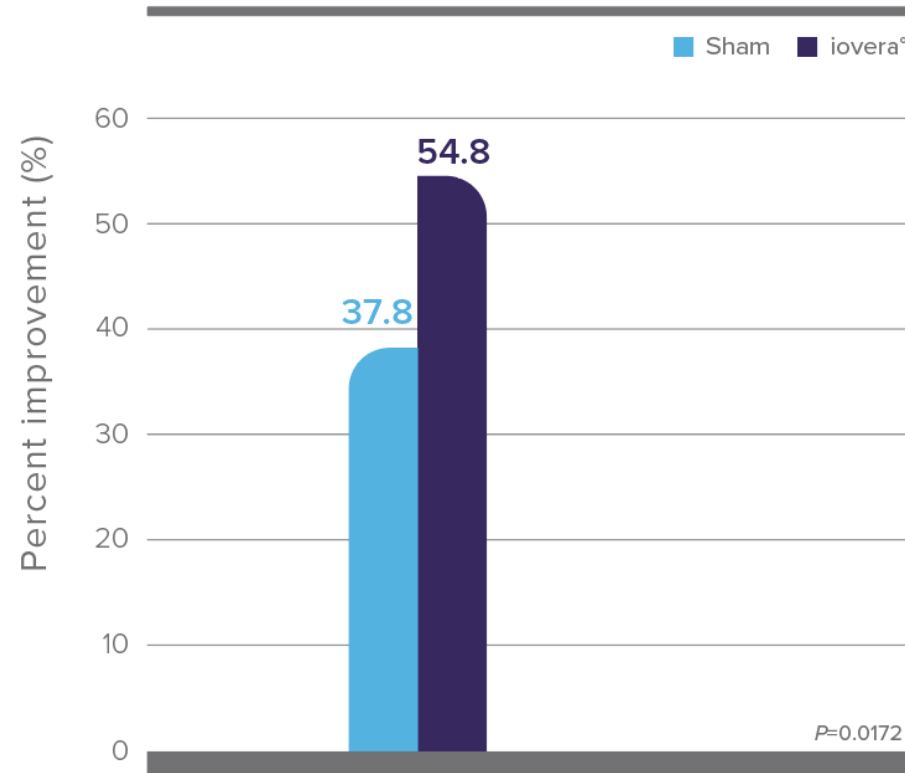
Randomized, double-blind, sham-controlled, multicenter trial of 180 patients (121 on iovera<sup>o</sup> and 59 on sham) with a 6-month follow-up in patients with mild-to-moderate knee OA. Patients were randomized 2:1 to iovera<sup>o</sup> targeting the infrapatellar branch of the saphenous nerve (IPBSN) or sham. The primary endpoint was change from baseline to day 30 in the WOMAC pain score adjusted by the baseline score and site.



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# Patients Who Received iovera<sup>o</sup> Had **Improved** **Physical** **Function at** **90 days**

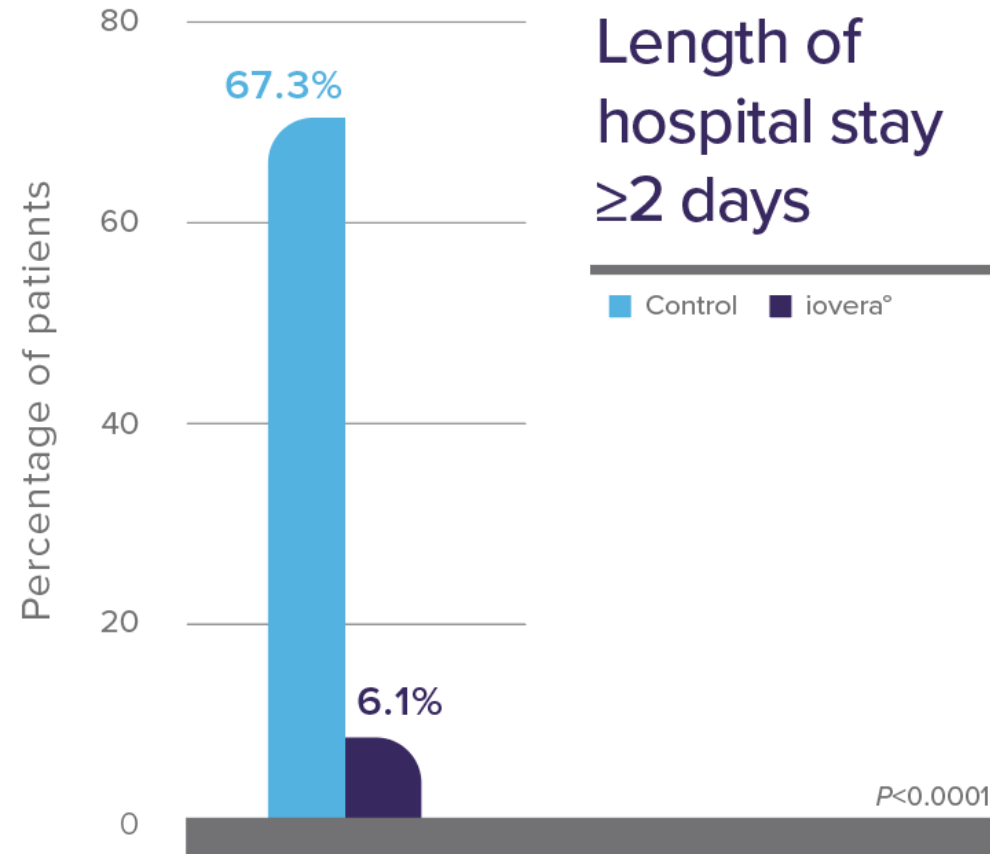
## Percent Improvement in WOMAC Physical Function Scores From Baseline



