

**TSX: GTMS**

# Corporate Presentation

January 2020

# Cautionary Note Regarding Forward-Looking Statements & Other Disclaimers




Some of the information contained in this presentation, including with respect to the expansion of our TMS Center network, or our Company's future financial or operating performance, constitutes forward-looking information. This information is based on management's reasonable assumptions and beliefs in light of the information currently available to us and is current as of the date of this presentation. Actual results and the timing of events may differ materially from those anticipated in the forward-looking information contained in this presentation as a result of various factors. Particularly, information regarding our expectations of future results, performance, achievements, prospects or opportunities or the markets in which we operate is forward-looking information. In some cases, forward-looking information can be identified by the use of forward-looking terminology such as "plans", "targets", "expects" or "does not expect", "is expected", "an opportunity exists", "budget", "scheduled", "estimates", "outlook", "forecasts", "projection", "prospects", "strategy", "intends", "anticipates", "does not anticipate", "believes", or variations of such words and phrases or statements that certain actions, events or results "may", "could", "would", "should", "might", "will", "will be taken", "occur" or "be achieved". In addition, any statements that refer to expectations, intentions, projections or other characterizations of future events or circumstances contain forward-looking information. Statements containing forward-looking information are not facts but instead represent management's expectations, estimates and projections regarding future events or circumstances. Many factors could cause our actual results, level of activity, performance or achievements or future events or developments to differ materially from those expressed or implied by the forward-looking statements, including, without limitation, the factors discussed in the "Risks and Uncertainties" section of Management's Discussion & Analysis for the period ended September 30, 2019 (the "MD&A"). Additional risks and uncertainties are discussed in the Company's materials filed with the Canadian securities' regulatory authorities from time to time, including the Company's annual information form dated March 27, 2019. These factors are not intended to represent a complete list of the factors that could affect us; however, these factors should be considered carefully.

The purpose of the forward-looking information is to provide the reader with a description of management's current expectations regarding the Company's financial performance and may not be appropriate for other purposes; readers should not place undue reliance on forward-looking information contained herein. To the extent any forward-looking information in this presentation constitutes future-oriented financial information or financial outlook, within the meaning of applicable securities laws, such information is being provided to demonstrate the potential of the Company and readers are cautioned that this information may not be appropriate for any other purpose. Future-oriented financial information and financial outlook, as with forward-looking information generally, are based on current assumptions and are subject to risks, uncertainties and other factors. Furthermore, unless otherwise stated, the forward-looking statements contained in this presentation are made as of the date of this presentation and we have no intention and undertake no obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, except as required by applicable securities law. The forward-looking statements contained in this presentation are expressly qualified by this cautionary statement.

For more information, please refer to the Company's regulatory filings available on the Company's website at [www.greenbrooktms.com](http://www.greenbrooktms.com) and under the Company's SEDAR profile at [www.sedar.com](http://www.sedar.com).

All values in this presentation are in United States dollars, unless otherwise stated.

# Company at Glance

-  **Founded in 2011 Greenbrook TMS is a leading U.S. provider in the delivery of Transcranial Magnetic Stimulation (TMS) therapy for the treatment of depression**
-  **TMS is a new approach and an FDA-cleared, non-invasive therapy for the treatment of Major Depressive Disorder (MDD) in patients that have failed drug treatment**
-  **TMS is eligible for reimbursement in all 50 states and from all major insurers**

**Operating  
109 TMS Centers in  
15 U.S. States**

**Close to 10,000  
patients with over  
320,000 Treatments**

**Cash on Hand  
\$11.57M**

**127% Growth in  
TMS Centers over  
2018**

**Year-to-Date Regional  
Operating Income is \$2.4M  
YoY Increase of 72%**

**Year-to-Date Revenue  
is \$23.1M YoY  
Increase of 63%**

# Key Investment Considerations



## FAST-GROWING LARGEST PROVIDER FOR TMS TREATMENT IN U.S.

- Strong organic and M&A growth strategy
- 57% annual revenue growth since 2015 – targeting 140 Centers by end of 2020
- Targeting 20% EBITDA margin upon achieving center maturity
- Recent acquisition of Achieve TMS – driving west coast expansion



## SIGNIFICANT UNDERSERVED MARKET OPPORTUNITY

- Currently 51% of treated patients in the U.S. fail first line drug therapy
- ~5.5M patients could benefit from TMS - only ~30k patients treated annually
- First covered in 2013, today all major U.S. commercial payers provide reimbursement



## SAFER AND MORE EFFECTIVE TREATMENT FOR DEPRESSION

- Life-changing for patients - highly compelling value proposition for payers
- Treatment is short and convenient with no major side effects
- Over 68% response rate vs 49% response from drug therapy



## HIGHLY EXPERIENCED MANAGEMENT TEAM AND CLINICAL LEADERSHIP TEAM

- Greenbrook's founders built TLC Vision Corp. from a single location to 300+ sites across the U.S.
- Clinical leadership team are pioneers in the field of TMS



**About Depression**

**About TMS**

**Our Business**

**Financial Performance**

**Looking Forward**

# Depression is an illness that impacts us all

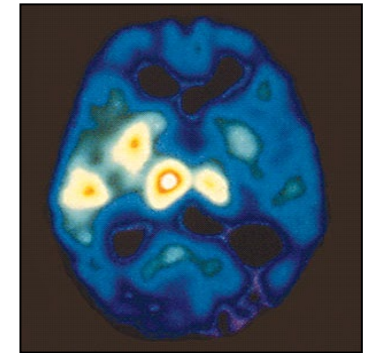
**Depression (MDD) is a physiological disease**  
That can be identified, diagnosed and treated

