

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): June 20, 2023

DOCGO INC.  
(Exact name of registrant as specified in its charter)

Delaware  
(State or other jurisdiction  
of incorporation)

001-39618  
(Commission File Number)

85-2515483  
(IRS Employer  
Identification No.)

35 West 35th Street, Floor 6, New York, New York  
(Address of principal executive offices)

10001  
(Zip Code)

(844) 443-6246  
(Registrant's telephone number, including area code)

N/A  
(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K 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))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common stock, par value \$0.0001 per share	DCGO	The Nasdaq Stock Market LLC

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

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.**

As previously announced, today, June 20, 2023, DocGo Inc. (the “Company”) will host an Investor Day. Members of the Company’s executive leadership team will present on the Company’s progress, strategy and outlook. A live webcast of the management presentation and question and answer session will be accessible on the Company’s website at [ir.docgo.com](http://ir.docgo.com), and a replay will also be available on the website following the conclusion of the event for a period of 30 days. A copy of the Investor Day presentation is furnished as Exhibit 99.1 to this Current Report on Form 8-K.

The information in Item 7.01 of this Current Report on Form 8-K and the exhibit attached hereto are being furnished and shall not be deemed “filed” for purposes of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), nor shall they be deemed incorporated by reference into any registration statement or other filing under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference to such filing.

**Item 9.01 Financial Statements and Exhibits.**

(d) Exhibits

<b>Exhibit No.</b>	<b>Description</b>
99.1	<a href="#">Investor Day Presentation dated June 20, 2023</a>
104	Cover Page Interactive Data File (formatted as Inline XBRL)



**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.

**DOCGO INC.**

By: /s/ Ely D. Tandler

Name: Ely D. Tandler

Title: General Counsel and Secretary

Date: June 20, 2023



**DOC GO**

06.20.2023

# DocGo INVESTOR DAY

Our Promise: We Go

DCGO | Nasdaq Listed

# AGENDA

**01**

Proactive Health Care  
Revolution

**02**

Excellence In  
Operations

**03**

Care Delivery

**04**

Clinical Excellence

**05**

Technology

**06**

Growth Trajectory

**07**

Q&A

**08**

Executing Our Vision

### Cautionary Note Regarding Forward-Looking Statements

This presentation includes forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), regarding, among other things, the plans, strategies, outcomes, targets and prospects, both business and financial, of the Company. These statements are based on the beliefs and assumptions of our management. Although the Company believes that its plans, intentions and expectations reflected in or suggested by these forward-looking statements are reasonable, the Company cannot assure you that it will achieve or realize these plans, intentions, outcomes or expectations. Forward-looking statements are inherently subject to substantial risks, uncertainties and assumptions, many of which are beyond our control, and which may cause actual results to differ materially from those contained in our forward-looking statements. Accordingly, you should not place undue reliance on such statements. All statements other than statements of historical fact are forward-looking. Forward-looking statements include, but are not limited to, statements concerning possible or assumed future actions, business strategies, plans, goals, future long-term targets, future events, future revenues or performance, financing needs, business trends, results of operations, objectives and intentions with respect to future operations, services and products, including our transition to non-COVID related services, geographic expansion, normalization initiative, new and existing contracts, M&A activity, workforce growth, leadership transition, cash position, share repurchase program, our competitive position and opportunities, including our ability to realize the benefits from our operating model, and others. In some cases, these statements may be preceded by, followed by or include the words "believes," "estimates," "expects," "projects," "forecasts," "may," "might," "will," "should," "could," "can," "would," "design," "potential," "seeks," "plans," "scheduled," "anticipates," "intends," "targets" or the negative of these terms or similar expressions.

Forward-looking statements are not guarantees of performance and speak only as of the date the statements are made. While DocGo believes that these forward-looking statements are reasonable, there can be no assurance that DocGo will achieve or realize these plans, intentions, outcomes or expectations. You should understand that the significant risks and uncertainties discussed in the Company's most recent Annual Report on Form 10-K, Quarterly Reports on Form 10-Q and its other filings with the SEC could affect the future results and prospects of DocGo and could cause those results or other outcomes to differ materially from those expressed or implied in the forward-looking statements in this presentation.

We undertake no intent or obligation to publicly update or revise any forward-looking statements, whether because of new information, future events, or otherwise.

### Note Relating to Pre-Merger Financial Information

As previously disclosed, on November 5, 2021 (the "Closing Date"), DocGo Inc., a Delaware corporation (formerly known as Motion Acquisition Corp. or "Motion"), consummated a business combination (the "Closing") pursuant to an Agreement and Plan of Merger dated March 8, 2021 (the "Merger Agreement"), by and among Motion Acquisition Corp., a Delaware corporation ("Motion"), Motion Merger Sub Corp., a Delaware corporation and a direct wholly owned subsidiary of Motion ("Merger Sub"), and Ambulnz, Inc., a Delaware corporation ("Ambulnz"). In connection with the Closing, the registrant changed its name from Motion Acquisition Corp. to DocGo Inc. and began trading under the "DCGO" ticker on The Nasdaq Stock Market LLC ("Nasdaq"). The numbers presented for the fiscal years 2018 through 2020 represent the stand-alone financial results for Ambulnz, Inc.

# DCGO'S INVESTMENT THESIS



**OPERATES IN SOME OF THE MOST RAPIDLY EXPANDING SEGMENTS OF THE HEALTH CARE INDUSTRY**



**EXPECTED GREATER THAN 30% ANNUAL REVENUE GROWTH WITH EXPANDING MARGINS OVER NEXT TWO YEARS**



**EXPANSIVE TOTAL ADDRESSABLE MARKET ACROSS MULTIPLE HEALTH CARE SEGMENTS**



**ANTICIPATED OPERATING LEVERAGE AT SCALE**



**BROAD RANGE OF POTENTIAL USE CASES FOR DCGO'S SERVICES**



**STRONG BALANCE SHEET AND ACCESS TO CAPITAL TO FUEL GROWTH**



CEO

# ANTHONY CAPONE

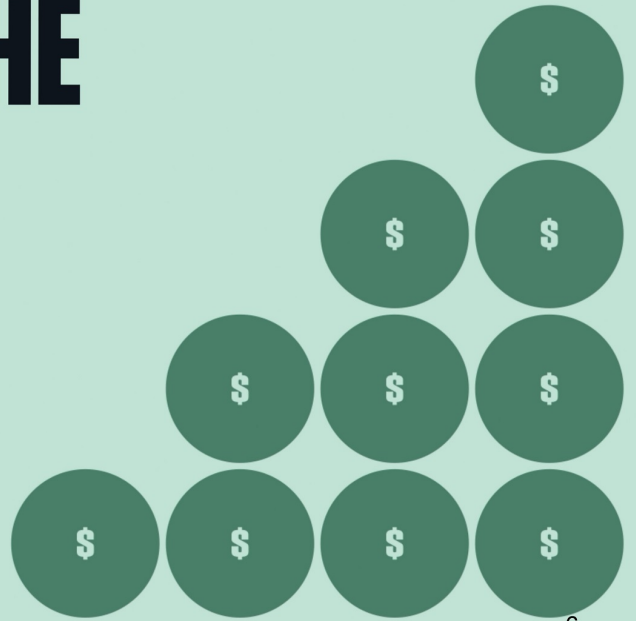


# PROACTIVE HEALTH CARE REVOLUTION

Working to fix a broken health care system <sup>5</sup>

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# UNITED STATES HEALTH CARE IS THE MOST EXPENSIVE IN THE WORLD



Source: Organisation for Economic Co-Operation and Development, OECD Health Statistics, 2022, July 2022; Peter G. Peterson Foundation

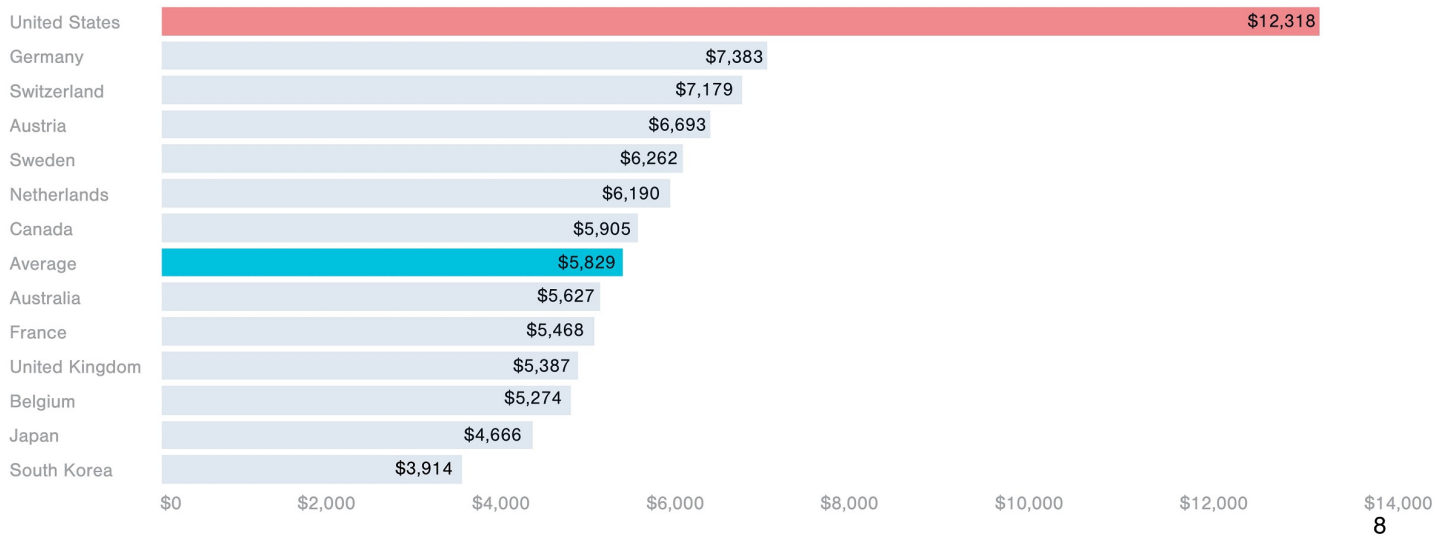


**\$4,300,000,000,000**

Annual United States Health  
Care Spending in 2021

# THE U.S. SPENT **16.9%** OF ITS GDP ON HEALTH CARE IN 2021. HEALTHIEST COUNTIES SPEND NEARLY HALF.

Annual Health Care Spending Per Capita



Despite high spending,  
America ranks among the

# LOWEST HEALTH METRICS OF OECD COUNTRIES



Source: Organisation for Economic Co-Operation and Development, OECD Health Statistics, 2022, July 2022; Peter G. Peterson Foundation

# THE UNITED STATES LAGS BEHIND IN KEY HEALTH METRICS & OUTCOMES

Worst ● Best

## Health Status

Life expectancy at birth



## Infant mortality



## Quality of primary care

Unmanaged Asthma



## Unmanaged Diabetes



Source: Organisation for Economic Co-Operation and Development, OECD Health Statistics, 2022, July 2022; Peter G. Peterson Foundation



**6 OUT OF 10**

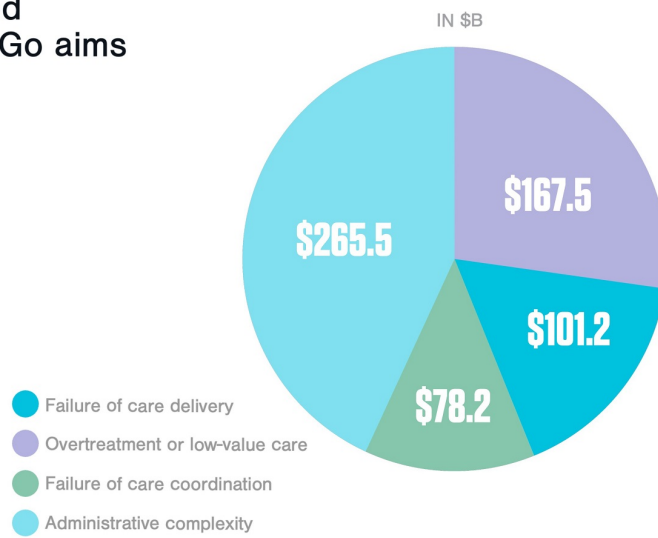
adults have a chronic disease

**4 OUT OF 10**

adults have 2+ chronic diseases

# \$612,400,000,000

Health care spending wasted annually on issues that DocGo aims to address



Shrank WH, Rogstad TL, Parekh N. Waste in the US Health Care System: Estimated Costs and Potential for Savings. JAMA. 2019;322(15):1501-1509. doi:10.1001/jama.2019.13978

