Apos, is a drug-free, non-invasive, personalized treatment program that uses a foot-worn medical device combined with a treatment plan. FDA-cleared, it is designed to effectively relieve knee pain caused by osteoarthritis. Apos® is FDA-registered and evidence-based for relieving chronic lower back and hip pain which can be particularly beneficial for union workers facing the physical challenges of their demanding roles. We have seen great success.

Challenges Union Workers Face:

- **Prolonged Standing and Heavy Lifting:** Leading to lower back, knee, and shoulder pain, as well as increased risk of musculoskeletal disorders.
- **Repetitive Movements:** Causing strain injuries and chronic pain in joints and muscles.
- **Irregular Shifts and Physical Exertion:** Resulting in fatigue, joint pain, and muscle strain.
- **Stressful Work Environment:** Increasing muscle tension and contributing to chronic pain and mental health challenges.
- **Limited Recovery Time:** Busy schedules and demanding workloads leave little time for rest and recovery, turning acute issues into chronic conditions.

How Apos Can Help:

- **Alleviates Pain:** Redistributes pressure away from painful areas, providing significant relief.
- **Improves Mobility:** Retrains muscles for healthier movement, enhancing overall mobility and physical performance.
- **Non-Invasive Solution:** Avoids the need for surgery or long-term medication, allowing workers to maintain peak physical condition without downtime.
- **Supports Long-Term Health:** Addresses both symptoms and underlying causes of pain, promoting long-term joint health.
- **Enhances Quality of Life:** Reduces pain and improves physical function, positively impacting personal well-being and mental health.
- **Covered by Highmark commercial:** Making it accessible and affordable for those with this insurance provider.

If interested, please fill out the registration form and email it to amyf@aposhealth.com. I would be happy to schedule an evaluation in the comfort of your home or bring the clinic directly to the department.

Amy Amadio Fredericks
Account Manager

M: 724-462-7188
www.AposHealth.com
Why **APOS®**: Before & After

AposCare™

PATIENT REGISTRATION

REGISTER IN THESE 3 SIMPLE STEPS:

1 PERSONAL INFO FORM **(~5 MIN.):**

PATIENT DEMOGRAPHICS

Last Name: _____ First Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

DOB: _____ Gender: ☐ Male ☐ Female Shoe Size: _____

Employer: _____ Primary Physician: _____

INSURANCE

Primary Insurance: _____ Subscriber ID#: _____

Primary Card Holder: ☐ Self ☐ Spouse / Partner / Other (please specify below):

Last Name: _____ First Name: _____

Street Address: _____ DOB: _____

Secondary Insurance: _____ Subscriber ID#: _____

Area of pain: ☐ Knee ☐ Hip ☐ Back

How long have you had this pain? _____ / _____ YEARS MONTHS

Have you seen a healthcare professional for this pain? ☐ Yes ☐ No

KNOW SOMEONE WHO SUFFERS FROM TO KNEE, BACK OR HIP PAIN?
REFER THEM TO APOSCARE™.

Full Name: _____ Phone Number: _____

2 REVIEW & SIGN MEDICAL CONSENT AND HIPAA FORMS **(~5 MIN.)**

3 FINAL STEP: EVALUATION WITH PHYSICAL THERAPIST **(~30 MIN.)**

There’s a better way to treat chronic knee and low back pain

AposHealth®

Move better. Live better.

Chronic Knee and Low Back Pain are Substantial Drivers of MSK Spend

50%

Of American adult's report having a musculoskeletal (MSK) condition

$420B

Cost to our healthcare system. More than diabetes, heart disease and many other chronic conditions

Nearly 2/3

Of commercial plan spending on MSK conditions is driven by treating pain due to wear and tear (e.g., osteoarthritis)

