

ASX Announcement

Medibio Limited – 20 JULY 2017



Medibio To Present At Bioshares Biotech Summit 2017

Sydney, Australia and Minneapolis, MN – 20 July 2017: Medibio Limited (MEB or the Company)(ASX: MEB)(OTCQB: MDBIF), a medical technology company that has developed an objective testing system to assist in the screening, diagnosis and treatment effectiveness of depression, chronic stress and other mental health disorders, today announced that Managing Director and CEO, Jack Cosentino, will be presenting at the Bioshares Biotech Summit 2017 on Friday 21st July, 2017. The topic for the presentation is **“Objective Medicine - What Investors Need To Know”**. The presentation will include details of Medibio’s transformation over the last half year to move from clinical evidence builder with limited knowledge of digital health process to end to end holistic service provider for mental health illnesses with a refreshed board of directors who represent some of the most important figures in telehealth, healthcare, and mental health advocacy. Medibio is creating a brand new framework of care in an area ripe for innovation in mental health. With it’s hybrid approach of combining inputs from biometric and psychosocial variables, the Medibio product line will change the way care is being delivered to millions around the planet. A copy of the presentation will also be available on Medibio’s website at <http://medibio.com.au/company-news/>.

About Bioshares

The Bioshares Biotech Summit, organized by the Blake Industry and Market Analysis Pty Ltd will be held on 21-22 July 2017 in Queenstown, New Zealand. The conference will cover areas like Biotechnology News, BRW, Shares, Shares Weekly, Lab News, Pharmacy Trade, Phillips Fox Biotech Bulletin, Bionetwork and Genetic Engineering News and many more. Additional information on the event can be found on the website <http://www.bioshares.com.au/queenstown2017.htm>.

About Medibio Limited

Medibio (ASX: MEB) (OTCQB: MDBIF), headquartered in Melbourne, Australia, with US headquarters in Minneapolis, Minnesota, is an evidence-based medical technology company that has developed an objective test to assist in the diagnosis and management of depression, chronic stress and other mental health disorders. Based on research conducted over 15 years at the University of Western Australia, this test utilizes a panel of patented (and patent pending) circadian, sleep and autonomic system biomarkers to objectively quantify and characterize mental state. Medibio’s depression diagnostic is being validated in clinical studies undertaken by Johns Hopkins University School of Medicine and The University of Ottawa, among others. The clinical trials will support Medibio’s application to become the first FDA approved, objective, and evidence based approach to the diagnosis of mental health disorders. Medibio’s technology also provides an objective method for the assessment of stress and mental wellbeing that can be translated to the workplace stress/wellbeing market, wearable technology and App market. Medibio is listed on the Australian Securities Exchange. and also trades on the OTCQB Venture Market for early stage and developing U.S. and international companies. Investors can find Real-Time quotes and market information for the company on www.otcmarkets.com and www.asx.com.au.

To learn more about Medibio visit www.Medibio.com.au

– ENDS –

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Forward Looking Statements

Certain statements in the presentation may constitute forward-looking statements or statements about future matters that are based on management's current expectations and beliefs. The forward-looking statements in this release include statements regarding the timing of the launch of the next generation product, the ability of the new features to broaden the appeal of the product, and the ability of new product to meet the needs of the customer base, among others. These statements are subject to risks and uncertainties that are difficult to predict and are based on assumptions as to future events that may not prove accurate. Actual results may differ materially from what is expressed in the presentation.

There can be no assurance that any existing or future regulatory filings will satisfy the relevant authorities' requirements regarding Medibio-ID, Medibio - DX, Medibio- RX, nor can there be any assurance that Medibio-ID, Medibio - DX, Medibio- RX will be approved for all applications by any authorities for sale in any market or that they will reach any particular level of sales. In particular, management's expectations regarding Medibio's ability to commercialise Medibio-ID, Medibio - DX, Medibio- RX, including its ability to obtain reimbursement for the products and its estimates of potential revenues, costs, profitability and financial performance could be affected by, among other things, unexpected trial results, including additional analysis of existing data, and new data; unexpected regulatory actions or delays, or government regulation generally; its ability to maintain patent or other proprietary intellectual property protection; competition in general; government, industry, and general public pricing pressures; and additional factors that involve significant risks and uncertainties about our products, product candidates, financial results and business prospects. Should one or more of these risks or uncertainties materialise, or should underlying assumptions prove incorrect, actual results may vary materially from those described herein as anticipated, believed, estimated or expected.

The information in the presentation is subject to change and unless required by law, Medibio assumes no obligation to update the presentation or its contents for any matter arising or coming to Medibio's notice after the date of the presentation.

