



26 February 2016

Australian Securities Exchange (**ASX**)
Level 40, Central Park
152-158 St Georges Terrace
Perth WA 6000

INVESTOR PRESENTATION

Alcidion Group Limited (**Alcidion**) (**Company**) (ASX: **ALC**) is pleased to confirm that the Company will be reinstated to official quotation from the commencement of trading this Monday, 29 February 2016.

Alcidion will be making a presentation to Stockbrokers, Investors and Institutions today at 1:00 pm.

Please find attached to this announcement a copy of today's Investor Presentation.

Sincerely,

A handwritten signature in black ink that reads "Josh Puckridge". The signature is fluid and cursive, with the first letters of each word being capitalized and prominent.

Josh Puckridge

Director

Alcidion Group Limited

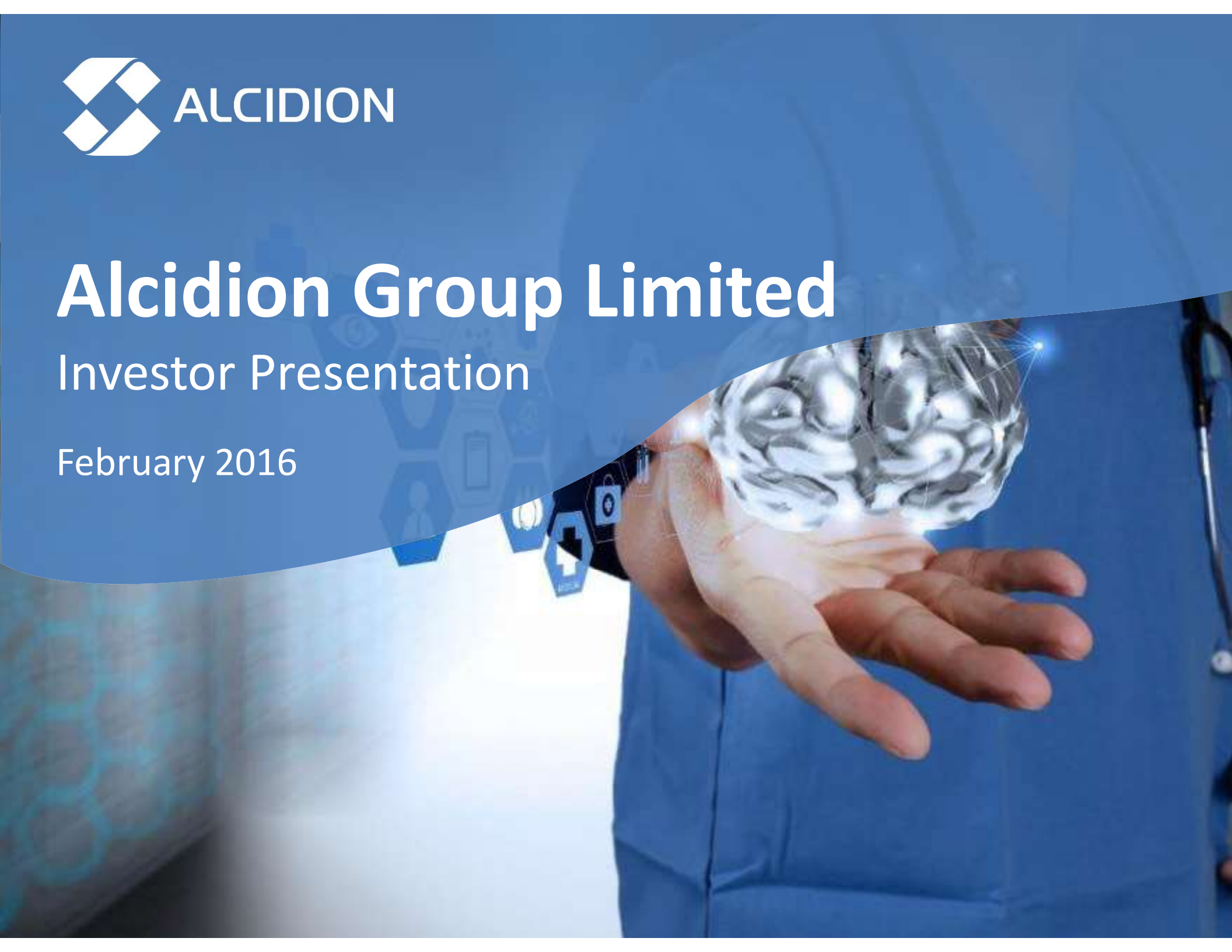
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Alcidion Group Limited

Investor Presentation

February 2016



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This presentation contains reference to certain intentions, expectations, future plans, strategy and prospects of the Company. Those intentions, expectations, future plans, strategy and prospects may or may not be achieved. They are based on certain assumptions, which may not be met or on which views may differ and may be affected by known and unknown risks. The performance and operations of the Company may be influenced by a number of factors, many of which are outside the control of the Company. No representation or warranty, express or implied, is made by the Company, or any of its directors, officers, employees, advisers or agents that any intentions, expectations or plans will be achieved either totally or partially or that any particular rate of return will be achieved.