**Depression is growing in prevalence**  
MDD ranks as the largest contributor to global disability<sup>1</sup>

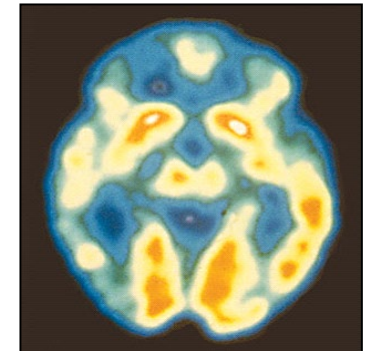
**Depression is a massive societal burden**  
Economic impact in the U.S. estimated at \$210.5B per year<sup>2</sup>  
Immeasurable sociological impacts on patients and their loved ones

**Depression kills**  
>50% of all people who die by suicide suffer from Major Depressive Disorder (MDD)<sup>3</sup>

Depressed



Not Depressed



Brain activity as measured by PET Imaging. Blue and green represent decreased activity.  
© Mayo Foundation

1. Depression and Other Common Mental Health Disorders – Global Health Estimates. Geneva, Switzerland; World Health Organization, 2017;  
2. Greenberg et al., J Clin Psychiatry 2015, PMID 25742202;  
3. American Association of Suicidology. (2014). Depression and suicide risk MDD: Major Depressive Disorder

# Millions of MDD patients can potentially benefit from TMS

**51%**

Of treated MDD patients do not respond to the first round of treatment<sup>1</sup>

**44.7M Adults living with mental illness in the U.S.**

**14.7M**

Adults diagnosed with MDD

**5.5M**

Fail to respond to drug therapy and could benefit from TMS treatment

1. 2015 SAMHSA National Survey on Drug Use and Health;

# Treating Depression - TMS is a New Paradigm

## Current First-Line Treatment

Pharmacotherapy

+ / – Psychotherapy

Drugs can be highly effective but only 49% of the treated population benefit. Probability of successful treatment diminishes with each new drug tried or added to a regimen

### 51% TREATMENT FAILURE

- ⊗ No response / loss of response
- ⊗ Inadequate response
- ⊗ Side effects not tolerated

## When Drugs Fail - Neurostimulation Treatment

### TMS Therapy

A new tool to treat MDD

- ✓ High efficacy
- ✓ Non-invasive
- ✓ Outpatient clinic setting
- ✓ No major side effects

### Electroconvulsive Therapy (ECT or “Shock Therapy”)

Invasive

Requires Hospitalization

**Major side effects include:**  
Memory loss, Nausea & Mood changes





About Depression

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Our Business

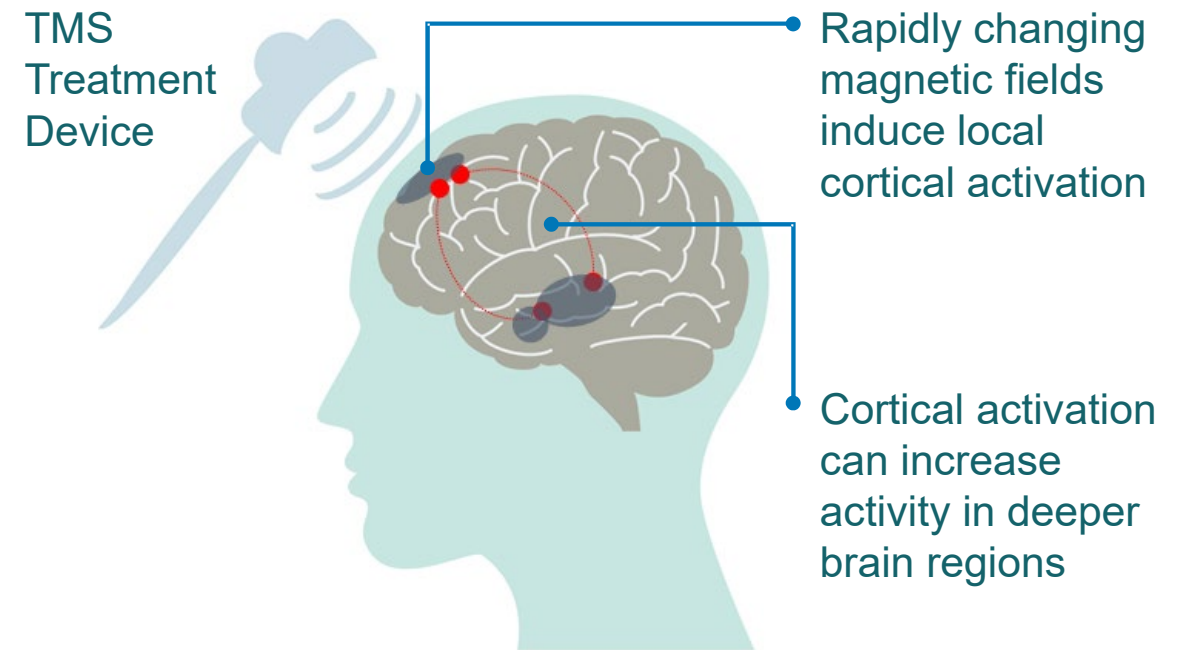
Financial Performance

Looking Forward

## TMS is an FDA-cleared neurostimulation therapy for MDD

An alternative to ECT and a potential life-changing treatment option for MDD patients not responding to pharmacotherapy and psychotherapy

**TMS therapy provides local electromagnetic stimulation to specific brain regions known to function in mood regulation**

