

CATCH WET AMD THE **MOMENT** IT STRIKES

For dry AMD patients, **CNV** is always lurking,
threatening to attack.

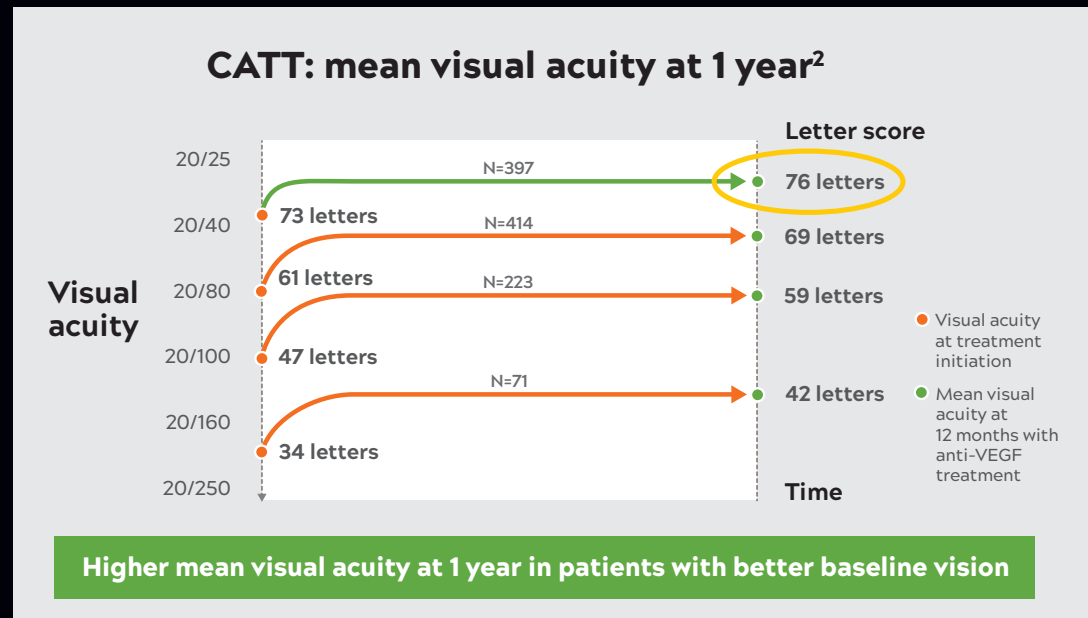
ForeseeHOME™
AMD Monitoring Program

DETECT EARLY TREAT EARLY



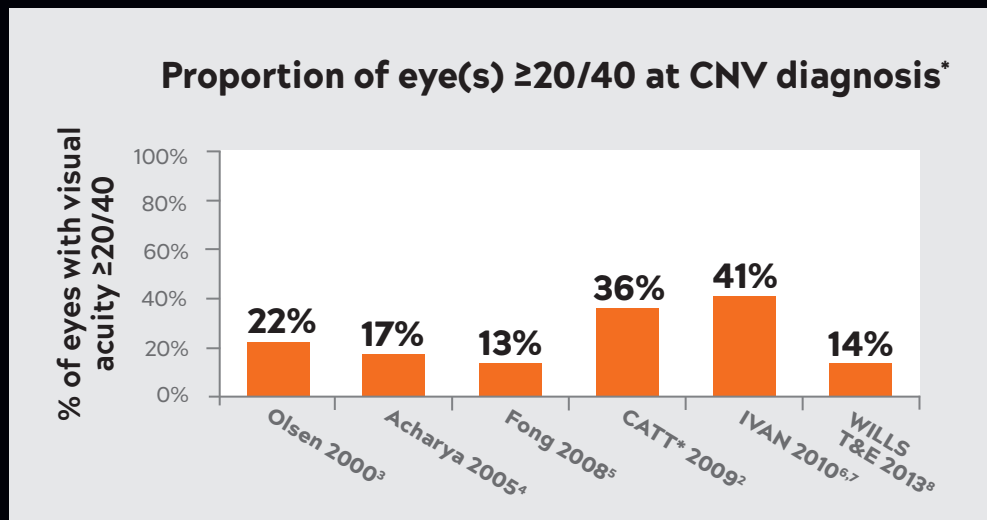
Early detection is critical to maintaining functional vision