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Nathan Buzza
Executive Director

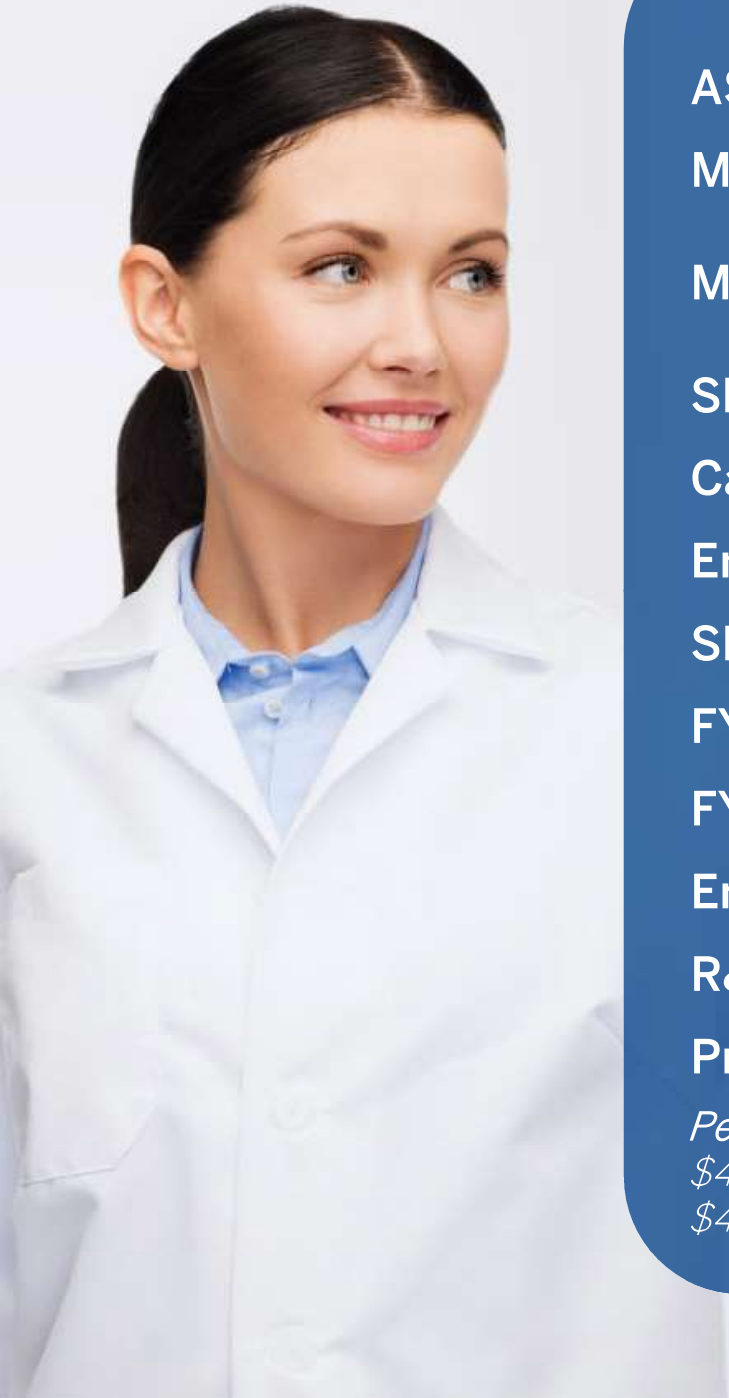
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ALCIDION

Executive Summary





ASX Ticker

ALC

Market Capitalisation

~\$33.76m

Management Ownership

39.55% Owned by Founders
8.65% Owned by Employees

Share Price

5.60c

Cash on hand

\$7.00m

Enterprise Value

\$26.76m

Shares on Issue

602,779,959

FY15 Revenues

\$5.05m, Audited

FY15 EBITDA

\$183k Loss, Audited

Employees

33 x FTE, 2 x Contractors

R&D Investment

~\$15m, Unaudited

Prior Funding

\$15.48m

Performance Shares

*\$4m in script on achieving \$10m in revenue within 2 years and;
\$4m in script on achieving \$15m in revenue within 3 years.*



**Chief Medical Officer
Prof. Malcolm Pradhan**

- Formal qualifications in medicine complimented by a PhD in Medical Informatics from Stanford University.
- Founding fellow of the Australasian College of Health Informatics.
- Associate Dean of IT & Director of Medical Informatics at the University of Adelaide.
- Clinical Lead within the Australian Government's National e-Health Transition Authority.



**Chief Executive Officer
Mr. Ray Blight**

- Formal qualifications include a Bachelor of Technology, Bachelor of Economics and a MBA.
- Former CEO of the South Australian Health Commission and Chair of the Health Ministers' Advisory Council
- Consultant to the World Bank.
- Chairs the University of SA IT & Mathematical Sciences Advisory Board.



**Executive Director
Mr. Nathan Buzza**

- Former CEO of Clinical Middleware provider, Commtech Wireless.
- EY "Entrepreneur of the Year" in both 2002 & 2005.
- BRW in the "Fast100", for three consecutive years.
- WA IT & telecommunications Life Time achievement Award for contribution to the IT community.
- Previously the second largest shareholder of Azure Healthcare ([ASX:AZV](#)).