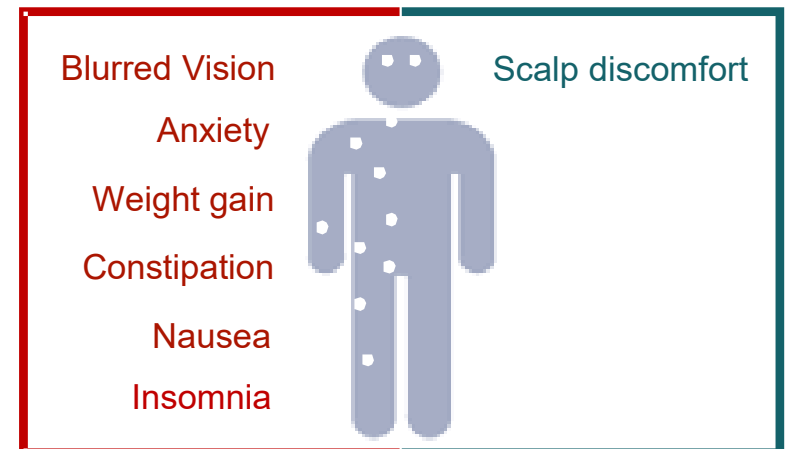


Improvement in depressive symptoms, including complete remission in some patients

- **SHORT AND CONVENIENT TREATMENT**
  - 19-45 minutes per treatment session
  - Administered in an office setting
  - 30-36 treatment sessions, conducted over 4-6 week period
  - Typically 5 treatments per week
  - Patients typically begin to see results within two weeks
  - Post-TMS treatment, patients can immediately return to their normal routine, including driving home
- **NON-INVASIVE AND NON-SEDATIVE**
  - No anesthesia, no hospitalization
- **NO MAJOR SIDE EFFECTS**
  - Well-tolerated
  - Most common side effect is mild and temporary scalp discomfort
  - Non-systemic therapy
  - Minimal increase in the risk of seizure



## Drug Therapy vs. TMS Therapy



# TMS – A Safer and Effective Alternative

TREATMENT CLASS	DRUGS	TMS	ECT/Shock Therapy
Efficacy	49% Response <sup>1</sup> 28% Remission	68% Response <sup>2</sup> 45% Remission	64 - 79% Response <sup>3</sup> 47 - 75% Remission
Usage	~35,000,000 <sup>4</sup> patients p.a.	~30,000 p.a., but growing rapidly <sup>5</sup>	~100,000 <sup>6</sup> patients p.a.
Intervention	Pharmacological	Non-convulsive Electromagnetic stimulation	Convulsion Electrically induced seizures
FDA Approval/Clearance	✓	✓	✓
Non-Invasive	✓	✓	✗
No Hospitalization/ Anesthesia	✓	✓	✗
No Major Side Effects	✗	✓	✗✗ Memory loss, nausea, mood changes
Recovery Time	n/a	Minutes - patients can drive home independently	Hours - Days

1. Star\*D Study; Rush et al., Am J Psychiatry 2006, PMID 17074942; 2. Dunner et al., J Clin Psychiatry 2014, PMID 25271871; 3. Huasin et al., J Clin Psychiatry 2004, PMID 15119910 / Prudic et al., Biol Psychiatry 2004, PMID 14744473; 4. CDC NCHS Data Brief No. 283, Aug 2017 – Antidepressant Use Among Persons Aged 12 and over in the U.S., 2011-2014; 5. Greenbrook management estimate; 6. Mental Health America, ECT, accessed Jan 2, 2017 (www.mentalhealthamerica.net/ect)

# FDA Cleared TMS Treatment Systems

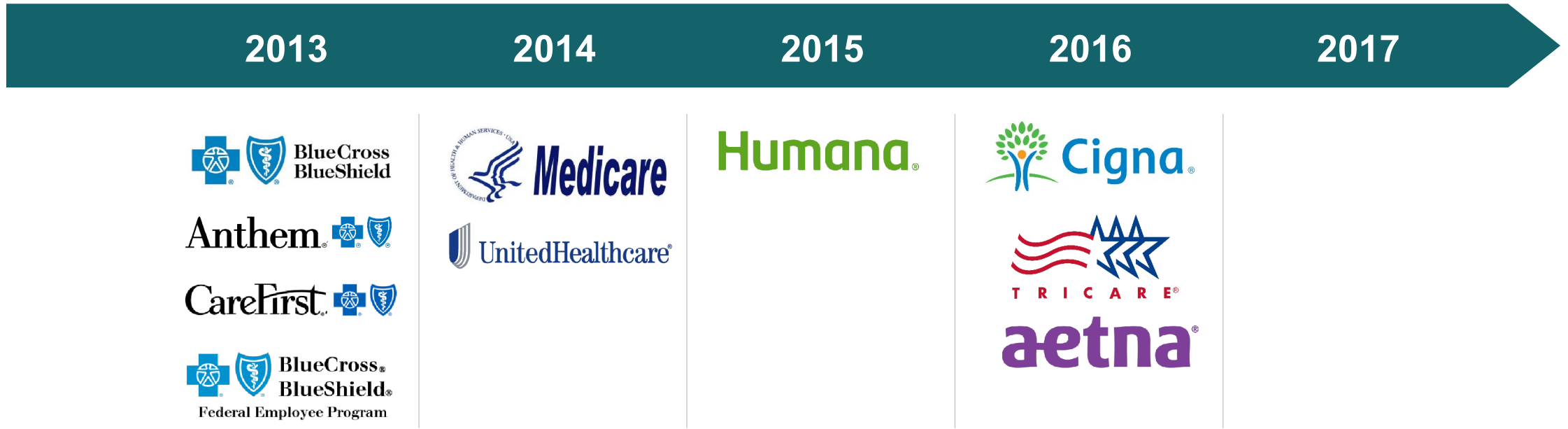
## There are 7 TMS devices currently cleared by FDA

Current Greenbrook TMS device offerings are the industry leaders with the most extensive clinical history



# Insurance Coverage for TMS Treatment of MDD

TMS for MDD is now covered for over 300 MILLION lives in the U.S.