Bioshares Biotech Summit

Objective Medicine
What Investors Need to Know
July 2017

DISCLAIMER



FORWARD LOOKING STATEMENTS

The purpose of the presentation is to provide an update of the business of Medibio Limited (**ASX:MEB**) (**OTCQB: MDBIF**). These slides have been prepared as a presentation aid only and the information they contain may require further explanation and/or clarification.

Accordingly, these slides and the information they contain should be read in conjunction with past and future announcements made by Medibio Limited and should not be relied upon as an independent source of information. Please contact Medibio Limited and/or refer to the Company's website for further information. The views expressed in this presentation contain information derived from publicly available sources that have not been independently verified.

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This presentation should not be relied on as a recommendation or forecast by Medibio Limited. Nothing in this presentation constitutes investment advice or should be construed as either an offer to sell or a solicitation of an offer to buy or sell shares in any jurisdiction.

JACK COSENTINO
HELLO

*CHANGING THE WAY
MENTAL HEALTH
CARE IS DELIVERED*

RULES TO A **SOLID INVESTMENT**

New Innovation Versus Disruptive

Addresses a Clear Market Need

Leadership and Governance Credibility

Clear Regulatory Pathway

Understanding of the Patient & Clinician

Defined Journey to Commercialisation

Every Beginning Must Have an Ending

COMMON MISCONCEPTIONS

Cash = Success

Patients will Change Healthcare

Regulatory Approval = Commercialization

More Data is Better

The Digital Doctor

Reimbursement Codes = Sales

“The single greatest illness that affects humankind”

Professor Stephen Lawrie
Head of Psychiatry at Edinburgh



THE REASON WHY *PREVALENCE*

350 MILLION

suffer from depression

26%

ADULTS IN US

Leading cause of disability in the US

1 in 13

suffer from anxiety

7.7M

PTSD sufferers in the United States alone,
or, **3.5%** of the population

27%

ADULTS IN EUROPE

THE REASON WHY
PATIENT CARE DISCONNECT

1 in 4 ADULTS WILL HAVE A
MENTAL HEALTH DIAGNOSIS

7.8 PSYCHIATRISTS PER 100,000
PEOPLE IN THE US (.0078%)



21M SUICIDE ATTEMPTS
FROM MENTAL ILLNESS

THE REASON WHY ***SUB-OPTIMAL TREATMENT***

OUT OF
350 MILLION
patients globally
< 7% total
receive optimal treatment

ONLY 50%

are ever diagnosed (Gonzalez, 2010)

SCREENING

30%

are incorrectly diagnosed

(Angst, 2011)

DIAGNOSIS

20%

receive optimal
treatment

(Barbui, 2006)

TREATMENT

THE REASON WHY COST

*“Mental illness will result in
\$6 trillion in health-care
costs, globally”*

- WHO

REFERENCES

- [NIMH article](#)
- World Health Organization. (WHO 2011a).
Global status report on non-communicable diseases 2010.
Geneva: WHO World Mental Health Day 2015

\$94.5B

Direct cost to treat
Major Depressive Disorder
(MDD) annually in the USA

\$12.6B

Direct cost to treat
Depression annually
in Australia

OUR IMPACT

CONTINUUM OF CARE

Wearables

*Fitbit, Garmin, Medtronic,
Apple Watch, etc.*

**Integrated Mental
Health System**

Primary Care Physicians

Standard Screener

Communities of Interest

VA, DOD, NIH, NIMH
Standard Screener

Psychiatrists/ Psychologists
Improved Diagnostic Accuracy

Pharmaceuticals

**Improves Patient
Experience
Adherence &
Treatment Efficacy**

Telehealth Platforms

**Medibio System
Integrations**

Corporate Wellness

**Home Test &
Medication
Management**

Payers

**Reimbursement for
Improved Health Score**

PAIN POINT



Current diagnostic tests rely on **clinical interviews with subjective interpretation**



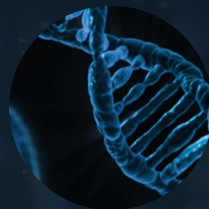
Concordance rates near **70% for psychiatrists** and **33-50% for primary care physicians**



No objective measure of treatment effectiveness leads to long titration cycles



The standard of care is assessment by a primary care physician > **Higher cost due to misdiagnosis**



OUR SOLUTION

Quantitative and objective diagnostic based on biomarkers

Repeatable, reliable test with demonstrated classification accuracy of >80%

Provides **objective indication of treatment efficacy** enabling time to optimal treatment

Cost-effective, scalable solution that can be administered at the primary care or specialty level > more reliable, repeatable and low cost

