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**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): November 15, 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.

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**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 exhibits are being furnished with this report:

<u>Exhibit No.</u>	<u>Description</u>
<a href="#">99.1</a>	<a href="#">Investor Presentation.</a>

**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: November 15, 2018

By: /s/ Timothy P. Moran  
Name: Timothy P. Moran  
Title: Chief Executive Officer

**EXHIBIT INDEX**

<u>Exhibit No.</u>	<u>Description</u>
<a href="#">99.1</a>	<a href="#">Investor Presentation.</a>

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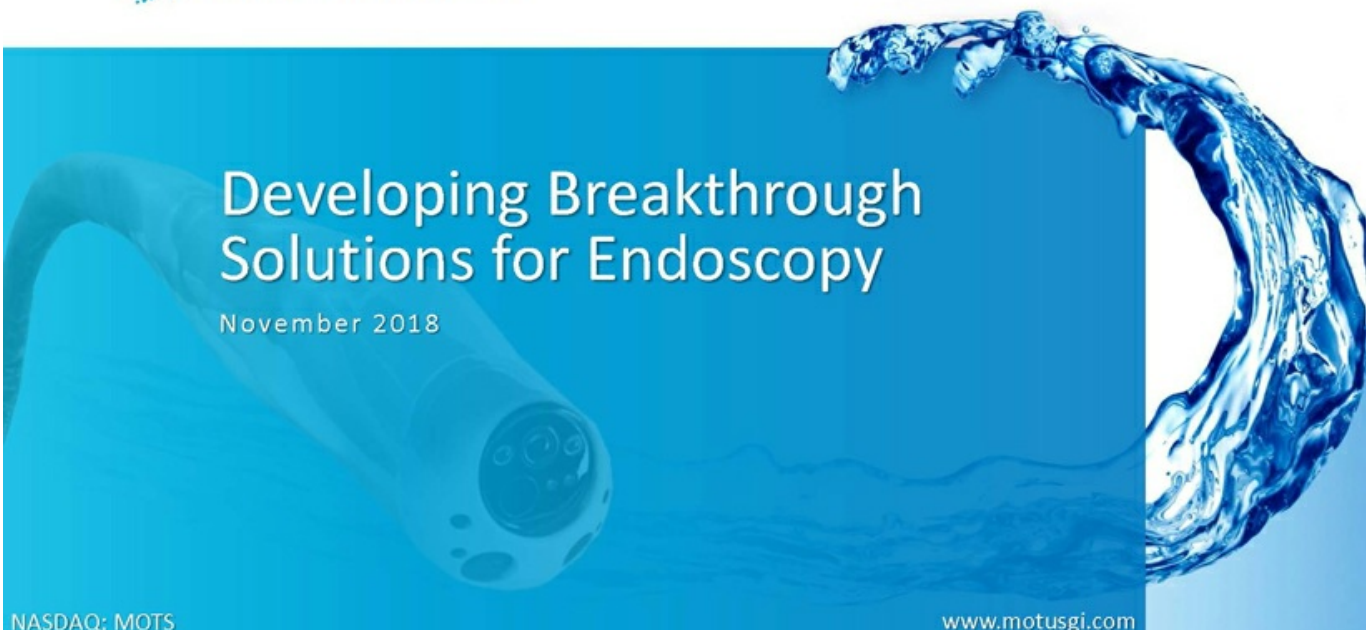


# Developing Breakthrough Solutions for Endoscopy

November 2018

NASDAQ: MOTS

[www.motusgi.com](http://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

**~1.5M<sup>1</sup>**  
Colonoscopy  
procedures/year

## Worldwide Inpatient Market

**~3.8M<sup>1</sup>**  
Colonoscopy  
procedures/year

- Episode of care covered under DRG bundled payment
- Pure-Vu<sup>®</sup> 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, infection



