

ConsultUS: Your Digital Addiction Consultants

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Your addiction medicine consultants

Addiction related illnesses are on the rise

In 2019, there were over a million admissions for patients with an addiction diagnosis

Hospitals from 2020 to 2021 saw over 20% increase in addiction hospital presentations

Cost start at \$500 and total to over \$100 million in hospital spending for addiction care

*Based on federal government data from AHRQ (www.ahrq.gov)



Hospital providers are overwhelmed and exhausted

The pandemic continues to overwhelm hospitals and providers. While the overdose epidemic and novel addictive substances such as Fentanyl, Xylazine, and Designer Benzodiazepine flood the market with no end in sight.

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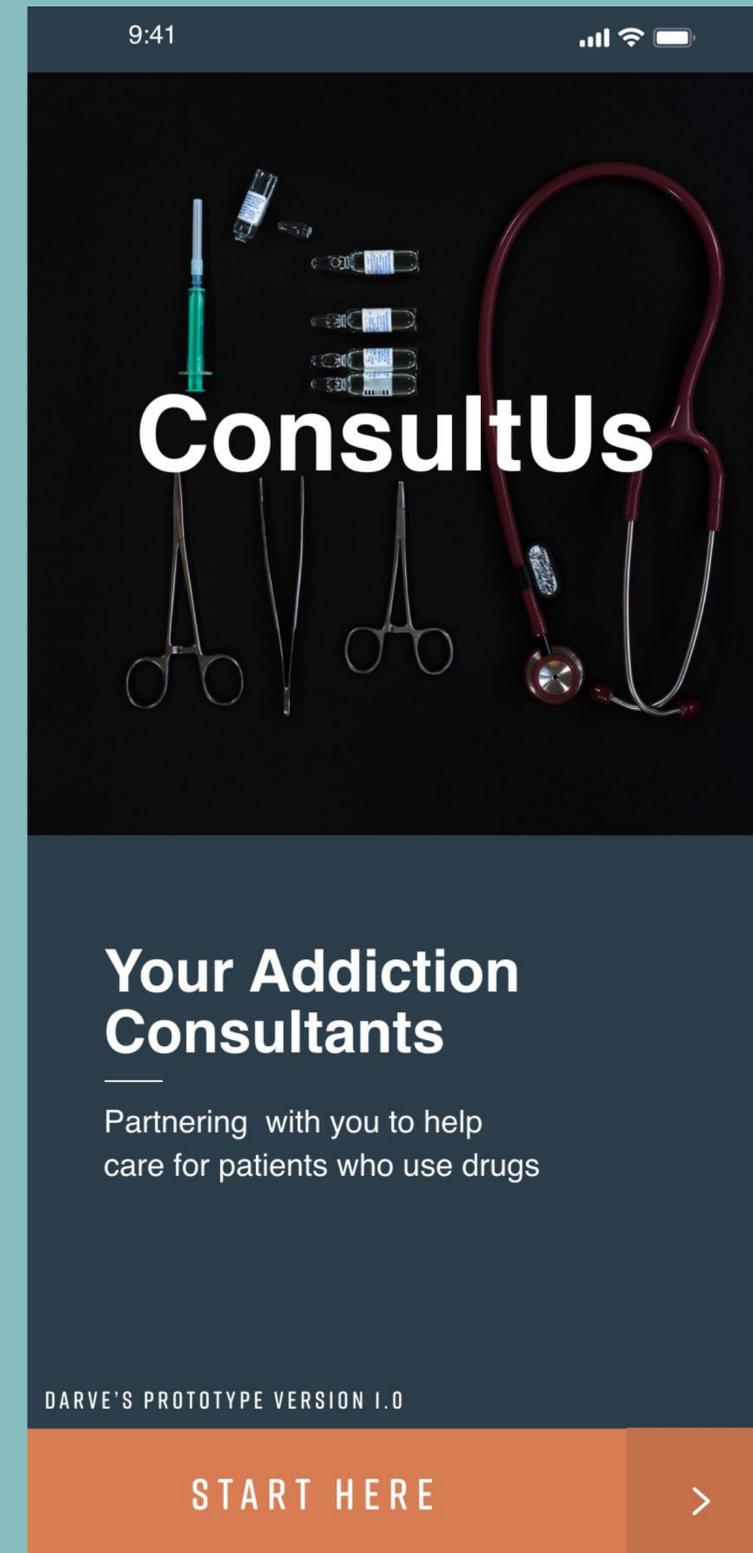
ConsultUS is your innovative solution

ConsultUS provides live and secure messaging-based Addiction medicine insights to hospital providers

Our Multidisciplinary team will provide help with acute intoxication, addiction treatments, in-hospital pain, safe discharges

Each market would have the expert services of an Addiction specialist, Social Work, and Regional Care Coordinator

Timely solutions within a day and often within the hour of new consult.