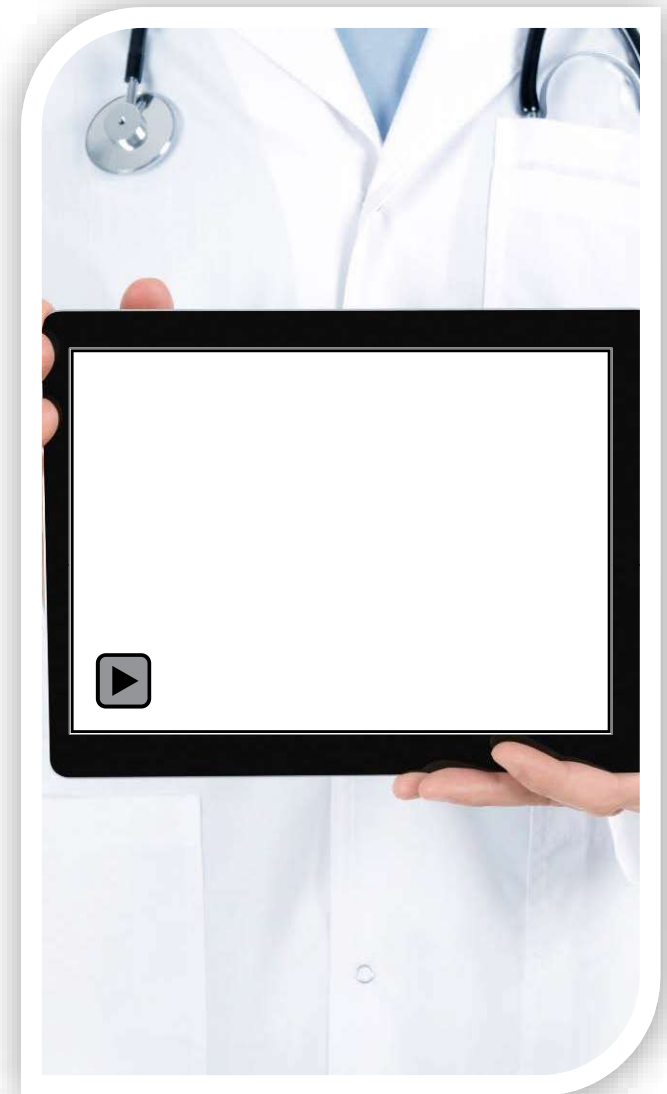
**Non-Executive Director
Mr. Nick Dignam**

- Formal qualifications include a Bachelor of Commerce, Bachelor of Law and a Masters of Applied Finance.
- Investment Director of BlueSky, a listed alternative asset manager with \$1b of assets under management.
- Responsible for originating new investment opportunities, working with portfolio companies to deliver growth and managing exit processes.
- Nick joined Blue Sky from Catalyst Investment Managers.

- Hospitals are built upon a complex eco-system of disparate Clinical Information Systems (CIS),
- Alcidion's Miya platform integrates disparate Clinical Information Systems to identify emerging clinical risk and push this clinical intelligence to the care team via a continuum of devices.
- Under the stewardship of our CMO, Professor Malcolm Pradhan and CEO Ray Blight, the former Chief Executive of the SA Health Commission, Alcidion has invested over \$15m in the development of the Miya Platform.
- The technology is already deployed and operational at Western Health, Northern Territory Health Department, Tasmania Health and the Royal Melbourne.
- The company enjoyed \$5m in revenues in FY15 from the deployment of the platform into beta sites.



- An Electronic Health Software Platform that :
 - Consolidates clinical and administrative patient data from multiple sources across the hospital (or hospitals) into a **single** platform.
 - Identifies patient clinical risk and provides guidance to mitigate that risk.
 - Provides ubiquitous access from a myriad of devices (mobile, web, electronic whiteboards) at the point of care.
 - A “Smartform” platform that captures clinical data in a structured format and provides Clinical Decision Support.
 - An Electronic Bed (Access) Management Platform that streamlines patient flow across the hospital.
- Pushes risk rated clinical information to the care team.
- Aimed at making visible the key points of patient information necessary to plan for care.
- Highly supportive of emerging BYOD trends as the industry transitions to Smartphones and tablets.



- Global expenditure on Healthcare IT is \$USD40.4b, growing to \$USD56.7b by 2017.
- Mobile Health technology is growing from \$USD6.9b market in 2014 to \$USD23b market by 2017.
- The Clinical Decision Support Systems Market is set to grow 21.5% CAGR from \$USD1.18b in 2013 to \$USD4.65b by 2018 (IndustryARC)
- One third of all hospitals in the USA are planning to invest in Patient Flow Solutions (Capsite, division of HIMSS).
- These trends are likely to repeat in other major western style health systems





“At BlueSky we meticulously evaluate every opportunity. Alcidion ticked all the boxes: Mobile, Healthcare, Information Technology, coupled with an internationally recognized Management Team.”

Nick Dignam
Investment Director
Blue Sky Private Equity

BlueSky
Alternative Thinking

“What really struck me about Alcidion was the deep seated passion of the founders to fix healthcare – coupled with their impeccable qualifications”

Nathan Buzza
Allure Capital



“...the Miya platform is creating a great deal of interest. It’s being used in hospitals across Australia and New Zealand, and there’s a possibility it will be trialed here in South Australia soon.”

Jay Weatherill MP
Premier of South Australia





ALCIDION

Market Opportunity



Unique Opportunity To Be Part of the New Digital Health Economy

AFFORDABLE CARE ACT

The introduction of the Patient Protection & Affordable Care Act 2010 (“Obamacare”) requires US hospitals to adopt Electronic Medical Records or face a reduction in Medicare reimbursements.



Experienced Management Team

“Capable and Experienced Management Team with a strong track record of commercializing healthcare software, including the former CEO & Chairman of the South Australian Health Commission, a Stanford qualified Medical Doctor and a former Ernst & Young Entrepreneur of the Year.”

Proven Technology

A modern, multi-story hospital building at dusk. The building features a dark facade with large windows and balconies, some of which are illuminated from within, casting a warm glow. The sky is a deep blue, and the overall scene is well-lit, highlighting the architectural details of the structure.

Alcidion's platform is installed into 11 large tertiary hospitals including Footscray, Sunshine, Williamstown, Royal Darwin & Alice Springs Hospitals and throughout Tasmania.

