
**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

FORM 8-K

CURRENT REPORT

**Pursuant to Section 13 or 15(d) of
The Securities Exchange Act of 1934**

Date of Report (Date of earliest event reported): August 14, 2018

MOTUS GI HOLDINGS, INC.
(Exact name of registrant as specified in its charter)

Delaware
*(State or other jurisdiction
of incorporation)*

001-38389
*(Commission
File Number)*

81-4042793
*(IRS Employer
Identification No.)*

1301 East Broward Boulevard, 3rd Floor
Ft. Lauderdale, FL
(Address of principal executive offices)

33301
(Zip Code)

Registrant's telephone number, including area code: **786 459 1831**

Not Applicable
(Former name or former address, if changed since last report.)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (17 CFR §230.405) or Rule 12b-2 of the Securities Exchange Act of 1934 (17 CFR §240.12b-2).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

Item 7.01. Regulation FD Disclosure.

Motus GI Holdings, Inc. (the “Company”) is using the slides attached hereto in connection with management presentations to describe its business. A copy of the investor presentation is available at the “Investors – Company Info - Presentations” section of the Company’s website at <https://ir.motusgi.com/presentations>, and is attached hereto as Exhibit 99.1.

The content of the Company’s website is not incorporated by reference in this Current Report on Form 8-K.

The information in this Current Report on Form 8-K under Item 7.01, including the information contained in Exhibit 99.1, is being furnished to the Securities and Exchange Commission, and shall not be deemed to be “filed” for the purposes of Section 18 of the Securities Exchange Act of 1934 or otherwise subject to the liabilities of that section, and shall not be deemed to be incorporated by reference into any filing under the Securities Act of 1933 or the Securities Exchange Act of 1934, except as shall be expressly set forth by a specific reference in such filing.

Item 9.01. Financial Statements and Exhibits.

(d) The following exhibit is furnished with this report:

<u>Exhibit No.</u>	<u>Description</u>
99.1	Investor Presentation.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

MOTUS GI HOLDINGS, INC.

Dated: August 14, 2018

By: /s/ Mark Pomeranz
Name: Mark Pomeranz
Title: President and Chief Executive Officer