OUR UNIQUE POSITION TO IMPACT MENTAL ILLNESS



CHRIS INDERMAUR

Chairman
Seasoned ASX Chair



DR. ADAM DARKINS

Deputy Chairman
(Incoming Chairman)
Telehealth Icon



**DR. FRANKLIN
PRENDERGAST**

Non-Executive Director
Healthcare Luminary



MICHAEL PHELPS

Non-Executive Director
*World Class Athlete and Mental
Health Advocate*



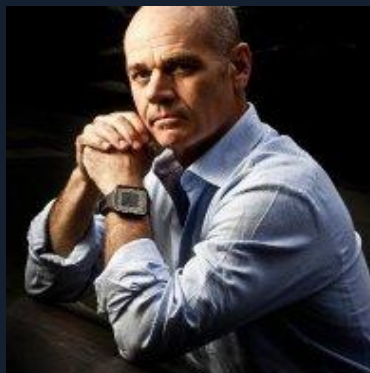
PATRICK KENNEDY

Non-Executive Director
*Former US Congressman and
Mental Health Advocate*



KRIS KNAUER

Non-Executive Director
Investor



ANDREW MAXWELL

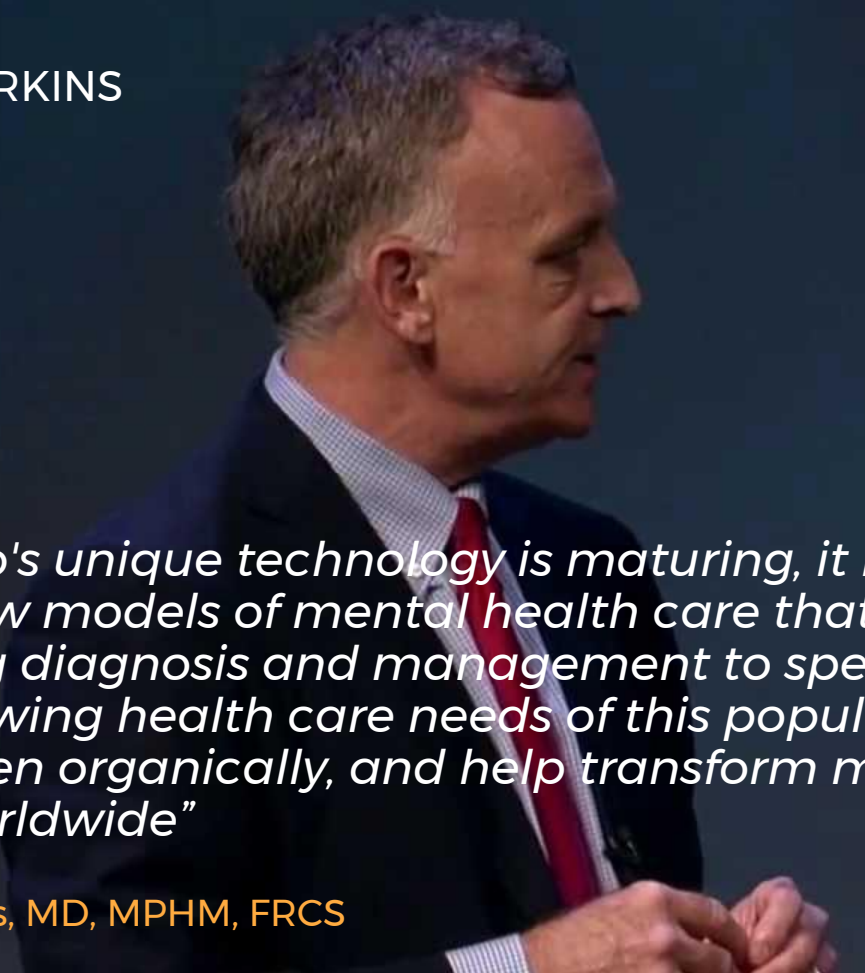
Non-Executive Director
Former Biotech CEO



JACK COSENTINO

CEO/Managing Director

DR. ADAM DARKINS

A man with short, graying hair, wearing a dark suit, a light blue patterned shirt, and a red tie, is shown in profile from the chest up. He is looking towards the right and appears to be speaking. His hands are clasped in front of him.

“As Medibio's unique technology is maturing, it has the potential to support new models of mental health care that focus on wellness. By objectifying diagnosis and management to specifically address the rapidly growing health care needs of this population, business growth will be driven organically, and help transform mental health care delivery worldwide”

Dr. Adam Darkins, MD, MPHM, FRCS

DR FRANKLYN PRENDERGAST



"During my career at Mayo the key thing that stood out to me is that the mental health care system is broken. I joined Medibio because they have a tool that can address it"

Dr Frank Prendergast, M.D., Ph.D.

MICHAEL PHELPS



"I have personally experienced Medibio's technology and believe it can help make a profound impact in diagnosing mental health and empowering people to seek the help and support they may need"

Michael Phelps

photo credit "Aqua Sphere"

PATRICK KENNEDY

A photograph of Patrick Kennedy, a man with short brown hair, wearing a blue zip-up sweater over a blue polo shirt. He is leaning on a wooden railing with his hands clasped, looking directly at the camera. The background shows a body of water and some distant structures under an overcast sky.