# **PROACTIVE HEALTH CARE IS THE SOLUTION**

**PROACTIVE HEALTH  
CARE IS CARE THAT**

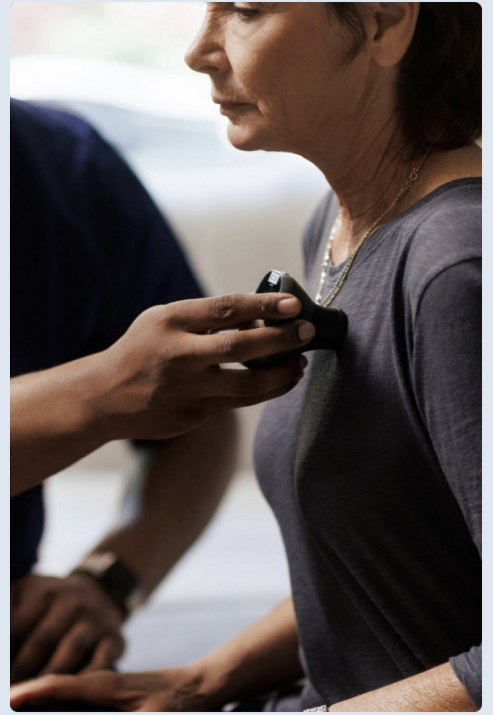
**MOVES**



# SKILLED CLINICIANS



# BRINGING CARE TO PATIENTS ON THEIR TERMS



# **COMBINING SOFTWARE, HARDWARE & PROPRIETARY CLINICAL WORKFLOWS**

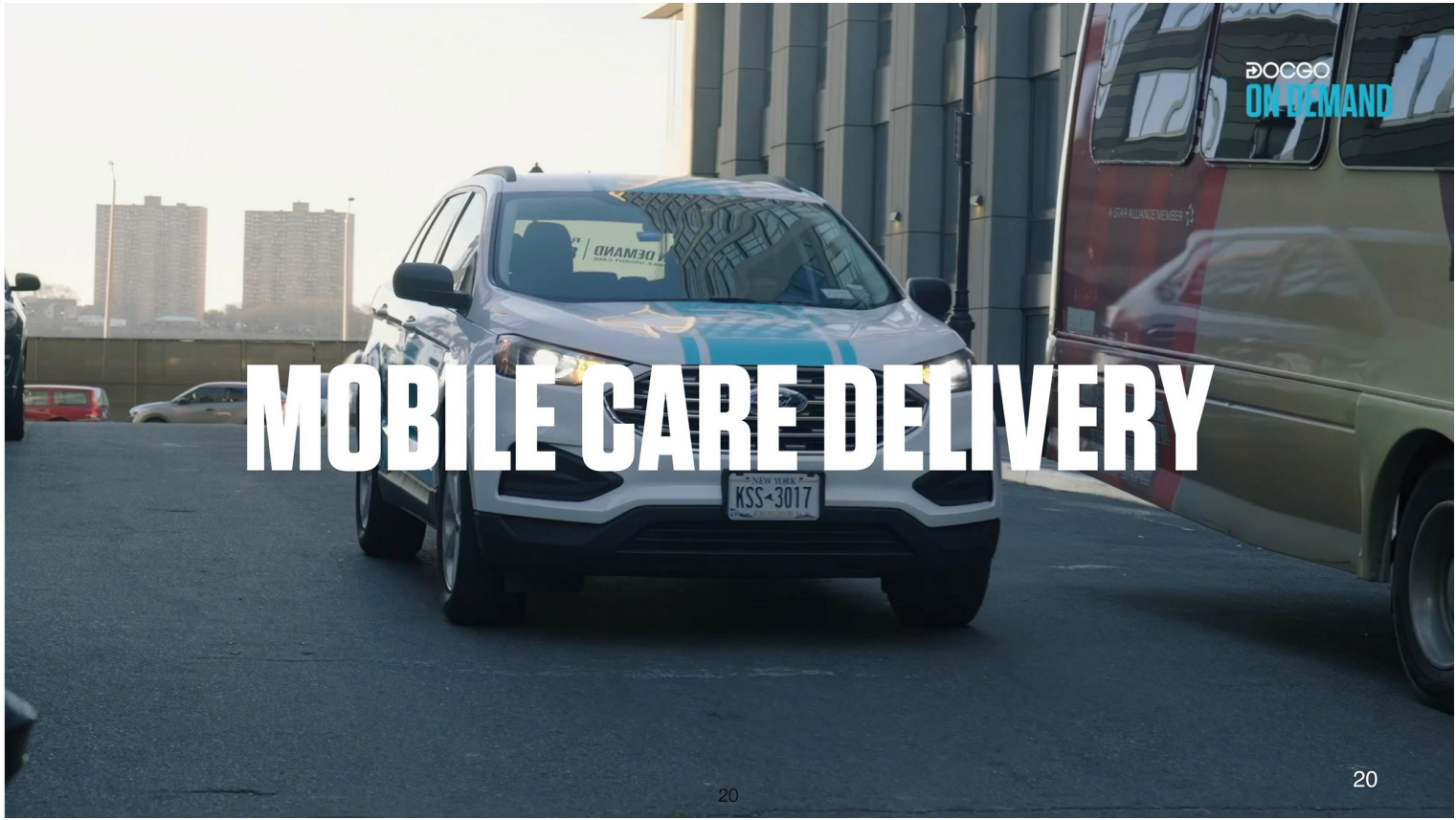
# TREATMENT IN MORE EFFICIENT WAYS



# DocGo'S PROACTIVE CARE DELIVERY MODEL AIMS TO DISRUPT

the broken U.S. healthcare system











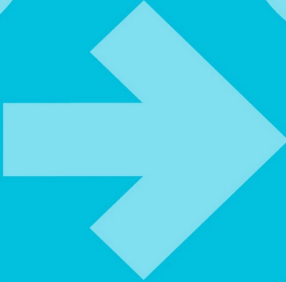
# REIMBURSEMENT





President, COO

# LEE BIENSTOCK



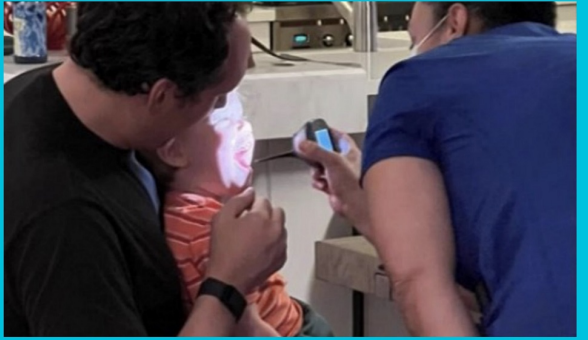
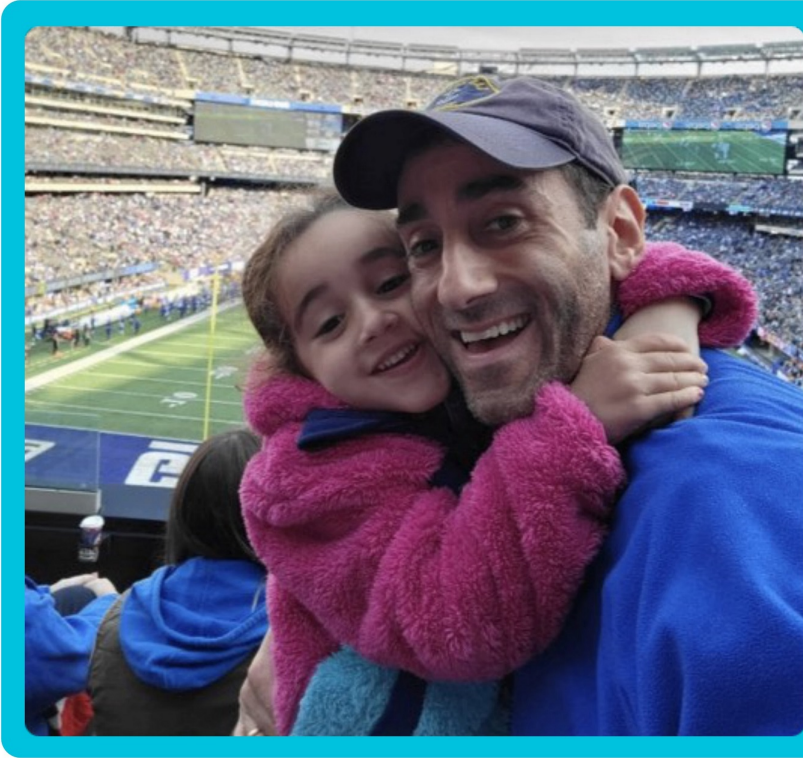
# EXCELLENCE IN OPERATIONS

Raving fans and growth opportunities  
24

Proactive health care's big idea:

# WE HELP PEOPLE STAY OUT OF THE HOSPITAL





# WE BELIEVE EVERYONE BENEFITS FROM KEEPING PEOPLE OUT OF THE HOSPITAL



# GOVERNMENT/ PUBLIC →

# HEALTH CARE SYSTEMS →

# HEALTH PLANS/ PROVIDERS →

**NYC Health**  
**NEW YORK STATE** Department of Health  
**NJ Health** New Jersey Department of Health  
**dhec**  
**Florida Health**  
**Tacoma-Pierce County Health Department** Healthy People in Healthy Communities  
**MDHHS** Michigan Department of Health & Human Services  
**Maryland DEPARTMENT OF HEALTH**  
**PHXHOUSING** County of Maricopa Department of Health and Human Services  
**Harris County Public Health** Healthy & Healthy Communities  
**COUNTY OF LOS ANGELES Public Health**  
**ARIZONA DEPARTMENT OF HEALTH SERVICES**

**NYC HEALTH+HOSPITALS**  
**Northwell Health**  
**Jefferson**  
**UTHealth**  
**FRESENIUS MEDICAL CARE**  
**HCA Healthcare** TriStar Division  
**Mount Sinai**  
**Martin Luther King, Jr. Community Hospital**  
**uchealth**  
**Main Line Health**  
**Catholic Health** St. Catherine of Siena Hospital  
**ALBANY MED**

**United Healthcare**  
**aetna**  
**Braven HEALTH**  
**Horizon HEALTH**  
**Elevance Health**  
**healthfirst** Health Insurance for New Yorkers  
**LA Care HEALTH PLAN**  
**Cigna**  
**Clover Health**  
**Empire HealthPlus**  
**HealthCare Partners, IPA**  
**Summit Health**

## WHERE WE STARTED



- Started with COVID testing at DHS homeless shelters
- COVID testing partner with 40 mobile units in 2020/2021
- Nation's first test-to-treat mobile program

## WHERE WE ARE TODAY



Multiple successful programs:

- Street Health Outreach & Wellness Program
- Migrant Mobile Health
- Systemwide medical transportation
- Clinical teams at DHS homeless shelters





**THE NATION'S FIRST  
MOBILE TEST-TO-TREAT PROGRAM**

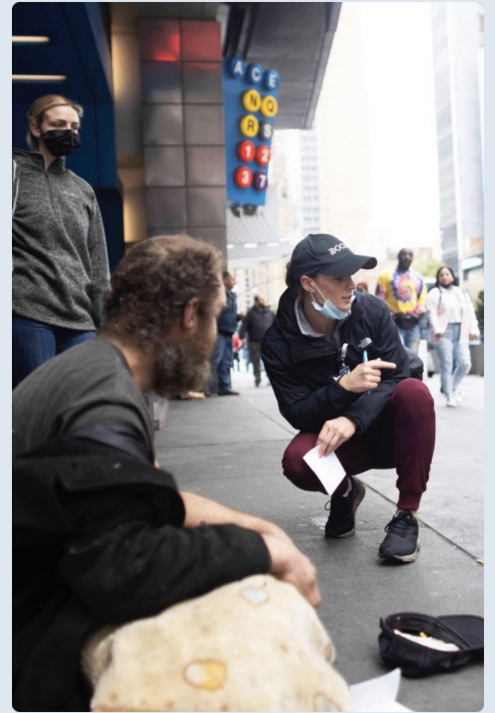




**STREET HEALTH OUTREACH & WELLNESS**

# BY THE NUMBERS

- More than 2 million New Yorkers tested and vaccinated
- 200,000+ patient interactions with Street Health Outreach & Wellness (SHOW) program
- 45,000+ patients transported by ambulance at acute care hospitals; 5 post-acute facilities
- 19,000 shelter residents served by DocGo since 2020
- Mobile health services for asylum seekers



## WHERE WE STARTED



Medical transportation partnership in May 2019

One medical facility in Pennsylvania with three ambulances

## WHERE WE ARE TODAY



- Expanded to 18 facilities in multiple states
- First centralized transport network with 35 ambulances staffed daily
- Dispatch center co-located with transfer center
- Post-discharge health risk assessment home visits
- Critical care transportation program (JeffSTAT)
- 68,000 patients transported each year





**PA-236 BLS**  
TRIP: #1658242  
On scene at 5:11 PM  
Completed: 1 trip in 1h 17m  
At Destination in 47 min

**Tyler Selak** (631) 871-3594  
**Melanie Atkins** (631) 871-3594

Map labels: Norristown, King of Prussia, IKEA, Conshohocken Station, Radnor, Wayne, Villanova, Ithian, Germantown, Einstein Medical Ctr Philadelphia, PA-216-34



Beth Duffy  
SVP, Administrative Services

**JEFFERSON HEALTH**

# BY THE NUMBERS

- 18 hospitals in Pennsylvania & New Jersey
- 3,902 licensed hospital beds
- 50+ outpatient and urgent care locations with 5.6 million outpatient visits
- 581,473 annual emergency room visits
- 4,615 physicians; 9,300 nurses



Source: Jefferson Health, "We are Jefferson.", January 2023

# VALUE-BASED CONTRACTS & MANAGED CARE →

**48%**

Medicare  
Advantage

**71%**

Medicaid  
Managed Care

**87 MILLION**

Americans with  
Medicare/Medicaid  
enrolled in managed care  
plans

Americans enrolled in managed care plans

Source: Kaiser Family Foundation, Medicaid MCO Enrollment (2020 data) & Kaiser Family Foundation, "Half of All Eligible Medicare Beneficiaries Are Now Enrolled in Private Medicare Advantage Plans", (2023 data)

 *HealthCare Partners, IPA*

- One of the largest physician-owned and -led IPA in the Northeast
- More than 175,000 members enrolled in commercial Medicare and Medicaid products
- More than 8,000 primary care and specialist physicians

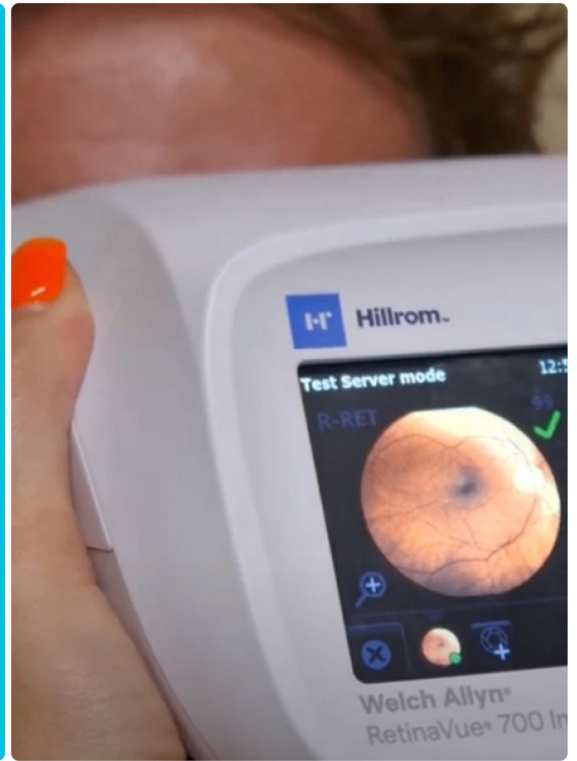


Source: [www.healthcarepartnersny.com](http://www.healthcarepartnersny.com)



# 15%

## OF DIABETIC RETINOPATHY SCREENINGS RESULTED IN ABNORMAL FINDINGS



Source: DocGo program patient data

# 20 MILLION

covered lives with potential access to DocGo programs



Source: Published available membership data combined from contracted health plans.

**3.2 MILLION**

covered lives



**EmblemHealth<sup>®</sup>**

**3.5 MILLION**

covered lives

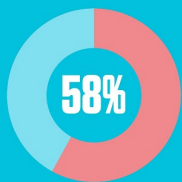


**of Tennessee**

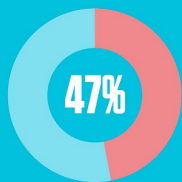
Source: Published available membership data combined from contracted health plans.

# CHRONIC CONDITIONS

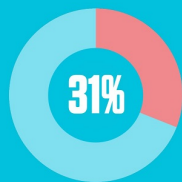
most common chronic conditions for 65+ (medicare)



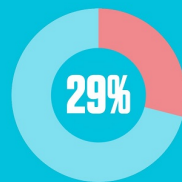
**HYPERTENSION**



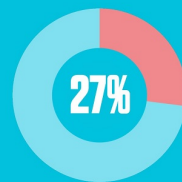
**HIGH CHOLESTEROL**



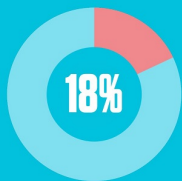
**ARTHRISIS**



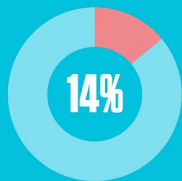
**ISCHEMIC/CORONARY  
HEART DISEASE**



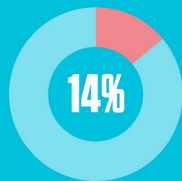
**DIABETES**



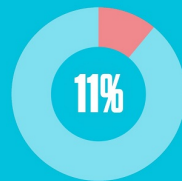
**CHRONIC KIDNEY  
DISEASE**



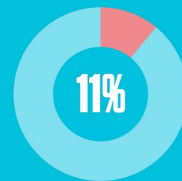
**HEART FAILURE**



**DEPRESSION**



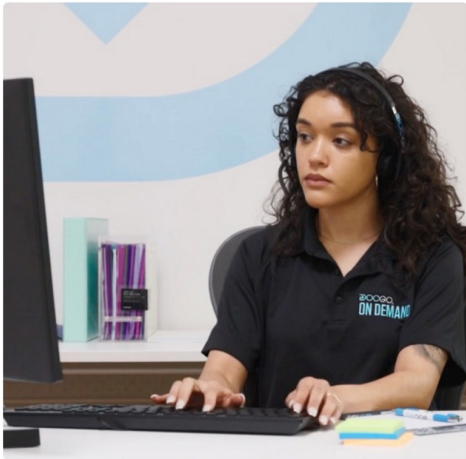
**ALZHEIMER'S DISEASE  
AND DEMENDIA**



**CHRONIC OBSTRUCTIVE  
PULMONARY DISEASE**

Source: Centers for Disease Control and Prevention, Chronic Disease Prevention and Health Promotion, Chronic Disease Overview, 2017.