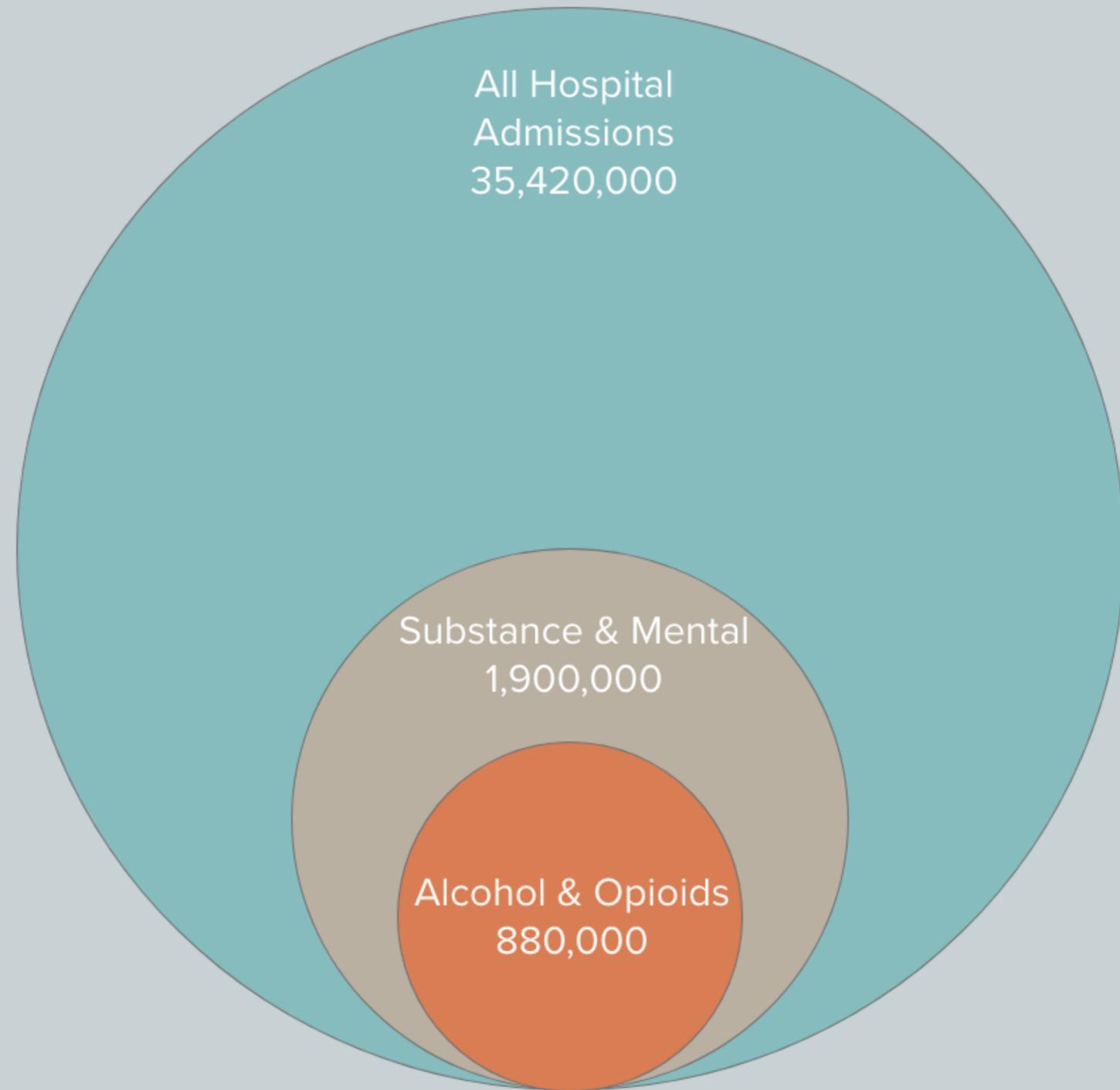


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Market Size

Our serviceable attainable market is patients who use opioids or alcohol. Growth in these areas would reduce hospital readmissions, patient satisfaction, and rates of early death.

While a small fraction of total admissions, substance and mental health spending is over \$100 Million



2019 US National Hospital Admission Data from AHRQ

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The Competition

General psychiatry consults

Focused on diagnosing severe psychiatric illness and the need for admission to a psych hospital

Limited focus on **disposition** for community addiction treatment, **medications** for addictions, **pain management**, acute withdrawal

Acute pain service

Focused on post surgical pain and improving peri-procedure analgesia

Limited focus on **non-surgical pain management**, pain and addiction treatment, **outpatient pain or addiction treatments**, acute withdrawal management

Social work

Focused on referral to care and outpatient treatment options.

