



# Company Overview

August 2021



This presentation contains “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995 relating to our business, operations, and financial conditions, including, but not limited to, statements concerning our future results of operations, business strategy, current and prospective products and technology, growth prospects, market share and market size, expansion opportunities, securities listing, the impact of COVID-19 on our future prospects, the strength of our competition, illustrative unit economics and return-on-investment, timing and likelihood of success, adoption by potential customers, continued usage of our products by current customers, and plans and objectives of management for future operations, are forward-looking statements. Words such as, but not limited to, “believe,” “expect,” “anticipate,” “estimate,” “plan,” “would,” and similar expressions or words, identify forward-looking statements. These statements involve known and unknown risks, uncertainties, and other important factors that may cause our actual results, performance, or achievements to be materially different from any future results, performance, or achievements expressed or implied by the forward-looking statements. Because forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted or quantified and some of which are beyond our control, you should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in our forward-looking statements may not be achieved or occur and actual results could differ materially from those projected in the forward-looking statements. Moreover, we operate in an evolving environment. New risks and uncertainties may emerge from time to time, and it is not possible to predict all risk and uncertainties. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances, or otherwise. Although we believe the expectations reflected in such forward-looking statements are reasonable, we can give no assurance that such expectations will prove to be correct. Accordingly, readers are cautioned not to place undue reliance on these forward-looking statements. No representations or warranties, expressed or implied, are made about the accuracy of any such forward-looking statements.



Tech-Enabled Virtual Medical Documentation & Clinical Support



Increases Physician Productivity and Optimizes Reimbursement



Differentiated Product Offering – Ambient, Mobile, Remote, Real-Time

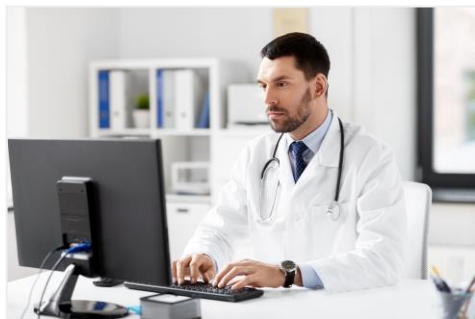


Leading Health System Customer Base with High Net Revenue Retention



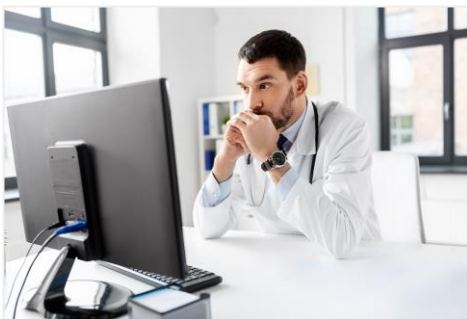
Scalable Business Model with Compelling Unit Economics

## Legacy Model



~**1/3** of physician's day on the computer<sup>1</sup>

## Electronic Health Records Pain Point



Electronic health records (EHRs) are mandated

.....  
**70,000+** ICD-10 codes

.....  
**32 clicks** to order a flu shot

## Issues



Reduced patient throughput

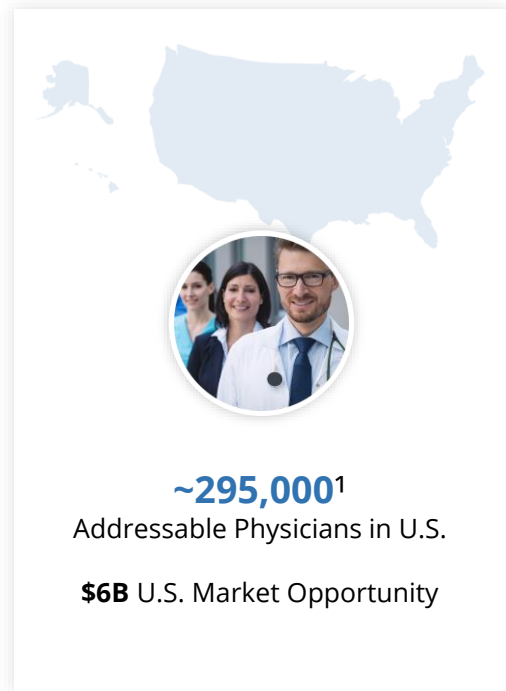
.....  
Lower patient satisfaction

.....  
Physician burnout  
- cost up to **\$1M** to replace single physician<sup>2</sup>