Disruptive Technology Platform

A person wearing a white hospital gown and a wristband is lying in a hospital bed. They are holding a tablet computer with both hands. The tablet screen displays a complex medical interface with various data points, charts, and text. The background is slightly blurred, showing the hospital bed and some papers.

The platform is at the forefront of medical technology, on the crest of the next generation of healthcare technologies.

Strong Growth Platform

The business recently secured a \$1.75m contract with the Northern Territory Health Department to roll out a pilot of the Computerised Physician Order Entry technology (CPOE).

Several new contracts are presently being negotiated with leading public and private hospitals throughout Australia and New Zealand.

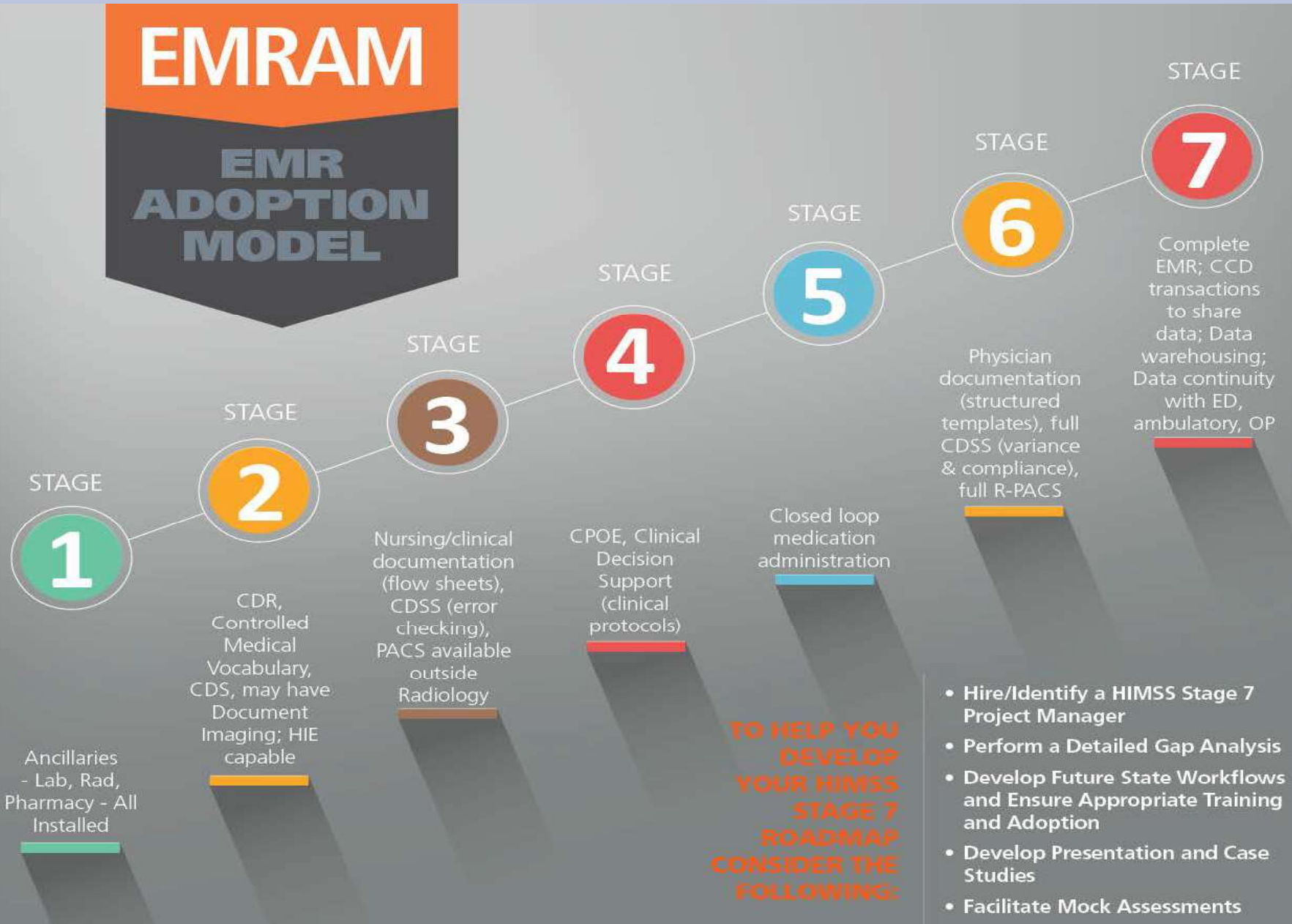
Fully Funded

The recent RTO of Naracoota Resources, will see the company fully funded, with in excess of \$7.00m in cash and debt free.

The tablet displays a financial spreadsheet with columns for 'Date', 'Description', 'Debit', 'Credit', 'Balance', 'Type', 'Status', 'Account', 'Project', 'Location', 'Unit', 'Cost', 'Budget', 'Variance', 'Actual', 'Budget', 'Variance', 'Actual', 'Budget', 'Variance'. The spreadsheet shows several rows of data with green highlights in the 'Debit' and 'Credit' columns.

Date	Description	Debit	Credit	Balance	Type	Status	Account	Project	Location	Unit	Cost	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
1/1/2020
...
...







ALCIDION

Product Overview



Miya ED

Build a team based approach to managing clinical risk

Clinical Dashboard & ED Whiteboards	Results Management
Missed Result Tracking	Miya ID

Miya Patient Flow

Create a safer, more efficient patient journey.