- > Early diagnosis is essential for preserving functional vision¹
- > Lesions at the onset of CNV grow more quickly, resulting in more rapid vision loss than later stage lesions¹



- < On average, patients with 20/40 visual acuity or better at diagnosis of wet AMD maintained that level of vision at 1 and 2 years following treatment¹
- > Absolute vision is better preserved when anti-VEGF therapy is initiated while CNV lesions are small and VA has not yet deteriorated

For the vast majority of patients, **some vision loss is irreversible** by the time wet AMD is detected with standard methods



*Range of 13%-41% from clinical trials that include CATT and IVAN and real world experience.



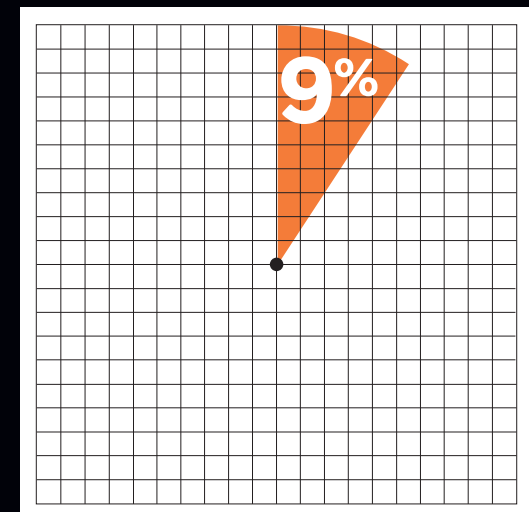
Only up to 41% of newly diagnosed patients with CNV are detected early with good functional vision



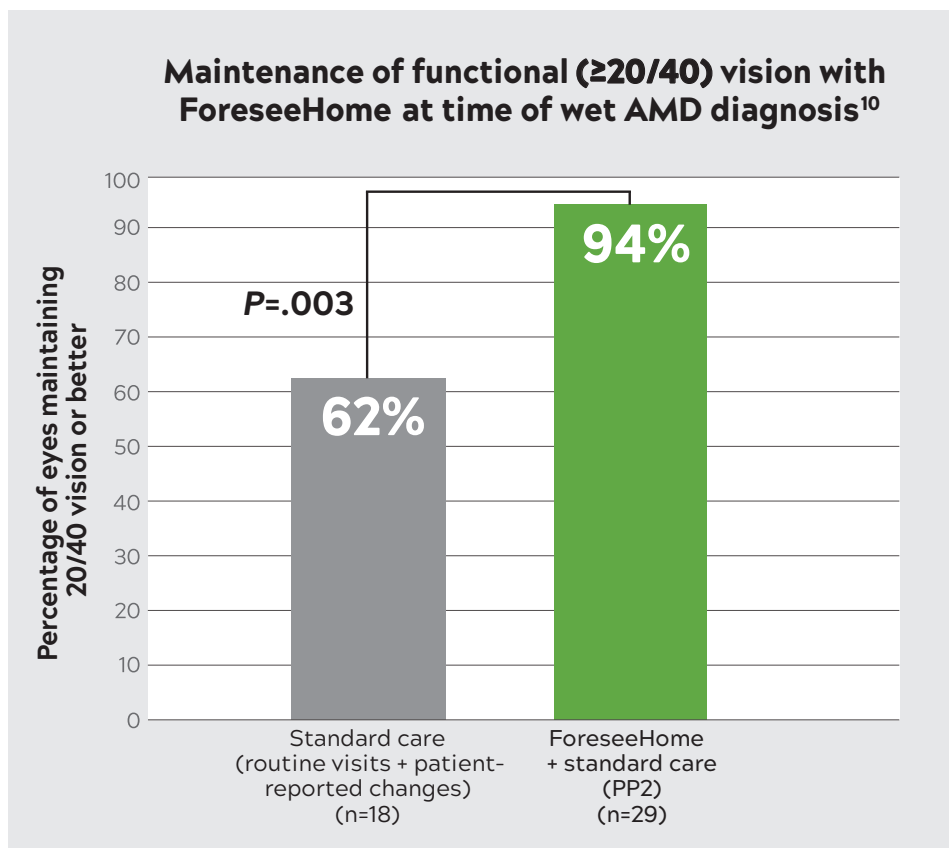
The Amsler Grid alone is not effective, detecting early wet AMD ($\geq 20/40$) in **as little as 9% of patients**⁹

