

# Addiction continues to be a challenge. Treatment must adapt to today's realities.

In 2020, the United States recorded the largest number of drug overdoses ever for a 12-month period.\* The increases in drug overdose deaths appear to have accelerated during the COVID-19 pandemic:

26.5%

increase in overdoses involving cocaine

25 states saw a

**≥20**%

increase in overdoses

81,230

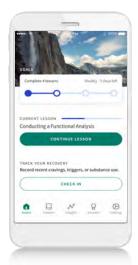
drug overdose deaths in the United States, an increase of 18.2%

\*Drug overdose deaths occurring in the United States in the 12-month period ending in May 2020.

Reference: Increase in fatal drug overdoses across the United States driven by synthetic opioids before and during the COVID-19 pandemic. Centers for Disease Control and Prevention. Published December 17, 2020. Accessed January 15, 2021. https://emergency.cdc.gov/han/2020/han00438.asp.



Introducing reSET and reSET-O. Digital recovery companions\* for your patients.



## First-of-their-kind prescription digital therapeutics (PDTs)<sup>1,2</sup>:

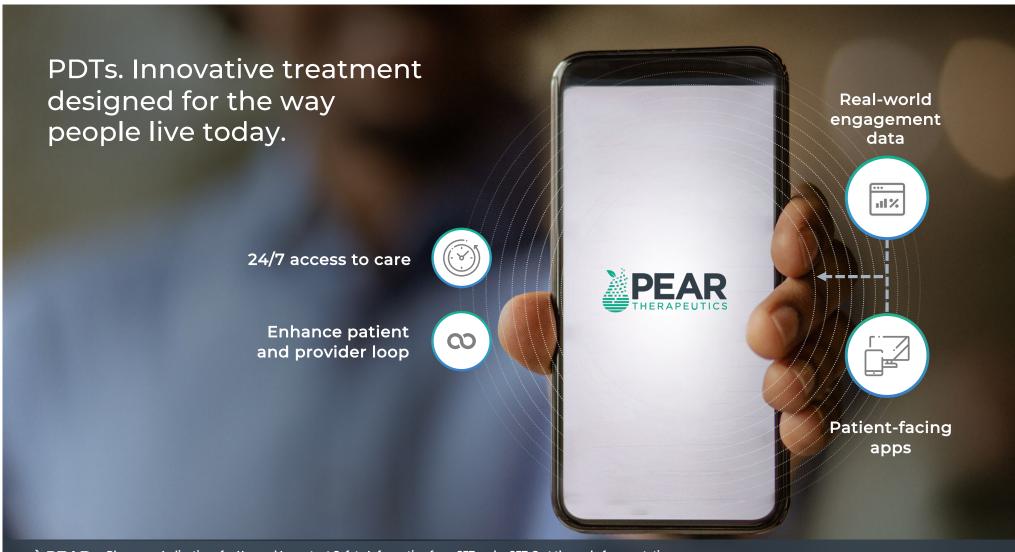
- FDA authorized
- Evidence-based treatment for substance use disorder (SUD) and opioid use disorder (OUD) accessible on a smartphone or tablet<sup>†</sup>
- Cognitive behavioral therapy lessons, fluency training to help patients remember what they've learned, and contingency management using rewards like gift cards

\*SUD and OUD are chronic conditions, and permanent recovery is uncertain. reSET and reSET-O may increase retention in the outpatient treatment program, and reSET may increase abstinence substance use during treatment.

treSET is indicated for SUD and reSET-O is indicated for OUD.

References: 1. reSET Clinician Directions for Use, Pear Therapeutics, Inc. 2020, 2. reSET-O Clinician Directions for Use, Pear Therapeutics, Inc. 2020.





# A new paradigm to treat SUD (reSET) and OUD (reSET-O).



#### **INDICATION**

reSET is intended to provide cognitive behavioral therapy, as an adjunct to a contingency management system, for patients 18 years of age and older, who are currently enrolled in outpatient treatment under the supervision of a clinician. reSET is indicated as a 12-week (90 day) prescription-only treatment for patients with substance use disorder (SUD), who are not currently on opioid replacement therapy, who do not abuse alcohol solely, or who do not abuse opioids as their primary substance of abuse.

#### It is intended to:

- increase abstinence from a patient's substances of abuse during treatment, and
- increase retention in the outpatient treatment program

12-week prescription duration



### **INDICATION**

reSET-O is intended to increase retention of patients with opioid use disorder (OUD) in outpatient treatment by providing cognitive behavioral therapy, as an adjunct to outpatient treatment that includes transmucosal buprenorphine and contingency management, for patients 18 years or older who are currently under the supervision of a clinician.