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

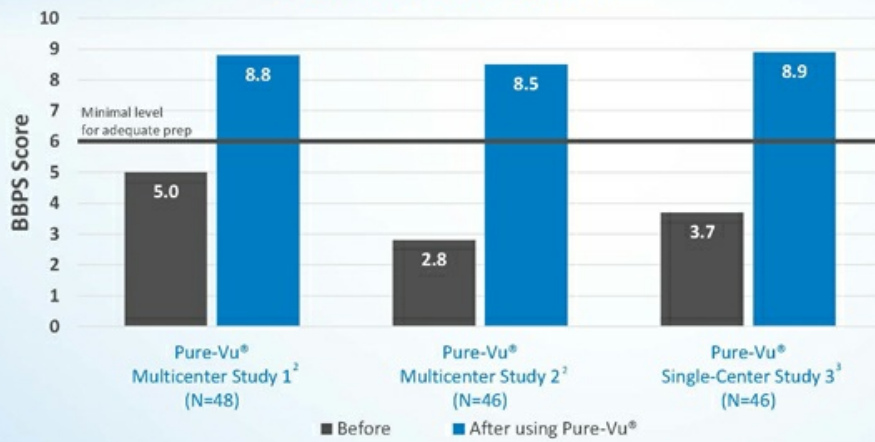
11 granted US, EU and Asia | 11 pending US | 18 pending OUS





# Demonstrated Outstanding Cleansing Performance in Patients with Partially Prepped Colons

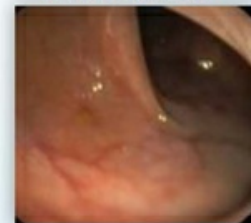
BBPS Rating Before and After the Use of the Pure-Vu® System<sup>1</sup>



Before Pure-Vu®



After Pure-Vu®



1. Data on file. Majority of the procedures were performed in the outpatient setting. Reduced pre-procedure prep was used on all patients. For more detail, please refer to <https://www.motusgi.com/pure-vu>.  
 2. Pre-procedure prep: Split dose of two bottles of SIBO/SIBO (Laxaid), and instructions for diet, fluids, and bowel prep starting 2 days before the procedure and a 24- or 36-hour clear liquid diet prior to the colonoscopy.  
 3. Pre-procedure prep: Patients were randomized to receive one of two minimal bowel preparations: three doses of 17g Miralax each mixed in 6.5 oz of clear liquids or two doses of 7.5g Magnesium Citrate (MgC) each taken with 18.5oz of clear liquid.  
 4. Study preparation: Each participant received the Miralax prep. Due to absence of final BBPS results from the studies, the replacement arm consisted of two doses of 500 MgC taken with 30oz of clear liquid. All patients were allowed a low residue diet (consisting of chicken, white rice, etc.) on the day prior and were asked to avoid seeds and nuts for five days prior to their procedure.

# Inpatient Colonoscopy Procedures

3.8M Worldwide Patients Annually<sup>1</sup>

Lower  
GI Bleeds

Severe  
Anemia

Unknown  
Abdominal Pain

Infection

ER, ICU and  
Hospital Ward

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

Successful Exam and  
Patient Discharged

Existing reimbursement covers entire episode of care  
as a fixed bundled payment (DRG)

## 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  
Prepped<sup>1</sup>

Repeat  
Bowel Prep

Repeat  
Procedures

Occupied Bed  
Not Available for  
New Patients

~2 days longer length of stay<sup>1</sup>  
~\$8,000 increases in hospital cost<sup>1</sup>

N = 524 Patient Study<sup>1</sup>

## 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 – Topline Results on Track for Q1 2019

## Currently Enrolling Patients

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

Enables First Time Procedure Success

Inpatient  
Colonoscopy

24 Hour  
Bowel Prep

~~55%  
Insufficiently  
Prepped<sup>1</sup>~~

~~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 end of 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  
Prepped<sup>1</sup>~~

~~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

CENTER  
**BOSTON  
MEDICAL**

EXCEPTIONAL CARE. WITHOUT EXCEPTION.