Electronic Journey Boards	Department Metrics
Miya Mobile: Mobile EMR	Miya Smartforms®
Clinical Portal	Miya Access Bed Management System

Miya Clinic

Mitigate risks and streamline your Outpatient Department

Referral Management System	Clinical Dashboards
Miya Smartforms®	Results Management

Administrative

PAS HL7 Admit, Discharge, Transfer

PAS HL7 Patient Demographics

PAS Export Elective Admissions

Emergency IS Patients, Admit Requests

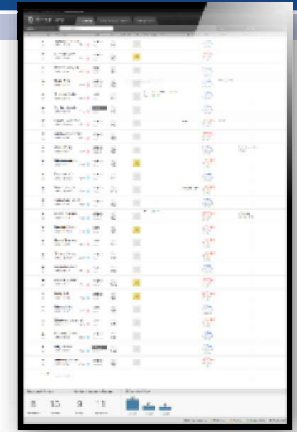
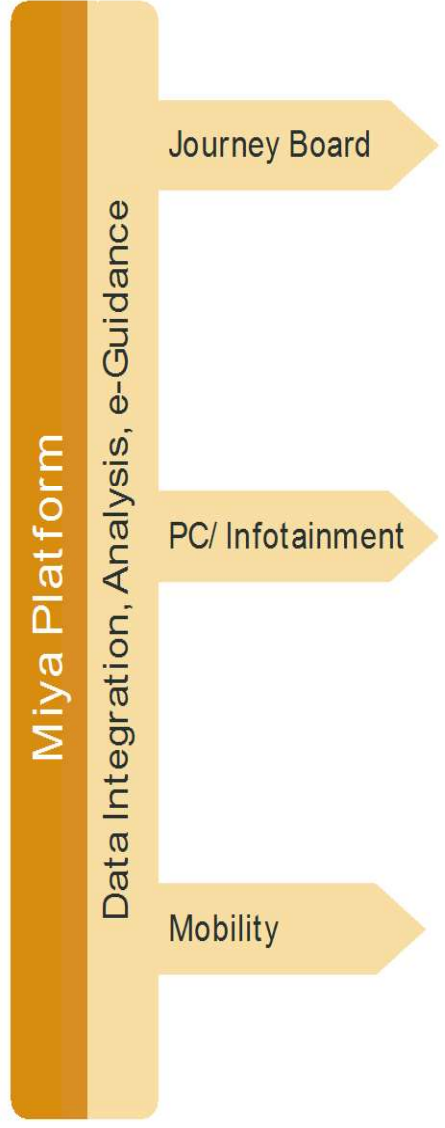
Clinical