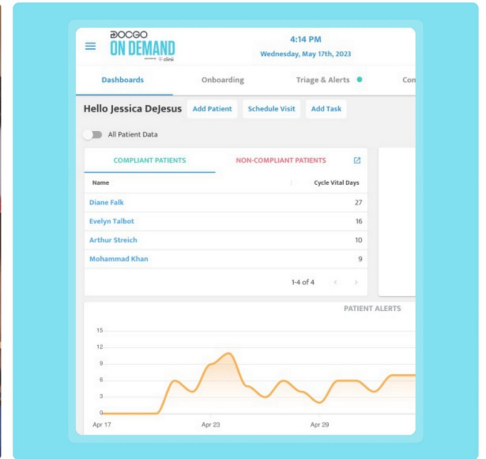
# VIRTUAL EXTENSION OF THE CARE TEAM



Patient Engagement Specialists  
Lead Outreach



In-Home RPM Set Up &  
Mobile Urgent Care



Patient Care Specialists  
Review Daily Metrics

# INDUSTRY-LEADING MONITORING COMPLIANCE PERCENTAGE

**54%**

National compliance average

**94%**

DocGo compliance average

Source: JACC: Clinical Electrophysiology, Volume 7, Issue 2, February 2021, Pages 235-237, Sei Iwai, Daniel Frenkel, Jason T. Jacobson

Source: DocGo management estimates, 2023

# SPECIALIST PHYSICIAN GROUPS

Target specialists that treat patients with chronic conditions & comorbidities:

- Nephrologists (Kidney failure)
- Cardiologists (Heart failure)
- Endocrinologists
- Pulmonologists



**FRESENIUS  
MEDICAL CARE**

# \$14,000

Potential per-patient, per-month cost savings  
by preventing/delaying dialysis

Source: League RJ, Ellason P, McDevitt RC, Roberts JW, Wong H. Assessment of Spending for Patients Initiating Dialysis Care. *JAMA Netw Open.* 2022;5(10):e2239131. doi:10.1001/jamanetworkopen.2022.39131

## ESTIMATED VIRTUAL CARE MANAGEMENT ANNUAL VALUE

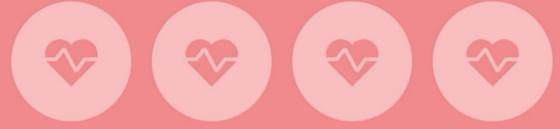
Revenue Value Per Patient	\$2,700
Contribution Value (Gross Profit)	\$1,269

Assumes 12 months of services and no discounting of cash flow



Cardiac patients currently monitored

# 40,000



Staff Certified by:

**IBHRE**

INTERNATIONAL  
BOARD OF HEART  
RHYTHM EXAMINERS



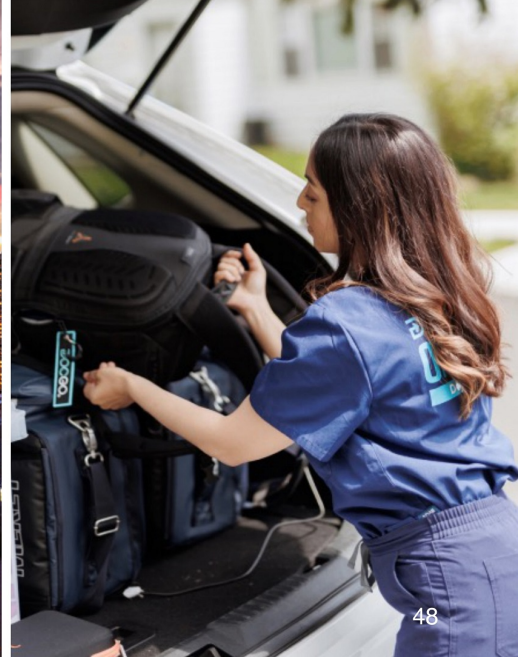
**GOVERNMENT/  
PUBLIC** →



**HEALTH CARE  
SYSTEMS** →



**HEALTH PLANS/  
PROVIDERS** →



# ACCELERATED GROWTH AREAS

**ORGANIC GROWTH WITH  
EXISTING PARTNERS &  
MARKETS**

**NEW CONTRACTS &  
MARKET EXPANSIONS**

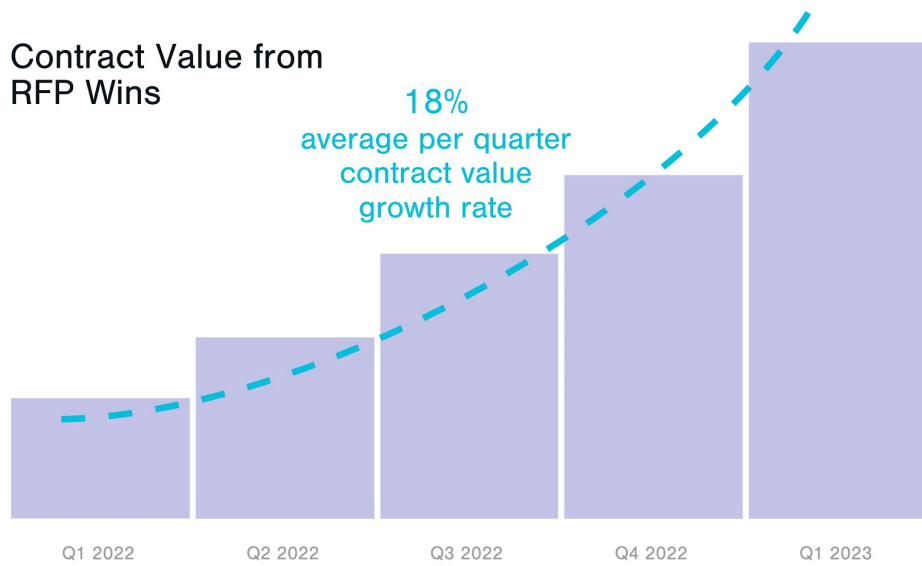
**VALUE-BASED  
PARTNERSHIP &  
MANAGED CARE**

**WE EXPECT EVERY  
DocGo MARKET TO  
GROW IN 2023**

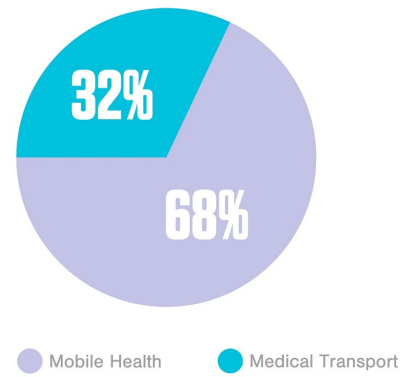


# NEW CONTRACTS & MARKET EXPANSIONS

Contract Value from RFP Wins



2022-2023 Proposal Wins Contract Value



# VALUE-BASED & MANAGED CARE CONTRACTS

Additional open deals in the sales pipeline with health plans & at-risk provider groups

**19**

Patients that DocGo anticipates it can provide medical care to over the next 6-12 months

**250,000**

# TARGETING \$1 BILLION RUN-RATE BY THE END OF 2025

**ORGANIC GROWTH WITH  
EXISTING PARTNERS &  
MARKETS**

**NEW CONTRACTS &  
MARKET EXPANSIONS**

**VALUE-BASED  
PARTNERSHIP &  
MANAGED CARE**



Chief Product Officer

# AARON SEVERS





# CARE DELIVERY

Care that moves to you

# ROBUST TECHNOLOGY

Built specifically for mobile health care



# COST-EFFECTIVE CLINICAL STAFF

Trained in a range of mobile health & virtual care

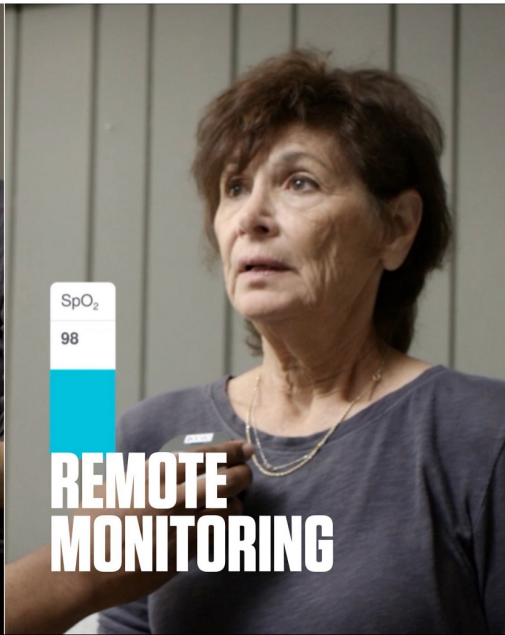
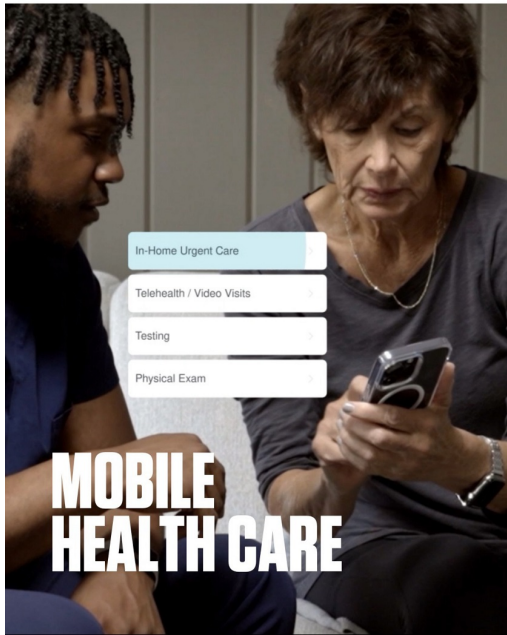


# HIGH QUALITY HEALTH CARE

When & where it's needed, at costs that work



# DocGo PRODUCTS



# DocGo CUSTOMER SEGMENTS

FOR  
**HEALTH  
SYSTEMS**

FOR  
**GOVERNMENTS  
& HEALTH PLANS**

FOR  
**PHYSICIAN  
PRACTICES**

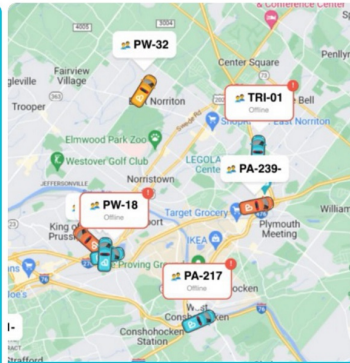


DocGo MOBILE HEALTH PLATFORM



FOR  
**HEALTH  
SYSTEMS**

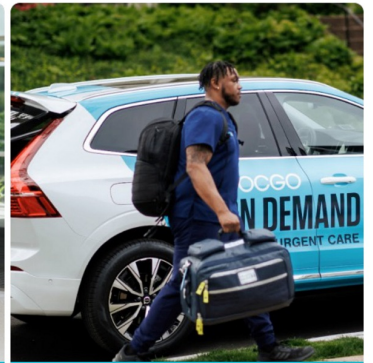
- Transportation management
- Post-Discharge Transitional Care



**ONE DIGITAL PLATFORM TO  
MANAGE ALL PATIENT  
TRANSPORTATION**



**IMPROVED BED FLOW**



**REDUCED READMISSIONS**



DocGo MOBILE HEALTH PLATFORM





You Have a New Trip

NO UPCOMING TRIPS SCHEDULED

UNIT  
700

 YefimNYD BezmanNY (718) 440-6429 Station New York WAV Station	 Tyler Selak (123) 456-7890 Station New York
---	---

BLS / ALS / CCT  
Bariatric, Infusion Pump(up to 3 channel), Cardiac Monitor

The map shows a route starting from a red location pin in Manhattan (54 min) and ending at a blue location pin in the Upper East Side (5 min). The route is highlighted in blue. The map includes labels for various Manhattan neighborhoods like Chelsea, Midtown West, and the Upper East Side.

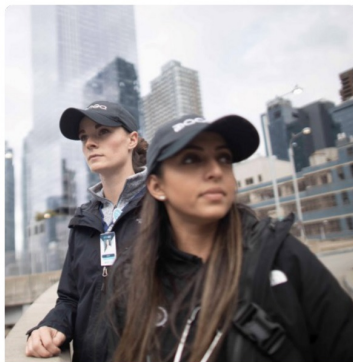
# DocGo CUSTOMER SEGMENTS

## FOR GOVERNMENTS & HEALTH PLANS

- ED Avoidance
- Population Health Management
- Quality improvement Programs



REDUCED COSTLY ED VISITS & HOSPITAL ADMISSIONS



PROGRAMS THAT WORK FOR UNDERSERVED POPULATIONS



IMPROVED HEDIS MEASURES & CMS STAR RATINGS



DocGo MOBILE HEALTH PLATFORM

# \$10,000,000,000

2022 Medicare Advantage Bonus Program Spending

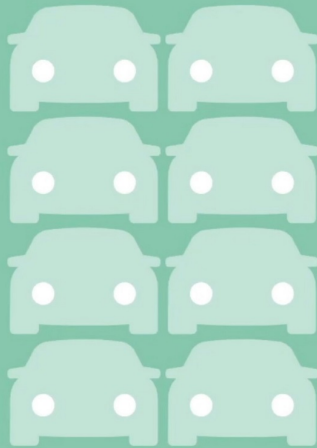
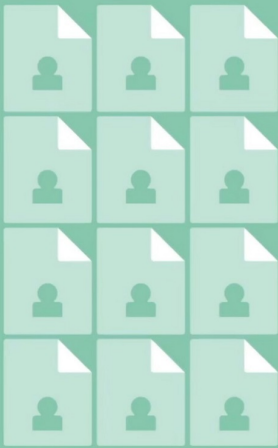
## 41 STATES

Used Capitated Managed Care Models for Medicaid Services in 2022

Source: Jeannie Fuglesten Biniek, Meredith Freed, Anthony Damico, and Tricia Neuman. Spending on Medicare Advantage Quality Bonus Program Payment Reached \$10 Billion in 2022, Kaiser Family Foundation. August 22, 2022

Source: Elizabeth Hinton, Jada Raphael. 10 Things to Know About Medicaid Managed Care. Kaiser Family Foundation. March 1, 2023





**HEALTH PLAN PROVIDES PATIENT LIST & DATA**



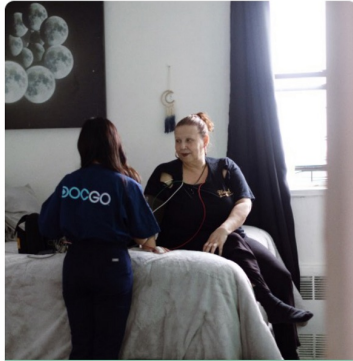
**DocGo SCHEDULES HOME VISIT TO IDENTIFY & CLOSE CARE GAPS**



**DocGo REPORTS HEALTH METRICS TO HEALTH PLAN & PCP FOR QUALITY RATINGS / HEDIS MEASURES**

FOR  
**PHYSICIAN  
PRACTICES**

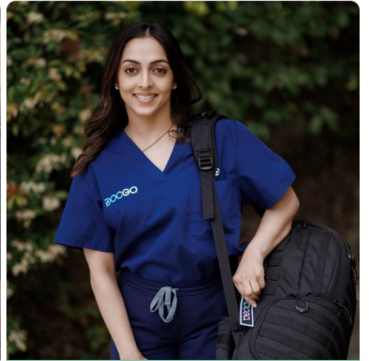
- Remote Patient Monitoring
- Chronic Disease Management



**TURNKEY APPROACH TO BETTER  
MANAGED PATIENTS**



**DATA-DRIVEN TREATMENT  
RECOMMENDATIONS**



**AFTER-HOURS CARE THAT EXTENDS  
THEIR PRACTICE**



**DocGo MOBILE HEALTH PLATFORM**



**BOGO ON DEMAND** 4:14 PM  
Wednesday, May 17th, 2023 User: Jessica DeJesus

Dashboards Onboarding Triage & Alerts Compliance Manage Surveys

Hello Jessica DeJesus Add Patient Schedule Visit Add Task Account: DocGo Practice: DocGo Adherence Report

All Patient Data

COMPLIANT PATIENTS		NON-COMPLIANT PATIENTS	
Name	Cycle Vital Days	Name	Cycle Vital Days
Steve Brown	27		
Gloria Jimenez	16		
Susan Thomas	10		
Anna Zimmerman	9		

1-4 of 4

**TODAY'S COMPLIANCE RATIO**

Total Enrolled RPM Patients: 8

**PATIENT ALERTS**

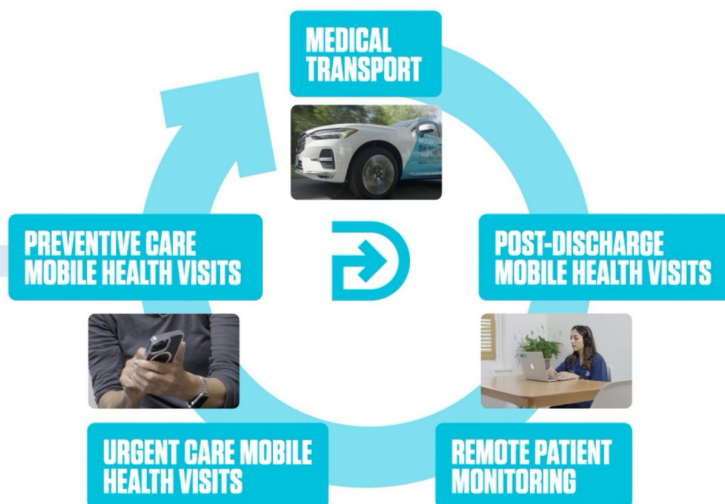
\*Data is for illustrative purposes only.

