

Medical Grade Heart Attack Detection

Always with the patient

NASDAQ: BEAT

September 2022

DISCLAIMERS

This presentation contains forward-looking statements. All statements other than statements of historical fact contained in this presentation, including statements as to the Company's future results of operations and financial position, planned products and services, business strategy and plans and objectives of management for future operations, are forward-looking statements.

These statements involve known and unknown risks, uncertainties, assumptions and other factors that may cause the Company's actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements.

In some cases, you can identify forward-looking statements by terms such as "may," "will," "should," "expects," "plans," anticipates," "could," "intends," "target," "projects," "contemplates," "believes," "estimates," "aims," "predicts," "potential," "seeks," attempts," "poised" or "continues" or the negative of these terms or other similar words. These statements are only predictions.

The Company has based these forward-looking statements largely on its current expectations and projections about future events and financial trends that it believes may affect its business, financial condition and results of operations. Also, these forward-looking statements represent the Company's estimates and assumptions only as of the date of this presentation. The Company assumes no obligation to update any forward-looking statements after the date of this presentation.

This presentation also contains estimates and other statistical data made by independent parties and by the Company relating to market size and growth and other industry data. This data involves several assumptions and limitations, and you are cautioned not to give undue weight to such estimates. The Company has not independently verified the statistical and other industry data generated by independent parties and contained in this presentation and, accordingly, it cannot guarantee their accuracy or completeness.

In addition, projections, assumptions and estimates of its future performance and the future performance of the industries in which it operates are necessarily subject to a high degree of uncertainty and risk due to a variety of factors. These and other factors could cause results to differ materially from those expressed in the estimates made by independent parties and by the Company. For additional risks and uncertainties that could impact the Company's forward-looking statements, please see disclosures contained in HeartBeam's public filings with the SEC, including the "Risk Factors" in HeartBeam's Annual Report on Form 10-K, and which may be viewed at www.sec.gov.

The HeartBeam telemedicine technology platform has not yet been evaluated by the FDA and is not approved for clinical use in the USA or other global geographies.


Video: HeartBeam AIMiGo™ Technology



The HeartBeam telemedicine technology platform has not yet been evaluated by the FDA and is not approved for clinical use in the USA or other global geographies.

Video link will open in web browser

No Patient Friendly Heart Attack Solution in the Market



kardia.com/blog/whats-the-difference-between-kardiamobile-6l-card

by Doors Misc HB trees fashion Patents Matrix Clinical Trials Search Result... FirstService Residential | O...

Get your Kardia device

ALIVECOR®

Start taking control of your heart health from home with Kardia. Get your device today.

KardiaMobile is not tested or recommended for use with pacemakers and ICDs.
KardiaMobile does not check for heart attack.

PATIENTS CANNOT DETERMINE IF THEY ARE HAVING A HEART ATTACK

Ignore symptoms

Lost lives

- Patients delay an average of 3 hours before seeking care
- Delays lead to increased mortality
- Greater incidence of heart failure among these patients

Mortality rate increases by

40%



for an average wait 3-4 hours after symptoms begin



Am I having a heart attack?