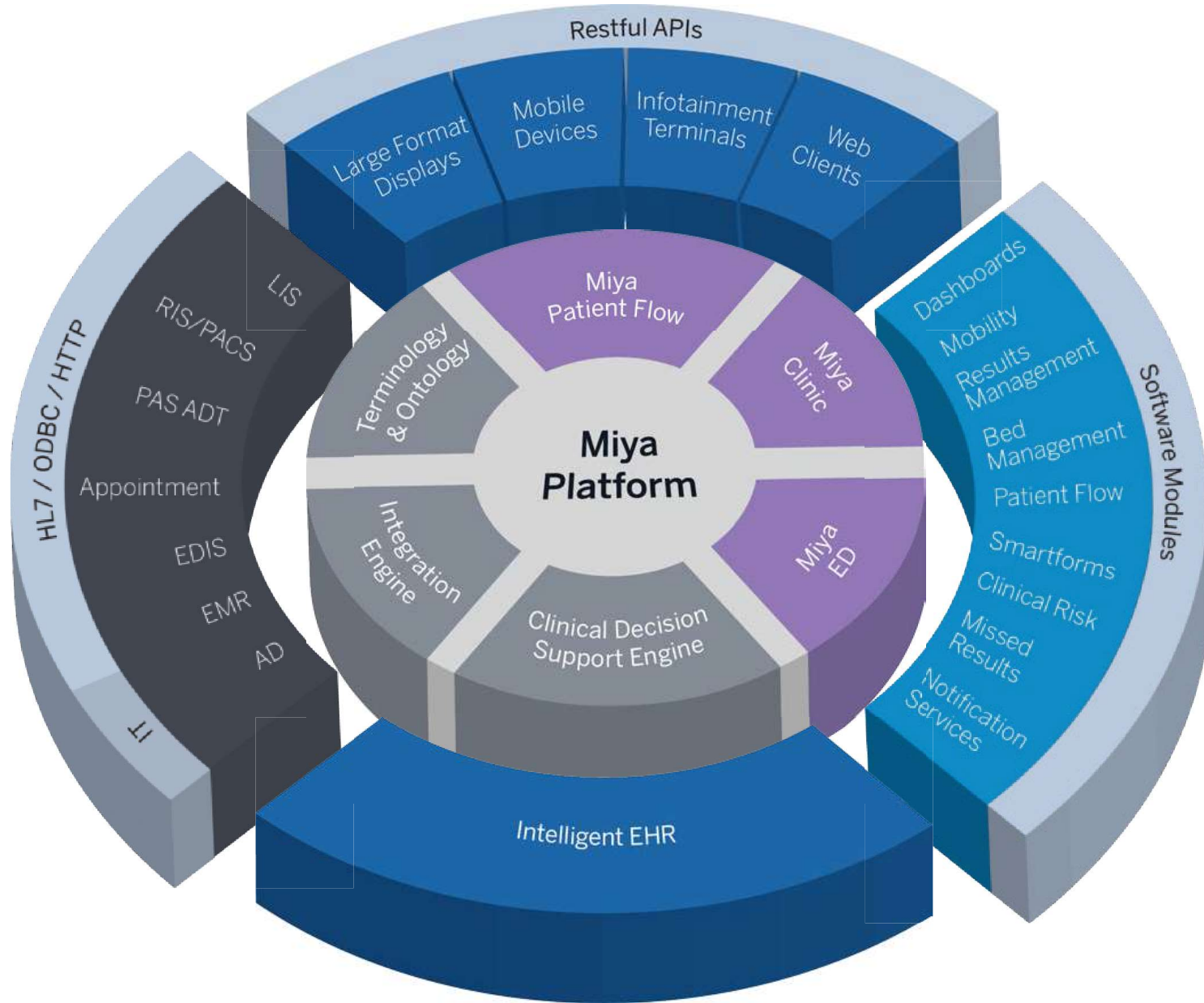
Laboratory Results

RIS Orders, Bookings

PACS Images

Active Directory Roles, Users

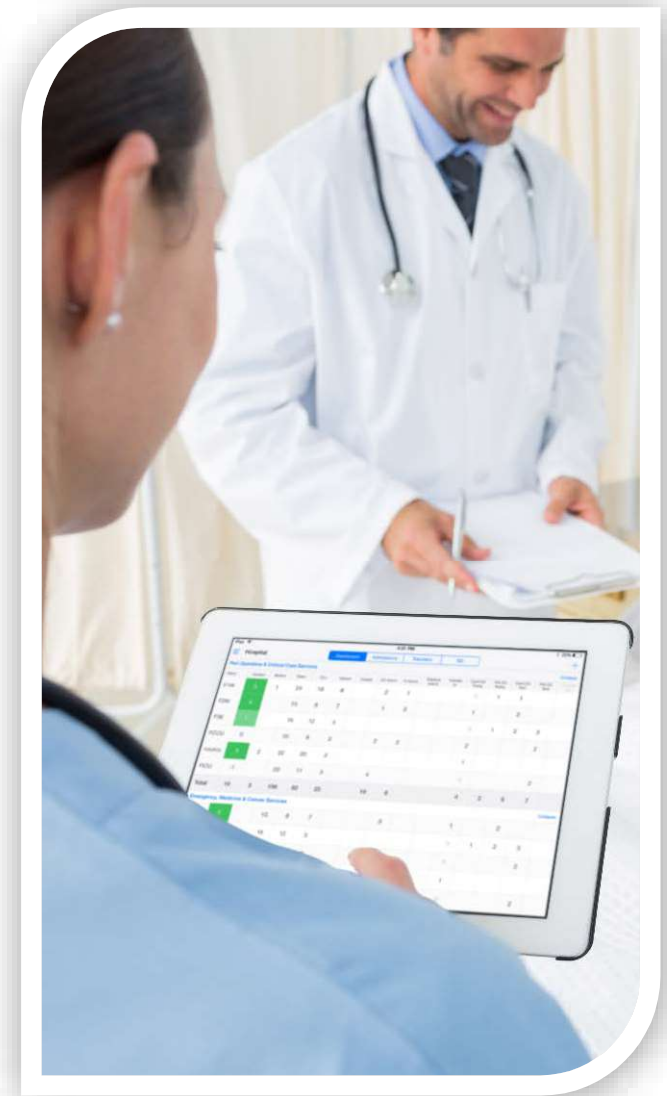




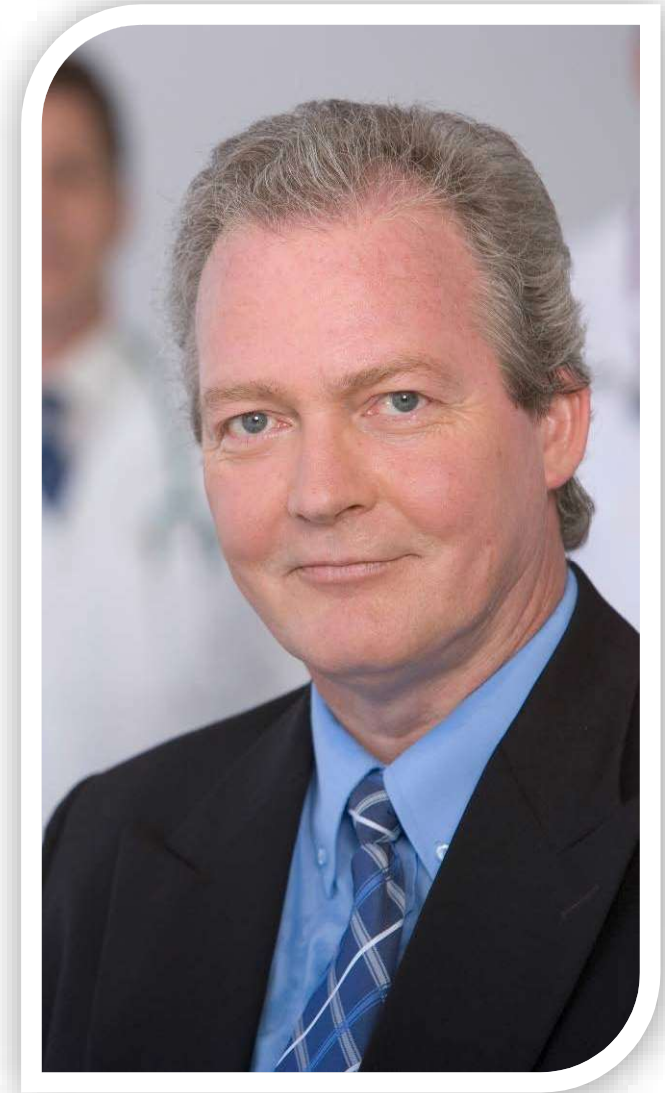
- Miya ED adds value to existing ED information systems and delivers significant service performance improvement, for example, with Miya ED in the Northern Territory:
 - Patient treatment commences an hour earlier – early intervention leads to faster recovery and better clinical outcomes.
 - Redundant test orders are reduced – 5% savings in ED pathology costs (ED's typically consume about 40% of the pathology orders in an acute general hospital).
 - Critical (abnormal) test results are properly witnessed for follow-on action – without Miya ED around 40% of test ordered are not read (and 18% of these will be critical).
 - Miya ED saves ED Heads/Senior Consultants several hours a day – they do not need to manually check laboratory/patient records for missed abnormal results.
 - Care team satisfaction with Miya ED is very high – rated at better than 80% compared to other clinical systems at around 30%.
- Miya ED is installed Royal Melbourne, Royal Darwin, Alice Springs, Footscray, Sunshine and three other public hospital ED's.