Indicated as a prescription-only digital therapeutic

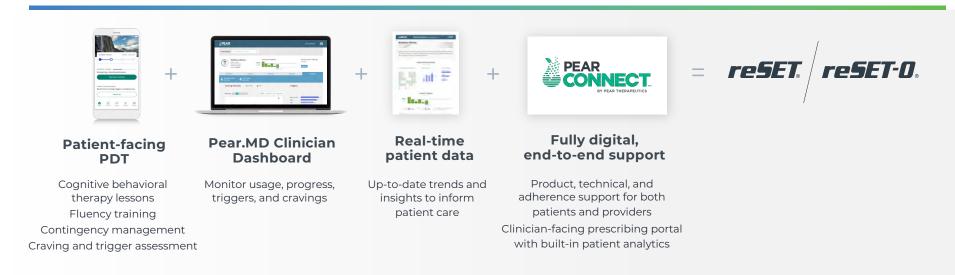
12-week prescription duration







# Bringing evidence-based treatment, data, and support together 24/7 in an engaging PDT.





The Pear platform is secure: Integrated, secure API | GMP compliant | HIPAA compliant



# Clinically validated treatment for SUD and OUD.<sup>1,2</sup>

## In a 12-week study of reSET<sup>1</sup>:

>2x

In a secondary analysis of patients whose primary substance of abuse was not opioids, adding reSET to outpatient treatment as usual (TAU) **more than doubled abstinence rates** during the last 4 weeks of the 12-week trial:

17.6% with TAU (n=193) vs 40.3% with rTAU\*
 + reSET (n=206); P=.0004

+9%

### RETENTION

Among all patients, including those whose primary substance of abuse was opioids, adding reSET to outpatient TAU significantly improved retention rate compared to TAU alone at the end of the 12-week trial:

• 63.5% with TAU (n=252) vs 72.2% with rTAU\* + reSET (n=255); P=.0316 In a 12-week study of reSET-O<sup>2</sup>:

+14%

**RETENTION** 

Adding reSET-O to outpatient TAU using buprenorphine **increased retention of patients with OUD 14%** at the end of the 12-week trial:

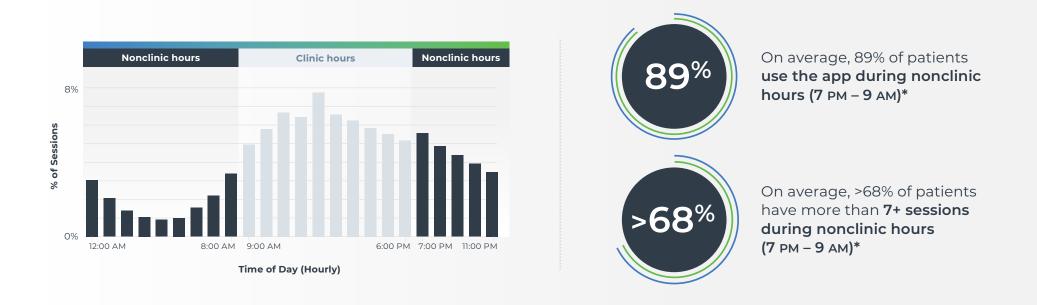
 68.4% with TAU (n=79) vs 82.4% with TAU + reSET-O (n=91); P=.0224

\*rTAU: reduced treatment as usual in which 2 hours of face-to-face therapy each week was replaced with use of a desktop-based Therapeutic Education System, which has equivalent content to reSET.

References: 1. reSET Clinician Directions for Use. Pear Therapeutics, Inc. 2020. reSET is a clinically validated treatment for SUD. 2. reSET-O Clinician Directions for Use. Pear Therapeutics, Inc. 2020. reSET-O is a clinically validated treatment for OUD.



# Discreet, 24/7 access to reSET and reSET-O treatment.



Reference: Pear Therapeutics, Inc. Data on file. September 2020.





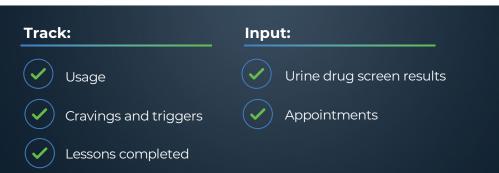


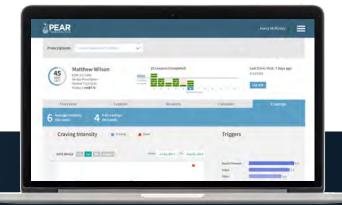
<sup>\*</sup>reSET and reSET-O patients who have completed their prescription as of September 30, 2020. reSET = 482; reSET-O = 3949. Usage is defined as one or more sessions during nonclinic hours. Session is defined as a user interaction with the app. A session ends when no activity has been detected for 10+ minutes.

# Pear.MD Clinician Dashboard

Pear.MD Clinician Dashboard allows you to **monitor usage**, **lesson progress, triggers, and cravings** for informed patient conversations.