Go to Emergency Department

Wasted healthcare dollars

- Chest pain is second most common reason for an ED visit

82% of chest pain ED visits are unnecessary

\$10B

\$

Cost to the healthcare system each year

HEARTBEAM US MARKET OPPORTUNITY 6X BIGGER THAN AFIB MARKET



~3M

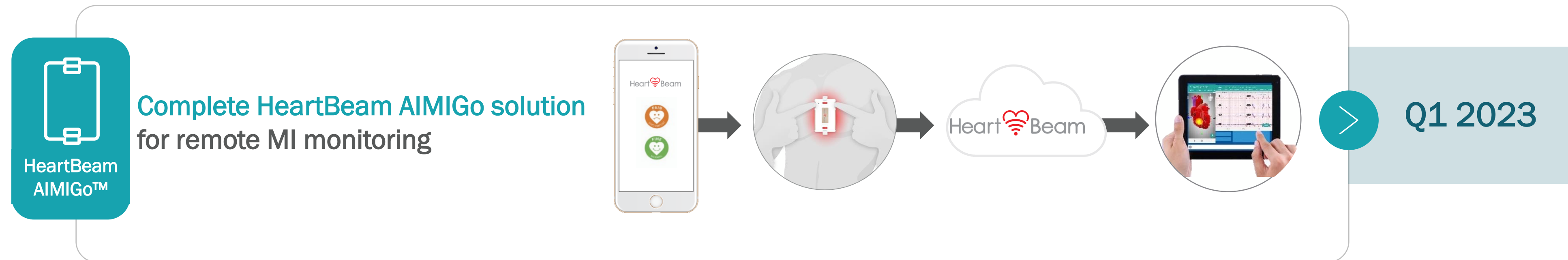
AFib Patients
\$2 billion

~18M*

Total CAD Patients
\$10+ billion

HeartBeam AIMIGo™

THE CORE PRODUCT

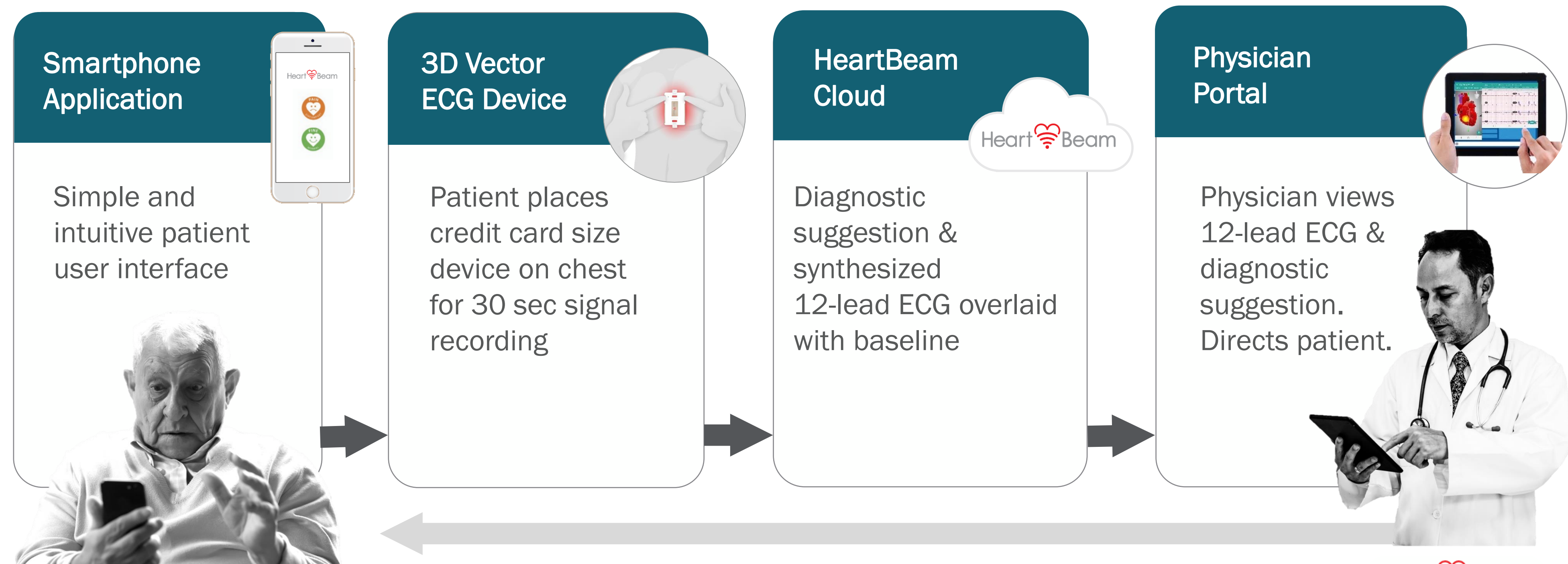


- Partnered with Triple Ring Technologies to co-develop its HeartBeam AIMIGo 3D vector Electrocardiogram (ECG) collection device for remote heart attack (MI) monitoring
- Acquired source code access under the LIVMOR Partnership Agreement that will be used to build a Company-branded version of LIVMOR's FDA cleared platform for Remote Patient Monitoring to connect physicians and patients