- Miya Patient Flow guides the care team in optimising a patient's journey through the hospital services.
- Miya Patient Flow supports the efficient use of hospital beds/resources whilst providing effective clinical outcomes for patients – it has appeal to both executive management and clinical staff in hospitals.
- There are approximately 750 public hospital and 610 private hospitals in Australia - all hospitals are under budget pressure to make efficiencies whilst preserving patient safety and the quality of clinical outcomes.
- Miya Patient Flow is now in production at Royal Darwin and Alice Springs hospitals and has been given preferred product status for a Hospital Operations Centre solution at Palmerston North hospital in New Zealand and presently under consideration by a large Private Hospital Group in Australia.



- Miya Clinic provides clinical decision support for Doctors treating ambulatory patients in the Outpatient services of a hospital – Outpatient services include minor procedures, medical consultations/diagnosis and allied health interventions (e.g. physio).
- Australia's public hospitals provide around 26 million outpatient services annually.
- Australia's outpatient services are considered inefficient - with average attendance per patient being more than twice as high as in the UK for example.
- The pressures on outpatient's services will increase as public hospitals seek to reduce the cost of inpatient services.
- Miya Clinic has recently been redeveloped to provide clinical decision support to improve Doctor productivity and help reduce the number of attendances per patient – a new product to address a major problem in public hospital services.





ALCIDION


Customer Testimonials



A man with dark hair and glasses, wearing a white lab coat, is seen from the side, looking at a tablet. The tablet screen displays a medical interface with a red header and various data fields. The background is a blurred clinical setting.

“This has skyrocketed the efficiency in patient care as well as the safety”

Professor Tissa Wijerante
Consulting Neurologist
Director of the Stroke & Neuroscience Unit
Western Health

A person wearing a white lab coat is holding a tablet computer. The tablet screen displays a complex data interface with various charts, tables, and text. The person's hand is visible, interacting with the screen. A silver watch is visible on their wrist. The background is slightly blurred, showing what appears to be a hospital bed with white linens.

“The system assists in safe and effective patient care by identifying patients who are at risk”

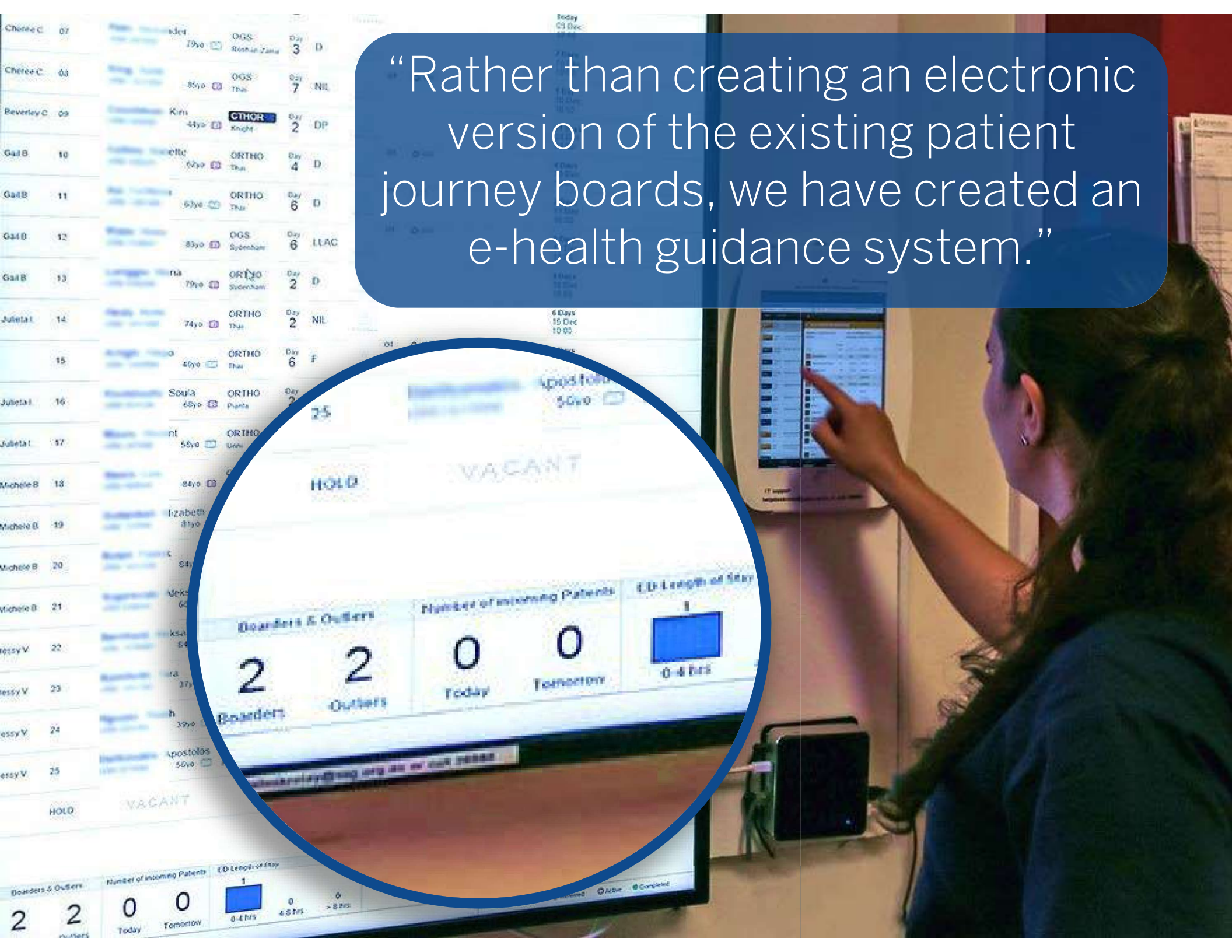
Marcus Storey
Nurse Unit Manager
Western Health