> Wet AMD may be present for **6-12 months before detection** and treatment¹

AMD=age-related macular degeneration; CATT=Comparison of AMD Treatments Trials; CNV=choroidal neovascularization; IVAN=The Inhibition of VEGF in Age-related choroidal Neovascularization trial; VA=visual acuity; VEGF=vascular endothelial growth factor.



Detect wet AMD earlier with ForeseeHome as part of a home detection program¹⁰



A simple daily test alerts you if potential AMD progression is detected

- > With ForeseeHome, 94% of patients who progressed to wet AMD retained functional vision ($\geq 20/40$) vs only 62% of patients using standard detection methods alone¹⁰

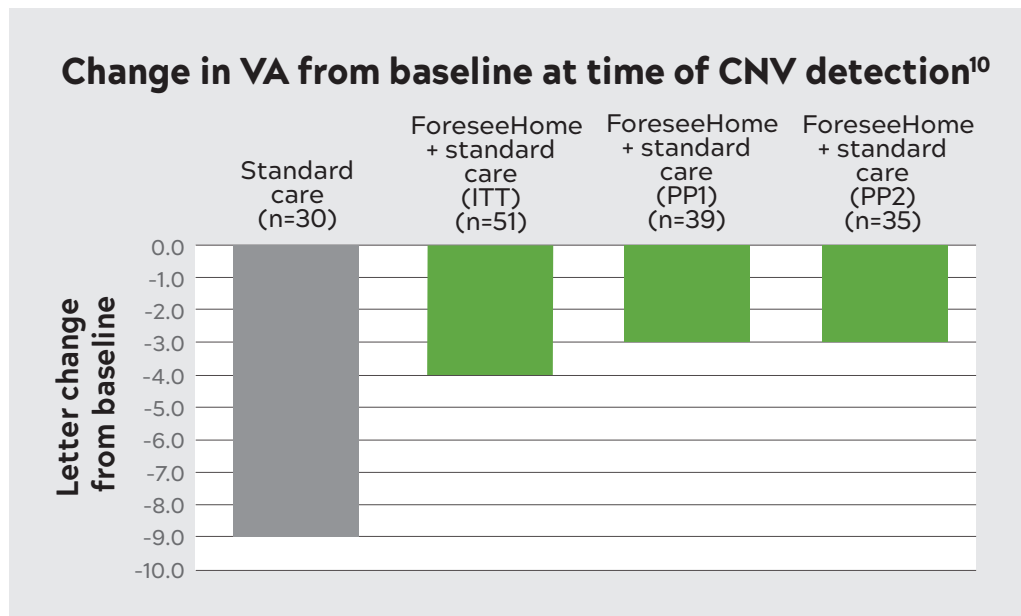
The HOME Study used the ETDRS chart to measure the number of letters for visual acuity. The Snellen equivalent for visual acuity is presented here.

Study design: An unmasked, controlled, randomized clinical trial of 1520 participants 53 to 90 years of age with intermediate AMD at high risk of CNV. The study compared home monitoring with ForeseeHome plus standard care vs standard care alone to determine if the addition of the home monitoring device improved visual acuity at the time of CNV detection.¹⁰

As few as 17.5% of patients have a baseline VA of $\geq 20/40$ (Snellen equivalent) at treatment initiation based on real-world data¹¹

ForeseeHOME™ DETECT EARLY
AMD Monitoring Program TREAT EARLY

ForeseeHome increased the likelihood of detecting wet AMD earlier¹⁰



Including ForeseeHome reduced vision loss at wet AMD diagnosis by 6 letters compared with standard care alone

The trial was terminated early for efficacy; ForeseeHome demonstrated significantly better levels of vision at CNV detection vs standard care alone¹⁰