Plus, the time you spend on the Pear.MD Clinician Dashboard may be reimbursable.\*





\*Coding and coverage policies change periodically and often without warning. The responsibility to determine diagnosis, coverage, and reimbursement parameters and appropriate coding for a particular patient and/or service is always that of the provider or physician. The information provided should in no way be considered a guarantee of coverage or reimbursement for any product or service.



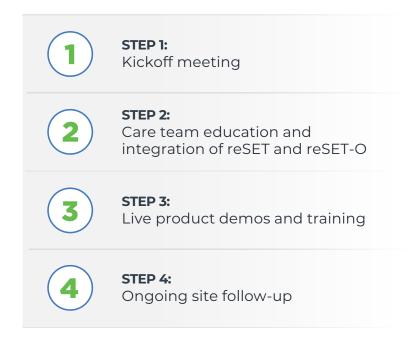


# Support teams will help with integrating reSET and reSET-O into your practice.

You'll get all the help you need to make offering reSET and reSET-O as simple as possible for your practice.

## Pear support teams will:

- Explain how our systems will integrate with yours
- Provide staff with the tools and knowledge they need for successful implementation



# Redefine addiction care with reSET and reSET-O.

Evidence-based and clinical outcomes	Clinically validated and FDA authorized: reSET for abstinence and treatment retention and reSET-O for treatment retention*
Operational visibility	Real-time insights into patient engagement and practice performance
Care extender	24/7, anytime, anywhere addiction treatment during the 12 weeks of the prescription
Real-world data	Access to real-world data that show outcomes important to patient care and your organization
One common platform	A single secure integrated platform with eRx capabilities



\*reSET is authorized for abstinence and retention. reSET-O is authorized for retention only.



#### **Indications for Use:**

reSET is intended to provide cognitive behavioral therapy, as an adjunct to a contingency management system, for patients 18 years of age and older, who are currently enrolled in outpatient treatment under the supervision of a clinician. reSET is indicated as a 12-week (90 day) prescription-only treatment for patients with substance use disorder (SUD), who are not currently on opioid replacement therapy, who do not abuse alcohol solely, or who do not abuse opioids as their primary substance of abuse.

It is intended to:

- · increase abstinence from a patient's substances of abuse during treatment, and
- increase retention in the outpatient treatment program.

### **Important Safety Information for Clinicians:**

**Warnings:** reSET is intended for patients whose primary language is English and who have access to an Android/iOS tablet or smartphone. reSET is intended only for patients who own a smartphone and are familiar with use of smartphone apps (applications).

Clinicians should not use reSET to communicate with their patients about emergency medical issues. Patients should be clearly instructed not to use reSET to communicate to their clinician any urgent or emergent information. In case of an emergency, patients should dial 911 or go to the nearest emergency room.

reSET is not intended to be used as a stand-alone therapy for substance use disorder (SUD). reSET does not replace care by a licensed medical practitioner. reSET does not represent a substitution for a patient's medication. Patients should continue to take their medications as directed by their healthcare provider.

The long-term benefit of treatment with reSET on abstinence has not been evaluated in studies lasting beyond 12 weeks (90 days) in the SUD population. The ability of reSET to prevent potential relapse after treatment discontinuation has not been studied.

This presentation does not include all the information needed to use reSET safely and effectively. Please see full Directions for Use for complete Important Safety Information.





#### **Indications for Use:**

reSET-O prescription digital therapeutic is a 12-week (84 day) software application intended to increase retention of patients with opioid use disorder (OUD) in outpatient treatment by providing cognitive behavioral therapy, as an adjunct to outpatient treatment that includes transmucosal buprenorphine and contingency management, for patients 18 years or older who are currently under the supervision of a clinician. reSET-O is indicated as a prescription-only digital therapeutic.

### **Important Safety Information for Clinicians:**

Warnings: reSET-O is intended for patients whose primary language is English and who have access to an Android/iOS tablet or smartphone. reSET-O is intended only for patients who own a smartphone and are familiar with use of smartphone apps (applications).

Clinicians should not use reSET-O to communicate with their patients about emergency medical issues. Patients should be clearly instructed not to use reSET-O to communicate to their clinician any urgent or emergent information. In case of an emergency, patients should dial 911 or go to the nearest emergency room.

reSET-O is not intended to be used as a stand-alone therapy for Opioid Use Disorder (OUD), reSET-O does not replace care by a licensed medical practitioner, reSET-O does not represent a substitution for a patient's medication. Patients should continue to take their medications as directed by their healthcare provider. The ability of reSET-O to prevent potential relapse after therapy discontinuation has not been studied.

The long-term benefit of reSET-O has not been evaluated in studies lasting beyond 12 weeks (84 days) in the OUD population. The ability of reSET-O to prevent potential relapse after therapy discontinuation has not been studied.

This presentation does not include all the information needed to use reSET-O safely and effectively. Please see full Directions for Use for complete Important Safety Information.



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