TMS therapy is a potentially life-changing treatment for patients and provides a highly compelling value proposition to payers



About Depression

About TMS



**Our Business**

Financial Performance

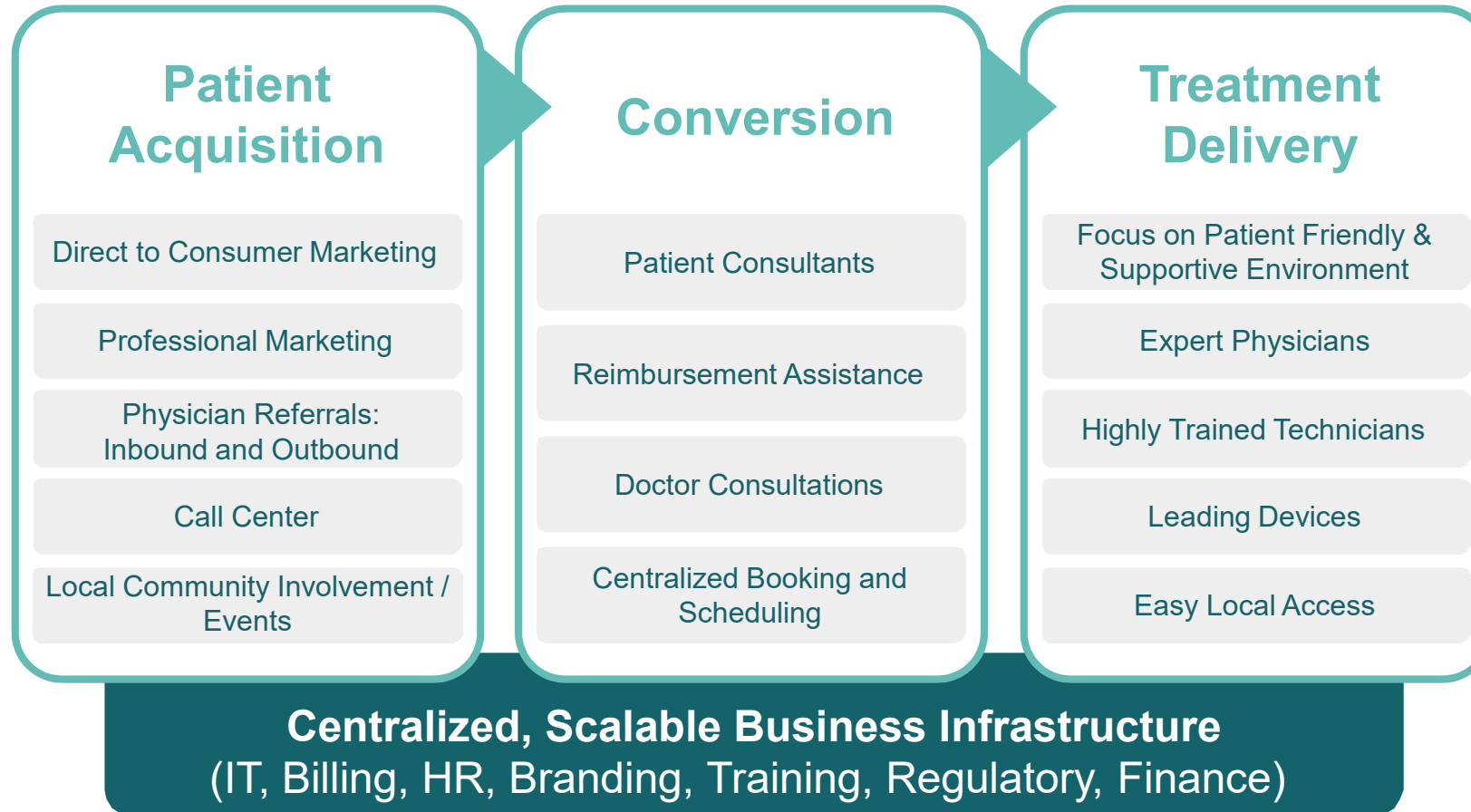
Looking Forward

- 🌿 **Growing awareness / acceptance** of depression and reduced stigma surrounding mental health issues broadly
- 🌿 Growing **acceptance of TMS** as the **best option** for second line therapy
- 🌿 **Safety and efficacy** of TMS as a treatment option for patients suffering from MDD (a true paradigm shift in MDD treatment)
- 🌿 Slow historical adoption of TMS from poor alignment of treatment with traditional practice of psychiatry created **opportunity for a new, differentiated service channel**
- 🌿 **Fragmented competitive landscape** provides opportunity for consolidation



-  **Current competitive landscape for the treatment of MDD through TMS primarily consists of individual psychiatrists who have a TMS device in their office**
  - Does not fit well with the single practitioner treatment model
  - Limits the number of treatments
  
-  **Competition also comes from a limited number of multi-location psychiatric practices or behavioral health groups that typically have 5-15 locations**
  - Most find it difficult to scale the business
  - Next largest U.S. TMS provider after Greenbrook has less than 30 locations versus the current 109 Greenbrook TMS Centers

# Greenbrook TMS Center Model – Patient Focused Service



Centralized corporate functions provide operating leverage as the footprint grows

## KEY CHALLENGE

The daily nature of the treatment can be a challenge for patients

## STRATEGIC ADVANTAGE

Our center network is purpose-built to address this challenge through convenient locations and operating hours that allow our patients to easily incorporate TMS into their daily schedules and build a supportive relationship with our staff

**Our center-based delivery model has quickly established Greenbrook TMS as a leading provider of TMS therapy in the U.S.**