EXHIBIT INDEX

<u>Exhibit No.</u>	<u>Description</u>
<u>99.1</u>	<u>Investor Presentation.</u>

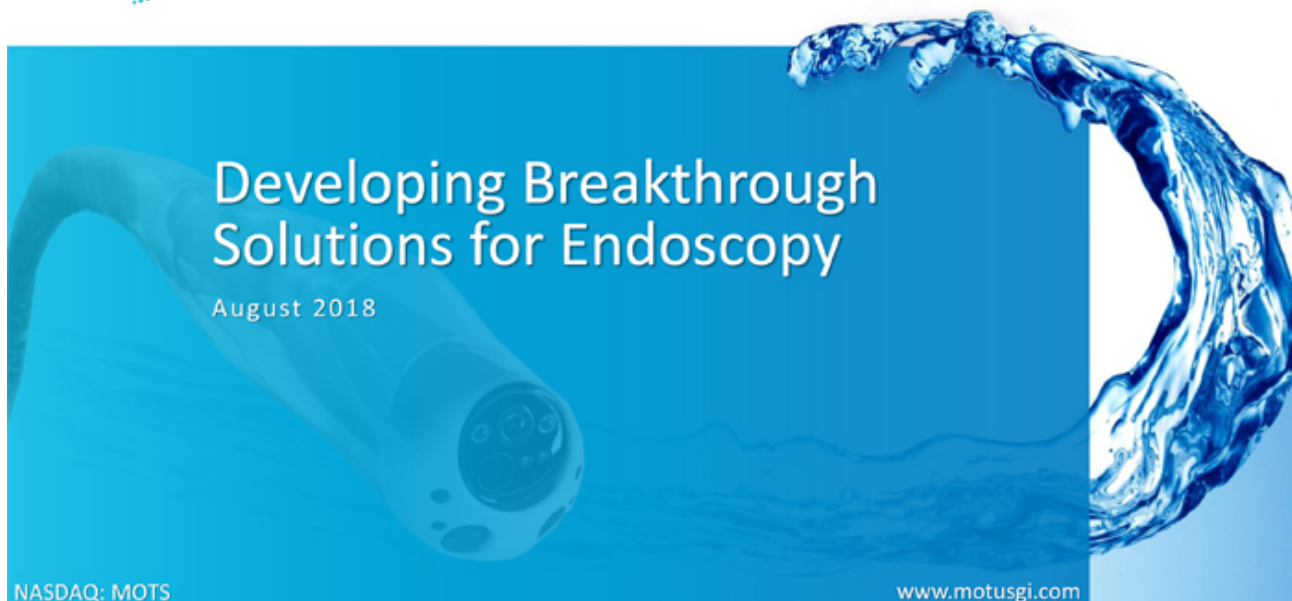


Developing Breakthrough Solutions for Endoscopy

August 2018

NASDAQ: MOTS

www.motusgi.com



Forward-Looking Statements

This presentation contains certain forward-looking statements, including those relating to the Company's product development, clinical studies, clinical and regulatory timelines, market opportunity, competitive position, possible or assumed future results of operations, business strategies, potential growth opportunities and other statements that are predictive in nature. The Company has made every reasonable effort to ensure the information and assumptions on which these statements are based are current, reasonable and complete. However, a variety of factors, many of which are beyond the Company's control, affect the Company's operations, performance, business strategy and results and there can be no assurances that the Company's actual results will not differ materially from those indicated herein. Additional written and oral forward-looking statements may be made by the Company from time to time in filings with the Securities and Exchange Commission (SEC) or otherwise. The Private Securities Litigation Reform Act of 1995 provides a safe-harbor for forward-looking statements. These statements may be identified by the use of forward-looking expressions, including, but not limited to,

"expect," "anticipate," "intend," "plan," "believe," "estimate," "potential," "predict," "project," "should," "would" and similar expressions and the negatives of those terms. These statements relate to future events or our financial performance and involve known and unknown risks, uncertainties, and other factors which may cause actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. Such factors include those set forth in the Company's filings with the SEC. Prospective investors are cautioned not to place undue reliance on such forward-looking statements, which speak only as of the date of this presentation. The Company undertakes no obligation to publicly update any forward-looking statement, whether as a result of new information, future events or otherwise.

Developing Breakthrough Solutions for GI Endoscopy

FDA-Cleared Flagship Product, Pure-Vu® System, Enables Rapid Bowel Cleansing During Colonoscopy Procedures

- Targeting multi-billion dollar market opportunity
- Leveraging existing hospital reimbursement (DRG)
- Developing key clinical and health economic data to potentially create new standard of care

Targeting Multi-Billion Dollar Inpatient Market Opportunity

US Inpatient Market

~1.5M¹
Colonoscopy
procedures/year

Worldwide Inpatient Market

~3.8M¹
Colonoscopy
procedures/year

- Episode of care covered under DRG bundled payment
- Pure-Vu® may drive significant cost avoidance and ROI

Bowel Prep and Procedure Take Place in ER, ICU or Hospital Ward

Key indications: lower GI bleeds, severe anemia, unknown abdominal pain, spinal cord injury (VA)



PLAY VIDEO >

Pure-Vu® Overview

Integrates easily with current scopes and physician workflow

Highly effective pulsed vortex irrigation to break up colon content

Efficient evacuation with anti-clogging Auto Purge technology

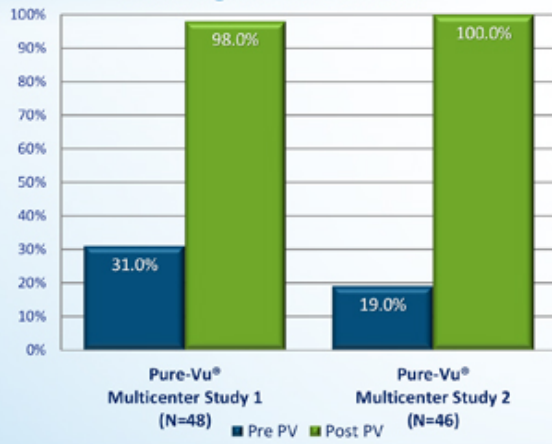
Strong intellectual property



Clinical Results Indicate Outstanding Cleaning Performance

Reduced Prep: ~18 Hour Full Liquid Diet and Dulcolax®

% of Subjects Adequately Prepped According to BBPS Standard¹

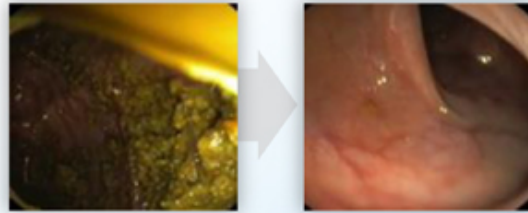


Boston Bowel Preparation Scale (BBPS) Score Pre and Post Pure-Vu®

Pure-Vu® Study	Pre PV	Post PV
Multicenter Study 1 (N=48)	5.0 ± 1.52	8.8 ± 1.14
Multicenter Study 2 (N=46)	2.8 ± 2.28	8.5 ± 0.84