# DocGo PROACTIVE CARE CONTINUUM



## SOURCES OF PATIENTS

- Health Systems
- Govt & Health Plans
- Physician Practices
- Employers



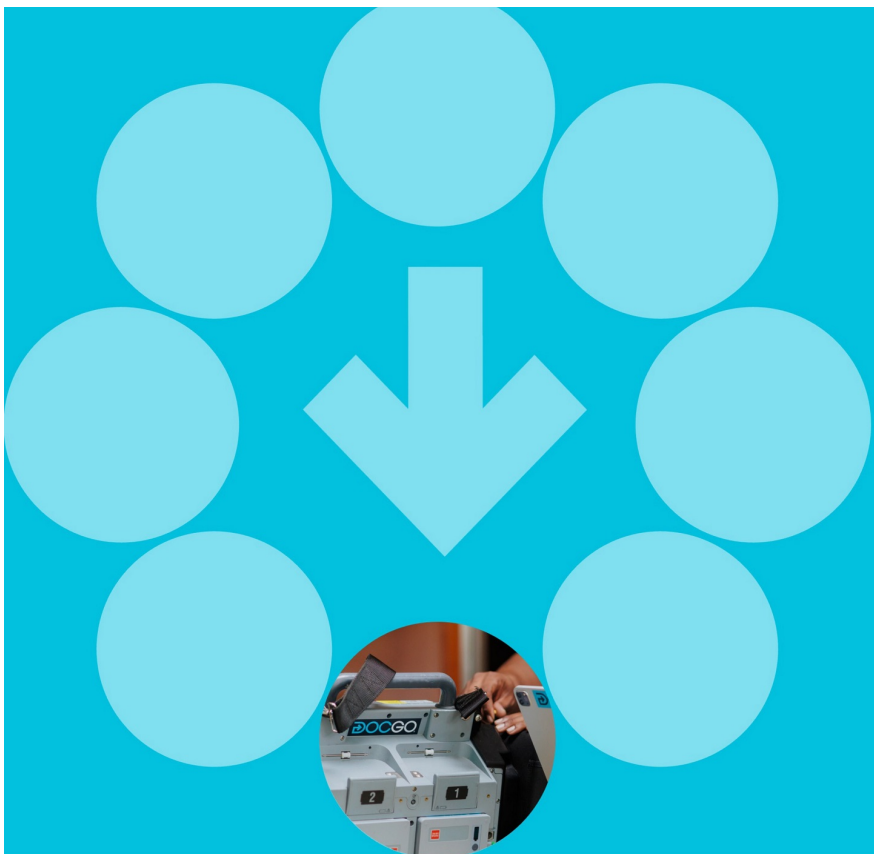
- Dedicated Leased Unit
- PMPM
- Enhanced Fee For Service
- Share in Cost Savings

**PERFORMANCE BASED PRICING WITH DOWNSIDE PROTECTION**



CEO, Clinical Practice Group

# DR. JAMES POWELL



# CLINICAL EXCELLENCE

Bridging the gap in care

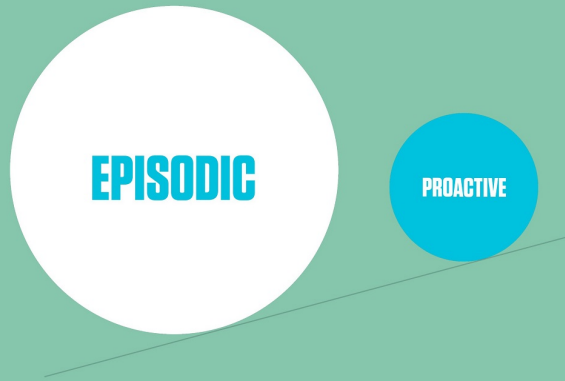
# OUR GOAL IS TO ADDRESS THE ENTIRE CARE ECOSYSTEM

## Urgent Care

Immediate medical service for the treatment of acute and chronic illness and injury

## Episodic Care

Care management for a particular “episode” of care that has a foreseeable “endpoint”



## Chronic Care

Medical care which addresses pre-existing or long-term illness

## Preventative Care

Routine health care that includes screenings, check-ups, and patient counseling to prevent illnesses, disease, or other health problems



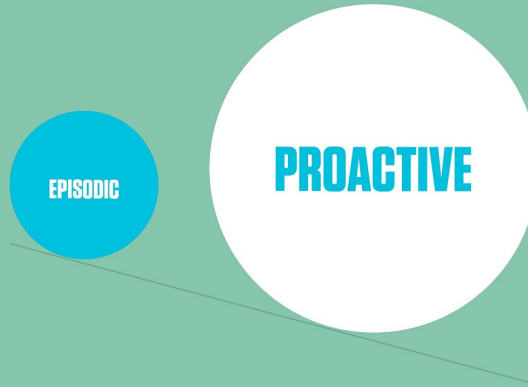
# BALANCE SHIFT TO PROACTIVE, VALUE-DRIVEN CARE

## Urgent Care

Immediate medical service for the treatment of acute and chronic illness and injury

## Episodic Care

Care management for a particular “episode” of care that has a foreseeable “endpoint”



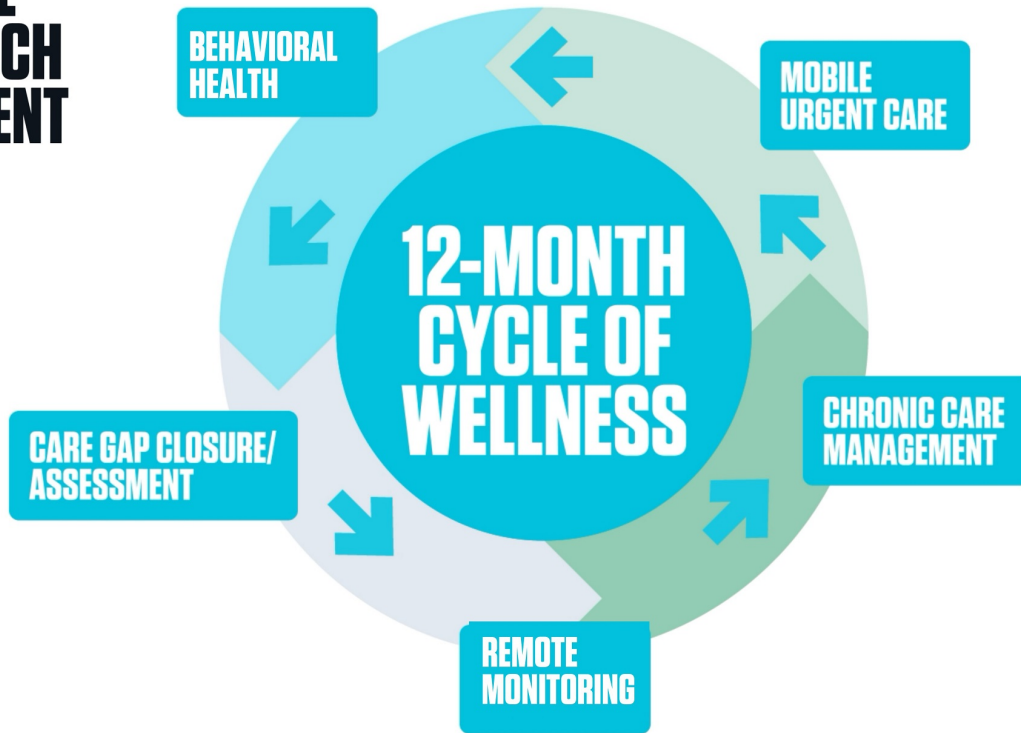
## Chronic Care

Medical care which addresses pre-existing or long-term illness

## Preventative Care

Routine health care that includes screenings, check-ups, and patient counseling to prevent illnesses, disease, or other health problems

# CLINICAL APPROACH TO PATIENT HEALTH



**PATIENT**

**CAREGIVER**

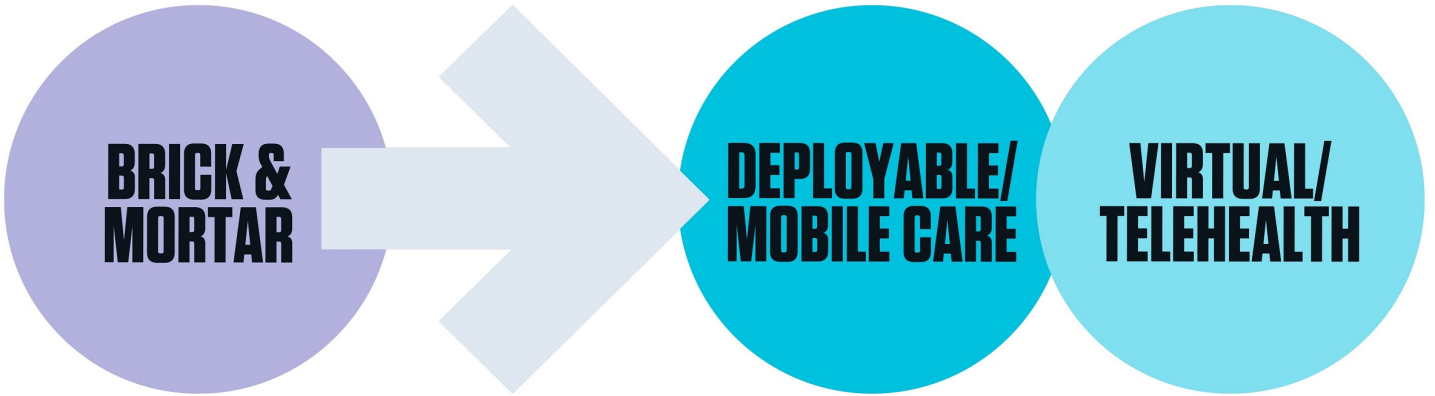
**DocGo BRIDGES THE  
COMMUNICATIONS GAP BETWEEN  
PATIENT, CAREGIVER & PROVIDER**

**PROVIDER**

**17,800-48,000**

Primary care physicians  
shortage anticipated by 2034

Source: The Complexities of Physician Supply and Demand: Projections from 2019-2034, AAMC (Association of American Medical Colleges), June 2021



**BRICK & MORTAR**

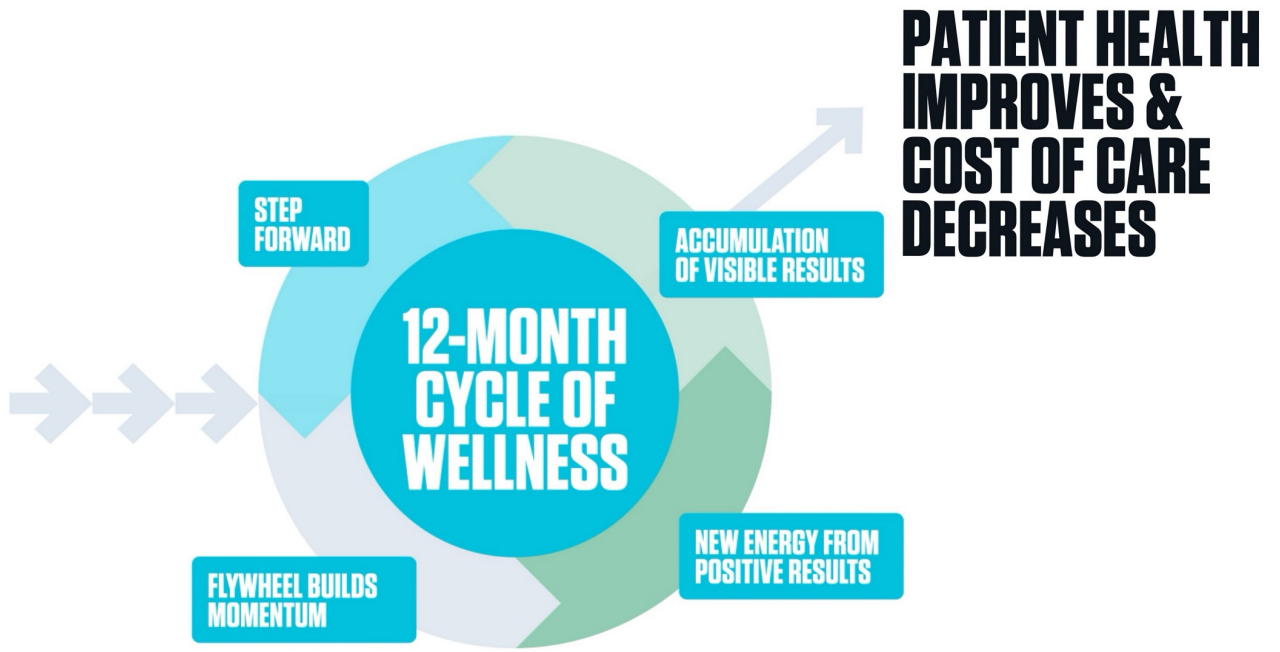
**DEPLOYABLE/  
MOBILE CARE**

**VIRTUAL/  
TELEHEALTH**

- Hospital stays
- Emergency department visits
- Physician office visit
- Urgent care visits

- Home Visits for urgent care & primary care
- Deployable equipment setup

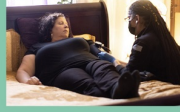
- Customer engagement: texts, phone, email, video
- Virtual reality & artificial intelligence
- Patient monitoring: CCM, RPM, RTM, Hospital-at-Home, etc.





## PATIENT ENGAGEMENT

Patient target list delivered by LA Care/hospital.



## HOME VISITS

In-home health risk assessment & three follow-up visits



## PROGRAM RESULTS

DocGo's LA County programs show readmission reduction of 30-50%



# \$200 MILLION

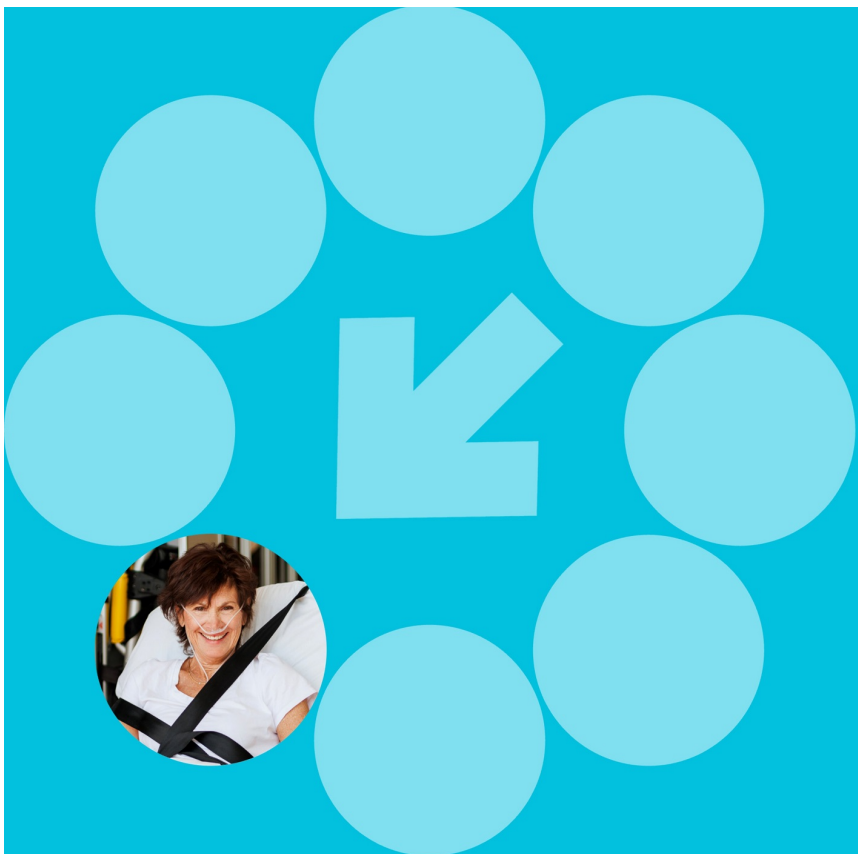
total cost savings from DocGo's  
ED avoidance programs

Source: Number of DocGo mobile health interactions multiplied by the likelihood of ED visit diversions based on the program's clinical care profile. The number of ED visits diverted multiplied by the average cost of an ED visit based on accumulated CMS data from accountable care organizations.