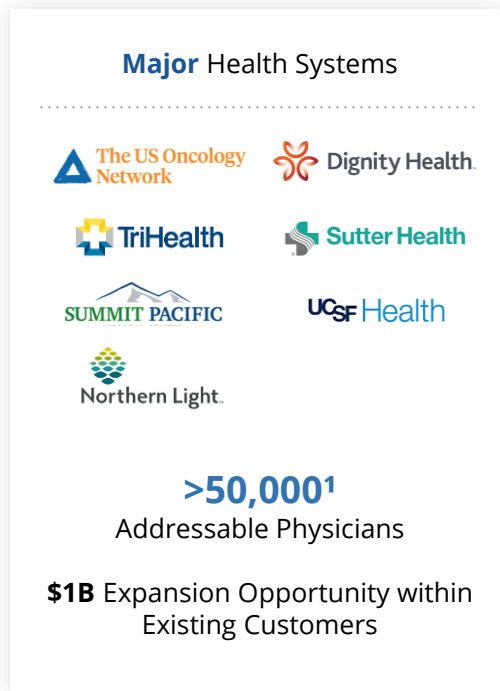
(1) *Physician Compensation Report, 2019; National Physician Report, 2019.*

(2) *Annals of Internal Medicine, June 2019.*

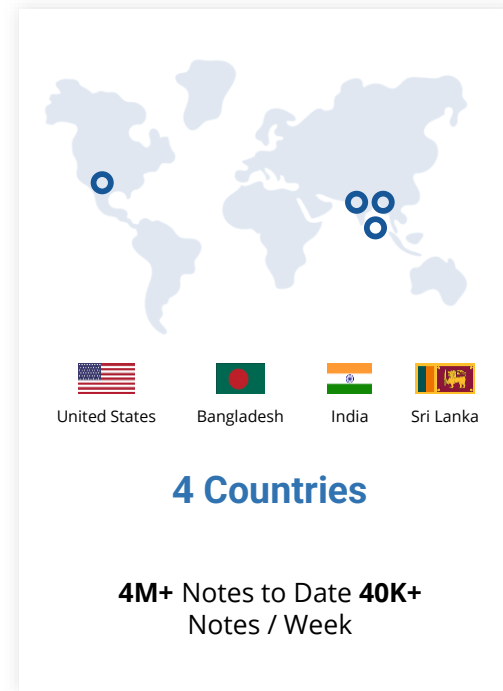
## Opportunity



## Select Current Customers



## Scale Today



(1) Company Estimates out of a total of more than 1.1m US Clinicians.

## Physician

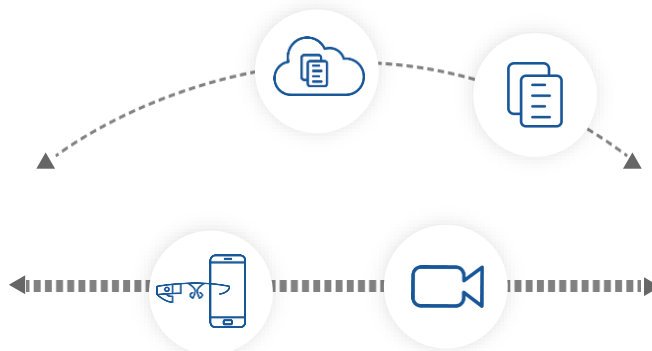
High Quality Patient Care



Natural Conversation

## Electronic Health Record

Medical documentation uploaded for the physician's sign-off



Livestream

 AUGMEDIX

Technology & Documentation

**AUGMEDIX SERVICE  
PLATFORM**



Enhanced Documentation

## 2014 Launch

### AUGMEDIX **Live**

Dedicated specialists provide remote **live clinical support** and **medical documentation**