"I see a future where everyone who needs mental health care gets it. We must end the separate and unequal treatment of mental health and addiction, and ensure each of us is able to achieve a full, meaningful life."

Patrick Kennedy
Founder, The Kennedy Forum

photo : NBC News

STATE OF THE ARCHAIC
NOT STATE OF THE ART

WE MUST MOVE BEYOND SUBJECTIVE DIAGNOSIS

“The strength of each of the editions of DSM has been “reliability” – each edition has ensured that clinicians use the same terms in the same ways.

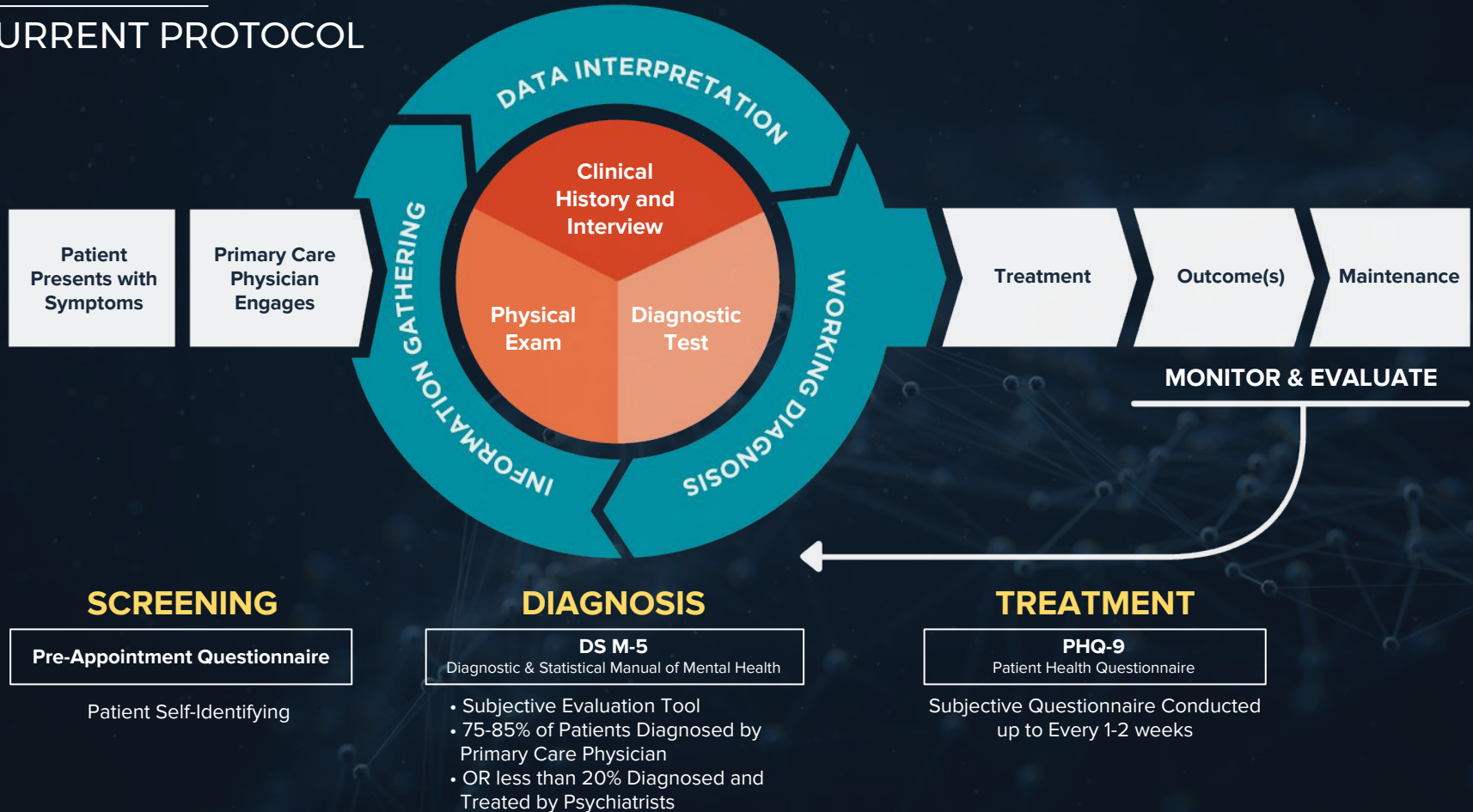
THE WEAKNESS IS ITS LACK OF VALIDITY

In the rest of medicine, this would be equivalent to creating diagnostic systems based on the nature of chest pain or the quality of fever. Indeed, **symptom-based diagnosis, once common in other areas of medicine, has been largely replaced in the past half century** as we have understood that symptoms alone rarely indicate the best choice of treatment.”