Chief Technology Officer

# HAWK NEWTON



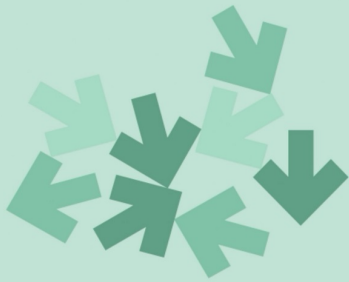
# TECHNOLOGY

Proprietary technology engine



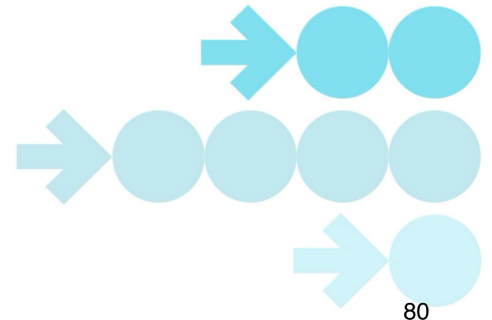
# MOST HEALTH CARE SOFTWARE

- Outdated architectures including client/server & on-premise deployment
- Manual QA & deployment processes
- Annual or quarterly software releases
- Poor user experience



# DocGo's DIFFERENTIATED PLATFORM

- Modern cloud-based architecture
- Fully automated deployments 5-10 times per day
- AI-powered, driven by user behavior
- Weekly (or more) production releases
- Modern web and mobile apps





# PROPRIETARY SOFTWARE

## DARA

Mobile Health & Medical Transport  
Fleet Management Platform

## DOCGO DRIVER APP (IOS)

Automated scheduling &  
routing for DocGo's  
thousands of field clinicians

## DOCGO ON-DEMAND (IOS & ANDROID)

Patient mobile app to connect  
with care teams, mobile health,  
and telehealth

**ELECTRONIC HEALTH RECORDS (EHR)**

Mobile Health and Medical Transport

**CONNECTED VEHICLES**

Telematics powers safety, security & data

**CONNECTED MEDICAL DEVICES**

Remote Diagnostics/Remote Patient Monitoring

# BUILT FOR INTEGRATION



**DARA**

Mobile Health & Medical Transport  
Fleet Management Platform

**ELECTRONIC HEALTH RECORDS (EHR)**

Mobile Health and Medical  
Transport

**DocGo DRIVER APP (IOS)**

Automated scheduling &  
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**CONNECTED VEHICLES**

Telematics powers safety,  
security & data

**DocGo ON-DEMAND (IOS & ANDROID)**

Patient mobile app to connect  
with care teams, mobile health,  
and telehealth

**CONNECTED MEDICAL DEVICES**

Remote Diagnostics/ Remote  
Patient Monitoring



EMR | Calendar | Patients | Claims | Financials | Reports | Quality | Apps | Support

Steven BROWN  
31yo M | 10-31-1991 | #20637 | ER20637

Registration | Messaging | DocGo | Billing | Clinicals | Communicator | Other

Request | Map | Trips | Standing Orders | Schedules | Admin

Medical Transport | **Mobile Health Service**

Requesting Agency\*  
DocGo On Demand

Requester First Name\* Requester Last Name\* Requester Phone Number Extension  
Hawk Newton (718) 440-6429

Requested Service\*  
Select Medical Service

Service Location\*  
DocGo Headquarters  Residence or Scene  
Department Pickup Room # Est. Time on Scene  
20m

Will Call

Date Time  
4/29/2023 15:45 PDT

SAVE & GET ETA

Attachments

- Steven Brown 10/31/1991 (212) 768-3465, 35 West 35th St, ...
- Empire BlueCross BlueShield Health Plus
- Post Angioplasty Check Up

\*Data is for illustrative purposes only.

Call us anytime at (877) 311-5555

Request Map Trips Standing Orders Schedules Admin

Search by Employee Name, Zone, Unit#

Date: Apr 29, 2023

Status: Show All

Service Type: Show All

Station: All Stations

Leased Shifts: Show All

Displayed by: All Trips

Trip Data: Trip Numbers

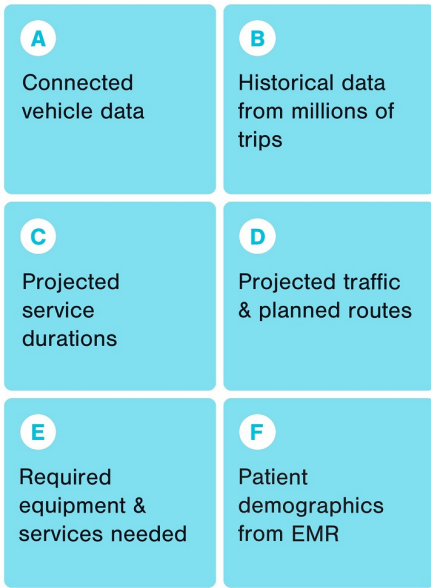
Sort by: Shift Start: Earlier to later

Dry Runs:

Status	Shift Info	Unit	Service Types	Equipment	Trips	23:00	00:00	01:00	02:00	03:00	04:00	05:00	06:00	07:00	08:00	09:00
	PA-052-11000WC-1 Ruby Tucci   Clifford Nicolosi	PA-239	BLS		1/1/1											
To Pickup	PA-52-13008B-1 Clara Allen   Acadia Ferguson	PA-227	ALS		1/0/0											
Not en route	PA-62-180012A-1 Olivia Pazzani   Hanley Middleton	NJ-6348	BLS		4/1/0											
At Dest.	PA-62-180012B-1 Viola Singh   Nathaniel Bishop	NJ-109	BLS, ALS, CCT	Cardiac Monitor, Ventilator, CPap	4/0/1											
On Scene	PA-62-170012B-1 Ophelia Miceli   Elnora Harding	PA-106	BLS	Bariatric	1/1/1											
To Pickup	DOV ALS 1900-0700 Vincent Mazoni   Elizabeth van Loon	PA-238	Livery, ALS		3/1/1											
At Dest.	JEFF20 NIGHT Mollie Houston   Charlotte Gallo	PA-230	BLS	Bariatric, Cardiac Monitor, Ventilator	2/1/0											
On Scene	NJ-VOR-190012A-1 Jim Sparks   Mira Christensen	PA-226	WAV		3/0/1											
Patient Contact	PA-052-10000WC-1 Multiload Juan Pineda   Pater Mendez	PA-214	Livery, ALS, CCT WAV, NICU BLS...		1/0/0											
To Dest	PA-62-WHEELCHAIRS-1 Multiload Ariane Mendoza   Mildred Lungui	PW-042	BLS, ALS, CCT, NICU BLS	Cardiac Monitor, Ventilator, CPap	2/1/0											
On Scene	PA-62-180012A-1 Claudia Faber   Manuel Stephens	MLH-03	WAV		3/1/0											
To Dest.	PA-62-180012B-1 Mariane Richards   Edda Daniel	PA-230	BLS		3/1/1											
Patient Contact	PA-62-170012B-1 Evan Giles   Amanda Zimmerman	NJ-108	BLS	Bariatric	2/1/0											
At Dest.	DOV ALS 1900-0700 Gene Wheeler   Alex Blom	MA 70	BLS, ALS, CCT		3/0/1											
To Dest.	JEFF20 NIGHT Herbert Evans   Angel Johnston	Jeff20	BLS		1/0/0											
To Pickup	NJ-VOR-190012A-1 Celia Murray   Shannon Hanson	PW-32	ALS		2/0/0											

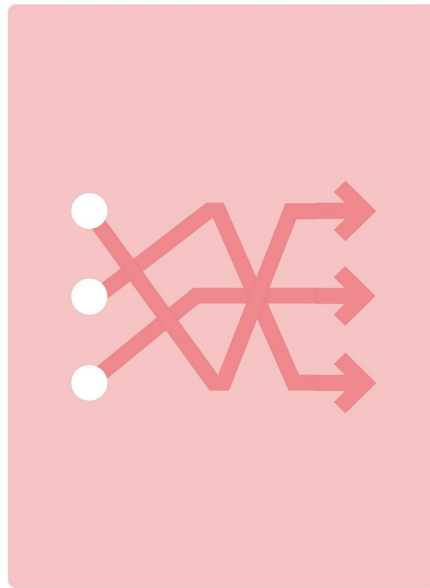
\*Data is for illustrative purposes only.

**PROMPT: "PROVIDE REAL-TIME ETA"**

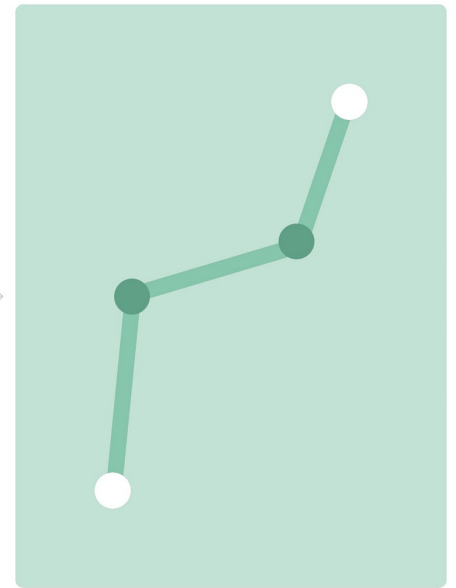


**POSITIONS UNIT LOCATIONS NEAR SERVICE ADDRESS.**

**AUTO-SELECTS MOST EFFICIENT UNIT TO ASSIGN.**



**ARRIVAL AT 3 P.M.**



EMR Steven BROWN  
 31yo M 10-31-1991 #20637 ER20637

Registration Messaging DocGo Billing Clinicals Communicator Other

Request Map Trips Standing Orders Schedules Admin

Trip #1131434 No Unit Assigned

**Trip Needs Assignment**

Medical Transport Mobile Health Service

DocGo On Demand

Hawk Newton (718) 440-6249

Mobile Health Encounter - TCM

35 West 35th Street New York, 10001, NY  
 DocGo Headquarters

Appointment Time: 04/28 16:00 EDT

Attachments

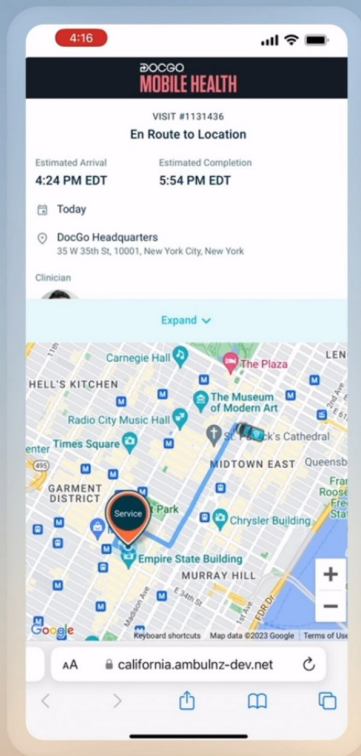
Patient

MIN	SSN	
20637	123-45-6780	
First Name *	MI	Last Name *
Steven		Brown
Date of Birth *	Patient Phone Number	
10/31/1991	(212) 766-3465	

Patient Address

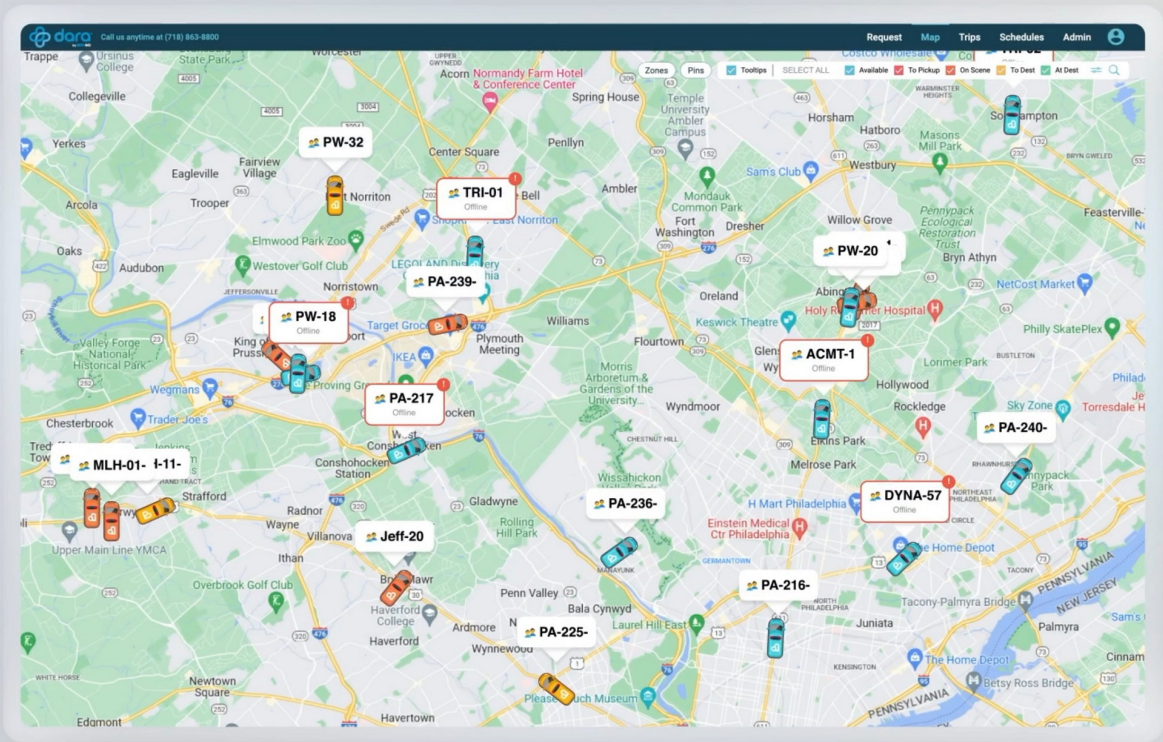
Address 1	Address 2	
35 West 35th St		
City	State	Zip
New York	NY	10001

\*Data is for illustrative purposes only.



\*Data is for illustrative purposes only.





\*Data is for illustrative purposes only.

Forward Collision Warning  
 Apr 25, 2023 3:46 PM CEST • Edit Labels

Driver: Unassigned Coach: Unassigned NEEDS REVIEW ... 30 of 86

0 mph  
 LIMIT 35

Was the AI detection correct?

3:46:34 PM CEST

Speed

☆ June 20, 2023, 3:46 PM CEST

FORWARD COLLISION WARNING X + ADD

Unassigned

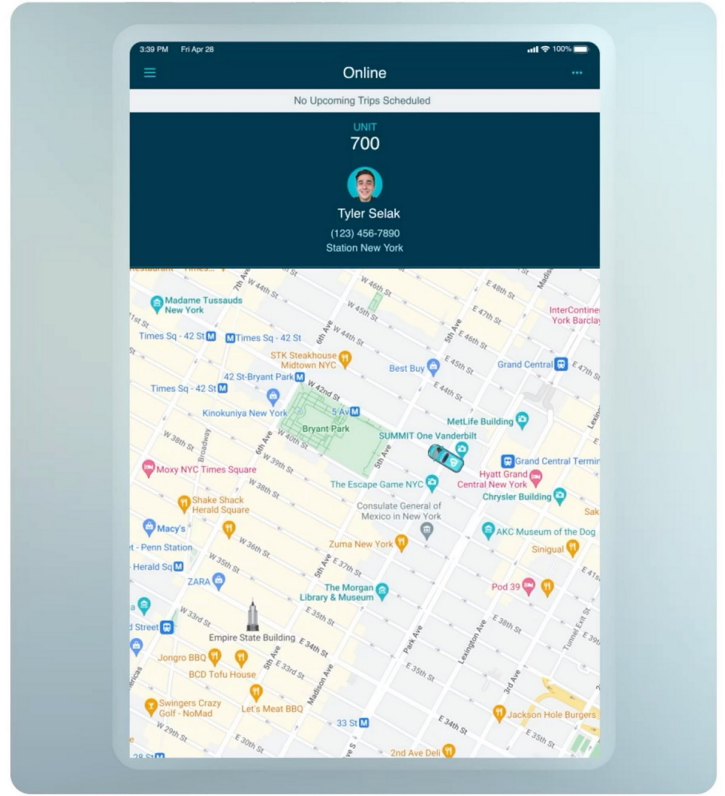
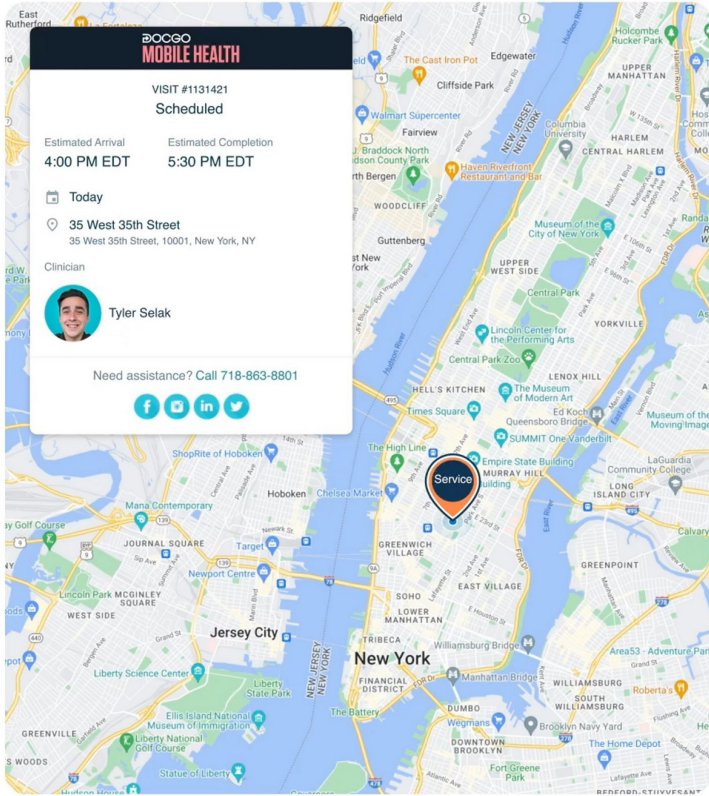
\*Data is for illustrative purposes only.