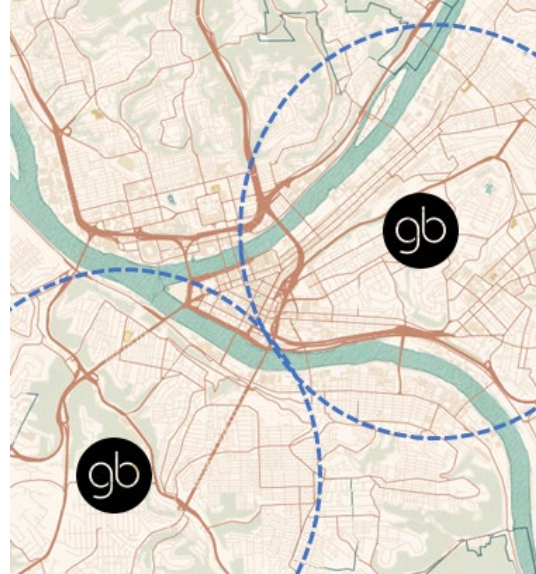
# Regional Expansion Strategy



Single centers are expected to be profitable on a standalone basis within the first year (~50 patients)

**New region selected on balance of factors:**

- Population density / demographics
- State legislation
- Reimbursement rates
- Commercial real estate
- Clinical partners / regional staff
- TMS awareness
- Regional marketing overlap



Second center opened based on capacity utilization and patient coverage areas

A second center shares allocation of regional and corporate overhead

Each center strengthens the Greenbrook presence in the region

New 'chairs' added



Additional centers opened to further serve the region

Subsequent centers share allocations of regional and corporate overhead costs

Referral data and in-region experience further inform site selection

New regions are projected as **profitable by year 2**, including full allocation of corporate overhead and all regional costs

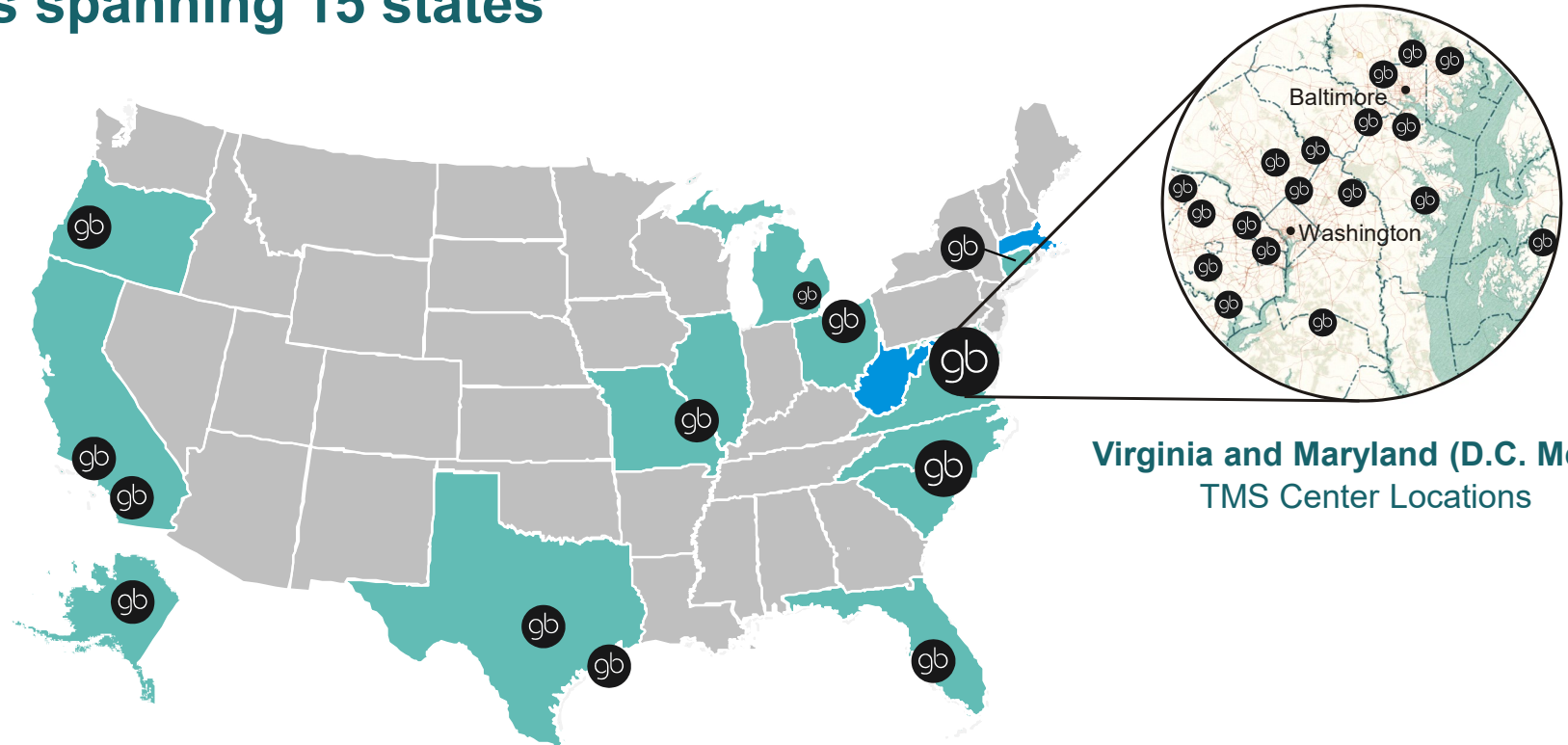
**Only 33 of the current 109 locations have been in operation for over 2 years**