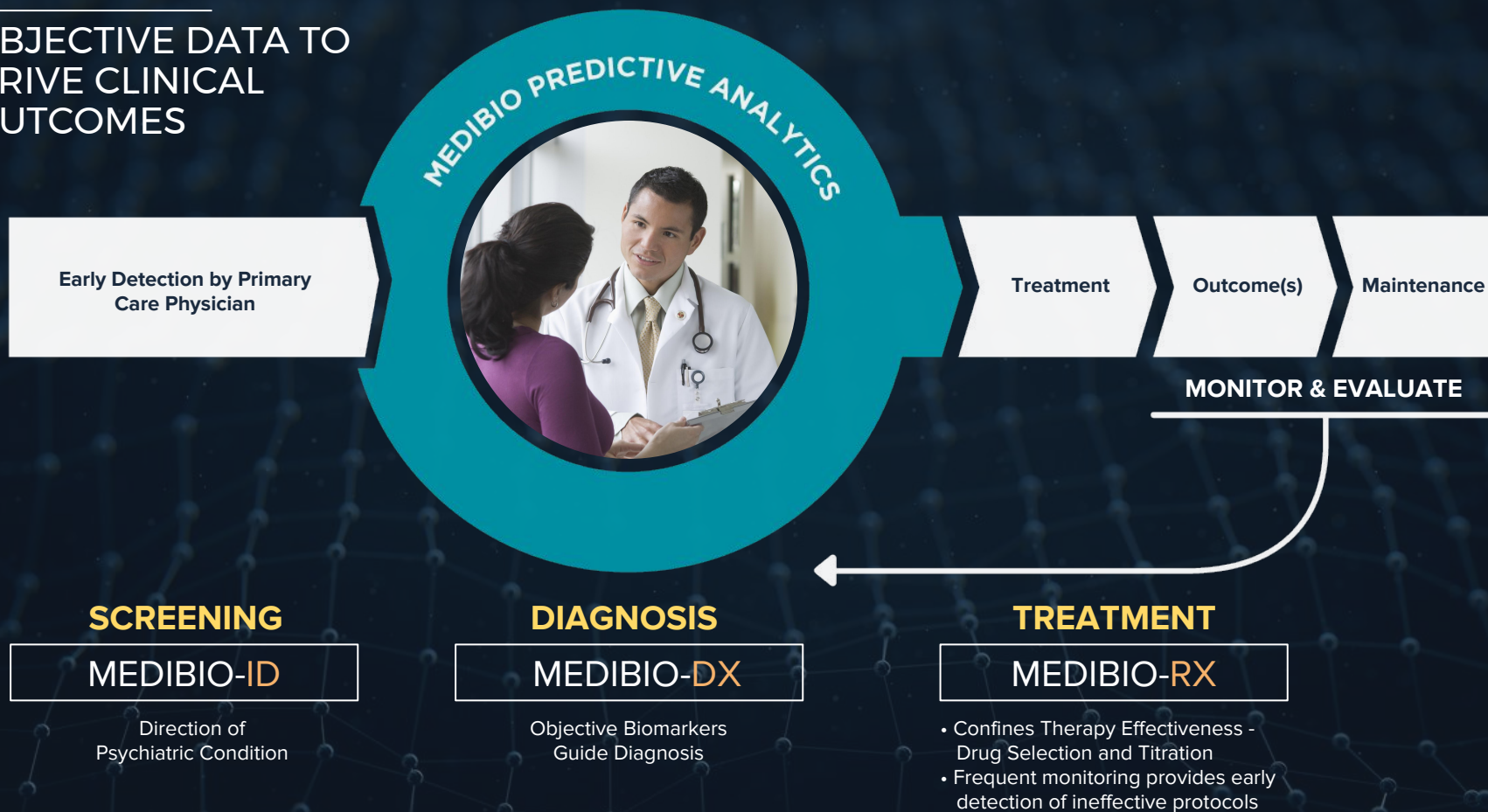
— THOMAS INSEL, FORMER HEAD OF NIMH

The image shows the cover of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). The cover is blue with white and yellow text. The title "DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS" is written in white, with "FIFTH EDITION" in yellow below it. The acronym "DSM-5™" is prominently displayed in large white letters at the bottom. The cover is slightly tilted and has a yellow border.

CURRENT PROTOCOL



OBJECTIVE DATA TO DRIVE CLINICAL OUTCOMES



HOW WE INNOVATE

PHYSIOLOGICAL DATA

(ECG, EEG, ACTIGRAPHY)



Device Agnostic approach



APPLICATIONS

Full Spectrum Mental Health

Major Depression
Disorder (MDD)

Generalized
Anxiety Disorder
(GAD)

Post Traumatic
Stress Disorder
(PTSD)

Schizophrenia
Disorder

Bipolar/Unipolar
Disorder

OUR ECOSYSTEM

Medibio sits in a unique position to address the communities of interest around the world...