BBPS is a scale of 0 (dirty) to 9 (pristinely clean)

Colon Pre and Post Pure-Vu®



7 1: Per protocol analysis - data on file. - BBPS >= 2 in each segment

Inpatient Colonoscopy Procedures

3.8M Worldwide Patients Annually¹

Lower
GI Bleeds

Severe
Anemia

Unknown
Abdominal Pain

Spinal Cord
Injury (VA)

ER, ICU and
Hospital Ward

***Bowel Prep and Procedure
Take Place in Hospital***

Successful Exam and
Patient Discharged

Fixed bundled payments cover entire episode of
care based on DRG reimbursement

Bowel Prep Challenges Represent Significant Burden

Insufficient bowel prep leads to frequent delays,
procedure failures and increased costs

Inpatient
Colonoscopy

24 Hour
Bowel Prep

55%
Insufficiently
Prepped¹

Repeat
Bowel Prep

Repeat
Procedures

Occupied Bed
Not Available for
New Patients

~2 days longer length of stay¹
~\$8,000 increases in hospital cost¹

Potential to Reduce Direct Costs for Inpatient Colonoscopy



Potential to become new standard of care

Inpatient
Colonoscopy



*Enabling Rapid and
Predictable Colonoscopy*

Accelerated Bed
Turn-over for
New Patients

Pure-Vu® has the potential to:

- Reduce time to successful bowel prep
- Eliminate repeat procedures
- Improve quality of exam and diagnosis
- Reduce the length of stay and direct costs

REDUCE Study – Targeted Completion in Q4 2018

Currently Enrolling Patients

100 Patient, single-arm, multi-center, prospective study

Enables First Time Procedure Success

Inpatient
Colonoscopy

24 Hour
Bowel Prep

~~55%
Insufficiently
Prepped¹~~

~~Repeat
Bowel Prep~~

~~Repeat
Procedures~~

Accelerated Bed
Turn-over for
New Patients

Primary Endpoint:

- BBPS index - improved bowel cleansing

Key Health Economic Endpoint:

- Time to successful exam vs. current standard



EXPEDITE Study – Expected to Initiate 2nd Half 2018

Feasibility study to accelerate time to procedure

Shorten Time to Colonoscopy Procedure and Diagnosis

Emergent
Lower GI Bleed
Patient

24 Hour
Bowel Prep

55%
Insufficiently
Prepped¹

Repeat
Bowel Prep

Repeat
Procedures

Accelerated Bed
Turn-over for
New Patients

Key Study Objectives:

- BBPS index - improved bowel cleansing
- % of successful colonoscopy with minimal preparation
- Improve diagnostic yield



Driving Cost Savings to Support Value Based Pricing

- **Potential direct hospital cost savings based on shortened length of stay***

- ~\$2,000 per patient in US¹
- ~\$1,000 per patient in key OUS markets²

- **Prospective value based pricing**

- Disposable ASP: \$500-\$1,000
- Workstation ASP: \$40K-\$80K

~\$3 Billion¹

Potential Direct Hospital
Cost Savings in US

~\$5.3 Billion^{1,2}

Potential Direct Hospital Cost
Savings in Key OUS Markets

- * Doesn't include benefits of accelerated bed turnover, improved diagnostic yields or eliminated repeat prep and procedures
- * Potential one day reduction in hospital stay per patient

1: KFF, Hospital Adjusted Expenses per Inpatient Day, 2015; incorporates company's current estimate
13 2: Department of Health and Children, Value for Money and Policy Review of the Economic Cost and Charges associated with Private and Semi-Private Treatment Services in Public Hospitals; incorporates company's current estimate

Commercialization Strategy: Launch Q2 2019

Objective: Accelerate Adoption with Prelaunch Activities

Prelaunch Clinical Trials and Evaluations

- ✓ REDUCE study
- ✓ Pilot evaluations
- EXPEDITE study
- Inpatient registry



- Establish physician champions within institutions
- Optimizing training and in-service programs



