



Jeannette R. Mahoney, PhD

Founder

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CATCHU

...BEFORE YOU FALL

Industry

Digital Health Technology

Founded

2019

Management

Jeannette R. Mahoney, PhD

Founder of VisTact & CatchU

Assistant Professor (Neurology)

Albert Einstein College of Medicine

Michael Potenza, JD, MS

Data Manager

President, Point & Click

Scientific Advisory Board

Joe Verghese, MD, MS

Chief, Divisions of Cognitive &

Motor Aging and Geriatrics

(Neurologist) Einstein & Montefiore

Claudene George, MD, MS, RPh

Associate Professor of Clinical

Medicine (Geriatrician) Einstein &

Montefiore

Business Advisors

Lori Lonczak, RPh, MBA

WCBA Coach;

President, Stratify Marketing

Robert Kotch, MBA, MSEE

Financial Advisor

President, SIM Associates

Legal

Philip P. Crowley, Esq.

Patent pending as of 09/30/19

[U.S. Provisional Application:

62/908,180]

Funding Sought

\$1.1M for Legal, Regulatory,
& CMS Reimbursement Code

Executive Summary

The impetus for creating **CatchU** was to alleviate disability, promote independence and increase quality of life for our seniors. The ability to successfully integrate information across sensory systems is a vital aspect of functioning in the real world and our research reveals that it is a robust metric for predicting clinical outcomes. **CatchU**, a multisensory reaction time assessment, is a quick (7 minute), reliable and affordable mobile fall-risk assessment tool that seniors can complete in the comfort of their own home. Test results are electronically transmitted to their physician instantaneously upon completion of the assessment. Through increased screening, **CatchU** identifies at-risk seniors and provides counseling strategies to prevent falls and reduce fall-related costs of emergency department visits and hospitalizations.

Market Opportunity/Problem

According to the CDC, nearly 30% of Americans (~16M) over the age of 65 experience a fall annually. In fact, over 3 million older Americans require an emergency room visit every year because of fall-related injuries. Falls are the leading cause of injury and injury-related death in older adults, with over \$50B spent annually (CDC) on non-fatal and fatal falls. The CDC recommends routine fall-risk screening at least annually, however, screening is not systematically integrated into clinical practice, and according to Sun & Sosnoff (2018; *BMC Geriatrics*) there are no quantitative, cost-effective, and accessible assessments currently available.

Competition

Fall-risk assessments are subjective and reliant on self-report. Several functional mobility tests are available (Timed-up and Go (TUG) test; Performance-Oriented Mobility Assessment; Berg Balance Test; FallSkip; Sway; Steady); however, these require in-person testing and interpretation of results by a physician and/or trained staff.

The Solution/Product

CatchU is a standardized and mobile multisensory screening assessment that can be used to predict fall-risk and other mobility limitations in clinical & research settings. The **CatchU** technology has been successfully developed for iPhone (to be available through iOS App stores) and validation studies are currently underway at Albert Einstein College of Medicine. We are working to ensure that seniors receive a **CatchU** fall-risk assessment annually during wellness visits, using existing reimbursement codes; while also working with the Centers for Medicare and Medicaid Services to determine if novel fall-risk assessment codes are warranted.

Commercial / Technical Milestones

	2020	2021
Q2: Regulatory		Q1-3: RC Trials
Q3: Finalize validation study		Q3: Expand CatchU team
Q3: Fundraising [STTR, Foundation, Investor]		Q4: Prepare to Launch Phase I
Q4: Finalize license agreement with Einstein		

Financial Projections

Phase I: Launch to top 30 elder care companies & practicing geriatricians

	2021	2022	2023	2024
Revenue	\$150K	\$2.2M	\$8.9M	\$19.6M
Cost & Expenses	\$907K	\$1.9M	\$2.2M	\$2.5M
EBITDA	-\$757K	\$281K	\$7.2M	\$17.9M

*Phase II: Launch to remaining 75% of senior physicians (~10K internists & neurologists) - not included in above projections.