HEARTBEAM PRESCRIPTION-BASED HeartBeam AIMIGo

POWERFUL, PORTABLE AND EASY TO USE

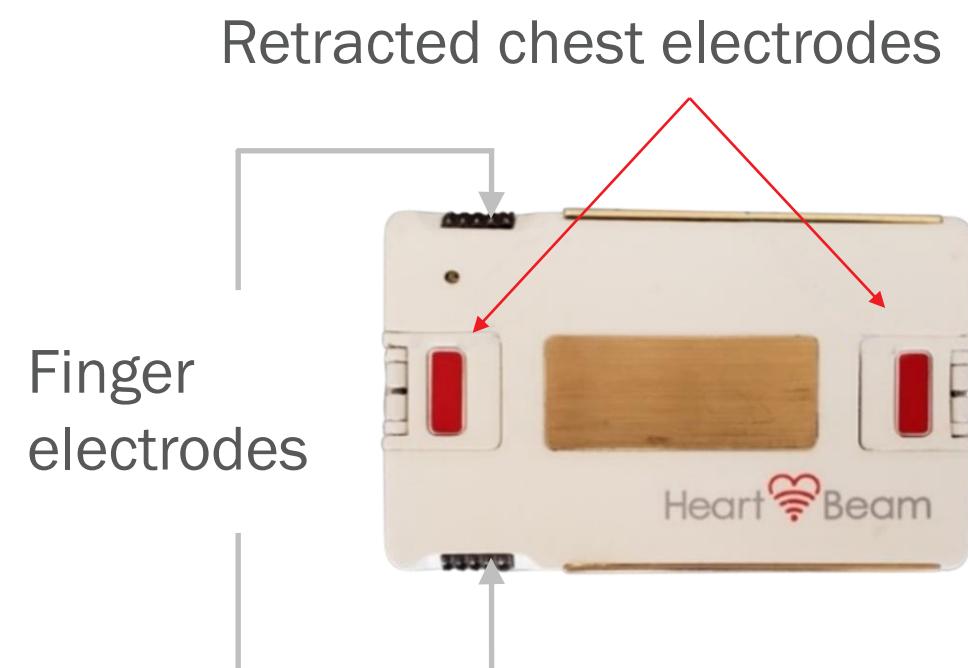
Current telemedicine is fundamentally limited in its ability to detect heart attacks without a physician and medical quality ECG system in the patient's hands