Hospitals can use their Pure-Vu® experience to support VAC process



Value Assessment Committee Approval and Purchase

Inpatient Expansion Opportunity

Inpatient: Upper GI Bleed Endoscopy

Value:

- Remove clots and debris to provide clear field of view
- Leverage existing hospital call points, doctors and sales force

Market Opportunity

1M¹

Worldwide
Procedures Annually

Potential Product Launch in 2020²

Outpatient Expansion Opportunity

Outpatient: High Medical Need/Difficult to Prep Colonoscopy

Value:

- ~23% of patients present with an inadequately prepped colon¹
- Eliminate repeat procedures, improves diagnosis
- Leverage existing product and hospital call points

Market Opportunity

5.7M²

Worldwide
Procedures Annually

Potential to expand into this population in 2021

Cost Minimization Analysis of High-Risk CRC Patients Found that Pure-Vu[®] System has the Potential to:³

- Reduce CRC incidence by an estimated 36% by improving the quality of the exam
- Minimize overall per-patient costs by up to \$3,400 for private payer patients and up to \$1,600 for Medicare patients
- Reduce direct costs of repeated procedures due to inadequate prep by approximately 77-82%

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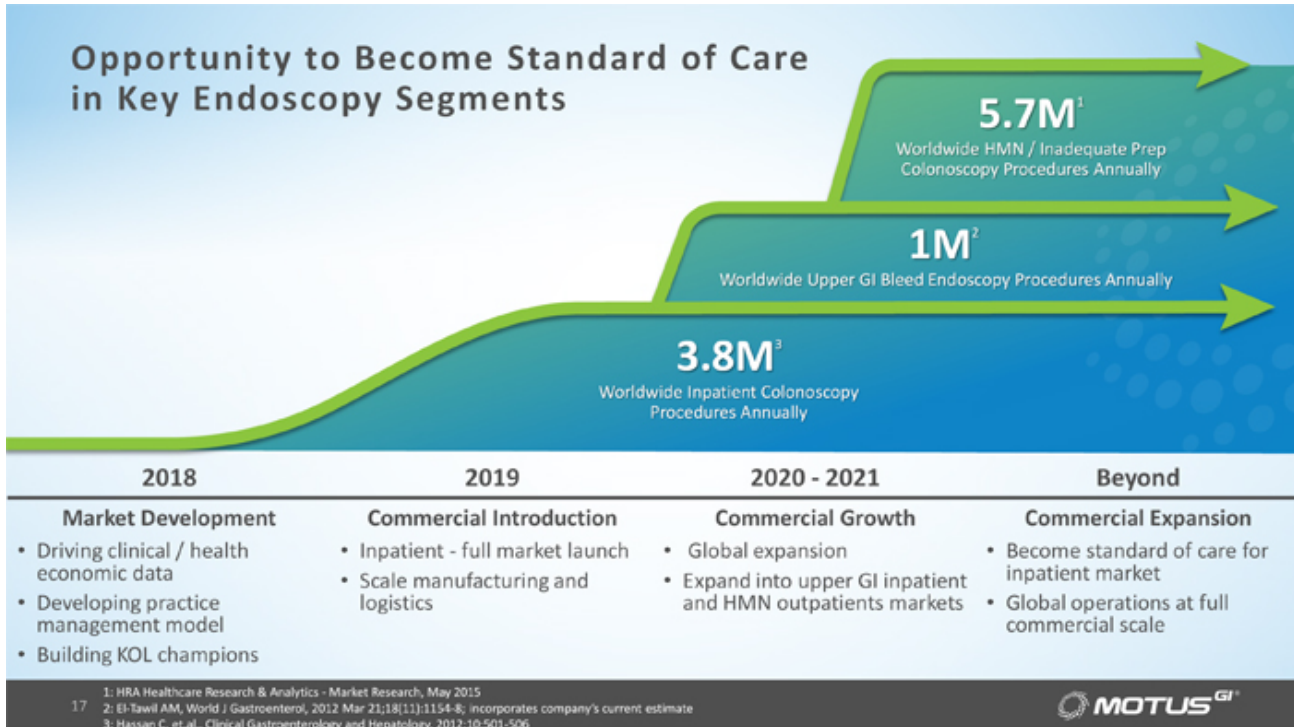
1: HRA Healthcare Research & Analytics - Market Research, May 2015