45%

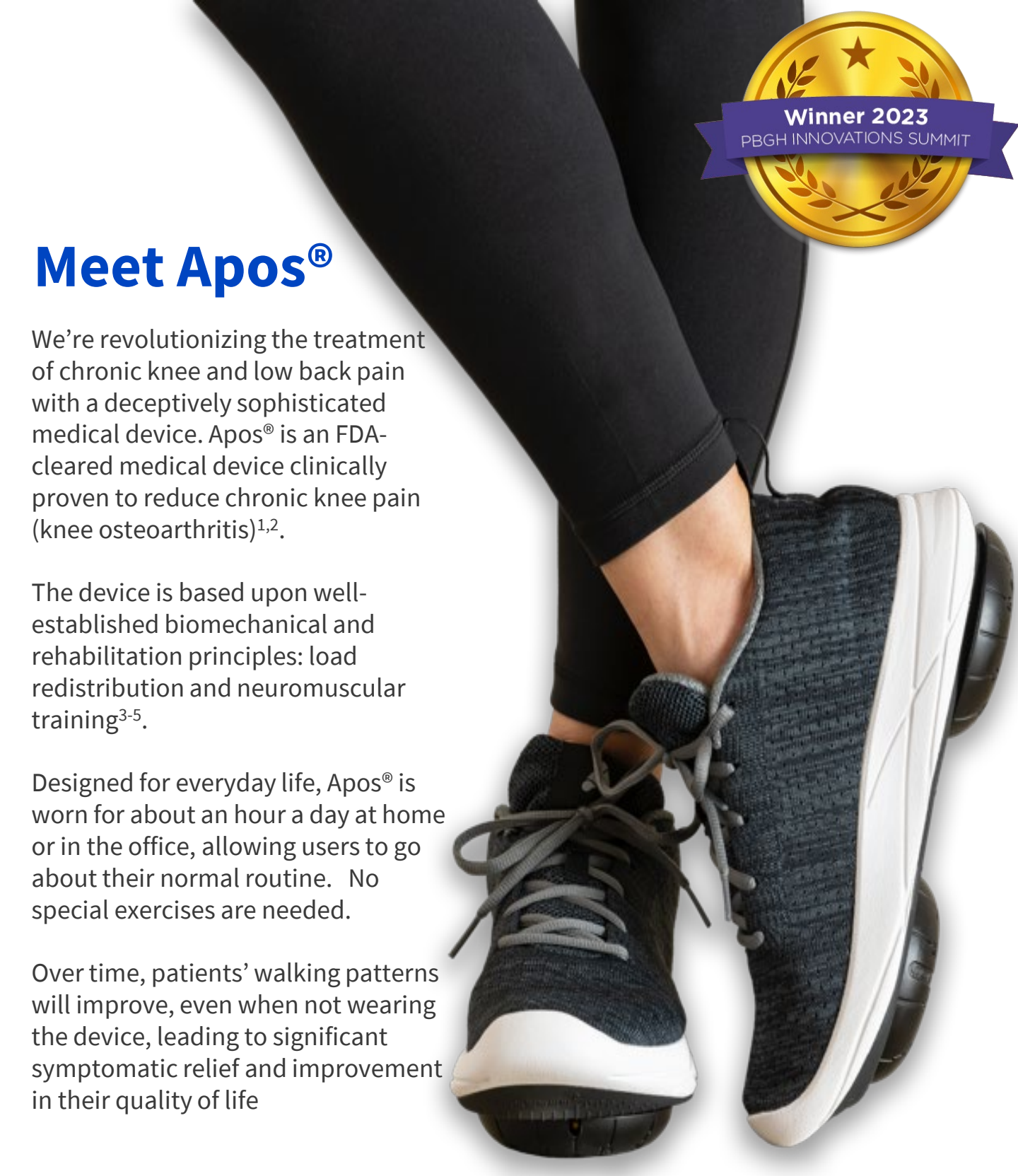
Of wear and tear spend can be attributed to the knee and back

$126B

Annual spending on knee and back wear and tear

AposHealth®

Source: 2022 Americans in Motion, Evernorth Research Institute, AposHealth Analysis.



Meet Apos®

We're revolutionizing the treatment of chronic knee and low back pain with a deceptively sophisticated medical device. Apos® is an FDA-cleared medical device clinically proven to reduce chronic knee pain (knee osteoarthritis)[1,2].

The device is based upon well-established biomechanical and rehabilitation principles: load redistribution and neuromuscular training[3-5].

Designed for everyday life, Apos® is worn for about an hour a day at home or in the office, allowing users to go about their normal routine. No special exercises are needed.

Over time, patients' walking patterns will improve, even when not wearing the device, leading to significant symptomatic relief and improvement in their quality of life

[1]JAMA 2020;323(18):1802-1812; [2]Jornal of Orthopaedic Experience & Innovation. 2022; [3]J Orthop Res. 2011;29:1668-1674; [4]J Biomech 2012 11;45(8):1366-71; [5] Electromyog kinesiol 2011;21:704-711

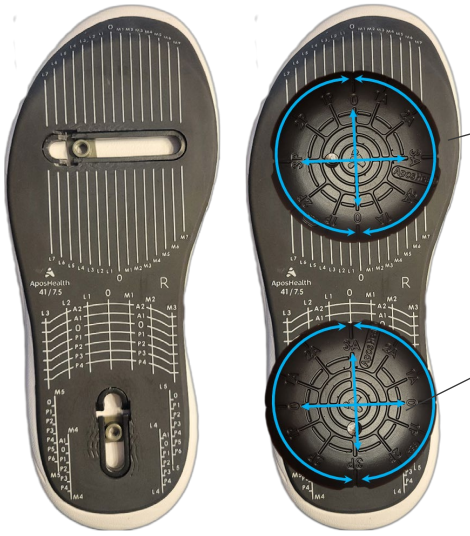
AposHealth®

How Apos® is different

Treating the underlying problem changes everything

Apos® works on biomechanical and neuromuscular levels. Using our patented, foot-worn device as part of a daily treatment program, Apos® is designed to address the underlying causes of pain by temporarily shifting pressure from affected areas. The neuromuscular re-education of the muscles results in a healthier walking pattern, even when not actively wearing the device.