CREDIT CARD SIZED ECG MACHINE

12-LEAD ECG SYSTEM ALWAYS WITH PATIENT

NOT IN USE: PLANAR

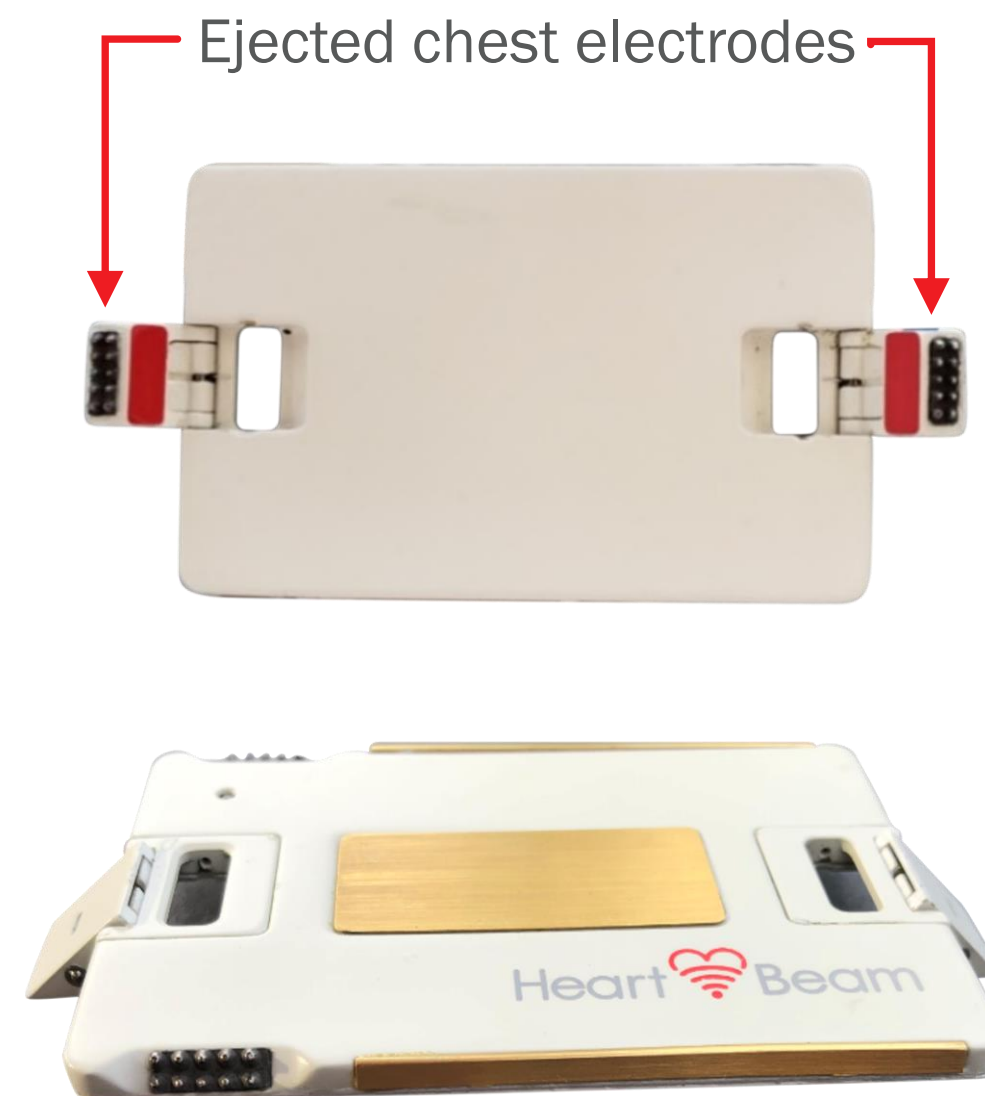


WEIGHT
28G. (1 OZ.)

HEIGHT AND WIDTH
CREDIT CARD SIZE

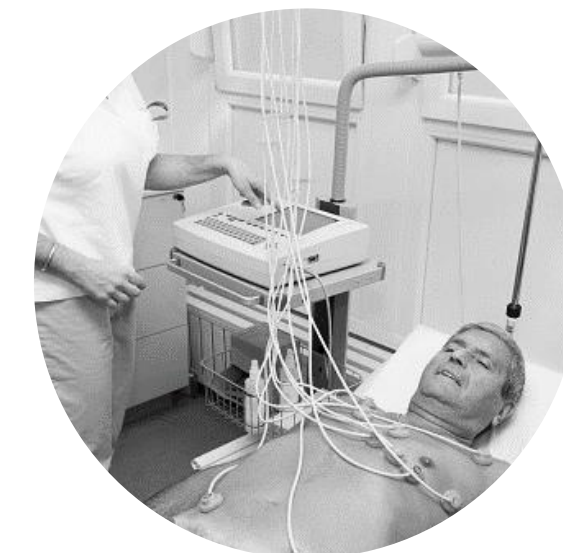
THICKNESS
4MM (1/8 INCH)

EJECTED CHEST ELECTRODES



BATTERY RECHARGE FREQUENCY
30 DAYS VIA USB CABLE

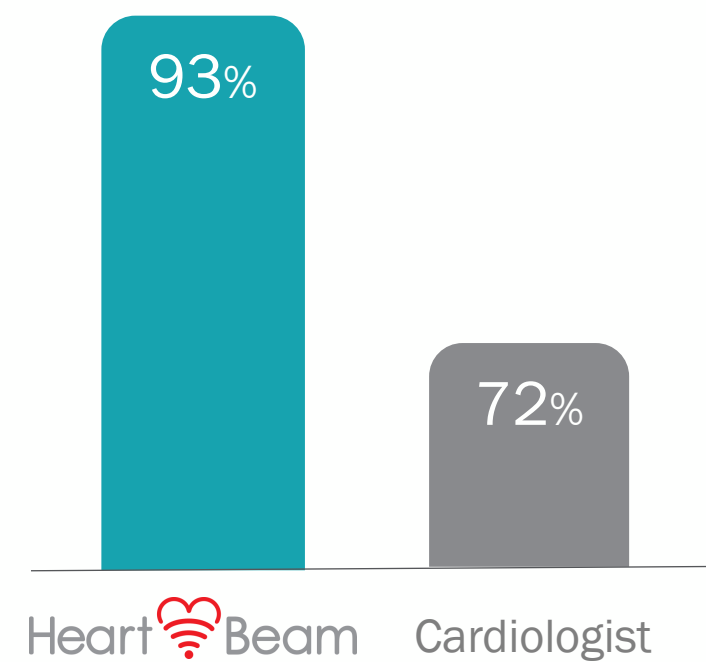
IN USE BY PATIENT



THREE HARVARD-DESIGNED STUDIES EXCELLENT PERFORMANCE

ACCURACY

Unique 3D ECG interpretation method has **greater accuracy** than cardiologists in detecting MI's