2: Hassan C, et al., Clinical Gastroenterology and Hepatology, 2012;10:501-506

3: Grabek, L. The Pure-Vu Colon Cleansing System Reduces Lifetime Costs and Incidence of Colorectal Cancer (CRC) – A Cost Minimization Analysis. DDW Week* 2018



Opportunity to Become Standard of Care in Key Endoscopy Segments



5.7M¹
Worldwide HMN / Inadequate Prep Colonoscopy Procedures Annually

1M²
Worldwide Upper GI Bleed Endoscopy Procedures Annually

3.8M³
Worldwide Inpatient Colonoscopy Procedures Annually

2018

2019

2020 - 2021

Beyond

Market Development

- Driving clinical / health economic data
- Developing practice management model
- Building KOL champions

Commercial Introduction

- Inpatient - full market launch
- Scale manufacturing and logistics

Commercial Growth

- Global expansion
- Expand into upper GI inpatient and HMN outpatients markets

Commercial Expansion

- Become standard of care for inpatient market
- Global operations at full commercial scale

17 1: HRA Healthcare Research & Analytics - Market Research, May 2015
 2: El-Tawil AM, World J Gastroenterol, 2012 Mar 21;18(11):1154-8; incorporates company's current estimate
 3: Hassan C, et al., Clinical Gastroenterology and Hepatology, 2012;10:501-506



Robust Intellectual Property

Covers Innovative Portfolio of Technologies Rooted in Systems and Methods for Cleaning Body Cavities With or Without the Use of Endoscope

8

Issued patents in
United States,
Europe and Asia

10

Pending patents
in United States

17

Pending
patents outside
United States

Financial Profile: NASDAQ: MOTS

Market Cap: ~\$98M¹

Common Shares Outstanding: ~15.6M

Average Daily Volume: ~122K¹

Cash Balance: ~\$18.6M²

Management Team

Mark Pomeranz, *Chief Executive Officer*

30 years of experience in the medical device industry with strong track record of success in both start-ups and in large multinational organizations

 svelte medical systems

Jeff Hutchison, *VP, US Sales and Commercial Operations*

Over 25 years of sales, new market development and executive sales leadership experience in the medical device industry

Andrew L. Taylor, MBA, *Chief Financial Officer*

Over 20 years of experience serving as a financial officer, operating executive and business advisor across start-ups, emerging growth and Fortune 500 companies in both the U.S. and abroad

James Zardeskas, *VP, Quality Assurance*

Over 30 years of cross functional medical device experience at both startups and large organizations with focus in manufacturing and process development engineering

Hagit Ephrath, *VP, Clinical Regulatory and Health Economics*

Nearly 20 years of medical device experience focused on managing statistics, regulatory affairs, clinical and quality assurance activities through all phases of development

Gil Balog, *General Manager, Israel*

Extensive knowledge in product management, project management, product roadmap development, engineering, operations and production

Board of Directors

David Hochman *Chairman*

Chairman & CEO, Orchestra BioMed; Director of Corbus and Adgero



Gary Jacobs

Managing Director, Jacobs Investment Company



Shervin Korangy

CFO and Chief Strategy Officer of Beaver-Visitec International



Samuel Nussbaum

Former EVP, Clinical Health Policy & CMO of Anthem, Inc., one of the largest health benefits companies in U.S.



Mark Pomeranz *Chief Executive Officer*

CEO, Motus GI



Gary J. Pruden

Former Executive Vice President and Worldwide Chairman for the Johnson & Johnson Medical Devices group



Darren R. Sherman

President, COO and Director, Orchestra BioMed



Physician Advisory Board

Gerald Bertiger, MD

Managing Partner and President of Hillmont, GI, P. C.; Section Chief of Gastroenterology and Director of the Endoscopy Unit at Chestnut Hill Hospital



Steven A. Edmundowicz, MD, FASGE

Medical Director, Digestive Health Center, University of Colorado Hospital; Visiting Professor of Medicine, University of Colorado School of Medicine, Aurora, CO



Prof. Ian Gralnek, MD, MSHS, FASGE

Chief, Ellen and Pinchas Mamber Institute of Gastroenterology; Ha'Emek Medical Center, Afula, Israel; Rappaport Faculty of Medicine Technion-Israel Institute of Technology