Randomized, double-blind, sham-controlled, multicenter trial of 180 patients (121 received treatment with iovera<sup>o</sup> and 59 received treatment with sham device) with a 6-month follow-up for patients with mild-to-moderate knee OA. Patients were randomized 2:1 to iovera<sup>o</sup> targeting the infrapatellar branch of the saphenous nerve (IPBSN) or sham. The primary endpoint was change from baseline to Day 30 in the WOMAC pain score adjusted by the baseline score and site.



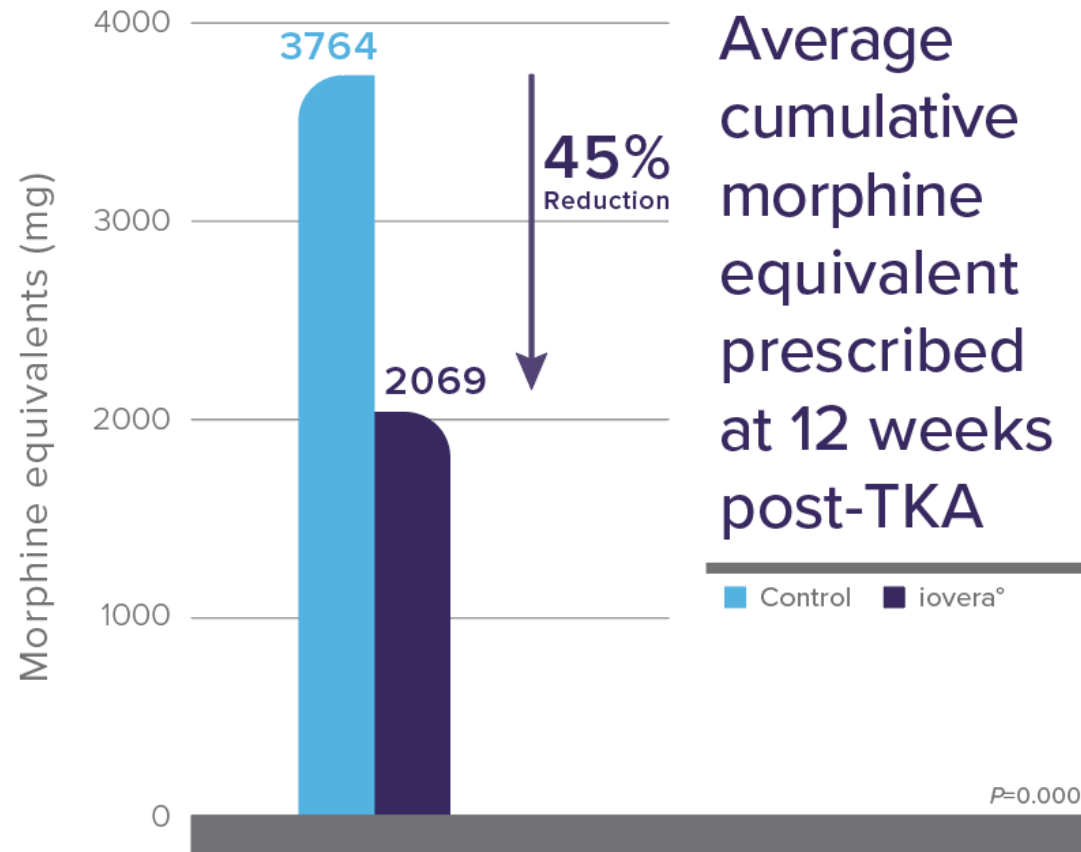
Post-TKA,  
**Only 6% of  
Patients Treated  
With iovera<sup>o</sup>  
Stayed in the  
Hospital  $\geq 2$  Days  
vs 67% Without  
iovera<sup>o</sup>**