Furthermore, the Apos® solution works holistically along the kinetic chain, enabling the clinician to treat multiple conditions (knee, low back, and hip) simultaneously.



Pod positioning shifts patients' biomechanics, reducing pain

Convex pods stimulate neuromuscular changes over time, resulting in improvements outside of the device

Pods in varying convexities further enable customized treatment

How the program works

A licensed clinician trained on Apos® conducts an Apos® evaluation via telehealth with in-person support from an Apos® product specialist who meets the patient at a convenient time and place.

Suitable and interested patients are provided an Apos® device custom calibrated to treat their specific condition(s) and given an initial treatment plan

On-going support over the 12-month program is provided by our clinicians and clinical care coordinators who will update the treatment plan as required based on the patient's progress. Occasional adjustments will be made to the device as necessary

AposHealth®

Evidence Supporting Apos®

34
Peer-reviewed clinical trials

>130,000
Patients treated globally

95%
Customer Satisfaction

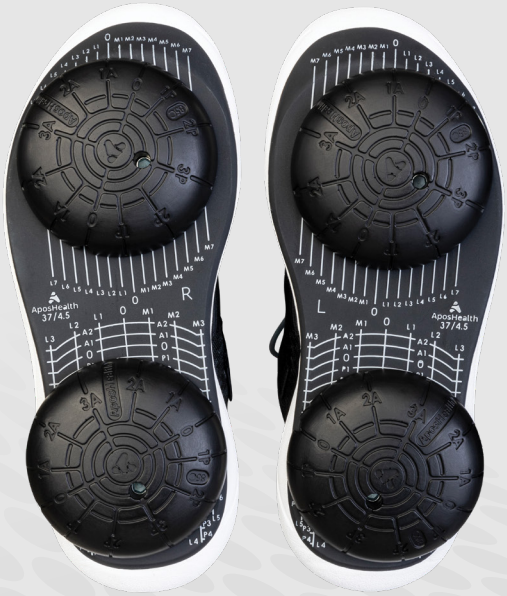
>85%
Patients who were surgical candidates avoiding surgery out to 5 years

- ✓ Clinical validation by Insurance carriers by way of Medical Policy with Highmark and Independence Blue Cross
- ✓ FDA 510(k) clearance
- ✓ Listed on the Department of Veterans Affairs Federal Supply Schedule making Apos® available to Veterans and other government agencies
- ✓ UK's NICE (National Institute for Health Care Excellence) published guidance on Apos® finding Apos® to be clinically effective and cost saving
- ✓ NHS Med Tech Funding Mandate

SOURCES:

1. Reichenbach A, Felson DT, Hincapi CA, Heldner S, Butikofer L, Lenz A, da Costa BR, Bonel HM, Jones RK, Hawker GA, Juni P. Effect of Biomechanical Footwear on Knee Pain in People With Knee Osteoarthritis. The BIOTOK Randomized Clinical Trial. JAMA 2020;323(18):1802-1812.
2. Bartels M, Suk M. Summary of outcomes of a non-invasive biomechanical therapy for patients with knee osteoarthritis. Journal of Orthopaedic Experience & Innovation. 2022.
3. Haim A, Wolf A, Rubin G, Genis Y, Khoury M, Rozen N. Effect of center of pressure modulation on knee adduction moment in medial compartment knee osteoarthritis. J Orthop Res. 2011;29:1668-1674.
4. Debbi EM, Wolf A, Haim A. Detecting and qualifying global instability during dynamic task using kinetic and kinematic gait parameters. J Biomech 2012 May 11;45(8):1366-71.
5. Goryachev Y, Debbi EM, Haim A, Rozen N, Wolf A. Foot center of pressure manipulation and gait therapy influence lower limb muscle activation in patients with osteoarthritis of the knee. J Electromyog kinesiol 2011;21:704-711.

AposHealth®



New Apos® study: 89% Surgery Avoidance for Up to Six Years

AposHealth®'s Breakthrough Study Shows 89% of Eligible Total Knee Replacement Patients Avoid Surgery for Up to 6 Years with Apos®

AposHealth®, a pioneering healthcare company specializing in innovative non-surgical musculoskeletal interventions, is proud to announce results of a clinical study that demonstrates an impressive 89% of patients eligible for Total Knee Replacement (TKR) surgery were able to avoid it for up to 6 years.[1] The study, published in Therapeutic Advances in Musculoskeletal Disease, underscores the efficacy of AposHealth's biomechanical, home-based program, Apos®, in reducing pain and improving function for patients with knee osteoarthritis.