PATIENT INPUTS



Devices



Wearables



Sensors

CLINICIAN OUTPUTS



Patient Records



Telehealth
Platforms



Pharma

with a data driven solution.

PATIENT PROFILE

Lara

AGE: 37 DIAGNOSIS: MDD

Laura has been suffering from MDD since her late teens but was not diagnosed until she was in her twenties. After diagnosis, she saw a psychiatrist but her health care plan did not cover the treatment and she could not afford the out-of-pocket cost so she stopped going. She has formed personal coping mechanisms and is now married with two children but still struggles with her depression. She worries that she is jeopardizing her family by not receiving effective treatment for herself.



PATIENT JOURNEY

Alex

AGE: 28 DIAGNOSIS: PTSD

Alex served two tours in Iraq and suffers from PTSD after losing a friend in combat. He struggled with episodes of severe anxiety and emotional instability upon his return and began to abuse alcohol. Finally, he sought the help of the VA for counseling. Overall, counseling has been helpful, but he's having a difficult time providing diagnostic support for disability to cover his medications and is frustrated with what he feels is a 'one-size-fits-all' approach to treatment.

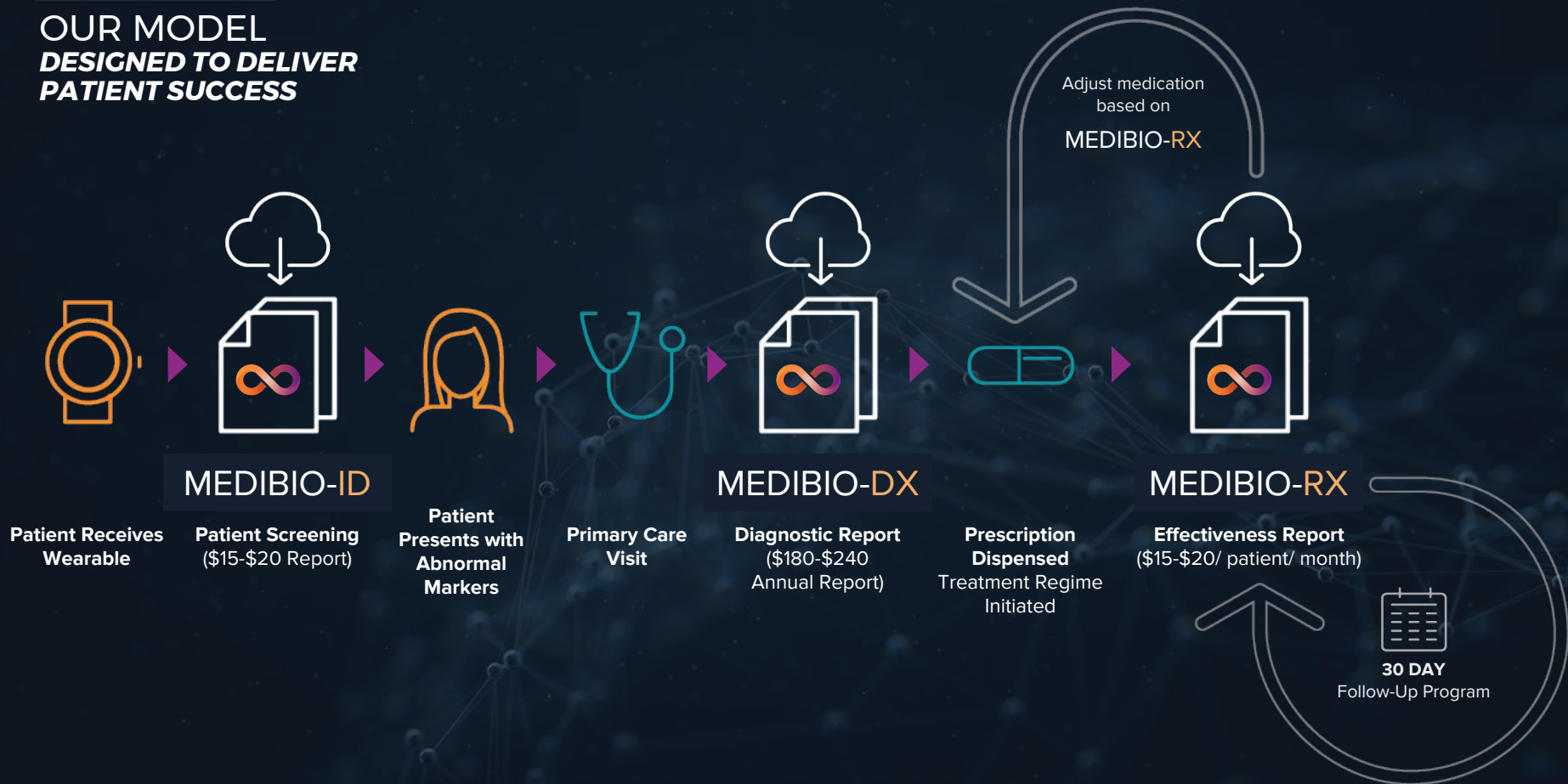


MARKET TRENDS

“...patients are taking increasing ownership of their own healthcare needs.”