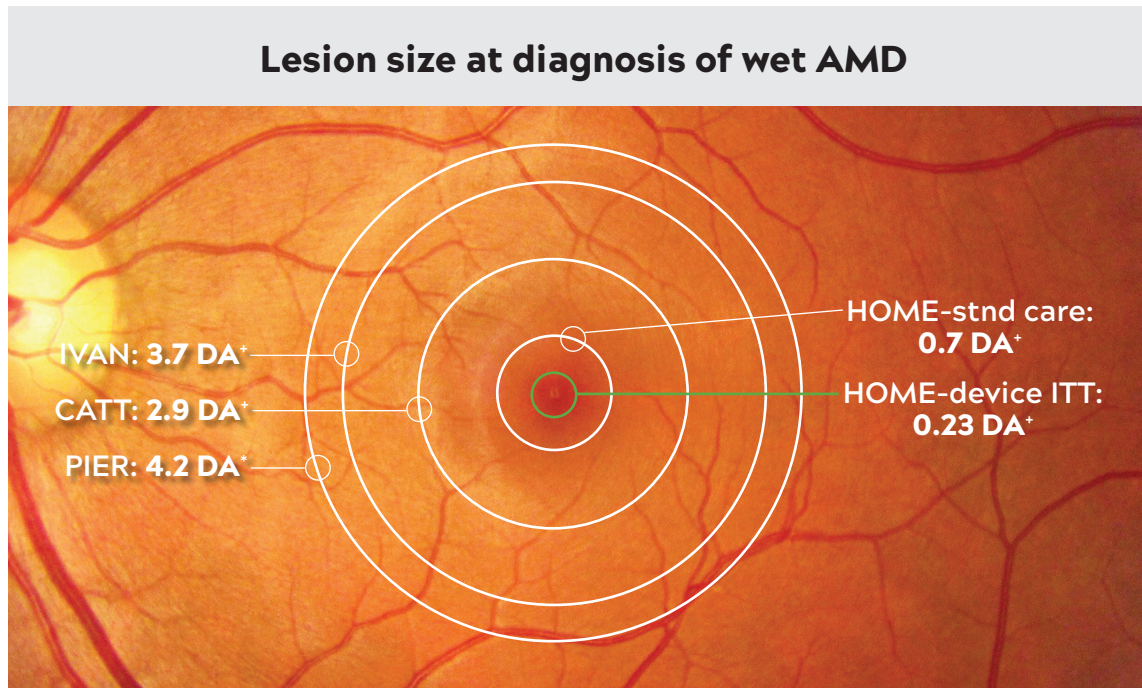
The HOME Study used the ETDRS chart to measure the number of letters for visual acuity. The Snellen equivalent for visual acuity is presented here.
ETDRS=Early Treatment Diabetic Retinopathy Study; ITT=intention to treat; PP1=per protocol 1 cohort; PP2=per protocol 2 cohort.

+ ForeseeHome =

16x

> Office visits triggered by using ForeseeHome as part of a home monitoring program were 16 times more likely to detect new cases of wet AMD compared with routine scheduled office visits¹⁰

Lesion sizes were significantly smaller at wet AMD diagnosis with ForeseeHome vs standard care alone^{2,6,10,12}



1 disc area=2.54 mm².

Study design: An unmasked, controlled, randomized clinical trial of 1520 participants 53 to 90 years of age with intermediate AMD at high risk of CNV. The study compared home monitoring with ForeseeHome plus standard care vs standard care alone to determine if the addition of the home monitoring device improved visual acuity at the time of CNV detection.¹⁰

Lesions were approximately 3-fold smaller at CNV diagnosis with ForeseeHome vs standard care alone in the HOME study¹⁰

ForeseeHome is appropriate for the type of patients you see every day

ForeseeHome is for intermediate dry AMD patients at risk of developing wet AMD⁷

Common intermediate dry AMD patient types

Intermediate dry AMD with 1 large drusen ($\geq 125 \mu\text{m}$)

Intermediate dry AMD with multiple medium drusen ($63 - 124 \mu\text{m}$) in both eyes

Intermediate dry AMD with drusen and hyperpigmentation

Intermediate dry AMD in one eye, wet AMD or central GA in the fellow eye

BCVA=best corrected visual acuity.