A retrospective chart review of 100 patients who underwent TKA assessed the value of adding perioperative iovera<sup>o</sup> to a multimodal pain management program. The treatment group consisted of 50 patients after the practice introduced perioperative (5 days prior to surgery) iovera<sup>o</sup> as part of its pain management protocol. The control group consisted of the 50 patients treated before cryoneurolysis was introduced. Outcomes included hospital length of stay, postoperative opioid requirements, and patient-reported outcomes of pain and function.



# 12 Weeks Post-TKA, Patients Treated With iovera° Had a **45% Reduction** in Opioids Prescribed



Average  
cumulative  
morphine  
equivalent  
prescribed  
at 12 weeks  
post-TKA

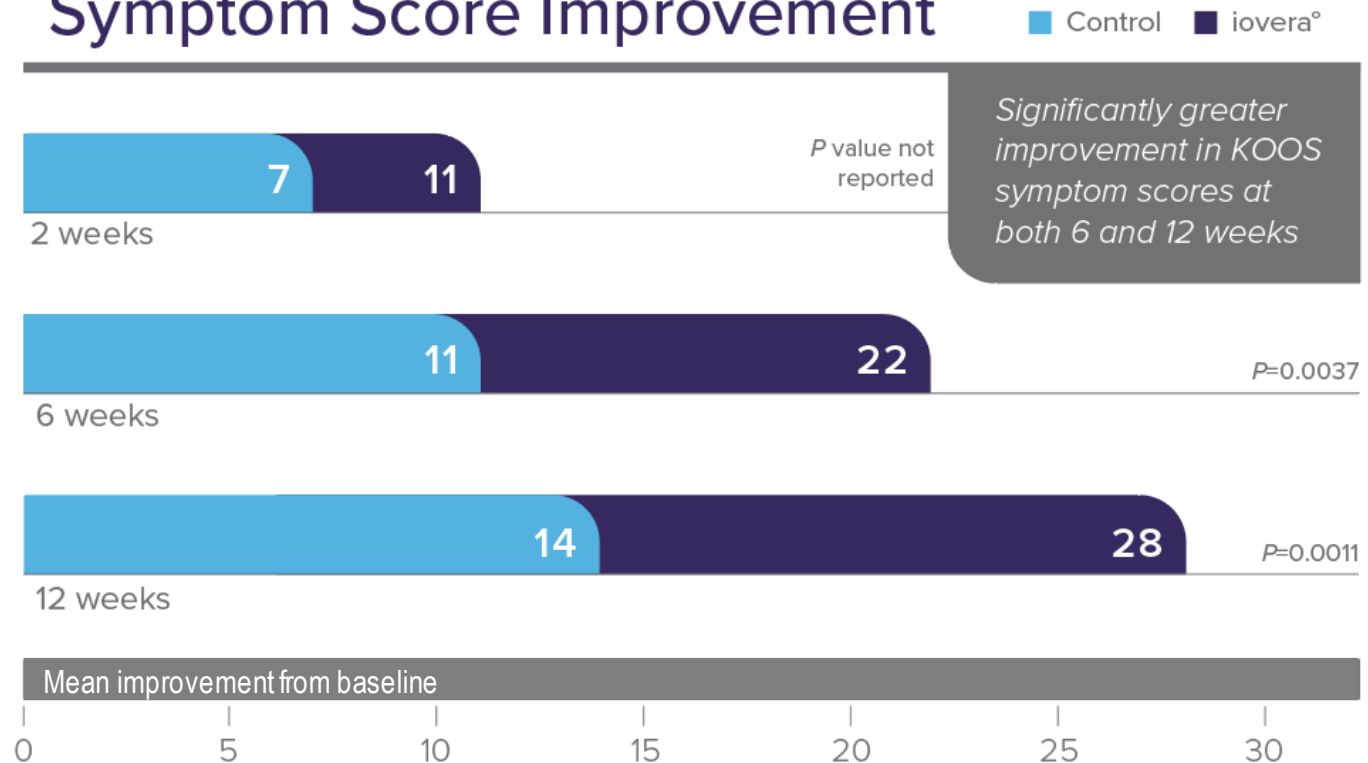
A retrospective chart review of 100 patients who underwent TKA assessed the value of adding perioperative iovera° to a multimodal pain management program. The treatment group consisted of 50 patients after the practice introduced perioperative (5 days prior to surgery) iovera° as part of its pain management protocol. The control group consisted of the 50 patients treated before cryoneurolysis was introduced. Outcomes included hospital length of stay, postoperative opioid requirements, and patient-reported outcomes of pain and function.



