



Healthier Every Day, Stronger for Life.

FOR PRIMARY CARE PHYSICIANS

Know what happened between visits.

A HYPERTENSION SUPPORT PROGRAM FOR PRIMARY CARE

You care for them in the clinic. We support them in between.

1 in 2

U.S. adults have high blood pressure (CDC).

3 in 4

of them do not have it under control (CDC).

6%

of U.S. physicians say patient wearable data is integrated into their workflow (AMA, 2026).

YOU SEE THEM A FEW TIMES A YEAR. LIVING WITH HIGH BLOOD PRESSURE HAPPENS EVERY DAY.

What happens between visits shapes what you see in the room, and much of it stays out of view.

SO, WHAT IS NR HEART?

NR Heart is a continuous hypertension support system designed around what happens between healthcare visits.

It connects learning, daily action, home blood pressure tracking, personalized human support and Translate™ into one integrated system that helps patients stay engaged with the clinical plan you put in place.



Illustrative patient experience

YOU SET THE CLINICAL PLAN. NR HEART SUPPORTS WHAT HAPPENS IN BETWEEN.



SEE HOW NR HEART FITS YOUR PRACTICE.

Scan to save my contact, or email me.

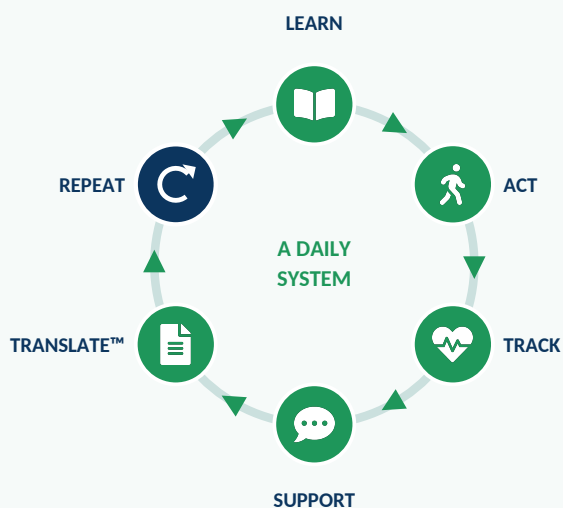
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Sources: CDC (nearly half of U.S. adults; about 1 in 4 with hypertension under control at <130/80); AMA Center for Digital Health and AI and Medscape, 2026 survey of 2,222 physicians, including 720 in the U.S. Statistics are not NR Heart results. NR Heart™ is a trademark of Nutrition Revolution, Inc. (DBA NR Heart). It provides education, coaching and information and does not diagnose or treat medical conditions. Diagnosis and treatment remain with each patient's physician.

Knowing what to do isn't the same as doing it.

Most people with high blood pressure already know healthier choices matter. The challenge is tomorrow morning, and the morning after that.



- 1 **Information** creates understanding.
- 2 **Systems** make action easier.
- 3 **Repetition** helps turn action into habit.

Healthcare can help someone understand what to do. Daily life shapes whether it gets done.

NR Heart puts a system around what happens outside your clinic, helping patients follow the plan you put in place, understand how daily choices affect their blood pressure, and stay engaged between appointments.

In 47 experiments, a medium-to-large change in intention produced only a small-to-medium change in behavior (Webb & Sheeran, 2006). Behavior is shaped by the systems around us.

BENEFITS TO THE PATIENT

- ✓ Understand what affects their blood pressure
- ✓ Daily support between visits
- ✓ Human accountability, not just information
- ✓ Easier home blood pressure tracking
- ✓ Keep their own physician: you

BENEFITS TO YOUR PRACTICE

- ✓ Support between visits to help patients follow the plan you put in place
- ✓ Human coaching and accountability around daily follow-through
- ✓ A concise monthly picture of what happened outside the clinic
- ✓ More informed visits and conversations
- ✓ Potential CCM and RPM reimbursement for eligible patients

YOU SET THE CLINICAL PLAN



NR HEART SUPPORTS DAILY FOLLOW-THROUGH



TRANSLATE™ SHOWS YOU WHAT HAPPENED

WE DON'T GIVE PHYSICIANS MORE DATA. WE GIVE THEM BETTER UNDERSTANDING.



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FOR PRIMARY CARE PHYSICIANS

What NR Heart can mean for your practice.

Support patients between visits. Understand what happened. Keep clinical care where it belongs, with you.

WHAT DOES NR HEART BRING TO MY PRACTICE?



BETTER PATIENT INSIGHT

See what happened between visits.

Translate™ turns home blood pressure, engagement and relevant behavioral information into a concise picture designed to support more informed clinical conversations.