# Current Footprint and Active Development Pipeline

Operating 109 TMS Centers spanning 15 states

## OPERATING REGIONS

Virginia  
Maryland/Delaware  
North/South Carolina  
St. Louis  
Austin  
Houston  
Connecticut  
Cleveland  
Florida  
Michigan  
California  
Oregon  
Alaska



Virginia and Maryland (D.C. Metro)  
TMS Center Locations

Current Footprint (109 TMS Centers)  
Near Term Prospects



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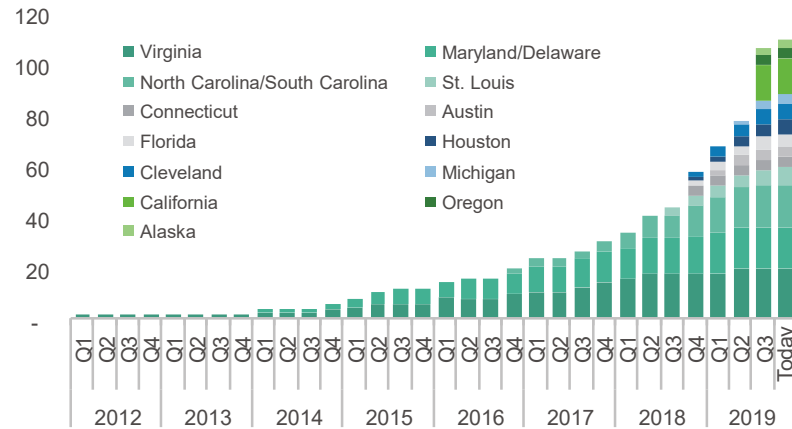
Our Business

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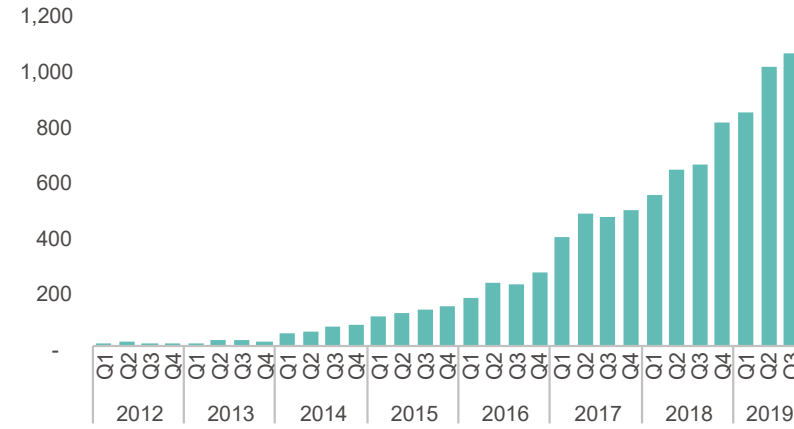
Looking Forward