FROM: APR 14 TO: APR 15 SERVICE TYPES: Show All STATUS: NEEDS ASSIGNME... NEEDS DISPATCH... WILL CALL... SCHEDULED... SCHEDULE STATE: ACTIVE Search by MRN / Trip # / CAD # / F APPLY 52 Total 27 Completed 18 Active 6 Pending 1 Cancelled 0 Turndowns

Trip#	Promised Pickup In	Pickup Date	Pickup Time	Arrival Time	Status	Provider	Unit#	Service Type	Patient Requesting Agency	Pickup Location	Drop Off Location
1610323 / 1610324	30m	04/14	06:00 EDT 06:00 EDT		Scheduled		Assign WAV		Juan Pablo NYC Health + Ho...	NYC Health + Hospitals/Gouverneur SNF NURSING FACILITY - NF5, Room: 258B	120 Sterling St, Brooklyn, NY 11225 Room: #2
1610836	2h 15m	04/14	06:00 EDT 12:00 EDT		Active	ambulnz Ambulnz	UNIT_781	BLS	Benito Martinez Lincoln Medical ...	Lincoln Medical & Mental Health Center Room: B4	Regeis Care Ctr
1610657 / 1610658	2h 30m	04/14	07:45 EDT 11:31 EDT		Scheduled	ambulnz Ambulnz	A-150	PEDS ALS Vent	John Doe Bellevue Hospit...	465 Crown St, Brooklyn, NY 11225 Room: Apt 52	Bellevue Hospital Center Room: 2C
1610669 / 1610670	3h	04/14	08:00 EDT 08:00 EDT		Scheduled	MIDWOOD Midwood Ambulance	UNIT_241	BLS	Rick Danielson Kings County Ho...	97 Bay 19th St, Brooklyn, NY 11214 Room: 1L	Kings County Hospital Center Room: D BLDG 7th flr
1610496 / 1610497	3h 25m	04/14	08:30 EDT 08:30 EDT		Scheduled	ambulnz Ambulnz	UNIT_291	BLS	Jane Lewis Henry J Carter S...	Henry J Carter Specialty Hospital Center Nursing Facility - NF6, Room: 425A	5 East 98th Street, New York, NY, 10029 Room: ORTHOPEDICS 9TH FL
1606486 / 1606487	3h 10m	04/14	08:55 EDT 08:55 EDT		Scheduled	ambulnz Ambulnz	H-167	BLS	Nando Lorris NYC Health + Ho...	124 Noble St, Brooklyn, NY 11222 Room: Apt 1B	NYC Health + Hospitals/Gouverneur SNF Nursing Facility - NF6, Room: 746A
1604719 / 1604720	3h 44m	04/14	09:00 EDT 09:00 EDT		Scheduled	ambulnz Ambulnz	UNIT_144	BLS	Jesus Lopez South Brooklyn ...	South Brooklyn Health ME7ENS - Med (7E Main Bldg), Room: RM 16 BD 3	Kings County Hospital Center Room: BDG 6 BSMT
1604651 / 1604652	4h 6m	04/14	09:14 EDT 09:14 EDT		Scheduled	MIDWOOD Midwood Ambulance	UNIT_077	BLS	Patient Matthew South Brooklyn ...	Kings County Hospital Center Room: BDG 6 BSMT	South Brooklyn Health MSTENS - Med (Tower 3E), Room: RM 312 BD 1
1610899	4h 36m	04/14	09:36 EDT 11:00 EDT		Scheduled	Citywide Ambulance	UNIT_243	BLS	Steven Brown Elmhurst Hospit...	Elmhurst Hospital Center A7 - CCU, Room 8-1	26 Peppermill Rd, Roslyn, NY 11576 Room: Apt 7C
1610645	4h 51m	04/14	10:00 EDT 10:00 EDT		Scheduled	ambulnz Ambulnz	UNIT_248	BLS	Lucas Hamilton Jacobi Medical ...	Jacobi Medical Center 6A - Medicine, Room 13 Bed 2	Calvary Hospital Room: admitting
1610921	5h 6m	04/14	10:15 EDT 10:15 EDT		Scheduled	ambulnz Ambulnz	UNIT_781	BLS	Jane Doe Harlem Hospital...	Harlem Hospital Center Emergency Department, Room: 5A	979 Windermere Rd, Franklin Square, NY 11010 Room: 23B
1610629 / 1610630	5h 36m	04/14	10:30 EDT 10:30 EDT		Scheduled	ambulnz Ambulnz	UNIT_074	BLS	Juan Pabo Bellevue Hospit...	20 Waldorf Ave, Elmont, NY 11003	Bellevue Hospital Center
1610690	5h 51m	04/14	11:00 EDT 11:00 EDT		Needs Assig...	ambulnz Ambulnz	UNIT_075	BLS	Jane Lewis Queens Hospital...	Queens Hospital Center Emergency Department, Room: EEL05	Four Winds Hospital Room: ADMISSION BUILDING

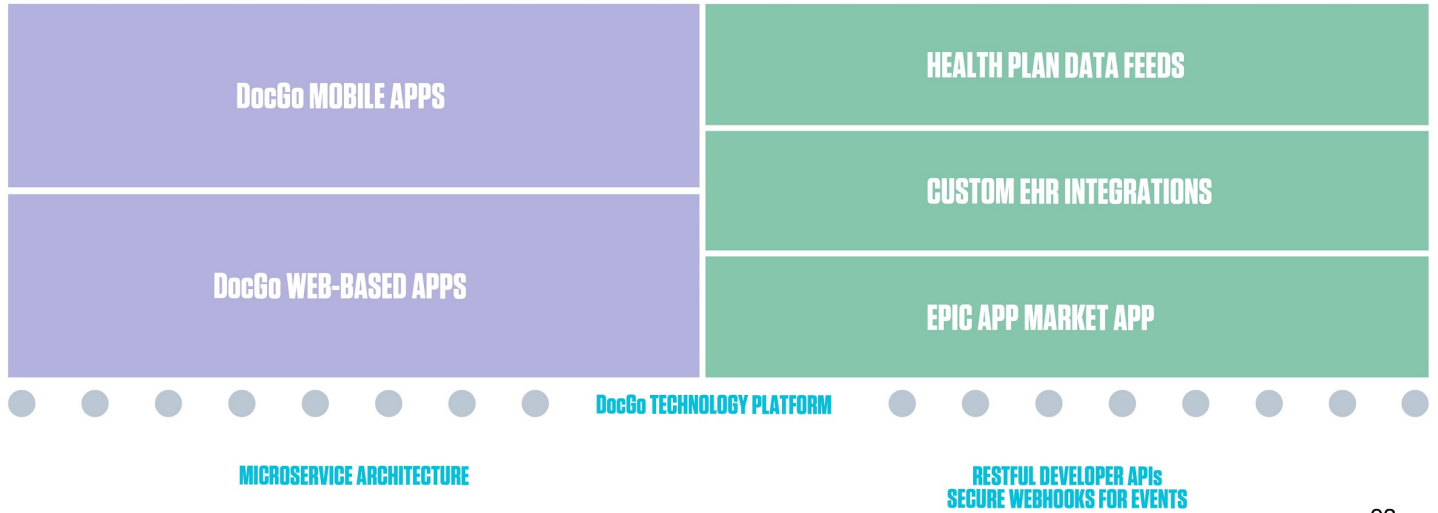
\*Data is for illustrative purposes only.

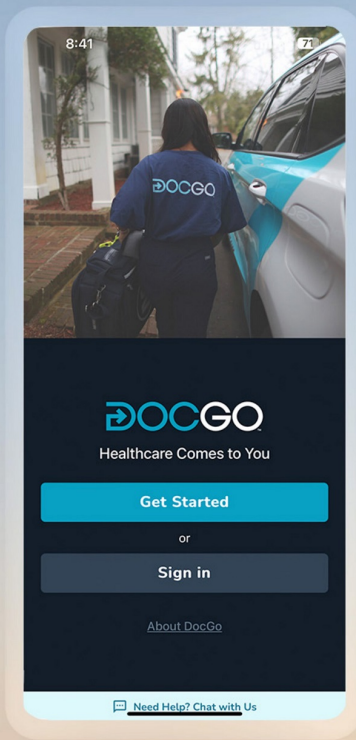


\*Data is for illustrative purposes only.

# DocGo CORE SOFTWARE

# PARTNER APPS & INTEGRATIONS





\*Data is for illustrative purposes only.



CFO

**NORM ROSENBERG**

95

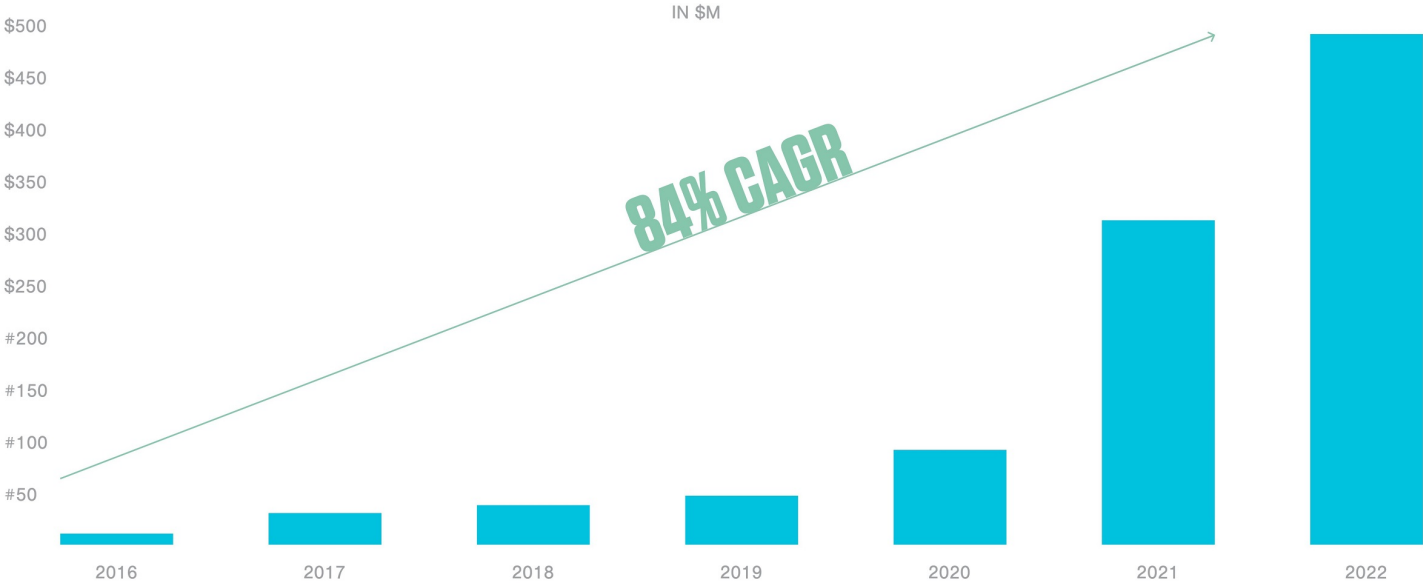
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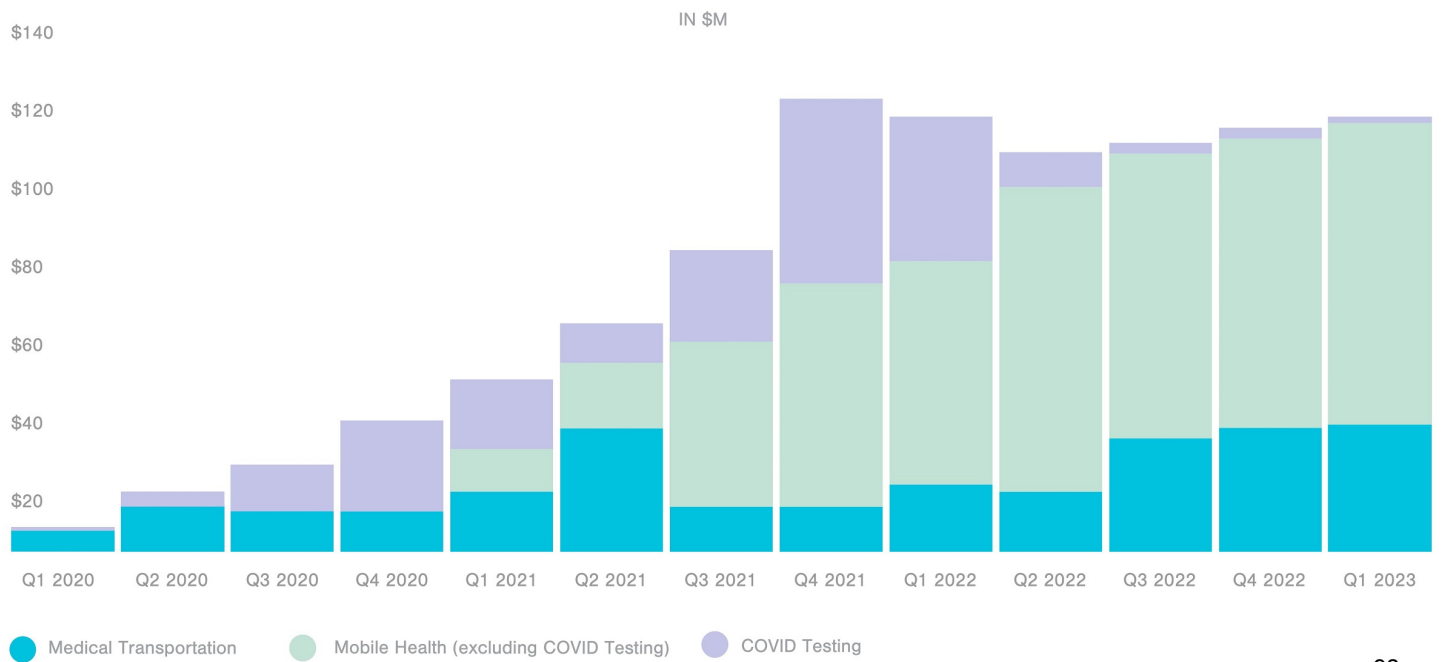
# GROWTH TRAJECTORY