**Medical  
Documentation**



**Referral  
Support**



**Order  
Support**



**Reminder  
Support**

In Real-time

## 2020 Launch

### AUGMEDIX **Notes**

Specialists asynchronously generate **medical documentation**



**Medical  
Documentation**

Overnight, for next shift

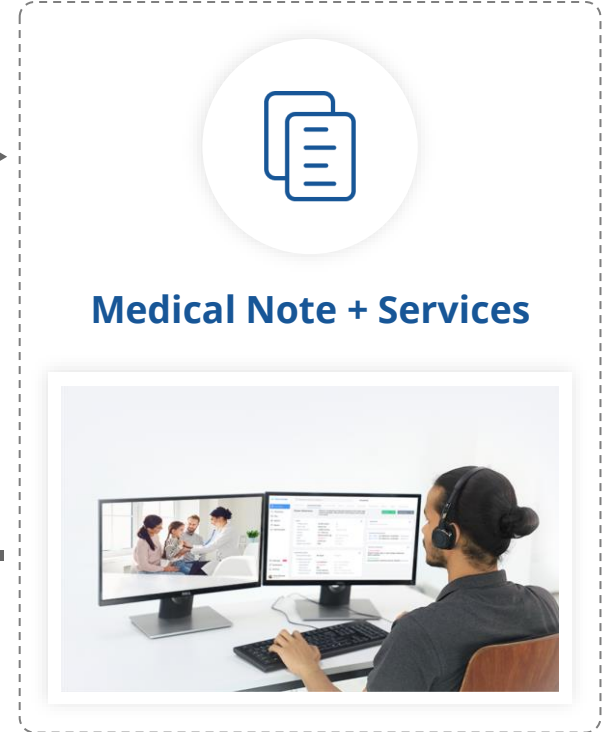
Upsell /  
Migrate



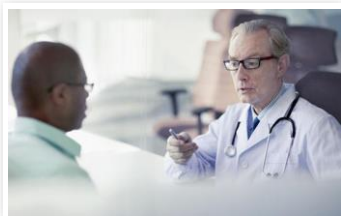
## AUGMEDIX SERVICE PLATFORM



**Ambient Conversation**  
(unstructured data)







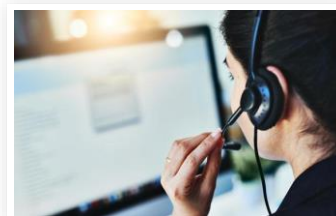
**Ambient**  
vs. dictated

- Natural conversation
- Time savings



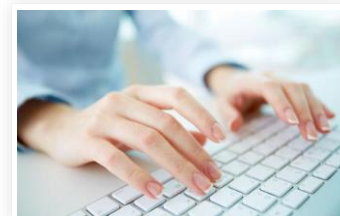
**Mobile**  
vs. fixed

- Practice medicine anywhere



**Remote**  
vs. in-person

- Unobtrusive to patient



**Real-time**  
vs. delayed

- Value-added services and support

**Essential Enablers of Telemedicine**

## Optimized Physician Productivity



See more patients



Higher reimbursement

Primary Care

9.7% ↗

Specialists

11.1% ↗

Hourly Productivity Increase<sup>1</sup>

## High Physician Satisfaction



"Augmedix has really taken a load off me so I can spend more time with my patients."

*Dr. Jane Lindberg, MD*



"I cannot imagine my career without my remote specialist. It slashes my work in half."