# Operational Performance

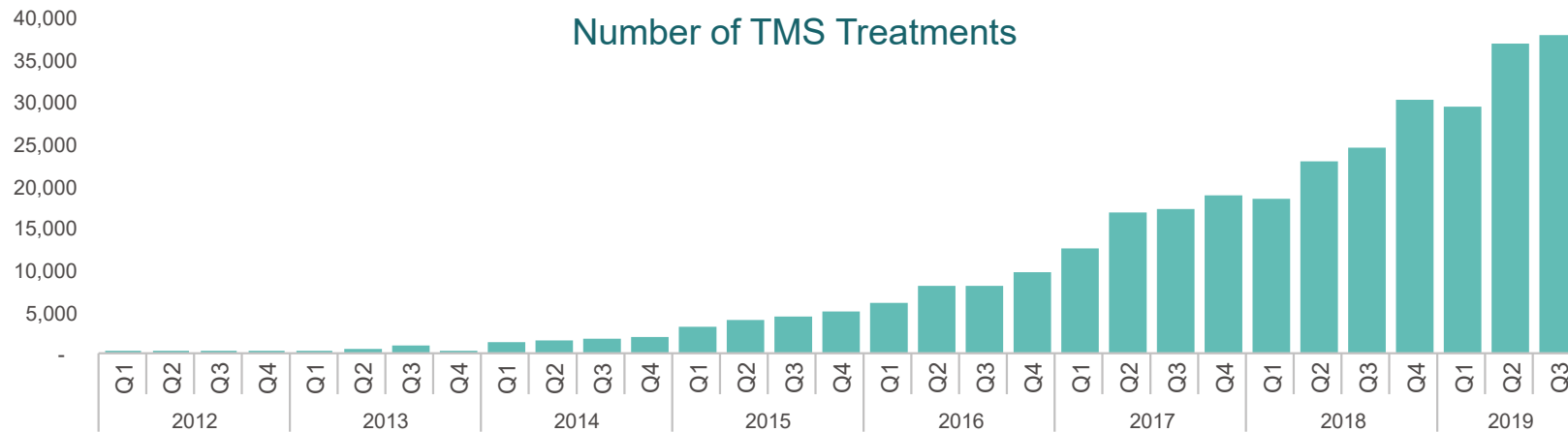
## Number of TMS Centers



## Number of New Patient Starts



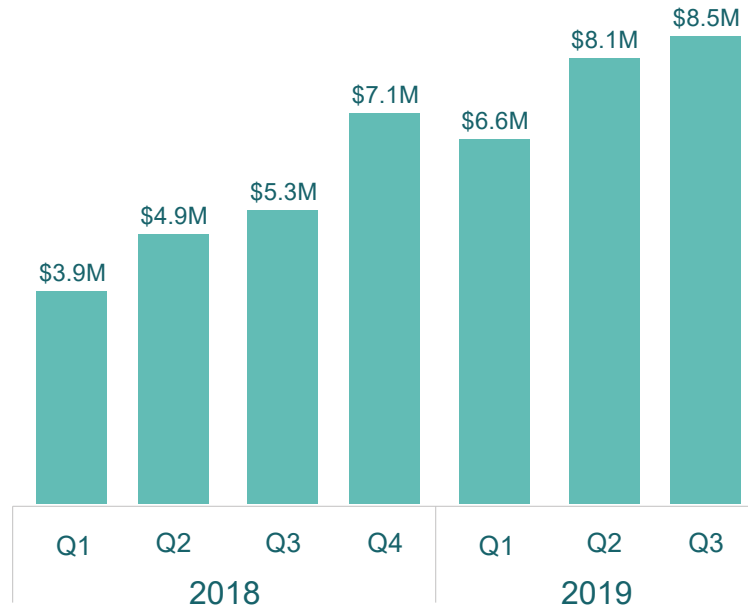
## Number of TMS Treatments



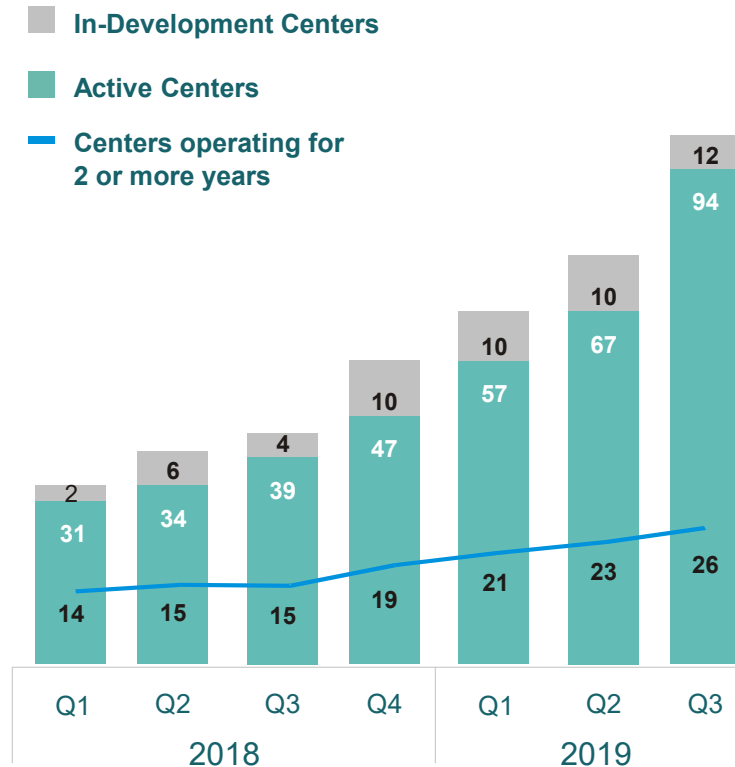
# Financial Performance Summary – Revenue and Centers

## Quarterly Revenue

(All \$ amounts in USD)



## TMS Centers



Continued revenue growth through our regional development strategy paired with organic growth from established regions

We forecast centers to reach capacity after approximately 4 years and less than 1/3rd of our centers have been open for more than 2 years





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## Four Key Drivers of Sustained Growth



### In-Region

- Growing TMS awareness
- Continued organic growth in existing centers
- In-region expansion: new centers to target 30 min drive time for patients



### New Regions

- Foundation for growth recently established:
  - St. Louis
  - Houston
  - Cleveland
  - Michigan
  - Oregon
  - Connecticut
  - Austin
  - Florida
  - California
  - Alaska



### New Indications

- Device manufacturers seeking to expand TMS label
- Greenbrook well established to lead TMS delivery in new indications



### M&A

- Opportunistic acquisitions of established centers
- Fragmented market of many small groups
- Well positioned for rapid integration

# Future Opportunities - New Indications

Greenbrook TMS is a service delivery platform, with an established and growing network of referring physicians. Our centers are well positioned to incorporate new treatment indications, if and when cleared by the FDA.

TMS device manufacturers actively pursuing clinical trials for new indications

Potential Future Indication	Estimated U.S. Patient Population
OCD <sup>1</sup>	3.3 million <sup>2</sup>
Adolescents with MDD <sup>3</sup>	3 million <sup>4</sup>
PTSD <sup>1</sup>	8.7 million <sup>2</sup>
Bipolar Disorder <sup>1,5</sup>	5.7 million <sup>2</sup>
Addiction <sup>1</sup>	36.5 million <sup>6</sup>



TMS device manufacturers actively pursuing clinical trials for new indications for TMS

1. Brainsway Ltd. (TASE:BRIN) Company filings; 2. Kessler et al., Arch Gen Psychiatry 2005, PMID 15939839; 3. Neuronetics, Inc. press releases and clinicaltrials.gov; 4. NSDUH 12-month prevalence data of MDD 2015; 5. Frost and Sullivan Equity Research; 6. CDC.Cigarette Smoking Among Adults - United States, 2005-2015. Morbidity and Mortality Weekly Report 2016;65(44):1205-11 (Estimated for smoking cessation only – estimate based on number of cigarette smoking adults in the U.S.)