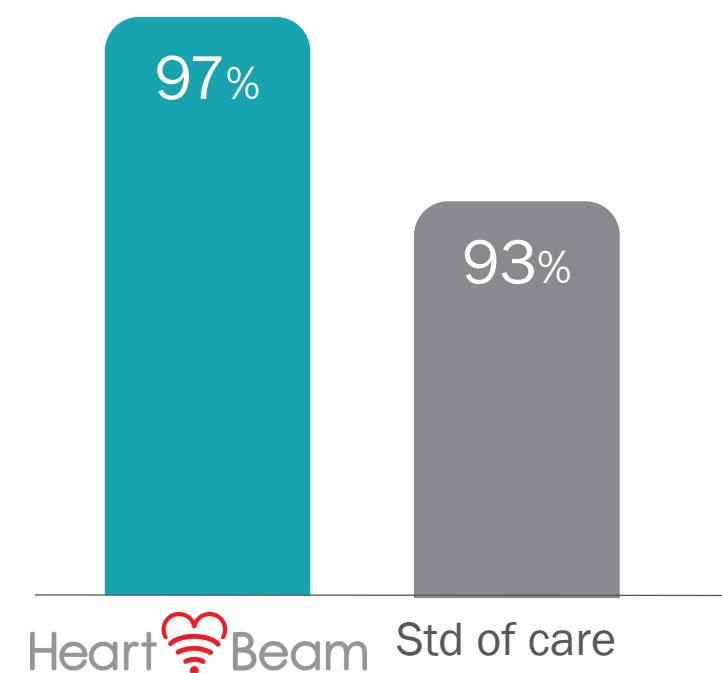


HIDES STUDY

N = 186 recordings; 66 subjects

SENSITIVITY

Proprietary algorithm performance **equal to standard** of care in chest pain triage

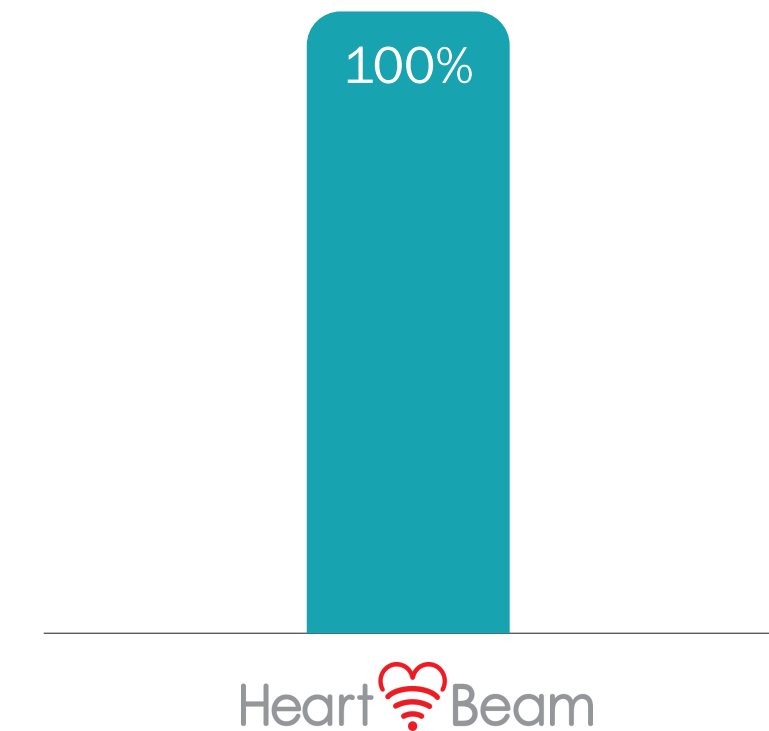


B SCORE ED STUDY

N = 110 subjects

SPECIFICITY

No heart attack (MI) false positives, **big data potential**



ISPEC STUDY

N = 1,485 recordings; 30 subjects

KEY MEDICAL CONTRIBUTORS

MIKE GIBSON, MD¹
PETER ZIMETBAUM, MD
ALEXEI SHVILKIN, MD



TOM DEERING, MD



NIRAJ VARMA, MD
STEVE ELLIS, MD



CHARLIE BROWN, MD
JEFFREY J. OYLER, MD



PHILIP SAGER, MD
RAJ DASH, MD



BARRY MANGEL, MD



JOHN JEFFERIES, MD



1) Chairman, HeartBeam Scientific Advisory Board

MARKET LANDSCAPE

SUBSTANTIAL CAPABILITIES BEYOND EXISTING OFFERINGS

Heart  BeamApple **WATCH**

AliveCor®

iRhythm™ biotricity

Heart Attack Detection



12L ECG Capable



Integrates history & symptoms



Uses Baseline



Long Term Use Potential



AFib Detection



AFlutter Detection



HEARTBEAM AIMIGo PRODUCT DEVELOPMENT AND REGULATORY PLAN



- 3D Vector Cardiogram
- Credit card sized collection device
- Smartphone app
- Synthesized baseline + symptomatic 12L ECGs for physician's review
- Symptoms report
- Patient risk factors/history