Multi-year plan for growth

# ANNUAL REVENUES 2016-2022



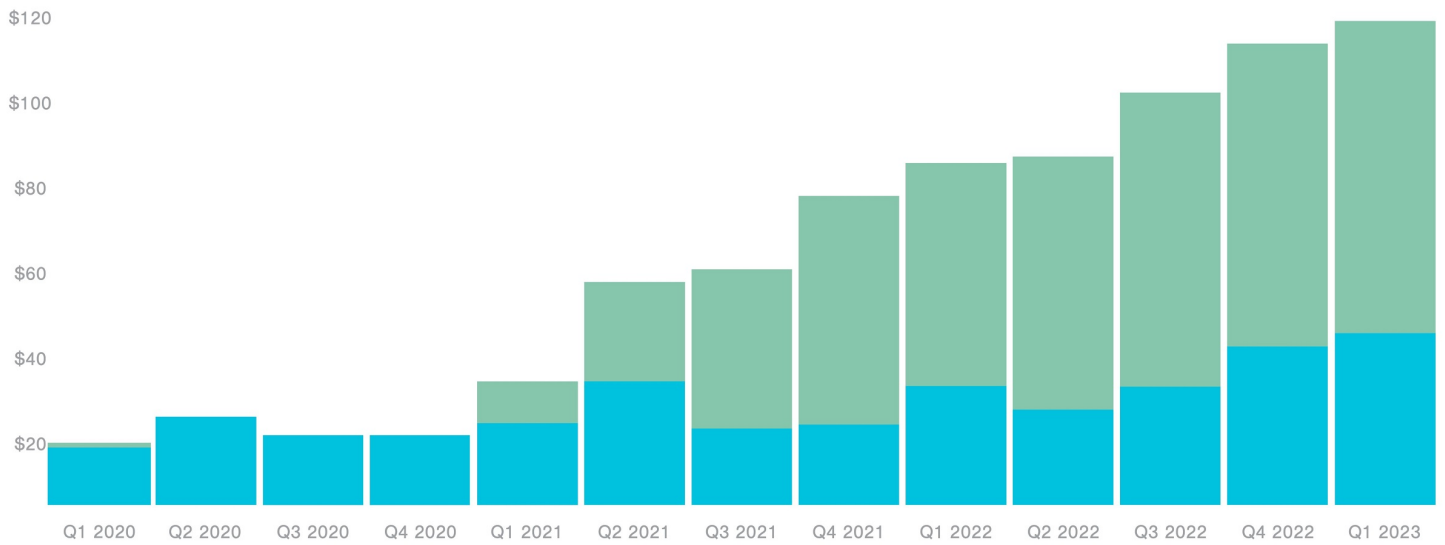
# QUARTERLY REVENUES 2020-2022





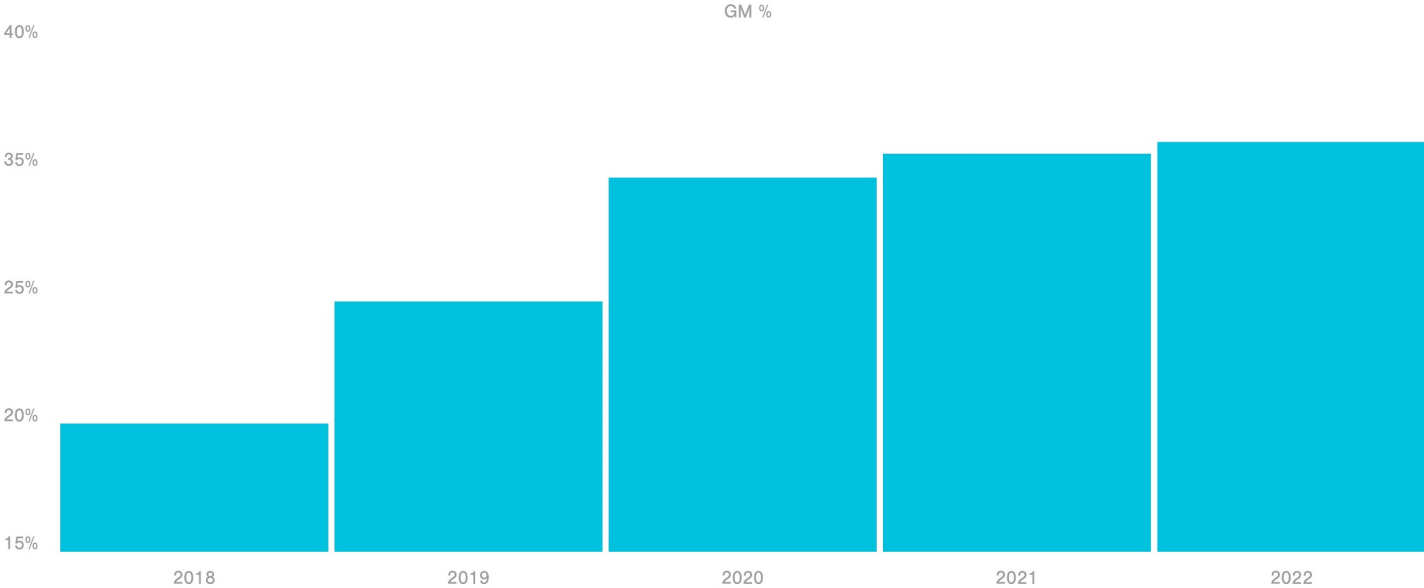
# QUARTERLY REVENUES 2020-2022, EX. COVID TESTING

IN \$M



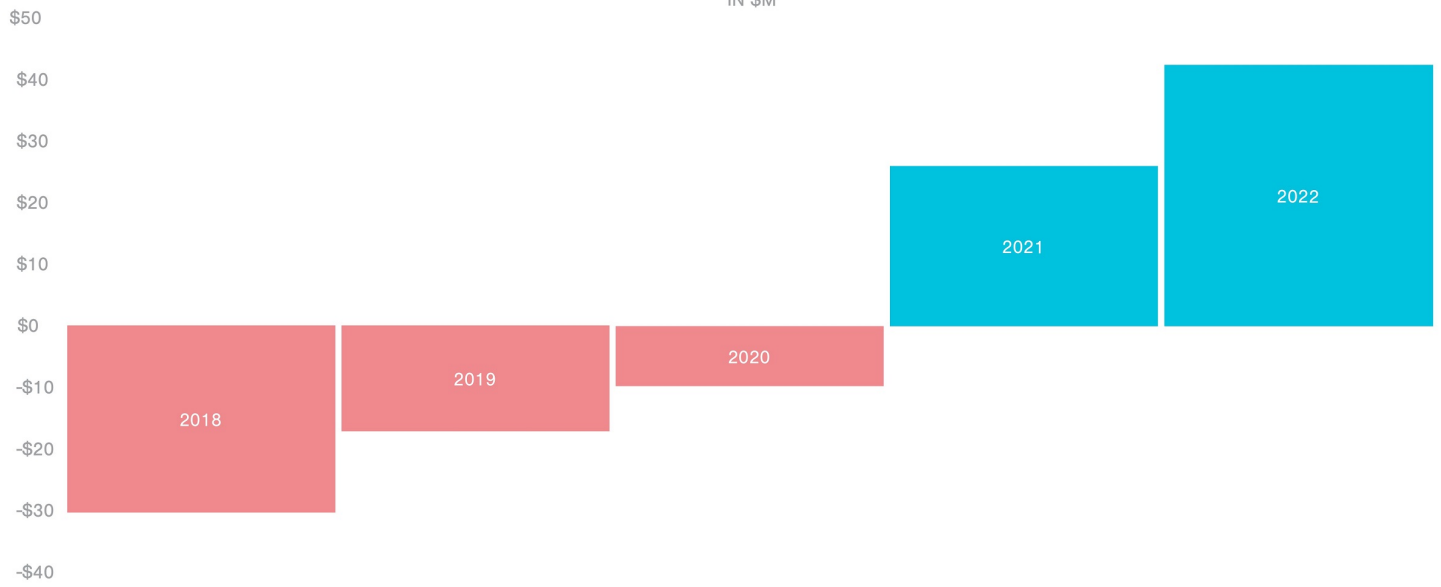
● Medical Transportation ● Mobile Health (excluding COVID testing)

# ANNUAL GROSS MARGINS 2018-2022



# ANNUAL ADJUSTED EBITDA 2018-2022

IN \$M



Adjusted EBITDA is a non-GAAP financial measure. A reconciliation between GAAP Net Income and Adjusted EBITDA for the periods referenced above is provided in the Appendix.

# BUILDING ON A STRONG FINANCIAL FOUNDATION

As of March 31, 2023

Cash & Equivalents (incl. restricted)	<b>\$127.5M</b>
Working Capital	<b>\$149.4M</b>
Notes Payable	<b>\$1.9M</b>
Credit Line, primary	<b>\$90.0M</b>
Credit Line accordion	<b>\$50.0M</b>

Current Ratio	<b>2.4</b>
Quick Ratio	<b>2.3</b>
Cash Ratio	<b>1.1</b>

# HOME VISIT UNIT ECONOMICS

LABOR COST	TRADITIONAL ECONOMICS	DCGO ECONOMICS Enabled by technology	ASSUMPTIONS	PER SITE PER DAY
On-Site APP	\$143		Hours per shift	10
LPN		\$43	# of visits per shift	7
Remote APP		\$25	# of consults per hour, DCGO APP	3
Total Labor Cost	\$143	\$76	Hourly rate, LPN	\$36
Vehicle Cost	\$25	\$25	Hourly rate, Remote APP	\$75
Total Gross Cost	\$168	\$101	Hourly rate, Onsite APP	\$100
Contract Price	\$200	\$200		
Effective Margin	16%	49%		

\*Traditional Economics\* refers to a service model that involves sending the APP or other practitioner into the patient's home. The costs in this column were arrived at by applying DCGO's assumed costs for this practitioner, and the assumptions above. \*DCGO Economics\* refers to the hybrid service model, which involves a lower-level clinician in the patient's home and an APP in a remote setting, applying DCGO's assumed costs and the assumptions above.

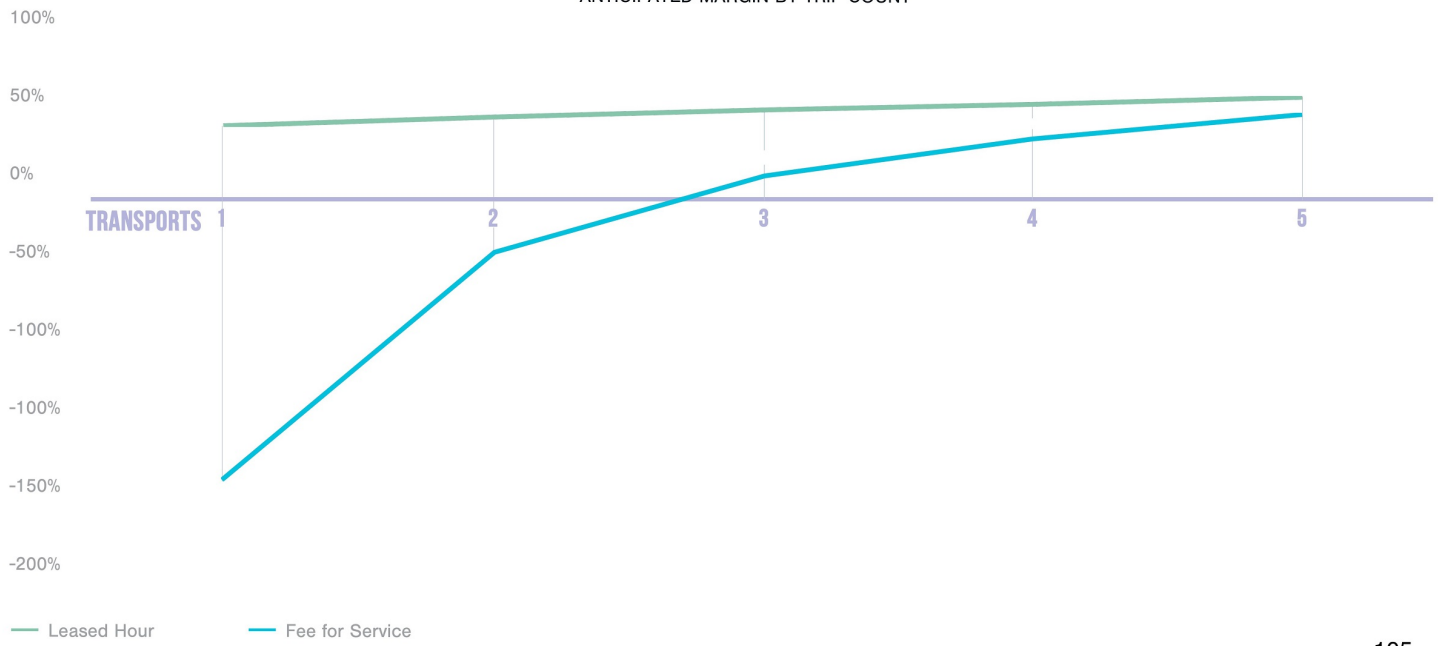
# MOBILE HEALTH UNIT ECONOMICS

LABOR COST	PROJECT LAUNCH ECONOMICS	TARGET PROJECT ECONOMICS	ASSUMPTIONS	PER SITE PER DAY
APP	\$6,750	\$4,750	Hours per shift	10
Admin	\$18,205	\$14,245	# of APP	5
Social Worker	\$1,905	\$1,545	# of Admin	55
Case Worker	\$7,680	\$5,120	# of Social Worker	3
RN	\$1,460	\$1,140	# of Case Worker	16
Supervisor	\$3,900	\$3,900	# of RN	2
Total Labor Cost	\$39,900	\$30,700	# of Supervisor	6
			% of Agency Staff (Launch)	90%
Supplies Cost	\$600	\$600	% of Agency Staff (Mature)	10%
Total Gross Cost	\$40,500	\$31,300		
Leased hour revenue	\$62,300	\$62,300		
Effective margin	35%	50%		

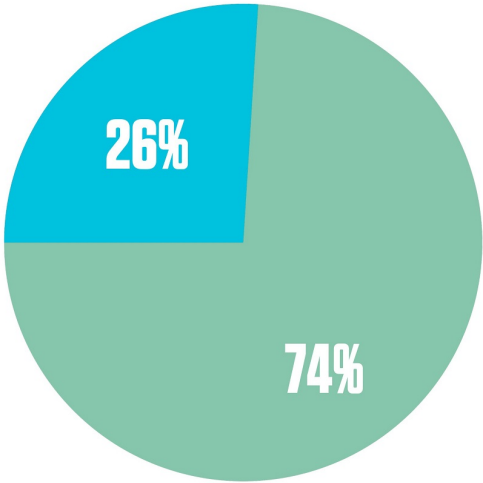
Footnote: Target Economics reflect when DocGo's mix of internal and external sources of labor more closely resembles the service model anticipated by the particular contract/customer, causing effective hourly labor rates and overtime to be more in line with the Company's cost expectations. DocGo assumes that the Target Economics phase is not reached until at least 90 days after a project launch.