# iovera° Delivers Effective, Long-Lasting, Nonopioid Relief for Postsurgical TKA pain

The Knee Injury and Osteoarthritis Outcome Score (KOOS) is a questionnaire to assess short- and long-term patient-relevant outcomes following knee injury. The KOOS is self-administered and assesses 5 outcomes: pain, symptoms, activities of daily living, sport and recreation function, and knee-related quality of life.

## KOOS Symptom Score Improvement



A retrospective chart review of 100 patients who underwent TKA assessed the value of adding perioperative iovera° to a multimodal pain management program. The treatment group consisted of 50 patients after the practice introduced perioperative (5 days prior to surgery) iovera° as part of its pain management protocol. The control group consisted of the 50 patients treated before cryoneurolysis was introduced. Outcomes included hospital length of stay, postoperative opioid requirements, and patient-reported outcomes of pain and function.



# iovera°: Cost-Effective Pain Relief



## iovera° is clinically effective

- Cryoneurolysis with iovera° treatment for post-TKA pain or pain associated with OA of the knee is immediate, safe, and effective<sup>1,2</sup>
- The iovera° system works at -88 °C, which allows the nerve to regrow over time in its original anatomical structure and without permanent damage<sup>3-5</sup>



## iovera° is also cost-effective

- Post-TKA, patients treated with iovera° had a significantly lower length of stay than patients who had not been treated with iovera°<sup>2</sup>
- At 12 weeks, they also had a **45% reduction** in prescribed opioids<sup>2</sup>

**iovera° treatment is covered by Medicare**  
(CPT codes—64640 and 64624)



**Cover iovera° as part of a multimodal approach for pain management**

1. Radnovich R, et al. *Osteoarthritis Cartilage*. 2017;25(8):1247-1256; 2. Dasa V, et al. *Knee*. 2016;23(3):523-528; 3. Ilfeld BM, et al. *Expert Rev Med Devices*. 2016;13(8):713-725; 4. Seddon H. Three types of nerve injury. *Brain : a journal of neurology*. 1943;66(4):237-288. 5. Sunderland S. *Nerves and Nerve Injuries*. Edinburgh & London: Livingstone; 1968.



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# iovera° Indication and Important Safety Information

## Indication

The iovera° system is used to destroy tissue during surgical procedures by applying freezing cold. It can also be used to produce lesions in peripheral nervous tissue by the application of cold to the selected site for the blocking of pain. It is also indicated for the relief of pain and symptoms associated with osteoarthritis of the knee for up to 90 days. The iovera° system is not indicated for treatment of central nervous system tissue. The iovera° system's "1x90" Smart Tip configuration (indicating one needle which is 90 mm long) can also facilitate target nerve location by conducting electrical nerve stimulation from a separate nerve stimulator.

## Important Safety Information

### Contraindications

The iovera° system is contraindicated for use in patients with the following:

- Cryoglobulinemia, paroxysmal cold hemoglobinuria, cold urticaria, Raynaud's disease, and open and/or infected wounds at or near the treatment site

### Potential Complications

As with any surgical treatment that uses needle-based therapy and local anesthesia, there is a potential for site-specific reactions, including, but not limited to:

- Ecchymosis, edema, erythema, local pain and/or tenderness, and localized dysesthesia

Proper use of the device as described in the User Guide can help reduce or prevent the following complications:

- At the treatment site(s): injury to the skin related to application of cold or heat, hyper- or hypopigmentation, and skin dimpling
- Outside the treatment site(s): loss of motor function



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# Thank you!

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Janet Poppe  
Vice President, Payer & Employer Relations  
[Janet.Poppe@Pacira.com](mailto:Janet.Poppe@Pacira.com)  
[iovera.com](http://iovera.com)



iovera<sup>®</sup>  
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**PACIRA**  
BIOSCIENCES, INC.



## ***2020 Annual Forum***

### **Innovator Showcase**

**Tuesday, November 10, 2020 | 2:00 PM- 3:00 PM ET**



**Gary Donlin**  
Director  
Employer  
Partnerships  
Thrive Earlier  
Detection



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Detection



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