ForeseeHome is recommended in the American Academy of Ophthalmology's Preferred Practice Pattern for Age-Related Macular Degeneration¹³

Patients must have:

OD (right eye)

H 35.31 1 2

(dry intermediate, right eye)

BCVA 20/60 or better

or

OS (left eye)

H 35.31 2 2

(dry intermediate, left eye)

BCVA 20/60 or better

or

H 35.31 3 2

(dry intermediate, bilateral)

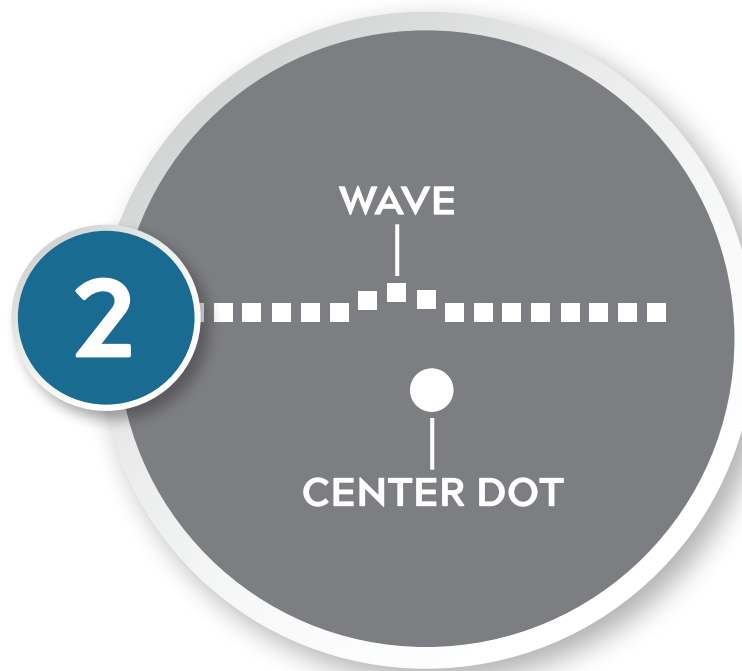
BCVA 20/60 or better

3 minutes per eye per day– it's that simple

Setup and daily tests are quick and easy for patients;
you control how alerts are managed⁷



- > The patient uses a mouse to click where a bump or wave in the dotted line appeared on the screen



- > ForeseeHome uses PHP to detect tiny changes in the central visual field, including metamorphopsia and scotoma

Timely alerts can lead to earlier treatment⁷

A ForeseeHome alert can lead to early detection of CNV and early treatment

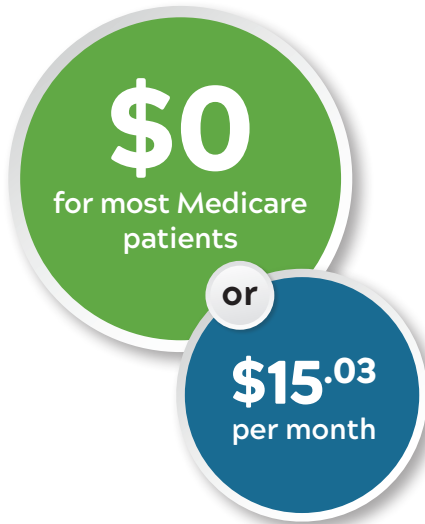


- > The patient's daily test results are automatically sent to Notal Vision®
- > You are alerted when a significant change from baseline occurs, which may indicate AMD progression
- > Monthly reports are emailed to your practice. Testing results are available 24/7 via the Notal Vision portal
 - You customize how alerts are shared; they can be sent to you or anyone in your office via email
 - Alerts can also be sent to patients with your written consent

- > In the clinical study, 21% of patients experienced alerts that were not associated with the onset of wet AMD, such as metamorphopsia or scotoma¹⁰
 - ForeseeHome measures statistically significant changes in metamorphopsia and scotoma. Alerts that do not lead to a wet AMD diagnosis may still indicate other significant changes in the disease status that need to be addressed clinically

ForeseeHome is available with little to no out-of-pocket costs for the majority of patients⁷

Our Patient Financial Services Department will work with all patients' insurance plans to determine and secure coverage.