Limited to **no training on addiction treatment** options, unable to manage acute hospital addiction concerns, **highly utilized** and stretched thin

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Current Stage and Strategy

We are pre-launch and working to refine our MMP through ongoing Customer Discovery amongst hospital systems.

Our goals in addition to refining the MMP are:

1. Development of strong referral network in the target region
2. Development of clinical training toolkit for SW without on the ground consultation services SW and Care Coordinators
3. Integration into Payor health system and development of physician referral network

Likely these development cost will cost \$100,000 with most of the cost being for protocol and app development.

Ongoing networks are established at Hospital, Jefferson Health System, with opportunities for expanding existing Addiction Services at regional hospitals

without on the ground consultation services

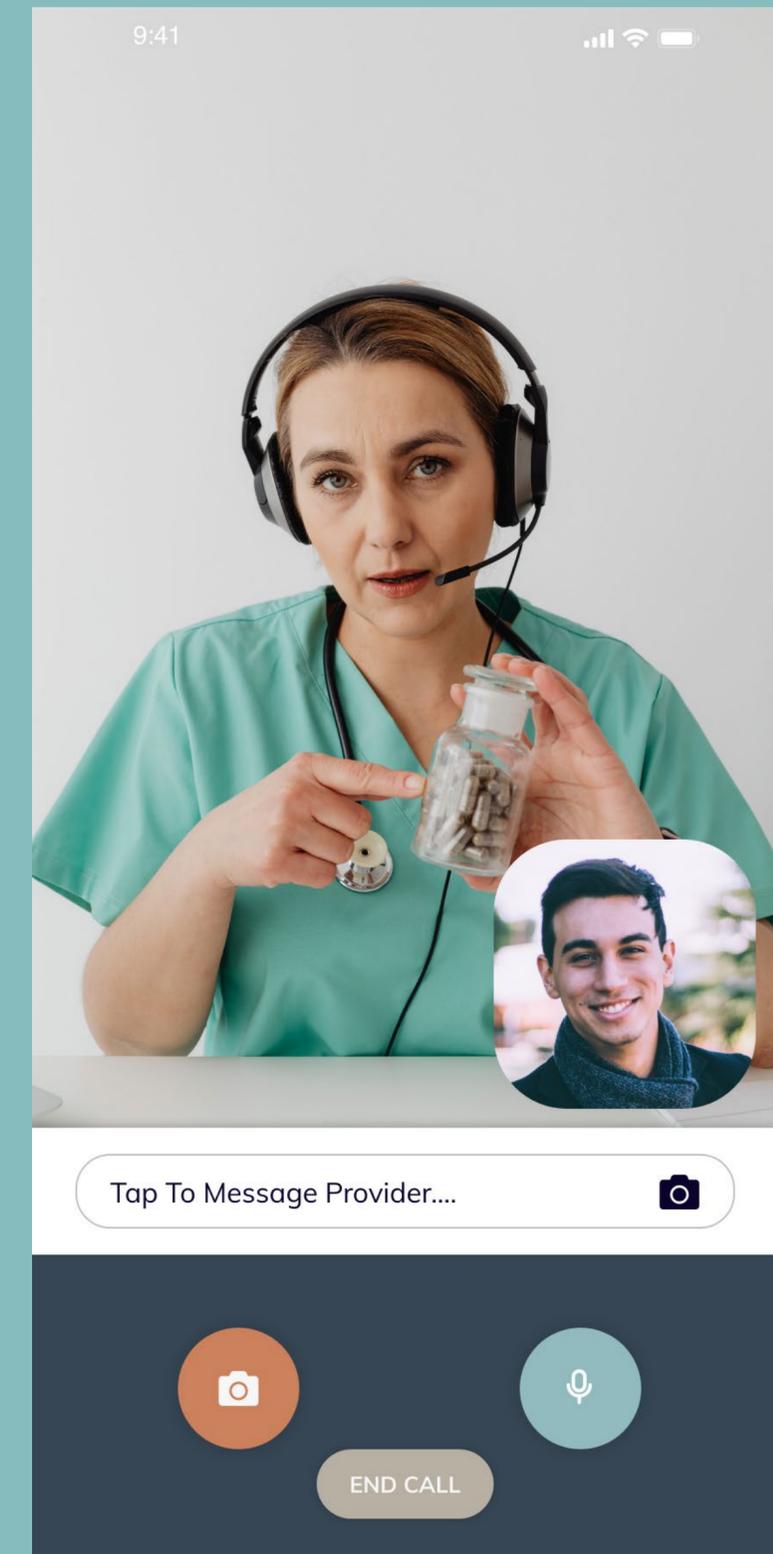