Knee osteoarthritis (OA) affects millions worldwide,[2] causing chronic pain and limited mobility. The rising prevalence of knee OA has prompted a critical need for non-surgical interventions that can alleviate symptoms and improve patients' quality of life. The study aimed to evaluate the referral rates to secondary care consultation and clinical outcomes in patients with severe knee OA who underwent AposHealth's innovative, home-based Apos® treatment.

The retrospective audit involved 571 patients who met the clinical criteria for total knee replacement and received Apos® non-surgical intervention between October 2015 and March 2020. Patients underwent a home-based, biomechanical intervention utilizing a foot-worn device for gait rehabilitation. This device, personalized according to the patient's gait patterns and clinical symptoms, facilitated pain reduction and functional improvement. Patients were encouraged to use it at home or work while continuing their daily routines. Follow-up appointments ensured device adjustments and treatment plan optimization.

Key findings from the study include:

- Eighty-nine percent of eligible TKR patients did not require secondary care consultation over a treatment period of up to 6 years.
- A significant reduction in pain and improved function was observed in patients after just 3 months, which was sustained for up to 3 years.
- Referral rates to secondary care consultation were only 11.4% with an average follow-up of 3.5 years.

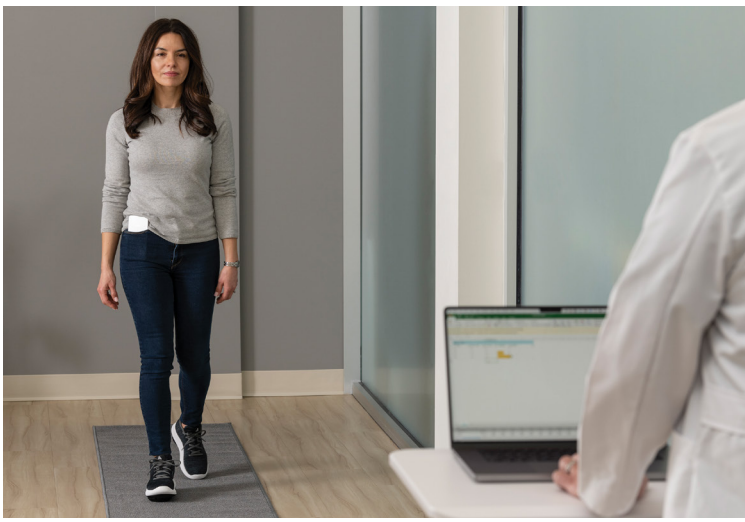
"These results are truly transformative for patients suffering from knee osteoarthritis," said Ganit Segal, MPE, Chief Scientific Officer of AposHealth. "Apos® provides an effective alternative to surgical interventions for many, allowing patients to experience meaningful pain reduction and improved mobility. This has the potential to significantly impact the healthcare landscape by improving overall Knee OA patient outcomes."

For those interested in a deeper dive into the methodology and findings, the original publication is available here: https://journals.sagepub.com/doi/10.1177/1759720X231187190

About AposHealth®

At AposHealth®, we are passionate about revolutionizing the treatment of musculoskeletal conditions simply, by addressing peoples' gait and pain—to help them move better and live better. Our flagship solution, Apos®, is FDA-cleared to temporarily reduce knee pain caused by osteoarthritis and has been used by over 120,000 patients. It can also be used as a general wellness device to help patients live well with chronic lower back and hip pain. With a 96% satisfaction rate,[3] and over 69 peer-reviewed publications, this program—consisting of gait analysis, a personalized foot-worn device, and a customized treatment plan—has helped patients worldwide move, live, and thrive.

For more information, visit **https://www.AposHealth.com.**
Email: **Information@AposHealth.com**
Contact Number: **855-999-2767**



Sources

1) Benn, R., Rawson, L., & Phillips, A. (2023). Utilising a non-surgical intervention in the knee osteoarthritis care pathway: A 6-year retrospective audit on NHS patients. Therapeutic Advances in Musculoskeletal Disease. https://doi.org/10.1177/1759720X231187190

2) Wallace, I. J., Worthington, S., Felson, D. T., Jurmain, R. D., Wren, K. T., Maijanen, H., Woods, R. J., & Lieberman, D. E. (2017). Knee osteoarthritis has doubled in prevalence since the mid-20th century. Proceedings of the National Academy of Sciences of the United States of America, 114(35), 9332-9336. https://doi.org/10.1073/pnas.1703856114

3) Based on data captured at 3rd follow-up appointment and based on the commercial activity with National Health Service patients in the UK treated between 2019-2020 (N=106)