FDA 510(K)

Predicate devices identified

Simple validation study

Will provide data on advanced technology features to be introduced in Gen 2

HEARTBEAM AIMIGo PRODUCT REIMBURSEMENT STRATEGY

Use Available RPM Codes to Accelerate Revenue and Data Collection

Basic Gen 1

Excellent alignment with CAD patient needs



Utilize existing RPM* Codes

CPT Codes	Description	MPFS**
99453	Remote monitoring of physiologic parameter(s) initial; set-up and patient education on use of equipment	\$19.03
99454	Remote monitoring of physiologic parameter(s) or programmed alert(s) transmission, each 30 days	\$55.72
99457	Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified healthcare professional (QHCP) time in a calendar month requiring interactive communication with the patient/caregiver during the month	\$50.18
99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other QHCP in a calendar month requiring interactive communication with the patient/caregiver during the month; additional 20 minutes	\$40.84
99091	Collection & interpretation of physiologic data digitally stored and/or transmitted by the patient &/or caregiver to the physician or other QHCP, at least 30 minutes	\$56.41

Subscription Model

Reimbursement To Practice

\$1,300+/year (\$110/month) per patient

To HeartBeam

\$600/year (\$50/month) per patient

*Remote Patient Monitoring – physician reimbursement codes **2022 Medicare Physician Fee Schedule (MPFS) national payment rates (non-facility)

HEARTBEAM AIMI SOFTWARE AND GEN 1 HEARTBEAM AIMIGo REVENUE OPPORTUNITY

HEARTBEAM AIMI SOFTWARE SOLUTION

HeartBeam will use its own salesforce

Software licensing business
model drives \$100k/yr per
EMERGENCY DEPARTMENT

- ✓ Emergency Department averages 85 patients/day
- ✓ ECG for all patients \$3-4/use

TAM: \$500m



HeartBeam
AIMI™

GEN 1 HEARTBEAM AIMIGo

HeartBeam will use its own salesforce

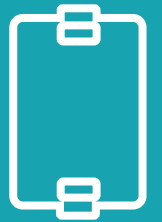
Excellent alignment w/ CAD patient needs

- ✓ Utilize five existing RPM codes*

Subscription model

- ✓ **Practice gets** \$1300+/year (\$110/month) per patient
- ✓ HeartBeam gets technical fee of \$600/year (\$50/month) per patient **from practice**