- > Patients with **Medicare and a secondary supplement plan** may have out-of-pocket costs as low as **\$0 per month**;
- > Patients with **Medicare and no secondary supplement plan** will pay **\$15.03 per month** once their \$185 yearly Medicare Part B deductible is met;
- > Patients with **Medicare Advantage Plans or commercial insurance** require further verification to determine a monthly out-of-pocket cost.

- > **Financial Assistance Program:** Patients without coverage or who are unable to pay the out-of-pocket costs can apply for the Notal Vision Patient Financial Assistance Program, which allows qualified patients to use the device with no out-of-pocket costs.

**To learn more about your coverage for the ForeseeHome
AMD Monitoring Program, call 1-888-910-2020.**

Easy for your office

Fill out a ForeseeHome order form and fax it;
Notal Vision takes it from there⁷

ForeseeHOME[™] by NOTAL VISION[®] **PHYSICIAN ORDER FORM**

Date: _____ Prescription # _____

PATIENT INFORMATION (Mandatory) Gender: ☐ Female ☐ Male D.O.B. _____

Last Name _____ First Name _____ Middle Initial _____

Preferred Language: ☐ English ☐ Spanish Other: _____

Must attach patient's Face Sheet OR complete the information below and attach copies of insurance cards.

Street Address _____ City _____ State _____ Zip _____

Phone Number _____ Email _____

Primary Insurance _____ Member ID _____ Group # _____

Secondary Insurance _____ Member ID _____ Group # _____

☐ Copy of insurance card(s) included

I am the treating physician for and have examined the above named patient and am ordering the ForeseeHome AMD Diagnostic Program based on my examination as I indicate below:

OD (Right eye)	OS (Left eye)
☐ H 35.311.2 (Dry Intermediate, Right Eye)	☐ H 35.312.2 (Dry Intermediate, Left Eye)
☐ BCVA 20/60 or better	☐ BCVA 20/60 or better
☐ H 35.313.2 (Dry Intermediate, Bilateral)	
*Please check appropriate BCVA above	

ORDERING PHYSICIAN INFORMATION/SIGNATURE

By placing this order, I acknowledge that I have read and understand the "Notal Vision Diagnostic Test Service Physician/Practice Responsibilities" and hereby attest that the information contained in this order is accurate and correct.

Print Physician Name _____ Physician Signature _____

Practice Name _____ Office Location _____ Practice Phone Number _____

As a diagnostic healthcare provider and HIPAA covered entity, Notal Vision is dedicated to maintaining the privacy and security of every patient's health information.
(0648442)DCC/L/T COPY 1 - PRACTICE COPY 2 - PATIENT FH-MA-2013-74-Rev 07

Submit this form by Fax - 888-341-9400, email - adminassist@notalvision.com.
Or mail to Notal Vision, 7717 Coppermine Drive, Manassas, VA 20109. For assistance with this form please call 877-322-2207.



Complete this simple form to
get your patients started on
ForeseeHome

New offices submit their
clinic information on a 1-page
contact sheet supplied by the
Notal Vision representative
so your patient reports can
be emailed



ForeseeHOME[™] **DETECT EARLY
TREAT EARLY**
AMD Monitoring Program

Easy for your patients

1

Once we receive your order form, we'll verify the patient's insurance coverage

2

We'll contact the patient and arrange delivery and personalized setup support for the Foreseehome device

3

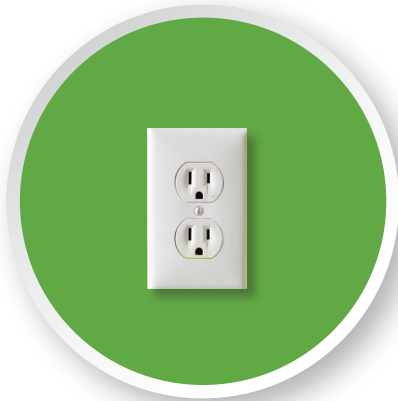
Patients and caregivers can call Notal Vision toll-free at **1-888-910-2020** at any time after you submit the order