“You’ll see nearly all of the clinical, executive and divisional directors walking around with the bed management views on their iPads, and the same with the bed management staff, the quality managers, the NUMs and any staff that help move the patients around.”

Jason Whakaari
Executive Director of ICT, Western Health

“Rather than creating an electronic version of the existing patient journey boards, we have created an e-health guidance system.”



Boarders & Outlets	Number of incoming Patients	ED Length of Stay
2 Boarders	0 Today	1 (0-4 hrs)
2 Outlets	0 Tomorrow	





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Unused Slides



Stage	Cumulative Capabilities	2015 Q3	2015 Final
Stage 7	Complete EMR; CCD transactions to share data; Data warehousing; Data continuity with ED, ambulatory, OP	4.1%	4.2%
Stage 6	Physician documentation (structured templates), full CDSS (variance & compliance), full R-PACS	25.4%	27.1%
Stage 5	Closed loop medication administration	34.6%	35.9%
Stage 4	CPOE, Clinical Decision Support (Clinical Protocols)	10.3%	10.1%
Stage 3	Nursing/Clinical Documentation (Flow Sheets), CDSS (error checking), PACS available outside Radiology	17.3%	16.4%
Stage 2	CDR, Controller Medical Vocabulary, CDS, may have Document Imaging; HIE capable	3.5%	2.6%
Stage 1	Ancillaries – Lab, Rad, Pharmacy – All installed	1.8%	1.7%
Stage 0	All three Ancillaries Not Installation	3.1%	2.1%



Customer Demand

- Increased cost pressure drives the need to quantifiable ROI.
- Demand for systems drives base of service growth.
- Ongoing regulatory requirements (ISO, FDA, MDD, MMA).
- Patient Satisfaction / Safety.
- Clinician Satisfaction / Safety.
- Workflow & Bed Management.
- Healthcare Group Consolidation, driving standardization across healthcare.
- Ward Pull versus Ward Push.
- Growing market opportunity for Clinical Decision Support and Mobility Solutions within healthcare.
- Growing Incidences of Medication Errors
- Requirement to meet the criteria of "Meaningful Use" to receive incentives by the US Federal Government encourage the adoption of EHR

Technology

- Growing demand for integrated Clinical Decision Support Solutions with EHR and CPOE.
- Technological revolution in Clinical Connectivity.
- Rising demand for analytical solutions.

Demographics / Economy

- **Demographics**
 - Rise in ageing population
 - Longer life expectancy
 - Growth in comorbidities
 - Elderly people stay off site
- **Regional Trends**
 - USA, APAC & Latin America economic growth triggers new Capital Expenditure.
 - Growth in patient consumerism for quality care
- **Economic Cycle**
 - Series of recessions.
- **Cost Pressure in Health care;**
 - Government initiatives that promote the adoption of Clinical Decision Support.
 - Increase focus on work efficiency.
 - Shortage of clinicians.

A growing market for
Clinical Decision Support

Challenges

- Growing concerns over security.
- Integration challenges.
- Costs incurred while integrating.
- Alert fatigue.
- Fragmented End-User Market

	Company	Code	Revenue	EBITDA	Working Capital	Market Cap.
	Global Health	GLH	\$4.54m	\$1.23m		\$14.34m
	Uscom Ltd	UCM	\$1.89m	\$1.13m		\$13.55m
	Resonance Health	RHT	\$2.68m	\$260k		\$8.03m
	Cogstate	CGS	\$16.19m	\$2.83m		\$61.50m
	Respiri (iSonea)	RSH	Pre Revenue	\$6.07m		\$9.29m
	Analytica	ALT	\$1.12m	\$5.14m		\$3.89m
	Brain Resource	BRC	\$2.71m	\$2.20m		\$22.42m
	Orion Health	OHE	\$			\$432m
	ResApp Health	RAP	Pre Revenue	\$490k		\$63.04m
	Medtech Global	MDG	\$18.47m	\$520k		\$8.72m
	3D Medical Limited	3DM	Pre Revenue	\$1.48m		\$21.48m

The above data is based upon the Annual Reports available as of 23/02/2016 published on the ASX Web site, with the Enterprise Valuation of Market Capitalization calculated on the same date. No warrants or representations are made to the accuracy of this data.