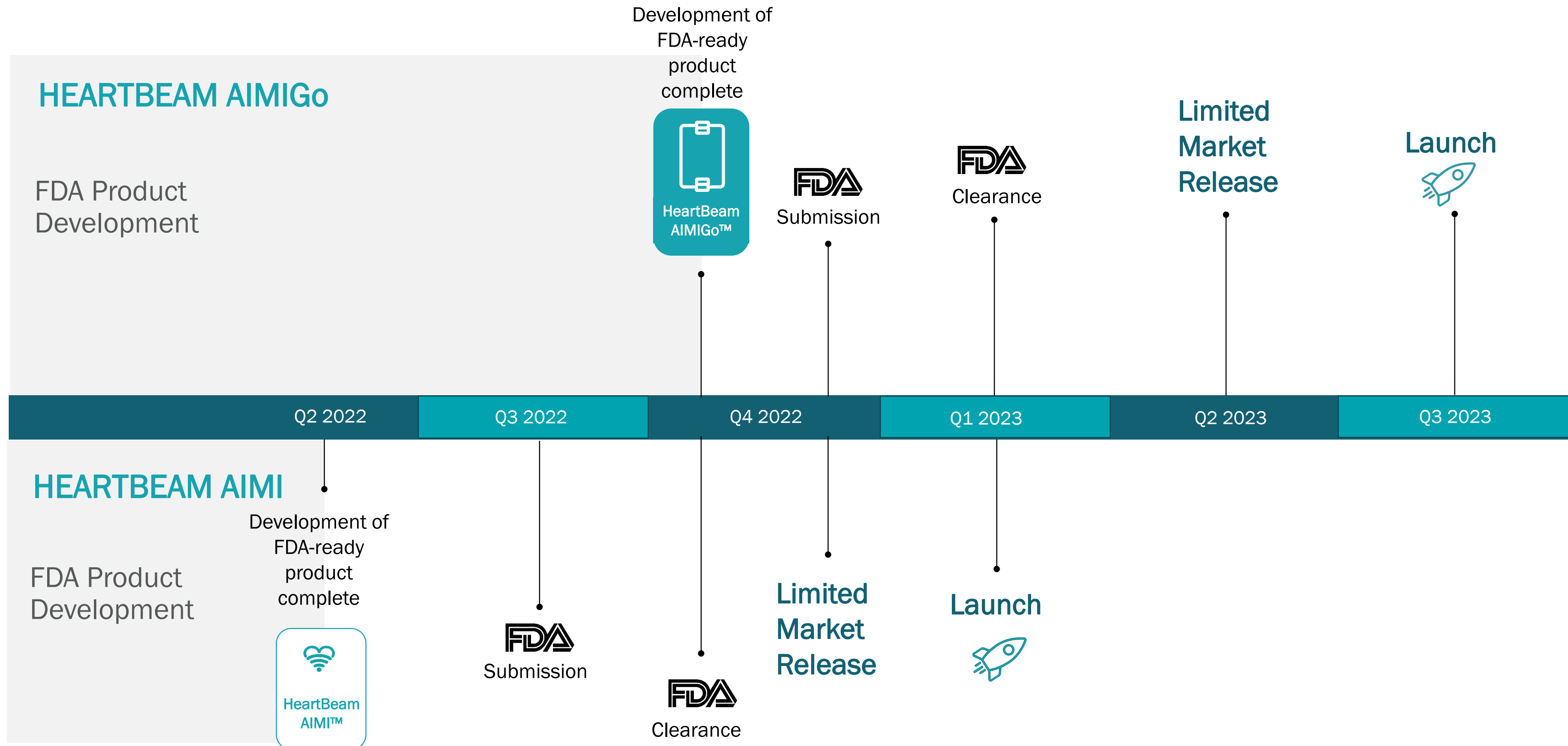
TAM: \$10bn



HeartBeam
AIMIGo™

*Remote Patient Monitoring – physician reimbursement codes

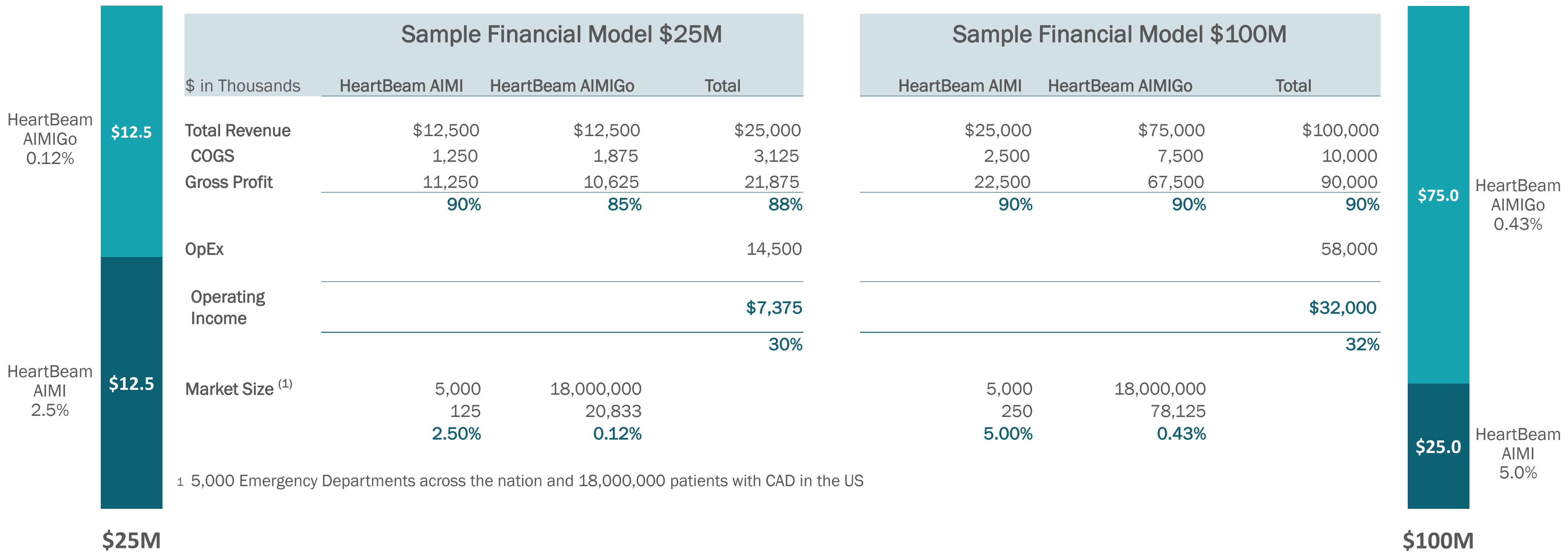
PRODUCT LAUNCH TIMELINE



*This timeline is for illustrative purposes only and is meant to portray a sequence of events, not their estimated timing.

SAMPLE FINANCIAL MODEL for our HEARTBEAM AIMI™ & HEARTBEAM AIMIGo SOLUTIONS at SCALE

Revenue at TAM Penetration %



- Attractive financial model
- Each product offers a recurring revenue base with gross margins > 80%
- As the company scales, operating margins can be in excess of 30% even as the company increases investment in R&D

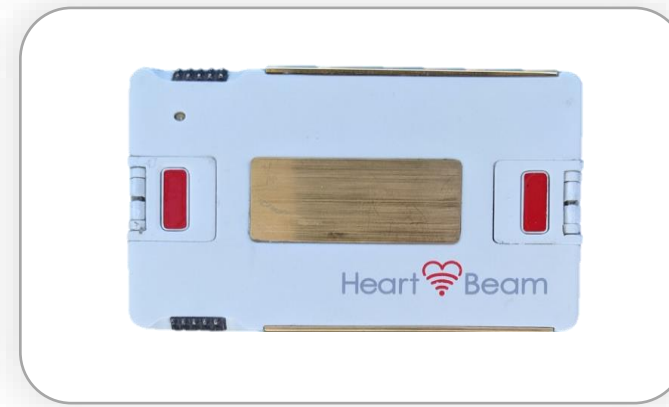
PLATFORM TECHNOLOGY DEEP PRODUCT PIPELINE

TODAY



Software from
HeartBeam AIMiGo

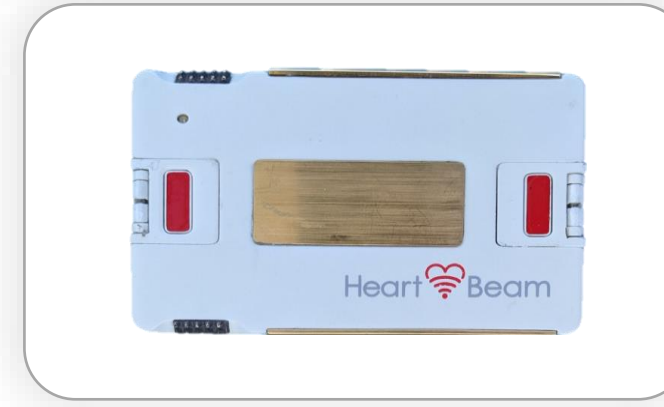
Application for MI
ECG detection in
Emergency Department



Gen 1
HeartBeam AIMiGo

Basic
RPM Solution

FUTURE PRODUCTS



Gen 2
HeartBeam AIMiGo

Complete
system



AI Solution

Longitudinal
big data set



12-lead
ECG patch

12-lead recording
and real time signal
transmissions

Estimated Global Market of
\$4.8B by 2030

HIGHLY EXPERIENCED MANAGEMENT

SIGNIFICANT EXPERIENCE IN SOFTWARE AND MEDICAL DEVICE PRODUCT DEVELOPMENT



Branislav Vajdic, PhD
CEO & Founder



Rich Ferrari
Executive Chairman



Jon Hunt, PhD
Chief Business Officer



Rick Brounstein
CFO



Ken Persen
Chief Technical Officer



Marga Ortigas-Wedekind
Board Member



Wim Elfrink
Board Member



George de Urioste
Board Member





Company

Rick Brounstein
Chief Financial Officer
HeartBeam, Inc.
ir@heartbeam.com

Investor Relations

Chris Tyson
Executive Vice President
MZ North America
Direct: 949-491-8235
BEAT@mzgroup.us
www.mzgroup.us

www.heartbeam.com

2118 Walsh Avenue, Suite 210 Santa Clara, CA 95050