Notal Vision is a full-service company and provides support at every stage of the enrollment and testing process

ForeseeHOME™ DETECT EARLY
AMD Monitoring Program TREAT EARLY

Setup is easy: simply plug the ForeseeHome device into a power outlet



- > Where Wi-Fi is available, patients can be given a Wi-Fi-enabled version of the device with simple setup instructions
- > If Wi-Fi is not available, patients are supplied with a 3G or landline-compatible version of the device. In this case, a home internet connection is not required

The technical component of the ForeseeHome AMD Monitoring Program is covered by Medicare, subject to its coverage requirements for the test, to assess patients with intermediate dry AMD who are at risk of developing wet AMD.

ForeseeHome is not appropriate for some patients

- ForeseeHome is not recommended for patients with any disorder that may inhibit them from steadily using a mouse or with impaired cognitive function (ie, Alzheimer's disease or Parkinson's disease)
- Up to 1 in 5 patients may not be able to establish a baseline due to pre-existing visual field defects or nonophthalmic conditions¹⁰
 - Your patients will have 2 attempts to establish a baseline. If they do not establish a baseline, other tools for monitoring their vision should be recommended

FDA indication for use

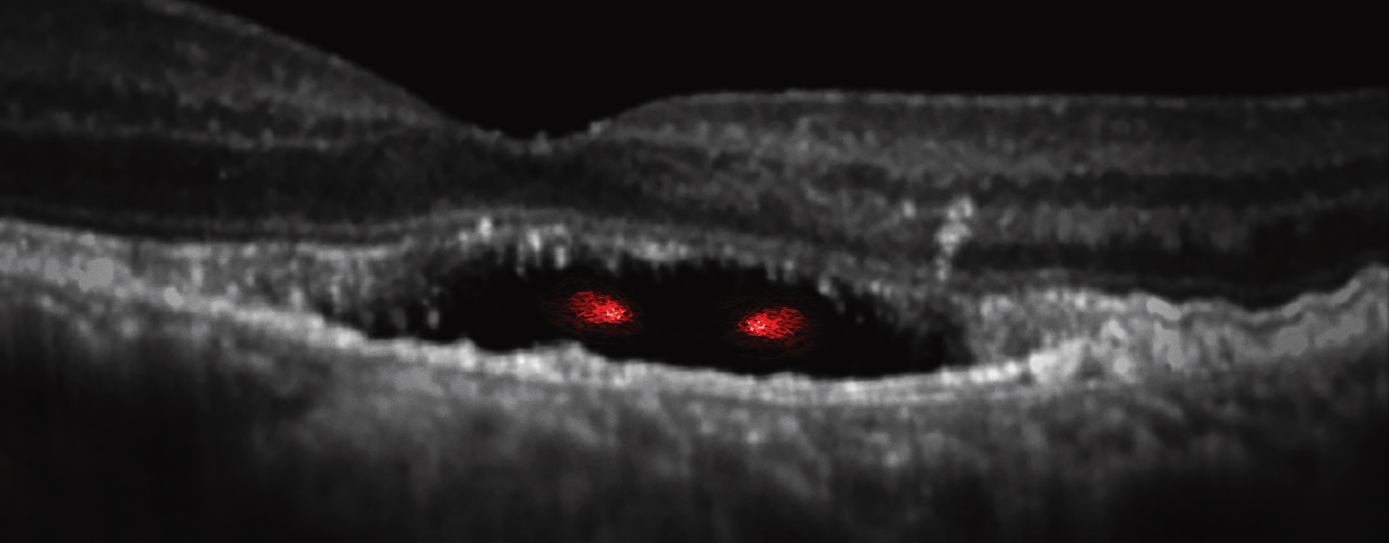
The ForeseeHome is intended for use in the detection and characterization of central and paracentral metamorphopsia (visual distortion) in patients with age-related macular degeneration, as an aid in monitoring progression of disease factors causing metamorphopsia including but not limited to choroidal neovascularization (CNV). It is intended to be used at home for patients with stable fixation.