# Commercialization Strategy: Launch Q2 2019

*Methodical, Disciplined Approach to Drive Rapid VAC Approval*

## Drive Customer Evaluations

- REDUCE Study
- EXPEDITE Study
- Market Development Accounts

## Foster Key Relationships

- Physician Champions
- GI/Nursing Staff
- Hospital Administration

## Provide Clinical/Economic Support

- Tailored Value Calculator
- Comprehensive Clinician Training
- Ongoing Clinical Support

**Value Analysis Committee Approval & Purchase**

# Economic Calculator Demonstrates The Value of Pure-Vu®

## Large Account Example

### Hospital Specific Customizable Inputs

1	Inpatient Colonoscopy Procedures	1000
2	Delayed Colonoscopies	20%
3	Incomplete Colonoscopies	20%
4	Completed Colonoscopies	60%

5	% Delayed in ICU	20%
6	% Incomplete in ICU	20%
7	LOS Reduction: Delayed Procedure	1.3 (days)
8	LOS Reduction: Incomplete Procedure	1.3 (days)
9	Average Bed Day Cost <sup>1</sup>	\$2,298
10	Average Bed Day Cost for ICU <sup>1</sup>	\$6,546

**Potential Total Savings Net of Pure-Vu® Investment**

*Potential Savings / Each Delayed Procedure*

**\$3,636**

*Potential Savings / Each Incomplete Procedure*

**\$3,742**

*Potential Total Annual Savings All Patients*

**\$1,475,662**

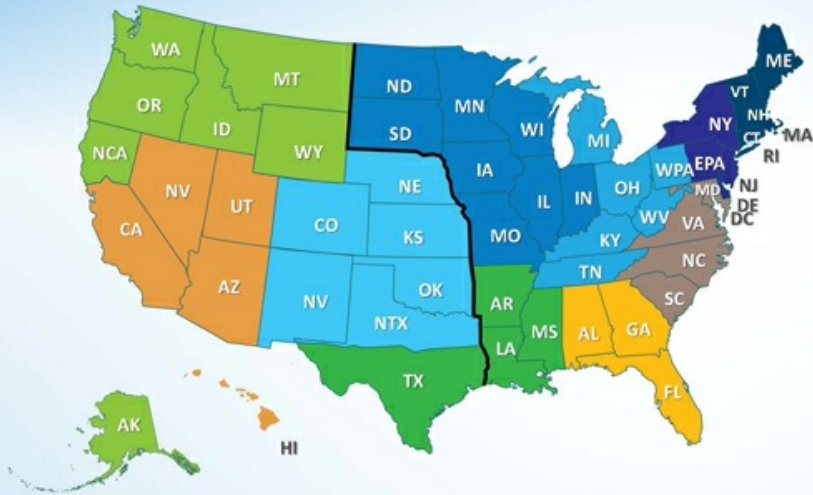
Savings do not include additional potential hospital revenues created through accelerated bed turnover

<sup>1</sup> Inflation adjusted to 2018 USD. Based on 2014 National Inpatient Sample (NIS) and literature for ICU cost per day (Dasta 2005); Number is subject to customization/hospital inputs



# Commercial Expansion to Support Full Launch in Q2 2019

Jeff Hutchison, Vice President Sales



Sales Team (10)	
[Light Green]	Northwest
[Orange]	So-Cal
[Green]	Gulf Coast
[Light Blue]	Southwest
[Medium Blue]	Midwest
[Dark Blue]	Ohio Valley
[Purple]	New York
[Dark Blue]	Northeast
[Yellow]	Southeast
[Brown]	Mid-Atlantic

Clinical Team (6)	
	Team Director
	Clinical Specialist
	Clinical Specialist
	Clinical Specialist
	Clinical Specialist
	Clinical Specialist

Optimizing "Hunters" and "Farmers" Drives Conversion & Penetration

## Driving Cost Savings to Support Value Based Pricing

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

- ~\$2,000 per patient in US<sup>1</sup>
- ~\$1,000 per patient in key OUS markets<sup>2</sup>

- Prospective value based pricing

- Disposable ASP: \$750-\$1,000
- Workstation ASP: \$40K-\$80K

~\$3 Billion<sup>1</sup>  
Potential Direct Hospital  
Cost Savings in US

~\$5.3 Billion<sup>1,2</sup>  
Potential Direct Hospital Cost  
Savings in Key OUS Markets