SUPPORT BEYOND THE APPOINTMENT

Extend your plan into everyday life.

Learning, home blood pressure tracking, coaching and accountability help patients stay engaged with the clinical plan between visits.



MORE INFORMED CARE

Bring greater context into the next visit.

Instead of relying only on an office reading and patient recollection, you receive structured information about what has been happening outside the clinic.



POTENTIAL PRACTICE REVENUE

Eligible services may create reimbursement opportunities.

RPM, CCM and other eligible services may provide additional reimbursement, depending on the patient, payer, services, documentation and staffing. Not guaranteed.

YOU REMAIN THE PHYSICIAN. WE EXTEND YOUR REACH BETWEEN VISITS.



YOU SET THE CLINICAL PLAN



NR HEART SUPPORTS THE PATIENT

Learning • Daily action • Home BP • Human support



TRANSLATE™ ORGANIZES WHAT HAPPENED



YOU RECEIVE A CONCISE MONTHLY PICTURE

THE EVIDENCE BEHIND THE VALUE

WORKFLOW

Physicians want useful information without added burden: 86% review patient wearable data, but only 6% say it is integrated into their workflow.†

PRACTICE ECONOMICS

Primary care practices that adopted RPM saw about 20% higher Medicare revenue than matched practices. External evidence, not an NR Heart result.‡

QUALITY

Controlling High Blood Pressure is a high-priority 2026 MIPS measure. Readings from connected home devices can support applicable reporting; specifications apply.

†AMA Center for Digital Health and AI and Medscape, 2026 (720 U.S. physicians); consumer wearable data. ‡Health Affairs (2025): 754 primary care practices that began billing RPM in 2019 to 2021, through 2023, versus matched practices; RPM in general, required investment, not guaranteed. MIPS: CMS 2026 quality measure specifications. None of this is an NR Heart result.

MY ROI™ | UNDERSTAND THE ECONOMICS FOR YOUR PRACTICE

Your patients

+

Payer mix

+

Eligible services

+

Practice capacity

+

NR Heart program cost

Potential reimbursement

Practice workload

Quality considerations

Practice economics

Your practice. Your numbers. Your definition of value.

Modeled estimates, not guaranteed financial outcomes. Reimbursement depends on payer, patient eligibility, services, documentation, staffing and other applicable requirements, which change.



CELLULAR BLOOD PRESSURE OPTION

Automatic transmission without home Wi-Fi or smartphone pairing.



PHONE-SUPPORTED OPTION

A lower-technology pathway for patients who prefer or need it.



THEIR OWN PHYSICIAN

Diagnosis and treatment stay with you.



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How NR Heart fits your practice.

You set the plan. NR Heart supports the patient. You see what happened.

HOW IT FITS INTO YOUR WORKFLOW.



YOU IDENTIFY

Eligible patients with hypertension.



WE ONBOARD

Invite, educate and set up each patient.



WE SUPPORT

Learning, home BP tracking and coaching.



WE TRANSLATE™

What happened becomes a clear picture.



YOU REVIEW

A concise monthly picture for your visit.

WHAT MAKES NR HEART DIFFERENT

	NR Heart	Typical RPM services	Digital hypertension programs	Remote clinical care programs
Hypertension-specific	●	●	●	●
Human coaching and accountability	●	●	●	●
Your physician remains in control	●	●	●	●
Physician-ready monthly picture (Translate™)	●	●	●	●
Lower-tech option: no smartphone pairing or home Wi-Fi	●	●	●	●
Sold directly to a primary care practice	●	●	○	●

● Core to the model ● Varies by program ○ Limited or not typical

General comparison of delivery models from public information as of September 2026 (CMS RPM rules; company websites). Individual programs differ. Not an assessment of any specific company.

The difference is not one feature. It is how the pieces work together.

Learn

Act

Track

Support

Translate™

Repeat

QUESTIONS PHYSICIANS ASK

Does it replace my role?

No. You set the clinical plan and remain responsible for diagnosis and treatment.

What does my team have to do?

Identify appropriate patients and review the monthly picture. NR Heart handles onboarding, support and reporting.

How does reimbursement work?

Potential reimbursement depends on payer, eligibility, services, documentation and staffing requirements.

How does it connect to my records?

Practice Better's API supports writing structured blood pressure readings into a patient's chart (in beta). Connecting to your EHR depends on your practice environment, and we would scope it with you.



Patient data: built on HIPAA-compliant cloud infrastructure, with a business associate agreement in place for the care platform. Malpractice questions: we will give your carrier what it needs to review.



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