The ForeseeHome AMD Monitoring Program is only available by physician order and is intended to be used as an addition to regular eye exams.

References: 1. Ho AC, Albini TA, Brown DM, Boyer DS, Regillo CD, Heier JS. The potential importance of detection of neovascular age-related macular degeneration when visual acuity is relatively good. *JAMA Ophthalmol.* 2017;135(3):268-273. 2. Ying GS, Huang J, Maguire MG, et al; Comparison of Age-related Macular Degeneration Treatments Trials Research Group. Baseline predictors for one-year visual outcomes with ranibizumab or bevacizumab for neovascular age-related macular degeneration. *Ophthalmology.* 2013;120(1):122-129. 3. Olsen TW, Feng X, Kasper TJ, Rath PP, Steuer ER. Fluorescein angiographic lesion type frequency in neovascular age-related macular degeneration. *Ophthalmology.* 2004;111(2):250-255. 4. Acharya N, Lois N, Townend J, Zaher S, Gallagher M, Gavin M. Socio-economic deprivation and visual acuity at presentation in exudative age-related macular degeneration. *Br J Ophthalmol.* 2009;93(5):627-629. 5. Fong DS, Custis P, Howes J, Hsu JW. Intravitreal bevacizumab and ranibizumab for age-related macular degeneration: a multicenter, retrospective study. *Ophthalmology.* 2010;117(2):298-302. 6. Chakravarthy U, Harding SP, Rogers CA, et al; IVAN Study Investigators. Ranibizumab versus bevacizumab to treat neovascular age-related macular degeneration: one-year findings from the IVAN randomized trial. *Ophthalmology.* 2012;119(7):1399-1411. 7. Data on file. Notal Vision, 2017. 8. Rayess N, Houston SK 3rd, Gupta OP, Ho AC, Regillo CD. Treatment outcomes after 3 years in neovascular age-related macular degeneration using a treat-and-extend regimen. *Am J Ophthalmol.* 2015;159(1):3-8. 9. Loewenstein A, Malach R, Goldstein M, et al. Replacing the Amsler grid: a new method for monitoring patients with age-related macular degeneration. *Ophthalmology.* 2003;110(5):966-970. 10. Chew EY, Clemons TE, Bressler SB, et al; AREDS2-HOME Study Research Group. Randomized trial of a home monitoring system for early detection of choroidal neovascularization home monitoring of the Eye (HOME) study. *Ophthalmology.* 2014;121(2):535-544. 11. DeCroos FC, Reed D, Adam MK, et al. Treat and extend therapy using aflibercept for neovascular age-related macular degeneration: a prospective clinical trial, *American Journal of Ophthalmology* (2017), doi: 10.1016/j.ajo.2017.06.002. 12. Regillo CD, Brown DM, Abraham P, et al. Randomized, double-masked, sham-controlled trial of ranibizumab for neovascular age-related macular degeneration: PIER Study year 1. *Am J Ophthalmol.* 2008;145(2):239-248. 13. American Academy of Ophthalmology Retina/Vitreous Panel. Preferred Practice Pattern® Guidelines. Age-Related Macular Degeneration. San Francisco, CA: American Academy of Ophthalmology; 2015. Available at: www.aao.org/ppp.

ForeseeHOME™ DETECT EARLY
AMD Monitoring Program TREAT EARLY





ForeseeHome
helps you detect
wet AMD earlier
so patients can be
treated earlier¹⁰

Talk to your patients about ForeseeHome

- > An at-home device patients use 3 minutes per eye per day
- > Monthly reports are sent directly to your office. Testing results are available 24/7 on the Notal Vision portal
- > ForeseeHome gives patients a 94% chance of maintaining driving vision (**≥20/40**) at wet AMD diagnosis compared with 62% with current methods of detection¹⁰
- > Covered by Medicare and most supplemental insurances



SIGN UP TODAY

Visit foreseehome.com/HCP, call 1-855-600-3112 or email us at support@notalvision.com.

Fax new prescriptions to Notal Vision at 1-888-341-9400.

For medical inquiries, please call 1-844-I SEE CNV.

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www.foreseehome.com

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