OUR MODEL DESIGNED TO DELIVER PATIENT SUCCESS



BIOMETRIC-BASED OBJECTIVE DIAGNOSIS

A Focused Approach to Treatment:

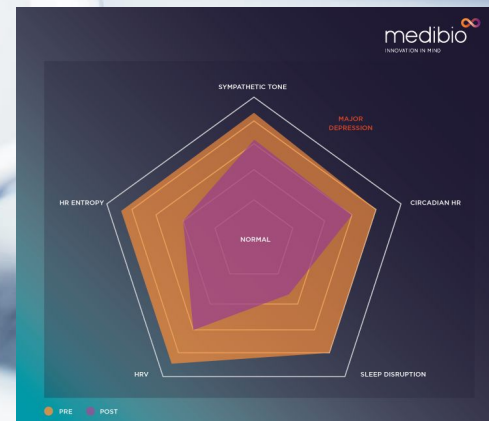
Panel of circadian, sleep and autonomic system biomarkers enables automated, repeatable, and objective characterization of the impact of mental illness on physiologic state

The heart-rate morphology, rate variability and overall sympathetic tone are indicative of the presence of depression.



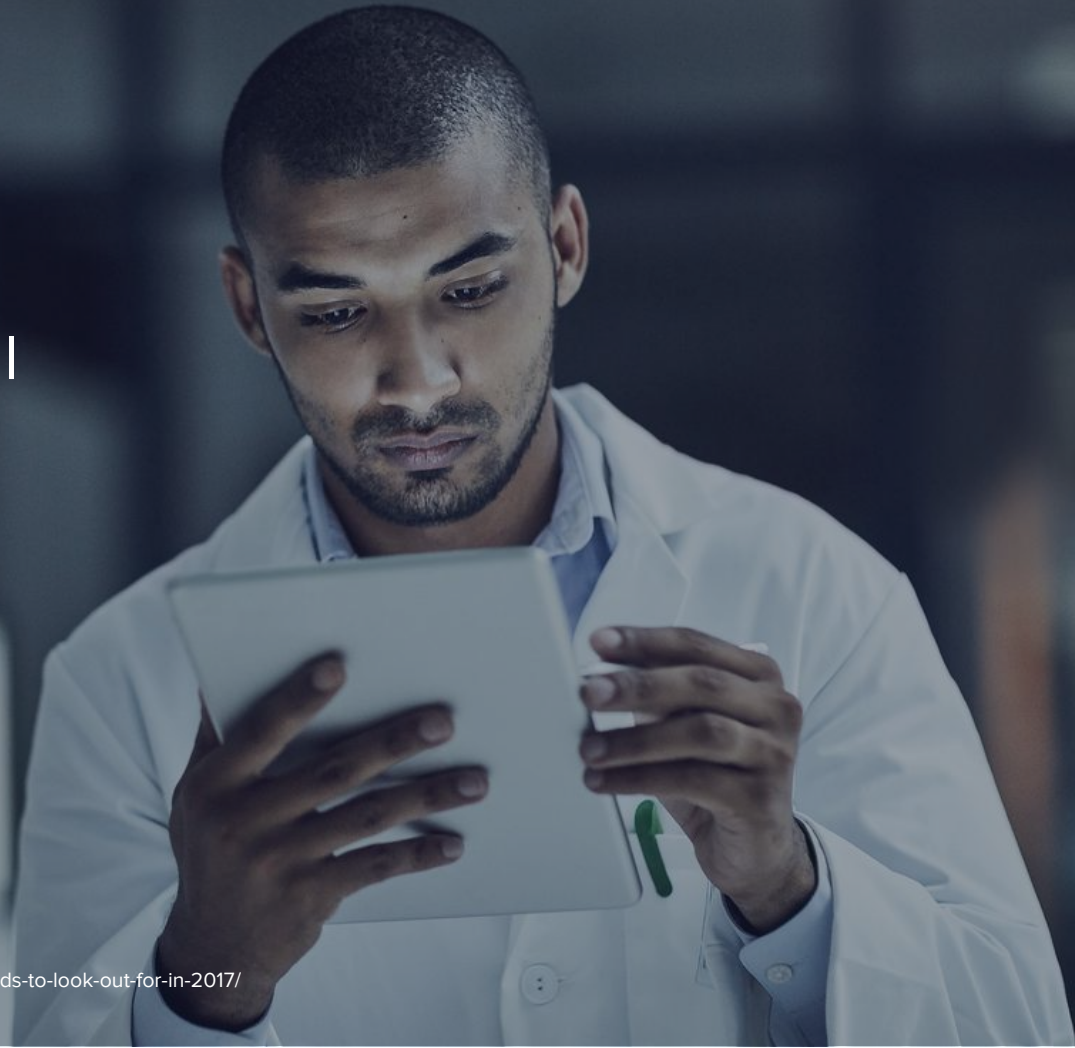
Lara gets a screening with **MEDIBIO-ID** to determine the severity of her symptoms. She is now equipped to approach alternative resources that specialize in helping those without insurance find care.