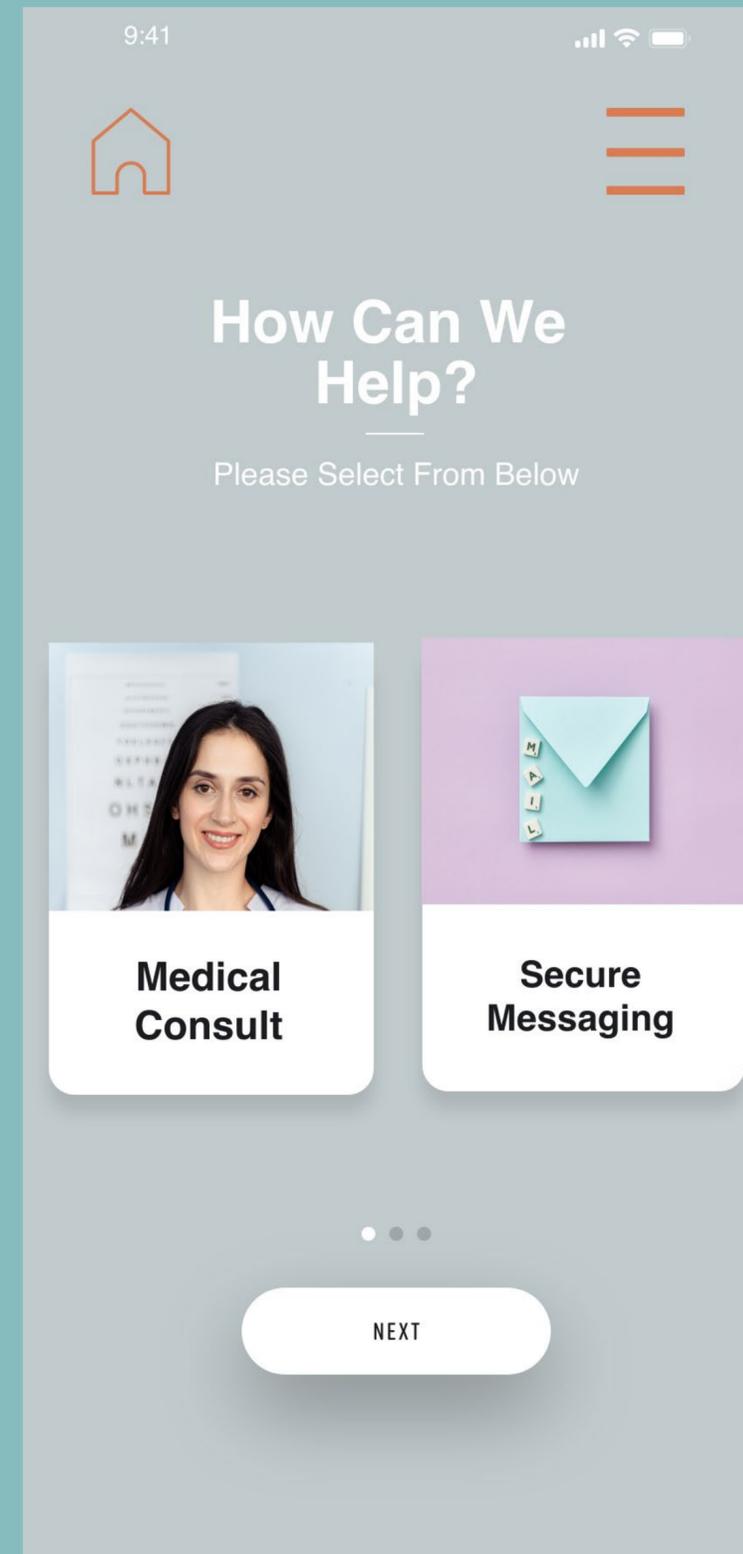
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Exit Strategy and IP

Aside from a traditional IPO, unique business exit strategy includes:

1. Payor-provider health system.
2. Health Insurances could purchase the company as a tool

Our unique IP centers around **localization of the consult service for each client and the digital platform and care algorithms.**





David Fiellin, MD



Melissa Weimer, MD



Jeanette Tetrault, MD



Kenneth Morford, MD

Built on decades of experience

This solution works and has been built from the ground up due to discoveries and innovations developed by [Yale's Program for Addiction Medicine](#). Above are personal mentors and advisors who have been instrumental to Yale's [integration of addiction medicine into every facet of clinical care](#)—and leading national and international efforts to increase addiction care.

Thank You

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