*Hany Fouad, MD*



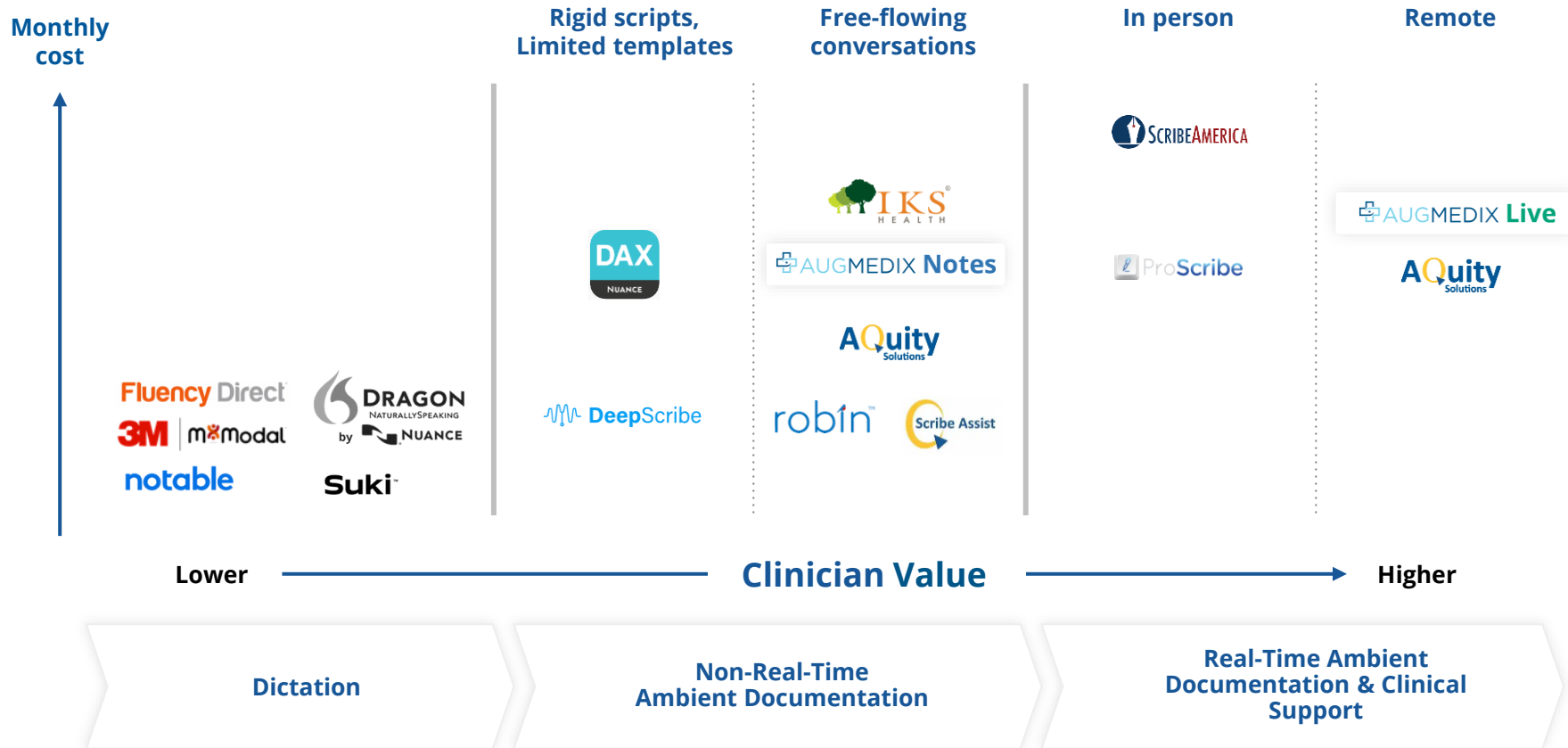
"The service has unequivocally improved my quality of life."

*Dr. Andrew Laster, MD*



(1) As measured by wRVUs, which denote work relative value units, a measure of the relative time and work associated with completing a procedure or appointment.

# Flexible & Proven Tech-Enabled Solutions Position Augmedix to Win



## Scale

- 4M+ notes to date, 40K+ per week
- Significant operational infrastructure
- Top-tier health system customers