Alex receives a detailed Diagnostic Report from **MEDIBIO-DX** and is able to present it along with his disability application. With a detailed account of his PTSD, he is able to qualify and receive benefits for treatment.



MARKET TRENDS

“The main idea is that healthcare practitioners will no longer profit from the sickness of patients, but instead be incentivized to keep patients healthy...”



SHAREHOLDER VALUE

The digital health industry is calculated to be between

\$55 to \$67 billion USD

roughly about 1 to 1.5% of the global healthcare industry and is estimated to be growing at a rate of **20 to 25% annually**

REVENUE OPPORTUNITIES



Report Generated
(\$15-\$20 per report)



Patient Screening

1-time GP visit

MEDIBIO-ID



Decision Support Tool

Monthly Specialist Visit

MEDIBIO-DX



Patient Management

Pharma prescription management

MEDIBIO-RX



Predictive Population Management

Insurance Company/ Government Pharma

PATH TO REVENUE

Current primary care screening environment alone presents an **\$875M** opportunity. Another **50%** of population are unscreened. This test will be as common as taking a patient's vital signs.

PRODUCT	Per Patient Revenue	Estimated Market Size	Estimated Market Potential
EARLY DETECTION SCREENING MEDIBIO-ID	\$15-\$20 per patient session	43.8 million U.S. adults suffer mental illness annually	\$875 million U.S. Market
ACCURATE DIAGNOSIS MEDIBIO-DX	\$180-\$240 patient/ annually	21.9 million U.S. adults are diagnosed (50% rate)	\$5.3 Billion U.S. Market
RIGHT DRUG TREATMENT MEDIBIO-RX	\$180-\$240 patient/ annually	15.3 million U.S. adults accurately treated (70%)	\$3.7 Billion U.S. Market

Does **not** include treatment, prevention, medication management, data, as well as all other market (paediatric and adolescent) and applications of our system.

CORPORATE STRUCTURE

CAPITAL STRUCTURE (ASX:MEB)(OTCQB:MDBIF)

(amounts shown in AUD\$)

Market Cap **\$52.0M**
Share Price \$0.35
as of 7 July 2017
Shares on Issue 148.7M

Market Cap (fully diluted) **\$61.0M**
Share Price \$0.35
as of 7 July 2017
Fully diluted shares 174.2M
(per March 29, 2017 Appendix 3B)

Cash Available **\$10M**


(June 30, 2017 cash balance plus \$5M anticipated inflow over 9 months from R&D rebate, stock option exercise, & partly paid shares)

ANALYST RESEARCH & COVERAGE

Morgans: ADD; Target price: A\$1.20

Baillieu Holst: BUY; Price target A\$0.60

SUBSTANTIAL SHAREHOLDERS

10.5% 
FIDELITY
Institutional holder

7.2% 
CLAUDE SOLITARIO
Held since 2015, co-founder

52.4% 
TOP 20

OUR MILESTONES

TIMING	MILESTONE	STATUS
Q4, 2016	Pilot Study Validation Johns Hopkins University (Major Depressive Disorder n=20)	✓
Q1, 2017	Strategic Research Partnership - Emory PTSD	✓
Q2, 2017	Completion of John Hopkins University Validation Study (Major Depressive Disorder n=60) Publishing of Peer-reviewed paper - Emory University (PTSD)	✓
Q3, 2017	Agreement with FDA on subject numbers required for depression confirmatory study Commencement of Confirmatory Study to provide data for FDA Submission (n=200) Presentation of independent paper - University of Ottawa (Major Depressive) Announcement of results from the John Hopkins University Exploratory Study (Major Depressive Disorder n=60)	
Q4, 2017	CE Mark submission (Platform, Major Depressive Disorder diagnostic aid) QMS Audit for CE Mark	
Q1, 2018	CE Mark and QMS approval (Platform, Major Depressive Disorder diagnostic aid)	
Q2, 2018	FDA submission (Major Depressive Disorder diagnostic aid)	



INNOVATION IN MIND

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