# TRANSPORT UNIT ECONOMICS

ANTICIPATED MARGIN BY TRIP COUNT

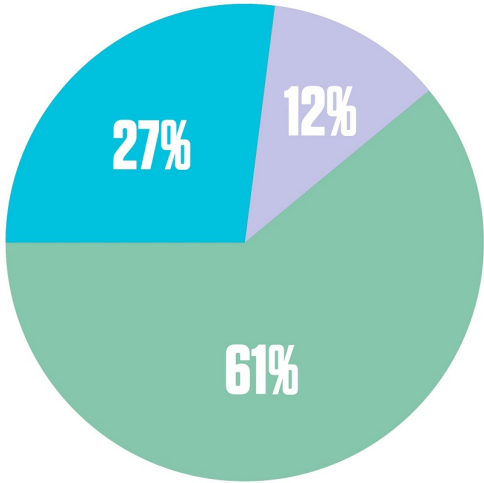


# 2022 ANNUAL REVENUE PERCENTAGE



● Mobile Health ● Transport ● RPM

# 2025 ANNUAL REVENUE PERCENTAGE (TARGETED)



● Mobile Health ● Transport ● RPM

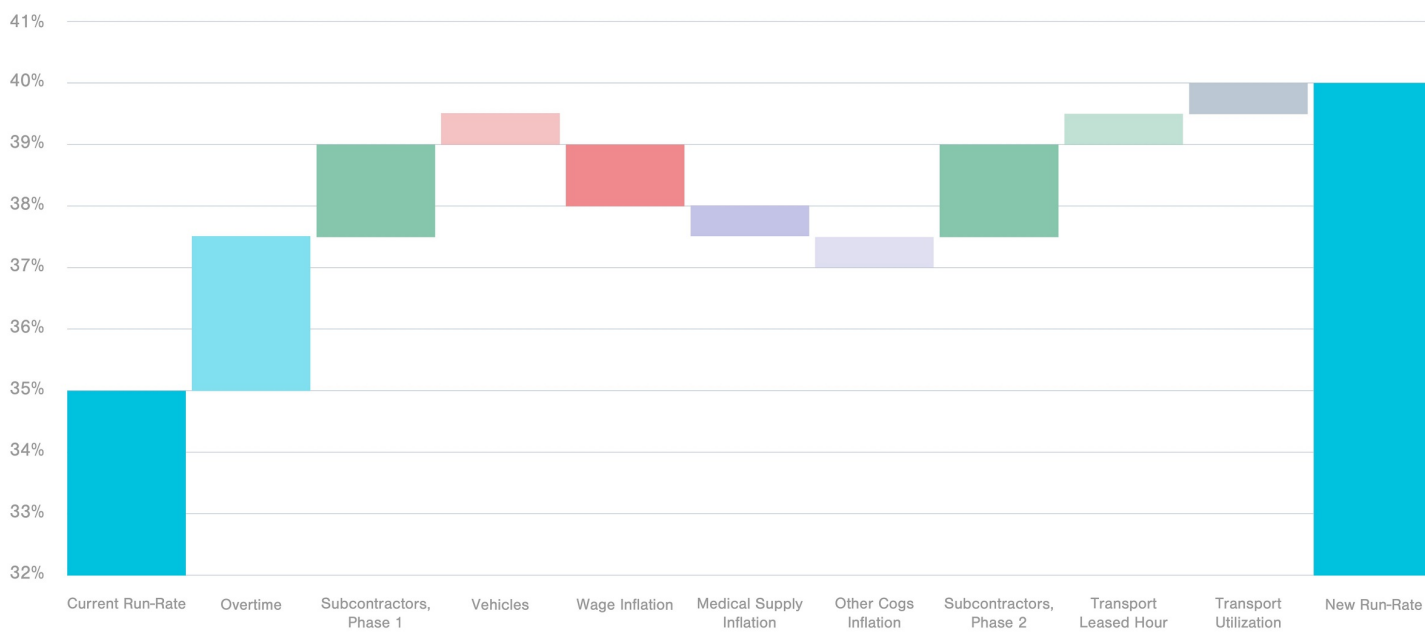


# TARGETED REVENUE BREAKDOWN Q4 2025

	<b>Q4 2025 TARGET</b>	<b>ANNUAL RUN-RATE TARGET</b>
Mobile Health Revenues	\$150,000,000	\$600,000,000
Transport Revenues	\$65,000,000	\$260,000,000
RPM Revenues	\$35,000,000	\$140,000,000
<b>Total Revenues</b>	<b>\$250,000,000</b>	<b>\$1,000,000,000</b>

All forward-looking figures, for revenues, gross margins or other metrics, represent DCGO's internal targets, and are being provided for illustrative purposes only. These are not forecasted numbers or guidance. The revenue figures for Q4 2025 were derived by applying the relevant target growth rates to each primary segment/business line, using internal 2023 budgets as the baseline. For Transport, the assumed annual revenue growth rate was 20%, for Mobile Health, the assumption was 30%, and the RPM revenues were based upon internal targets for the periods in question. The revenue numbers for Q4 are rounded. The "annualized" revenue figures above were derived by multiplying each of the Q4 2025 numbers by 4.

# GROSS MARGIN BRIDGE





# Q&A

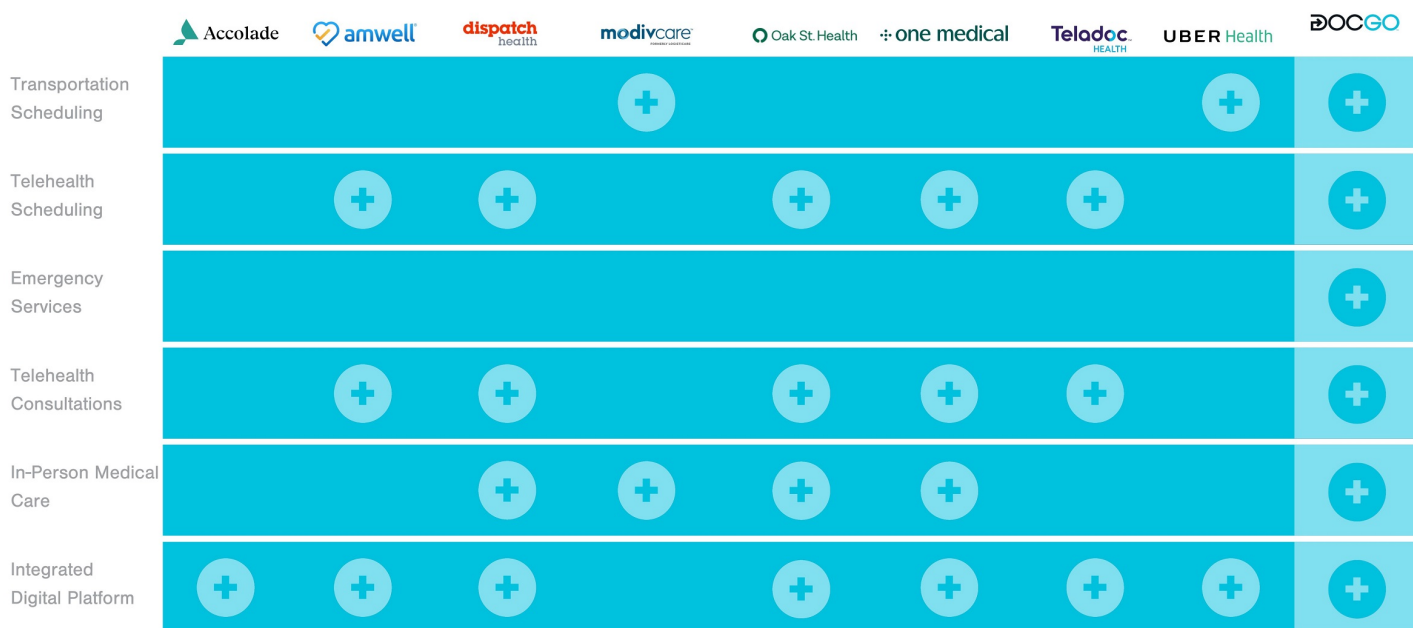
Hear from you



# EXECUTING OUR VISION

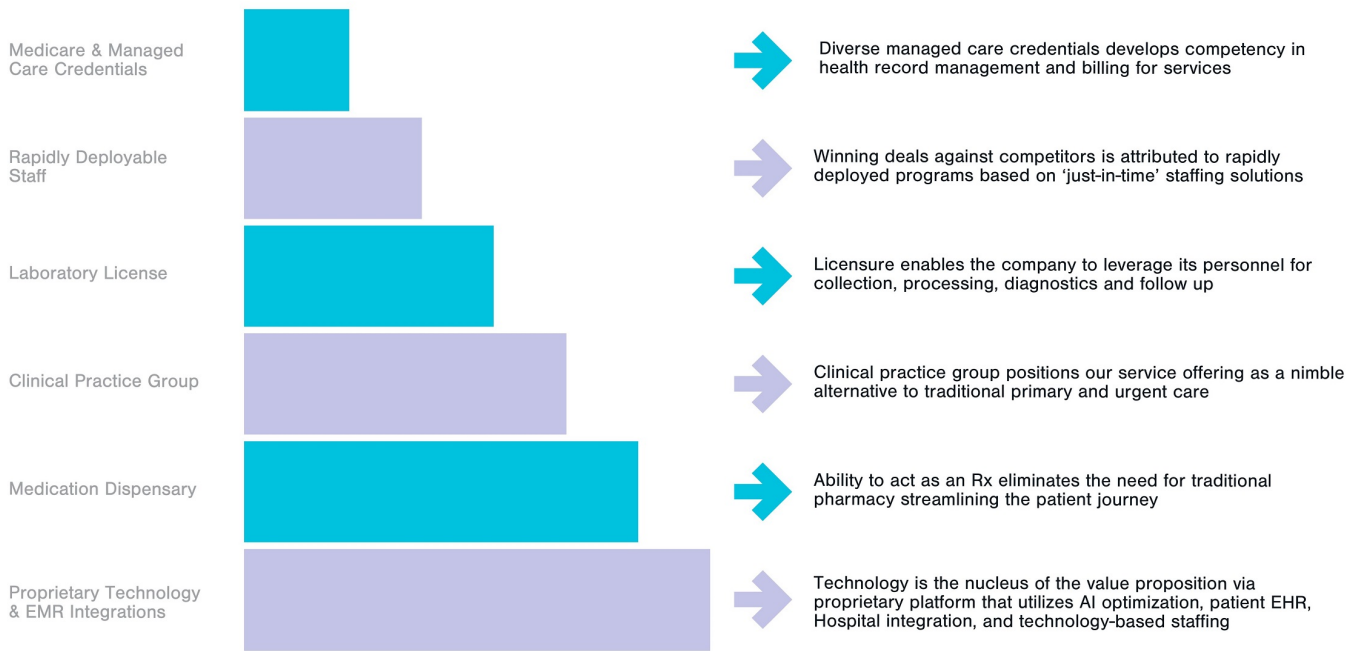
Path forward

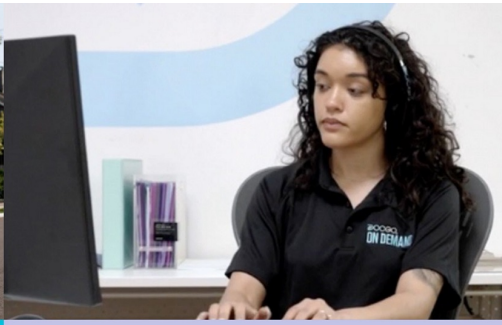
# UNIQUE TECHNOLOGY PLATFORM



Trademarks in this chart are owned by the respective companies. DocGo is not affiliated with any of these companies.

# MAINTAINING OUR COMPETITIVE ADVANTAGE





# MOBILE HEALTH TOTAL ADDRESSABLE MARKET

**\$265 BILLION**

# REMOTE MONITORING TOTAL ADDRESSABLE MARKET

**\$6.4 BILLION**

# MEDICAL TRANSPORT TOTAL ADDRESSABLE MARKET

**\$7-\$13 BILLION**

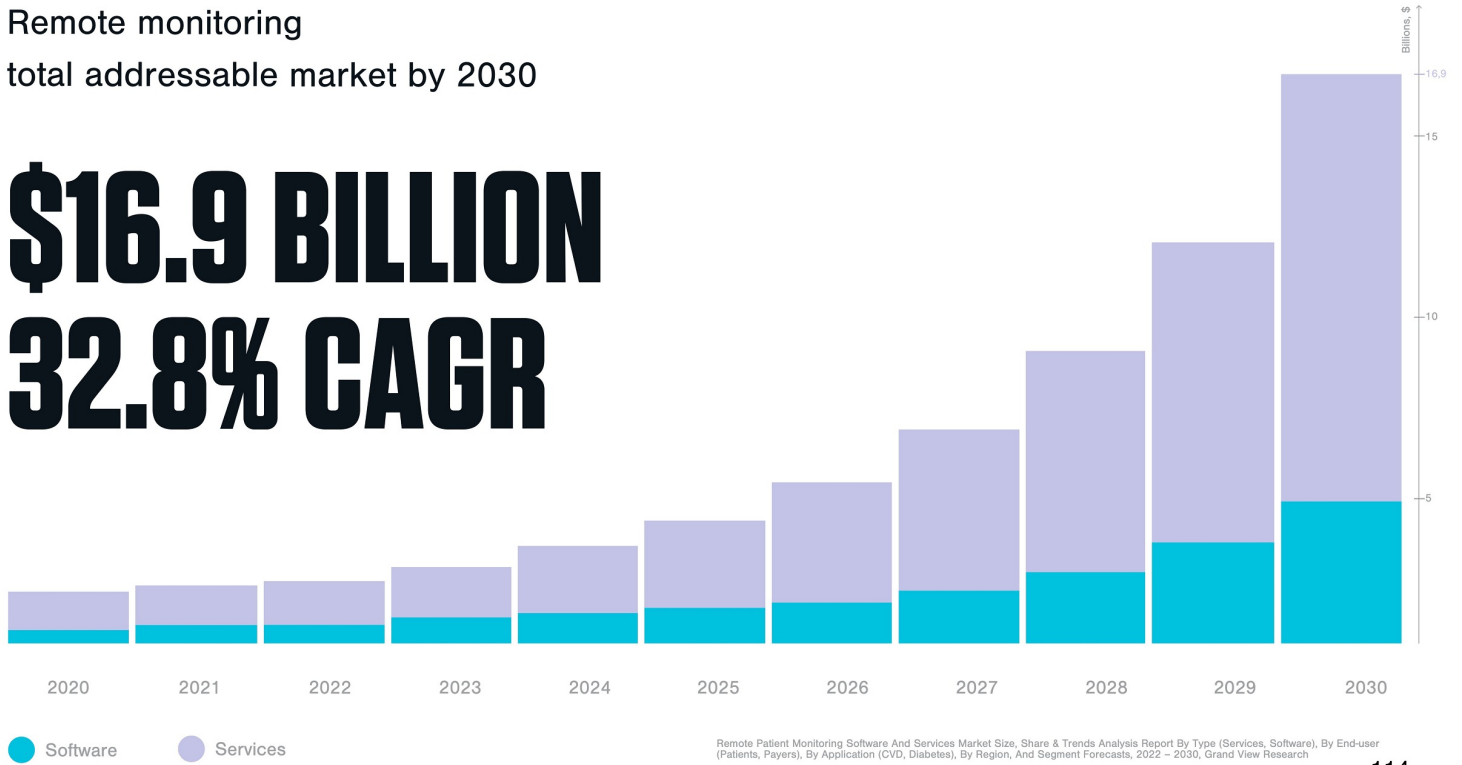
\*US At Home Care. Sources: McKinsey "Telehealth: A quarter trillion-dollar post COVID-19 reality?" (report published 5/29/20), and, McKinsey "From facility to home: How healthcare could shift by 2025" (report published February 2022)

\*Remote Patient Monitoring Software And Services Market Size, Share & Trends Analysis Report By Type (Services, Software), By End-user (Patients, Payers), By Application (CVD, Diabetes), By Region, And Segment Forecasts, 2022 - 2030 - Software & Services Only, North America Only, Grand View Research.

\*Source: US, Ambulance Only. Management estimates.

Remote monitoring  
total addressable market by 2030

**\$16.9 BILLION**  
**32.8% CAGR**



Remote Patient Monitoring Software And Services Market Size, Share & Trends Analysis Report By Type (Services, Software), By End-user (Patients, Payers), By Application (CVD, Diabetes), By Region, And Segment Forecasts, 2022 - 2030, Grand View Research







# DocGo IS LEADING THE PROACTIVE HEALTH CARE REVOLUTION

# APPENDIX

## Quarterly Revenue 2020-2022

(IN \$M)	REPORTED REVENUES	ESTIMATED COVID TESTING REVENUES	REVENUES EXCL. TESTING
Q1 2020	13.4	0	13.4
Q2 2020	22.5	2.9	19.6
Q3 2020	26.9	11.4	15.5
Q4 2020	31.2	16.1	15.1
Q1 2021	49.7	20.4	29.3
Q2 2021	62.2	9.9	52.3
Q3 2021	85.8	30.7	55.1
Q4 2021	121.3	49.0	72.3
Q1 2022	117.9	38.0	79.9
Q2 2022	109.5	28.0	81.5
Q3 2022	104.3	8.0	96.3
Q4 2022	108.8	1.0	107.8
Q1 2023	113.0	1.0	112.0

# APPENDIX

## Net Income Reconciliation to Adjusted EBITDA 2018-2022

(IN \$M)	2018	2019	2020	2021	2022
<b>NET INCOME/(LOSS) GAAPA</b>	<b>(30.9)</b>	<b>(21.2)</b>	<b>(14.8)</b>	<b>19.2</b>	<b>30.7</b>
(+) Net interest expense/(income)	-	0.5	0.2	0.8	(0.8)
(+) Income tax expense/(benefit)	-	-	0.2	0.6	(7.9)
(+) Depreciation & amortization	1.4	4.2	5.5	7.5	10.6
(+) Other expense/(income)	-	(0.1)	(0.3)	(5.2)	(0.2)
<b>EBITDA</b>	<b>(29.5)</b>	<b>(16.6)</b>	<b>(9.2)</b>	<b>22.9</b>	<b>32.4</b>
(+) Non-cash compensation	0.6	0.5	0.7	1.3	8.1
(+) Non-recurring expense	-	-	-	0.9	0.8
<b>ADJUSTED EBITDA</b>	<b>(28.9)</b>	<b>(16.1)</b>	<b>(8.5)</b>	<b>25.1</b>	<b>41.3</b>