### Potential Additional Value Drivers

- Accelerated Bed Turnover
- Elimination of Repeat Procedures
- Improved Exam Quality

1: KFF, Hospital Adjusted Expenses per Inpatient Day, 2015; incorporates company's current estimate

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

## Significant Follow on Expansion Opportunities

### Inpatient: Upper GI Bleed Endoscopy (Target Launch Q1 2021)

**Value:**

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

### Market Opportunity

**1M<sup>1</sup>**

Worldwide  
Procedures Annually

### Outpatient: High Medical Need Colonoscopy (Target Launch Q1 2022)

**Value:**

- ~23% of patients present with an inadequately prepped colon<sup>1</sup>
- Eliminate repeat procedures, improves diagnosis
- Leverage existing product and hospital call points

### Market Opportunity

**5.7M<sup>3</sup>**

Worldwide  
Procedures Annually

17 1: 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

# Opportunity to Become Standard of Care in Key Endoscopy Segments



2018	2019	2020 - 2022	Beyond
<b>Market Development</b> <ul style="list-style-type: none"> <li>Driving clinical / health economic data</li> <li>Developing practice management model</li> <li>Building KOL champions</li> </ul>	<b>Commercial Introduction</b> <ul style="list-style-type: none"> <li>Inpatient - full market launch</li> <li>Scale manufacturing and logistics</li> </ul>	<b>Commercial Growth</b> <ul style="list-style-type: none"> <li>Global expansion</li> <li>Expand into upper GI inpatient and HMN outpatients markets</li> </ul>	<b>Commercial Expansion</b> <ul style="list-style-type: none"> <li>Become standard of care for inpatient market</li> <li>Global operations at full commercial scale</li> </ul>

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

18 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

# Management Team

**Timothy P. Moran**  
Chief Executive Officer

Seasoned commercial and operating executive with experience in both large publicly-traded and private equity-backed companies



**Mark Pomeranz**  
President and  
Chief Operating 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



**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



**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



**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



**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



**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**  
Director

Managing Director, Jacobs Investment Company



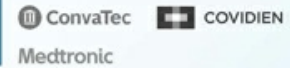
**Shervin Korangy**  
Director

CFO and Chief Strategy Officer of  
Beaver-Visitec International



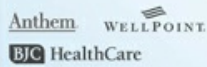
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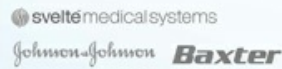
**Samuel Nussbaum**  
Director

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



**Mark Pomeranz**  
President and  
Chief Operating 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



**Gary J. Pruden**  
Director

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



**Darren R. Sherman**  
Director

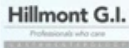
President, COO and Director, Orchestra  
BioMed



# 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, FACP, 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, FACP

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



## Financial Profile: NASDAQ: MOTS

Market Cap: ~\$54M<sup>1</sup>

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Common Shares Outstanding: ~15.6M<sup>2</sup>

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Average Daily Volume: ~59K<sup>1</sup>

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Cash Balance: ~\$11.6M<sup>2</sup>



## Near Term Value Catalysts: Next Three Quarters

### Pure-Vu® Full Commercial Launch Q2 2019

2018

Q4

- Present data from prep reduction study
- PR first clinical cases using SLIM
- Finalize GEN 2 product design
- Submit interim data from REDUCE for DDW

2019

Q1

- Complete REDUCE inpatient study
- Initiate EXPEDITE inpatient study
- Results from REDUCE inpatient study to drive key economic model
- Submit 510(k) for Pure-Vu® GEN 2 for approval
- Expand commercial organization in preparation for launch

2019

Q2

- Pure-Vu® full commercial launch
- Complete enrollment of EXPEDITE inpatient study
- Launch large inpatient clinical registry

## 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](mailto:info@motusgi.com)

NASDAQ: MOTS

[www.motusgi.com](http://www.motusgi.com)