Seth A. Gross, MD, FACG, FASGE, AGAF

Associate Professor of Medicine, NYU Langone Health



Brian Jacobson, MD, MPH, AGAG, FASGE

Medical Director, Boston Accountable Care Organization Section of Gastroenterology Oncology, Boston Medical Center. Associate Professor, Boston University School of Medicine, Boston, MA



David Lieberman, MD, FACG

Professor of Medicine, Chief, Division of Gastroenterology and Hepatology, Oregon Health and Science University, Portland, OR



Ori Segol, MD

Director of Gastroenterology, Carmel Medical Center, Haifa, Israel



Prof. Peter D. Siersema, MD, PhD, FASGE

Professor of Endoscopic Gastroenterology Oncology, Dept. of Gastroenterology and Hepatology, Radboud University Medical Center, Nijmegen, Netherlands



Near Term Value Catalysts

Seed the Market

- ✓ Issuance of Japan patent
- ✓ Hire VP, US Sales and Commercial Operations
- Launch slim-scope compatible system

Q3
2018

Complete REDUCE Study

- Complete enrollment in REDUCE inpatient study
- Present data from prep reduction study
- Initiate EXPEDITE inpatient study
- Finalize GEN 2 product design

Q4
2018

Prime the Pipeline

- Results from REDUCE inpatient
- Submit 510(k) to the FDA for Pure-Vu® GEN 2
- Expand commercial organization in preparation for full commercial launch

Q1
2019

Full Commercial Launch

- Receive FDA clearance for the Pure-Vu GEN 2 system
- Pure-Vu® full commercial launch
- Launch large inpatient clinical registry

Q2
2019

Investment Highlights

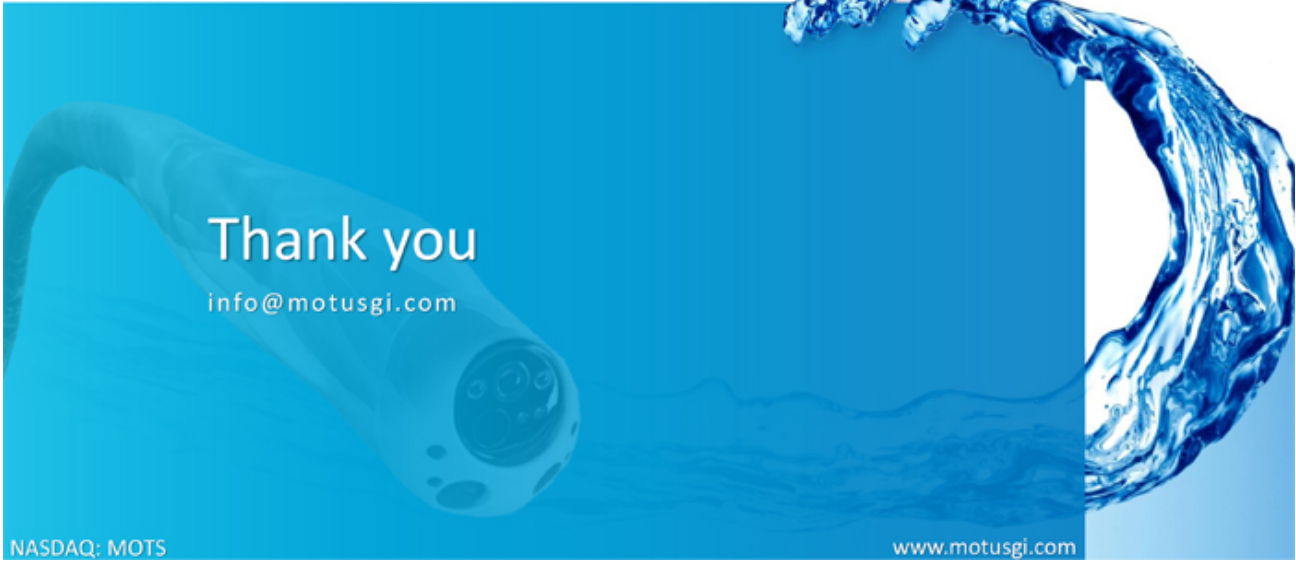
Revolutionizing the large and growing GI endoscopy market

Inpatient market represents multi-billion dollar opportunity

Building a strong foundation of clinical and health economic data

Opportunity to become standard of care in key endoscopy segments

Highly-experienced management team with proven track record



Thank you

info@motusgi.com

NASDAQ: MOTS

www.motusgi.com