# Greenbrook Summary Capital Structure

## Current capitalization and Ownership

### Current Capitalization

<b>Share Price (C\$)</b>	<b>\$1.75</b>
<small>(December 31<sup>st</sup>, 2019 close)</small>	
<b>Common Shares O/S (mm)</b>	<b>57.0</b>
<b>Market Cap. (C\$ mm)</b>	<b>\$99.8</b>

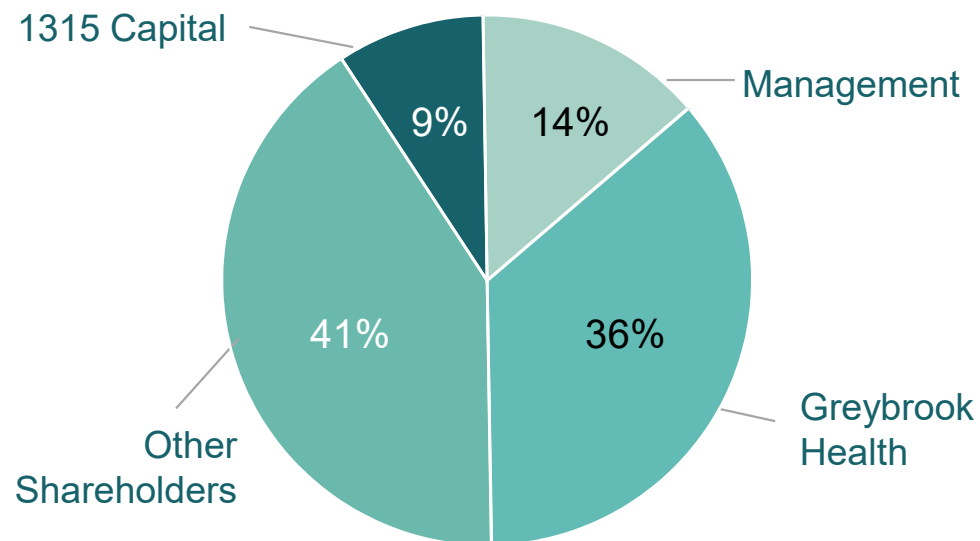
<b>Equity Capital Structure</b>	<small>(mm)</small>
Basic Shares O/S	57.0
<i>Dilutive Securities:</i>	
Options	2.8
Warrants	1.1
Fully-Diluted Shares	60.9

<b>Summary Balance Sheet</b>	<small>US\$ (000's)</small>
Cash (as at September 30, 2019)	\$11.57

### Insider Holdings

Management	14%
Greybrook Health	36%

### Ownership Summary



## Experienced leadership team that has pioneered the service delivery model for TMS treatment Founders led the growth of TLC Vision Care Centers into a national leader in laser vision correction



**Elias Vamvakas**  
Chairman

- Co-founder of Greenbrook TMS
- 25 years experience as a healthcare executive
- Co-founder, former Chairman and CEO of TLC Vision Corporation (NDQ:TLCV)
- Founder and Chairman of Greybrook Capital
- Chairman of TearLab (NDQ:TEAR)



**Bill Leonard**  
President & CEO

- Co-founder of Greenbrook TMS
- 25 years experience as a healthcare executive
- Has pioneered the accessibility of TMS as a therapy in MDD
- Previously, President of the Bio-Pharmaceutical Division for Euclid Vision Corporation and President of TLC Vision Refractive Surgery Division (TLC)



**Erns Loubser CA CFA**  
Chief Financial Officer

- Over 10 years of financial management, accounting, management consulting, and corporate finance experience
- Previous roles with Deloitte, Stellar Capital Partners, and British Telecom



**Dr. Geoffrey Grammer MD**  
Chief Medical Officer

- Retired Colonel, United States Army
- Served for 8 years as Chief of Inpatient Psychiatric Services at Walter Reed National Military Medical Center where he developed the Transcranial Magnetic Stimulation Program
- Assistant Professor of Psychiatry, Uniformed Services University, Bethesda, MD
- Previous, Board Member of the Clinical TMS Society



**Roberto Drassinower**  
Chief Operating Officer

- Over 25 years experience as technology business leader and operator
- Previously, CEO of SoftQuad Software Ltd, CEO of Brandprotect, CEO of Nulogx, President of Carolian System, and founder of DME consulting



**Euphia Smith**  
Chief Marketing Officer

- Served as a health policy advisor on Capitol Hill
- Previously worked with health care revenue marketing team at The Advisory Board Company (NASDAQ:ABCO) on patient access, patient engagement and growth strategy

# Board of Directors

**Elias Vamvakas**  
Chairman

Co-founder of Greenbrook TMS  
Co-founder, former Chairman and CEO of TLC Vision Corporation  
Founder and Chairman of Greybrook Capital

**Bill Leonard**

President and CEO  
Co-founder of Greenbrook TMS

**Adrienne Graves Ph.D.**

Former President and CEO of Santen Inc.  
Director of Akorn Inc, Nicox S.A., Surface Pharmaceuticals, and TearLab Corp.  
Ph.D. in psychobiology from University of Michigan

**Brian P. Burke**

National Hockey League Analyst for Rogers Sportsnet  
Former President and/or General Manager of several NHL franchises from 1992-2018. Received his Juris Doctor from Harvard Law School

**Colleen Campbell**

Vice-chair of BMO Capital Markets with over 38 years of experience in various leadership roles in capital markets and investment banking.

**Frank Tworecke**

Former group president of Warnaco Group with 35 years of experience in leading major retail and apparel companies. Past director of Cherokee Inc., Hampshire Group, Grafton-Fraser Inc. and Sinai Hospital of Baltimore

**Sasha Cucuz**

Experienced private equity executive and CEO of Greybrook Securities Inc. Former CEO and current board member of Greybrook Health

**Adele C. Olivia**

Co-founded healthcare investment firm 1315 Capital managing over \$500M  
Formerly Co-Head of US Healthcare at Apax Partners and Managing Partner at Quaker Partners

# Thank You

**Erns Loubser**  
Chief Financial Officer

**Glen Akselrod**  
Investor Relations

[glen@bristolir.com](mailto:glen@bristolir.com)  
905-326-1888