## Technology

- Synchronous data streaming
- Data security
- Proprietary automation technology

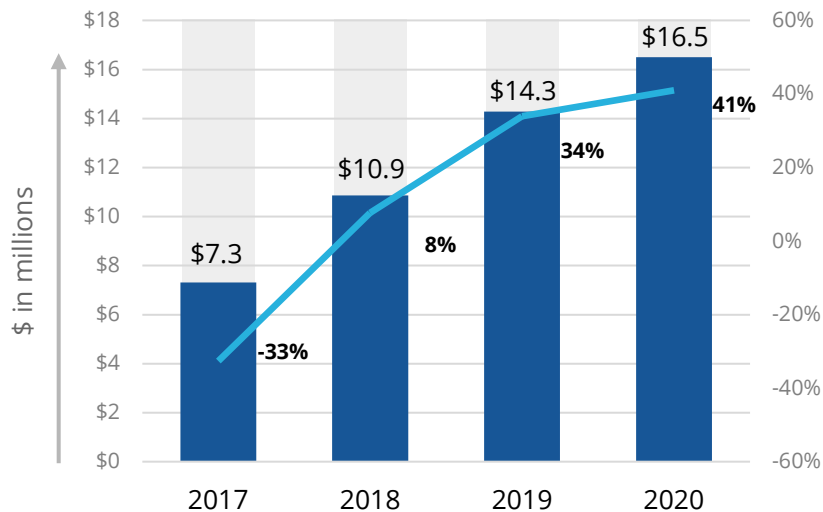
## People

- Depth of team
- Medical knowledge
- Recruiting and training

## Stickiness

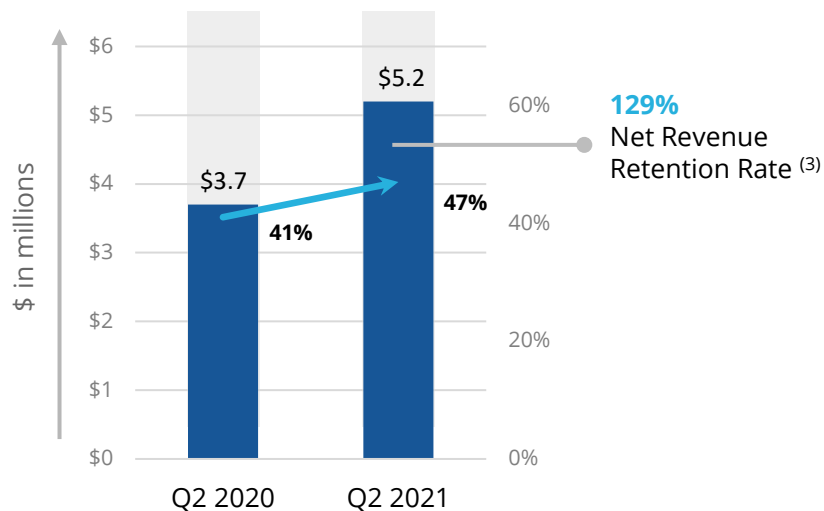
- Deeply embedded in workflow
- Ease of use and flexibility
- Strong value proposition

## Consistent Financial Performance



## Strong Growth Throughout COVID-19 Pandemic

LTV/CAC <sup>(1)</sup>: 6x Payback Period <sup>(2)</sup>: ~12 months



● Revenue ● Gross margin

Note: Fiscal years are audited through December 31, 2020. Quarterly results are unaudited.

- As of fourth quarter 2020. Lifetime Value (LTV) is calculated by  $ARPU / \text{Annual Churn Percentage} \times \text{expected contribution margin}$ . Customer Acquisition Cost (CAC) is the sales and marketing spend in the previous quarter divided by the number of new clinicians sold in the most recent quarter plus the onboarding costs in the most recent quarter divided by the number of go lives in the most recent quarter.
- As of fourth quarter 2020. Payback period in months is calculated by  $CAC \text{ divided by the expected contribution profit in the first-year} \times 12$ .
- Based on current period revenue including any expansion or new services and is net of contraction or churn compared to the previous period one year ago but excludes revenue from new Health Enterprises for the current period

# Highly Experienced Management Team



**Manny Krakaris**  
*Chief Executive Officer*



Streetline



**Paul Ginocchio**  
*Chief Financial Officer*



**Sandra Breber**  
*Chief Operating Officer*



**Jonathan Hawkins**  
*Chief Revenue Officer*



**Ian Shakil**  
*Co-Founder & Chief Strategy Officer*



**Saurav Chatterjee**  
*Chief Technology Officer*



**Davin Lundquist, MD**  
*Chief Medical Officer*



**Rashed Noman**  
*Country Manager, Bangladesh*

